
Approval process report

Oxford Brookes University, Dietetics, 2023-24

Executive Summary

This is a report of the process to approve the Dietetics programme at Oxford Brookes University. This report captures the process we have undertaken to date to assess the institution and programme against our standards, to ensure those who complete the proposed programme are fit to practice.

We have:

- Reviewed the institution against our institution level standards and found our standards are met in this area.
- Reviewed the programme(s) against our programme level standards and found our standards are met in this area following exploration of key themes through quality activities.
- Recommended all standards are met, and that the programme(s) should be approved.

Through this assessment, we have noted:

- The programme meets all the relevant HCPC education standards and therefore should be approved.

Previous consideration	Not applicable. This is a new programme the education provider is seeking approval for.
Decision	The Education and Training Committee (Panel) is asked to decide: <ul style="list-style-type: none">• whether the programme is approved
Next steps	Outline next steps / future case work with the provider: <ul style="list-style-type: none">• The provider's next performance review will be in the 2026-27 academic year.

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Section 1: About this assessment

About us

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.

This is a report on the approval process undertaken by the HCPC to ensure that the programme detailed in this report meet our education standards. The report details the process itself, evidence considered, outcomes and recommendations made regarding the programme approval.

Our standards

We approve education providers and programmes that meet our education standards. Individuals who complete approved programmes will meet proficiency standards, which 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.

Our regulatory approach

We are flexible, intelligent and data-led in our quality assurance of programme clusters and programmes. Through our processes, we:

- enable bespoke, proportionate and effective regulatory engagement with education providers;
- use data and intelligence to enable effective risk-based decision making; and
- engage at the organisation, profession and programme levels to enhance our ability to assess the impact of risks and issues on HCPC standards.

Providers and programmes are [approved on an open-ended basis](#), subject to ongoing monitoring. Programmes we have approved are listed [on our website](#).

The approval process

Institutions and programmes must be approved by us before they can run. The approval process is formed of two stages:

- Stage 1 – we take assurance that institution level standards are met by the institution delivering the proposed programme(s)

- Stage 2 – we assess to be assured that programme level standards are met by each proposed programme

Through the approval process, we take assurance in a bespoke and flexible way, meaning that we will assess whether providers and programmes meet standards based on what we see, rather than by a one size fits all approach. Our standards are split along institution and programme level lines, and we take assurance at the provider level wherever possible.

This report focuses on the assessment of the self-reflective portfolio and evidence.

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 design quality assurance assessments, and assess evidence and information relevant to the assessment. Visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make the 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 takes decisions through different levels depending on the routines and impact of the decision, and where appropriate meets in public. Their decisions are available to view [on our website](#).

The assessment panel for this review

We appointed the following panel members to support this review:

Sarah Illingworth	Lead visitor, Dietitian
Susan Lennie	Lead visitor, Dietitian
Saranjit Binning	Education Quality Officer

Section 2: Institution-level assessment

The education provider context

The education provider is situated in the South East of England and currently delivers seven HCPC-approved programmes across three professions, which includes the Independent Prescribing/Supplementary Prescribing programme. It is a Higher Education provider and has been running HCPC approved programmes since 1992.

They engaged with the performance review process in 2022-23 and achieved a monitoring period of five years. There are no outstanding issues from the previous processes and the education provider does not have any ongoing approval or focused review cases.

Practice areas delivered by the education provider

The provider is approved to deliver training in the following professional areas. A detailed list of approved programme awards can be found in [Appendix 1](#) of this report.

	Practice area	Delivery level		Approved since
	Occupational therapy	<input checked="" type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	1992
	Paramedic	<input checked="" type="checkbox"/> Undergraduate	<input type="checkbox"/> Postgraduate	2016
	Physiotherapist	<input checked="" type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	2000
Post-registration	Independent Prescribing / Supplementary prescribing			2020

Institution performance data

Data is embedded into how we understand performance and risk. We capture data points in relation to provider performance, from a range of sources. We compare provider data points to benchmarks, and use this information to inform our risk based decisions about the approval and ongoing approval of institutions and programmes.

This data is for existing provision at the institution, and does not include the proposed programme(s).

