

Approval process report

London Metropolitan University, Physiotherapy, 2021

Executive summary

The visitors are recommending approval of the programme without conditions. There are no referrals to any other process and no issues that need to be explored through other processes. This report will be submitted to the meeting of the Education and Training Panel on 31 August 2022.

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Section 1: About this assessment

About us

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.

This is a report on the approval process undertaken by the HCPC to ensure that the programme(s) detailed in this report meet our education standards. The report details the process itself, evidence considered, outcomes and recommendations made regarding the programme(s) approval / ongoing approval.

Our standards

We approve education providers and programmes that meet our education standards. Individuals who complete approved programmes will meet proficiency standards, which 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.

Our regulatory approach

We are flexible, intelligent and data-led in our quality assurance of programme clusters and programmes. Through our processes, we:

- enable bespoke, proportionate and effective regulatory engagement with education providers;
- use data and intelligence to enable effective risk-based decision making; and
- engage at the organisation, profession and programme levels to enhance our ability to assess the impact of risks and issues on HCPC standards.

Providers and programmes are [approved on an open-ended basis](#), subject to ongoing monitoring. Programmes we have approved are listed [on our website](#).

The approval process

Institutions and programmes must be approved by us before they can run. The approval process is formed of two stages:

- Stage 1 – we take assurance that institution level standards are met by the institution delivering the proposed programme(s)
- Stage 2 – we assess to be assured that programme level standards are met by each proposed programme

Through the approval process, we take assurance in a bespoke and flexible way, meaning that we will assess whether providers and programmes meet standards based on what we see, rather than by a one size fits all approach. Our standards are split along institution and programme level lines, and we take assurance at the provider level wherever possible.

This report focuses on the assessment of the self-reflective portfolio and evidence.

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 design quality assurance assessments, and assess evidence and information relevant to the assessment. Visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make the 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 takes decisions through different levels depending on the routines and impact of the decision, and where appropriate meets in public. Their decisions are available to view [on our website](#).

The assessment panel for this review

We appointed the following panel members to support this review:

| | |
|------------------|-------------------------------|
| Jo Jackson | Physiotherapist |
| Kathryn Campbell | Physiotherapist |
| Niall Gooch | Education and Quality Officer |

Section 2: Institution-level assessment

The education provider context

The education provider currently delivers 16 HCPC-approved programmes across two professions. It is a higher education institution and has been running HCPC approved programmes since 1994.

Practice areas delivered by the education provider

The provider is approved to deliver training in the following professional areas. A detailed list of approved programme awards can be found in [Appendix 1](#) of this report.

| | Practice area | Delivery level | | Approved since |
|------------------|---------------------------|---|--|----------------|
| Pre-registration | Dietitian | <input checked="" type="checkbox"/> Undergraduate | <input checked="" type="checkbox"/> Postgraduate | 1994 |
| | Practitioner psychologist | Undergraduate | <input checked="" type="checkbox"/> Postgraduate | 2004 |

Institution performance data

Data is embedded into how we understand performance and risk. We capture data points in relation to provider performance, from a range of sources. We compare provider data points to benchmarks, and use this information to inform our risk based decisions about the approval and ongoing approval of institutions and programmes.

This data is for existing provision at the education provider, and does not include the proposed programme(s).

| Data Point | Benchmark | Value | Date | Commentary |
|---|-----------|-------|------------|---|
| Total intended learner numbers compared to total enrolment numbers | 120 | 148 | 01/07/2022 | There is a disparity here between the number of learners for which the programme is approved, and the actual number currently enrolled. The visitors did consider any possible impact on the programme being reviewed. |
| Learners – Aggregation of percentage not continuing | 3% | 0% | 01/07/2022 | This is a very good figure. The institution seemingly works well in retaining learners on their programmes, suggesting good support is being provided for them. |
| Graduates – Aggregation of percentage in employment / further study | 93% | 83% | 01/07/2022 | The fact that the provider is 10% below benchmark suggests a possible issue with the way the institution prepares learners. This trend appears to be much less pronounced on the HCPC-approved provision so from our perspective it is not a particularly serious concern. |

