Education and Training Committee – 7 March 2019

Updates to the approval process

Executive summary and recommendations

Introduction

This paper sets out proposals for updating the approval process. At their September 2018 meeting, the Committee agreed to the aims and timeframes of this review, and noted that it should be undertaken considering that a fuller review of our quality assurance approach to education is also underway.

The aim of the review was to ensure that the approval process remains fit for purpose, is consistent and transparent and meets the expectations of stakeholders. The revised process will be rolled out in time for the 2019-20 academic year.

Decision

- The Committee is asked to discuss and agree proposed updates to the process, and to suggest any further areas to be worked on by the Executive following the conclusion of this review.

Background information

- Reviewing education quality assurance – ETC paper 6 September 2018, specifically appendix 2 where the purpose of this review was set out to the Committee

Resource implications

- In order to implement the proposals, the Executive will need to commit time in Q1 and Q2 of the 2019-20 financial year. This commitment is included in the existing proposed Departmental work plan.

Financial implications

- No specific financial implications at present, but changes to visitor fee structure may need to be brought back to the Committee in the future.

Date of paper

15 February 2019

Updates to the approval process

1. Purpose of review

1.1.   The purpose for conducting the review, as noted in the paper presented to the Committee in September 2018, is to ensure the approval process remains fit for purpose as the most intensive quality assurance mechanism used to assess new and existing programmes against our education standards.

1.2.   In reviewing the approval process to be satisfied it is 'fit for purpose', we specifically wanted to ensure:

- the outcomes we reach throughout the process are consistent and transparent;
- our requirements for approval are clear and easily understood;
- we operate the process in an efficient and proportionate manner;
- the process meets the expectations of stakeholders; and,
- the process compliments the structures and broader education sector that it is being applied within.

1.3.   To achieve this overall purpose, the review was structured to fulfil the following objectives:

- To revise our external guidance and communications (e.g. website information, publications, emails) to ensure these support and improve education providers understanding of the approval process.
- To review our internal business processes and guidance to ensure these support improved efficiency and accuracy in the Executive's management of approval process cases.
- To develop our approval visit agendas, required stakeholder meetings and different visit types (e.g. multi-professional, entitlements), ensuring these remain appropriate and proportionate to deliver an effective and efficient quality assurance mechanism for the approval of programmes.
- To analyse visitor involvement throughout the approval process, identifying areas where consistency around visitor enquiries and recommendations can be improved, and where performance issues can be minimised.
- To develop and implement withdrawal of approval / non-approval of programmes processes, ensuring these provide clarity and consistency to all stakeholders involved, particularly for Committee members and education providers.

1.4.   This review is intended to provide achievable updates and improvements to the approval process in its current form, within the current HCPC model for quality assurance in education. This model is being developed more fundamentally as a separate piece of work which will be brought to the Committee in the future.

2. Review activities

2.1.   In undertaking this review, the Executive has sought stakeholder views as follows:

- Visitor survey (92 respondents), and follow-up targeted phone calls
- Education stakeholder survey (130 respondents), and follow-up targeted phone calls
- Two workshops with ETC members
- Two workshops with members of the Executive who have undertaken different aspects of the process

2.2.   We have also undertaken a desk based exercise to:

- Analyse similar processes of other professional and systems regulators, professional bodies, and within the higher education sector
- Analyse existing feedback from previous education provider surveys, and ad hoc feedback recorded through our stakeholder feedback process

3. Legislative underpinning

3.1.   Developments through this paper are proposed within the boundaries of our legislation, which (amongst other things) relating to programme approval requires:

- Council to set education standards
- ETC to appoint visitors (which is delegated to the Executive)
- Visitors to review programmes on ETC's behalf
- Visitors to report their findings to ETC
- Education providers have the right to reply (observations)
- ETC to make decisions about programme approval

4. Overview of the approval process

4.1.   The approval process was last reviewed in full in 2015 as part of work undertaken to deliver new back office systems within the Education Department.

4.2.   Since this time, we have made incremental changes to this and other business processes, following the introduction of internal quality assurance processes to the Department[1].