Data Point	Benchmark	Value	Date	Commentary
Total intended learner numbers compared to total enrolment numbers	507	532	2022	The benchmark figure is data we have captured from previous interactions with the education provider, such as through initial programme approval, and / or through previous performance review assessments. Resources available for the benchmark number of learners was assessed and accepted through these processes. The

				value figure is the benchmark figure, plus the number of learners the education provider is proposing through the new provision.
Learners – Aggregation of percentage not continuing	3%	3%	2021-22	<p>This data was sourced from a data delivery. This means the data is a bespoke Higher Education Statistics Agency (HESA) data return, filtered bases on HCPC-related subjects.</p> <p>The data point is equal to the benchmark, which suggests the provider’s performance in this area is in line with sector norms.</p> <p>When compared to the previous year’s data point, the education provider’s performance has dropped by 1%.</p> <p>We did not explore this data point through this assessment because there was no impact on SETs considered.</p>
Graduates – Aggregation of percentage in employment / further study	94%	95%	2019-20	<p>This data was sourced from a data delivery. This means the data is a bespoke HESA data return, filtered bases on HCPC-related subjects.</p> <p>The data point is above the benchmark, which suggests the education provider is performing above sector norms.</p> <p>When compared to the previous year’s data point, the education provider’s</p>

				performance has improved by 1%. We did not explore this data point through this assessment because there was no impact on SETs considered.
Learner positivity score	76.5%	81.1%	2023	This National Student Survey (NSS) positivity score data was sourced at the subject level. This means the data is for HCPC-related subjects. The data point is above the benchmark, which suggests the provider is performing above sector norms.
HCPC performance review cycle length	N/A	N/A	2019-20	Through the performance review process the education provider was given a five year monitoring period.

The route through stage 1

Institutions which run HCPC-approved provision have previously demonstrated that they meet institution-level standards. When an existing institution proposes a new programme, we undertake an internal review of whether we need to undertake a full partner-led review against our institution level standards, or whether we can take assurance that the proposed programme(s) aligns with existing provision.

As part of the request to approve the proposed programme(s), the education provider supplied information to show alignment in the following areas.

Admissions

Findings on alignment with existing provision:

- **Information for applicants –**
 - Information relating to all programmes is available on the education providers website, which includes contact details for relevant staff. Applicants are also offered information via open days and webinars. In addition to this there is a virtual tour available online where applicants can view the facilities, including the library and accommodation available.
 - Section 5 of the University Regulations to Study outlines the institution wide policies for applicants applying for a programme. Information

relating to specific entry requirements is available on the course specific pages.

- These policies are institution-wide and will apply to the proposed programme.
- **Assessing English language, character, and health –**
 - The education provider's English language requirement policy is available online and provides details of the level required.
 - For all HCPC approved programmes, applicants are required to complete a Disclosure and Barring Service (DBS) check and go through the fitness to practice screening process prior to starting the programme.
 - In addition to this there is a fitness to practice policy, which applies to all learners who are required to complete a placement. This policy ensures the learners good health, character and behaviour prior to them starting their placement.
 - These policies are institution-wide and will apply to the proposed programme.
- **Prior learning and experience (AP(E)L) –**
 - The education provider has processes in place to assess applicants' prior learning and experience and details of this are outlined in the University Regulations for Study under the accreditation of prior learning policy.
 - All applications for recognition of prior learning are reviewed and approved by the relevant academic staff and the admissions team.
 - These processes are institution-wide and will apply to the proposed programme.
- **Equality, diversity and inclusion –**
 - The education provider's Equality, Diversity and Inclusion Policy demonstrates they are committed to equality, diversity and inclusion and is embedded within the University Regulations.
 - This policy is managed and overseen by the Equality, Diversity, Inclusion Advisory Group who support the development of strategies and objectives in relation to equality, diversity and inclusion. All programmes are required to adhere to it.
 - These policies are institution-wide and will apply to the proposed programme.

Non-alignment requiring further assessment: None.

