

Annual monitoring visitors' report

Contents

Section one: Programme details.....	1
Section two: Submission details	1
Section three: Additional documentation	2
Section four: Recommendation of the visitors	2

Section one: Programme details

Name of education provider	University of Hull
Programme title	BSc (Hons) Operating Department Practice
Mode of delivery	Full time
Relevant part of the HCPC register	Operating department practitioner
Name and role of HCPC visitors	David Bevan (Operating department practitioner) Tony Scripps (Operating department practitioner)
HCPC executive	Mandy Hargood
Date of postal review	1 August 2017

Section two: Submission details

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

- A completed HCPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External examiner's report for one year ago
- External examiner's report for two years ago
- Response to external examiner's report one year ago
- Response to external examiner's report for two years ago
 - Recruitment Process Mapping Document
 - Code of Practice role academic support tuition for staff
 - Service user comments
 - Faculty of Health and Social Care (FHSC) Learning and teaching strategy implementation plan 2016-17
 - Student feedback on service user teaching
 - Induction timetable 2016
 - Indicative content modules specification 47831
 - PMT minutes

- PMT minutes part b reserved
- Programme visits policy
- Position statement ODP's working in the scrub role
- Programme handbook 2016-17

Section three: Additional documentation

- The visitors agreed that no further documentation was required in order to make a recommendation.
- The visitors agreed that additional documentation was required in order to make a recommendation. The standards of education and training (SETs), for which additional documentation was requested, are listed below with reasons for the request.

Section four: Recommendation of the visitors

To recommend a programme for ongoing approval, the visitors must be assured that the programme meets all of the standards of education and training (SETs) and that those who complete the programme have demonstrated an ability to meet our standards of proficiency (SOPs) for their part of the Register.

The visitors agreed to recommend to the Education and Training Committee that:

- There is sufficient evidence to show the programme continues to meet the standards of education and training and that those who complete the programme will continue to demonstrate an ability to meet the standards of proficiency.
- There is insufficient evidence to determine if or how the programme continues to meet the standards of education and training listed. Therefore, a visit is recommended to gather more evidence and if required place conditions on ongoing approval of the programme.

HCPC annual monitoring process report

Education provider	University of Hull
Name of programme(s)	Allied Health Professional Independent and Supplementary Prescribing, University of Hull, PT (Part time)
Date submission received	01 August 2017
Date of initial assessment	21 August 2017
Case reference	CAS-11318-B9P8J8

Contents

Section 1: Our regulatory approach.....	2
Section 2: Programme details.....	2
Section 3: Requirements to commence assessment.....	3
Section 4: Visitors’ recommendation	3

Executive Summary

We are the Health and Care Professions Council (HCPC), a regulator set up to protect the public. We set standards for education and training, professional knowledge and skills, conduct, performance and ethics; keep a register of professionals who meet those standards; approve programmes which professionals must complete before they can register with us; and take action when professionals on our Register do not meet our standards.

The following is a report on the annual monitoring process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards for prescribing (for education providers) (referred to through this report as ‘our standards’). The report details the process itself, the evidence considered, and recommendations made regarding programme approval.

Section 1: Our regulatory approach

Our standards

We approve programmes that meet our education standards, which ensure individuals that complete the programmes meet proficiency standards. The proficiency standards set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

Programmes are normally [approved on an open-ended basis](#), subject to satisfactory engagement with our monitoring processes. Programmes we have approved are listed [on our website](#).

How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint [partner visitors](#) to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC).

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports. The Committee meets in public on a regular basis and their decisions are available to view [on our website](#).

HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

Gemma Quinn	Independent prescriber
Rosemary Furner	Independent prescriber
Mandy Hargood	HCPC executive

Section 2: Programme details

Programme name	Allied Health Professional Independent and Supplementary Prescribing
Mode of study	PT (Part time)
Entitlement	Independent prescribing Supplementary Prescribing
First intake	01 January 2014
Maximum student cohort	Up to 10
Intakes per year	1
Assessment reference	AM05767

We undertook this assessment to consider whether the programme continued to meet our standards over the last two academic years. This assessment formed part of our regular monitoring required of programmes on a cyclical basis.

Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we require certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

Required documentation	Submitted
HCPC annual monitoring audit form, including completed standards mapping	Yes
Internal quality reports from the last two years	Yes
External examiner reports from the last two years	Yes
Responses to external examiner reports from the last two years	Yes

Section 4: Visitors’ recommendation

In considering the evidence provided by the education provider as part of the initial submission, the visitors were satisfied that there is sufficient evidence that our standards continue to be met, and therefore recommend that the programme(s) remain approved.

This report, including the recommendation of the visitors, will be considered at the 21 September 2017 meeting of the ETC. Following this meeting, this report should be read alongside the ETC’s decision notice, which are available [on our website](#).

Annual monitoring visitors' report

Contents

Section one: Programme details.....	1
Section two: Submission details	1
Section three: Additional documentation	2
Section four: Recommendation of the visitors	3

Section one: Programme details

Name of education provider	University of Manchester
Programme title	Educational and Child Psychology (D.Ed.Ch.Psychol)
Mode of delivery	Full time
Relevant part of the HCPC register	Practitioner psychologist
Relevant modality	Educational psychologist
Name and role of HCPC visitors	Lisa Marks Woolfson (Educational psychologist) Robert Stratford (Educational psychologist)
HCPC executive	Mandy Hargood
Date of postal review	5 July 2017

Section two: Submission details

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

- A completed HCPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External examiner's report for one year ago
- External examiner's report for two years ago
- Response to external examiner's report one year ago
- Response to external examiner's report for two years ago
 - Programme staff CVs Document
 - Programme organogram 2015-2016
 - Programme organogram 2016-2017
 - Programme portfolio of visiting speakers
 - Programme Accreditation Report of the British Psychological Society April 2016
 - Service user and carer strategy
 - Curriculum delivery mapping 2015-2016

- Curriculum delivery mapping 2016-17
- Programme Handbook 2016-2017

Section three: Additional documentation

- The visitors agreed that no further documentation was required in order to make a recommendation.
- The visitors agreed that additional documentation was required in order to make a recommendation. The standards of education and training (SETs), for which additional documentation was requested, are listed below with reasons for the request.

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

Reason: Then visitors reviewed the evidence provided by the education provider of service user involvement in the programme that was in the form of a matrix. This noted places where appropriate service user and carer takes place. However, the visitors could not see how service users and carers were inducted to any of the roles or how they were trained and supported in the roles set out in the matrix. Therefore, the visitors were unclear if this standard was met. As such further evidence is required, that demonstrates how the education provider inducts, trains and supports service users and carers in their involvement in the programme.

Additional evidence: Evidence that demonstrates how service users and carers are prepared for their role and how they are supported in the programme, and how their role enhances the aims and outcomes for the programme as described in the matrix document.

Section four: Recommendation of the visitors

To recommend a programme for ongoing approval, the visitors must be assured that the programme meets all of the standards of education and training (SETs) and that those who complete the programme have demonstrated an ability to meet our standards of proficiency (SOPs) for their part of the Register.

The visitors agreed to recommend to the Education and Training Committee that:

- There is sufficient evidence to show the programme continues to meet the standards of education and training and that those who complete the programme will continue to demonstrate an ability to meet the standards of proficiency.
- There is insufficient evidence to determine if or how the programme continues to meet the standards of education and training listed. Therefore, a visit is recommended to gather more evidence and if required place conditions on ongoing approval of the programme.

Annual monitoring visitors' report

Contents

Section one: Programme details.....	1
Section two: Submission details	1
Section three: Additional documentation	2
Section four: Recommendation of the visitors	3
Section five: Visitors' comments	3

Section one: Programme details

Name of education provider	University of Salford
Programme title	Post Graduate Diploma Social Work (Step Up)
Mode of delivery	Full time
Relevant part of the HCPC register	Social worker in England
Name and role of HCPC visitors	Elsbeth McCartney (Speech and language therapist) Graham Noyce (Social worker in England)
HCPC executive	Niall Gooch
Date of assessment day	11 July 2017

Section two: Submission details

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

- A completed HCPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External examiner's report for one year ago
- External examiner's report for two years ago
- Response to external examiner's report one year ago
- Response to external examiner's report for two years ago
- Direct observation report
- Sample service user feedback form
- Working with adults timetable
- Readiness for direct practice assessment form
- Guide for Step Up assessors
- Programme specification

Section three: Additional documentation

- The visitors agreed that no further documentation was required in order to make a recommendation.
- The visitors agreed that additional documentation was required in order to make a recommendation. The standards of education and training (SETs), for which additional documentation was requested, are listed below with reasons for the request.

