

## Visitors' report

|   |                                  |
|---|----------------------------------|
| <b>Name of education provider</b>         | University of Central Lancashire |
| <b>Programme name</b>                     | BSc (Hons) Healthcare Sciences   |
| <b>Mode of delivery</b>                   | Full time                        |
| <b>Relevant part of the HCPC Register</b> | Biomedical scientist             |
| <b>Date of visit</b>                      | 15 – 16 December 2015            |

## Contents

|                           |    |
|---------------------------|----|
| Executive summary .....   | 2  |
| Introduction.....         | 3  |
| Visit details .....       | 3  |
| Sources of evidence ..... | 4  |
| Recommended outcome ..... | 5  |
| Conditions.....           | 6  |
| Recommendations.....      | 11 |

## Executive summary

The Health and Care Professions Council (HCPC) approve educational programmes in the UK which health and care professionals must complete before they can apply to be registered with us. We are a statutory regulator and our main aim is to protect the public. We currently regulate 16 professions. All of these professions have at least one professional title which is protected by law. This means that anyone using the title 'Biomedical scientist' must be registered with us. The HCPC keep a register of health and care professionals who meet our standards for their training, professional skills, behaviour and health.

The visitors' report which follows outlines the recommended outcome made by the visitors on the ongoing approval of the programme. The education provider has until 3 February 2016 to provide observations on this report. This is independent of meeting any conditions. The report and any observations received will be considered by the Education and Training Committee (Committee) on 12 February 2016. At this meeting, the Committee will accept, reject or vary the visitors' recommended outcome. If necessary, the Committee may decide to vary the conditions.

The education provider is due to redraft and resubmit documentary evidence in response to the conditions outlined in this report by 3 February 2016. The visitors will consider this response and make a separate recommendation to the Committee on the ongoing approval of the programme. It is anticipated that this recommendation will be made to the Committee on 23 March 2016.

## Introduction

The HCPC visited the programme at the education provider to consider major changes proposed to the programme. The major change affected the following standards - the level of qualification for entry to the Register, programme admissions, programme management and resources, curriculum, practice placements and assessment. The programme was already approved by the HCPC and this visit assessed whether the programme continued to meet the standards of education and training (SETs) and continued to ensure that those who complete the programme meet the standards of proficiency (SOPs) for their part of the Register.

This visit was an HCPC only visit. The education provider did not validate or review the programme at the visit and the professional body did not consider their accreditation of the programme. The education provider supplied an independent chair and secretary for the visit.

## Visit details

|   |  |
|---|--|
| Name and role of HCPC visitors                          | Pradeep Agrawal (Biomedical scientist)<br>Robert Keeble (Biomedical scientist)<br>Sue Roff (Lay visitor) |
| HCPC executive officer (in attendance)                  | Hollie Latham  |
| Proposed student numbers                                | 20 per cohort, one cohort per year   |
| First approved intake                                   | 1 September 2014   |
| Effective date that programme approval reconfirmed from | 1 September 2015   |
| Chair   | Peter Robinson (University of Central Lancashire)  |
| Secretary   | Susan Avanson (University of Central Lancashire)   |

## Sources of evidence

Prior to the visit the HCPC reviewed the documentation detailed below, sent by the education provider:

|  | Yes                                 | No                       | N/A                                 |
|--|-------------------------------------|--------------------------|-------------------------------------|
| Programme specification  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Descriptions of the modules  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Mapping document providing evidence of how the education provider has met the SETs | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Mapping document providing evidence of how the education provider has met the SOPs | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Practice placement handbook  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Student handbook   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Curriculum vitae for relevant staff  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| External examiners' reports from the last two years                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

The education provider did not submit external examiner reports from the last two years as the programme started in 2014 and these have not yet been produced.

During the visit the HCPC saw the following groups or facilities:

|   | Yes                                 | No                       | N/A                      |
|---|-------------------------------------|--------------------------|--------------------------|
| Senior managers of the education provider with responsibility for resources for the programme | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Programme team  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Placements providers and educators / mentors  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Students  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Service users and carers  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Learning resources  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Specialist teaching accommodation<br>(eg specialist laboratories and teaching rooms)          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## Recommended outcome

To recommend a programme for ongoing approval, the visitors must be satisfied that the programme meets all of the standards of education and training (SETs) and that those who complete the programme meet our standards of proficiency (SOPs) for the relevant part of the Register.

The visitors agreed to recommend to the Education and Training Committee that a number of conditions are set on the programme, all of which must be met before the programme can be approved.

The visitors agreed that 47 of the SETs have been met and that conditions should be set on the remaining eleven SETs.

Conditions are requirements that the education provider must meet before the programme can have its ongoing approval reconfirmed. Conditions are set when certain standards of education and training have not been met or there is insufficient evidence of the standard being met.

The visitors have also made a recommendation for the programme.

Recommendations are observations on the programme or education provider which do not need to be met before the programme can have its ongoing approval reconfirmed. Recommendations are made to encourage further enhancements to the programme, normally when it is felt that the particular standard of education and training has been met at, or just above the threshold level.

## Conditions

### **3.8 The resources to support student learning in all settings must be effectively used.**

**Condition:** The programme team must revisit programme documentation to ensure it is up to date and that the terminology in use is correct and reflective of the current terminology used in relation to statutory regulation and the HCPC.

**Reason:** The visitors noted that the programme documentation submitted by the education provider included several instances of incorrect and out of date terminology. For example, page 23 of the student handbook references the HCPC as the professional body, the programmes web page also states that HCPC is an “external influencer”. This is incorrect as the HCPC is the regulatory body, not the professional body or an external influencer. The visitors also noted a number of instances of outdated terminology such as referencing the HCPC’s old name (HPC) and referencing “state registration” which is no longer in existence. The visitors therefore require documentation to be revised to remove all instances of incorrect terminology and ensure it communicates up to date information on the resources available to students. This way the visitors can be sure that the documentary resources available to support students’ learning are being effectively used and that this standard continues to be met.

