

## HCPC approval process report

Education provider	AECC University College
Name of programme(s)	BSc (Hons) Radiography (Radiotherapy and Oncology), Full time BSc (Hons) Radiography (Diagnostic Imaging), Full time
Approval visit date	04 June 2020
Case reference	CAS-15930-X1W1Y3

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### 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 approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards of education and training (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). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). 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:

Carly Elliott	Radiographer - Therapeutic radiographer
Stephen Boynes	Radiographer - Diagnostic radiographer
Patrick Armsby	HCPC executive

### Other groups involved in the virtual approval visit

There were other groups involved with the approval process as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

Stewart Cotterill	Independent chair (supplied by the education provider)	AECC University College
Karen Piggott	Secretary (supplied by the education provider)	AECC University College
Naomi Dickie	University Panel – External advisor	University of Portsmouth
Anthony Dennis	University Panel – External advisor	Kingston University and St George's, University of London

Victoria Wheeldon	University Panel – Internal member	AECC University College
Chris Derby	University Panel – Internal member	AECC University College
Stuart Mackay	The Society and College of Radiographers Panel Member	Professional body panel member - University of Liverpool
Dawn McDonald	The Society and College of Radiographers Panel Member	Professional body panel member - Mid-Essex Hospital Services NHS Trust
Helen White	The Society and College of Radiographers Panel Member	Professional body panel member - Birmingham City University

## Section 2: Programme details

Programme name	BSc (Hons) Radiography (Radiotherapy and Oncology)
Mode of study	FT (Full time)
Profession	Radiographer
Modality	Therapeutic radiographer
First intake	01 September 2020
Maximum learner cohort	Up to 10
Intakes per year	1
Assessment reference	APP02220

Programme name	BSc (Hons) Radiography (Diagnostic Imaging)
Mode of study	FT (Full time)
Profession	Radiographer
Modality	Diagnostic radiographer
First intake	01 September 2020
Maximum learner cohort	Up to 10
Intakes per year	1
Assessment reference	APP02221

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meet our standards for the first time.

## Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for 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.

Type of evidence	Submitted	Comments
Completed education standards mapping document	Yes	
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes	
Descriptions of how the programme delivers and assesses learning	Yes	
Proficiency standards mapping	Yes	
Information provided to applicants and learners	Yes	
Information for those involved with practice-based learning	Yes	
Information that shows how staff resources are sufficient for the delivery of the programme	Yes	
Internal quality monitoring documentation	Not Required	Only requested if the programme (or a previous version) is currently running

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meetings held, along with reasons for not meeting certain groups (where applicable):

Group	Met	Comments
Learners	No	The visitors were able to determine that many of the standards were met prior to the visit. They determined it was not necessary to meet this group in order to understand how the other standards would be met.
Service users and carers (and / or their representatives)	No	The visitors were able to determine that many of the standards were met prior to the visit. They determined it was not necessary to meet this group in order to understand how the other standards would be met.
Facilities and resources	No	The visitors were provided with a virtual 'tour' of the facilities and resources available prior to the visit.
Senior staff	Yes	
Practice educators	Yes	
Programme team	Yes	

## Section 4: Outcome from first review

### Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

### Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 17 July 2020.

### **3.5 There must be regular and effective collaboration between the education provider and practice education providers.**

**Condition:** The education provider must demonstrate how there will be regular and effective collaboration between the education provider and practice education providers.

**Reason:** To evidence this standard in the documentary submission the education provider indicated that the programme team would maintain regular contact with placement sites and ensure regular updates are disseminated through the teams. From this information, the visitors were not clear whether these actions mean that the education provider collaborated with practice education providers to ensure ongoing quality and effectiveness of the programme. They also could not see how their collaboration influenced the way the programme as a whole is designed and delivered.

At the visit, the visitors explored the nature of collaboration with the programme team and practice educators. In the meeting with the practice educators the visitors met with representatives from the Radiotherapy and Oncology programme but not with practice educators related to the Diagnostic Imaging programme. The practice educators explained that they had been in regular contact with the education provider and had been consulted around what they would expect and require from a band 5 radiographer. It was clear to the visitors that the Radiotherapy and Oncology practice educators were involved with the programme and there was a clear working relationship. However, the practice educators could not confirm how they would be feeding into continued development of the programme or how regular meetings would be occurring.

In the programme team meeting the visitors were told that practice education providers were involved in the initial design and delivery programme. They were also involved in reviewing the handbook at an initial stage. The visitors then questioned how they would be involved in the future of the programme and how they might be involved in review of the programme. The programme team stated that they would be open to involving practice educators in reviewing the programme content but did not confirm this would be happening.

The visitors understood there to be a working relationship with practice education providers. But following discussions with the programme team and practice educators they could not confirm that collaboration would be used to influence the way the programme as a whole is developed. We expect the arrangements for working with them to reflect an ongoing relationship not only when specific issue arise around practice-based learning. The education provider must clarify how they will ensure there is regular and effective collaboration with practice education providers. They must also

clarify how this collaboration will make sure they deliver ongoing quality and effectiveness as well as influencing the design of the programme as a whole.

#### **4.11 The education provider must identify and communicate to learners the parts of the programme where attendance is mandatory, and must have associated monitoring processes in place.**

**Condition:** The education provider must identify and indicate how they will communicate the parts of the programme where attendance is mandatory

**Reason:** To evidence this standard in the documentary submission the education provider stated that there is a minimum attendance rate of 80 per cent for all learners in the academic setting. However, from the information provided, visitors were not clear of how learners would know what sessions were essential for progression through the programme, specifically in ensuring learners are prepared for practice based learning. In exploring this at the visit, the programme team confirmed that learners would be required to undertake sessions such as basic life support training prior to taking part in practice-based learning. They confirmed that this would be tied into tutorial sessions. The visitors noted that there was not information about this in the documentation, and could not confirm how learners would be aware of the mandatory nature of these sessions. Therefore, the education provider must clarify what the sessions that must be undertaken prior to practice-based learning will cover. They must also clarify how they will ensure learners are aware of the necessity to undertake these sessions and show how learners will catch up if the original sessions are missed.

#### **5.2 The structure, duration and range of practice-based learning must support the achievement of the learning outcomes and the standards of proficiency.**

**Condition:** The education provider must show how they will ensure that all learners have access to an appropriate range of practice-based learning that will ensure they meet the learning outcomes and the standards of proficiency for radiographers.

**Reason:** To evidence this standard in the documentary submission the education provider highlighted the course specifications and placement handbook. The visitors noted that an appropriate range of practice-based learning was listed. However, they were unable to determine from these documents that all learners would have appropriate access to an appropriate range of practice based learning. The visitors also noted that the programmes would have shorter time in practice than other comparable programmes. They were unsure how this duration of practice-based learning would allow learners the appropriate time to demonstrate achievement of the learning outcomes and meet the standards of proficiency (SOPs) for Radiographers.

At the visit the visitors raised questions around the range of practice based learning available for learners and the rationale for the duration of practice-based learning in the programme. The programme team explained that they were confident that all learners would have the appropriate range of practice-based learning. They also explained that due to the number of learners they can be more flexible and create individualised plans of practice-based learning for them depending on their individual learning needs. The visitors could understand why they had adopted this approach but the education provider did not provide assurance on how this approach would definitely ensure that all learners have access to an appropriate range for an appropriate time. For example, the visitors could not determine how the education provider would ensure that learners

would not focus their practice-based learning in one specific area of their profession at the detriment of other areas.

In discussions around time spent in practice-based learning. The education provider indicated they would 'pre-load' learners with clinical skills that would commonly be taught in the practice setting, to ensure the time spent in practice was focused on the environment specific learning. The visitors could understand this approach but had not seen what skills learners would learn prior to taking part in practice-based learning in the documentation. As such they could not confirm that the current duration would allow for them to learn and demonstrate the appropriate skills in the practice setting. The education provider must clarify what will be contained in the 'pre-loading' of learners for practice-based learning. The education provider must show these sessions in conjunction with practice-based learning will ensure learners have appropriate duration to meet the learning outcomes associated with practice-based learning.

### **5.7 Practice educators must undertake regular training which is appropriate to their role, learners' needs and the delivery of the learning outcomes of the programme.**

**Condition:** The education provider must show that practice educators will be appropriately trained for their role to support the learning needs of the first cohort of learners.

**Reason:** In the documentary submission the education provider highlighted a section in the course specification and narrative that practice educators would be expected to take part in an annual training and review session. The visitors were satisfied how this would be implemented as the programme runs. However, they were not clear how practice educators would be prepared and trained for the upcoming first year of the programme. At the visit they enquired how practice educators would be trained in time for the first cohort of learners. In the programme team meeting the visitors were told that a practice educators training had been designed and would be carried out before learners take part in practice-based learning. The education provider currently has not selected a date for this training day nor were they able to provide information about the content of the day. As such the visitors could not confirm that practice educators would be appropriately trained in time for the first cohort of learners taking part in this programme. The education provider must show how the content of the training day will be appropriate for the programmes. They must also how they will ensure that all practice educators will be appropriately trained in time for the first cohort of learners, including any practice educators that are unable to attend the training day.

### **Recommendations**

We include recommendations when standards are met at or just above threshold level, and where there is a risk to that standard being met in the future. Recommendations do not need to be met before programmes can be approved, but they should be considered by education providers when developing their programmes.

#### **2.1 The admissions process 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.**

**Recommendation:** The education provider should formalise the information provided to learners to ensure they are able to make an informed decision about whether to take up a place on the programme.

**Reason:** In the documentary submission and viewing the website visitors noted that the information provide for learners was fairly generic and not radiography specific. In discussions at the visit the visitors were told this university policy and they would be able to update the information at a later date to reflect the appropriate information. They also confirmed that information around health and criminal conviction checks would be provided to learners at open days and interviews. The visitors were therefore satisfied that learners would be appropriately informed to take up a place on the programme. However, they are recommending that the education provider formalises the information they provided to the visitors, to ensure appropriate clarity for learners.