| | | | | |
|--|--------|-----|------------|---|
| Teaching Excellence Framework (TEF) award | Bronze | | 01/07/2022 | This datapoint suggests significant room for improvement in the teaching at the institution |
| National Student Survey (NSS) overall satisfaction score (Q27) | 75% | 82% | 01/07/2022 | This suggests good engagement with learners and a generally good level of feedback mechanisms |
| HCPC performance review cycle length | | | | The education provider has not yet been through performance review. |

The route through stage 1

Institutions which run HCPC-approved provision have previously demonstrated that they meet institution-level standards. When an existing institution proposes a new programme, we undertake an internal review of whether we need to undertake a full partner-led review against our institution level standards, or whether we can take assurance that the proposed programme(s) aligns with existing provision.

As part of the request to approve the proposed programme(s), the education provider supplied information to show alignment in the following areas.

Admissions

Findings on alignment with existing provision:

- **Information for applicants –**
 - The approach on the new programme includes the following:
 - “Information about programmes is published online, available as downloadable prospectuses and provided at open days for learners to gain a full and accurate understanding of all entry requirements for programmes they are interested in”. This information about programmes is reviewed annually to ensure that it is up to date. Further information on any admissions processes e.g., interviews, where necessary, is also provided to learners as required.
 - Applicants for postgraduate taught courses apply via an online portal available on the programme webpage. Information provided by applicants are first scrutinised by admission officers for academic requirements, then passed to course tutors to assess.

- **Assessing English language, character, and health –**
 - There are policies in place which sets out the process of assessing applicants for entry at the institution level which covers English language character and health. Applicants are required to meet a certified minimum entry requirement for each programme. They have

provided details of the English language requirement for applicants of postgraduate courses at the institution. The requirements for the MSc Physiotherapy programme is based on the HCPC requirements.

- The evidence provided indicates that they have a robust process in place to assess applicants character and health & disability. The policies explain the entry requirements of applicants with unspent and spent criminal convictions. This includes a filtering and decision making processes. Applicants are invited to declare their disability and reasonable adjustments will be put in place for any part of the application process as required.

- **Prior learning and experience (AP(E)L) –**
 - Individual programmes are required to follow university-level policies with regards to admissions via APEL route.
 - The policy explains the role of the APEL Board and its members who are responsible for the assessment of APEL applications. Formal assessment of applicants prior learning is part of the process which could include written assessment, a viva portfolio or oral presentation.
 - Internal and external examiners are responsible for assessing whether or not the applicant has achieved the learning outcomes which will achieve APEL credit. Members of the APEL Board make the final decision about the APEL credit that is award.

- **Equality, diversity and inclusion –**
 - The policies set out the institutions approach to equality and diversity of opportunities in admissions processes and apply to all programmes across the institution. All learners are assessed using the same standard criteria and the institution considers any reasonable adjustments related to disability as part of the admissions process.
 - The institution has signed up to schemes which promote equality, diversity and inclusion in the workplace, and throughout its learning and teaching.

As regards these whole section, the provider has made it clear that the new programme will be aligned with all of these procedures and processes.

Non-alignment requiring further assessment: None.

Management and governance

Findings on alignment with existing provision:

- **Ability to deliver provision to expected threshold level of entry to the Register¹ –**
 - The London Metropolitan University Taught Postgraduate Awards Framework explains the range of qualification awards schemes that the

¹ This is focused on ensuring providers are able to deliver qualifications at or equivalent to the level(s) in SET 1, as required for the profession(s) proposed

education provider is approved to award. It further details the structure and provides guidance for taught postgraduate awards available in the institution. The MSc Physiotherapy degree is designed to be validated by the University to be awarded in line with this framework

- **Sustainability of provision –**
 - The institution has demonstrated their approach to ensuring the sustainability of the provision through a core strategic vision, policy, and partnership frameworks. The Academic Portfolio Committee (APC) have the responsibility for approving business cases for proposed new courses and associated collaborative partners.
 - They have provided an explanation about how Professional, Statutory and Regulatory Body (PSRB) requirements are considered during the approval process. This will be applied to the MSc Physiotherapy course. Their partnership framework provides the guidance for all programme partnerships at an institutional level.