### **3.14 Where students participate as service users in practical and clinical teaching, appropriate protocols must be used to obtain their consent.**

**Condition:** The education provider must identify a clear and documented process for taking students consent prior to giving blood in practical sessions.

**Reason:** Prior to the visit the visitors reviewed a consent form which was to be signed by students ahead of practical sessions and gave their consent to giving blood via a thumb prick for analysis. However, in a meeting with students and the programme team it became clear that this consent form was not currently being used. The programme team and students stated that verbal consent was given by each student at the beginning of practical sessions where blood was taken and students had the option to opt out. However, the visitors noted that without a formal process in place ahead of each session they cannot be sure that the consent process will continue for the duration of the programme. The visitors also noted that they cannot be certain, with the current verbal consent process, that students are giving informed consent ahead of each session. The visitors therefore require evidence which demonstrates that there is an effective, formal and documented process in place to obtain student consent when taking blood in practical and clinical teaching.

### **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.**

**Condition:** The education provider must demonstrate how the learning outcomes ensure that students who complete the programme meet all the standards of proficiency (SOPs) for biomedical scientists.

**Reason:** Prior to the visit, the visitors were provided with a SOPs mapping document to demonstrate which learning outcomes on the programme ensure that students are able to meet the SOPs for biomedical scientists on successful completion of the programme.

However, the education provider used the outdated SOPs for biomedical scientists in this mapping document. The visitors noted that without seeing how the programme delivers the current SOPs for biomedical scientists they cannot see how the programme ensures that those who successfully complete the programme have met the standards of proficiency for biomedical scientists. The visitors therefore require the education provider to provide appropriate and up to date documentation which effectively demonstrates how the SOPs are delivered throughout the programme to ensure that this standard is met.

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

**Condition:** The education provider must demonstrate how they own and maintain a thorough and effective system for approving and monitoring placements.

**Reason:** Prior to the visit and in conversation with the programme team it was stated that all practice placements must be accredited by the Institute of Biomedical Science (IBMS) before they can act as a practice placement for the University of Central Lancashire (UCLAN). The visitors were satisfied that this was an appropriate requirement to ensure that all practice placements are suitable, however, the visitors were unable to locate any information which demonstrates how UCLAN maintain ownership of the audit process. The programme team stated that they receive an email from IBMS each year to confirm which placements are approved and also receive updates via email should a placement have its accreditation revoked. However, the visitors were unable to see any evidence to support these statements. Furthermore the education provider stated that any emails are received by the programme leader only, the visitors could not see how this information may be picked up in the programme leaders absence. In addition to this, the visitors noted that approving and monitoring practice placements is the education provider's responsibility but the education provider has not demonstrated how they record and maintain information on each placement provider once this information has been received from the IBMS each year. The visitors therefore require further evidence which demonstrates how the education provider owns and maintains a thorough and effective system for approving and monitoring placements.

#### **5.5 The placement providers must have equality and diversity policies in relation to students, together with an indication of how these will be implemented and monitored.**

**Condition:** The education provider must provide evidence which demonstrates an effective process for ensuring that placement providers have equality and diversity policies in place in relation to students.

**Reason:** Prior to the visit and in conversation with the programme team it was stated that all practice placements must be accredited by the Institute of Biomedical Science (IBMS) before they can act as a practice placement for the University of Central Lancashire (UCLAN). The visitors were satisfied that this was an appropriate requirement to ensure that all practice placements have equality and diversity policies in place, however, the visitors were unable to locate any information which demonstrates how UCLAN maintain ownership of the audit process. The programme team stated that they receive an email from IBMS each year to confirm which placements are approved and also receive updates via email should a placement have its accreditation revoked.

However, the visitors were unable to see any evidence to support these statements. Furthermore the education provider stated that any emails are received by the programme leader only, the visitors could not see how this information may be picked up in the programme leaders absence. In addition to this, the visitors noted that approving and monitoring practice placements is the education provider's responsibility but the education provider has not demonstrated how they record and maintain information on each placement provider once this information has been received from the IBMS each year. The visitors therefore require further evidence which demonstrates how the education provider owns and maintains a thorough and effective system for ensuring that all practice placements have equality and diversity policies in place.

#### **5.6 There must be an adequate number of appropriately qualified and experienced staff at the practice placement setting.**

**Condition:** The education provider must provide evidence which demonstrates an effective process for ensuring there are an adequate number of appropriately qualified and experienced staff at the placement setting.

**Reason:** Prior to the visit and in conversation with the programme team it was stated that all practice placements must be accredited by the Institute of Biomedical Science (IBMS) before they can act as a practice placement for the University of Central Lancashire (UCLAN). The visitors were satisfied that this was an appropriate requirement to ensure that all practice placements have an adequate number of appropriately qualified and experienced staff in place, however, the visitors were unable to locate any information which demonstrates how UCLAN maintain ownership of the audit process. The programme team stated that they receive an email from IBMS each year to confirm which placements are approved and also receive updates via email should a placement have its accreditation revoked. However, the visitors were unable to see any evidence to support these statements. Furthermore the education provider stated that any emails are received by the programme leader only, the visitors could not see how this information may be picked up in the programme leaders absence. In addition to this, the visitors note that the education provider has not demonstrated how they store and maintain information on each placement provider once this information has been received from the IBMS each year. This condition is linked to conditions under SETs 5.4 and 5.5 of this report. The visitors therefore require further evidence that demonstrates that all practice placements have an adequate number of appropriately qualified and experienced staff in place.