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

**Recommendation:** The education provider should ensure future involvement of service users in teaching is embedded effectively in the programme and they are given the appropriate support in this role.

**Reason:** To evidence this standard in the documentary submission the visitors could see that service users would be involved in interviews of applicants. They were also consulted around the structure and documentation for the programme. The visitors considered this to meet the threshold for the standard. However, at the programme team outlined their early plans to involve service users in the teaching portions of the programme. The visitors considered these plans to be appropriate and recommend the education provider ensures that service users are appropriately prepared and supported in carrying out this role in the teaching of the programme.

### **3.18 The education provider must ensure learners, educators and others are aware that only successful completion of an approved programme leads to eligibility for admission to the Register.**

**Recommendation:** The education provider should ensure that learners are aware that aegrotat awards for the programme do not lead to eligibility for admission to the register by stating this in the student handbook.

**Reason:** In the documentation the visitors noted that the education provider had not been explicit about aegrotat awards and how they related to eligibility for registration. In discussions with the programme team the visitors confirmed this would be appropriately communicated to learners when it was relevant. The visitors recommend that this information is formalised in programme documentation for learners to ensure maximum clarity.

### **4.1 The learning outcomes must ensure that learners meet the standards of proficiency for the relevant part of the Register.**

**Recommendation:** The education provider should include all indicative content in module descriptors to ensure that learners are clear on the proficiencies they will need to meet in the programme.

**Reason:** Prior to the visit the visitors were unclear on how the programme would ensure the following standards of proficiency (SOPs) would be covered in the programme; 5.1, 7.3, 9.2, 9.3, 13.10, 13.16, 14.27, 14.44, 15.7, 15.9, 15.10. The programme team indicated indicative content that was not present in the module descriptors. In discussions with the programme team the visitors were clear that these SOPs would be appropriately covered for learners. The visitors recommend formalising these discussions and ensure the module descriptors accurately reflect the content within them.

#### **4.9 The programme must ensure that learners are able to learn with, and from, professionals and learners in other relevant professions.**

**Recommendation:** The education provider should formalise their plans for learning with physiotherapy and chiropractic learners.

**Reason:** In the documentary submission the visitors could see informal plans of how learners would interact with learners and professionals in other relevant professions. At the visit they explored with the programme team how much further the plans had developed. The programme team confirmed were more advanced plans for learners to take part in a professionalism unit with chiropractic and Physiotherapy learners. The visitors were satisfied this opportunity would be appropriate to meet the standard. However, they recommend these opportunities are formalised and reflected in the programme documentation.

#### **6.1 The assessment strategy and design must ensure that those who successfully complete the programme meet the standards of proficiency for the relevant part of the Register.**

**Recommendation:** For the diagnostic radiography programme the education provider should ensure the language in the clinical competencies accurately reflect the standards of proficiency for diagnostic radiographers.

**Reason:** When assessing the practice assessment competencies the visitors noted that learners would be expected to observe magnetic resonance imaging (MRI) and ultrasound techniques. The standards of proficiency (SOPs) require Diagnostic radiographers to be able to assist, rather than observe, in ultrasound and MRI procedures (see SOPs 14.32 & 14.33). The programme team explained how the teaching and assessment would be carried out in relation to these standards, they confirmed that this was just misleading language and learners would be required to assist rather than just observe. The visitors were satisfied with this response and the programme team confirmed how and recommend that the appropriate documentation is reflected of the language of the SOPs.

#### **6.3 Assessments must provide an objective, fair and reliable measure of learners' progression and achievement.**

**Recommendation:** For the therapeutic radiography programme the education provider should ensure the clinical assessment criteria is detailed to show the competencies required to ensure that assessments remain objective for learners.

**Reason:** In the documentary submission the visitors noted that the assessment criteria for clinical skills was more detailed for the diagnostic programme and related

specifically to competencies. In discussion with the programme team the visitors were told that the therapeutic radiography assessment criteria would assess the relevant clinical competencies but the documentation was not reflective of this because it was based on another institution's criteria. The visitors were satisfied that learners would be assessed objectively but recommend that the documentation is updated appropriately to reflect the detail provided by the programme team.

## HCPC approval process report

Education provider	University of Bedfordshire
Name of programme(s)	BSc (Hons) Occupational Therapy, Full time BSc (Hons) Physiotherapy, Full time
Approval visit date	06-07 May 2020
Case reference	CAS-15826-T2C1C5

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### Executive Summary

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## Section 1: Our regulatory approach

### Our standards

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### 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). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). 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:

Ian Hughes	Lay
Rebecca Khanna	Occupational therapist
Carol Rowe	Physiotherapist
John Archibald	HCPC executive

### Other groups involved in the virtual approval visit

There were other groups involved with the approval process as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

Paul Sant	Independent chair (supplied by the education provider)	University of Bedfordshire
Nathan Spencer	Secretary (supplied by the education provider)	University of Bedfordshire
Annie Danbury	Internal panel member	University of Bedfordshire
Sally Feaver	External panel member	Oxford Brookes University

Liz Grant	Quality and standards representative	University of Bedfordshire
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## Section 2: Programme details

Programme name	BSc (Hons) Occupational Therapy
Mode of study	FT (Full time)
Profession	Occupational therapist
Proposed first intake	01 September 2020
Maximum learner cohort	Up to 15
Intakes per year	1
Assessment reference	APP02196

Programme name	BSc (Hons) Physiotherapy
Mode of study	FT (Full time)
Profession	Physiotherapist
Proposed first intake	01 September 2020
Maximum learner cohort	Up to 15
Intakes per year	1
Assessment reference	APP02197

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meet our standards for the first time.

## Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for 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.

Type of evidence	Submitted	Comments
Completed education standards mapping document	Yes	
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes	
Descriptions of how the programme delivers and assesses learning	Yes	
Proficiency standards mapping	Yes	
Information provided to applicants and learners	Yes	

Information for those involved with practice-based learning	Yes	
Information that shows how staff resources are sufficient for the delivery of the programme	Yes	
Internal quality monitoring documentation	No	The programmes have not yet run.

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

Group	Met	Comments
Learners	Yes	We met with learners from the BSc (Hons) Operating Department Practice, BSc (Hons) Paramedic Science, BSc (Hons) Sports Therapy and BSc (Hons) Social Work programmes.
Service users and carers (and / or their representatives)	Not Required	
Facilities and resources	No	Questions related to facilities and resources were explored in other meetings.
Senior staff	Yes	
Practice educators	Yes	
Programme team	Yes	

## Section 4: Outcome from first review

### Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

### Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 18 June 2020.

### 3.1 The programme must be sustainable and fit for purpose.

**Condition:** The education provider must provide further information confirming the maximum learner numbers for the initial intake of the programmes, and about how they will manage any possible risks to the delivery of the programmes and the learner experience.

**Reason:** From the documentation provided prior to the visit the visitors were made aware that each programme was looking to recruit a maximum of 15 learners. However, the visitors were also made aware of a reference to the programmes initially recruiting five learners each. In the meeting with the senior team the visitors were informed the programme initially intended on recruiting a maximum of 15 learners. However, the visitors had received memorandums of understanding related to practice-based learning to cover a maximum of five learners. The visitors were therefore unclear about the learner numbers being recruited to the programme initially.

Although the visitors were informed the education provider has experience of working with low numbers of learners, the visitors were unsure how the education provider would sustain the programmes with these low numbers of learners. They considered the overall learner experience and programme delivery while on the programme may be affected by these low learner numbers, as the diversity of experience in experiential and collaborative learning may be reduced, which in turn might affect the achievement of the learning outcomes. The visitors were unsure how the learner experience and programme delivery is going to be monitored and managed when working with a small-sized cohort.

The visitors therefore require further information confirming the maximum learner numbers, and about how the education provider will manage any possible risks to the delivery of the programme and the learner experience.

### **3.2 The programme must be effectively managed.**

**Condition:** For the BSc (Hons) Occupational Therapy programme, the education provider needs to demonstrate how the programme management ensures the course coordinator can lead the programme effectively.

**Reason:** For the BSc (Hons) Occupational Therapy programme, the visitors were informed at the visit that the course coordinator had recently left. An appointment for their replacement had been made, and the new course coordinator was due to start in July, with the programme due to start two months after. The visitors considered it was unclear given the timescales involved, if there are structures in place which will support the new course coordinator so they are able to use their profession-specific expertise to effectively manage the start-up and initial delivery of the programme in the time available. The visitors therefore require further information about the programme management structure and arrangements with clear information about roles and responsibilities so the course coordinator is supported to lead the programme effectively.

### **3.6 There must be an effective process in place to ensure the availability and capacity of practice-based learning for all learners.**

**Condition:** The education provider must show how they will ensure all learners on the programme have access to practice-based learning to meet their learning needs.

**Reason:** To evidence this standard, the visitors received evidence of Memorandums of Understanding for the initial intake of five learners. However, in the meeting with the senior team the visitors were informed the programme initially intended on recruiting a maximum of 15 learners. The visitors were therefore unclear about the learner numbers being recruited to the programme initially. Although the visitors considered they had seen evidence the availability of practice-based learning for five learners, the visitors were unclear whether there was availability of practice-based learning for 15 learners.

At the visit, the visitors were also made aware of the proposed development of the programme, which included an increase in learner numbers. However, the visitors were unclear how the education provider considers plans for future learners.

The visitors therefore require further evidence of the process to ensure all learners on the programme have access to practice-based learning to meet their learning needs, and that this process considers both future and current learners plans for practice placements.

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

### **3.10 Subject areas must be delivered by educators with relevant specialist knowledge and expertise.**

The following condition applies to the above standards. For simplicity, as the issue spans several standards, the education provider should respond to this condition as one issue.