Management and governance

Findings on alignment with existing provision:

- **Ability to deliver provision to expected threshold level of entry to the Register¹ –**

¹ This is focused on ensuring providers are able to deliver qualifications at or equivalent to the level(s) in SET 1, as required for the profession(s) proposed

- The processes and procedures outlined in the Quality and Standards Handbook ensure the delivery of the provision to the expected threshold level of entry to the Register for all programmes.
- External examiners are appointed for all programmes and are involved with all assessments to confirm standards of achievement and provide an external overview of academic and professional standards.
- These policies are institution-wide and will apply to the proposed programme.
- **Sustainability of provision –**
 - The Annual Review Process ensures the sustainability of the provision. The process assesses the risks to programmes, such as recruitment, currency of the programme, student outcomes, employability and placement provision. Where necessary, action plans are developed to consider the sustainability of the programmes
 - The quinquennial programme review ensures all programmes are reviewed every five years. The principles of this review are outlined in the Quality and Standards Handbook and ensure programmes are sustainable.
 - Alongside this, the proposed programme will also be subject to further review in accordance with the British Dietetic Association (BDA) accreditation cycles.
 - This process is institution-wide and will apply to the proposed programme.
- **Effective programme delivery –**
 - All programmes are scrutinised by the external examiners to ensure effective programme delivery. The Academic Policy and Quality Office support external examiners with all processes and policies.
 - All programmes and modules are evaluated to gather feedback on the quality of the delivery and assessments. This information is reviewed by module leaders, academic teams and department managers and then scrutinised by the Faculty Academic Standards and Enhancement Committee to ensure appropriate action has been taken.
 - To ensure effective programme delivery, as part of the annual review process a range of stakeholders provide input on various aspects of the programme. The stakeholders involved include NHS Trusts, learners and service users.
 - These policies and processes are institution-wide and will apply to the proposed programme.
- **Effective staff management and development –**
 - The education provider supports staff development through the EXPLORE@Brookes programme. All new staff are expected to engage with the programme for the first three years for development purposes. It also offers current staff a range of learning and development programmes to support their ongoing development. In addition to this, The Oxford Centre for Academic Enhancement and Development offers a range of courses to support staff development.

- Policies and procedures for professional development are outlined in the Staff Development: Faculty Policy. All staff are also required to engage with performance development reviews annually.
- These policies are institution-wide and will apply to the proposed programme.
- **Partnerships, which are managed at the institution level –**
 - The University Procedures outline the policies and procedures to follow with regards to collaborative partnerships, which includes risk assessments and management of the partnerships.
 - To ensure the education provider and stakeholders work collaboratively there are written agreements outlining responsibilities and expectations. These agreements are currently being used within the HCPC provision and will be used for the proposed programme.
 - These policies are institution-wide and will apply to the proposed programme.

Non-alignment requiring further assessment: None.

Quality, monitoring, and evaluation

Findings on alignment with existing provision:

- **Academic quality –**

The Academic Policy and Quality Office are responsible for monitoring any changes to programmes and ensuring quality and compliance of all programmes. This involves them working closely with staff and external examiners to provide them with relevant guidance and support in relation to academic quality processes and policies.

 - External Examiners are involved with all programmes and provide input into all aspects of the assessments including the practice-based learning elements.
 - These policies and procedures are institution-wide and will apply to the proposed programme.
- **Practice quality, including the establishment of safe and supporting practice learning environments –**
 - The Practice Education Unit oversees practice learning and monitors the quality and safety of placements. The guidelines to support this have been developed in conjunction with the Practice Education Group (PEG) and can be accessed via the education providers website.
 - There are several policies and procedures to ensure practice quality and a safe and supportive practice learning environment. Some of these include Standards of Conduct and Fitness to Practice policies and Guidance for Implementing Speak Up Out Safely / Raising Concerns.
 - These policies and procedures are institution-wide and will apply to the proposed programme.
- **Learner involvement –**

- Student representatives are nominated for all programmes and are involved with subject committee meetings. They are responsible for ensuring they raise, and discuss, issues the learners have about the programmes and act as a link between the learners and programme teams.
- Learners also have the opportunity to be involved with other aspects of the programme, such as the programme design and Annual Review processes.
- Feedback is gathered in all modules and evaluated. The education provider has demonstrated there are relevant systems in place to gather feedback and respond positively to learner feedback.
- These policies and procedures are institution-wide and will apply to the proposed programme.
- **Service user and carer involvement –**
 - The Service User and Caregiver Involvement Strategy and Policy outlines how service users and carers are involved with programmes, e.g., curriculum design, development and providing feedback. This strategy provides a consistent approach to service user and carer involvement across all programmes and enhances the learning experience for learners.
 - To support service user and carer involvement there is a dedicated member of staff within the faculty. They are responsible for ensuring involvement across all aspects of the programme, which includes the design and development of the programmes and liaising with stakeholders.
 - These policies and procedures are institution-wide and will apply to the proposed programme.

