#### Health Professions Council Education and Training committee, 28<sup>th</sup> September 2006

#### Standards of Education and Training guidance

#### **Executive Summary and Recommendations**

#### Introduction

The Council consulted on the Standards of Education and Training for education providers between 1<sup>st</sup> February 2006 and 28<sup>th</sup> April 2006. The document will now be called 'Standards of Education and Training guidance'.

We have attached to this coversheet the responses to the consultation and the amended Standards of Education and Training guidance. The guidance will undergo Plain English editing before going to Council for approval.

#### **Decision**

The Committee is asked to agree:

- the attached text of the documents;
- to publish the consultation responses document online; and
- to approve the documents and recommend their approval by Council.

#### **Background information**

The minutes of the Professional Liaison Group can be downloaded from the HPC website here: http://www.hpc-uk.org/aboutus/professionalliaisongroups/sets\_archive/

#### **Resource implications**

Not applicable.

#### Financial implications

- Plain English editing.
- Laying out and printing of the final document.
- Sending copies to all those who responded to the consultation.

#### **Background papers**

None.

#### **Appendices**

- Appendix 1: Responses to our consultation
- Appendix 2: Standards of Education and Training guidance.

#### Date of paper

18<sup>th</sup> September 2006

# **Standards of Education and Training guidance**

# Responses to our consultation

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### Introduction

We consulted on our draft document 'Standards of Education and Training guidance for education providers' from 1<sup>st</sup> February 2006 to 28<sup>th</sup> April 2006. The document will now be called 'Standards of Education and Training guidance' because it is the only guidance in this area that we have produced.

The document was written to provide education providers with guidance about our Standards of Education and Training (SETs). We wanted to give education providers more information about how we assess their programmes against our standards.

You can download the original consultation document from our website: http://www.hpc-uk.org/aboutus/consultations/closed/index.asp?id=27

All responses to the consultation were collated and considered. We found that many of the responses referred to the SETs themselves rather than the guidance for the SETs. We are grateful for all the comments we have received and retained them for consideration when we next review the standards.

#### About the SETs

We assess education programmes against the SETs to ensure that they allow graduates to meet the learning outcomes described in the Standards of Proficiency (SoPs). The standards are the threshold level we consider necessary for safe and effective practice. If we approve an education programme this means that successful graduates are eligible to apply for registration.

## The approvals process

An approval visit is undertaken with an education executive officer and normally two fully trained visitors, at least one of whom is from the same part of the register as the profession with which the programme is concerned. Throughout the visit we question university staff, students, senior managers and placement providers', relating all our discussions back to our standards. At the conclusion of the approvals process we will make a judgement about whether, or to what extent, the programme meets our standards to assess whether the SETs have been met.

Approval is open-ended but we have in place an annual monitoring process to ensure that education programmes continue to meet our standards.

#### This document

In this document, we consider the overall views expressed about the consultation document. We then go on to consider the specific responses to each SET. We have only included the SETs where we received comments or where we will make changes. All comments, amendments or additions to the document we have made as a result of the consultation are included.

Our Visitors have been using the consultation document during the latest round of approvals and have also fed back their comments and suggestions on how the document could be improved. This document is presented in a similar structure to the consultation document itself with each section addressed individually. Any of the SETs that we received no responses to, or had no amendments made to them, have not been included.

**Please note:** Any reference to page numbers or paragraphs is a reference to the original consultation document.

We will now publish the document having taken account of the feedback. The document will undergo plain English editing before publication.

## Your responses

The document was sent to a variety of different stakeholders including professional bodies, education providers and practice placement providers. A list of those who responded can be found at the end of the document.

We would like to thank all those who responded to this consultation for their comments.

### Key themes and comments on the overall document

A number of those who responded referred to the value of the guidance when preparing for an approvals visit. An Undergraduate Programme Director wished 'it had been

'Anyone failing such an approval would not have read this document' – A Quality Assurance Officer available when we did our re-validation last year...HEIs [Higher Education Institutions] won't be trying to second guess what is needed anymore'. Other respondents were more tempered in their response. Manchester Metropolitan

University, School of Health, Psychology and Social Care said that 'the document is generally OK'. They warned: 'It is only once we start to use these things that they are properly tested'.

Most of those who provided feedback were very supportive of the overall approach, layout and tone of the guidance document. The responses we received from both the professional bodies and

education providers were generally positive. The Association for Clinical

Biochemistry said the

'Comprehensive, informative and user friendly' – Association of Perioperative Practice

document was 'clear, excellent guidance which puts students at its centre'. Similar responses were received from the College of Occupational Therapists, the General Optical Council and Play Therapy UK. The Institute of Chiropodists and Podiatrists were pleased that the document clarified the 'criteria that educating bodies have to meet to gain approval' whilst having 'flexibility built in to address the wider range of educating bodies'.

A biomedical scientist stated that there was a necessity to regulate the education and training provision to provide competent registrants and also felt that it was 'important that the HPC continuously endeavours to provide a supportive role to improve standards in partnership with all interested parties including students'. We received a number of responses commending the document for being 'clear and easy to read with no ambiguous areas'.

Some concern was expressed by Oxford Brookes University, School of Health and Social

'HPC don't trust the quality assurance procedures of universities or the judgement of the professional bodies' - Institute of Medical Illustrators

Care who questioned whether the 'functional approach' of the document 'may encourage a tick box method to quality, losing sight of the overall objective of fit for purpose and practice'. The General Osteopathic Council also expressed concern. They said: 'The

generic document is too broad. It lacks individual professional context and may therefore suffer reduced credibility'.

Some of the respondents expressed concern with the lack of direct links with professional bodies and associations. A number argued that the document should stress the importance of linking up with other bodies, agreements and frameworks. The Association for Clinical Biochemistry said that 'HEIs should incorporate expertise from professional bodies' so that a 'stringent approvals process' would be retained. This view was supported by the Federation for Healthcare Science who wanted the document to steer education providers towards linking up with the professional bodies before the programme is drawn up.

The linking of our requirements and those of other agencies was an issue for some respondents who were concerned at the possible levels of duplication of information that an education provider may have to produce. St George's, University of London said that the 'link between professional bodies

and the HPC in the process is unclear'. One respondent said that 'an indication would be useful of how the HPC sees the various quality procedures fitting together and how it advises visitors re avoidance of

HPC and the professional bodies should try to ensure that any duplication in the details required from the HEI is minimised' – St George's, University of London

overlap and repetition'. They felt that 'a number of the issues visitors are expected to raise are also covered by such procedures as the QAA [Quality Assurance Agency] major review in its current form'.

Some respondents expressed concern that the information education providers were asked to provide was a duplication of information that they had to produce for other bodies and associations. The Institute of Medical Illustrators thought that we were 'seeking information that will have already been provided by the education programme providers, either to validation panels in their own institute, or to a professional body validating the

programme'. They questioned whether the scrutinising process places an unnecessary 'administrative burden on the education providers'.

Oxford Brookes University enquired whether it would be possible to submit 'a single set of hard copies of the main programme documentation...and the remainder to be submitted electronically?' They were concerned about the overall time and cost of submitting the documentation, especially when they have to produce documentation for a 'variety of quality assurance models that exist in the Health and Social Care Education sector'.

Further clarity on what constitutes a minor or major change was requested. It was also suggested that guidance needs to be given on how much information is required for making a change to any section of the programme.

### Our response to the key themes and comments

We wanted to give education providers more information about how we will assess their programmes against our standards. The guidance was written for education providers who are preparing for an approvals visit, whether the approvals visit is for a preregistration programme or for a post-registration programme that we approve. We also thought that the guidance would be helpful for our Visitors to use as a source of information before or during the approvals process. The guidance is not exhaustive and prescriptive but we hope that it will help education providers understand what we look for when approving programmes.

We are sympathetic to the amount of information that education providers have to provide for different audits and accept that at times the information they have to gather may be duplicated. As an independent regulator, we need to ensure that graduates coming on to our register meet our SoPs. We require education providers to provide information that is required for our statutory function but try to ensure where possible that our mapping documents are written to sit alongside other validating and auditing procedures.

We have produced further guidance on major and minor changes in the document 'Major/Minor Change - Supplementary Information for Education Providers', this is available in hard copy on request or can be downloaded from our website.

## Overall and detailed guidance

In the remainder of the document we have separated the responses to the detailed comments made about specific guidance for the SETs. We have only included the SETs where comments were made.

## SET 1. Level of qualification for entry to the Register

### Comments on overall guidance

We received five responses about this section. Two respondents were satisfied with the guidance but queried whether standards would be affected by the threshold levels required. In contrast, St George's, University of London asked: 'What happens if the level of the qualification exceeds the normal threshold level?'

The other two comments about the overall guidance related to the example questions. Cardiff University, Department of Operating Department Practice thought the example questions were not appropriate, whilst NHS Education for Scotland suggested that a further question should be included in light of current educational and professional debates: 'How do you justify the level of your pre-registration Masters programme?'

### Comments on detailed guidance

NHS Education for Scotland felt that 'clarification should be given as to whether what is stated in the document is the minimum threshold entry if the programme leads to a different qualification'.

Brunel ODP Centre, Bristol believed that additional guidance was required for 1.1.4 as they thought it was somewhat vague.

### Our response to the comments

The threshold level is normally the minimum level that the qualification is set at. We expect all approved programmes to meet or exceed the threshold level.

The example questions are a guide to the types of question that education providers should be asking themselves and the sorts of questions that we will be looking for answers to. However, some example questions may not be relevant to all programmes and our aim is not to have a checklist of questions that will be appropriate to all programmes.

We will not add in the question proposed by NHS Education for Scotland because different programmes will be at different levels, our position is that the programme must meet the SoPs.

SET 1.1.4 refers to Paramedics only and relates to the threshold level that education programmes must normally meet in order to be approved to apply to join the register. At present this is equivalent to a Certificate of Higher Education for Paramedics. We approve a number of other programmes above the threshold level.

## **Our Changes**

We feel that the guidance in the second paragraph could be clearer. We would expect to see that the programme met the levels as specified by the QAA and professional body

(i.e. a Masters programme needs to be at a Masters level) and will add a sentence to the guidance to this effect.

## **SET 2. Programme admissions**

### Comments on overall guidance

NHS Education for Scotland expressed concern, stating that 'it needs to be made clear the circumstances under which registration might be withheld by the HPC in the event of a programme being successfully completed'.

Northumbria University, School of Health, Psychology and Social Care stated that 'the requirement for students to reach IELTS 7.0 on graduation is not appropriate as it's an admissions matter'. They also felt that a stronger statement on AP(E)L (Accreditation of Prior Experiential Learning) mapping is required.

Oxford Brookes University felt that we 'should acknowledge different modes of study and ensure that part-time, mixed or work-based students are properly informed about the programme they are applying for'. NHS Education for Scotland felt that it would be useful to have an example questions asking 'how and in what ways is widening access being addressed?'

### Our response to the comments on overall guidance

Completion of an approved programme qualifies the award holder to apply for registration. Registration cannot be guaranteed upon completion of a programme because each applicant needs to provide us with certain information, including a satisfactory health and character reference.

Proficiency in English equivalent to a minimum of IELTS 7.0 may be a requirement for some admissions but not for others. If a programme has a lower requirement for entry we expect them to be able to demonstrate how they will have got to this level by the completion of the programme when it is a requirement for us.

When we approve a programme make sure that the mechanisms for AP(E)L mapping and other forms of study are fair and robust.

## Our changes

Having reviewed the example questions in the light of the feedback we feel that alterations should be made to three of the questions.

- The second question will be: 'What information do you give to applicants about the programme and in what format is this given?'
- The sixth question the guidance uses the word 'same' with regard to checks made on students; this will be altered as we need to be sure that they 'undergo the same relevant checks'.

The seventh question will be altered to: make initial health checks and any applicable immunisations.

#### Comments on 2.1

The North West London Strategic Health Authority suggested that the wording in the second paragraph should be made stronger by changing the guidance from 'you may want' to 'should ensure that'.

The British Psychological Society made reference to the second paragraph of the guidance. They stated that 'some programmes do not provide practice placements; therefore the guidance note is not applicable'. They feel it would be more appropriate to include the phrase 'if a placement is part of the programme'.

### Our response to the comments on 2.1

We feel that it would be inappropriate to state in the second paragraph that the education provider 'should ensure that' because practice placements cannot always be guaranteed at the start of a programme.

The whole of SET 5 relates specifically to practice placements. All programmes that we approve must have placements as part of the programme; therefore the phrase 'if a placement is part of the programme' will not be added.

### Our changes

After using the consultation document at approval visits we feel that the second paragraph should be extended to include accommodation costs and any other costs such as personal therapy (for therapists), driving tests (for Paramedics), criminal record checks, health checks, immunisations and any other costs that students will need to meet.

#### Comments on 2.2.1

Cardiff University, Department of Operating Department Practice suggested that the use of the word 'graduate' is not applicable to all and should be changed to 'graduand'.

## Our response to the comments on 2.2.1

Doc Type

We agree that the word 'graduate' should be changed but should be changed to 'successful completion' rather than 'graduand' as it is a more commonly known term.

## Our changes

- The term 'graduate' will be changed to 'those who successfully complete'.
- It is necessary to include 'but may be required by the education provider to have passed English at GCSE or GCE level' at the end of the final paragraph.

#### Comments on 2.2.2

The Institute of Biomedical Science argued that 'CRB checks should be with successful applications only', whilst the University of Surrey argued that these checks 'should normally be completed prior to students commencing programmes'. The British Psychological Society also argued that 'information in relation to convictions or health requirements is relevant at the commencement of training and should be clarified at this point rather than students being rejected at the application for registered status stage'.

NHS Education for Scotland stressed that 'there may be a further requirement for a student to undergo another criminal conviction check prior to practice placement'. They suggested adding this but also pointed out that it may vary across the UK.

The British Dietetic Association questioned why the guidance only mentioned bodies providing criminal records disclosures in England and Scotland with no reference to Wales or Northern Ireland.

### Our response to the comments on 2.2.2

We agree that criminal record checks should be carried out on successful applicants before or at the commencement of training, however, SET 2 specifically relates to admissions procedures, we will therefore not give guidance on whether criminal record checks should be made at any later date at this point.

## Our changes

- The CRB provides disclosures for Wales and England. Disclosure Scotland carries out the same role in Scotland. We will include the Police Service of Northern Ireland who carry out the checks in Northern Ireland.
- On the third paragraph we will add a further sentence or question about procedures for if practice placement educators are not willing to accommodate a student after the education provider has already accepted the student.
- We will also add that we 'would like to see details of the actions you will take in the case of a positive criminal conviction declaration from a potential student'. As this is an admissions criterion, we cannot dictate the monitoring of criminal records at the beginning of paragraph four, but will change 'you should' to 'you may'.

#### Comments on 2.2.3

St George's, University of London requested guidance for the 'possibility of a student developing or becoming aware of health issues after admittance'.

The University of Surrey felt 'the guidance should state that vaccinations should be completed as soon as programme commences prior to practice placements'. However Brunel ODP Centre believed that the example of vaccinations used in paragraph four may

be contentious and queried whether it should be changed to another example.