**Condition:** The education provider must demonstrate there are an appropriate number of staff who are able and equipped with the necessary knowledge and expertise to deliver the programmes effectively.

**Reason:** To meet these standards, the visitors were informed each programme has a course co-ordinator who leads the programme and who are HCPC-registered for the discipline they lead. The visitors were made aware the course co-ordinator is the sole member of each programme team who is HCPC-registered in that profession. The visitors were informed that academic staff from across the Faculty and hourly-paid lecturers will also contribute to the programme.

However, from the information provided and from discussions, the visitors were unclear what experience and knowledge was required of individuals in order for them to be suitable for recruitment as an hourly-paid lecturer, so they are suitable and well-equipped to take part in teaching and to support learning in the subject areas they are involved in.

The visitors therefore were also unsure whether there are an appropriate number of staff who are able and equipped to deliver the programme effectively, and that educators have the necessary knowledge and expertise to deliver their parts of the programme effectively.

The visitors require further documents to demonstrate there are an appropriate number of staff who are able and equipped to deliver the programme effectively, and that

educators have the necessary knowledge and expertise to deliver their parts of the programme effectively.

### **3.11 An effective programme must be in place to ensure the continuing professional and academic development of educators, appropriate to their role in the programme.**

**Condition:** The education provider must show how they make sure sessional or visiting lecturers and practice educators, are able to develop and maintain their professional and academic skills, so they are able to deliver the programme effectively.

**Reason:** From the documentation provided prior to the visit, the visitors were made aware of a staff development plan in place to assure the development of staff in both research and teaching. The visitors were made aware this applies to staff at the education provider. However the visitors were unclear how the education provider makes sure that those educators who are not permanently employed, but who are sessional or visiting lecturers and practice educators, are able to continue to develop and maintain their professional and academic skills so they are able to deliver the programme effectively. The visitors therefore require further information about how the education provider makes sure that those educators who are sessional or visiting lecturers and practice educators, are able to continue to develop and maintain their professional and academic skills so they are able to deliver the programme effectively.

### **3.12 The resources to support learning in all settings must be effective and appropriate to the delivery of the programme, and must be accessible to all learners and educators.**

**Condition:** The education provider must show that programme-specific resources are available and accessible to all learners and educators (in all settings) to support the breadth the learning and teaching requirements of the programme.

**Reason:** Prior to the visit, the visitors were informed there were a variety of resources to support learning in place including 'BREQ' the education provider's virtual learning environment (VLE), a personal academic tutoring scheme, additional learning support from 'StudyHub', learning resources and dedicated specialist learning spaces.

The visitors were also made aware of a list of budgeted equipment for the programmes and also received a virtual tour presentation detailing planned development. However, the visitors were unclear which resources were going to be used by learners on each specific programme. The visitors were also unclear when the development will be ready, and the time it will be available to learners of each programme, both within the programme cohort and as part of any larger groups.

In the meeting with the programme team, the visitors were made aware that only practice educators with an honorary contract would have access to the education provider's library. The visitors were further informed that a practice educator would have to ask for an honorary contract, as this was not automatic, and that the education provider was unsure if practice educators were aware of this. The visitors considered access to the library resources to be vital for practice educators in non-NHS settings. Practice educators in NHS settings would have access to NHS library resources but those in non-NHS settings may not have access to the materials used by on the programme.

The visitors therefore need to see further evidence:

- of the resources which are going to be used by learners on each specific programme;
- when the development will be ready, and the time it will be available to learners of each programme, both within the programme cohort and as part of any larger groups; and
- that programme resources are readily available to educators in non-NHS settings to support the required learning and teaching activities of the programme.

## **5.2 The structure, duration and range of practice-based learning must support the achievement of the learning outcomes and the standards of proficiency.**

**Condition:** The education provider must provide further information about the range and structure of practice-based learning, including how they support the design, content and learning outcomes of the programme.

**Reason:** From the information provided, the visitors were informed a range of practice-based learning had been identified within the NHS primary and tertiary care settings and the private, voluntary and independent sector. With reference to occupational therapy, the visitors were made aware of one forensic placement. However, they were unable to see where practice-based learning specifically within other mental health settings, and where placements within private, independent or third sector settings would take place. With reference to physiotherapy, the visitors were unable to see any mental health placements. The visitors considered experience of these areas to be essential for both programmes as they reflect the nature of modern practice and the different settings that physiotherapists and occupational therapists would be expected to have experience in at the point of registration.

Therefore, the visitors were not satisfied that the range of practice-based learning settings was sufficient to ensure learners are able to meet the learning outcomes of the programme. The visitors would like further information about the range of practice-based learning, with reference to how learners progress during practice-based learning, in relation to the SOPs and the learning outcomes.

The visitors were also unclear how the part-time structure of practice-based learning has been agreed, and will work in practice. The visitors considered there are implications related to timetabling for employers, the education provider and learners. The visitors would like further information about the rationale for this structure, information about the decisions relating to this and how they related to the design and content of the programme and the learning outcomes.

## **5.5 There must be an adequate number of appropriately qualified and experienced staff involved in practice-based learning.**

**Condition:** The education provider needs to provide further evidence that there is sufficient and suitable support for learners to take part in safe and effective practice-based learning.

**Reason:** The visitors were informed that the number of practice educators are discussed at each Quality Education Practice Learning meeting and is a feature of the educational audit. The visitors were also made aware that the education provider also

supports learners through the provision of link lecturers. However, the visitors did not see evidence of the settings the range of practice-based learning would take place in, and so could not determine whether the qualifications and experience of staff is appropriate to the specific aspects of practice-based learning they are involved in. The visitors were therefore unsure how the education provider will ensure there are enough staff across the range of practice-based learning who are going to be appropriately qualified and experienced. The visitors need further evidence that there is sufficient and suitable staff for learners to take part in safe and effective practice-based learning.

#### **5.6 Practice educators must have relevant knowledge, skills and experience to support safe and effective learning and, unless other arrangements are appropriate, must be on the relevant part of the Register.**

**Condition:** The education provider must show how they ensure practice educators in non-NHS roles have the necessary knowledge, skills and experience to support safe and effective practice-based learning in relation to the programme's learning outcomes, and that all learners would not be assessed by practice educators without HCPC registration.

**Reason:** To evidence this standard, the visitors were informed the education provider will deliver a Practice Educator preparation day and will provide a range of other online resources to support Practice Educators. The visitors were comfortable with how the education provider makes sure practice educators from NHS settings are suitable in terms of their knowledge, skills and experience in order to support and develop learners in a safe and effective way, and that this was appropriate. However, the visitors were unsure of the education provider's rationale that the content of the preparation day is inclusive of practice educators from the non-statutory sector, in order to support learners in a safe, effective and equitable way. The visitors were unclear what process is in place to make sure the skills, experience and knowledge of those practice educators in non-NHS settings is appropriate.

In addition to the above, the visitors received a statement informing them that learners would not be assessed by non-HCPC registered practice educators, in both NHS and non-NHS settings. However, the visitors had not seen formal evidence of a policy related to this. The visitors would also need to see documentary evidence of the formal policy in relation to this.

The visitors therefore consider they need further information:

- about how the education provider ensures practice educators in non-NHS roles have the necessary knowledge, skills and experience to be able to support safe and effective practice-based learning in relation to the learning outcomes of the programme; and
- formally confirming the education provider's approach to the role of non-HCPC registered staff not being involved in learner assessment.

#### **5.7 Practice educators must undertake regular training which is appropriate to their role, learners' needs and the delivery of the learning outcomes of the programme.**

**Condition:** The education provider must provide further evidence of how they ensure they train all practice educators and that this is followed up with regular refresher training and support.

**Reason:** To meet this standard, the visitors were informed practice educators will be provided with updates and online resources. They will also be able to attend Practice Experience Group meetings to be informed of curriculum developments and or consulted on changes to school or university policy. In the meeting with the programme team, the visitors were informed both those new to the role and those who had experience of the role would both be offered a training day. However, the visitors had not seen evidence of the topics covered in these days, and were unclear whether it would be training appropriate to learners' needs and the delivery of the programme, or if it was an induction to the role. The visitors therefore consider they need further information that practice educators are appropriately prepared so they can support learning and assess learners effectively.

## HCPC approval process report

Education provider	Metanoia Institute
Validating body	Middlesex University
Name of programme(s)	Doctorate in Counselling Psychology and Psychotherapy by Professional Studies (DCPsych), Part time
Approval visit date	15 May 2020
Case reference	CAS-14574-R3M6S4

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### 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 approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards of education and training (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). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). 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:

David Packwood	Practitioner psychologist - Counselling psychologist
Jai Shree Adhyaru	Practitioner psychologist - Counselling psychologist
John Archibald	HCPC executive

## Section 2: Programme details

Programme name	Doctorate in Counselling Psychology and Psychotherapy by Professional Studies (DCPsych)
Mode of study	PT (Part time)
Profession	Practitioner psychologist
Modality	Counselling psychologist
First intake	01 January 2001
Maximum learner cohort	Up to 18
Intakes per year	1
Assessment reference	APP02097

Relevant programme interaction with our approval and monitoring processes is summarised below:

- 2016-17 (audit) – the visitors judged that they saw insufficient evidence to demonstrate that the programme continued to meet a number of the standards. The Education and Training Committee (ETC) agreed with the recommendation of the visitors, that an approval visit was required to appropriately assess how the programme continued to meet all the standards.
- 2017-18 (approval visit) – we visited the programme in June 2018, and the programme was re-approved in January 2019. The visitors were satisfied that the programme, which was recommended for approval subject to conditions, should be approved as the conditions were met at a threshold level.