Non-alignment requiring further assessment: None.

Learners

Findings on alignment with existing provision:

- **Support –**
 - A range of services to support learners are available. For example, The Centre for Academic Development supports learners with study skills and academic work.
 - Student Support Coordinators are also available to provide learners with pastoral support and signpost them accordingly.
 - All learners are allocated an Academic Advisor who provides them with academic support, which includes monitoring their progress and supporting them with modules.
 - These policies and resources are institution-wide and will apply to the proposed programme.
- **Ongoing suitability –**

- All learners are provided with an academic advisor, who is responsible for ensuring learners are progressing academically. Where there are concerns or issues, the academic advisor liaises with programme teams to identify relevant support for individual learners and assess their suitability for the programme.
- Suitability is considered through the Fitness to Study Policy, which applies to all learners. In addition to this, the Fitness to Practice Policy applies to all learners on regulated programmes. These policies and processes are managed by the University Wellbeing Service and ensure learners meet the programme requirements.
- These policies and procedures are institution-wide and will apply to the proposed programme.
- **Learning with and from other learners and professionals (IPL/E) –**
 - The Faculty IPE Strategy ensures all programmes include interprofessional education, through research, teaching and placement related activities.
 - To ensure these opportunities are available to all learners, interprofessional education is embedded in all new modules as a learning outcome.
 - These policies and procedures are institution-wide and will apply to the proposed programme.
- **Equality, diversity and inclusion –**
 - The University Equality, Diversity and Inclusion (EDI) Policy demonstrates they are committed to equality, diversity and inclusion. They have achieved an Athena SWAN Bronze Award, which is evidence of their commitment to this area.
 - There are various diversity networks learners can connect with through the Brookes Union officers, such as the Black Students Officer, Disabled Students Officer, International Students Officer and LGBTQ+ Students Officer.
 - These policies and resources are institution-wide and will apply to the proposed programme.

Non-alignment requiring further assessment: None.

Assessment

Findings on alignment with existing provision:

- **Objectivity –**
 - The University Regulations for Study and the Assessment and Feedback Policy ensure consistency, fairness, and transparency across all programmes. They do this by offering a range of assessment methods across all programmes and use the same approach when marking and moderating work. All work is marked anonymously, which is education provider policy unless there are exceptional circumstances.

- External Examiners are also involved with all assessments and provide independent input into the assessments in accordance with the education provider's procedures.
- These policies and procedures are institution-wide and will apply to the proposed programme.
- **Progression and achievement –**
 - All assessment processes comply with the education provider's University Regulations for Study. The education provider recognises there will be some variations across programmes due to professional body requirements and therefore adjustments to the processes are standard and expected within the University Regulations.
 - The education provider has a standard policy whereby modules can be passed with an aggregate mark. However, this policy can be adjusted to accommodate the requirements of individual programmes.
 - These policies and procedures are institution-wide and will apply to the proposed programme.
- **Appeals –**
 - The University Policy on Appeals applies to all programmes and allows learners to appeal their marks. This policy outlines the purpose and criteria for appealing and the process to follow if learners are not satisfied with the outcome.
 - This policy is institution-wide and will apply to the proposed programme.

Non-alignment requiring further assessment: None.

Outcomes from stage 1

We decided to progress to stage 2 of the process without further review through stage 1, due to the clear alignment of the new provision within existing institutional structures, as noted through the previous section.

Education and training delivered by this institution is underpinned by the provision of the following key facilities:

- The programme is supported by the Head of Department. Currently, the Dietetics Development Team is made up of the academic lead and two lecturers, who are registered dietitians and one other lecturer. The education provider expects to recruit additional registered dietitians, one full time equivalent (FTE) in the first year and another in the second year to ensure effective delivery of the programme. Two 0.4 FTE technical staff are involved with the delivery of the programme, particularly in the laboratory and simulation activities.
- The education provider offers a range of facilities to support the programme. These include the virtual learning environment (VLE), information technology, books and journals and teaching spaces for lectures and seminars. There are

also two simulation training rooms and a clinical experience room, which learners will be able to use to create real life scenarios. Other facilities include, exercise and sports testing equipment, laboratories for human studies and a newly refurbished 100 seat teaching laboratory.

