

HCPC approval process report

Education provider	De Montfort University
Name of programme(s)	BSc (Hons) Diagnostic Radiography, Full time
Approval visit date	12-13 March 2019
Case reference	CAS-13472-N0K5B0

Contents

Section 1: Our regulatory approach.....	2
Section 2: Programme details	3
Section 3: Requirements to commence assessment	3
Section 4: Outcome from first review	4
Section 5: Visitors’ recommendation.....	13
Section 6: Future considerations for the programme(s).....	14

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.

Through undertaking this process, we have noted areas that may need to be considered as part of future HCPC assessment processes in section 6 of this report.

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

Clare Bates	Lay
Linda Mutema	Radiographer - Diagnostic radiographer
Shaaron Pratt	Radiographer - Diagnostic radiographer
Patrick Armsby	HCPC executive
Jamie Hunt	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.

Debbie Le Play	Independent chair (supplied by the education provider)	De Montfort University – Associate Professor (Quality)
Sophia Welton	Secretary (supplied by the education provider)	De Montfort University – Quality Administrator

Pauline Reeves	External Advisor	Sheffield Hallam University – Associate Lecturer
Lisa Wakefield	Non-Faculty Representative	De Montfort University – Associate Professor, Accounting & Finance
Suzanne Nelson	DAQ Representative	De Montfort University – Senior Officer (Management Information)
Marie Letzgun	Library Representative	De Montfort University – Senior Assistant Librarian
Stuart Mackay	CoR Nominated Assessor	College of Radiographers (CoR)
Jaquie Vallis	CoR Professional Officer	College of Radiographers (CoR)

Section 2: Programme details

Programme name	BSc (Hons) Diagnostic Radiography
Mode of study	FT (Full time)
Profession	Radiographer
Modality	Diagnostic radiographer
First intake	01 September 2019
Maximum learner cohort	8
Intakes per year	1
Assessment reference	APP01987

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 maximum learner cohort number was changed from the visit request form while the panel were on the visit.

Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we require 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.

Required documentation	Submitted	Reason(s) for non-submission
Programme specification	Yes	
Module descriptor(s)	Yes	
Handbook for learners	Yes	

Handbook for practice based learning	Yes	
Completed education standards mapping document	Yes	
Completed proficiency standards mapping document	Yes	
Curriculum vitae for relevant staff	Yes	
External examiners' reports for the last two years, if applicable	Not Required	As this is a new programme, the education was unable to provide external examiner reports for the last two years.

We also expect to meet the following groups at approval visits:

Group	Met	Comments
Learners	Yes	This is a new programme so we met learners from the education provider's BSc Audiology programme, which is not HCPC approved
Senior staff	Yes	
Practice education providers	Yes	
Service users and carers (and / or their representatives)	Yes	
Programme team	Yes	
Facilities and resources	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 08 May 2019.

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

Condition: The education provider must demonstrate how the admissions procedures clearly outline to applicants what the health requirements are.

Reason: The education provider had indicated in the documentary submission that applicants would be subject to an occupational health check for enrolment onto the programme. From this information, the visitors were not clear that this specifically included immunisation for learners, as immunisations were not specifically mentioned as a requirement to start the programme. At the visit, the programme team confirmed that this occupational health check was to include immunisation for learners entering onto the programme. Therefore, the education provider will need to ensure this information is clear and explicit for applicants at the point of applying in order to make the judgement that the standard is met.

3.1 The programme must be sustainable and fit for purpose.

Condition: The education provider must demonstrate that there are plans in place to ensure the ongoing sustainability for the programme.

Reason: Prior to the visit, the documentary submission indicated that the programme would run with a cohort of 15 learners per year, and each year, the cohort would increase by 5 learners to run with 30 learners per cohort from 2022. However, at the visit following discussions about resources and placement availability the education provider confirmed they were seeking approval for a cohort of 8 learners per year. As the learner numbers were changed during the visit, the documentation provided regarding resources, teaching staff and placement provision is now based on a different sized cohort. In particular, the programme team were in the process of hiring new members of the teaching team to account for the original cohort size. The visitors were unsure about how the reduction in learner numbers would affect these appointments. Similarly, the visitors were shown new laboratory facilities in the process of being built with the intention of a cohort of 30 learners and now are unclear whether a reduction in learner numbers will affect the implementation of this resource. The visitors are unsure of the sustainability of the programme as the change of numbers could affect support from senior management and the commitments previously made to provide adequate resources for the programme. The education provider must demonstrate there is a future for the programme with the new number of learners that is currently secure and is supported by all stakeholders involved.