4.3.   The process is set out in the following stages. Each stage has a decision point to progress to the next stage:
- Enquiry – deciding whether to assess the proposal through the approval process
- Planning – setting dates and arranging resources
- Submission – managing and receiving the documentary submission, and planning the agenda
- Visit – the on-site event
- Report – drafting of report, sending to the provider, and submission to first ETP

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[1] See page 12 of the Reviewing education quality assurance ETC paper for further detail of incremental improvements.

- Conditions – if conditions (requirements that must be met before programme approval) are set, process to receive and assess conditions response, including submission to second ETP
- Decision – decision on programme approval, and communication to the provider

5. Development themes

5.1.   This review proposes updates and improvements within the legislation and current process model set out above. Below, changes are proposed to the approval process to meet the objectives set out in section 1 of this paper.

6. New profession / provider (NPP) pathway

6.1.   The Executive is proposing that a new pathway through the process is introduced, with the express aim to prevent 'riskier' programmes having significant outstanding issues in the post-visit process.

6.2.   This pathway would be used when programme(s) are (a) proposed by a provider new to HCPC, and / or (b) when programme(s) are proposed from a profession / post registration area new to an existing provider.

6.3.   Statistics and anecdotal evidence from members of the Executive shows us that, broadly speaking, these proposals result in more issues being noted through conditions, and that these issues are often more fundamental to the delivery of the programme.

6.4.   Through this pathway, the Executive would aim to identify risks around the proposal as early as possible, and take appropriate steps to mitigate these risks, to ensure the approval process can reach acceptable outcomes by:
- Requiring all education providers to provide detail on the proposal in several key areas when requesting an approval visit
- Undertaking an issues-based analysis of the proposal at an early stage
- At specific points in the process, work with the provider to address these issues before the visit stage

6.5.   This pathway is not intended to replace the visitors' role in assessing programmes and making recommendations about programme approval. Through this pathway, members of the Executive will use their knowledge and expertise to support education providers. However this does not preclude the visitors making their own judgements through the process.

6.6.   Feedback from stakeholders has noted that this proposal could be seen to increase regulatory burden. The Executive considers that this burden would be shifted forward in the process, to prevent issues becoming conditions through the visit and report stages of the process.

6.7.   The Executive does not intend this pathway is explicitly advertised to providers, but that we rather note that we will work with these programmes 'more closely' in the planning and submission stage of the process.

6.8.   This approach would allow us to apply right touch regulatory decision making in "understanding the problem before jumping to the solution" and ensuring "that the level of regulation is proportionate to the level of risk to the public."[2]

7. Required 'touch points' through the process

7.1.   The Executive proposes developing existing, and introducing new, formal touch points with providers through the process. The use of these touch points would also be specifically defined, so it is clear how they should be used by the Executive. This would help to facilitate provider engagement with HCPC requirements, and to develop provider, Executive and visitor understanding of the proposal and process.

7.2.   The following touch points would be undertaken across all approval cases (rather than just the NPP pathway):
- When arranging visit dates – to understand the proposal, and consider readiness for the visit
- One month before the documentary submission – to address any specific areas identified through the NPP pathway (where applicable), to ensure any significant changes to the proposal since notification stage can be managed through the process as it stands, and to provide specific support for the provider producing their documentary submission
- Following the documentary submission – to provide visitor feedback, and work on the agenda with the provider
- Two weeks following sending the report to provider – to ensure the provider understand next steps, including how to submit observations, and to open a dialogue about understanding of any conditions

7.3.   In their feedback, Executives noted that they would like a more formal framework, with explicit aims and objectives, for interacting with the provider through the process. Through their feedback, providers also flagged that at times they were not clear of our requirements, and further support through the pre-visit stage would be helpful.

8. Pre-visit documentary submission

8.1.   The submission of documentation allows the education provider to show us how the programme meets the standards, and is key to the success of the process. This submission takes place eight weeks before the visit, and we have specific requirements about what must be provided.

8.2.   The Executive proposes allowing more flexibility around specific documentation required through the process. This would mean asking for documentation that addresses certain areas instead of asking for a specific list of documents. For example, we might stop requiring a 'student handbook' and start requiring 'information provided to students'.

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[2] www.professionalstandards.org.uk/what-we-do/improving-regulation/right-touch-regulation

8.3.   For this to be successful, we would also need to more clearly define the normal types of documentation that might be useful, and what SET areas we would expect to be addressed by these documents.