Section 3: Programme-level assessment

Programmes considered through this assessment

Programme name	Mode of study	Profession (including modality) / entitlement	Proposed learner number, and frequency	Proposed start date
MSc Dietetics (pre-registration)	Full time	Dietitian	20-25 per cohort, one cohort per year	16/09/2024

Stage 2 assessment – provider submission

The education provider was asked to demonstrate how they meet programme level standards for each programme. They supplied information about how each standard was met, including a rationale and links to supporting information via a mapping document.

Quality themes identified for further exploration

We reviewed the information provided, and worked with the education provider on our understanding of their submission. Based on our understanding, we defined and undertook the following quality assurance activities linked to the quality themes referenced below. This allowed us to consider whether the education provider met our standards.

We have reported on how the provider meets standards, including the areas below, through the [Findings section](#).

Quality theme 1 – Evidence of an effective process to ensure sufficient practice-based learning.

Quality activity 1

Area for further exploration: The education provider informed us the first intake for the proposed programme would be 20-25 learners. All learners would be required to undertake three placements across the two years of the programme. Placement A

would take place in year 1 and placements B and C, would take place in year 2. In the information submitted, the education provider shared projected placement capacity figures, which represented the projected growth in capacity over the next 12-18 months. This focussed on the potential number of practice-based learning sites. It did not outline how many practice educators would be required to ensure effective practice-based learning. Nor did it outline the process which would be undertaken to secure this growth.

Considering the figures provided, it was unclear to the visitors if this placement capacity had already been agreed across the duration of the programme. Linked to this, there was no evidence of sufficient practice-based learning resources, such as practice educators, to ensure sufficient and appropriate practice-based learning.

The visitors were therefore unclear what the process was to secure practice-based learning for the duration of the programme and how effective this process was. Further information was therefore requested on how the education provider would ensure there was sufficient practice-based learning for learners on the proposed programme.

Quality activities agreed to explore theme further: We agreed to explore this area further by requesting email and documentary evidence from the education provider. We considered this would be the most effective method to understand how the programme demonstrated this area.

Quality activity 2

Area for further exploration: In their response, the education provider informed us they had successfully secured the required number of placements for the first placement (undertaken in year 1) for the first cohort of learners. They explained how placements B and C had not yet been secured, as they were not due to start until 2025 and placement providers were therefore not able to commit resources at this time. Despite this, the education provider continued to liaise with the Buckinghamshire, Oxfordshire, Berkshire West Integrated Care System (BOB ICS) Clinical Placement Manager who provides support to secure placements within the region. The education provider also worked closely with their local Higher Education Institutes (HEIs) to manage supply and demand of placements in the region.

Visitors noted evidence of a process through the use of the Practice Education Unit and acknowledged the education provider had secured sufficient placements for the first year. The MSc Dietetics Placement Tracker document was used to record this information.

However, from this they were unable to pull together and identify a coherent process that had, and would be followed, to secure sufficient and appropriate placements across the duration of the programme. For example, the visitors recognised the PEU is a central resource. However, from the narrative, they were unable to identify how and when the PEU would work with the proposed Dietetic programme to ensure the capacity of practice-based learning.

Visitors therefore requested further evidence to demonstrate a clear process, which demonstrated how an adequate number of placements would be secured to ensure the availability and capacity of practice-based learning. This process should provide evidence of the following:

- Roles and responsibilities of the individuals / groups (such as the programme team and PEU) involved in the process.
- How and when collaboration is undertaken with other stakeholders, such as the Southern HEI placement partnership network and practice placement providers.
- How the process considers and determines if there is an adequate number of appropriately qualified and experienced practice educators to support practice-based learning.
- Timescales for undertaking these actions.
- If it is not possible to secure the required number of placements or practice educators, the contingency plan or strategy to manage this.

Outcomes of exploration: The education provider submitted a document titled Dietetic programme: evidence of collaboration with partners to secure appropriate placements. This document provided details of the roles and responsibilities of those involved in the process of securing placements and explained how the process would consider if there was an adequate number of practice educators. It also included details of how they would collaborate with stakeholders and the timescales for this. A process diagram was included, which outlined the process for securing, developing and managing placement capacity. In addition to the details provided in this document, they also submitted supporting evidence in the form of minutes and agendas.