3.2 The programme must be effectively managed.

Condition: The education provider must demonstrate how the day-to-day management of the programme and the lines of responsibility of the teaching team, ensures that the programme is managed effectively

Reason: Prior to the visit, the visitors were provided with curriculum vitae for all staff responsible for the programme and information about the Programme Assessment Board (PAB) and Programme Management Board (PMB). However, from the information provided, it was not clear which members of the programme team would be responsible for which aspects of programme management. At the visit, the visitors were told that plans to recruit additional staff members have been agreed. In discussions at the visit, the visitors were still unclear how the programme is effectively managed even with the additional clinical hourly staff. As such, the visitors require further information regarding the structure for the day-to-day management of the programme and the lines

of responsibility of the teaching team. In this way, the visitors can determine how the management of the programme will work in practice, and how learners will be supported through the programme by members of the programme team.

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 they 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.

Reason: Prior to the visit the visitors were provided with the curriculum vitae of the programme lead to evidence this standard. However, this does not confirm how the education provider identifies a suitable person and, if it becomes necessary, a suitable replacement. At the visit, the senior team confirmed to the visitors that there is a university procedure for employing a programme lead that would lay out the criteria for the role. However, the visitors did not have sight of this procedure and so could not determine how the education provider appoints or approves a suitable person and, if it becomes necessary, a suitable replacement. This is linked to SET 3.2 in that visitors were unsure of where overall professional responsibility lay within the staff team. As such the visitors require the education provider to demonstrate how they will ensure that the person with overall professional responsibility for the programme is appropriately qualified and experienced, 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 demonstrate how they will ensure that sufficient practice-based learning is available for all learners to meet their learning needs.

Reason: Prior to the visit, the documentary submission indicated that the programme would run with a cohort of 15 learners per year, and each year, the cohort would increase by 5 learners to run with 30 learners per cohort from 2022. However, at the visit following discussions about resources and placement availability the education provider confirmed they were seeking approval for a cohort of 8 learners per year. As the learner numbers were adapted during the visit, the documentation provided by the education provider is now not accurate. The 8 placements provided at University Hospitals of Leicester (UHL) are being moved from a diagnostic radiography programme at another university to De Montfort University. From the documentation, there was an agreement that all placements would move to DMU in the future, in line with the increasing learner numbers noted through the documentation. As this will now not happen, from the documentation and discussions, the visitors could not be certain about the support from UHL to provide the lower number of placements required. Therefore the visitors were unclear about the sustainability of placement availability for the first and future cohorts, as they have not observed the current, formal partnership agreement with UHL that reflects the new requirements for placement numbers. The

education provider must demonstrate that their partner organisations are committed to ensure the availability of practice-based learning for this cohort and future cohorts.

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 how the learning outcomes, with any changes made as a result of this process, ensure that those who successfully complete the programme meet the standards of proficiency (SOPs) for diagnostic radiographers.

Reason: At the visit the education provider suggested there could be changes to the curriculum and learning outcomes in response to the requirements of the internal validation panel and professional body panel. Although the visitors judged that the learning outcomes as were in the documentation provided would deliver the SOPs, it is essential that we ensure that the SOPs will still be delivered in light of any changes. Therefore, the visitors would need to assess any changes to the learning outcomes to ensure learners meet the SOPs for diagnostic radiographers.

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 evidence how they will ensure that learners understand and are able to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics throughout the programme.