### Our response to the comments on 2.2.3

We feel that it is important that education providers have effective monitoring procedures on admissions; one of these procedures is a health check. When we next review the SETs, one of the issues we will look into is how to implement requesting ongoing checks, and not only those that we make during selection and admission. This could form part of SET 3.8 as part of pastoral support.

Vaccinations are just one example, not all programmes require vaccinations before the programme starts but others do. The example does state that they should be available before they begin their programme of study because SET 2 relates specifically to admissions.

### Our changes

Guidance will be added that states that health checks must be carried out as part of the admissions process. We accept that requirements vary across the professions and state that education providers must be explicit in the information given to students. For example, some programmes will require immunisations whilst others will not. It is the responsibility of the education provider to have systems in place to carry out health checks on all of their students, including those working in the NHS and private practice.

#### Comments on 2.2.5

Cardiff University, Department of Radiography believed the comments on AP(E)L were very broad. They stated that 'prior knowledge may be limited for very specific degree programmes'. However, South Trent Training Centre of Operating Department Practice agreed with our approach and said it was important that 'when assessing AP(E)L policies that the appropriateness be considered specific to the programme being approved because it is not necessarily appropriate to all programmes'.

Where AP(E)L is appropriate St George's, University of London argued that 'there should be a greater prominence placed on the academic aspects of AP(E)L, e.g. security of evidence and tutorial support'.

## Our response to the comments on 2.2.5

Doc Type

Our visitors are looking to see the appropriateness of any AP(E)L in relation to each programme. They are looking for a clear, coherent policy where AP(E)L is appropriate. Our guidelines must be broad to allow for the many types of prior learning that may be relevant to a programme.

## Our changes

We will remove the final paragraph relating to profiles of students who will be eligible for A(P)EL because it has caused some confusion and we feel it may create issues with confidentiality.

We will also make clear in the documentation that post-registration programmes do not usually have AP(E)L and that this needs to be made clear to potential students. The visitors will also need to see what the upper limit for AP(E)L is and how it is determined.

### Our changes to 2.3

- We will link this SET to SET 3.10.
- We will include 'at a school / department level' at the end of the third paragraph.
- At the end of the last paragraph we will stress that students need to be given information about the policies regarding placements.

## SET 3. Programme management and resource standards Comments on overall guidance

North West London Strategic Health Authority believed 'it would be helpful to indicate that this standard refers to the academic education provider and that similar issues relating to practice education are covered under a separate standard'.

#### Comments on 3.1

Cardiff University, Department of Operating Department Practice suggested an amendment to the guidance because 'making a business plan does not make a programme secure'.

## Our response to the comments on 3.1

We ask to see a business plan as evidence that the programme has adequate support with minimal threats to programme delivery. We will want to see that there is a long-term future for the programme within the education provider's range of provision.

## Our changes

We will add a sentence that states the questions for this SET will be directed mainly at senior managers and workforce development confederation (WDC) planners. There must be clear information concerning partnerships and collaborations with other education providers.

#### Comments on 3.2

St George's, University of London argued that the guidance needs to state that 'they should have and implement an equal opportunity and anti-discrimination policy'.

## Our response to the comments on 3.2

Doc Type

COR

This is covered by SETs 2.3 and 5.13.

Assessment of this SET will be conducted with the senior managers of a programme

rather than the programme leader.

### Our changes

Senior managers include the head of department, Dean and WDC planners but not usually the programme leader.

- Programme leader will be removed from the guidance whilst adding the others.
- Along with the external examiner reports we will also want to see the response of the education provider to these reports.
- We will add 'and evidence of action taken' to 'clear action plans'.
- The paragraph that starts: 'If your programme leader is not registered...' will be moved into the guidance for SET 3.3.

### Our changes to 3.3

We feel that stronger language should be used in the second paragraph. It will now state: 'you must ensure that their job title does not give the impression that they are registered by using a protected title.'

#### Comments on 3.4

We received a number of differing views on the standard and guidance relating to adequate numbers on education programmes. South Trent Training Centre of Operating Department Practice and Leicestershire, Northamptonshire & Rutland Healthcare Workforce Deanery requested 'further guidance be given on approximately appropriate levels', whilst Brunel ODP Centre stated that they were 'pleased that there is no student/staff ratio offered'.

NHS Education for Scotland acknowledged that guidance on staffing levels is a difficult area and stated that the guidance is 'not especially helpful'. Oxford Brookes University asked: 'What type of evidence and information is required?'

## Our response to the comments on 3.4

Doc Type

The SET requires there to 'be an adequate number of appropriately qualified and experienced staff'. We feel it would not be helpful or appropriate for us to specify a staff/student ratio due to the different types of teaching and learning of the programmes on offer. We are looking for education providers to give good reasons for the number of staff they have in place in context with the programme they are running. At the visit we will discuss workload and also speak to students about their experience. The education provider must demonstrate that the arrangements they have in place are effective.

We will need to see the maximum cohort number (and the minimum to run a viable programme), details of how many students per tutor and size of group tutorials. We will also want to see how the workload is split between the programme team. Evidence of this

might include module descriptors, student cohort numbers and staff CVs.

### Our changes

We will link this SET to SET 3.2.

#### Comments on 3.5

NHS Education for Scotland stated: 'The criteria regarding visiting lecturers should be specified within different aspects of the programme e.g. requirement of a teaching qualification, particular clinical expertise etc.'

### Our response to the comments on 3.5

We agree that additional guidance needs to be added. The programme team must demonstrate that the staff on the team, and any others used to deliver the programme, are qualified to deliver the programme.

## Our changes

• Reference to the cross-referencing documents in this section of the guidance is confusing and will be removed.

We will change the start of the first paragraph to:

• 'The programme team must demonstrate to us that the staff on the team, and any others used to deliver the programme (such as sessional lecturers) are qualified to deliver the programme.'

#### Comments on 3.6

NHS Education for Scotland suggested an additional bullet point: 'Approval process for practice educators', whilst the Federation for Healthcare Science suggested including: 'Keeping up-to-date with professional body guidance'.

Cardiff University, Department of Radiography wondered 'what the difference between CVs and staff profiles are?'.

Cardiff University, Department of Operating Department Practice felt that there were two issues, the first was that 'no guidance on research' was included. They also stated that 'professional skills' were 'for employers to ensure not education providers'.

Oxford Brookes University stated that 'those not employed by the HEIs but part of the programme team are the responsibility of the HEI'. They felt that the guidance did not make this explicit.

The Federation for Healthcare Science and Play Therapy UK asked for a 'strengthening of the reference to evidence of updating portfolios to underline the importance of maintaining links to current and developing practice'.

### Our response to the comments on 3.6

An approvals process for practice educators does not ensure continuing professional and research development so this bullet point will not be added.

Staff profiles are an overall profile of the staff employed on the programme, CVs are individual profiles. We feel it is necessary to stress here that the list given in the guidance is not exhaustive.

We agree that it is important that the SET ensures the continuing professional development and research development of the programme staff. Education providers are the employers in this case. If someone is part of the programme team but not employed by the education provider they are still the responsibility of the education provider in this situation.

We will be looking to see that the staff involved across the programme have a balance of practice and academic research that will influence, inform and keep the curriculum up-to-date.

### Our changes

'Keeping up-to-date with professional body guidance' will be added to the existing list in the guidance.

#### Comments on 3.7

St George's, University of London requested 'journals' is added to the list.

## Our response to the comments on 3.7

Learning resources such as journals are covered by SET 3.13.

Doc Type

## Our changes

- We will include reference to: Web CT, blackboard and other specialist programs after IT.
- We will also make reference in the second paragraph to students who are employed and studying part-time or doing post registration qualifications because we want to see how they are catered for in their placements or place of work.

#### Comments on 3.8

NHS Education for Scotland advised that the guidance should 'stress that evidence should include support available to practice educators and students on practice placement'.

Leicestershire, Northamptonshire & Rutland Healthcare Workforce Deanery requested that we include 'support with computer and study skills'.

### Our response to the comments on 3.8

Support available on practice placements is covered in SET 5.

Support with computer and study skills might be part off the provision of education providers which ensures the health and wellbeing of students. We give a small number of examples in the guidance to give an indication of the sorts of things which we will look for in assessing whether this SET is being met.

#### Comments on 3.9

The University of Sheffield, Teaching and Learning Support Unit expressed concern about the 'proposed acquisition of student consent to participate in role-play and to practise profession-specific techniques'. They did not feel that the rationale for making the distinction between certain learning activities and comparable challenges, such as giving clinical presentations or undertaking workshop-style activities was clearly expressed.

### Our response to the comments on 3.9

The guidance attempts to show that students involved in any activity that may cause injury or emotional distress (health) requires consent.

## Our changes

We will stress that this guidance varies between professions and may not be applicable to all programmes. Professional bodies will have information about this. When it is applicable we will want to see evidence, such as a copy of a consent form.

#### Comments on 3.10

NHS Education for Scotland believed that 'evidence should also be provided on support for students during periods of sick leave/carers leave or any other unexpected leave the student requires to take'.

## Our changes

We agree that the point suggested by NHS Education for Scotland should be added to strengthen the guidance.

We will also add that education providers may also like to detail financial, counselling and specialist teaching or learning facilities.

#### Comments on 3.11

NHS Education for Scotland stated that 'attendance requirements when on practice placement and evidence that this is collected in a standardised way should also be provided'.

### Our response to the comments on 3.11

It is not within our remit to request standardised attendance records from practice placements; however, evidence of attendance must be collected. We need to see that whatever systems are in place, the students will be able to meet the SoPs.

### Our changes

- The guidance will be linked to SET 5.5 and the need for education providers to clearly identify the components of the programme that must be completed before a student can go on placement.
- The third line of the first paragraph will be changed from 'you may wish to show' to 'you must show'.
- We will state that where attendance is linked to assessment, the mechanisms for monitoring assessments must be clarified.

#### Comments on 3.12

Play Therapy UK said: 'The wording should reflect that the programmes are delivered at different sites'.

The Institute of Biomedical Science stated that 'the guidance should recognise professional body approved training'.

## Our response to the comments on 3.12

In this SET we refer to 'on and off site' learning. This can also be interpreted as multisite learning. Therefore, if professional body approved training is part of the programme then this would also apply.

## Our changes

- The guidance will be strengthened by altering the first paragraph 'you may wish', to 'you should'.
- The 'etc' in the first paragraph will be changed to 'specialist labs and equipment'.

## Changes to 3.13

We will add 'and any profession specific resources' to the end of the first paragraph.

### **SET 4. Curriculum standards**

### Comments on overall guidance

The Federation for Healthcare Science strongly recommended discussion with the professional bodies 'because the list of publications is not up-to-date, contacting the professional bodies is vital'.

North West London Strategic Health Authority believed it was important to say that 'professional standards should be maintained in the context of inter-professional learning', whilst also saying that 'programmes should offer the opportunity for inter-professional learning i.e. learning about other professions, as opposed to simply learning alongside other professions'.

## Our response to the comments on overall guidance

Professional bodies often play a valuable role in curriculum design and the publications that they are involved with can be of great use to many education providers. In SET 4.2 we require education providers to refer to any relevant professional body documentation. We have also invited professional bodies to send us details of any relevant documents they publish, for inclusion in our publication list.

Inter-professional learning is referred to in SET 4.7. We understand and fully support the use of inter-professional learning and will be looking to review our requirements when we review the SETs. At present however we do not set detailed standards for curricula and therefore cannot insist that all programmes should offer the opportunity for inter-professional learning, particularly given the range of professions we regulate.

#### Comments on 4.1

Northumbria University asked that the highlighting of this as being 'crucial' be removed because 'one standard is not more crucial than another'.

## Our response to the comments on 4.1

Doc Type

By using the word 'crucial' we are not looking to denigrate any of the other standards, it is used to highlight the importance of this standard.

## Our changes

- We will remove the phrase 'as fully as possible' in the first paragraph because the whole cross-referencing document must be completed.
- We will make reference to the SoPs being incorporated into the learning outcomes and module assessments.

#### Comments on 4.2

NHS Education for Scotland stated that legislation listed under the other sources of guidance 'should include the Special Educational Needs and Disability Act 2001'. The British Psychological Society also highlighted 'the incomplete nature of the 'Other sources of guidance' section as there is no reference to race legislation or recent legislative amendments'.

The Federation for Healthcare Science stated that this standard requires discussion with professional bodies. 'The start of the second sentence should be: Professional bodies should be not may be'.

The Institute of Medical Illustrators argued that 'it is not appropriate to have generic curriculum framework for a relatively small profession'. They preferred 'co-operative work between universities providing the programmes'.

Northumbria University questioned 'why only the QAA Benchmark Statements are mentioned and not FHEQ [Framework for Higher Educational Qualifications] and QAA codes of practice'.

### Our response to the comments on 4.2

We do not aim to give an exhaustive list of legislation and legislative amendments.

The standard recognises the valuable work often undertaken by professional bodies in shaping the curriculum provided by education providers. Professional bodies are often involved in producing further guidance in certain areas, or in accrediting programmes for the purposes of membership. However, the guidance recognises that the information produced by the professional bodies can vary in content and volume.

We feel that the guidance encourages co-operative work between education providers and other parties with an interest in the profession rather than being a generic curriculum framework. The issue we insist upon is that education programmes must meet the SoPs.

The FHEQ and QAA codes of practice are included in the references.

#### Comments on 4.3

NHS Education for Scotland requested the inclusion of 'how inter-professional aspects are addressed within the curriculum documentation'.

## Our response to the comments on 4.3

We agree that inter-professional learning is important and as such have addressed this specifically in the guidance for SET 4.7.

## Our changes

We will link this SET to SETs 5.1 and 5.5.

#### Comments on 4.4

NHS Education for Scotland pointed out that 'the reference to QAA major review reports is applicable to England, Wales and Northern Ireland. QAA Scotland's review methodology is not at the subject level'.

The Federation for Healthcare Science requested that the guidance 'include a statement on how contact with the professional bodies is required for the curriculum to be effective'.

### Our response to the comments on 4.4

The QAA major review report is given as an example only and may not be applicable in all cases.

It is important for the curriculum design is relevant to current practice and professional thinking. One way is for the education provider and professional body to work together in designing the curriculum, another is good contact with practice placements. We recognise that education providers may want to contact professional bodies, however, we cannot require that they do so.

#### Comments on 4.5

NHS Education for Scotland argued that it was 'not clear in the evidence suggested that this would include the presentation of student work'. They suggested 'evidence should include how the programme enables students to address inter-professional working within autonomous and reflective thinking and evidence-based practice'.

Cardiff University, Department of Operating Department Practice felt that the final guidance suggested that students should undertake a methods programme or research proposal, they stated that this was not always the case.

## Our response to the comments on 4.5

Doc Type

In this SET we are looking for evidence that autonomous and reflective thinking and evidence based practice are developed by and integral to the programme. One of the ways this could be done is through inter-professional learning. We would require evidence of how this would be assessed.

The guidance is not intended to be exhaustive or prescriptive and does not suggest that students should always undertake a methods programme or research proposal. Two examples are used to show how evidence based practice could be demonstrated.