Visitors noted the additional placement capacity the education provider had secured. They reviewed the evidence submitted and confirmed there were internal processes in place to ensure there was sufficient placement capacity. They also noted how registered dietitians would be used for the non-NHS placement providers. In their response, the education provider stated the number of learners recruited in future would be determined by the availability of practice-based learning. Visitors were therefore satisfied with the response received and confirmed this standard was met.

Quality theme 2 – Ensuring the learning outcomes enable learners to meet the Standards of Proficiency (SOPs)

Area for further exploration: The visitors acknowledged the Dietetics (pre-reg) HCPC Mapping document and noted the detailed mapping of the learning outcomes against the Standards of Proficiency (SOPs). However, through their review they noted inconsistencies with where some of the standards were being addressed within the academic programme. This specifically related to the following SOPs:

- 7.1: use effective and appropriate verbal and non-verbal skills to communicate with service users, carers, colleagues and others.
- 13.12: accurately assess nutritional needs of individual, groups and populations, in a sensitive and detailed way using appropriate techniques and resources
- 13.20: advise on safe procedures for food preparation and handling and any effect on nutritional quality
- 13.21: advise on the effect of food processing on nutritional quality
- 13.22: advise on menu planning, taking account of food preparation and processing, nutritional standards and requirements of service users.

The visitors were unclear if these standards were being delivered and assessed before learners commence their placements, as these standards were considered important to prepare learners for placements. Further information was therefore requested.

Quality activities agreed to explore theme further: We agreed to explore this area further by requesting email and documentary evidence from the education provider. We considered this would be the most effective method to understand how the programme demonstrated this area.

Outcomes of exploration: In their response, the education provider outlined how these standards were addressed.

- SOP 7.1 involved learners engaging with simulation-based training in year 1 prior to them commencing their placement. They explained how they would be supported by the Faculty's Clinical Skills and Simulation Team to deliver this training and provided details of the range of resources learners would have access to, including service users.
- SOP 13.12 will be delivered through lectures and practical scenarios in year 1. Learners will be provided with the opportunity to engage with a real life scenario, which will be delivered in-house prior to learners commencing their placement in year 1.
- SOPs 13.20, 13.21 and 13.22 would be addressed through in class teaching and discussion and are embedded within the DIET7001 Dietetics Professional Practice module. This module was used to prepare learners for their placements. As part of this request, the education provider also updated the mapping document to reflect the above.

The visitors acknowledged the additional information supplied by the education provider and confirmed they were satisfied learners would have appropriate opportunities to meet the standards of proficiency for Dietitians.

Quality theme 3 – Integration of practice-based learning in the programme to allow for reflection for learners in between practice-based learning experiences.

Area for further exploration: Visitors recognised learners were required to undertake three placements across the two year programme. They acknowledged placement A took place in year 1 and placement B and C took place in year 2. Through their review, visitors noted there was no gap between placements B and C for reflection and the timing of practice-based learning overlapped with taught modules. It was therefore unclear to visitors where a period of reflection would be incorporated between the two placements for learners to reflect on the placement experience. It was also unclear if there were any progression requirements for placements that would apply to learners. Further information was therefore sought on how this would be managed by the education provider.

Quality activities agreed to explore theme further: We agreed to explore this area further by requesting email and documentary evidence from the education provider. We considered this would be the most effective method to understand how the programme demonstrated this area.

Outcomes of exploration: The education provider explained how all learners attending placement were provided with 22 hours of formally timetabled 2-hour hybrid peer-learning sessions. Due to learners attending placement four days a week, these sessions would be delivered on either a Monday or Friday with the option of remote or in person attendance. The purpose of these sessions was to provide learners with the opportunity to reflect and share their placement experiences and to focus on self-reflection and peer-learning activities. In addition to this, there was a week blocked out between placements for learners to consolidate their learning and experience on each placement and prepare them for the next placement. An additional week, which was referred to as 'extra time' was also factored in. This week was originally timetabled for week 5, however based on the visitors comments this week has now been swapped with consolidation week. The 'extra time' week will therefore be timetabled for week 4 and consolidation week will follow in week 5. This will provide learners with more time to achieve their competencies.

In their response, the education provider explained how all learners were required to complete all the pre-requisite modules before they could progress to the next placement. They confirmed learners who were retaking a module would not be eligible to complete any other modules until the retake had been passed successfully.