8.4.   The Executive also proposes that we move to requiring an electronic-only documentary submission, if this approach is feasible with current resources and partner contractual arrangements.

8.5.   In the last education provider survey, 92 per cent of respondents noted they would prefer an electronic-only documentary submission. Conversely, two thirds of visitors noted that they would prefer hard copy submissions. The main difficulty noted by visitors was that it was difficult to cross reference and / or mark-up electronic documentation.

8.6.   However, there was a general feeling in visitor feedback that moving to e-submissions was inevitable, and the Executive is confident that they can provide support for visitors when assessing documents by electronic only means. Notably, one third of visitors noted that electronic only submissions would either be 'easier', or make 'no difference' to their review.

8.7.   The Executive needs to undertake further work in this area, to ensure is achievable from a technical and resource perspective, and that our partners are able to work in this way. The Committee is asked to agree this proposal as a direction of travel to be implemented within a reasonable timeframe if it is considered achievable.

9. Review of documentation

9.1.   Currently, we ask our visitors to provide feedback on the documentation before the approval visit, but this is not a requirement of the process. This feedback is useful for all parties in understanding the issues that the visitors see against our standards, specifically helping the Executive and provider plan for the visit, and all visitors to understand the views of the HCPC panel.

9.2.   The Executive proposes formalising the requirement for visitors to provide feedback on the education provider's submission. Under this proposal, the visitors would be required to provide high level issues based feedback within two weeks of receiving documentation, and to continue to form a detailed standard-by-standard view closer to the visit event. The Executive will facilitate the sharing of visitor comments with other members of the HCPC panel prior to the visit, to allow all to prep for the issues identified.

9.3.   The Executive would continue to play a key role in informing, collating and framing visitor feedback, to support the provider to understand and / or address issues prior to the visit.

9.4.   Visitors are paid a two day fee for the work undertaken in the approval process. This fee covers all work required to undertake the process, including pre and post event work. The visit event itself usually lasts 1.5 days. The Executive expects the formal provision of feedback to be included within the current fee as part of pre-visit preparation which are already carried out.

10. The visit agenda

10.1.   There was mixed stakeholder, visitor, and Executive feedback about the approval visit agenda. Many commented that certain meetings were not useful or should be shorter, with others commenting that the same meetings were key to gathering and triangulating information.

10.2.   Fundamentally, the Executive is of the view that the visit itself needs to be a collaborative event, which is useful for all parties in reaching their conclusions.

10.3.   The current HCPC agenda template is intended as a starting point which lays out the groups that HCPC would like to meet and why. In practice, from feedback, this is seen as the approach to the event that the HCPC requires.

10.4.   There is no way to cover all eventualities in a template agenda, but we need to provide education providers with a starting point which sets out some expectations of the approval event from the HCPC. We find that this is particularly useful for providers new to our model of quality assurance.

10.5.   Therefore, the Executive proposes that we develop information and guidance around setting the agenda so it is clear:
- That education providers may choose to use our template agenda as a starting point when considering the stakeholder groups they would like us to meet
- The Executive works with education providers to tailor the agenda to the needs of all groups at the visit
- The Executive should be as flexible as they need to be, to ensure a good use of time at the approval visit
- Why we ask to meet certain groups, and to have some meetings in private

10.6.   Visitors are currently paid a two day fee for the majority of approval work, which is agreed at the start of the process. We may need to consider the normal fee structure if the feedback from visitors at the start of the process leads to requiring a visit event longer or shorter than the current expectations.

10.7.   Should this proposal be accepted, the Executive will keep the application of this revised approach under strict review, and may need to bring future work to the Committee in this area.

11. Supporting visitors to make consistent judgements

11.1.   A project aim was to identify areas where consistency around visitor enquiries and recommendations can be improved. Feedback from both visitors and external stakeholders supported this aim:
- external stakeholders have noted that visitors can be inconsistent in their approach, and
- visitors have noted that they would like further supporting information which helps them in their interactions with, and application of, the process

11.2.   Therefore, the Executive proposes creating a range of materials to be used by all visitors through specific stages of the process, and ensure that Executives are

able to guide visitors in the application of our standards. Support materials would primarily be contained on the online visitor training platform.