#### **5.7 Practice placement educators must have relevant knowledge, skills and experience.**

**Condition:** The education provider must provide evidence which demonstrates an effective process for ensuring that practice placement educators have relevant knowledge, skills and experience.

**Reason:** Prior to the visit and in conversation with the programme team it was stated that all practice placements must be accredited by the Institute of Biomedical Science (IBMS) before they can act as a practice placement for the University of Central Lancashire (UCLAN). The visitors were satisfied that this was an appropriate requirement to ensure that practice placement educators have relevant knowledge, skills and experience, however, the visitors were unable to locate any information which

demonstrates how UCLAN maintain ownership of the audit process. The programme team stated that they receive an email from IBMS each year to confirm which placements are approved and also receive updates via email should a placement have its accreditation revoked. However, the visitors were unable to see any evidence to support these statements. Furthermore the education provider stated that any emails are received by the programme leader only, the visitors could not see how this information may be picked up in the programme leaders absence. In addition to this, the visitors note that the education provider has not demonstrated how they store and maintain information on each placement provider once this information has been received from the IBMS each year. This condition is linked to conditions under SETs 5.4 and 5.5 of this report. The visitors therefore require further evidence that demonstrates that all practice placements have relevant skills, knowledge and experience.

### **5.8 Practice placement educators must undertake appropriate practice placement educator training.**

**Condition:** The education provider must provide further evidence to demonstrate that all practice educators undertake appropriate practice placement educator training.

**Reason:** In documentation and meetings at the visit the visitors heard that placement educators have recently attended a 'Train the Trainer' session designed specifically to prepare placement educators for taking on students. The visitors reviewed the content of this training and were satisfied that it was appropriate to ensure that placement educators are prepared to take students. However, the visitors heard that the training is not currently compulsory for all placement educators. The visitors note the while the training is not compulsory they cannot be certain that all placement educators will undertake appropriate training. The programme team stated that where practice educators could not attend the 'Train the Trainer' session a visit would be made to the placement site to provide training in preparation for taking a student. However, the visitors were not provided with any evidence to support this, or, the content of this particular training. The visitors therefore require further information which demonstrates that practice educator training is compulsory for all placement educators, or, that adequate measures are in place to provide appropriate training for those who are unable to attend the 'Train the Trainer' sessions.

### **5.9 Practice placement educators must be appropriately registered, unless other arrangements are agreed.**

**Condition:** The education provider must provide evidence which demonstrates that all practice placement educators are appropriately registered.

**Reason:** Prior to the visit and in conversation with the programme team it was stated that all practice placements must be accredited by the Institute of Biomedical Science (IBMS) before they can act as a practice placement for the University of Central Lancashire (UCLAN). The visitors were satisfied that this was an appropriate requirement to ensure that practice placement educators are appropriately registered, however, the visitors were unable to locate any information which demonstrates how UCLAN maintain ownership of the audit process. The programme team stated that they receive an email from IBMS each year to confirm which placements are approved and also receive updates via email should a placement have its accreditation revoked. However, the visitors were unable to see any evidence to support these statements. Furthermore the education provider stated that any emails are received by the

programme leader only, the visitors could not see how this information may be picked up in the programme leaders absence. In addition to this, the visitors note that the education provider has not demonstrated how they store and maintain information on each placement provider once this information has been received from the IBMS each year. This condition is linked to conditions under SETs 5.4 and 5.5 of this report. The visitors therefore require further evidence that demonstrates that all practice placement educators are appropriately registered.

#### **6.1 The assessment strategy and design must ensure that the student who successfully completes the programme has met the standards of proficiency for their part of the Register.**

**Condition:** The education provider must demonstrate how the assessment strategy and design ensures that students who complete the programme meet all the standards of proficiency (SOPs) for biomedical scientists.

**Reason:** Prior to the visit, the visitors were provided with a SOPs mapping document to demonstrate which learning outcomes on the programme ensure that students are able to meet the SOPs for biomedical scientists on successful completion of the programme. However, the education provider used the outdated SOPs for biomedical scientists in this mapping document. The visitors note that without seeing how the programme delivers the current SOPs for biomedical scientists they cannot see where the SOPs are assessed and consequently how the programme ensures that those who successfully complete the programme have met the standards of proficiency for biomedical scientists. The visitors therefore require the education provider to provide appropriate and up to date documentation which demonstrates how the SOPs are delivered and assessed throughout the programme to ensure that this standard is met.

#### **6.4 Assessment methods must be employed that measure the learning outcomes.**

**Condition:** The education provider must revisit module descriptor BL2223 to ensure that all learning outcomes are mapped to an appropriate assessment.

**Reason:** Prior to the visit the visitors were provided with module descriptors for each of the modules. Module descriptor BL2223 highlighted five learning outcomes in total, however, the visitors were unable to locate where learning outcomes four and five were assessed within the module. The programme team stated that learning outcomes four and five were assessed in this module but had been accidentally omitted from the module descriptor. The visitors note that without confirmation of the assessment method for learning outcomes four and five they cannot be certain that the assessment methods are appropriate to measure the learning outcomes. The visitors therefore require the education provider to provide addition evidence, such as an up to date an up to date module descriptor for BL2223, which demonstrates appropriate assessment methods for all leaning outcomes, including four and five.

## Recommendations

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

**Recommendation:** The education provider may wish to consider reviewing the module descriptors to accurately reflect attendance requirements.