## Our changes

After reflecting on using the guidance document at the latest approval visits we feel that it is necessary to stress in the guidance for this SET that questions about it will be directed to the programme team and to students.

#### Comments on 4.6

St George's, University of London suggested including in the 'further sources of guidance: Institutions own learning and teaching policies'.

### Our response to the comments on 4.6

We do not feel we need to draw these to the attention of programme staff, since they would already need to adhere to their own institutional learning and teaching policies.

#### Comments on 4.7

The University of Sheffield welcomed the 'flexibility and pragmatism of the stance adopted in respect of guidance on inter-professional learning, which they see as a helpful informant of ongoing local developments'. However NHS Education for Scotland stated that 'the agenda is moving forward on inter-professional learning and question whether guidance should be encouraging education providers to offer this within their programmes if not already doing so'. Northumbria University believed 'a stronger statement is required in relation to inter-professional learning'. The South Trent Training Centre of Operating Department Practice suggested 'making a stronger emphasis on the existence of inter-professional learning with relationship to future inter-professional learning'.

The Federation for Healthcare Science argued that there 'is a need to ensure that interprofessional learning enhances, not detracts from, delivery of relevant professional curricula'.

## Our response to the comments on 4.7

We agree that inter-professional learning is high on the agenda and lots of important work is being done in this area. At present it is not required by us as part of the approvals process but will be considered by the Education and Training Committee in the future.

In support of this we want to see how the education provider differentiates between uniprofessional learning, inter-professional learning and shared teaching and how each is reflected in the curriculum. We will also need to be assured that allied health professions learning and experience is fully accommodated and incorporated. We ask these questions of the programme teams and placement providers.

## **SET 5. Practice placement standards**

## Comments on overall guidance

Oxford Brookes University queried whether the responsibility for assuring the quality of the placement lay with the education provider as it did not seem 'consistent with the Skills for Health/QAA message about shared responsibility across the partnership of agencies providing Health Care education'. They stressed 'the new interim standards relating to Assuring and Enhancing the Quality of Healthcare Education' suggested that 'placement agencies self-assess their provision and feed into a programme review. The ownership of responsibility for placement and programme quality needs to be agreed, clearly defined and applied consistently across all Healthcare QA frameworks'.

The British Dietetic Association requested clarification about 'when during the process a HEI must visit and approve placements outside their cluster area?'.

The Federation for Healthcare Science believed that 'the introduction should include the benefits of working with professional bodies to deliver effective practice placements' as well as referring to it in SET 5.2.

Northumbria University advised that 'additional questions on partnerships and practice placement providers are required'.

Cardiff University, Department of Operating Department Practice requested a reference on the 'three guiding principals' mentioned in the guidance.

## Our response to the comments on overall guidance

The consistency with the message about shared responsibility is still valid. We are assessing a programme provided by an education provider that has practice placements as part of that programme, therefore practice placements must meet our standards and the responsibility of making sure that they do lies with the education provider. We strongly recommend that education providers communicate effectively with the practice placements but cannot insist that they must visit them at certain times. We will want to see evidence that all placements are monitored.

## Our changes

- We will stress in the summary that all aspects of placements must be approved
  and monitored by the education provider. We will want to see what mechanisms
  are in place for the education provider to monitor the placement.
- In the overall guidance the fourth paragraph will have: 'you must demonstrate that whatever structures you have in place meet the SETs and SoPs' added to the end.
- The 'three guiding principals' will be changed to be called the 'three main themes'.

Dept/Cmte

• We will reword the last sentence to say: 'the Visitors will need to be assured that there is evidence of a quality assurance system to support both the student and the patient experience within the practice placement.'

### Changes to 5.1

We will link this SET to SETs 3.1 and 4.3.

#### Comments on 5.2

Oxford Brookes University warned: 'The range of placements used across many Trusts and several SHAs creates difficulties for accurate registers of practitioner qualifications and experience to be held centrally'. They went on to say: 'Consequently this information would not be available via a central database but would be available from placement coordinators and staff in the School Placement Learning Unit'.

University of Surrey indicated that professional body documentation does not identify 'qualified and experienced', whilst another institution advised that 'the professional body curriculum is not appropriate for guidance on the numbers of qualified mentors in practice'.

### Our response to the comments on 5.2

The guidance does not ask for information to be held centrally and we can see that it would be perfectly reasonable for the education providers to get the information from placement co-ordinators when required. We will be looking for evidence that placements are well supported by experienced and qualified staff. We will talk to the programme team, students and placements providers.

We expect that the university should come up with a reasoned rationale for why they believe the staff at the placement are qualified and experienced.

## Our changes

In light of the feedback from the document being used at approval visits we will alter the second paragraph to include the need to see job descriptions and recruitment policies of the placements so that they can see how they are qualified to teach/supervise students.

## Changes to 5.3.1

- We will link this SET to SET 5.7.
- In light of the feedback from the document being used at approval visits we will
  make the following change: We will include references to National Health
  Service (NHS), Institute of Health Care Development (IHCD) and Institute of
  Biomedical Science (IBMS) documents and frameworks in the other sources of
  guidance.

### Changes to 5.3.2

- We will link this SET to SETs 5.7 and 5.11.
- In light of the feedback from the document being used at approval visits we will make the following change: We will add to the second paragraph a statement that risk assessment is often found in the curriculum and the documentation that prepares students and educators for placements.

#### Comments on 5.4

NHS Education for Scotland suggested an additional bullet point: 'Identification of what aspects of the curriculum requires to be covered prior to each practice placement'.

Cardiff University, Department of Operating Department Practice and Department of Radiography both highlighted concern over the issue of privacy. The Department of Operating Department Practice argued that 'SET 5.4 does not consider potential privacy issues'. One of the issues identified by the Department of Radiography was that 'reflective logs and diaries may not be appropriate to provide to visitors because they are private for the students'.

Play Therapy UK did not see that that it was 'realistic to impose responsibility of SET 5.4 on placement organisers. It must be the direct responsibility of the training provider'.

### Our response to the comments on 5.4

The list we provide is not an exhaustive list. With regard to the possible issue of privacy, the education provider would have to gain the consent of the student if they wished to include student logs and diaries. If consent was not given, the education provider could supply other types of evidence.

The education provider must ensure that the placements offered are suitable for the programme they are running; they are directly responsible for all aspects of the programme.

## Our changes

The language used here will be strengthened so that it will now state that 'you should' and 'the visitors will'.

## Changes to 5.5

In light of the feedback from the document being used at approval visits we will add to the end of the last paragraph stating that evidence that could be provided might include a map of the programme and details of assessment.

## Changes to 5.6

We feel that it is important to note here that we don't visit placements and give openended approval subject to annual monitoring. If the placement is with a third party, the

education provider will need to show that they audit this effectively.

### Changes to 5.7

We will link this SET to SETs 5.9 and 5.10

#### Comments on 5.8

NHS Education for Scotland advised: 'evidence also needs to be provided of training for practice placement educators if they are involved in inter-professional learning'.

### Our response to the comments on 5.8

SET 4.7 deals with the training of practice placement educators who are involved in inter-professional learning.

### Changes to 5.8.1

- We will link this SET to SET 5.2
- In light of the feedback from the document being used at approval visits we will include '...and how you ensure each placement has been approved' to the last paragraph.

#### Comments on 5.8.3

The British Association for Counselling and Psychotherapy questioned whether there was 'a conflict of interest when the HEI has a relationship and responsibility for the development and training of practice placement educators?'

A Training and Quality Manager said: 'There may be a possibility of competition between education establishments over placements. Trainers needing full documentation will lead to education establishments competing to offer placement educators their own training that will lead to a risk of promoting programmes to those who already have adequate skills...Common sense should be applied when assessing what levels of skills knowledge and aptitudes are required in workplace trainers'.

## Our response to the comments on 5.8.3

Flexible requirements, which education providers can implement appropriately, and justify to visitors 'unless other arrangements are agreed' provides future flexibility.

## Changes to 5.9

We will link this SET to SET 5.8

## Changes to 5.10

We will link this SET to SET 5.8

### Changes to 5.11

We will link this SET to SETs 5.9 and 5.7.5.

### Changes to 5.12

In light of the feedback from the document being used at approval visits the second paragraph will be reworded to: 'The visitors will wish to see evidence that you have a system in place which ensures that, wherever possible, service users are aware that students are involved in their care'.

### Changes to 5.13

- We will remove the first sentence because informal feedback indicates that it does not add anything to the guidance.
- The last sentence will be strengthened by replacing 'you may decide to' to 'you will'.
- There will be a reiteration here of the education providers' responsibility to monitor any placements supported and co-ordinated by a third party.

### SET 6. Assessment standards

## Comments on overall guidance

NHS Education for Scotland argued 'evidence needs to be provided on how rigorous consistent and fair assessment of both university professional and inter-professional practice placements is ensured'.

Skills for Health stated: 'Along with safe and effective practice and fitness to practice, there is also an opportunity for further consideration of potential relationships to National Competences and Standards'.

Northumbria University requested two points be added. Firstly, 'at approval events HPC could look at university expectation and examine the QAA audit report'. Secondly, to 'stress the need to check the HPC standards in relation to whether the external examiner is required to be registered with HPC'.

## Our response to the comments on overall guidance

Doc Type

Assessment of both university professional and inter-professional practice placements is already referred to in SET 5.6.

We agree with Skills for Health that the potential relationships to the National Competencies and Standards could be considered. We will add this into the further information section in SET 6.3.

We agree with Northumbria University that the QAA audit report could be included in the documentation; we would expect the programme to have been mapped against it.

Secondly the issue of external examiners being on the relevant section of the HPC register is addressed in SET 6.7.5.

### Our changes

We will remove, amend and add some example questions.

- The first question will be replaced with: 'Why have you chosen the particular types of assessment for each module?'
- The second question will have 'academic and placement components' included.
- The fourth question will be removed and two additional questions put in place: 'Is there a mechanism for continuous assessment and ongoing feedback for students on placement?' and 'What happens if a student is failing placements but is doing well in academic subjects?'

#### Comments on 6.1

St George's, University of London advised changing the last bullet point to: 'The maximum registration period'.

### Our response to the comments on 6.1

We agree that there is a difference between the maximum length of a programme and the maximum registration period. The former relates to the programme itself whilst the latter relates to the student on that programme.

## Our changes

- The second paragraph which relates to programme completion will make reference to the SoPs.
- The last bullet point will be: 'The maximum registration period'.

#### Comments on 6.3

St George's, University of London believed 'further reference to QAA Codes of Practice on the Assessment of Students and External Examining should be included'.

## Our response to the comments on 6.3

Doc Type

We agree that these should be added.

## Our changes

- The wording of the final sentence will be changed from 'the requirements to be approved by us' to 'HPC's SoPs'.
- We will add 'QAA benchmarks' and 'National Competencies' to the further information section.

#### Changes to 6.4

In light of the feedback from the document being used at approval visits we will make the following change:

• There will be further guidance on the need to determine what stops a student from progressing and the exit routes that are available for a student who is failing.

### Changes to 6.5

In light of the feedback from the document being used at approval visits we will make the following changes:

- Stronger statements such as 'you will need to' will be used in the rest of the guidance.
- We will add a statement about assessing the SoPs.

### Changes to 6.6

In light of the feedback from the document being used at approval visits we will make the following changes:

- At the end of the second paragraph we will add: 'or this information may be included in the placement handbook, learning log and other relevant components of the curriculum'.
- The last sentence concerning referred, failed or incomplete placements relates to SET 6.4 and will be removed from here.

## Changes to 6.7.2

We will link this SET to SET 6.7.1

#### Comments on 6.7.3

Brunel ODP Centre believed that 'the issue surrounding academic awards to students who have had sickness/absence problems, is of pivotal importance' and did 'not think that the guidance is sufficiently clear and requires greater clarity, detail and direction'.

## Our response to the comments on 6.7.3

Doc Type

We accept that the issues of awarding aegrotat awards for students are of importance to education providers; however we feel the guidance is sufficiently clear for the SET because it specifically provides that students who are awarded aegrotat awards cannot be eligible for admission to the register. We need to ensure that anyone eligible for registration has met the SoPs.

#### Comments on 6.7.5

The British Psychological Society questioned what the rationale was for requiring the external examiner to be registered but not the programme leader.

The Institute of Medical Illustrators and Play Therapy UK were concerned 'that this standard will be difficult to meet for emerging professions because there are not many members who meet university requirements for external examiners'. The Institute of Biomedical Science asked for 'consideration to be given for the need to co-appoint a registered practitioner to act in conjunction with an external examiner because of the small number of academic staff who are practicing Biomedical Scientists'.

### Our response to the comments on 6.7.5

We understand that some programmes may find this difficult and the SET is currently under discussion, however, at present it must be met as it stands until a decision has been made.

## Our changes

The last paragraph will be removed because it is incorrect at present. It will be changed so that it says: 'We understand that some professions and programmes may find this difficult but until a further decision has been made, this SET will remain in place. For supplementary provider programmes, we only need one external examiner from one of the relevant parts of the register'.

## Respondents

Below is a list of the organisations that responded to our consultation. We received responses from thirty one organisations and fifteen individuals (or where it was not possible to tell if the response was from an individual or on behalf of their organisation). Where we have quoted from these organisations in the text, we have attributed the quotation. Where the quotation used is from the response of an individual, it has not been attributed.

## **Organisations**

Association for Perioperative Practice

**Association of Clinical Scientists** 

British Association of Counselling and Psychotherapy

Brunel ODP Centre, Bristol

Cardiff University, Department of Operating Department Practice

Cardiff University, Department of Radiography

College of Occupational Therapists

Federation for Healthcare Science

General Optical Council

General Osteopathic Council

Institute of Biomedical Science

Institute of Medical Illustrators

Leicestershire, Northamptonshire & Rutland Healthcare Workforce Deanery

Manchester Metropolitan University, School of Health, Psychology and Social Care

NHS Education for Scotland

North West London Strategic Health Authority

Northumbria University, School of Health, Community and Education Studies

Oxford Brookes University, School of Health and Social Care

Play Therapy UK

Scottish Funding Council

Skills for Health

South Trent Training Centre of Operating Department Practice

St George's, University of London

The Association for Clinical Biochemistry

The British Dietetic Association

The British Psychological Society

The Institute of Chiropodists and Podiatrists

The University of Greenwich in Medway, School of Science

Doc Type

The University of Sheffield, Teaching and Learning Support Unit

University of Paisley, Quality and Enhancement Unit

University of Surrey

We would like to thank all those who responded to this consultation for their time and comments.

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### Introduction

#### About this document

This document has been written to supplement our programme approvals process, it provides **guidance on our Standards of Education and Training**, in order to give more information about how Visitors will assess against our standards.

It is written for education providers who are preparing for an **approvals visit**, whether the approvals visit is for a pre-registration programme or for a post-registration programme that we approve, such as supplementary prescribing, or local analgesia / prescription only medicine.

It will also be useful for education providers who are preparing information to inform us about a **major change** to their programme, or as background information for education providers preparing for their **HPC annual monitoring report**.