- **Effective programme delivery –**
 - For the programme the documentation made clear that the provision of learning and teaching at the education provider is overseen by the Learning, Teaching and Quality (LTQ) committee at the university level. The Academic Board delegates to individual programmes their authority to assure quality at programme level. Individual programmes are still accountable to the Academic Board.

 - The LTQ committee holds primary responsibility for the assurance of academic standards and for oversight of quality assurance. It aims to improve all taught provision, including collaborative provisions. In practice, at the school levels, there are termly course meetings, comprising of academic staff, student representatives, professional services staff supporting for each programme, which monitor day to day delivery of courses and provides feedback to course teams to ensure effective delivery of the course.

- **Effective staff management and development –**
 - The institution has established processes to enable and support effective staff management and development. The Centre for Professional Development (CPED) was specifically established by the institution to provide research-informed expertise, consultation, courses, resources, and bespoke sessions for staff across the institution. They play a central role in supporting staff in all areas at the education provider in their professional and career development.
 - They also have processes in place for new staff induction via the University web learning site which contains resources for induction training. This system is also used to review staff development and identify professional learning requirements.

- **Partnerships, which are managed at the institution level –**
 - There are two specific policies which are used to ensure the effective management of partnerships at the institutional level. Committees are

institutional level have oversight of collaborative academic partnerships to ensure effective implementation across the institution.

- The practice placement partnerships involved on the MSc Physiotherapy will be managed at a local level through agreements and Service level agreements.

We can be satisfied that for this part of the institution-level assessment the new programme will be appropriately integrated into these mechanisms.

Non-alignment requiring further assessment: None.

Quality, monitoring, and evaluation

Findings on alignment with existing provision:

- **Academic quality –**
 - The new programme will be governed by established institution wide policies which set out the existing processes for the approval of new academic provisions. All new course proposals go through the validation process overseen and governed by the Academic Quality and Development Department. It is a peer review process involving a panel of internal staff, external advisors, learners, academics, industry experts and learners.
 - As part of the process, the Academic Portfolio Committee (APC) review the approval business case before the validation event. All approved programmes are subject to 5 year Periodic Review at specific times or if triggered by specific events. All programmes are subject to the same institutional level quality monitoring process, this is completed via the annual course enhancement process. Student evaluation surveys contribute to the quality review of programmes.
- **Practice quality, including the establishment of safe and supporting practice learning environments –**
 - The institution's academic and work placement for students' policy set out the necessary management and arrangements for ensuring that placements can be completed safely. It explains the responsibilities of off stakeholders i.e. the institutions staff, learners and placement provider for ensuring the safety of learners whilst on placement. It further explains the specific requirements for adjustment for needs of students, guidance from the relevant PSRB and the health and safety team from the institution.
 - A risk assessment of each placement is conducted prior to placements starting. There is a monitoring process in place to evaluate and review learner progress during and after placement from the provider and learner perspective.
 - Oversight of collaborative academic partnerships is included in the terms of reference of university level committees. This aims to ensure that institutional implementation to ensure consistent in all areas.
- **Learner involvement –**

- The institution reports policy that guides engaging learners in every aspect of their programme and the wider University community at LMU is the Students as Partners (SaP) Framework. This framework details the principles for working with students as partners at London Met. These include authenticity, community, empowerment, inclusivity, trust, and a recognition of the shift in working practice.
 - They work with learners across multiple levels, for example, curriculum development and approach to course delivery. Individual programmes are expected to demonstrate how they engage with students based on the requirements set out in the policy.
 - They have explained how the policy will be applied to this programme. Learners will be trained to be panel members of the annual quality assurance and enhancement processes at both module and programme levels. Learner experience will be captured via module feedback and results will be considered by the learning and Teaching Quality Committee at the School and institution levels.
- **Service user and carer involvement –**
 - The institution has provided the policies which sets out the requirements for engagement with service users and carers. They have established links with service users who support the learning on the Dietetic programme. They will be provided with training to enable to contribute to Physiotherapy education and training and other aspects of the programme.
 - All individual programmes are expected to follow the central institutional policies and give regular updates on their use and development of service user and carer involvement.