**Reason:** The visitors were satisfied with the attendance requirements and communication to students and are therefore satisfied that this standard continues to be met. However, some module descriptors stated that “full attendance” is required as part of the assessment criteria. The programme team stated that attendance record was not a factor in considering a students’ grade for each module and would have no impact in this way. The visitors were satisfied with this response from the programme team, however, noted that there is a risk that the reference to attendance within some module descriptors’ assessment criteria could be misleading to students. The visitors therefore recommend that the education provider revisits module descriptors to ensure they accurately reflect the assessment and any attendance criteria.

Pradeep Agrawal  
Robert Keeble  
Sue Roff

## Visitors' report

|   |  |
|---|--|
| <b>Name of education provider</b>         | University of Derby                              |
| <b>Programme name</b>                     | MSc in Diagnostic Radiography (pre-registration) |
| <b>Mode of delivery</b>                   | Full time  |
| <b>Relevant part of the HCPC Register</b> | Radiographer                                     |
| <b>Relevant modality / domain</b>         | Diagnostic radiographer                          |
| <b>Date of visit</b>                      | 8 – 9 December 2015                              |

## Contents

|                           |   |
|---------------------------|---|
| Executive summary .....   | 2 |
| Introduction.....         | 3 |
| Visit details .....       | 3 |
| Sources of evidence ..... | 4 |
| Recommended outcome ..... | 5 |
| Conditions.....           | 6 |
| Recommendations.....      | 9 |

## Executive summary

The Health and Care Professions Council (HCPC) approve educational programmes in the UK which health and care professionals must complete before they can apply to be registered with us. We are a statutory regulator and our main aim is to protect the public. We currently regulate 16 professions. All of these professions have at least one professional title which is protected by law. This means that anyone using the title 'radiographer' must be registered with us. The HCPC keep a register of health and care professionals who meet our standards for their training, professional skills, behaviour and health.

The visitors' report which follows outlines the recommended outcome made by the visitors on the approval of the programme. The education provider has until 14 January 2016 to provide observations on this report. This is independent of meeting any conditions. The report and any observations received will be considered by the Education and Training Committee (Committee) on 12 February 2016. At this meeting, the Committee will accept, reject or vary the visitors' recommended outcome. If necessary, the Committee may decide to vary the conditions.

The education provider is due to redraft and resubmit documentary evidence in response to the conditions outlined in this report by 01 March 2016. The visitors will consider this response and make a separate recommendation to the Committee on the approval of the programme. It is anticipated that this recommendation will be made to the Committee on 23 March 2016.

## Introduction

The HCPC visited the programme at the education provider as it was a new programme which was seeking HCPC approval for the first time. This visit assessed the programme against the standards of education and training (SETs) and considered whether those who complete the programme meet the standards of proficiency (SOPs) for their part of the Register.

This visit was part of a joint event. The education provider validated the programme and the professional body considered their accreditation of the programme. The education provider, the professional body and the HCPC formed a joint panel, with an independent chair and secretary, supplied by the education provider. Whilst the joint panel participated in collaborative scrutiny of the programme and dialogue throughout the visit; this report covers the HCPC's recommendations on the programme only. As an independent regulatory body, the HCPC's recommended outcome is independent and impartial and based solely on the HCPC's standards. A separate report, produced by the education provider and the professional body, outlines their decisions on the programme's status.

## Visit details

|   |  |
|---|--|
| Name and role of HCPC visitors            | Helen Best (Diagnostic radiographer)<br>Shaaron Pratt (Diagnostic radiographer)<br>Susanne Roff (Lay visitor)  |
| HCPC executive officer (in attendance)    | Abdur Razzaq   |
| HCPC observer                             | Jamie Hunt   |
| Proposed student numbers                  | 20 per cohort, one cohort per year   |
| Proposed start date of programme approval | September 2016   |
| Chair                                     | Ann Minton (University of Derby)   |
| Secretary                                 | Zoe Pritchett (University of Derby)  |
| Members of the joint panel                | Doug Carr (Internal Panel Member)<br>Karen Cooper (Internal Panel Member)<br>Karen Eckloff (External Panel Member)<br>Louise Golding (Internal Observer)<br>Beverley Snaith (College of Radiographers) |

## Sources of evidence

Prior to the visit the HCPC reviewed the documentation detailed below, sent by the education provider:

|  | Yes                                 | No                       | N/A                                 |
|--|-------------------------------------|--------------------------|-------------------------------------|
| Programme specification  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Descriptions of the modules  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Mapping document providing evidence of how the education provider has met the SETs | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Mapping document providing evidence of how the education provider has met the SOPs | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Practice placement handbook  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Student handbook   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Curriculum vitae for relevant staff  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| External examiners' reports from the last two years                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

The HCPC did not review external examiners' reports from the last two years prior to the visit as the programme is new and currently there is no external examiner.

During the visit the HCPC saw the following groups or facilities:

|   | Yes                                 | No                       | N/A                      |
|---|-------------------------------------|--------------------------|--------------------------|
| Senior managers of the education provider with responsibility for resources for the programme | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Programme team  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Placements providers and educators / mentors  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Students  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Service users and carers  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Learning resources  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Specialist teaching accommodation<br>(eg specialist laboratories and teaching rooms)          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

The HCPC met with students from the BSc (Hons) Diagnostic Radiography, as the programme seeking approval currently does not have any students enrolled on it.

## Recommended outcome

To recommend a programme for approval, the visitors must be satisfied that the programme meets all of the standards of education and training (SETs) and that those who complete the programme meet our standards of proficiency (SOPs) for the relevant part of the Register.

The visitors agreed to recommend to the Education and Training Committee that a number of conditions are set on the programme, all of which must be met before the programme can be approved.

