

# Annual monitoring visitors' report

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# **Section One: Programme Details**

Education provider	Bangor University
Programme name	BSc (Hons) Diagnostic Radiography and
	Imaging
Mode of delivery	Full time
HPC visitor(s)	Shaaron Pratt (Radiographer)
	Kathryn Burgess (Radiographer)
Education executive	Mandy Hargood
Date of assessment day / postal	16 March 2010
review	

#### **Section Two: Submission Details**

The following documents were submitted as part of the audit submission:

Internal quality report for one year ago

External Examiner's for one year ago

Response to External Examiner's report one year ago

Response to External Examiner's report for two years ago

#### Staff Numbers

Memorandum regarding the proposed transfer from Bangor University to Glyndwr University

#### **Section Three: Additional Documentation**

The visitors agreed that no further documentation was required in order to make a recommendation.

## Section Four: Recommendation of the visitor(s)

There is insufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is required to gather information and if necessary place conditions on continued approval of the programme.

The reasons for this are as follows:

2.1 The admission procedures must give both 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.

**Reason:** From the documentation received as part of the annual monitoring audit submission the visitors learnt about changes to the programme during the 2006/2007 and 2007/2008 academic years. The education provider also stated that the programme was due to relocate to a different education provider before the next cohort start date of September 2010. The visitors highlighted that if a move did occur, the education provider would need to ensure potential applicants receive the information they require to make an informed choice about the programme.

When looking at the changes to the programme which occurred during the 2006/2007 and 2007/2008 academic years and the changes which relocation to a different education provider could mean to the programme, the visitors felt the scale of the changes meant a visit was the most appropriate way to collect the evidence to show how the programme continues to meet the SETs.

- 3.1 The programme must have a secure place in the education provider's business plan.
- 3.2 The programme must be managed effectively.
- 3.6 A programme for staff development must be in place to ensure continuing professional and research development.
- 3.7 The resources to support student learning in all settings must be used effectively.
- 3.8 The facilities needed to ensure the welfare and well-being of students must be both adequate and accessible.

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				DRad Full time	DD: None	RD: None

- 3.9 Where students participate as patients or clients in practical and clinical teaching, appropriate protocols must be used to obtain their consent.
- 3.10 A system of academic and pastoral student support must be in place.
- 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.
- 3.12 The resources provided, both on and off site, must adequately support the required learning and teaching activities of the programme.
- 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.

**Reason:** From the documentation received as part of the annual monitoring audit submission the visitors learnt about changes to the programme during the 2006/2007 and 2007/2008 academic years. The education provider also stated that the programme was due to relocate to a different education provider before the next cohort start date of September 2010. The visitors highlighted that if a move did occur, there could potentially be a number of changes to how the programme is managed and the resources available for students. The visitors have highlighted the above SETs as those which could be affected by the programme's relocation.

When looking at the changes to the programme which occurred during the 2006/2007 and 2007/2008 academic years and the changes which relocation to a different education provider could mean to the programme, the visitors felt the scale of the changes meant that a visit was the most appropriate way to collect the evidence to show how the programme continues to meet the SETs.

- 3.4 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.
- 3.5 Subject areas must be taught by staff with relevant specialist expertise and knowledge.

**Reason:** The annual monitoring audit form indicated that there had been a reduction in the whole time equivalent number of staff for the programme. The evidence provided by the education provider was not clear as to where the staff reduction had occurred; whether it was a clinical or academic post; and whether it was a full time or non full time post which had been lost. The visitors were therefore concerned as to whether there was an adequate number of staff to deliver an effective programme and whether subject areas were taught by staff with the relevant specialist expertise and knowledge.

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When looking at these and the changes which relocation to a different education provider could mean to the programme, the visitors felt the scale of the changes meant that a visit was the most appropriate way to collect the evidence to show how the programme continues to meet the SETs.

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

**Reason:** From the documentation received as part of the annual monitoring audit submission the visitors learnt about changes to the programme during the 2006/2007 and 2007/2008 academic years. The education provider also stated that the programme was due to relocate to a different education provider before the next cohort start date of September 2010. The visitors highlighted that if a move did occur, there could potentially be changes to the assessment regulations and quality assurance procedures and therefore how the programme continues to meet the above SETs.

When looking at the changes to the programme which occurred during the 2006/2007 and 2007/2008 academic years and the changes which relocation to a different education provider could mean to the programme, the visitors felt the scale of the changes meant that a visit was the most appropriate way to collect the evidence to show how the programme continues to meet the SETs.

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### **Section One: Programme Details**

Education provider	Birmingham Metropolitan College
Awarding institution	Aston University
Programme name	BSc (Hons) Podiatry
Mode of delivery	Full Time
HPC visitors	Anne Wilson (Podiatrist)
	Paul Blakeman (Podiatrist)
Education executive	Lewis Roberts
Date of assessment day	18 March 2010

#### **Section Two: Submission Details**

The following documents were submitted as part of the audit submission:

A completed HPC audit form
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- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago
  - Society of Chiropodists and Podiatrists letter of approval regarding staff/student ratios
  - CV Michael Ratcliffe, Head of School
  - Student Handbook
  - Aston University External Examiner Regulations

#### **Section Three: Additional Documentation**

The visitors agreed that no further documentation was required in order to make a recommendation.

### Section Four: Recommendation of the visitor(s)

There is insufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is required to gather information and if necessary place conditions on continued approval of the programme.

The reasons for this are as follows:

## 3.2 The programme must be managed effectively.

#### Reason

The visitors noted that in the external examiners report 2008-2009 it was identified that there have been a number of issues around staffing. The visitors also noted that within the learning and teaching committee re-validation report (April 2009) in section 3.3 it states that 'first year students who met the panel said they had not started anatomy until the end of January, although this module was expected to run all year'. The visitors also held concerns that within this report a lack of programme administration was identified as an issue.

The visitors felt that both the lack of administration provision and the late delivery of curriculum content could be detrimental to the students and impact on their ability to meet the standards of proficiency.

The visitors finally noted that there has been a change in programme leader. The visitors seek reassurance that this change will address some of the programme management issues identified. The visitors are aware that the programme has not been visited previously by the HPC and seek clarification of effective programme management through a visit.

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

#### Reason

The visitors noted that in the documentation provided by the education provider staff provision was identified as an issue on several occasions. In the Learning and teaching committee re-validation report (April 2009) section 3.2 it states that first year students at this event claimed there was sometimes a shortage of staff in the clinic, to the extent that two students and two members of staff had on one occasion seen forty two patients in one morning session'. The visitors also noted that there was evidence of a high staff turnover and in section 6.3 of the learning

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				(hons) Podiatry	DD: None	RD: None

and teaching committee re-validation report (April 2009) it states that new staff vacancies again resulted in staff having to cover additional teaching and clinic hours.

The visitors were concerned that with the apparent high turnover of staff the programme may not have an adequate number of appropriately qualified and experienced staff in place to ensure that students are fit to practice. The visitors are aware that the programme has not been visited previously by the HPC and seek clarification that there is an adequate number of appropriately qualified and experienced staff in place. The visitors seek clarification through a visit.

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

#### Reason

The visitors identified a number of concerns around clinical placements. They were concerned that the documentation did not contain any indication of the number, duration and range of placement. They were also concerned that the issues identified around programme management and staff retention within the education provider may impact on clinical placements. The visitors seek reassurance that students are getting the opportunity whilst on clinical placements to develop their profession specific skills and meet the standards of proficiency. The visitors are aware that the programme has not been visited previously by the HPC and seek clarification that the number, duration and range of placements are appropriate. The visitors seek clarification through a visit.

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