The processes laid out here are appropriate and fitting and the new programme will be accommodated within them.

Non-alignment requiring further assessment: None.

Learners

Findings on alignment with existing provision:

- **Ongoing suitability –**
 - The Fitness to Study Regulations is intended as a framework to be used by staff when a student's ability to progress academically and function at university appears to be detrimentally affected by their health or other circumstances.
 - A detailed explanation of the assessment of ongoing fitness to study is evaluated has been provided. This is completed through different contact points learners have with the university, formally or informally. Fitness to Practise (FTP) dealt with at course level, not at institutional level.
- **Learning with and from other learners and professionals (IPL/E) –**
 - The new programme will align to the existing policies. these requires course designers and developers to engage with the appropriate

internal and external stakeholders in the design and implementation of courses. These requirements match our current understanding of the institutions approach.

- The institution reports that the MSc Physiotherapy have a local interprofessional education and learning policy programme. This enables the collaboration of other health and social care professional care learners. They work together to develop essential teamworking and interprofessional working skills.
- **Equality, diversity and inclusion –**
 - There is evidence that the institution has established approach to ensure equality, diversity and inclusion through specific frameworks and policies. This is set on in the : London Metropolitan University Strategy 2019/20 -2024/25; their Equality and Diversity Policy; their Race Equity Strategic Plan; and their Education for Social Justice Framework (ESJF).
 - They report that the policies guide learning, teaching and assessments at institutional level. In practice, they guide the development and continuing enhancement of courses. They also demonstrated that there were mechanisms in place for ensuring that programme leaders were aware of and followed these policies.

The approaches described above are suitable and appropriate for the new programme, which will be aligned closely with them.

Non-alignment requiring further assessment: None.

Assessment

Findings on alignment with existing provision:

- **Objectivity –**
 - The institution has provided evidence of how they ensure that assessments are objective, fair and reliable measure of learners' progression and achievement. For example, the Education for Social Justice Framework describes the principles of inclusive assessment to enable engagement with diverse students. The course enhancement process also provides an opportunity to review the intentions of assessments annually.
 - The education provider have clear criteria for enabling programmes to design appropriate assessment, including consideration of the purpose, accessibility, and appropriateness of the assessment. The learner voice was considered important. It was clear from the review that the programme under consideration follows these policies and that the programme staff were familiar with the requirements.
- **Progression and achievement –**
 - We viewed the education provider's Professional, Statutory and Regulatory Body (PSRB) Policy and this made it very clear that all programmes are required to communicate to learners what routes they can take through individual programmes.

- **Appeals –**

- The institution has an Academic Regulation Section 13: Appeals regulation and procedure. Academic Regulation Section 13: Appeals regulation and procedure. This policy describes the processes for the grounds of appeals, the stages and basis for decision making.
- They provide an explanation of what learners can appeal against and the specific requirements that must be met to launch a valid appeal. Also set out is the post appeal process for successful and unsuccessful appeal including specific deadlines for all parties involved. It is clear that the new programme will use and develop assessment using the institutional approaches noted above.

Non-alignment requiring further assessment: None.

Section 3: Programme-level assessment

Programme considered through this assessment

| Programme name | Mode of study | Profession (including modality) / entitlement | Proposed learner number, and frequency | Proposed start date |
|-------------------|----------------|---|--|---------------------|
| MSc Physiotherapy | FT (Full time) | Physiotherapist | 25 learners, 1 cohort per year | 26/09/2022 |

Stage 2 assessment – provider submission

The education provider was asked to demonstrate how they meet programme level standards for the programme. They provided information about how each standard was met, including a rationale and links to supporting information via a mapping document.