Throughout the document, 'we' refers to the Health Professions Council, and 'you' refers to staff working on an approved programme, or a programme that is seeking approval. Where the abbreviation 'SET' followed by a number is used, this refers to a specific Standard of Education and Training.

### About us (the HPC)

We are the Health Professions Council. We are a health regulator, and we were set up to protect the public. To do this, we keep a Register of health professionals who meet our standards for their training, professional skills, behaviour and health.

We currently regulate thirteen health professions:

- Arts therapists;
- Biomedical scientists:
- Chiropodists and podiatrists;
- Clinical scientists;
- Dietitians:
- Occupational therapists;
- Operating department practitioners;
- Orthoptists;
- Paramedics:
- Physiotherapists;
- Prosthetists and orthotists;
- Radiographers; and
- Speech and language therapists.

We may regulate other professions in the future. For an up-to-date list of the professions we regulate, please see our website: www.hpc-uk.org

Each of these professions has one or more 'protected titles' (protected titles include titles like 'physiotherapist' and 'dietitian'). Anyone who uses one of these titles must be on our Register. Anyone who uses a protected title who is not registered with us is breaking the law, and could be prosecuted.

Our Register is available on our website for anyone to search, so that they can check the registration of their health professional.

## Our key functions

In order to protect the public, we:

- set standards for the education and training, professional skills, conduct, performance, ethics, and health of registrants;
- keep a Register of health professionals who meet those standards;
- approve programmes which health professionals must complete in order to register with us; and
- take action when health professionals on our Register do not meet our standards.

The Health Professions Order says that we must set our standards to protect the public, and that we must set standards which are necessary for safe and effective practice. This is why our standards are set at a 'threshold' level.

When you are developing your programme, you may also wish to refer to documents published by other organisations which take a role in developing and fostering good practice, e.g. professional bodies, and the Quality Assurance Agency.

#### Guidance on our standards

This document provides guidance on our Standards of Education and Training, which are the standards a programme must meet in order to be approved by us. The detail that it contains against each standard gives suggestions of how you could show that you meet the standards.

Although you do not have to use this document in order to have your programme approved, you are advised to do so, as it has been put together to provide advice to you on the evidence you will need to refer to.

## Preparing for a visit

Before the visit, we will send you two documents for cross-referencing. One of these contains the Standards of Education and Training, and the other contains the Standards of Proficiency for your profession.

We **strongly recommend** that you complete these cross-referencing documents to show how your documentation meets our standards. Doing this will save both your programme team and the HPC Visitors time on the day of the visit; the Visitors will be able to refer easily to the information you've provided.

Please note that in order to make the cross-referencing helpful to the Visitors, we recommend that you do not use phrases such as 'implicit through entire programme' or 'throughout'. If you reference exactly where the Visitors can find evidence to show how you meet the standards, this will help the visit to go more smoothly.

For more information about the process of programme approvals, including timings, procedures, the role of Visitors, etc, please see our document 'HPC Approvals Process', which we anticipate will be published on our website in November 2006.

## Documents published by other organisations

For your information, throughout this document we have referenced other documents that may be useful to you in providing additional information and context. This does not mean that we have 'approved' these documents, but they nevertheless may be helpful when you are compiling evidence to show how you meet our standards.

## Working with professional bodies

Professional bodies for the professions we regulate have had important input into the drafting of this document (see the section 'How this document was written' on page 50).

Under the new process for approving pre-registration programmes, we have overall responsibility for the standards which programmes must meet, and under our legislation, we need to assess against those standards independently.

Professional bodies have an important role in promoting and representing their respective professions. They are the holders, and primary shapers, of their professions' respective knowledge, skills and evidence base. In particular, professional bodies may develop the learning and curriculum frameworks for their profession. In this document, we have referenced the curriculum documents published by professional bodies which will provide useful information, background and context.

## The structure of this document

We have divided up the main part of this document into six parts, to reflect the six sections of our Standards of Education and Training.

Under the title of each standard is a **Summary**, which summarises the areas that the standard is concerned with. There is then a section called '**Overall guidance**' which gives guidance for the whole of that standard, including information about how you can show that you meet this standard: the documents you should provide, or the people whom the Visitors may wish to meet. This is followed by a section called '**Further information**'. Here we reference any other documents which may be useful to education providers in finding further information related to the whole of the standard. Certain documents, like the professional body curriculum outlines or equivalent, may have relevant information in them which relates to so many standards that, in order to save space, we have not referenced them every time, but instead have given a list at the end.

We have also provided a list of 'Example questions'. These are questions that the Visitors might ask at an Approvals event, and can also be used as prompt questions when you are putting together evidence for your documentation, or when considering your Annual Monitoring, or a major / minor change to your programme. Visitors will not normally ask all of these questions, and may not use the example questions at all, but we have provided them to give you an idea of the sorts of questions that may arise during a visit. Please note that the questions are not definitive and the Visitors may ask other questions that they feel are necessary to ensure that the Standards are being met.

The final, and most substantial section is called '**Detailed guidance**'. Here, we have broken down each Standard of Education and Training into its individual, numbered parts. Each part is in a table like the one below:

#### 1. This box contains the Standard title, ie: 'Assessment standards

1. 1 This box contains the full text of the relevant Standard of Education and Training.

#### Guidance

This box contains guidance on the standard.

Where specific sessions with groups, or documents that you may supply, are referred to in this guidance, they are in bold.

For example,

- 'Visitors may ask **students** questions about this standard.'
- 'This information may be available in your **practice placement handbook**, or equivalent.'

## Other sources of guidance

This box, where applicable, indicates other documents which may contain further background information on possible ways of meeting the standard.

Here, as with the 'further information' for the whole of the standard, you will find that certain documents may have relevant information in them which relates to so many standards that we have not referenced them against each one separately, but instead have given a list at the end.

# SET 1. Level of qualification for entry to the Register

# Summary

This standard is concerned with the academic level of the qualifications awarded in order to allow eligibility to apply for registration with us.

# Overall guidance

None applicable.

#### Further information

- Quality Assurance Agency for Higher Education, Qualifications Framework for England, Wales and Northern Ireland
- Quality Assurance Agency for Higher Education, Qualifications Framework for Scotland
- College of Radiographers, Handbook of the Joint Validation Committee (Radiography)
  - 3.4 Registerable qualification<sup>1</sup>
  - Appendix Two Guidance for the Development and Approval of M Level Programmes with Eligibility for Registration
- Quality Assurance Agency for Higher Education, Subject benchmark statements
- Chartered Society of Physiotherapy, Expectations of Master's Level Programmes within qualifying physiotherapy education

# Example questions

What differentiates the MA from the PG Dip? Is there an exit route other than BSc / MA etc?

# Detailed guidance:

# Level of qualification for entry to the Register

- 1. 1. The Council normally expects that the threshold entry routes to the Register will be the following:
- 1. 1. 1. Bachelor degree with honours for the following professions:

- chiropody or podiatry;
- dietetics;
- occupational therapy;
- orthoptics:
- physiotherapy;
- prosthetics and orthotics;

<sup>&</sup>lt;sup>1</sup> The Joint Validation Committee of the Radiographers Board no longer exists, and hence much of the content of the entire document has been superseded by HPC or Society of Radiographers guidance, however, this section is still relevant.

- radiography;
- speech and language therapy;
- biomedical science (with the Certificate of Competence awarded by the Institute of Biomedical Science (IBMS), or equivalent if appropriate); and
- 1.1.2 Masters degree for the arts therapies.
- 1.1.3 Masters degree for the clinical sciences (with the award of the Association of Clinical Scientists' Certificate of Attainment, or equivalent).
- 1.1.4 Equivalent to Certificate of Higher Education for paramedics.
- 1.1.5 Diploma of Higher Education in operating department practice for operating department practitioners.

#### Guidance

We expect that most of the programmes on our approved list will be at the standard which we have outlined above, but we realise that there may be some exceptions. We have determined the level above for each profession, based on what we think is needed in order for those who successfully complete the programme to meet all of the Standards of Proficiency.

This standard contains the word 'normally', to show that you may be able to design a programme which leads to a different qualification from that above, but which meets the rest of the Standards of Education and Training, and the Standards of Proficiency, and can therefore still be approved by us. We would expect to see that a programme meets the levels specified by the QAA and professional body (i.e. a Masters programme needs to be at a Masters level).

# **SET 2. Programme admissions**

# Summary

This standard concerns the admissions procedures for your programme, including the selection procedure, and the information provided to those involved.

# Overall guidance

Examples of the kinds of information that you could provide under this standard could include the information that is sent to students when they apply to you, information handed out at open days or interviews, any welcome/information pack sent in the post to successful applicants, or a copy of your section of the university prospectus.

The Visitors may want to be assured that you are keeping your admission procedures under review to evaluate their effectiveness and to guard against discrimination. You may therefore want to provide information about how you analyse application and admission patterns.

It is important that both your admissions staff and your applicants understand that when you assess applications, you are checking that person's suitability to do your programme, and that you are not assessing or giving any assurances about their eventual registration. This particularly applies to the sections of this standard which refer to criminal conviction checks, and health requirements.

Admissions staff, and applicants, should be aware that the offer of a place is not a guarantee of registration at the end of the programme, neither is it an opinion from the institution as to the likelihood of eventual registration.

When someone applies to us for registration, we will look at their application individually, and make a decision about their registration based on their own individual circumstances. We cannot offer future guarantees of registration, or definite indications that a future application for registration would not be successful.

### Further information

- Health Professions Council, Standards of conduct, performance and ethics
- Health Professions Council, A disabled person's guide to becoming a health professional
- Health Professions Council, Information about the health reference
- Quality Assurance Agency for Higher Education, Code of Practice for the assurance of academic quality and standards in higher education: Recruitment and admissions
- Quality Assurance Agency for Higher Education, Guidelines on the accreditation of prior learning

# Example questions

How much information do students get in advance?

What information do you give to applicants about the programme and in what format is this given?

How do you ensure students reach IELTS 7.0 on graduation?

What are your English language requirements?

Are your criminal records check requirements specified in detail for applicants? How do you ensure that overseas applicants undergo the same relevant checks as EU applicants?

What provision do you have to make initial health checks and any applicable immunisations?

What is the process for assessing an applicant's AP(E)L on entry? How often do you do it?

Do you give credit to applicants with AP(E)L?

How do you monitor / implement your equal opportunities policy?

How are applicants and students informed about your equal opportunities policy?

# Detailed guidance:

## 2. Programme admissions

The admissions procedures must:

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

#### Guidance

All of your entry requirements should be clearly stated in the information sent to interested potential applicants, with contact details of your admissions tutor or equivalent.

You may want to supply information to show how students are informed about accommodation costs and any other costs such as personal therapy (for therapists), driving tests (for Paramedics), criminal record checks, health checks, immunisations and any other costs that students will need to meet, including, the duration and possible location of their placements in advance, including whether they will need to stay away from the university, their travel, and how this is funded.

You should also ensure that none of your programme documentation gives students the impression that they will 'automatically' be registered with us once they have completed the programme.

You should make sure that your documentation clearly tells students that completing the programme means they are 'eligible to apply' for registration with us. Phrases like 'completing this programme entitles you to be registered with the HPC' or 'once you

have completed this programme, you will be registered' are potentially misleading, since all students need to *apply* for registration after they have completed their programme.

See also the guidance under SET 2.2.2 and SET 2.2.3, in order to ensure students understand that an offer of a place does not show that they automatically meet our standards, or that they will be registered with us in the future.

# 2. Programme admissions

The admissions procedures must

2.2 apply selection and entry criteria, including:

2.2.1 evidence of a good command of written and spoken English;

#### Guidance

We do not require that you interview applicants to your programme, but we do need information about your selection and entry criteria, with information about how these are applied.

Please see also SET 4.1, which requires that all those who successfully complete your programme must be able to meet the Standards of Proficiency. This means that any English language requirements you set at entry to the programme should take account of the fact that at the **end of the programme**, all students must meet the required level of English proficiency for the Standards of Proficiency for their profession.

Those students whose first language is English will not normally need to provide evidence of meeting an IELTS standard but may be required by the education provider to have passed English at GCSE or GCE level.

# 2. Programme admissions

The admissions procedures must

2.2 apply selection and entry criteria, including:

2.2.2 criminal convictions checks;

#### Guidance

You will probably run checks on your students through the Criminal Records Bureau, the Scottish Criminal Record Office or the Police Service of Northern Ireland, and we would expect that this would be 'enhanced' disclosure or equivalent, due to the positions of responsibility in which health professionals are placed.

See also the comments above in the general guidance for this standard, about the role of your staff in assessing applicants for your programme, and not for registration.

However, if you are considering an application from someone who has a criminal conviction, you may find it helpful to refer to our Standards of Conduct, Performance and Ethics, and consider how far any criminal conviction might impair that person's ability to meet those standards. You may also find it helpful to consult your practice placement educators as to whether they would be willing to accommodate the applicant. We will want to see what procedures you have in place if practice placement educators are not willing to accommodate a student after you have already accepted the student.

We will also like to see details of the actions you will take in the case of a positive criminal conviction declaration from a potential student. You may also have a mechanism for monitoring criminal records during the programme such as an annual self-declaration form that students sign, which you can provide for the Visitors as further information.

## 2. Programme admissions

The admissions procedures must

2.2 apply selection and entry criteria, including:2.2.3 compliance with any health requirements;

#### Guidance

'A disabled person's guide to becoming a health professional', is available with information for disabled applicants to approved programmes, and for admissions staff on considering applications from disabled people.

We have also published a document called 'Information about the health reference' with information for applicants and doctors about the health reference.

See also the comments above in the general guidance for this standard, about the role of your staff in assessing applicants for your programme, and not for registration.

Information regarding any preparation e.g. vaccinations, that students need before practice placement should be available to candidates before they begin their programme of study.

Health checks must be carried out as part of the admissions process. Requirements vary across the professions and we will want to see that you are explicit in the information you give to students. For example, some programmes will require immunisations whilst others will not. It is your responsibility to have systems in place to carry out health checks on all students, including those working in the NHS and private practice.

## 2. Programme admissions

The admissions procedures must

2.2 apply selection and entry criteria, including:2.2.4 appropriate academic and/or professional entry standards;

#### Guidance

The Visitors will want to be assured of your academic and / or professional entry standards, and also how you communicate these standards to applicants, and how they are applied.

# 2. Programme admissions

The admissions procedures must

2.2 apply selection and entry criteria, including:2.2.5 Accreditation of Prior Learning and other inclusion mechanisms.

#### Guidance

You must demonstrate that you have a system for accrediting prior learning, and show how this is implemented. You may wish to show how your AP(E)L policies are stated clearly to applicants, including any details of charges that education providers may make for this administrative work (this information may also be relevant to show how you meet SET 2.1) You should also ensure that students who are eligible for AP(E)L are able to meet the Standards of Proficiency for their profession when they successfully complete the programme. We will want to see that it has been made clear to potential students that A(P)EL does not usually apply to post-registration programmes.