3.2 The programme must be effectively managed.

Reason: From review of the documentation, the visitors were not clear that the programme had effective management processes in place, particularly in regards to the monitoring of assessment and programme quality. They were not able to see evidence that the programme had appropriate internal monitoring, as the education provider had not submitted formal internal quality reports (see documentation request under standard 3.3 below). In light of the incomplete submission, the visitors were unable to be certain how the general management of the programme worked. For example, they were not able to determine how the programme monitored student retention and the appropriateness of assessment (because of the missing internal quality reports and lack of response to the external examiner's report from 2014-15), and how student feedback was gathered, analysed and implemented.

Suggested documentation: Evidence showing how the education provider ensures that the programme is effectively managed, especially in regard to internal quality monitoring and ensuring appropriate standards in assessment.

3.3 The programme must have regular monitoring and evaluation systems in place.

Reason: The visitors noted that the education provider had not submitted formal internal quality reports for the 2014-15 and 2015-16 academic years. In response to correspondence about this matter the education provider indicated that time pressures had prevented them from doing so. The visitors understood that the unusual structure of the Step Up programmes meant that the programme did not map on to these academic years exactly. However, they considered that as substantial parts of the January 2014 – April 2015 and January 2016 – April 2017 Step Up programmes took place in 2014-15 and 2015-16, it was reasonable to ask for internal quality documents relating to those two previous Step Up programmes. The visitors were able to review one document relating to internal quality monitoring, an Excel document listing some action points and deadlines. They were not able to determine from this document how the programme's regular internal monitoring and evaluation systems functioned, and how the education provider acted on the information gathered through monitoring. They were therefore unable to be certain that the standard was met.

Suggested documentation: Evidence showing how the education provider's internal quality monitoring worked during the 2014-15 and 2015-16 academic years, especially relating to how action points generated by monitoring were taken forward.

6.6 There must be effective monitoring and evaluation mechanisms in place to ensure appropriate standards in the assessment.

Reason: The visitors were able to review external examiners' reports for 2014-15 and 2015-16, and they noted that the external examiner gave very good feedback to the programme. However, they were unable to see a reply from the education provider to the external examiner's report for the 2014-15 academic year, and so were unable to determine whether the standard was met, as they could not be certain that there had been effective monitoring and evaluation mechanisms in place to ensure appropriate assessment standards in the 2014-15 academic year.

Suggested documentation: Evidence showing how the education provider responded to the external examiner's report for the 2014-15 academic year.

Section four: Recommendation of the visitors

To recommend a programme for ongoing approval, the visitors must be assured that the programme meets all of the standards of education and training (SETs) and that those who complete the programme have demonstrated an ability to meet our standards of proficiency (SOPs) for their part of the Register.

The visitors agreed to recommend to the Education and Training Committee that:

- There is sufficient evidence to show the programme continues to meet the standards of education and training and that those who complete the programme will continue to demonstrate an ability to meet the standards of proficiency.
- There is insufficient evidence to determine if or how the programme continues to meet the standards of education and training listed. Therefore, a visit is recommended to gather more evidence and if required place conditions on ongoing approval of the programme.

Section five: Visitors' comments

The visitors noted that, while they had seen evidence on request that the programme had appropriate monitoring and evaluation systems in place, in the education provider's first submission it was not clear to the visitors how these processes worked and what results they generated. The document provided as part of the annual monitoring submission was unclear and the visitors were not able to determine whether the relevant standards were met. They therefore suggest that during future annual monitoring processes the education provider provide clearer evidence relating to internal quality assurance mechanisms.