Quality themes identified for further exploration

We reviewed the information provided, and worked with the education provider on our understanding of their submission. Based on our understanding, we defined and undertook the following quality assurance activities linked to the quality themes referenced below. This allowed us to consider whether the education provider met our standards.

Quality theme 1 – Practice-based learning

Area for further exploration: The visitors wanted clarification about whether there was an ongoing relationship with every provider of practice-based learning that could ensure appropriate capacity as required by SETs [3.5](#) and [3.6](#)

Quality activities agreed to explore theme further: The visitors agreed that a conversation with the education provider was the most appropriate and effective way to explore this issue.

Outcomes of exploration: The education provider presented further details of their discussions and engagement with multiple practice-based learning providers. They clarified that the mechanisms for keeping placement partners in touch with the education provider mentioned in the submission could be used for all types of practice-based learning setting. They also explained their strategy for securing placements that were not yet required but would be required in the later parts of the programmes.

Section 4: Findings

This section details the visitors' findings from their review through stage 2, including any requirements set, and a summary of their overall findings.

Conditions

Conditions are requirements that must be met before providers or programmes can be approved. We set conditions when there is an issue with the education provider's approach to meeting a standard. This may mean that we have evidence that standards are not met at this time, or the education provider's planned approach is not suitable.

The visitors were satisfied that no conditions were required to satisfy them that all standards are met. The visitors' findings, including why no conditions were required, are presented below.

Overall findings on how standards are met

This section provides information summarising the visitors' findings against the programme-level standards. The section also includes a summary of risks, further areas to be followed up, and areas of good practice.

Findings of the assessment panel:

SET 1: Level of qualification for entry to the Register

The visitors considered that Level 7, with a registerable step-off, was an appropriate level of qualification.

On this basis, the visitors considered that the education provider's approach to meeting this standard was appropriate to meet the standards.

SET 2: Programme admissions

The evidence supplied to the visitors included a document outlining the admissions procedures ([SET 2.2](#)). These were very similar to the procedures and approaches used on the existing approved programmes at the education provider. Applicants were expected to have an A-level points score similar to other comparable programmes at the education provider, and to progress through a similar application process involving interviews.

These processes had already been considered and approved by previous HCPC processes. With the information supplied, and with the knowledge that these procedures and approaches were currently in use, the visitors considered that they were appropriate when applied to the existing programmes, and so that the new programmes met the standards.

On this basis, there were no conditions set in relation to this area of the standards.

SET 3: Programme governance, management and leadership

Staffing ([3.9, 3.10](#)), resourcing ([3.12](#)) and relationships with practice partners ([3.5, 3.6](#)) were set out in some detail. The visitors were satisfied with the evidence across these areas, with the exception of the clarification they sought via quality activity around SETs [3.5 and 3.6](#).

Therefore, we were satisfied that standards are met in this area. On this basis, there were no conditions set in relation to this area of the standards.

SET 4: Programme design and delivery

Discussions with the programme team prior to the stage 2 submission established that the design and delivery of the programmes was closely aligned with existing HCPC-approved provision at the provider.

From their review, the visitors considered that the structure and approaches of the programmes were appropriate, and that the learning outcomes were appropriately aligned with the standards of proficiency and the standards of conduct, performance and ethics. They were satisfied that the curriculum content and the inter-professional education would prepare learners appropriately for practice.

Therefore, we were satisfied that standards are met in this area, and there were no conditions set in relation to this area of the standards.

SET 5: Practice-based learning

As part of the stage 2 standards of education and training mapping, the education provider referred to the programmes' handbooks, correspondence with practice partners and staff CVs. This was as evidence to show that they were able to provide a good structure, duration and range of practice-based learning, and that the practice educators in place were appropriate and sufficient in number. They also noted that

the practice-based learning for this programme would be integrated into existing approved institution frameworks.