The Visitors will need to be assured that students' prior learning is mapped against the learning outcomes for a programme / individual modules and a correlation ensured between that prior learning and that which is developed / assessed within the programme in question. You will need to show what the upper limit for A(P)EL is and how it is determined.

## 2. Programme admissions

The admissions procedures must:

2.3 ensure that the education provider has an equal opportunities and anti-discriminatory policy in relation to candidates and students, together with an indication of how this will be implemented and monitored.

#### Guidance

See also the guidance under SET 3.10.

The Visitors will need to be assured that you have an equal opportunities and antidiscriminatory policy.

You may have a separate policy for equal opportunities, and one for anti-discrimination, or the documents may be published together, or perhaps your equal opportunities policy also tackles how you will deal with discrimination. Your department, school or programme may have its own policy, or your University may have a policy that applies to you.

This is not problematic, as long as the Visitors have sufficient evidence to show that you have these policies in place, and that they are implemented and monitored at a school / department level.

The Visitors may also want to see that information that you give to students (for example, a student handbook) includes this policy, with information about the procedure to follow if a student feels that discrimination has occurred. You may also want to show what information students are given about the policies regarding placements.

# SET 3. Programme management and resource standards

# Summary

This standard concerns the management of the programme, and the resources available to the academic and support staff, and to the students on the programme.

# Overall guidance

Visitors will usually take note of the on-site resources available during their **tour of the library and facilities**. Notes taken on this tour may help to show the Visitors how you meet this standard. You might want to use the tour to draw attention to facilities which you feel meet the standards particularly effectively.

Visitors may also want to ask questions of the **programme team**, regarding how well the policies and procedures that you outline in your documentation are working in practice. Questions that the Visitors ask the **practice placement educators** about the management of placements, and the resources available during placements may be relevant to this standard, as well.

Visitors may also ask questions of **senior managers** (**eg head of department**) about the whole of SET 3.

## Further information

- Quality Assurance Agency for Higher Education, Code of Practice for the Assurance of Academic Quality and Standards in Higher Education
- Department of Health, Partnership Framework for Quality Assurance of Healthcare Education

# Example questions

Do you use visiting lecturers? If so, how do you quality assure them?

Do you have annual staff appraisals?

Do you do peer observation as part of staff development? If so, does it feed into staff appraisals?

Do students participate as clients in teaching? If so how do you get their consent? How do you monitor student attendance? If students don't attend what mechanisms are used to follow this up?

Can students access IT and library resources remotely or at weekends?

# Detailed guidance:

## 3. Programme management and resource standards

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

#### Guidance

The Visitors would normally need to see a business plan, to assure themselves that the programme was secure within the institution, not under any threat, and adequately supported.

A 'secure place' means that the education provider is committed to providing adequate resources to deliver the programme; the risks or threats to programme delivery are minimal; that there is a long-term future for the programme within the education provider's range of provision.

The questions for this SET will be directed mainly at senior managers and workforce development confederation (WDC) planners. There must be clear information concerning partnerships and collaborations with other education providers.

As part of your documentation, you may wish to include university planning statements, as returned to HEFCE, SHEFC, HEFCW and Department of Health Commissioners, if appropriate.

You could, for example:

- explain the institutional context of your programme; e.g. in terms of how it fits with its research profile and strategy;
- demonstrate how programme management and oversight of resources and capacity
  are undertaken in partnership with providers of practice-based learning to ensure
  the effective development, delivery and on-going review of your programme;
  and/or
- explain your processes for reviewing the delivery of your programme and the related need for development and capacity building.

## 3. Programme management and resource standards

3.2 The programme must be managed effectively.

#### Guidance

The Visitors may ask questions of the **senior managers** (e.g. head of department, Dean and WDC planners), in order to assure themselves that this standard is met. Evidence you could provide that would help to show you meet this standard might include:

- external examiner reports and your response to these reports;
- a critical review of current provision;
- analysis of student feedback through module evaluations; placement evaluations; programme committees; staff student liaison committees;
- placement provider feedback through placement audits and evaluations; partnership meetings;
- analysis of tutor feedback through module evaluations; programme committees; annual reports;
- quality audits of practice placements; and
- clear action plans and evidence of action taken.

If the programme proposal is new, the Visitor must be convinced there are effective systems in place to manage the programme and that individuals involved have the skills and expertise to work within these systems.

Where a partnership exists for a third party to deliver the academic content of the programme (e.g. another education provider, or where a Trust employs the academic staff as well as the practice placement educators) then Visitors may ask to see the partnership agreement and ascertain under whose regulations and disciplinary procedures both students and staff exist. The Visitors will want to be assured that there are clear procedures to deal with any problems in this area, and these should be explicitly written into any partnership agreement.

# 3. Programme management and resource standards

3.3 There must be a named programme leader who has overall responsibility for the programme and who should be either on the relevant part of the HPC Register or otherwise appropriately qualified and experienced.

#### Guidance

You will probably wish to supply the **CV of your programme leader**, to show how you consider them to be 'appropriately qualified and experienced'.

We expect that your programme leader will normally be registered with us. However, we

recognise that it may be possible for a programme to be led by someone who is not registered in the relevant part of the Register. If this is the case, you should show more detail about their qualifications, and their experience (and if they are not registered, then you must ensure that their job title does not give the impression that they are registered by using a protected title).

If your programme leader is not registered in the relevant profession with us, then the Visitors may wish to see information about how they are supported in their role by ready access to relevant profession-specific information.

The information that you can provide the Visitors with about your programme leader might include: evidence of previous effective programme leadership, an ability to effectively organise the delivery of the programme, a professional qualification, or an educational qualification.

## 3. Programme management and resource standards

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

#### Guidance

See also the guidance under SET 3.2.

We do not set staff / student ratios, but our Visitors will want to be assured that there are enough staff to deliver the programme effectively, without compromising our standards. The Visitors may want to look at the staffing within the context of your health and social care provision, and the staffing resources to support this. For example, the involvement of your staff in other programmes in the same profession, your expected research activity, or you inter-professional learning and teaching, all might impact on staffing capacity for the programme under consideration. Visitors will require information on what administrative and/or technical staff are in place to support the programme and their experience and qualifications if appropriate.

You will probably wish to take account of the practical requirements of your programme, and the potential need for small group teaching when determining the number of staff required. You may also require clinical as well as academic experience within your staff expertise.

The information that you give the Visitors about staffing at your placements (SET 5.2) will also be relevant to this standard.

## 3. Programme management and resource standards

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

#### Guidance

Your **staff CVs** will probably address this SET.

The programme team must demonstrate to us that the staff on the team, and any others used to deliver the programme (such as sessional lecturers) are qualified to deliver the programme. We do not specify the precise expertise and knowledge which are required in order to deliver certain aspects of your programme, since we feel that this may change as best practice develops, and we do not want to set requirements which would hinder the development and enhancement of programmes.

Visitors may also consider the input from 'specialist visiting lecturers' and the expertise and knowledge that they bring to the programme balanced against quality of delivery and continuity of student experience. If visiting lecturers teach on your programme, the Visitors may want to know how you assure their teaching quality.

## 3. Programme management and resource standards

3.6 A programme for staff development must be in place to ensure continuing professional and research development.

#### Guidance

It is important that all staff, including part-time staff, practice placement educators and visiting lecturers, have the opportunity to develop and maintain their professional skills, in order to ensure that they continue to deliver the programme effectively.

The Visitors will want to be assured that there is a staff development policy. This could be supported by:

- departmental planning documents;
- staff development strategies;
- CVs;
- staff appraisal systems;
- staff profiles;
- professional development portfolios; and
- keeping up-to-date with professional body guidance.

The Visitors may want to ask members of your **programme team** about how this works, and how accessible and available staff development is. They may ask your **practice placement educators** about the ways in which they are supported by you in their

development. They will also want to know about any peer observation or mentoring schemes that are run and what training is available to new lecturers.

# 3. Programme management and resource standards

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

#### Guidance

'Resources' in this context may include:

- student handbooks and module guides;
- Information Technology (IT), virtual learning environments and other specialist programs;
- academic and support staff;
- buildings;
- books;
- equipment; and
- materials.

This standard means that resources must not only be available, but should also be used effectively. You could therefore provide information about how students are given access to resources including, for example, how equipment booking systems are implemented, or how laboratory resources are utilised. (The Visitors will look separately at your library provision, see SET 3.13)

The Visitors will want to be assured that resources are effectively used on placement, so as part of your evidence to show that you meet this standard, you could demonstrate to the Visitors how you support student learning in a practice placement setting. They will also want to see how students who are employed and studying part-time or doing post registration qualifications are catered for in their placements or place of work.

The Visitors may wish to see evidence of the evaluation of effectiveness of the deployment and use of resources in your quality assurance mechanisms and reports.

# 3. Programme management and resource standards

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3.8 The facilities needed to ensure the welfare and well-being of students must be both adequate and accessible.

#### Guidance

To meet this standard you will need provide evidence regarding the facilities for student support, how students are informed, and how accessible they are. Visitors will need

assurance that appropriate support facilities are in place and these could include, counselling, health centre, medical advice, etc.

See also SET 5 regarding support for students on practice placement.

## Programme management and resource standards

3.9 Where students participate as patients or clients in practical and clinical teaching, appropriate protocols must be used to obtain their consent.

#### Guidance

This standard is primarily concerned with prevention of injury and/or emotional distress and helps to ensure that education and placement providers acknowledge risk factors. The level of participation of students will vary from profession to profession and may not be applicable to all programmes. Professional bodies will have information about this.

Examples of activities where you will need to have a protocol for gaining student consent include:

- role play;
- bio-mechanical assessments;
- patient positioning through manipulation of bony anatomical landmarks; and
- practising profession-specific techniques.

You should make potential candidates aware of the expectations of the programme regarding the level of participation expected by and from the student, taking account of, for example, the cultural differences or personal medical health of the individual. In your cross-referencing document, you could refer the Visitors to how this is made clear in the programme documentation, or student handbook, and included in the programme recruitment and admissions procedures, for example.

The Visitors will want to satisfy themselves that mechanisms for gaining consent are clearly in place. When it is applicable we will want to see evidence, such as a copy of a consent form. They will need to be provided with a copy of relevant protocols, and they may in addition ask questions during their meetings with students or placement providers.

## Other possible sources of guidance

Chartered Society of Physiotherapy, Guidelines of Good Practice – Student Consent, Information for HEI Physiotherapy Programmes and Physiotherapy Students

# 3. Programme management and resource standards

3.10 A system of academic and pastoral student support must be in place.

#### Guidance

See also the guidance under SET 3.8.

To show how you meet this standard, you can supply the Visitors with information about the support that you offer to students. Visitors may wish to see how your systems can support students, for example those on part-time, in-service or work-based learning, or mature or disabled students.

If you operate a personal tutor system, you will probably wish to provide information on how this operates to show how you meet this standard. Or you could show how you support students with dyslexia, including how they are supported on placement. In addition, Visitors may ask **students** about how well they feel the support systems are working. Evidence should also be provided on support for students during periods of sick leave/carers leave or any other unexpected leave the student requires to take. You may also like to detail financial, counselling and specialist teaching or learning facilities.

# 3. Programme management and resource standards

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

#### Guidance

See also the guidance under SET 5.5.

You should provide information to the Visitors to demonstrate when attendance is mandatory, and when it is not. You should show the Visitors how you monitor attendance, for example by a lecture register. You must show the systems you have in place for implementing this, for example the action that is taken if students do not attend mandatory parts of the programme. Where attendance is linked to assessment, the mechanisms for monitoring assessments must be clarified.

The Visitors will need to assure themselves that all students can meet all of the standards of proficiency in order to be able to practise safely and effectively. This means, for example, that aspects of the programme which are essential in order to ensure that students met the Standards of Proficiency will need to be mandatory, with attendance monitored, and lack of attendance followed up to ensure that students gain this knowledge before they complete the programme.

DD: None

The Visitors will probably wish to be assured that your requirements, and any consequences of missing mandatory teaching, are clearly communicated to students, for example in a **student handbook** or equivalent.

## 3. Programme management and resource standards

3.12 The resources provided, both on and off site, must adequately support the required learning and teaching activities of the programme.

#### Guidance

During the **tour** of facilities, you should show the Visitors evidence of resources, which may include lecture theatres, tutorial rooms, presentation equipment, specialist labs and equipment. Your documentation may then show the Visitors how these resources support your programme's learning and teaching activities.

'Off-site' could refer to, for example, a second site where parts of the programme are delivered, or to resources that are available to students on practice placements. The Visitors may not need to see lecture rooms, but will be interested to see other resources such as skills laboratories.

## 3. Programme management and resource standards

3.13 The learning resources, including the stock of periodicals and subject books, and IT facilities, including internet access, must be appropriate to the curriculum and must be readily available to students and staff.

#### Guidance

You should provide information in your documentation regarding the learning resources provided for students and for staff, and in addition, you may wish to draw the Visitors' attention to the learning resources during the course of the **tour** of the library and facilities, including Information Technology (IT) facilities and any profession specific resources.

The Visitors will wish to assure themselves of the quantity, accessibility and currency of resources. They will therefore wish to be assured that stocks are kept up to date, that there is sufficient budget for replenishment, that there are sufficient stocks of core texts (or that arrangements are made such as reserving certain titles for reference only, or short term loan, or similar), and that opening hours etc. mean that the facilities are available to students and to staff.

You may wish to cross-reference your evidence under this standard to the information in

SET 4.4 'The curriculum must remain relevant to current practice', to show how your resources remain up to date with developments in the programme, and your profession.

In addition to your library facilities, the Visitors will also need to assure themselves that your IT facilities are appropriate, and readily available. They may **ask the students** how easy they found it to access computers, and whether they considered the number of computers available to be adequate for their needs. If you are using a virtual learning system such as WebCT or Blackboard it can be helpful to the visitors to see a demonstration of how this is used during the **tour** of the library or the IT suites.



# **SET 4. Curriculum standards**

# Summary

This part of the standards is concerned with the curriculum: ensuring that graduates meet our standards for their professional skills and knowledge, and are fit to practise. We have created a set of enabling curriculum standards which will allow you to design your own programme. You may choose to do this by following a curriculum framework document produced by a professional body, where this is available.

# Overall guidance

Professional bodies may be involved in designing curriculum frameworks. We do not set more detailed standards for curricula, or prescribe more detail about the content of programmes and how they are delivered.

Different professional bodies are at different stages regarding curriculum frameworks: some have been engaged in this for some time, certain professional bodies are beginning to develop this, and some professional bodies may not get involved in this area. For a list of documentation, please see the back of this document, or our website.

### Further information

- Health Professions Council Standards of Proficiency
- Professional body:
  - curriculum outlines; and
  - codes of professional conduct.

(where available). See the back of this document for a list of publications.

- Department of Health, Partnership Framework for Quality Assurance of Healthcare Education
- Quality Assurance Agency for Higher Education, Subject benchmark statements
- Quality Assurance Agency for Higher Education, Code of practice for the assurance of academic quality and standards in higher education

# Example questions

What drives the design of your curriculum?

Would you explain the overall coherence of the programme and how a student progresses from day one to graduation?

Can you explain how the learning outcomes of the programme meet the Standards of Proficiency?