Reason: In the documentation, the visitors were guided to view the practice documentation to show how learners would incorporate the expectations of professional behaviour, within their practice. The visitors were unsure how incorporating these expectations only within practice was conducive to learners understanding the expectations of professional behaviour. In terms of public safety, it is important that learners are able to behave in a professional manner whilst on placement, and thus the visitors were not certain learners would have an appropriate level of understanding to apply the expectations of professional behaviour on placement. In the senior team meeting it was confirmed that in DRAD1005: Introduction to the Role of the Healthcare Professional learners would be introduced to the expectations of professional behaviour, including the standards of conduct, performance and ethics in the academic setting to ensure that they were understood by learners. While the visitors could see that module 1005 covered “healthcare professionalism” and “codes of practice and conduct for different healthcare professionals”, the learning outcomes made no mention of the HCPC standards of conduct, performance and ethics. Additionally, it was not made clear to the visitors that this learning would be present throughout the programme. Visitors would need to see that learning outcomes in the academic setting as well as practice-based learning ensure learners understand and are able to meet the expectations associated with being a regulated professional in advance of being on placement, and that these expectations are continually addressed throughout the programme.

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 in the documentary submission, the education provider highlighted module content and highlighted the placement module as a particular area that theory and practice were integrated. However, the visitors were unclear how academic teaching was being carried forward onto placement and applied in the relevant areas. At the visit the visitors queried the content of the placements and were told that the education provider had not carried out audits of the placements themselves. The visitors were told in the practice educators meeting that the practice-based teaching is based on the, the UHL “practice curriculum” to be covered by learners in placement. The visitors were unclear how the teaching provided by the education provider was being carried forward by learners and applied in the practice setting as the practice educators suggested it was their “practice curriculum” that would be delivered, and not that of the education provider. 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 support each other effectively.

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 identify the parts of the programme that are mandatory and demonstrate how they intend to communicate this to learners. Furthermore, they must clarify the attendance monitoring processes in place.

Reason: In the documentary submission prior to the visit, the education provider indicated that “all parts of the programme are compulsory” and that learners were made aware of this. To ensure the standard was being met the visitors enquired about the monitoring processes in place for the programme and how the team expect to deal with absences. The programme team indicated that monitoring was conducted at four census points throughout the year with a minimum attendance level set at 25 per cent before a pastoral letter is issued to the learner. The visitors observed this was at odds with the documentation and could result in learners potentially not attending sessions that prepared them for placement or other important areas. While the visitors cannot prescribe a minimum level of attendance, the education provider must justify the level of required attendance to ensure that learners are taking part in essential parts of the programme that enable them to meet the learning outcomes and understand the expectations of professional behaviour.

Furthermore, the visitors observed there was an inconsistency with attendance policy surrounding placements. Visitors were told in the practice educator meeting that learners would be expected to make up any time missed on placement and in the programme team meeting it was indicated that it would not be a necessity to make up time if clinical competencies were met. Visitors were unsure of which policy was being implemented for the programme so could not be sure that learners would be aware of the compulsory amount of practice-based learning. Additionally, the visitors would need to ensure that the policy would be applied by partner organisations to ensure consistency for learners and manage how learning is carried out on placement.

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 how they will ensure that all learners have access to practice-based learning of appropriate structure, duration and range to support the achievement of the learning outcomes.

Reason: To evidence this standard in the documentary submission, the education provider highlighted the placement module content to show how learners would achieve the learning outcomes and standards of proficiency (SOPs) for diagnostic radiographers. At the visit the visitors queried the content of the placements and were told that the education provider had not carried out audits of the placements themselves. The visitors understood that the education provider was basing their placement teaching on the placement provider's previous partnership, as the practice educators indicated they would be continuing with their teaching as required by another university. The visitors were unclear how the education provider was ensuring that learners were covering the relevant topics while on placement in order to achieve the learning outcomes and the standards of proficiency. The education provider must demonstrate they are determining what is covered by learners in practice-based learning, to ensure that learning outcomes and the SOPs are being achieved. Additionally, on the visit the programme team indicated that learning outcomes for some modules could be amended. Visitors will need to judge if these amendments are related and supported by practice-based learning.

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

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: In the documentation the visitors were able to view two placement audits carried out in May 2018. The programme team confirmed at the visit that these audits were not carried out by De Montfort. This standard requires that the education provider has overall responsibility for ensuring the quality of practice-based learning. The visitors understood that the education provider had seen and used audits carried out by another university, but were not shown the education provider's own plans, policies or procedures for ensuring the equality of practice-based learning. The education provider must show it has overall responsibility and a thorough and effective system for approving and ensuring the quality of practice-based learning.