11.3. There were also comments across stakeholder groups which showed that the lay visitor role was not understood and / or valued.

11.4. The lay visitor role is intended as providing a lay (rather than registrant) perspective in assessing programmes against our standards. However, as lay visitors must have experience as a service user and carer, this role is sometimes conflated with providing a service user and carer perspective.

11.5. Therefore, the Executive proposes that we more clearly define and explain the lay visitor role to all parties, to ensure there is value add through the process, along with providing support to lay visitors as noted above.

11.6. The Executive will bring a more wide ranging discussion paper on the involvement of lay visitors in HCPC quality assurance of education to a future meeting of the Committee.

12. Process timescales

12.1. Normally, we require a six month pre-visit lead in, to effective planning of our resources, securing the time of visitors, and so providers have time to prepare as they need to.

12.2. Although this six month requirement is clearly noted in information about the process, we often receive requests to visit programmes along shortened timeframes.

12.3. Through the review work, the Executive considers that it is feasible to reduce visit lead in in certain circumstances. For example, if the education provider already runs provision in the profession but is proposing a new programme, they will often have resources in place and are able to develop proposals along a shorter timeframe than a provider starting from scratch.

12.4. The Executive is proposing to allow for flexibility in visit lead in time when the following criteria are met:
- there is existing provision in the profession / area of practice at the education provider
- there are resources available to support a shorter lead in time (Executive and visitors)
- a reduction in lead in time would allow the post visit process to conclude along normal timeframes, and achieve the programme start date

12.5. Relating to the post-visit process, our stakeholders frequently misunderstand that we 'aim to conclude' the process within three months of the visit. Instead, this can be taken as the process 'will be' concluded within three months.

12.6. Therefore, for information purposes and to manage expectations, the Executive proposes that we begin communicating normal / average post-visit timeframes on the website, but continue to:
- Aim for the post visit process to conclude within three months

- Require visits to be scheduled at least three months before the start date
- Note that the post visit process is normally longer for programmes with more significant outstanding issues

13. Reporting

13.1. Currently, conditions are recorded on a standard-by-standard basis. There are a small number of programme assessments that lead to large numbers of conditions being set relating to one issue.

13.2. The Executive proposes noting interrelated conditions such as this as one broad issue to be responded to against multiple standards. This would simplify drafting and responding to conditions, and should help external stakeholders understand the issues focus of reports.

14. Non-standard outcomes – process definition

14.1. Further work is required to define, standardise, and create step-by-step guidance and supporting materials for the following non-standard outcomes of the process:
- cancellation / postponement
- directed visits
- visit to consider conditions response
- withdrawal of approval / non-approval

14.2. The executive is proposing to standardise these processes based on their recent application, to ensure consistency and ease of application in the future. This work will be undertaken before September 2019, and brought back to the Committee as a paper to note.

15. Proposed rollout activities and timeframes

15.1. Across all proposals, work is required to support Executives, visitors and education providers in understanding and working within the new requirements. Through the summer of 2019, the Executive would produce:
- Specific operational level documentation and pro forma to facilitate the application of the revised process
- Supporting guidance for members of the Executive, which will be rolled out in a training session towards the end of the summer
- Bespoke communication with visitors about the development of the process, with detail about the parts that will affect their process interactions
- Supporting guidance for visitors, which will be produced over the summer and used at specific points in the process once it is operational
- Information for education providers, presented on our website and through the process as a 'new normal', as providers engage with the approval process on a one-off, rather than an ongoing, basis

15.2. The intention is to rollout some version of the revised process for all visits taking place from September 2019. We will not be able to implement all proposals for all visits, as some proposals will change the process very early within the pre-visit stage.

15.3. It may be possible to phase some of the rollout activity prior to September 2019, for example, the decision making process at the point the visit request form is received.

16. Measuring success

16.1. Following implementation of the revised process, changes made will be monitored for effectiveness using the following mechanisms:
- Regular quality assurance case audit outcomes related the approval process (audits conducted by the Quality Assurance Department)
- Biennial education provider survey in 2019-2020
- Formal stakeholder feedback received through organisation wide process
- Feedback from visitors, employees (through training, meetings and ad-hoc discussions) and Committee members