Would you clarify how, on qualification, your students will be able to use a range of approaches in their practice?

What teaching methods do you use, and why?

Would you explain the rationale for the programme content and the balance between the number of hours for different subjects covered?

How do you ensure your curriculum stays relevant to current practice?

# Detailed guidance

### 4. Curriculum standards

4.1 The learning outcomes must ensure that those who successfully complete the programme meet the Standards of Proficiency for their part of the Register.

#### Guidance

This is one of the most crucial standards, and one that we advise you to address by completing the Standards of Proficiency cross-referencing document that we provide. Please ensure that you cross-reference against the generic, and also the profession-specific parts of the standards.

You should refer the Visitors to the module descriptors, or their equivalent, learning outcomes and module assessments which show how all of the Standards of Proficiency are addressed by successfully completing the programme.

The Visitors will want to assure themselves that every student completing the programme can meet all of the Standards of Proficiency, no matter what option modules they choose, or if they have had a period of deferral.

As well as the cross-referencing document we will send you, you can download a copy of the Standards of Proficiency for your profession from our website, in the publications section.

You should also be aware that in considering how your students can meet the Standards of Proficiency at the end of their programme, you can take into account any reasonable adjustments you have made to the way that you deliver the programme to disabled students.

When the Visitors meet with students they are likely to ask them if they are aware of the Standards of Proficiency and we welcome the inclusion of these in your reading lists.

# Other sources of guidance

- Health Professions Council, A disabled person's guide to becoming a health professional (anticipated 2006)
- Health Professions Council, The Standards of Proficiency

#### 4. Curriculum standards

4.2 The programme must reflect the philosophy, values, skills and knowledge base as articulated in the curriculum guidance for the profession.

#### Guidance

The area of curriculum guidance (or curriculum outline / framework ) is one where the professional bodies for each profession are particularly involved. Professional bodies may be involved in designing curriculum or similar detailed work around the philosophy, values, skills, and knowledge base for their profession. (see also the overall guidance for this section, above)

In meeting this standard, you may therefore refer to any relevant professional body documentation. If no relevant documentation is produced by your professional body, then you may refer to the QAA Benchmark Statements for your profession.

# Other sources of guidance

Profession specific sources of guidance may include professional body:

- curriculum frameworks:
- practice placement standards;
- good practice guidelines;
- clinical guidelines; and
- codes of practice.

(where available).

Examples of multi-professional key external reference frameworks could include:

### **Education and Quality**

- Quality Assurance Agency for Higher Education, subject benchmark statements;
- Quality Assurance Agency for Higher Education, Code of practice for the assurance of academic quality and standards in higher education
- Quality Assurance Agency for Higher Education, Qualifications Framework for England, Wales and Northern Ireland
- Quality Assurance Agency for Higher Education, Qualifications Framework for Scotland

#### Legislation

- Disability Discrimination Act 1995
- Human Rights Act 1998
- Health and Safety at Work Act and regulations there under, for example
  - Ionising Radiation Regulations 1999
  - Ionising Radiation (Medical Exposure) Regulations 2000

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The Children Act 1989

#### **Health and Social Care Policy**

- National Service Frameworks
- National Occupational Standards
- Knowledge and Skills Framework (Department of Health 2003)

See the list at the back of this document for a list of publications which you may find useful.

### 4. Curriculum standards

4.3 Integration of theory and practice must be central to the curriculum to enable safe and effective practice.

#### Guidance

See also the guidance under SET 5.1 and SET 5.5.

The visitors will be looking for evidence within your curriculum documentation that theory and practice are integrated within both the academic and practice placement settings.

You could demonstrate how you meet this standard specifically through your programme design. Also, your quality control mechanisms may provide evidence of successful integration, and you could highlight specific aspects of your programme delivery where it is clearly demonstrated.

### 4. Curriculum standards

4.4 The curriculum must remain relevant to current practice.

#### Guidance

Examples of the kinds of evidence you could refer to in order to show how you meet this standard could include:

- regular contact with employers;
- staff CVs, which might include information about how you maintain currency through the ongoing clinical or research experience, or professional activity of members of the programme team;
- evidence of where research and scholarly activity impact on the programme, and programme development;
- peer-reviewed journals used in curriculum;
- QAA major review reports;

- evidence of the contribution of stakeholders (placement educators, employers, practitioners, past and present students, service users, workforce development confederations/strategic health authorities) in the programme planning process; and
- evidence of how changes in policy and health and social care developments affect your programme's development.

You may want to provide information about how current external frameworks and drivers influence the profession, and hence influence the education and training that you provide, and how your programme design and delivery:

- anticipate or reflect change in health and social care and its organisation, changes in legislation, and in patient need;
- absorb and reflect developments in a profession's research base and technological advances; and
- nurture students' capability to be responsive to and to initiate effective change in practice.

### 4. Curriculum standards

4.5 The delivery of the programme must assist autonomous and reflective thinking, and evidence based practice.

#### Guidance

Most questions regarding this SET will be directed to the programme team and students. Students should be encouraged to reflect upon their own practice, the limits of their safe and effective practice, and their accountability, to ensure that they are safe autonomous practitioners when they graduate.

The Visitors will look for evidence of autonomous and reflective thinking, and evidence-based practice through student-centred and independent learning, teaching and assessment strategies. The evidence that you could refer to in order to show how you meet this standard could include:

- self appraisal with subsequent planning and writing of action plans;
- discussion groups;
- workshops;
- practice simulation and debriefing;
- reflective diaries or logs;
- professional development portfolios or personal development plans; and
- practice placement reviews.

We do not require that undergraduate students write a dissertation in order for you to meet this standard. Evidence based practice could be demonstrated, for example, by a research methods course, or the production of a research proposal.

## Other sources of guidance

- Professional body:
  - codes of ethics; and
  - guidance on reflective practice.

(where available). See the back of this document for a list of publications.

## 4. Curriculum standards

4.6 The range of learning and teaching approaches used must be appropriate to the subjects in the curriculum.

#### Guidance

In this standard, the term 'subjects' includes practice placements, so the information that you provide here may also be used to show how you meet SET 5, which is concerned with practice placements.

'Appropriate' means appropriate to the learning outcomes required, both theoretical knowledge, and the practical skills required in professional practice.

Meeting this standard means that you will need to show that you employ a 'range' of learning and teaching approaches in delivering the programme. We do not specify how many approaches you should adopt, but it is unlikely that a programme which relied on only one learning and teaching approach would be able to give evidence to show that it met this standard.

NB: This standard will also inform SETs 4.3, 4.4 and 4.5

# Further sources of guidance

• The Higher Education Academy website www.hea.ac.uk

#### 4. Curriculum standards

4.7 Where there is inter-professional learning the profession specific skills and knowledge of each professional group must be adequately addressed.

#### Guidance

We recognise that where inter-professional learning exists, and is successful, it can develop students' capacity for collaboration and communication with other members of the health and social care team, which will foster effective working with others.

However, we also recognise that you may not be able to offer inter-professional learning, since capacity to do so may depend on your total provision, and structure, and other factors beyond your direct control. Here, therefore, we only specify that if your programme includes inter-professional learning, you must ensure that the skills and knowledge of each separate professional group are adequately addressed.

To show how you meet this standard, you might provide information about which parts of the curriculum are shared, and which are not, with the rationale behind this, and the ways that you see inter-professional education developing in your institution, and how it benefits those groups which participate.

## Further sources of guidance

• UK Centre for the Advancement of Interprofessional Education, Interprofessional education



# **SET 5. Practice placements standards**

# Summary

This section of the standards concerns your practice placements. We do not normally need to approve individual practice placements, however, we may visit practice placements if specific queries have been raised about whether your placements meet our standards.

The responsibility for assuring the quality of the placement lies with you: the education provider. We will want to see what mechanisms are in place for the approval and monitoring of placements. If you share practice placement arrangements with another education provider, you will each need to separately demonstrate approval and ongoing quality assurance of placements. You should also have arrangements in place to ensure that your own learning outcomes can still be achieved.

We need to see evidence about the way that you manage your placements, support and provide information to your students and practice placement providers, and monitor the placements to ensure that they continue to be useful, and to meet our standards.

# Overall guidance

In order to assure themselves that you meet all of the standards for practice placements, the Visitors will normally wish to see:

- a practice placement handbook for students; and
- a practice placement handbook for practice placement educators / coordinators.

You may produce documents which have a different title, or this information may be published in some other form, with other documentation, or online. This is not necessarily a problem, as long as in doing so you can show that you can meet all of the standards below.

The Visitors would normally also meet with **practice placement educators**, and they may raise questions relating to the information in the documentation you have provided, or any standards which raised queries.

Please note that we do not make specific requirements regarding the duration, structure, organisation or timing of placements. Other organisations may have set requirements of a certain number of hours of clinical contact, or a number of weeks that a placement must last. While you may wish to meet these, you should be aware that we do not make these requirements of you, and that it is not necessary to meet these in order for us to approve your programme, however, you must demonstrate that whatever structures you have in place meet the SETs and SoPs. See SET 5.5 for more information on this.

The Visitors will want to be assured that there is evidence of clinical governance within the practice placements where students are allocated. These will normally be through the three main themes, namely:

- improving patient care informed choice, philosophy of care, risk management
- professional development of staff CPD, education & training (lifelong learning) and the investment in staff
- organisational development demonstration of evidence-based practice (research basis of care planning & delivery) examples of good practice - (implementing change)

Overall clinical governance should be seen as a process for the review of, and the improvement of patient care delivery which is achieved through outcome based practice. Therefore the Visitors will need to be assured that there is evidence of a quality assurance system to support both the student and the patient experience within the practice placement.

# Example questions

Questions that the visitors ask may include such areas as:

- student progression;
- visits to placements;
- quality assurance; and
- support of practice placement educators.

### Further information

- Health Professions Council, Standards of Conduct, Performance and Ethics
- Professional body practice placement guidelines (where available)
- NHS Education for Scotland, The Development of Quality Standards for Practice Placements.
- Quality Assurance Agency for Higher Education, Code of Practice for the Assurance of Academic Quality and Standards in Higher Education: Placement Learning,
- Department of Health, Placements in Focus: Guidance for education in practice for health care professions
- Northern Ireland Department of Health, Social Services and Public Safety, Review of Clinical Placements for the Allied Health Professions
- Making Practice-Based Learning work, Case studies in Dietetics, Occupational Therapy, Physiotherapy and Radiography

# Detailed guidance

## 5. Practice placements standards

5.1 Practice placements must be integral to the programme.

#### Guidance

See also the guidance under SET 3.1 and SET 4.3.

The structure of your programme must show that practice placements are an integral part of the programme. You could demonstrate this through reference to your ongoing partnership arrangements with your practice placement educators, the way that they are supported and encouraged to participate in programme development, the way that the practice placement learning outcomes and progression are aligned with the rest of the programme, and through your rationale for your placement structure.

## 5. Practice placements standards

5.2 There must be an adequate number of appropriately qualified and experienced staff at the placement.

#### Guidance

The Visitors will want to assure themselves that there is an adequate number to ensure that the students are supported in their learning in a safe practice environment. However, we do not dictate how many staff must be present at each placement (nor that those staff must be registered with us) as we acknowledge that there are different models of practice-based learning.

If the staff present at certain placements are not registered with us, then you may want to provide information about their professional qualifications (and their registration with other regulators or organisations, if appropriate) and also to show how their qualifications are appropriate to the placement, and to the learning outcomes. We will want to see job descriptions and recruitment policies of the placements so that they can see how they are qualified to teach/supervise students

We are aware that different professions practise different models of practice placement, including the relationship with the practice educator/supervisor. For instance a one to one relationship may be the ideal for many professions whereas there may be four or five students to one supervisor in others. The Visitors will look for evidence in documentation, and at meetings with the programme team and placement educators, that you have clearly justified what you consider to be adequate numbers and ratios. Ratios

may also vary according to the level of support needed by the student.

## Other sources of guidance

Possible definitions of the terms 'qualified and experienced', with specific suggestions for ways to meet this requirement, may be found in professional body curriculum documentation.

## 5. Practice placements standards

5.3 The practice placement settings must provide: 5.3.1 a safe environment;

#### Guidance

See also the guidance under SET 5.7.

A safe environment means one where staff and student have carried out relevant assessments of risk within the area of practice and where safety policies and procedures are in place. In showing how you meet this standard, you may therefore show the Visitors evidence of your consideration of issues which may include:

- physical risk from equipment;
- risk from substances hazardous to health;
- radiation risk;
- fire safety; and
- infection control.

Placement induction processes should clearly articulate how risks and safety issues are brought to the student's attention.

Placements should adhere to all elements of clinical governance to ensure protection of the public.

You could also provide information about how you quality assure your placements, including whether, as part of this, you require your placement providers to give you information about their health and safety policies. Information that you have provided for SET 3 about student support may also be relevant to how you meet this standard, and you may wish to cross-reference it here.

You could also show how you enable students to assess risk in clinical situations, and to make measured, professional decisions. (This kind of evidence may also be relevant in showing how you meet SET 4.5)

## Other sources of guidance

Any Health and Safety documentation produced by:

- education provider;
- professional bodies;
- NHS:
- Institute of Health Care Development; and
- Institute of Biomedical Science.

(where available).

## 5. Practice placements standards

5.3 The practice placement settings must provide: 5.3.2 safe and effective practice.

#### Guidance

See also the guidance under SET 5.7 and SET 5.11.

In showing how your placements provide for safe and effective practice, you could refer the Visitors to how you map your placements against learning outcomes, and you could explain the resources available to students (including, for example, learning contracts, portfolios, library provision, e-learning resources) and how the role of the practice placements educators helps to ensure that the students can practice safely and effectively.

You could also show how you enable students to assess risk in clinical situations, and to make measured, professional decisions. (This kind of evidence may also be relevant in showing how you meet SET 4.5). Risk assessment is often found in the curriculum and the documentation that prepares students and educators for placements.

## 5. Practice placements standards

5.4 Learning, teaching and supervision must be designed to encourage safe and effective practice, independent learning and professional conduct.

#### Guidance

The Visitors will want to be assured that your placements prepare your students for entry into their profession. You should provide evidence about how your programme prepares your students for independent learning on placement, and how they are equipped with the resources and skills to work more autonomously. Visitors will want to see information about how students learn about the conduct expected of them on placement; you could relate this to any teaching about our standards.

The evidence that you could refer to might include:

- reflective logs or diaries;
- professional development portfolios;
- tutorial records; and
- placement reports.

This kind of information could also be relevant to showing how you meet SET 4.5, and SET 5.3.2.

### Other sources of guidance

- Health Professions Council 'Standards of conduct, performance and ethics'
- Professional body standards of conduct /codes of ethics.

# 5. Practice placements standards

5.5 The number, duration and range of placements must be appropriate to the achievement of the learning outcomes.

#### Guidance

Visitors will want to be assured that there is a clear rationale for the chosen number, duration and range of placements. We do not dictate the number, length or range of placements that you must include in your programme in order to meet our standards.