The visitors agreed that 52 of the SETs have been met and that conditions should be set on the remaining six SETs.

Conditions are requirements that the education provider must meet before the programme can be approved. Conditions are set when certain standards of education and training have not been met or there is insufficient evidence of the standard being met.

The visitors have also made a recommendation for the programme.

Recommendations are observations on the programme or education provider which do not need to be met before the programme can be approved. Recommendations are made to encourage further enhancements to the programme, normally when it is felt that the particular standard of education and training has been met at, or just above the threshold level.

## Conditions

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

**Condition:** The education provider must demonstrate how the admissions procedures give all the necessary information to potential applicants to make an informed choice to take up an offer of a place on the programme.

**Reason:** In the documentation provided prior to the visit, the visitors noted that information about the programme including admissions procedures will be available online at the end of November 2015. The visitors were also directed to page 14 of the programme specification for information about admission procedures, but this contained a link to the university wide admissions procedures. During the programme team meeting, the visitors learnt a number of features and requirements specific to the programme, including:

- the programme is an accelerated programme, delivered over two full calendar years from September to September;
- the programme has no summer break, as students will be on practice placements during summer; and
- there is an expectation that potential applicants will have prior work experience in care setting(s).

The visitors could not find evidence of how the programme team will give potential applicants the information mentioned above, and other information that they will require to make an informed choice about whether to take up a place on the programme. Therefore, the visitors require further evidence to demonstrate how the admissions procedures give all the necessary information to potential applicants to make an informed choice to take up an offer of a place on the programme.

### **2.6 The admissions procedures must apply selection and entry criteria, including accreditation of prior (experiential) learning and other inclusion mechanisms.**

**Condition:** The education provider must clarify whether this programme allows accreditation of prior (experiential) learning.

**Reason:** In the documentation provided prior to the visit, the visitors were directed to the education provider's academic regulations section C. The visitors noted that students can accredit a maximum of 60 credits on any master's programme. However, the programme team highlighted that due to the nature of this programme, students will not be allowed to accredit any prior learning on this programme. The visitors highlighted to the programme team that potential students will need to be informed explicitly about the entry criteria for this programme. The programme team said they will update all the necessary documentation including entry criteria to ensure potential students know in advance this programme does not allow accreditation of prior learnings. Therefore, the visitors will need to see evidence that shows that accreditation of prior (experiential) learning is not allowed on this programme.

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

**Condition:** The education provider must provide further evidence to demonstrate that there is an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

**Reason:** In the documentation provided prior to the visit, the visitors noted that delivery of this programme will require additional staff (1 full time equivalent) based on the anticipated student numbers across the new programme and the existing undergraduate programme. During the meeting with the senior management team, the visitors learnt that recruitment of an additional staff member has been agreed and finalised in departmental business plan. The visitors also learnt that the programme team will include a master's degree in radiography as a criterion for appointment for this post. However, from discussions at the visit, it was not clear what the full appointment criteria is or when this recruitment would take place. The visitors therefore require further evidence to demonstrate that there is an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

### **3.14 Where students participate as service users in practical and clinical teaching, appropriate protocols must be used to obtain their consent.**

**Condition:** The programme team must provide evidence of the protocols to obtain informed consent from students when they participate as service users in practical sessions, and for managing situations when students decline from participating as service users.

**Reason:** From the documentation submitted prior to the visit, the visitors noted that when required, students would be verbally asked to confirm their consent and their right to confidentiality in the classroom and group work settings. However, in discussions with the programme team and students the visitors noted that there were no formal processes by which students would be able to give their consent when acting as service users in role plays, and that it will be documented and recorded. Also, the visitors could not see how students understood the risk of participating in role plays, and the impact on their academic progression if they chose to opt out of participating. The visitors therefore require the programme team to provide evidence of protocols for obtaining informed consent from students and for managing situations where students decline from participating in practical and clinical teaching.

### **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.**

**Condition:** The education provider must provide further evidence that shows the link between curriculum content and the standard of proficiency (SOPs) for radiographers.

**Reason:** In the documentation provided prior to the visit, the visitors were directed to modules of the programme to show how SOPs are delivered in the programme. However, the visitors noted that modules have very few numbers of learning outcomes. For example, module Imaging Physics Principles and Applications has only two learning outcomes. Similarly, module Soft Tissue Imaging & Practice 2 has only one learning outcome. From the review of the modules specifications, the visitors were unable to determine where each module specification made reference to, and consequently linked

to the SOPs. During the meeting with programme team, the visitors learnt that the curriculum content is designed to deliver the SOPs for radiographers. The visitors also noted that the programme team uses the education provider's template for modules which has a limit of three learning outcomes for each module. In order for this standard to be met, the visitors considered that the curriculum content and / or learning outcomes must ensure those who successfully complete the programme understand the importance of SOPs. Because the visitors could not see reference or link to the SOPs in the content of modules' specifications, they need further evidence that shows the link between curriculum content and the SOPs to ensure those who successfully complete the programme understand the importance of the SOPs for radiographers.

**6.11 Assessment regulations must clearly specify requirements for the appointment of at least one external examiner who must be appropriately experienced and qualified and, unless other arrangements are agreed, be from the relevant part of the Register.**

**Condition:** The education provider must include a clear statement in the programme documentation that at least one external examiner for the programme will be from the relevant part of the Register, or agree other arrangements with the HCPC.

**Reason:** In the documentation submitted by the education provider there was insufficient detail about the external examiner recruitment policy. It was not evident that there was an explicit requirement for at least one of the external examiners to be from the relevant part of the HCPC Register unless other arrangements are agreed with the HCPC. The visitors were given link to the recruitment process of external examiners however, there was insufficient evidence. Therefore, the visitors need to see evidence that HCPC requirements regarding the external examiner on the programme have been included in the documentation to demonstrate that this standard is met.