With regards to placements overlapping with taught modules, the education provider explained how the taught DIET7007 Dietetic Therapy and research DIET7008 Research Project modules were the only modules where there was an overlap with placements. The reason for this overlap was to provide learners with access to

simulation and real life scenarios where they could apply theory, which would prepare them for practice.

The visitors acknowledged the extensive plans for reflection, as well as the dedicated week between each placement block and preparation utilising both in person and online options. They noted the amendment to the scheduling of the 'extra time' week to enable continuity for learners. The visitors were satisfied with the clarification provided regarding progression.

Section 4: Findings

This section details the visitors' findings from their review through stage 2, including any requirements set, and a summary of their overall findings.

Conditions

Conditions are requirements that must be met before providers or programmes can be approved. We set conditions when there is an issue with the education provider's approach to meeting a standard. This may mean that we have evidence that standards are not met at this time, or the education provider's planned approach is not suitable.

The visitors were satisfied that no conditions were required to satisfy them that all standards are met. The visitors' findings, including why no conditions were required, are presented below.

Overall findings on how standards are met

This section provides information summarising the visitors' findings against the programme-level standards. The section also includes a summary of risks, further areas to be followed up, and areas of good practice.

Findings of the assessment panel:

- **SET 1: Level of qualification for entry to the Register** – this standard is covered through institution-level assessment.
- **SET 2: Programme admissions** –
 - On the education provider website it stated applicants must have an honours degree with a 2:1 or above in health or life sciences related subjects. However, in the profession specific documents, it stated priority would be given to applicants with a nutrition degree. Through clarification, the education provider confirmed there was no prioritisation of applicants with nutrition degrees. To ensure applicants

with nutrition degrees were not prioritised over other applicants, all applicants would be offered an interview.

- There was a self-paced online nutrition short course, which delivered 15 hours of lectures. Through clarification, the education provider confirmed the short course was to enable applicants to meet the entry requirements for the proposed programme. This offered an alternative entry route for applicants from different backgrounds and provided them with some knowledge of the programme prior to them entering the programme.
 - The level of information and detail provided in the 'Applications Screening MSc (pre-reg) Dietetics document clearly outlined the entry requirements for the proposed programme.
 - The evidence confirmed appropriate academic and professional entry standards would be applied fairly and consistently.
 - The visitors therefore considered the relevant standard within this SET area met.
- **SET 3: Programme governance, management and leadership –**
 - The education provider demonstrated they have 2.2 full time equivalent (FTE) registered Dietitians and acknowledged they require 2.5 based on the proposed learner numbers. They outlined plans for further recruitment to ensure they have an adequate number of experienced and qualified staff to deliver the proposed programme in September 2024.
 - There was evidence of input from registered dietitians, which ensured there was relevant specialist knowledge and expertise to deliver specific subjects. This was in addition to the staff within the team.
 - There was clear evidence of sufficient learning resources to deliver the proposed programme. These included a range of learning opportunities available, the facilities, software and the management of practice-based learning.
 - Through clarification, there was evidence of effective collaboration between the education provider and practice education providers. This was demonstrated through the course handbook and the development of practice education material.
 - Through [Quality theme 1](#) visitors sought further evidence of the process to ensure the availability and capacity of practice-based learning.
 - The visitors therefore considered the relevant standards within this SET area met.
- **SET 4: Programme design and delivery –**
 - The curriculum has been developed by the Dietetics team, which has had input from the quality assurance team to ensure programme standards are maintained.