Visitors may want to see that all students gain access to a breadth of learning experiences in a variety of practice environments so as to reflect the nature of contemporary practice and practice settings of the profession to which they are preparing for entry. You may want to provide information about how you support students in recording and articulating how their learning in practice environments relates to the core areas of practice of that profession.

The Visitors may also want to know about how students are expected to progress in terms of their clinical skills during the placements, and how, therefore, the learning outcomes for the first placement differ from those of the final one. Evidence that could be provided might include a map of the programme and details of assessment.

## 5. Practice placements standards

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

#### Guidance

In order to show how you meet this standard, you will need to provide the Visitors with information about how you approve placements before you use them, and also how they are subsequently monitored. We do not visit placements and give open-ended approval subject to annual monitoring, which means that we need to be assured that systems need to be in place to approve new placements. If the placement is with a third party, you will need to show that you audit this effectively.

The evidence to support this could include:

- policies and processes for initial approval of placements;
- examples of how these are implemented;
- mechanisms for ongoing monitoring and audit of placements;
- how feedback from students is collected, analysed and acted upon;
- how you gain feedback from practice placement educators and co-ordinators, and ensure that channels of communication are clear;
- how you feed this information back into your processes; and
- policies or processes for how you deal with placements where difficulties arise.

### 5. Practice placements standards

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

#### Guidance

See also the guidance under SET 5.9 SET 5.10.

In order to demonstrate to the Visitors how you meet this standard, you will need to show not only that this information is provided to students and to practice placement educators, but also that this information is accessible to them, and that it is provided with adequate time for following up any queries they have.

You might want to show how the information is provided, and also how you ensure that students and practice placement educators have understood the information that you have given. This might be through follow-up training, or teaching, or opportunity for discussion. This could be in your **student handbook**, **practice placement handbook**, or equivalent. The Visitors may ask questions during their **meeting with the students or with the practice placement educators** to find out how well-informed they feel about the expectations of them and their responsibilities during a placement.

See also the guidance provided for SET 5.11

## 5. Practice placements standards

5.8 Unless other arrangements are agreed, practice placement educators: 5.8.1 must have relevant qualifications and experience;

#### Guidance

See also the guidance under SET 5.2.

Visitors will want to be assured that your practice placement educators have the knowledge, skills and experience to support students adequately and to ensure that they have a safe environment for effective learning. We do not make specific requirements regarding the qualifications and experience that they must have.

Your professional body may offer an accreditation scheme for practice placement educators. (For example, the College of Occupational Therapists, and the Chartered Society of Physiotherapy offer schemes of this nature.) If you participate in such a scheme, you could provide the Visitors with information about how it operates and how you ensure that each placement has been approved.

# 5. Practice placements standards

Unless other arrangements are agreed, practice placement educators: 5.8.2 must be appropriately registered;

#### Guidance

Normally, your practice placement educators will be registered with us in the relevant profession. However, it is reasonable to assume that there are other entirely appropriate practice placement educators who do not have a profession-specific background which matches that of the student. For example, occupational therapists may supervise physiotherapy students in areas such as hand therapy; nurses may supervise radiographers in aseptic techniques.

Because this standard contains the text 'unless other arrangements are agreed', this means that your practice placement educators may include health professionals who are not registered with us, but are registered with another statutory regulator, or members of a relevant voluntary register, or not registered at all. If you choose this, then you will probably wish to provide additional information to the Visitors to assure them of the practice placement educator's experience, qualifications and training, and how this is relevant to the placement, and how this facilitates your students' learning. The Visitors will want to be assured that arrangements are in place to support these educators.

## 5. Practice placements standards

Unless other arrangements are agreed, practice placement educators: 5.8.3 must undertake appropriate practice placement educator training.

#### Guidance

We expect that you will wish to train all of your practice placement educators, and to follow this up with refresher training at intervals, as well as making provision for new practice placement educators.

We do not make specific requirements for this training, either in length or content, since we feel that this level of detail is best decided by individual education providers. There may be best practice in other organisations, or advice published by other bodies about the content that you will wish to cover. Your training may take a variety of forms e.g. attendance at the education provider institution for training; training in the workplace; online support; written support; peer support through workshops and meetings.

Practice placement educator training requirements will vary across the professions and also between education providers. Those education providers who use the same placements regularly and recurrently and have relatively low staff turnover may need less ongoing training for practice educators/supervisors. Where placements are used less regularly or where staff turnover is high, training should be more regular.

Visitors may want to see evidence of training for these placement providers involved in either formative or summative assessment to ensure consistency of assessed standards across all placements (see also SET 6)

Because this standard says 'unless *other arrangements are agreed*', it is possible for a programme to be approved that does not make provision for practice placement educator training. However, if you choose not to provide training, the Visitors will want to see how you give information to your practice placement educators in order to assure themselves that you meet SETs 5.3, 5.6 and 5.7. If you anticipate not meeting this standard, then please contact the Education Officer organising your visit, who can forward information to the Visitors for their comment.

# 5. Practice placements standards

5.9 There must be collaboration between the education provider and practice placement providers.

#### Guidance

See also the guidance under SET 5.8.

Visitors will need to be assured that you collaborate regularly with your practice placement providers. This might take the form of regular meetings or channels of communication with your practice placement providers, or systems whereby they feed back on their experience of supervising students on placement, or ways in which placement providers influence the structure of the placements or programme planning and design. Any information that you can supply which shows a partnership and ongoing relationship and not one that only occurs around the time of programme approval and quality monitoring will help to show the Visitors how you meet this standard.

## 5. Practice placements standards

5.10 The education provider must ensure necessary information is supplied to practice placement providers.

#### Guidance

See also the guidance under SET 5.8.

The Visitors will want to be assured that necessary information is supplied, and also *how* it is supplied to practice placement educators. This information might include:

- names of students and their year of study;
- information about the responsibilities of practice placement educators, their role in the programme, and expectations;
- induction information;
- programme management information;
- information about supporting disabled students on placement;
- contact details, both routine and emergency; and
- details of learning outcomes of placements.

We expect that some of this information will normally take the form of a **practice placement educators handbook**, or equivalent. This would normally be supplied to practice placement educators prior to the beginning of a placement.

### 5. Practice placements standards

5.11 Practice placement providers must ensure necessary information is available at the appropriate time for both the education provider and students.

#### Guidance

See also the guidance under SET 5.9 and SET 5.7.5.

In order to meet this standard, you should show how you ensure that students receive information from the practice placement providers, and that you are in receipt of the information you need from placement providers.

'The appropriate time' may mean, for example, that pre-placement information is provided in advance of the placement, with adequate time for both parties to read the information, and to ask any questions which arise from it. However, there are other pieces of information for which 'the appropriate time' will mean a suitable duration after the placement, for example a record of student attendance, progress or placement reports, completed student feedback, completed placement audits, completed placement assessments, etc.

## 5. Practice placements standards

5.12 A range of learning and teaching methods that respect the rights and needs of patients or clients and colleagues must be in place throughout practice placements.

#### Guidance

Students may learn on placement in different ways, and different practice placement educators may structure the learning and teaching according to their own preferences and experience, or the individual needs of the students. It is important that whatever the range used, these must respect the needs of patients, clients, users, and also colleagues as laid out above.

The Visitor may wish to see evidence that you have a system in place which ensures that, wherever possible, patients/clients are aware that students are involved in their care. The visitors will wish to see evidence that you have a system in place which ensures that, wherever possible, service users are aware that students are involved in their care.

# 5. Practice placements standards

5.13 The placement providers must have an equal opportunities and anti-discriminatory policy in relation to students, together with an indication of how this will be implemented and monitored.

#### Guidance

In order to show that you meet this standard, you will need to give the Visitors information about how you ensure that these are in place and that they are implemented. The students on placement will need to know how they can access these policies and the steps they should take if they feel that discrimination has occurred. You will have an audit monitoring process for your placements and this will be part of that process. It is your responsibility to monitor any placements supported and co-ordinated by a third party.

# **Further information**

- Chartered Society of Physiotherapy, Supporting disabled physiotherapy students on clinical placement
- College of Occupational Therapy, Guidance on Disability and Learning,

Dept/Cmte

# SET 6. Assessment standards

# Summary

This part of the Standards of Education and Training concerns how you assess your students, to ensure that they meet the requirements of your programme, that they meet our Standards of Proficiency, and that they are assessed fairly and consistently.

# Overall guidance

You may wish to provide the Visitors with a copy of your institution's **assessment strategy**, or equivalent, as well as any additional information about the assessment of your programme which sits alongside this.

The Visitors will need to see how you ensure that assessment of practice placements is rigorous, consistent, and fair. Hence information about how you train practice placement educators, and how marks are moderated, may also be relevant here. You may therefore wish to refer to this information in your cross-referencing document both in section 5 (practice placements) and here, in the assessment standards section.

# Example questions

Why have you chosen the particular types of assessment for each module?

What is your policy on re-sits, academic and placement components?

How does your assessment comply with external reference frameworks?

Is there a mechanism for continuous assessment and ongoing feedback for students on placement?

What happens if a student is failing placements but is doing well in academic subjects? How does your assessment design deliver students who are fit to practise?

Do you have the option to award an aegrotat award? If so do you make it clear that an aegrotat excludes you from registering with the HPC?

Without special circumstances, do students still have the right of appeal? Who is the external examiner? Is the external examiner HPC registered?

# Further information

- Quality Assurance Agency for Higher Education, Code of Practice for the Assurance of Academic Quality and Standards in Higher Education, Assessment of students,
- Quality Assurance Agency for Higher Education, Subject benchmark statements
- Quality Assurance Agency for Higher Education, Qualifications Framework for England, Wales and Northern IrelandQuality Assurance Agency for Higher Education
- Quality Assurance Agency for Higher Education, Qualifications Framework for Scotland

Doc Type

# **Detailed guidance**

# 6. Assessment standards

6.1 The assessment design and procedures must assure that the student can demonstrate fitness to practise.

#### Guidance

When you assess a student you must ensure that you are testing not only academic and theoretical learning and knowledge, but also the practical application of skills for the student to practice their profession safely and effectively.

The Visitors will want to be assured that, in order to complete the programme, students have to show that they have met the Standards of Proficiency and thereby gained the skills and knowledge to become independent, accountable members of their profession.

The Visitors will want to be assured that your programme specification clearly articulates your **assessment strategy** and include direct reference to the learning outcomes and associated assessment methods. This therefore provides a direct link to fitness to practise. Each module outline/descriptor should explain the assessment methods for that module.

The Visitors will need to see information about your regulations on issues such as:

- number of re-sit attempts allowed (and within what period of time);
- number of module re-sits allowed within any one year;
- maximum number of re-sits permitted per year for practice placement modules;
- compensation and condonement regulations;
- the maximum length of a programme; and
- the maximum registration period.

Although we do not set limits on, for example, the number of re-sit attempts allowed, you should show the Visitors how your policy on re-sits strikes an adequate balance between the need to support students, and the need to ensure that those who successfully complete the programme are fit to practise.

# 6. Assessment standards

6.2 Assessment methods must be employed that measure the learning outcomes and skills that are required to practise safely and effectively.

#### Guidance

In order to show how you meet this standard, you might want to provide information about your assessment methods, your rationale behind the different assessment methods

that are used for different parts of the programme, and how the methods are aligned to the learning outcomes in each module. The Visitors will need to be assured that, whatever method of assessment applies, it ensures safe and effective practice.

# 6. Assessment standards

6.3 All assessments must provide a rigorous and effective process by which compliance with external reference frameworks can be measured.

#### Guidance

You may want to provide information here not only about how your assessment methods are rigorous and effective, but also about how your programme complies with any relevant external reference frameworks. An example of this would be if your programme is a pre-registration Masters programme: showing how your programme meets the requirements of a Masters programme as well as meeting HPC's Standards of Proficiency, could be part of your evidence for this standard.

### **Further information**

- Any relevant institution regulations
- Professional body guidelines
- QAA benchmarks
- QAA Framework for Higher Education Qualifications in England, Wales and Northern Ireland
- QAA Framework for qualifications of Higher Education institutions in Scotland
- National Competencies

## 6. Assessment standards

6.4 The measurement of student performance and progression must be an integral part of the wider process of monitoring and evaluation, and use objective criteria.

#### Guidance

The Visitors will want to see information about how you monitor student performance, your expectations for student progression through the programme, what criteria you use to assess students who are at different stages in their learning, and how this reflects an overall progression.

Your **assessment strategy** may contain information about the criteria used for assessment, and how this ensures objectivity. In addition, the moderation of marks, and the way that students are assessed on placement, may all be relevant information to provide to the Visitors. The Visitors will also want to see how you determine what stops a

student from progressing and the exit routes that are available for a failing student.

When Visitors meet with students they often ask them about the level of feedback they receive on their assignments and whether the students feel it is sufficient. However, we do not normally expect to see samples of students' work.

# 6. Assessment standards

6.5 There must be effective mechanisms in place to assure appropriate standards in the assessment.

#### Guidance

Under this standard, you will need to provide information about how your programme is assessed, for example, by your University validation process (if applicable), or comments from your external examiner in their report. Visitors will want to be assured that your criteria are robust and consistently applied, but also that the standards students are assessed against HPC's Standards of Proficiency; they will also want to be assured that your criteria are appropriate for: your programme; the student's progression; and to ensure that they can meet the Standards of Proficiency when they complete the programme.

The Visitors may want to see that internal and external moderation are carried out. You could refer the Visitors to external examiner reports and responses to these reports as part of an identified audit trail.

The Visitors may use **CVs and staff profiles** to evaluate where educators from the programme team have a depth and breadth of experience in assessment. For example where staff act or have acted as external examiners at other education provider institutions. The Visitors will then be able to see how internal moderation systems of the education provider have additional comparisons to external standards.

### 6. Assessment standards

6.6 Professional aspects of practice must be integral to the assessment procedures in both the education setting and practice placement.

#### Guidance

'Professional aspects of practice' may include, for example, the students' familiarity with concepts of autonomy and accountability, values and ethics, or their understanding of the nature of professional regulation, and the responsibilities this entails.

In order to show how you meet this standard, you could provide information to the

Visitors about the way that your assessment procedures assess this. For example, you may have a specific module which addresses professional issues, with information about how this is assessed, or this information may be included in the placement handbook, learning log and other relevant components of the curriculum.

# Further information

Health Professions Council, Standards of conduct, performance and ethics (2003)

#### 6. **Assessment standards**

6.7 Assessment regulations must clearly specify requirements for: 6.7.1 student progression and achievement within the programme;

#### Guidance

Your assessment regulations must make it clear how you assess students in order to ensure and recognise their continuing progression within the programme. These must be clear in order for students to understand the expectations of them at each stage of the programme, and in order that staff can apply assessment criteria consistently to students' work.

The information that you provided for SET 6.4, which also refers to student progression, may also be relevant here.

### **Assessment standards**

6.7 Assessment regulations must clearly specify requirements for: 6.7.2 awards which do not provide eligibility for inclusion onto the Register not to contain any reference to an HPC protected title in their title;

#### Guidance

See also the guidance under SET 6.7.1.