## Recommendations

### **6.9 Assessment regulations must clearly specify requirements for an aegrotat award not to provide eligibility for admission to the Register.**

**Recommendation:** The education provider should consider clarification between an aegrotat award and interim awards.

**Reason:** From the documentation submitted prior the visit, the visitors noted in the programme handbook on page 6 “Please note that none of the following aegrotat awards will confer eligibility to register with the HCPC as a Diagnostic Radiographer, therefore none of these awards allows you to practice as a Diagnostic Radiographer  
Interim awards: Post Graduate Certificate in Allied Health Studies, Post Graduate Diploma in Allied Health Studies and MSc in Allied Health Studies”. Although the visitors were content this standard is met, the visitors suggest the programme team to consider clarification between aegrotat award and interim awards as this could be misleading to potential students.

Helen Best  
Shaaron Pratt  
Susanne Roff

## Visitors' report

|   |  |
|---|--|
| <b>Name of education provider</b>         | Sheffield Hallam University                    |
| <b>Programme name</b>                     | Diploma of Higher Education Paramedic Practice |
| <b>Mode of delivery</b>                   | Full time                                      |
| <b>Relevant part of the HCPC Register</b> | Paramedic                                      |
| <b>Date of visit</b>                      | 10 – 11 December 2015                          |

## Contents

|                           |   |
|---------------------------|---|
| Executive summary .....   | 2 |
| Introduction.....         | 3 |
| Visit details .....       | 3 |
| Sources of evidence ..... | 4 |
| Recommended outcome ..... | 5 |
| Conditions.....           | 6 |

## Executive summary

The Health and Care Professions Council (HCPC) approve educational programmes in the UK which health and care professionals must complete before they can apply to be registered with us. We are a statutory regulator and our main aim is to protect the public. We currently regulate 16 professions. All of these professions have at least one professional title which is protected by law. This means that anyone using the title 'paramedic' must be registered with us. The HCPC keep a register of health and care professionals who meet our standards for their training, professional skills, behaviour and health.

The visitors' report which follows outlines the recommended outcome made by the visitors on the ongoing approval of the programme. The education provider has until 2 February 2016 to provide observations on this report. This is independent of meeting any conditions. The report and any observations received will be considered by the Education and Training Committee (Committee) on 12 February 2016. At this meeting, the Committee will accept, reject or vary the visitors' recommended outcome. If necessary, the Committee may decide to vary the conditions.

The education provider is due to redraft and resubmit documentary evidence in response to the conditions outlined in this report by 18 January 2016. The visitors will consider this response and make a separate recommendation to the Committee on the ongoing approval of the programme. It is anticipated that this recommendation will be made to the Committee on 23 March 2016.

## Introduction

The HCPC visited the programme at the education provider to consider major changes proposed to the programme. The major change affected the following standards - the level of qualification for entry to the Register, programme admissions, programme management and resources, curriculum, practice placements and assessment. The programme was already approved by the HCPC and this visit assessed whether the programme continued to meet the standards of education and training (SETs) and continued to ensure that those who complete the programme meet the standards of proficiency (SOPs) for their part of the Register.

This visit was an HCPC only visit. The education provider did not validate the programme at the visit and the professional body did not consider their accreditation of the programme. The education provider supplied an independent chair and secretary for the visit.

## Visit details

|   |  |
|---|--|
| Name and role of HCPC visitors                          | Frances Ashworth (Lay visitor)<br>Paul Bates (Paramedic)<br>Graham Harris (Paramedic)                          |
| HCPC executive officer (in attendance)                  | Hollie Latham  |
| Proposed student numbers                                | Direct entry: 50 per cohort, one cohort per year<br>Ambulance trust entry: 20 per cohort, two cohorts per year |
| First approved intake                                   | September 2004   |
| Effective date that programme approval reconfirmed from | April 2015   |
| Chair   | Simon Bromley (Sheffield Hallam University)  |
| Secretary   | Helen Garner (Sheffield Hallam University)<br>Sandra Clark (Sheffield Hallam University)                       |

## Sources of evidence

Prior to the visit the HCPC reviewed the documentation detailed below, sent by the education provider:

|  | Yes                                 | No                       | N/A                      |
|--|-------------------------------------|--------------------------|--------------------------|
| Programme specification  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Descriptions of the modules  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Mapping document providing evidence of how the education provider has met the SETs | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Mapping document providing evidence of how the education provider has met the SOPs | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Practice placement handbook  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Student handbook   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Curriculum vitae for relevant staff  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| External examiners' reports from the last two years                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

During the visit the HCPC saw the following groups or facilities:

|   | Yes                                 | No                       | N/A                      |
|---|-------------------------------------|--------------------------|--------------------------|
| Senior managers of the education provider with responsibility for resources for the programme | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Programme team  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Placements providers and educators / mentors  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Students  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Service users and carers  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Learning resources  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Specialist teaching accommodation<br>(eg specialist laboratories and teaching rooms)          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## Recommended outcome

To recommend a programme for ongoing approval the visitors must be satisfied that the programme meets all of the standards of education and training (SETs) and that those who complete the programme meet our standards of proficiency (SOPs) for the relevant part of the Register.

The visitors agreed to recommend to the Education and Training Committee that a number of conditions are set on the programme, all of which must be met before the programme can be approved.

The visitors agreed that 55 of the SETs have been met and that conditions should be set on the remaining three SETs.

Conditions are requirements that the education provider must meet before the programme can have its ongoing approval reconfirmed. Conditions are set when certain standards of education and training have not been met or there is insufficient evidence of the standard being met.