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 how they will ensure that all practice-based learning will provide a safe and supportive environment for learners and service users

Reason: In the documentation the visitors were able to view two placement audits carried out in May 2018. The programme team confirmed at the visit that these audits were not carried out by De Montfort. This standard requires that the education provider must have overall responsibility for ensuring that the practice environment is safe and supportive for learners and service users. The visitors understood that the education provider had seen and used audits carried out by another university, but they were not shown the education provider's own plans, policies or procedures for ensuring the

practice-based learning environment is safe and supportive. The education provider must demonstrate how they ensure that all practice based learning is carried out in a safe and supportive environment for learners and service users.

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 that there are an adequate number of appropriately qualified and experience staff involved in practice-based learning.

Reason: The visitors were shown a comment in Appendix 4 and the education provider indicated this standard was being met by it being “strongly related to the clinical capacity of each particular placement site”. In the documentation the visitors were able to view two placement audits carried out in May 2018. The programme team confirmed at the visit that these audits were not carried out by De Montfort. It was not clear to the visitors from looking at this information how the education provider will ensure adequate numbers of suitable staff in practice-based learning settings. While the visitors understood that the education provider will be carrying out audits of the placement sites, the visitors would need to be sure that this is carried out by the education provider prior to any learners going on placement The education provider must demonstrate how they are ensuring that all learners who go on placement will be appropriately supported by an adequate number of appropriately qualified and experienced staff.

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 ensure that the practice educators have the relevant knowledge, skills and experience to support safe and effective learning in non-ambulance practice-based learning.

Reason: Prior to the visit the visitors were guided to the “Practice Assessment Document” and “Practice Placement guide for Radiography students & Student Liaison Radiographers” by the education provider to evidence this standard. The visitors were unclear about how these documents made sure that practice educators are suitable and able to support and develop learners in a safe and effective way. In the documentation the visitors were able to view two placement audits carried out in May 2018. The programme team confirmed at the visit that these audits were not carried out by De Montfort. It was not clear to the visitors from looking at this information how the education provider will make sure practice educators must have relevant knowledge, skills and experience to support safe and effective learning and, unless other arrangements are appropriate, are on the relevant part of the Register. While the visitors understood that the education provider will be carrying out audits of the placement sites, the visitors would need to be sure that this is carried out by the education provider prior to any learners going on placement. The education provider must show how it is ensuring that practice educators are suitable and able to support and develop learners in a safe and effective way.

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 demonstrating how they ensure practice educators undertake regular training appropriate to the programme.

Reason: Prior to the visit the visitors were guided to the “Practice Assessment Document” and “Practice Placement guide for Radiography students & Student Liaison Radiographers” by the education provider to evidence this standard. The visitors were told in the programme team meeting that the education provider intends to produce and provide training for practice educators in blocks in the placement setting, however the visitors were not shown the content of this training. Furthermore, the practice educators confirmed that they were unaware of the training they would be required to complete in partnership with the education provider. The visitors were unclear about how the documents made sure that practice educators were undertaking regular training. The education provider must show the contents, structure and frequency of this training in order for the visitors to understand that practice educators are appropriately prepared to support learning and assess learners effectively. They must also show how this training will be implemented and that practice educators are aware of the training requirements for the partnership with the education provider.

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 ensure that they clearly define where the management responsibility sits for ensuring learners and practice educators have the information they need in a timely manner in order to be prepared for practice-based learning.

Reason: The education provider indicated in the documentation that information surrounding placements would be provided a minimum of 6 weeks before clinical placement commenced. The visitors were told the information would be delivered in a timely manner, however as with SET 3.2 the visitors were unsure of the overall management of the programme including lines of communication and responsibility for various aspects of the programme. As the visitors will need confirmation of the roles and responsibilities of all members of staff, they will need to understand who will be the point of contact for placement related issues. The education provider must show how they will ensure that there will be clear, timely communication around practice based learning to ensure that all parties understand their roles and what is expected.

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 they will ensure that the assessment strategy and design ensures that those who successfully complete the programme have met the standards of proficiency for diagnostic radiographers.