As part of the quality activity process, the visitors requested clarification over email about;

- how the education provider ensured appropriate coverage of practice educators; and how they made sure that placements were broad enough in the subjects covered.

In response, the education provider demonstrated they had a specific process for keeping track of practice educator numbers and suitability, and for regular review of how practice-based learning was aligned with learning outcomes. The visitors were satisfied that the standards were met.

On this basis, there were no conditions set in relation to this area of the standards.

SET 6: Assessment

Stage 2 documentation gave the visitors a clear understanding of how assessment would work on the programmes, and indicated that it would be modelled on the existing approved approaches. The visitors had a clear understanding from the programme leaders' handbooks of how assessment would enable learners to meet the SOPs and the SCPEs and to progress through the programme. They were satisfied that the assessment would be effective, based on the diverse range and spacing of the assessments.

On this basis, there were no conditions set in relation to this area of the standards.

Risks identified which may impact on performance: None.

Areas of good and best practice identified through this review:

- The visitors considered that the programme was extremely up-to-date and that the staff team had a good range of expertise.
- They also noted that there was an excellent range of placement opportunities and a very diverse range of assessments.

Section 5: Referrals

This section summarises any areas which require further follow-up through a separate quality assurance process (the approval, focused review, or performance review process).

There were no outstanding issues to be referred to another process

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. They do not need to be met before programmes can be approved, but they should be considered by education providers when developing their programmes.

The visitors did not set any recommendations.

Section 6: Decision on approval process outcomes

Assessment panel recommendation

Based on the findings detailed in section 4, the visitors recommend to the Education and Training Committee that:

- All standards are met, and therefore the programmes should be approved.

Appendix 1 – list of open programmes at this institution

| Name | Mode of study | Profession | Modality | Annotation | First intake date |
|--|----------------------|---------------------------|--------------------------|-------------------|--------------------------|
| BSc (Hons) Dietetics | FT (Full time) | Dietitian | | | 01/09/2018 |
| BSc (Hons) Dietetics and Nutrition | FT (Full time) | Dietitian | | | 01/09/2012 |
| BSc (Hons) Human Nutrition and Dietetics | FT (Full time) | Dietitian | | | 01/01/1994 |
| MSc Dietetics and Nutrition | FT (Full time) | Dietitian | | | 01/09/2011 |
| MSc Human Nutrition and Dietetics | FT (Full time) | Dietitian | | | 01/01/2002 |
| MSc Physiotherapy | FT (Full time) | Physiotherapist | | | 26/09/2022 |
| Pg Dip Human Nutrition and Dietetics | FT (Full time) | Dietitian | | | 01/01/2002 |
| Post Graduate Diploma Dietetics and Nutrition (Pre-registration) | FT (Full time) | Dietitian | | | 01/09/2011 |
| Professional Doctorate in Counselling Psychology | PT (Part time) | Practitioner psychologist | Counselling psychologist | | 01/01/2004 |
| Professional Doctorate in Counselling Psychology | FT (Full time) | Practitioner psychologist | Counselling psychologist | | 01/01/2004 |
| Professional Doctorate in Forensic Psychology | FLX (Flexible) | Practitioner psychologist | Forensic psychologist | | 01/01/2016 |
| Professional Doctorate in Forensic Psychology | FT (Full time) | Practitioner psychologist | Forensic psychologist | | 01/01/2016 |
| Professional Doctorate in Forensic Psychology | PT (Part time) | Practitioner psychologist | Forensic psychologist | | 01/01/2016 |

| | | | | | |
|--|----------------|------------------------------|------------------------|--|------------|
| Professional Doctorate in Health Psychology | FT (Full time) | Practitioner psychologist | Health psychologist | | 01/01/2011 |
| Professional Doctorate in Health Psychology | PT (Part time) | Practitioner psychologist | Health psychologist | | 01/01/2011 |