The visitors did not make any recommendations for the programme.

Recommendations are observations on the programme or education provider which do not need to be met before the programme can have its ongoing approval reconfirmed. Recommendations are made to encourage further enhancements to the programme, normally when it is felt that the particular standard of education and training has been met at, or just above the threshold level.

## Conditions

### **3.8 The resources to support student learning in all settings must be effectively used.**

**Condition:** The programme team must revisit programme documentation to ensure it is up to date and that the terminology in use is correct and reflective of the current terminology used in relation to statutory regulation and the HCPC.

**Reason:** The visitors noted that the programme documentation submitted by the education provider included several instances of incorrect and out of date terminology. For example, page 13 of the ECA student handbook states that “As part of the paramedic programme and agreed placement hours with College of Paramedics (CoP) and Health and Care Professions Council (HCPC), students are expected to complete 750 hours on each placement year” this is incorrect as the HCPC does not stipulate that students must complete a set number of placement hours. The documentation also includes a number of outdated references such as Criminal Records Bureau (CRB) instead of the current Disclosure and Barring Service (DBS), as well as using the HCPC’s old name HPC and referencing outdated curriculum guidance documents. Additionally, the documentation did not articulate that students coming onto the programme via the ambulance trust would have access to the Calderdale and Huddersfield library facilities. Whilst the students were clearly aware of the ability to use these facilities the visitors note that this is not currently communicated appropriately within the programme documentation.

The visitors therefore, require documentation to be revised to remove all instances of incorrect terminology and ensure it communicates up to date information on the resources available to students. This way the visitors can be sure that the documentary resources available to support students’ learning are being effectively used and that this standard is met.

### **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.**

**Condition:** The education provider must clearly articulate the learning outcomes for the programme modules to clearly reflect the following standard of proficiency (SOP) with specific reference to paediatric care. This will ensure that those who successfully complete the programme meet the SOPs for their part of the register.

**14.12** be able to conduct a thorough and detailed physical examination of the patient using appropriate skills to inform clinical reasoning and guide the formulation of a differential diagnosis across all age ranges

**Reason:** From a review of the programme documentation the visitors were unable to locate, where in the curriculum, the above mentioned SOP is addressed. Specifically, the visitors could not locate where students would be taught skills specific to paediatric care. In a meeting with the programme team it was stated that paediatric care is covered in module 2A active learning, module 2B PALS theory and in objective structured clinical examinations (OSCEs). The programme team also communicated detail of what was covered in each of these modules. The visitors were satisfied that the curriculum areas identified by the programme team were appropriate to address this SOP, however, without seeing this articulated within the programme documentation the

visitors cannot be sure that this will be delivered within the stated modules for the duration of the programme. The visitors therefore require the programme documentation to clearly articulate where the above SOP is delivered specifically in relation to paediatric care. In this way, the visitors can ensure that those who complete the programme are safe and effective practitioners.

**6.1 The assessment strategy and design must ensure that the student who successfully completes the programme has met the standards of proficiency for their part of the Register.**

**Condition:** The education provider must clearly articulate the assessment of learning outcomes for the programme modules to clearly reflect the following standard of proficiency (SOP) with specific reference to paediatric care. This will ensure that those who successfully complete the programme meet the SOPs for their part of the register.

**14.12** be able to conduct a thorough and detailed physical examination of the patient using appropriate skills to inform clinical reasoning and guide the formulation of a differential diagnosis across all age ranges

**Reason:** From a review of the programme documentation the visitors were unable to locate, where in the curriculum, the above mentioned SOP is addressed. Specifically, the visitors could not locate where students would be taught skills specific to paediatric care. In a meeting with the programme team it was stated that paediatric care is covered in module 2A active learning, module 2B PALS theory and in objective structured clinical examinations (OSCEs). The programme team also communicated detail of what was covered in each of these modules. The visitors were satisfied that the curriculum areas identified by the programme team were appropriate to address this SOP, however, without seeing this articulated within the programme documentation the visitors cannot be sure that this will be delivered within the stated modules for the duration of the programme. The visitors note that without seeing where in the curriculum this SOP is met, they cannot make a judgement on how this SOP is assessed. The visitors therefore require the programme documentation to clearly articulate where the above SOP is assessed, specifically in relation to paediatric care. In this way the visitors can ensure that those who complete the programme are safe and effective practitioners.

Frances Ashworth  
Paul Bates  
Graham Harris

## Visitors' report

|   |   |
|---|---|
| <b>Name of education provider</b>         | University of the West of England, Bristol    |
| <b>Programme name</b>                     | Diploma in Higher Education Paramedic Science |
| <b>Mode of delivery</b>                   | Distance learning                             |
| <b>Relevant part of the HCPC Register</b> | Paramedic                                     |
| <b>Date of visit</b>                      | 19 – 20 January 2016                          |

## Contents

|                           |   |
|---------------------------|---|
| Executive summary .....   | 2 |
| Introduction.....         | 3 |
| Visit details .....       | 3 |
| Sources of evidence ..... | 4 |
| Recommended outcome ..... | 5 |
| Conditions.....           | 6 |
| Recommendations.....      | 7 |

## Executive summary

The Health and Care Professions Council (HCPC) approve educational programmes in the UK which health and care professionals must complete before they can apply to be registered with us. We are a statutory regulator and our main aim is to protect the public. We currently regulate 16 professions. All of these professions have at least one professional title which is protected by law. This means that anyone using the title 'paramedic' must be registered with us. The HCPC keep a register of health and care professionals who meet our standards for their training, professional skills, behaviour and health.