However, at the conclusion of the approval process, although they were satisfied that the standards were met at a threshold level, the visitors remained concerned with some aspects of the programme. Particularly, this was in regards to the number of issues raised through the approval process, considering that the programme was already approved. Because of the education provider’s difficulty in achieving the conditions, the ETC decided that they would require further assurance that measures put into place to meet the conditions were effective in practice.

ETC did not consider that the normal monitoring cycle, being two years until a monitoring submission would be made by the programme, would be suitable in this case. They therefore decided that it would be more efficient for the education provider and the HCPC to conduct a visit. This visit was to take place following one internal monitoring cycle and involve the consideration of documentary evidence along with the visit. Whilst the visit was intended to pay particular focus on the measures put in place to meet the conditions, all standards were to be considered.

### Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for 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.

Type of evidence	Submitted
Completed education standards mapping document	Yes
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes
Descriptions of how the programme delivers and assesses learning	Yes
Proficiency standards mapping	Yes
Information provided to applicants and learners	Yes
Information for those involved with practice-based learning	Yes
Information that shows how staff resources are sufficient for the delivery of the programme	Yes
Internal quality monitoring documentation	Yes

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

<b>Group</b>	<b>Met</b>
Learners	Yes
Service users and carers (and / or their representatives)	Yes
Facilities and resources	Not Required
Senior staff	Yes
Practice educators	Yes
Programme team	Yes

**Section 4: Outcome from first review**

**Recommendation of the visitors**

In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

**Conditions**

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 03 July 2020.

**3.5 There must be regular and effective collaboration between the education provider and practice education providers.**

**Condition:** The education provider must provide further evidence of how they work in partnership with those who provide practice-based learning.

**Reason:** To meet this standard, the visitors were informed there are over 400 practice-based learning settings available for learners and that the education provider had appointed a placement co-ordinator. At the visit, practice educators informed the visitors they would like to talk more with the education provider. The visitors were informed the education provider holds annual practice-based learning education days and received the agenda for the last day. The visitors saw that the day included a discussion about how the placements are organised and the education provider's requirements of practice-based learning. The visitors were also informed 35 practice education providers attended the last practice-based learning education day. However, the visitors were unclear about who is invited to this day, and how attendance is monitored and what steps are taken for those who do not attend.

The visitors recognised that due to the high number of practice-based learning settings available for learners, it may not be possible to receive feedback and information from them all. However, the visitors were unclear whether the education provider has a formal system to incorporate feedback, and to work with all active practice education providers. The visitors were also unable to see information which demonstrates the education provider has structures in place which are available to all practice education providers to ensure there is a partnership and ongoing relationship.

The visitors were therefore unsure, due to this number of practice-based learning settings available for learners, how the education provider can effectively collaborate with these practice education providers. The visitors need more evidence of how the education provider works in formal partnership with all active practice education providers.

### **5.7 Practice educators must undertake regular training which is appropriate to their role, learners' needs and the delivery of the learning outcomes of the programme.**

**Condition:** The education provider must provide further evidence to demonstrate how they formally ensure all practice educators are prepared, through training and that there is regular training and support, so they can support learning and assess learners effectively.

**Reason:** To meet this standard, the visitors were informed prior to the visit the education provider passed information to practice educators about their role through the placement handbook and that training is offered both on Placement Providers' Day and Supervisors' Day, which take place annually.

From this information, the visitors considered there was no formal mechanism to ensure all practice educators received regular training, either when they start to undertake the role or as refresher training.

The visitors were also aware the programme had undergone changes as a result of revalidation. They considered it was imperative that all practice educators are aware of these changes to the programme so they are able to deliver the learning outcomes and work to the individual needs of learners.

The visitors were unclear whether this approach is effective in ensuring all practice educators are appropriately prepared so they can support learning and assess learners effectively. The visitors therefore need further evidence to demonstrate how the education provider formally ensures all practice educators are prepared, through training and that there is regular training and support, so they can support learning and assess learners effectively.

### **5.8 Learners and practice educators must have the information they need in a timely manner in order to be prepared for practice-based learning.**

**Condition:** The education provider must provide further documents to ensure practice educators understand their role and what is expected and required for the practice-based learning to be safe and effective.

**Reason:** To meet this standard, the visitors were informed that learners and practice educators receive the placement handbook prior to practice learning. The visitors were made aware the placement handbook contained information about the placement process, and how to find a suitable placement. The visitors were satisfied that learners had access to information they needed in order to be prepared for practice-based learning. However, the visitors considered that due to the general nature of the information contained within the placement handbook, they were unclear whether it would ensure practice educators knew and understood their role, and the expectations of the programme in regards to the learning outcomes to be achieved by learners. The visitors therefore require further evidence to demonstrate how the education provider sets and communicates clear expectations about practice-based learning to practice educators.

## HCPC approval process report

Education provider	Northumbria University at Newcastle
Name of programme(s)	BSc (Hons) in Operating Department Practice, Full time BSc (Hons) in Operating Department Practice Integrated Apprenticeship, Full time
Approval visit date	21-22 May 2020
Case reference	CAS-15137-Y8V2B9

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### Executive Summary

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The following is a report on the approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards of education and training (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

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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

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The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). 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:

Tony Scripps	Operating department practitioner
Julie Weir	Operating department practitioner
Temilolu Odunaike	HCPC executive

### Other groups involved in the virtual approval visit

There were other groups involved with the approval process as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

Guy Brown	Independent chair (supplied by the education provider)	Northumbria University at Newcastle
Rheanneon Kelly	Secretary (supplied by the education provider)	Northumbria University at Newcastle
Gemma Metcalfe-Glasgow	Secretary (supplied by the education provider)	Northumbria University at Newcastle
Rosina Thompson	Northumbria University attendee	Northumbria University at Newcastle

Heidi Robinson	Northumbria University attendee	Northumbria University at Newcastle
Mike Donnellan	Professional body representative	College of Operating Department Practitioners (CODP)
Deborah Robinson	External Subject Specialist	University of Hull
Mark Moss	Internal validation panel	Northumbria University at Newcastle
Jess Tindall	Internal validation panel	Northumbria University at Newcastle
Kirsty Jameson	Internal validation panel	Northumbria University at Newcastle

## Section 2: Programme details

Programme name	BSc (Hons) in Operating Department Practice
Mode of study	FT (Full time)
Profession	Operating department practitioner
Proposed First intake	01 September 2020
Maximum learner cohort	Up to 40
Intakes per year	1
Assessment reference	APP02177

Programme name	BSc (Hons) in Operating Department Practice Integrated Apprenticeship
Mode of study	FT (Full time)
Profession	Operating department practitioner
Proposed First intake	01 September 2020
Maximum learner cohort	Up to 15
Intakes per year	1
Assessment reference	APP02178

We undertook this assessment of new programmes proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meet our standards for the first time.

## Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for 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.

Type of evidence	Submitted	Comments
Completed education standards mapping document	Yes	
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes	
Descriptions of how the programme delivers and assesses learning	Yes	
Proficiency standards mapping	Yes	
Information provided to applicants and learners	Yes	
Information for those involved with practice-based learning	Yes	
Information that shows how staff resources are sufficient for the delivery of the programme	Yes	
Internal quality monitoring documentation	Not required	The programme is new and has not run.

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

Group	Met	Comments
Learners	No	As this was a virtual visit and, because the visitors did not have areas to address with this group, we decided that it was unnecessary to meet with them.
Service users and carers (and / or their representatives)	No	As above
Facilities and resources	Yes	
Senior staff	Yes	
Practice educators	Yes	
Programme team	Yes	

## Section 4: Outcome from first review

### Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

### Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However,

the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 10 July 2020.

## **2.1 The admissions process 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 that appropriate information about the programme is provided to potential applicants through the education provider's website, to allow them to make an informed decision about taking up a place on the programme.

**Reason:** The visitors reviewed the programme handbook and programme specification as evidence for these standards and they were satisfied that information that would assist applicants in their decision making about the programme was contained within the programme documentation. However, as these documents are not made available to potential applicants, the visitors were unclear how the education provider will ensure applicants have this information prior to applying, in order to be able to make an informed decision about the programme. The visitors also reviewed the education provider's website prior to the visit but they noted that the website had not been updated with clear information areas about the programme. The visitors noted that information about additional costs, for instance travel and accommodation costs was not available on the website.

At the visit, the visitors heard that the programme team intended to update the website with the appropriate information once the programme is approved. As the visitors were unable to determine how potential applicants - who would not have access to the programme documentation – would have the information required to decide on the programme, they could not determine that this standard was met. They therefore require the education provider to update their website with the appropriate information about the programme or provide a finished text of the information that would go on the website before it is uploaded. This way, they can be assured that potential applicants would have access to this information and they can then determine whether this standard is met.

## **2.6 There must be an appropriate and effective process for assessing applicants' prior learning and experience.**

**Condition:** For the Degree Apprenticeship programme, the education provider must provide further evidence that clearly demonstrates that there is an appropriate and effective process for assessing applicants' prior learning and experience.

**Reason:** From their review of the documentation, the visitors were unclear what the process for recognition of prior learning (RPL) would be for the degree apprenticeship (DA) programme. The visitors noted from their review of the DA programme specification, that learners may RPL the first year of the 3-year programme, provided they meet the required standards, which included completing 1200 hours in theory and 544 hours in practice. However, the visitors were unclear how applicants or employers would know what constitute "practice" in prior learning or what is required of applicants

as this was not made clear within the documentation. During discussions with the programme team, the visitors heard that, for instance, someone working in a theatre, for example a healthcare assistant with level 4 qualification can RPL into year 2 whereas someone without theatre experience will need to start from year 1. In the practice educators meeting, the visitors heard that a potential DA candidate could be someone “with enough experience such as a support worker”. They also heard that the employers would consider “those with professional exposure”.