Reason: At the visit the education provider provided updates to the assessments for some modules. Furthermore, the programme team discussed updating the learning outcomes for some of the modules as a result of comments from the internal panel and professional body panel. With the changes tabled, plus their understanding that the education provider may be making further changes to assessments, the visitors were

unable to make a judgement about whether the assessment strategy would ensure learners demonstrate a threshold level of knowledge, skills and understanding to practice their profession safely and effectively. Therefore, the visitors require the education provider to demonstrate that updated assessments will ensure that those who successfully complete the programme meet the standards of proficiency for diagnostic radiographers.

6.2 Assessment throughout the programme must ensure that learners demonstrate they are able to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics.

Condition: The education provider must ensure that assessment throughout the programme, particularly in the academic setting, ensures learners demonstrate they are able to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics.

Reason: Prior to the visit the visitors were able to observe the reflective essay assessment in the placement module that “Titles are set on subjects relating to: The HCPC Standards of Conduct, Performance and Ethics”. However, the visitors were unable to see the specific titles of these reflective essays so could not confirm that all the standards of conduct, performance and ethics were being assessed via this method. Furthermore, the visitors observed that the standards were only being assessed after learners had been on placement, rather than in an academic setting throughout the programme. At the visit, visitors were shown that the assessment in some modules had been changed. It was also discussed with the programme team that learning outcomes were likely to change as a result of comments from the internal panel and professional body panel. The visitors would need to ensure that, alongside SET 4.2, the standards of conduct, performance and ethics are being assessed throughout the programme in both the theory and practice-based parts of the programme to ensure learners are able to demonstrate they are able to meet the expectations of professional behaviour. The education provider must demonstrate that assessment of the expectations of professional behaviour are being carried out at appropriate points through the programme. They must also demonstrate any new learning outcomes or assessments implemented appropriately cover the standards of conduct performance and ethics.

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

Condition: The education provider must show how the assessment strategy provides an objective, fair and reliable measure of learners’ progression and achievement.

Reason: At the visit, visitors were shown that the assessment in some modules had been changed. It was also discussed with the programme team that learning outcomes were likely to change as a result of comments from the internal panel and professional body panel. With the changes tabled, plus their understanding that the education provider may be making further changes to assessment, the visitors were unable to make a judgement about whether the revised assessment strategy would be able to assess the learning outcomes, and deliver a valid and accurate picture of a learner’s progression and achievement. The visitors will need to consider changes to the assessment strategy to ensure that the assessments provide an objective, fair and reliable measure of learners’ progression and achievement.

6.4 Assessment policies must clearly specify requirements for progression and achievement within the programme.

Condition: The education provider must show how the assessment policies specify the requirements for the progression and achievement relating to 'self-triggered' exams in the practice setting.

Reason: The programme team suggested that attendance at practice-based learning would be based on learners' competencies in the area which would be tested by a "self-triggered exam". The visitors were unclear about how this policy would be applied, and what would happen if learners did not self-trigger this exam. It was also unclear to the visitors how information about this policy would be clearly communicated to the learners. Therefore, the education provider must ensure that their policy about the "self-triggered exam" is clear, and fits within the broader requirements for progression and achievement in the programme.

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 revised assessment methods are appropriate to, and effective at, measuring the learning outcomes.

Reason: At the visit, visitors were shown that the assessment in some modules had been changed. It was also discussed with the programme team that learning outcomes were likely to change as a result of comments from the internal panel and professional body panel. With the changes tabled, plus their understanding that the education provider may be making further changes to assessment, the visitors were unable to make a judgement about whether the revised assessment strategy would ensure that the methods of assessment would be appropriate to measure the learning outcomes, and in turn the standards of proficiency. The visitors will need to consider changes to the assessment strategy to ensure that the assessment methods used would ensure that learners who complete the programme can practise safely and effectively in their profession.

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 04 July 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](#).

Section 6: Future considerations for the programme(s)

We include this section to note areas that may need to be considered as part of future HCPC assessment processes. Education providers do not need to respond to this section at this time, but should consider whether to engage with the HCPC around these areas in the future.

The visitors were confident that the SETs were met at a threshold level but noted in their assessment that the staffing numbers are low, which could be an issue should there be an increase in cohort size or long-term staff absences. There could be potential impact for how the programme meets the SETs in the future. Therefore, visitors should consider adequacy of staff in any future assessment.