It is important that there is no confusion regarding which programmes are approved by us, and which are not. We therefore require under this standard that students who are not eligible to apply for registration should not be given an award which makes a reference to an approved title. Some education providers give these students awards with titles like 'Healthcare studies' which reflects the academic standard achieved, but does not give the impression that they are eligible to apply for registration. The Visitors will want to see that programme titles are clear, in order that applicants, students, staff and the public understand who is eligible to apply for registration with us, and who is not.

### 6. Assessment standards

6.7 Assessment regulations must clearly specify requirements for:6.7.3 an aegrotat award not to provide eligibility for admission to the Register

#### Guidance

It must be clear to students and to staff that those who are awarded an aegrotat degree are not eligible to apply for registration. In order to show that you meet this standard, you could refer the Visitors to where this policy is laid out, and how students are informed, for example on your **website**, or in your **student handbook**.

# 6. Assessment standards

6.7 Assessment regulations must clearly specify requirements for: 6.7.4 a procedure for the right of appeal for students; and

### Guidance

You may give the Visitors information about the appeal procedure, and also information about how students are informed of this. Visitors would normally expect to find this in a **student handbook**, or equivalent, and in your institution's regulations for examinations. This should contain information about how the procedure works, and how it is judged, and by whom.

Visitors will also expect to see clear information for students about where they should go for advice on your institution's appeals process.

# 6. Assessment standards

6.7 Assessment regulations must clearly specify requirements for:

6.7.5 the appointment of at least one external examiner from the relevant part of the Register.

### Guidance

We require that assessment regulations must specify at least one external examiner (who must be registered in the relevant part of our Register) for each programme; however, we do not play any part in their appointment. You may not have an external examiner currently in place. Our Visitors will want to be assured that your regulations indicate that one will be appointed. For supplementary prescribing programmes, we only need one external examiner from one of the relevant parts of the register.

# How this document was written

We consulted on our Standards of Education and Training, and our approvals process, in 2004. We held six meetings around the UK to present our proposals, and sent copies of our proposals out to interested parties, which included professional bodies, education providers, and others involved in training or representing the professionals on our Register.

As a result of this consultation, we published our standards and our processes, but we also committed to publishing further guidance on our Standards. In our 'Key Decisions' document we refer to publishing 'guidance' and 'curriculum guidance'.

We established a professional liaison group to meet these responsibilities, and the group met for the first time in March 2005. The view of this group was that the term 'curriculum guidance' was misleading, and had the potential to lead to confusion about our role and the role of the professional bodies. The group agreed that further guidance on the standards for education providers was needed, but that it was not appropriate or necessary for us to replace the detailed curriculum information published by professional bodies, who are the learned societies for their professions, and play an important role in the development of their professions, and setting standards for best practice. The documentation our group would draft was therefore named the 'Standards of Education and Training guidance for education providers'.

The group agreed that liaison with the professional bodies in the production of this guidance would be essential, and therefore invited the professional bodies to an initial ideas meeting where representatives discussed the document, and gave valuable input and ideas for a first draft. The professional body representatives subsequently gave more detailed notes about the standards after consulting with others in their organisation, and then gave comments on a first draft which was circulated by email.

We are very grateful for the time and effort that members of professional bodies have given to help make these documents full, complete, and useful. We would like to thank the people below who have contributed to the writing of this document.

Derek Pearson Association of Clinical Scientists

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Helen Patey Association of Professional Music Therapists

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British Association of Art Therapists

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British Association of Dramatherapists

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Rosemarie Simpson

British Association of Prostnetists & Orthot

British Dietetic Association

Gail Stephenson

Marcus Bailey

Jenny Carey

British Breeder Fissectation

British and Irish Orthoptic Society

British Paramedic Association

Chartered Society of Physiotherapy

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Alan Wainwright Institute of Biomedical Science

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We would also like to thank Helen Best, who worked on an original draft of a document called 'Visitors guidance', much of which has now been integrated into this document.

However, we would like to emphasise that this document remains the property of the Health Professions Council. Any queries about its content should be directed to us, and any mistakes in this document remain our responsibility.



# References

The references included may have been changed, updated or replaced since this document was published. For an up-to-date list of documentation, you may wish to see our website.

Document name	Published by	Date published	Available from
Diploma (HE) in Operating	Association of	2001	www.aodp.org
Department Practice	Operating		
Curriculum Document	Department		
	Practitioners		
Guidelines on Programme	Association of	2005	www.apmt.org
Structure & Content for	Professional		
Music Therapy Education	Music Therapists		
Providers			
Code of Professional Ethics	Association of	2003	www.apmt.org
and Conduct	Professional		
	Music Therapists		
Professional Competencies	Association of	2003	www.apmt.org
	Professional		
	Music Therapists		
Principles of Professional	Association of	-	www.apmt.org
Practice	Professional	٠	
	Music Therapists		
Requirements and	British	2001	www.bapo.org
directions for approval of	Association of		
courses and institutions in	Prosthetists &		
the UK for purposes of	Orthotists		
state registration as	(published by the		
prosthetists and orthotists.	Prosthetists and		
	Orthotists Board)		
Guideline No. 1 - The Role	British	2000	www.bapo.org
Of The Prosthetist Orthotist	Association of		
	Prosthetists &		
	Orthotists		
Guideline No. 2 -	British	2000	www.bapo.org
Communication And	Association of		
Teamwork	Prosthetists &		
	Orthotists		
Guideline No. 3 - Clinical	British	2002	www.bapo.org
Records	Association of		
	Prosthetists &		

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Orthotists		
British	2003	www.bapo.org
Association of		
Prosthetists &		
Orthotists		
British	2002	www.bapo.org
Association of		
Prosthetists &		
Orthotists		
	2000	
-		
,		
	2004	www.bda.uk.com
The state of the s		
	VIII I SIII SIII SIII SIII SIII SIII SI	www.britishparamedi
Association	A88889	c.org
		,
VIII.	2002	www.csp.org.uk
of Physiotherapy		
Chartered Society	2005	www.oon.org.uk
AND 100 (100 (100 (100 (100 (100 (100 (100	2003	www.csp.org.uk
of Fifysiotherapy		
Chartered Society	2001	www.csp.org.uk
VIIII - 17	2001	www.csp.org.uk
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Chartered Society	2005	www.csp.org.uk
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or injeredicinpy		
Chartered Society	2005	www.csp.org.uk
<u> </u>		1
Chartered Society	2004	www.csp.org.uk
Chartered Society of Physiotherapy	2004	www.csp.org.uk
	British Association of Prosthetists & Orthotists British Association of Prosthetists &	British Association of Prosthetists & Orthotists  British Association of Prosthetists & Orthotists  The British Dietetic Association (published by the Dietitians Board)  The British Dietetic Association  British Paramedic Association  British Paramedic Association  Chartered Society of Physiotherapy  Chartered Society of Physiotherapy

Clinical Placement	Chartered Society	2003	www.csp.org.uk
Guidelines CSP London	of Physiotherapy	2003	www.csp.org.uk
Guidelines CST London	or r mysiotherapy		
Rules of Professional	Chartered Society	2002	www.csp.org.uk
Conduct CSP London	of Physiotherapy	2002	www.esp.org.un
Conduct CST Zondon	orraysiomerapy		
Expectations of Master's	Chartered Society	2004	www.csp.org.uk
Level Programmes within	of Physiotherapy		
qualifying physiotherapy			
education			
Curriculum Framework for	College of	2004	www.cot.org.uk
Pre-Registration Education	Occupational		
_	Therapists		
Guidance on Disability and	College of	2005	www.cot.org.uk
Learning	Occupational		
	Therapists		
A Curriculum Framework	College of	2003	www.sor.org
for Radiography, College	Radiographers		
of Radiographers			
Clinical Education and	College of	2004	www.sor.org
Training: Capacity and	Radiographers		
Quality			
Handbook of the Joint	College of	2004	www.sor.org
Validation Committee	Radiographers		
(Radiography) Revision	(published by the		
$2004^2$	Radiographers		
	Board)		
Radiography - The Scope	College of	2003	www.sor.org
of Practice	Radiographers		
Radiography Education and	_	2003	www.sor.org
professional Development:	Radiographers		
Moving Ahead			
		2002	
Standards for Professional	College of	2002,	www.sor.org
Conduct	Radiographers	revised 2004	
Guidance on Approval and	College of	2005	www.sor.org
Accreditation of Practice	Radiographers		
Placements at all levels of			
Pre-registration Education			

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Date

<sup>&</sup>lt;sup>2</sup> The Joint Validation Committee of the Radiographers Board no longer exists, and hence much of the content of the entire document has been superseded by HPC or Society of Radiographers guidance. Where there is no new guidance, the JVC document is still relevant.

National Service	Department of Health	(launched	www.dh.gov.uk
Frameworks Placements in Focus:	Department of	1998) 2001	www.dh.gov.uk
Guidance for education in	Health	2001	www.un.gov.uk
practice for health care	Tieum		
professions			
Outline curriculum for	Department of	2004	www.dh.gov.uk
training programmes to	Health		
prepare Allied Health			
Professionals as		4	
Supplementary Prescribers			
The Approvals Handbook	Health Professions	Anticipated	www.hpc-uk.org
	Council	2006	
A disabled person's guide	Health Professions	Anticipated	www.hpc-uk.org
to becoming a health	Council	2006	
professional	TT 1:1 D C		
Information about the	Health Professions	Anticipated	www.hpc-uk.org
health reference	Council	2006	
Standards of Proficiency	Health Professions Council	2003	www.hpc-uk.org
Standards of conduct,	Health Professions	2003	www.hpc-uk.org
performance and ethics	Council	2003	www.npc-uk.org
European Dietetic	European	2005	www.efad.org
Benchmark Statement	Federation of the	2003	www.crad.org
Benefithark Statement	Association of		
	Dietitians (EFAD)		
Case studies in Dietetics,	Making Practice-	2005	www.
Occupational Therapy,	Based Learning		practicebasedlearning.
Physiotherapy and	work		org
Radiography			
The Development of	NHS Education	2002	www.nes.scot.nhs.uk
Quality Standards for	for Scotland		
Practice Placements			
Social Services and Public	Department of		www.dhsspsni.gov.uk
Safety, Review of Clinical	Health, Social		
Placements for the Allied Health Professions	Services and		
nearm Frotessions	Public Safety, Northern Ireland		
	1101 metalla		
<b>Benchmark statements:</b>	Quality Assurance		www.qaa.ac.uk
Denomina Statements.	Agency for Higher		., ,, ,, ,quu.uc.ux
	Education		
Biomedical Sciences		2002	www.qaa.ac.uk
Arts therapy		2004	www.qaa.ac.uk

Doc Type POL

Clinical sciences		2004	www.qaa.ac.uk
Dietetics		2001	www.qaa.ac.uk
Occupational therapy		2001	www.qaa.ac.uk
Operating department		2004	www.qaa.ac.uk
practice			1
Orthoptics		2001	www.qaa.ac.uk
Paramedic science		2004	www.qaa.ac.uk
Physiotherapy		2001	www.qaa.ac.uk
Podiatry		2001	www.qaa.ac.uk
Prosthetics and		2001	www.qaa.ac.uk
orthotics			1
Radiography		2001	www.qaa.ac.uk
Speech and language		2001	www.qaa.ac.uk
therapy			1
Qualifications Framework	Quality Assurance	2001	www.qaa.ac.uk
for England, Wales and	Agency for Higher		
Northern Ireland	Education		
Qualifications Framework	Quality Assurance	2001	www.qaa.ac.uk
for Scotland	Agency for Higher		
	Education		
Guidelines on the	Quality Assurance	2004	www.qaa.ac.uk
accreditation of prior	Agency for Higher		
learning	Education	*	
Code of Practice for the	Quality Assurance	Revised	www.qaa.ac.uk
assurance of academic	Agency for Higher	2004	
quality and standards in	Education		
higher education:			
• 1 Postgraduate	Quality Assurance		www.qaa.ac.uk
research	Agency for Higher		
programmes	Education		
• 2 Collaborative	Quality Assurance		www.qaa.ac.uk
provision and	Agency for Higher		
flexible and	Education		
distributed learning			
(including e-			
learning)	0 11		
• 3 Students with	Quality Assurance		www.qaa.ac.uk
disabilities	Agency for Higher		
	Education		
• 4 External	Quality Assurance		www.qaa.ac.uk
examining	Agency for Higher		
	Education		

5 Academic appeals and student complaints on academic matters	Quality Assurance Agency for Higher Education		www.qaa.ac.uk
6 Assessment of students	Quality Assurance Agency for Higher Education		www.qaa.ac.uk
<ul> <li>7 Programme approval, monitoring and review</li> </ul>	Quality Assurance Agency for Higher Education		www.qaa.ac.uk
8 Career education, information and guidance	Quality Assurance Agency for Higher Education		www.qaa.ac.uk
9 Placement learning	Quality Assurance Agency for Higher Education		www.qaa.ac.uk
10 Recruitment and admissions	Quality Assurance Agency for Higher Education		www.qaa.ac.uk
Guidelines on the Accreditation of courses leading to a qualification in Speech and Language Therapy	Royal College of Speech and Language Therapists (published by the Board of Speech and Language Therapists)	2002	www.rcslt.org
Guidance on competence for newly qualified therapists	Royal College of Speech and Language Therapists		www.rcslt.org
National standards for practice-based learning	Royal College of Speech and Language Therapists		www.rcslt.org
Clinical guidelines	Royal College of Speech and Language Therapists	2005	www.speechmark.net
Communicating Quality 2 - Professional Standards for Speech and Language Therapists.	Royal College of Speech and Language Therapists	1996	www.rcslt.org
Regulations & Guidance	Society of	2005	www.feetforlife.org

for the Accreditation of Pre-registration Education in Podiatry – Handbook	Chiropodists and Podiatrists		
Minimum Standards of Clinical Practice	Society of Chiropodists and Podiatrists	2003	www.feetforlife.org
Patient Confidentiality	Society of Chiropodists and Podiatrists	2004	www.feetforlife.org
Guidelines on Patient Records	Society of Chiropodists and Podiatrists	2004	www.feetforlife.org
Health & Safety Guidelines	Society of Chiropodists and Podiatrists	2001	www.feetforlife.org
Guidelines for Needlestick Injury	Society of Chiropodists and Podiatrists	2005	www.feetforlife.org
Disposal of Clinical Waste	Society of Chiropodists and Podiatrists	2005	www.feetforlife.org
Code of Conduct	Society of Chiropodists and Podiatrists	2001	www.feetforlife.org
The Health Professions Order 2001	The Stationery Office	2001	www.hpc-uk.org www.tso.co.uk/books hop
Interprofessional education	UK Centre for the Advancement of Interprofessional Education (CAIPE)	2002	www.caipe.org.uk

# An explanatory note about professional boards

The Council for Professions Supplementary to Medicine (CPSM) was the predecessor body of the HPC. Under the CPSM structure, each profession has its own board, which would normally publish information about the CPSM approvals process. In some professions, these Board documents have been replaced by other documents published by the professional bodies. In other professions, all or part of the Board documents are still used and therefore referenced here. Copies of these Board documents are unfortunately no longer available from HPC.