Given the complexity of the RPL process for the DA programme, the visitors could not ascertain that there is a clear guidance for employers and the education provider to follow to assess individual applicant’s prior learning and experience. The visitors considered that there is lack of clarity within the programme documentation to demonstrate how the employers would be able to justify their decisions and to manage applicants’ expectations. Therefore, the visitors require that the education provider provide clear information specific to the complexity of the programme to both the applicants as well as the employers. The visitors require that the information provided demonstrate there is a clear agreement between the education provider and the employers in order for them to know what is acceptable for RPL and that staff involved are well informed and understand the process. This way they would be able to determine the appropriateness and effectiveness of the RPL process and thereby make a judgement about whether this standard is met.

### **3.18 The education provider must ensure learners, educators and others are aware that only successful completion of an approved programme leads to eligibility for admission to the Register.**

**Condition:** The education provider must revise programme documentation to clearly state that successful completion of the programme leads to eligibility to apply for HCPC registration.

**Reason:** From their review of the documentation provided, the visitors noted that page 6 of the programme handbook stated that the programme will prepare learners “to be safe, competent and knowledgeable practitioner and eligible for registration with the HCPC.” The visitors noted that learners, educators or the public may find this information confusing as completion of programmes do not guarantee access onto the HCPC Register. Rather, it gives eligibility to apply for registration. Although the education provider did provide correct information about eligibility to apply for HCPC registration in some other parts of the programme documentation, the visitors considered that the information provided throughout the documentation needs to be clear and accurate. They therefore request that the education provider revise both handbooks to show that successful completion of the programmes leads to eligibility to apply for HCPC registration.

### **4.1 The learning outcomes must ensure that learners meet the standards of proficiency for the relevant part of the Register.**

### **4.5 Integration of theory and practice must be central to the programme.**

The following condition applies to the above standards. For simplicity, as the issue spans several standards, the education provider should respond to this condition as one issue.

**Condition:** To ensure learners are prepared and competent for practice, and that theory and practice are effectively integrated, the education provider must ensure that the learning outcomes for module '6016: Leadership and management' ensure learners meet SOP 13.6: (understand the concept of leadership and its application to practice).

**Reason:** The visitors reviewed the programme specifications, programme handbooks and the module descriptors as evidence for these standards. From their review, the visitors noted that the level 6 module 6016: Leadership and management appeared to focus largely on skills with minimal focus on leadership theory. The visitors were unable to ascertain how the learning outcomes of this module would enable learners to meet SOP 13.6 (understand the concept of leadership and its application to practice). At the visit, the programme team explained that the BSc programmes (the DA and standard programmes) would focus on advanced skills, surgical assistance, critical analysis and quality, which are not available on the DipHE programme. They further explained that learners would have spent time in leadership roles working alongside and shadowing managers. However, the visitors noted this was not clearly articulated in the programme documentation.

The visitors could not see how the achievement of SOP 13.6 which is associated with this module will be taught and achieved. As such, they were unable to determine how learners would acquire the leadership skills they are expected to have to be able to practise competently as regulated professionals. In addition, the visitors noted that one of the year 3 practice modules is intended to deliver skills in leadership & management in perioperative practice. However, there was no evidence to show this is linked to the theory part of the programme. As the visitors could not see that leadership skills would be taught in theory, they were unable to determine how the skills would then be appropriately linked to practical teaching in a way that is relevant and meaningful to learners. The education provider must therefore ensure the module learning outcomes are revised to ensure SOP 13.6 is met and that there is effective integration of theory and practice to ensure learners are prepared and competent for practice.

#### **4.10 The programme must include effective processes for obtaining appropriate consent from service users and learners.**

**Condition:** The programme team must provide evidence of the formal process to obtain consent from learners when they participate as service users in practical and clinical teaching, and how they ensure learners understand what they are consenting to, to demonstrate its effectiveness.

**Reason:** The education provider referenced a section of the programme specification and the module descriptors which highlight the importance of obtaining consent by linking it to the programme outcomes for learners. The visitors noted that there was no explicit information provided on the process by which the education provider obtains consent from learners when they act as service users in practical and clinical teaching. The visitors also could not see information that showed how learners would be made aware of what types of activities they are consenting to.

At the visit, the programme team explained that learners will need to give their consent when they take part in role plays and for research and that consent is obtained on a case-by-case basis. They also stated that completed consent forms are checked by their ethics team. The education provider further explained that learners taking part in simulation may opt out if they do not want to take part. For instance, if this is due to

disability or sickness and that cameras can be moved away if learners do not wish to take part. Through these discussions, the visitors understood how the education provider obtains consent from learners. However, they considered that the programme documentation did not demonstrate how learners would understand what they are consenting to. As such the visitors could not determine that the consent process was effective. Therefore, they require that the education provider makes clear in the programme documentation and from a learner's point of view, their process of obtaining consent from learners to ensure learners are fully aware of what they are consenting to. This would in turn ensure that learners fully understand what is expected of them as health and care professionals, whilst respecting their individual rights and reducing the risk of harm.

### **5.3 The education provider must maintain a thorough and effective system for approving and ensuring the quality of practice-based learning.**

**Condition:** The education provider must demonstrate in the programme documentation that the system used to approve and ensure the quality of practice-based learning is appropriate, thorough and effective.

**Reason:** The visitors were provided with web links to evidence this standard. The visitors noted that the web pages provided general information about practice-based learning for nursing, midwifery and operating department practice programmes. The visitor also reviewed the Practice Learning: Ensuring Quality document. The visitors noted that this document made references to Nursing and Midwifery Council (NMC) quality requirements. However, there was no information about the quality assurance systems in place specifically for operating department practitioners in practice-based learning. As such, the visitors could not determine that the system for approving and ensuring quality of practice-based learning for this programme was effective. Therefore, the education provider must review their practice-based learning quality assurance document to ensure it is appropriate, thorough and effective at ensuring quality of practice-based learning for operating department practitioners.

### **5.8 Learners and practice educators must have the information they need in a timely manner in order to be prepared for practice-based learning.**

**Condition:** The education provider must demonstrate how they will ensure learners and practice educators have the information for them to be prepared for practice-based learning in a timely manner, particularly the practice assessment document (PAD) and the Ongoing record of Achievement (ORA).

**Reason:** The visitors noted from their documentary review that learners would be provided with their placement allocation information at least four weeks prior to commencing practice-based learning in order for them to prepare for the speciality. The visitors also noted from their review that there are two assessment documents to be used to assess learners in practice-based learning. These include the PAD and the ORA. The visitors saw that the ORA is to be used in conjunction with the PAD. At the visit, the programme team explained to the visitors that the PAD will be used by both learners and practice educators to assess learners' competencies whilst the ORA is used by learners to assist them in articulating where they are in their level of competency. However, the practice educators in their meeting did not appear to be fully aware how the PAD and the ORA would work.

As the practice educators did not have a clear understanding of how the assessment tools would be used to assess learners in practice-based learning, the visitors could not be certain that they would have the needed information in time to be prepared for practice-based learning. As such, the visitors require that the education provider makes clear to all practice educators and learners how the assessment methods, specifically the PAD and the ORA will work. The education provider must demonstrate how they will ensure the information is provided in a timely manner in order for both learners and practice educators to be prepared for practice-based learning.

#### **6.1 The assessment strategy and design must ensure that those who successfully complete the programme meet the standards of proficiency for the relevant part of the Register.**

**Condition:** The education provider must demonstrate how they will ensure that the assessment of the learning outcomes for module '6016: Leadership and management' ensure learners meet SOP 13.6 (understand the concept of leadership and its application to practice).

**Reason:** The documentation provided prior to the visit included module specifications, and programme handbooks which gave information about how the assessment strategy and design will ensure learners who successfully complete the programmes meet the SOPs. As noted in the reasoning for the condition under SET 4.1, the visitors noted that the learning outcomes for module '6016: Leadership and management' focused heavily on skills, rather than leadership theory. As such, they could not determine how the assessment of these learning outcomes will ensure learners are able to meet SOP 13.6 to which it relates.

Therefore, the visitors require the education provider to submit further evidence demonstrating how the assessment of module 6016 will ensure learners meet SOP 13.6 for operating department practitioners. In this way, they can determine whether this standard is met.

#### **6.4 Assessment policies must clearly specify requirements for progression and achievement within the programme.**

**Condition:** The education provider must provide further evidence that clearly articulates how progression and achievement in module 6016 are communicated to learners to ensure they understand the risk of not passing part of the assessment which would lead to them not progressing or fully completing this aspect of the programmes.

**Reason:** From their documentary review, the visitors noted that there were two parts that make up the assessment for module 6016. The visitors noted that part one was an assessment (drug calculations) that carried a 30% of the weighting overall but has attached to it a 100% pass mark. Part two, on the other hand was an assessment that carried 70% of the weighting overall but has a standard university pass mark which is generally 40%. From the above, the visitors were unclear about what might prevent a learner from progressing if they failed part one of the assessment. From reviewing the documents and through discussions at the visit, the visitors understood that in most of the other modules, learners may be able to accumulate marks sufficient to pass. However, they noted that the 6016 module does not permit progress in the same way as the other modules even if a learner were to achieve sufficient marks elsewhere (a pass in part two). The visitors noted that in the assessment of this module, there are no

compensations which meant both parts need to be passed with part one at 100%. They noted that this was not clearly communicated to learners in the programme documentation. As such, the visitors could not determine how the learners would fully understand what is expected of them at this stage of the programmes. They therefore require the education provider to clearly specify to learners in the programme documentation, requirements for progression and achievement for module 6016. This would allow learners to fully understand the risk of failure that would lead to them not progressing or fully completing this aspect of the programmes.

### **Recommendations**

We include recommendations when standards are met at or just above threshold level, and where there is a risk to that standard being met in the future. Recommendations do not need to be met before programmes can be approved, but they should be considered by education providers when developing their programmes.