- To ensure the curriculum is current and up to date, the education provider used the British Dietetic Association (BDA) curriculum framework and the HCPC SOPs.
 - There will be a blended approach to delivering the proposed programme. This approach will enable learners to integrate theory and practice easily with the use of seminars, laboratory and kitchen based practical's and simulation activities.
 - Through [Quality theme 2](#) further evidence demonstrated how some of the SOPs were being covered within the academic programme.
 - The visitors therefore considered the relevant standard within this SET area met.
- **SET 5: Practice-based learning –**
 - Over the two year period, learners will be required to undertake Placements A, B and C. It was clear practice-based learning was integrated throughout the programme based on the approach used to deliver them. Through [Quality theme 3](#), the education provider demonstrated there was no overlap with placements and taught modules.
 - To ensure learners can link theory to practice, all learners are required to engage with 1000 hours of work based learning through practice-based learning and simulation.
 - Through clarification, we noted the education provider required all practice educators to be registered Dietitians. This demonstrated all practice educators had the relevant skills, knowledge and experience to support learners.
 - The use of some of the terminology in the documentation, such as 'practice educator' and 'practice assessor' was not clear to the visitors. Through clarifications, the education provider confirmed both terms were used interchangeably, however for all the student facing documentation they used practice educator. Visitors acknowledged this but advised there should be some consistency in the documentation to avoid placement sites and learners confusing the term.
 - The visitors therefore considered the relevant standard within this SET area met.
- **SET 6: Assessment –**
 - The programme handbook and module descriptors outlined the range of assessments that would ensure learners were able to demonstrate the skills, knowledge or behaviours appropriate to meeting the learning outcomes of each module.
 - All learning outcomes are mapped against the HCPC standards, which enables learners to demonstrate they meet the Standards of conduct, performance and ethics.
 - Through clarification, the education provider submitted updated documentation, which outlined the changes made to the language used

in the learning outcomes to reflect a level 7 programme. They explained these documents had been updated since their original submission to the HCPC.

- Through clarification, the education provider confirmed DIET7008 Research Project, was a module that runs over a twelve month period, which is why it appears across two academic years. Visitors were satisfied with the evidence and explanation provided.
- The visitors therefore considered the relevant standard within this SET area met.

Risks identified which may impact on performance: None.

Section 5: Referrals

This section summarises any areas which require further follow-up through a separate quality assurance process (the approval, focused review, or performance review process).

There were no outstanding issues to be referred to another process.

Section 6: Decision on approval process outcomes

Assessment panel recommendation

Based on the findings detailed in section 4, the visitors recommend to the Education and Training Committee that:

- All standards are met, and therefore the programme should be approved.

Appendix 1 – summary report

If the education provider does not provide observations, only this summary report (rather than the whole report) will be provided to the Education and Training Committee (Panel) to enable their decision on approval. The lead visitors confirm this is an accurate summary of their recommendation, and the nature, quality and facilities of the provision.

Education provider	Case reference	Lead visitors	Quality of provision	Facilities provided
Oxford Brookes University	CAS-01417-M8H5M5	Sarah Illingworth Susan Lennie	<p>Through this assessment, we have noted:</p> <ul style="list-style-type: none"> The programme meets all the relevant HCPC education standards and therefore should be approved. 	<p>Education and training delivered by this institution is underpinned by the provision of the following key facilities:</p> <ul style="list-style-type: none"> The programme is supported by the Head of Department. Currently, the Dietetics Development Team is made up of the academic lead and two lecturers, who are registered dietitians and one other lecturer. The education provider expects to recruit additional registered dietitians, one full time equivalent (FTE) in the first year and another in the second year to ensure effective delivery of the programme. Two 0.4 FTE

				<p>technical staff are involved with the delivery of the programme, particularly in the laboratory and simulation activities.</p> <ul style="list-style-type: none"> The education provider offers a range of facilities to support the programme. These include the virtual learning environment (VLE), information technology, books and journals and teaching spaces for lectures and seminars. There are also two simulation training rooms and a clinical experience room, which learners will be able to use to create real life scenarios. Other facilities include, exercise and sports testing equipment, laboratories for human studies and a newly refurbished 100 seat teaching laboratory.
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Programmes		
Programme name	Mode of study	Nature of provision
MSc Dietetics (pre-registration)	Full time	Taught (HEI)

Appendix 2 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
BSc (Hons) Occupational Therapy	FT (Full time)	Occupational therapist			01/09/1992
BSc (Hons) Paramedic Science	FT (Full time)	Paramedic			01/09/2016
BSc (Hons) Paramedic Science	FLX (Flexible)	Paramedic			01/09/2016
BSc (Hons) Physiotherapy	FT (Full time)	Physiotherapist			01/09/2000
Independent / Supplementary Prescribing for Allied Health Professions	PT (Part time)			Supplementary prescribing; Independent prescribing	01/09/2020
MSc Occupational Therapy (Pre-registration)	FT (Full time)	Occupational therapist			01/09/2012
MSc Physiotherapy (Pre-registration)	FT (Full time)	Physiotherapist			01/09/2012