The visitors' report which follows outlines the recommended outcome made by the visitors on the approval of the programme. The education provider has until 22 February 2016 to provide observations on this report. This is independent of meeting any conditions. The report and any observations received will be considered by the Education and Training Committee (Committee) on 12 February 2016. At this meeting, the Committee will accept, reject or vary the visitors' recommended outcome. If necessary, the Committee may decide to vary the conditions.

The education provider is due to redraft and resubmit documentary evidence in response to the conditions outlined in this report by 1 March 2016. The visitors will consider this response and make a separate recommendation to the Committee on the approval of the programme. It is anticipated that this recommendation will be made to the Committee on 23 March 2016.

## Introduction

The HCPC visited the programme at the education provider as it was a new programme which was seeking HCPC approval for the first time. This visit assessed the programme against the standards of education and training (SETs) and considered whether those who complete the programme meet the standards of proficiency (SOPs) for their part of the Register.

This visit was part of a joint event. The education provider validated the programme. The education provider, the professional body and the HCPC formed a joint panel, with an independent chair and secretary, supplied by the education provider. Whilst the joint panel participated in collaborative scrutiny of the programme and dialogue throughout the visit; this report covers the HCPC's recommendations on the programme only. As an independent regulatory body, the HCPC's recommended outcome is independent and impartial and based solely on the HCPC's standards. A separate report, produced by the education provider, outlines their decisions on the programme's status.

## Visit details

|   |   |
|---|---|
| Name and role of HCPC visitors            | Frances Ashworth (Lay visitor)<br>Paul Bates (Paramedic)<br>Mark Woolcock (Paramedic)   |
| HCPC executive officer (in attendance)    | Alex Urquhart   |
| Proposed student numbers                  | 30 per cohort, two cohorts per year   |
| Proposed start date of programme approval | 1 April 2016  |
| Chair                                     | Kevin Golden (University of the West of England, Bristol)   |
| Secretary                                 | Lisa Connors (University of the West of England, Bristol)   |
| Members of the joint panel                | Mandy Lee (University of the West of England, Bristol)<br>Vivien Rolfe (University of the West of England, Bristol)<br>Ruth Heames (University of Coventry) |

## Sources of evidence

Prior to the visit the HCPC reviewed the documentation detailed below, sent by the education provider:

|  | Yes                                 | No                       | N/A                                 |
|--|-------------------------------------|--------------------------|-------------------------------------|
| Programme specification  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Descriptions of the modules  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Mapping document providing evidence of how the education provider has met the SETs | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Mapping document providing evidence of how the education provider has met the SOPs | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Practice placement handbook  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Student handbook   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Curriculum vitae for relevant staff  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| External examiners' reports from the last two years                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

The HCPC did not review the external examiners' report prior to the visit as there is currently no external examiner as the programme is new.

During the visit the HCPC saw the following groups or facilities:

|   | Yes                                 | No                       | N/A                      |
|---|-------------------------------------|--------------------------|--------------------------|
| Senior managers of the education provider with responsibility for resources for the programme | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Programme team  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Placements providers and educators / mentors  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Students  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Service users and carers  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Learning resources  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Specialist teaching accommodation<br>(eg specialist laboratories and teaching rooms)          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

The HCPC met with students from the BSc (Hons) and FdSc Paramedic Science programmes, as the programme seeking approval currently does not have any students enrolled on it.

## Recommended outcome

To recommend a programme for approval, the visitors must be satisfied that the programme meets all of the standards of education and training (SETs) and that those who complete the programme meet our standards of proficiency (SOPs) for the relevant part of the Register.

The visitors agreed to recommend to the Education and Training Committee that a condition is set on the programme, which must be met before the programme can be approved.

The visitors agreed that 57 of the SETs have been met and a condition should be set on the remaining one SET.

Conditions are requirements that the education provider must meet before the programme can be approved. Conditions are set when certain standards of education and training have not been met or there is insufficient evidence of the standard being met.

The visitors have also made a recommendation for the programme.

Recommendations are observations on the programme or education provider which do not need to be met before the programme can be approved. Recommendations are made to encourage further enhancements to the programme, normally when it is felt that the particular standard of education and training has been met at, or just above the threshold level.

## Conditions

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

**Condition:** The education provider must ensure potential applicants to the programme are given a complete range of information in order to make an informed choice about the programme.

**Reason:** In the documents provided prior to the visit, the visitors could not determine how students and potential applicants will be provided with the necessary information they require to make an informed choice about whether to take up a place on the programme or otherwise. The visitors were unable to see clearly articulated information on the following:

- number of face to face hours at the education provider;
- information on the range of placements;
- self-study time as part of the programme;
- attendance requirements on the programme; and
- the details of how the programme will be delivered.

As such, the visitors were unable to determine how key information is communicated to potential applicants, to ensure that they are able to make an informed decision regarding whether to take up an offer of a place on the programme. To assess whether this standard is met the visitors need to see the revised programme documentation and the advertising materials.

## Recommendations

### **3.17 Service users and carers must be involved in the programme.**

**Recommendation:** The visitors recommend that the programme team continue to communicate the support available to service users and carers involved with the programme.

**Reason:** The visitors met with two service users and carers who explained how they are involved in the admissions process and run questions and answers sessions with students on the programme. The visitors were satisfied that this involvement met the standard at a threshold level. In the programme team meeting the visitors learnt that there is a service user and carer group in place to provide support and training for service users involved with the education provider. However when meeting with the service users and carers the visitors felt that they could be better informed about these available support and training. The visitors therefore recommend that the programme team continue to enhance communication about the support available to service users and carers involved within the programme.

Frances Ashworth  
Paul Bates  
Mark Woolcock