#### **5.8 Learners and practice educators must have the information they need in a timely manner in order to be prepared for practice-based learning.**

**Recommendation:** The education provider should consider reviewing the programme documentation to ensure it clearly defines the different roles and responsibilities of the “educators” involved in practice-based learning.

**Reason:** Although the visitors are content that this standard is met at threshold, they noted there were discrepancies in the terms used for individuals that support learners in practice-based learning. The visitors noted throughout the documentation instances where this group of people were referred to as practice assessors and other instances where they were referred to as practice educators. The visitors also noted that the practice educators themselves were not fully clear whether there were differences in these roles. As such, the visitors considered that the education provider should make clear in the programme documentation and to everyone involved in practice-based learning, the different roles so that everyone understands what is expected and required for the practice-based learning to be safe and effective.

## HCPC approval process report

Education provider	The National School of Healthcare Science
Name of programme(s)	Certificate of Completion of Scientist Training Programme, Full time
Approval visit date	28 April 2020
Case reference	CAS-15823-Y2Q3J5

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### 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 approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards of education and training (referred to through this report as 'our standards'). The report details the process itself, the evidence considered, and recommendations made regarding programme approval.

Through undertaking this process, we have noted areas that may need to be considered as part of future HCPC assessment processes in section 6 of this report.

## 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). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). 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:

Louise Towse	Lay
Matthew Craddock	Clinical scientist
Geraldine Hartshorne	Clinical scientist
Niall Gooch	HCPC executive
Jamie Hunt	HCPC executive (observer)

### Other groups involved in the virtual approval visit

There were other groups involved with the approval process as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

Suzie Normanton	Independent chair (supplied by the education provider)	National School of Healthcare Science
Virginia de La Hamayde	Secretary (supplied by the education provider)	National School of Healthcare Science

## Section 2: Programme details

Programme name	Certificate of Completion of Scientist Training Programme
Mode of study	FT (Full time)
Profession	Clinical scientist
Proposed first intake	01 September 2020
Maximum learner cohort	Up to 350
Intakes per year	1
Assessment reference	APP02195

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meets our standards for the first time.

There are important differences in this approval process that distinguish it from the normal HCPC approval process, and these should be noted. The Certificate of Completion (CoC) is being treated as a new programme for HCPC regulatory purposes. However, the Scientist Training Programme (STP) itself, successful completion of which is recognised with the CoC, is not a new programme and no changes to its curriculum or assessment were made at this time. The visitors were informed at the visit that a substantial revision of the curriculum was planned. This would need to be assessed by the HCPC through the major change process.

This approval process was focused on a change in the way the National School of Healthcare Science oversees the STP – assuring the quality of the STP programmes themselves rather than this responsibility sitting with the Academy of Healthcare Science (AHCS), which is the current arrangement. The CoC, if approved, will replace the AHCS Certificate of Attainment. In future, the NSHCS will become the education provider, rather than the AHCS. Up until the point of approval, the AHCS remains responsible for overseeing and monitoring this programme.

Therefore, the approval process, and the assessment of the visitors, has focused on policies and procedures relevant to the running of the programme, as well as the management, governance and quality structures. The visitors have not assessed the programme's curriculum, as this has not changed.

## Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for 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.

Type of evidence	Submitted	Comments
Completed education standards mapping document	Yes	
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes	
Descriptions of how the programme delivers and assesses learning	Not Required	We did not require this document through the process, because, as noted above, we have not assessed the programme's curriculum, as this has not changed.
Proficiency standards mapping	Not Required	See above.
Information provided to applicants and learners	Yes	
Information for those involved with practice-based learning	Yes	
Information that shows how staff resources are sufficient for the delivery of the programme	Yes	
Internal quality monitoring documentation	No	Not Required

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

Group	Met	Comments
Learners	Yes	
Service users and carers (and / or their representatives)	No	A service user and carers meeting was organised. However, it was not clear to the visitors that the attendees at this meeting were service users in the sense understood by the standard (see the condition under SET 3.7 below).
Facilities and resources	No	Due to the nature of the programme, and as it is currently running, we determined that this was not necessary.
Senior staff	Yes	
Practice educators	Yes	
Programme team	Yes	

## Section 4: Outcome from first review

### **Recommendation of the visitors**

In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme should be approved subject to the conditions noted below being met.

### **Conditions**

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 26 June 2020.

**2.6 There must be an appropriate and effective process for assessing applicants' prior learning and experience.**

**3.18 The education provider must ensure learners, educators and others are aware that only successful completion of an approved programme leads to eligibility for admission to the Register.**

**6.4 Assessment policies must clearly specify requirements for progression and achievement within the programme.**

The following condition applies to the above standards. For simplicity, as the issue spans three standards, the education provider should respond to this condition as one issue.

**Condition:** The education provider must show:

- the process by which they will identify and transfer learners from the Academy (AHCS) programme onto the National School's (NSHCS) programme;
- how they will ensure learners who commenced the Academy (AHCS) programme are fit to practice on completion of the National School programme; and
- how these learners, and others involved in the programme, will understand the route they will take to registration.

**Reason:** Through the early parts of the process, the education provider noted that they intended the route to registration to change for learners who are part way through the programme (where the AHCS is the approved education provider). Through discussions, this would mean HCPC approving the programme for existing learners, or the NSHCS formally 'transferring' existing learners from the AHCS. This is to fulfil Health Education England's expectations around discontinuing the AHCS qualification prior to the NSHCS programme being approved, so two routes to registration are not being maintained simultaneously. This would mean that all new Scientist Training Programme (STP) graduates from the point of approval would be given the NSHCS certificate of completion, which would be the registerable qualification.

Although not prohibited, it is unusual for the HCPC to approve a programme for learners who commenced prior to HCPC assessment. Although we recognise the unique position of this proposal (as discussed in section 2 of this report), in order to approve this arrangement, we need to properly consider the education provider's approach, and be satisfied that it aligns with and meets relevant standards of education and training (SETs).

Therefore, when working with the education provider through the process, the HCPC executive requested they set out the proposed approach through the documentary submission. For example, in early correspondence the education provider suggested that some form of confirmation of transfer from the AHCS might be provided through the submission, if this was the approach they decided to take. However, there was no reference to the education provider's intentions in this area in the documentation submitted, and therefore visitors have not been able to assess or ask questions relating to the proposed approach for transfer of responsibilities from AHCS to NSHCS through the process so far.

Therefore, the education provider must define how their chosen approach is consistent with the standards being met, with particular focus on:

- Whether they intend to formally transfer learners in some way, or if they are requesting an alternative means of ensuring continuity of learners' education on the programme
- Which groups of learners this would apply to
- The process by which they will identify and transfer learners onto the National School's (NSHCS) programme
- How they will ensure learners who commenced the AHCS programme are fit to practice on completion of the NSHCS programme, particularly:
  - Which organisation will apply their portfolio QA processes for these learners
  - Who is responsible for practical issues around assessment for these learners
- How these learners, and others involved in the programme, will understand the route they will take to registration

The visitors note that there is overlap in conditions set against other standards, particularly for SET 6.3. Therefore, this condition cannot be met until the other conditions are also met

### **3.4 The programme must have regular and effective monitoring and evaluation systems in place.**

**Condition:** The education provider must demonstrate how the Quality & Standards Committee will:

- Provide effective and appropriate oversight of the Scientist Training Programme; and
- Maintain operational independence from the other functions of the National School of Healthcare Science.

**Reason:** From the programme documentation and from discussions at the visit, the visitors were aware that, as part of their assumption of oversight of the quality assurance of the Scientist Training Programme (STP) from the Academy of Healthcare Science (AHCS), the National School of Healthcare Science (NSHCS) planned to

create a committee that would have operational responsibility for this oversight function. The AHCS operates a similar body as part of its existing processes.

The visitors considered that such a group would be essential for the effective functioning of the oversight role as that role was envisaged by the education provider, However, they noted that key aspects of its operations had not yet been decided upon by the NSHCS. The NSHCS had not yet formulated terms of reference for this group, or provided formal evidence about its operational remit.

It was not clear, either from the evidence provided or from the discussions at the visit, from what disciplines or areas of expertise its membership would be drawn. The education provider had yet to determine to whom the committee would be answerable for its decisions or how appointments to it would be made. All these questions were raised with the education provider, and it was clear that they were under consideration. For example, the idea of shadowing the work of the currently operational AHCS committee was mooted.

However, the visitors were not shown evidence relating to how the committee's various functions would be delivered, and how the NSHCS, in its new role as the HCPC-approved education provider, would ensure that the planned committee would be able to fulfil its intended role. This involves providing effective and appropriate oversight and also operating independently from the administration of the programme, to ensure the perceived and actual integrity of the quality assurance process.

The visitors were unable to be certain that the standard was met. They require further evidence relating to how the education provider will ensure that the NSHCS is able to provide appropriate ongoing monitoring of STP programmes, to ensure the Certificate of Completion is awarded only to those who will practise safely and effectively as clinical scientists.

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

**Condition:** The education provider must demonstrate how they will ensure that there is an appropriate level of service user and carer involvement specifically in the National School of Healthcare Science's (NSHCS) quality assurance process.

**Reason:** In their evidence for this standard, the education provider submitted materials relating to how the HEIs who were delivering the STP would involve service users and carers in the programme, including the findings of an STP curriculum review. The visitors were aware, based on this evidence, that there was not a strategy from the NSHCS for specifically involving an appropriate range of service users and carers in the processes which the NSHCS were operating to quality assure the STP. It was this quality assurance that was the focus of the visit, rather than the input into the STP that took place at the level of the individual HEI.

The individuals that the visitors spoke to in the service users and carers meeting were not able to provide much information about this role, as they were lay representatives with specific areas of expertise in more of a governance role, rather than service users and carers in the sense that this standard requires. The visitors were informed that there was not a formal job description or brief for the service user role at the level of the NSHCS. The visitors also noted that the service users and carers had professional links to clinical science, and there was no lay representation of the kind that would

ensure an appropriate level of genuine service user and carer involvement as required by the standard. Additionally, the visitors understood that there had not been new service user involvement with the group for some time. The visitors were informed that there was a recruitment plan for more service users, but they considered that there was not sufficient evidence around what exactly these future service users would do and what kinds of background they would be drawn from, and how exactly they would feed into the National School's QA process rather than the local STPs. The visitors therefore determined that the standard was not met and require further evidence showing how service users will have appropriate input into the NSHCS's proposed new processes for overseeing the STP award.

### **3.8 Learners must be involved in the programme.**

**Condition:** The education provider must demonstrate how they will ensure that the feedback generated from learners about the programme will be acted upon appropriately, and in a timely fashion.

**Reason:** The visitors were aware from the documentation that there was a Trainee Board in operation, from which the National School of Healthcare Science (NSHCS) could receive feedback relating to the programme, and that this could be used to support continuous improvement as required by the standard, in the context of this programme. They also knew that there was a new trainee support unit (TSU) planned for when the NSHCS would take ownership of the eligible award. At the visit they discussed the intended functioning of these bodies.

The visitors did not see evidence that laid out how the information generated through these bodies would be acted upon, and so it was not clear to them that they constituted an effective means of meeting the standard. At the visit this area was discussed and the NSHCS were able to fill in some of the detail about the feedback processes through verbal assurances. However, the visitors were not able to view specific evidence about how this would work and so they were still not clear on how and where the Trainee Board and the TSU would report in to the appropriate structures at the NSHCS. They also noted that the learners did not seem clear about these matters, which they considered to be a potential problem because a process that is not clearly understood by those who are intended to use it may not be an effective process.

The visitors also noted that in the Document 2 submitted as part of the pre-visit submission, in the part where the NSHCS set their expectations with HEIs (page 15), the onus for dealing with learner input to the programme seemed to be placed largely on the HEI providing the STP. They considered that while that could be a reasonable approach, it was important for the NSHCS to understand that for HCPC regulatory purposes they would now be treated as the education provider and so would need to take a more active role in seeking out, and responding to, learners' contributions to the STP.

The visitors were therefore unable to be certain the standard was met, and require further evidence to demonstrate how the NSHCS will take an appropriate role in ensuring learner involvement with the STPs.

**3.13 There must be effective and accessible arrangements in place to support the wellbeing and learning needs of learners in all settings.**

**3.15 There must be a thorough and effective process in place for receiving and responding to learner complaints.**

**3.17 There must be an effective process in place to support and enable learners to raise concerns about the safety and wellbeing of service users.**

The following condition applies to the above standards. For simplicity, as the issue spans three standards, the education provider should respond to this condition as one issue.

**Condition:** The education provider must demonstrate that, where the issue arising falls within their purview as the quality assurance provider and commissioner of the STP partners, they are in a position to communicate effectively and appropriately with learners, and in a timely fashion, around the following areas:

- Learners' wellbeing and learning needs;
- Learner complaints; and
- Concerns around safety and wellbeing of service users.
- Concerns around communication and expectations between the HEI and the placement provider

**Reason:** From the documentation, the visitors had noted that it was not always clear how feedback loops would be closed in the processes that the National School of Healthcare Science (NSHCS) intended to adopt for creating channels of communications for learners enrolled at STP-providing organisations. The relevant higher education institutions (HEIs) and placement providers had their own processes for meeting their learners' needs and responding to their complaints, and enabling them to raise concerns, which the NSHCS ensured through the tendering process when awarding the STP contracts.

However, there are particular areas where learners may need to raise issues specifically with the NSHCS rather than the HEI or the placement provider. From the HCPC perspective, the NSHCS will be the education provider and so will have the responsibility for ensuring that such issues can be raised and dealt with appropriately. In the learners' meeting at the visit, the visitors heard from learners that the NSHCS was not always responsive when matters of concern were raised, and that they did not always understand what steps they had to take to communicate with the NSHCS and receive a response. In particular, feedback loops were not always closed appropriately, meaning that learners were not always sure what action had been taken in response to matters they did raise. Additionally, learners were not clear about lines of responsibility around communication, and expressed a need for clarification about the different areas of responsibility of the HEI and the NSHCS.

In later discussions, the NSHCS representatives at the visit suggested that the COVID-19 crisis has created communication difficulties, but the nature of the issues highlighted by learners were such that there appeared to be a broader structural challenge for the NSHCS in ensuring clear information about processes was available. The visitors were

not given evidence, for example, of a clear breakdown which showed whether an HEI or the NSHCS would be responsible for communicating around which areas, or of what timescales would be considered appropriate for responses to particular complaints.

In particular the visitors considered that there was a lack of clarity about the mechanisms for escalating concerns about experience in practice education. In discussions with the learners it emerged that some formalised complaints had not been processed appropriately, and while this was under the current arrangements rather than the proposed new ones, it highlighted an area of concern.

The visitors were therefore unable to determine whether these standards are met, and require further evidence to demonstrate how the NSHCS will make clear to learners which issues can be escalated to them from the HEIs, how these will be handled, and how actions generated from these processes will be reported back.

### **6.3 Assessments must provide an objective, fair and reliable measure of learners' progression and achievement.**

**Condition:** The education provider must demonstrate how they have robust processes in place to assure the quality of assessed portfolios submitted by candidates for the Certificate of Completion.

**Reason:** From the documentation submitted and from discussions at the visit, the visitors were aware that the arrangements for assessment of portfolios submitted by learners on the Scientist Training Programme were still to be finalised. This would include assessment of practical competencies by workplace Training Officers (TOs) and others to whom this responsibility was delegated. The National School of Healthcare Science (NSHCS) would then have responsibility for providing QA oversight of the submitted portfolios prior to learners being awarded the Certificate of Completion.

At present the visitors understood that the intention was to sample a certain percentage of the work in the submitted portfolios, but that it had not been decided how large a sample would be taken. The programme team suggested that 10 per cent might be a reasonable figure, but the visitors were not sure how this figure had been determined. It did not appear to them to have been drawn from existing effective practice in comparable quality assurance settings.

More broadly, the visitors were not sure what processes were in place to mitigate against risks to the reliability of the portfolio assessment approach, in particular for those portfolios which were not part of the selected sample and so would not be subject to the same scrutiny as those which were.

For example, it was not clear that there were appropriate measures in place to check for plagiarism, or other indications of an unacceptable submission. Additionally, the education provider had not provided a clear explanation of how they would ensure that practice education assessors in workplaces, who were under the supervision of a TO, would be suitably qualified and prepared for their role. In discussions around this point the education provider stated that they would rely on the professional discretion of TOs. However, the visitors considered that they were not clear how the NSHCS's determining whether TOs were delegating assessment roles appropriately and consistently would be evidenced and formalised.

The visitors were therefore unable to determine whether the standard was met, and require further evidence to demonstrate how the assessment of portfolios by the HEIs contracted to deliver the STP will be appropriately overseen, and that the NSHCS will take an appropriate level of responsibility.

**6.7 The education provider must ensure that at least one external examiner for the programme is appropriately qualified and experienced and, unless other arrangements are appropriate, on the relevant part of the Register.**

**Condition:** The education provider must demonstrate how they will ensure that an appropriate external examiner is in place.

**Reason:** The education provider noted in their mapping exercise that they would follow the process used by the Academy of Healthcare Science (AHCS) for external examiner appointments, but did not submit further detail about how this would be done, or what criteria would be used to make an appointment. From discussions at the visit, the visitors were aware that the plans around this particular issue had not been developed further and so they were unable to determine that the standard was met. They understood that at this stage it might not be possible to have finalised an appointment but they considered that it would be reasonable to see evidence of a plan for recruitment, for example a role description, timescales or similar information. They therefore require further evidence to demonstrate how the education provider will ensure they have an appropriately qualified and experienced external examiner in place.

## Section 5: Visitors' recommendation

Considering the education provider's response to the conditions set out in section 4, the visitors are satisfied that the conditions are met and recommend that the programme(s) are approved.

This report, including the recommendation of the visitors, will be considered at the 20 August 2020 meeting of the ETC. Following this meeting, this report should be read alongside the ETC's decision notice, which are available [on our website](#).

## Section 6: Future considerations for the programme(s)

We include this section to note areas that may need to be considered as part of future HCPC assessment processes. Education providers do not need to respond to this section at this time, but should consider whether to engage with the HCPC around these areas in the future.

The visitors considered that the conditions were now met at threshold. However, there were certain areas where they had outstanding concerns. The education provider should pay close attention to these in future. The visitors strongly consider that these are important areas for HCPC visitors to review in future monitoring, and that the education provider should pay particular attention to them going forward.

These areas were as follows:

- Feedback from learners. The visitors considered that the relevant conditions had been met at threshold. However, they also noted that the feedback mechanisms had possible weaknesses, notably because they were weighted towards reactive feedback rather than being designed to pick up ongoing issues in a prompt way. The visitors consider that careful review of the effectiveness of feedback acquisition, monitoring and responses is required in order to ensure the required standard continues to be met in future. In particular, the education provider needs to ensure that feedback from learners is acted upon.
- The operation of the Quality & Standards Committee. The visitors considered that the information supplied about the QSC meets the condition set under SET 3.4 at threshold, in terms of clarifying the workings of the QSC and showing how it would have operational independence. However, they also noted that there was some overlap between the personnel on the QSC and senior staff at the education provider. The visitors strongly suggest that the education provider should further consider how best to ensure that the QSC maintains its separate identity and distance from the leadership of the education provider.
- Additionally, the panel wish to highlight the importance of timely and appropriate communication with service users and carers, in order that SET 3.7 continues to be met.

## HCPC approval process report

Education provider	University Centre South Devon
Validating body	South Devon College
Name of programme(s)	Hearing Aid Audiology Bridging Programme, Flexible
Approval visit date	30 June 2020
Case reference	CAS-16243-Z9P2J2

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The following is a report on the approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards of education and training (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). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). 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:

Elizabeth Ross	Hearing aid dispenser
Stephen Orchard	Hearing aid dispenser
Temilolu Odunaike	HCPC executive

### Other groups involved in the virtual approval visit

There were other groups involved with the approval process as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

Carrie Piper	Independent chair (supplied by the education provider)	South Devon College
Frederique Moussaoui	Secretary (supplied by the education provider)	South Devon College

## Section 2: Programme details

Programme name	Hearing Aid Audiology Bridging Programme
Mode of study	FLX (Flexible)
Profession	Hearing aid dispenser
Proposed First intake	01 November 2020
Maximum learner cohort	Up to 8
Intakes per year	1
Assessment reference	APP02255

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meet our standards for the first time.

There are important differences in this approval process that distinguish it from the normal HCPC approval process, and these should be noted. The Hearing Aid Audiology Bridging Programm is being treated as a new programme for HCPC regulatory purposes.

The Bridging Programme will provide an opportunity for graduates from the unapproved Foundation Degree Healthcare Practice (Assistant Practitioner) to undertake additional studies to enhance their knowledge in order to apply for registration with the HCPC as a hearing aid dispenser, and is designed to be delivered in parallel to the existing approved Foundation Degree Hearing Aid Audiology.

The Foundation Degree Healthcare Practice (Assistant Practitioner) is a competency based clinical programme in which learners opt to undertake specialist modules aligned to their clinical setting. The graduates from the Foundation Degree Healthcare Practice (Assistance Practitioner) programme demonstrate the theoretical knowledge and clinical competencies required for an Assistant Practitioner working within an audiology setting.

The Hearing Aid Audiology Bridging Programme does not contain practice-based learning as applicants will have already undertaken practice-based learning elements before applying onto this programme. Therefore, the visitors did not assess SET 5: Practice-based learning as part of this approval process.

## Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for 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.

Type of evidence	Submitted	Comments
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Completed education standards mapping document	Yes	
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes	
Descriptions of how the programme delivers and assesses learning	Yes	
Proficiency standards mapping	Yes	
Information provided to applicants and learners	Yes	
Information for those involved with practice-based learning	Not Required	Programme does not have practice-based learning element.
Information that shows how staff resources are sufficient for the delivery of the programme	Yes	
Internal quality monitoring documentation	Yes	Programme is new and has not run yet.

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

<b>Group</b>	<b>Met</b>	<b>Comments</b>
Learners	Not Required	As this was a virtual visit and, because the visitors did not have areas to address with this group, we decided that it was unnecessary to meet with them.
Service users and carers (and / or their representatives)	Not Required	As above
Facilities and resources	Not Required	As above
Senior staff	Yes	
Practice educators	Not Required	The HCPC did not meet with the practice educators as the nature of the programme means that applicants will have already undertaken their practice-based learning.
Programme team	Yes	

#### Section 4: Outcome from first review

##### **Recommendation of the visitors**

In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

##### **Conditions**

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 25 August 2020.

#### **4.5 Integration of theory and practice must be central to the programme.**

**Condition:** The education provider must demonstrate how they will ensure that theory and practice are effectively integrated to ensure learners are prepared and competent for practice.

**Reason:** Through their documentary review and discussions at the visit, the visitors understood that this programme has no practice-based learning element in it. The visitors also understood that the programme consists of three modules aimed to take learners who have successfully completed the Foundation Degree Healthcare Practice (Assistant Practitioner) on to a level where they would be eligible to apply for registration as a hearing aid dispenser with the HCPC. At the visit, the programme team were asked what the difference was in the level of working in clinical practice between the Associate Practitioner of the Foundation Degree programme and a hearing aid dispenser. The team stated that the difference was in the level of complexity of hearing aid fittings the learners may deal with and explained that the Bridging programme modules are designed to teach such complex skills. The visitors understood that such complex skills would be taught in theory on the programme, however, they were unclear about how these practical skills would be developed in an academic setting.

The visitors recognised that there are different ways learners could do this, however, they were unclear about how this will be done on this programme as this was not clearly articulated within the documentation nor explained at the visit. For example, the visitors noted the simulated activity within module UCSD2048 (Hearing Aid Technology and Assistive Listening Devices) but received no further information about what this entailed. Therefore, the visitors could not determine how learners will be able to link the knowledge gained in theory to practical skills in a way that is relevant and meaningful to ensure its effectiveness. As such, they could not determine that this standard was met and request that the education provider further demonstrate how they will ensure theory and practice are effectively integrated on the programme so as to ensure learners are prepared and competent for practice.

#### **4.6 The learning and teaching methods used must be appropriate to the effective delivery of the learning outcomes.**

**Condition:** The education provider must demonstrate the learning and teaching methods used to deliver the practice skills for the programme, and demonstrate how these are appropriate to the effective delivery of the learning outcomes.

**Reason:** The education provider referred the visitors to the programme handbook as evidence for this standard. The SETs mapping document also stated that the

programme has been designed to “reflect on practice-based learning into the programme delivery and assessment.” It added that “the programme will use a variety of teaching and learning methods which reflect the skills and knowledge required for learners to effectively meet the learning outcomes.” From a review of the module descriptors, the visitors were satisfied that the programme would teach appropriate topics to demonstrate relevant learning outcomes. However, the visitors were unclear about the learning and teaching methods used to deliver the practical skills of the programme and how these are deemed to be appropriate in delivering the learning outcomes. For example, the visitors noted the simulated activity within module UCSD2048 (Hearing Aid Technology and Assistive Listening Devices) but received no further information about what this entailed or which learning outcomes it was designed to deliver.

As the visitors did not have a clear understanding of the learning and teaching methods used to deliver the practical skills, they were unable to determine whether the methods would be appropriate to effectively deliver the learning outcomes. Therefore, the education provider must provide further information on the specific learning and teaching methods used to deliver the practical skills and demonstrate how these are appropriate to the effective delivery of the learning outcomes.

**6.1 The assessment strategy and design must ensure that those who successfully complete the programme meet the standards of proficiency for the relevant part of the Register.**

**6.5 The assessment methods used must be appropriate to, and effective at, measuring the learning outcomes.**

The following condition applies to the above standards. For simplicity, as the issue spans several standards, the education provider should respond to this condition as one issue.

**Condition:** The education provider must demonstrate the assessment strategy and design ensures that those who successfully complete the Bridging Programme meet the standards of proficiency for hearing aid dispensers and that the assessment methods are appropriate in delivering the learning outcomes.

**Reason:** The visitors reviewed the standards of proficiency (SOPs) mapping and the programme handbook as evidence for these standards. From their review, the visitors noted the learning outcomes within the modules and how these were mapped against the SOPs. The visitors also understood through their review and from discussions at the visit that the programme does not have a practice-based learning element within it. The visitors noted that there was insufficient information provided on the assessment strategy and design and the assessment methods to be used to assess the practical skills of learners.

The visitors heard that the programme intends to use alternative methods, such as simulation and role plays, to assess these practical skills, however, there was insufficient information provided to demonstrate how these would be used to assess the learning outcomes at a threshold level. For example, the visitors noted in module UCSD2046 (Communication and Rehabilitation) that role play would be part of the summative assessment and in UCSD2048 (Hearing Aid Technology and Assistive Listening Devices), there would be a practical assessment of skills in simulation.

However, the visitors received no further information about how these assessment methods were designed or which learning outcomes these were due to assess. In particular, the visitors were unable to identify how the following SOPs would be assessed practically:

- 13.7 understand, in the context of hearing aid audiology:
  - acoustics, speech production and perception;
  - hearing aid and associated technologies including selection, fitting, programming and evaluation;
  - the measurement of hearing and of other auditory system function
- 14.4 be able to select and evaluate the most appropriate hearing aid system, performance settings and associated technologies for service users;
- 14.7 be able to safely and competently programme and physically fit hearing aids.
- 14.10 be able to formulate and provide appropriate advice regarding hearing aids and associated technologies and their use to facilitate informed choices by service users.

As such, the visitors could not ascertain how the assessment strategy and design for the programme will ensure that learners meet the standards of proficiency for hearing aid dispensers. Similarly, they could not determine how the methods identified to assess learners would appropriately and effectively measure the practical learning outcomes. Therefore, the visitors were unclear how the assessment strategies and methods will be used so that learners, who complete the programme successfully, would have the threshold level of knowledge, skills and understanding to practise safely and effectively as a hearing aid dispenser. They therefore require further evidence to show how the practical assessments ensure that learners are able to meet the SOPs to determine whether these standards are met.

## **Recommendations**

We include recommendations when standards are met at or just above threshold level, and where there is a risk to that standard being met in the future. Recommendations do not need to be met before programmes can be approved, but they should be considered by education providers when developing their programmes.

### **2.1 The admissions process 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.**

**Recommendation:** The education provider should consider reviewing the programme handbook to ensure all the information required for applicants to make an informed decision about the programme is available.

**Reason:** The visitors were satisfied that this standard was met at threshold as they saw all the information needed by applicants to make an informed choice about taking up a place on the programme, in the different documents submitted. Some of this included information about entry criteria, percentage of online and face-to-face delivery, and assessment. Upon request and prior to the visit, the visitors were presented with various documents containing this information. However, they noted the programme

handbook, which will be available to applicants, did not in itself contain all of this information. At the visit, the education provider mentioned that they will be redesigning the programme handbook to ensure that all the information required is contained there. Therefore, the visitors recommend that the education provider ensures the programme handbook is updated as agreed so applicants can have all the information they need to decide about taking up a place on the programme.