

Performance review process report – Queen Margaret University, 2020-21

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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.

This a report on the performance review process undertaken by the HCPC to ensure that the programmes detailed in this report continue to meet our Standards of Education and Training (referred to through this report as ‘our standards’). The report details the process itself, evidence considered, outcomes and recommendations made regarding Queen Margaret University and its programmes’ ongoing approval.

The panel considered this report at the Education & Training Panel meeting on 31 January 2022. They considered that the report as it stood did not give a sufficiently clear picture of the visitors’ reasoning for a decision about provider performance to be made, and they asked that the report be amended to better reflect the rationale for the decision-making. They asked that the report be resubmitted for the next meeting, on 28 February 2022.

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 institutions 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
- 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 performance review process

Once an institution is approved, we will take assurance it continues to meet standards through:

- Regular assessment of key data points, supplied by the education provider and external organisations
- Assessment of a self-reflective portfolio and evidence, supplied on a cyclical basis

Through monitoring, we take assurance in a bespoke and flexible way, meaning that we will assess how an education provider is performing based on what we see, rather than by a one size fits all approach. We take this assurance at the provider level wherever possible, and will delve into programme / profession level detail where we need to.

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

Provider and institution context

Queen Margaret University (QMU) is a higher education institution (HEI), one of the largest in Scotland and a long-standing provider of education for allied health professionals (AHPs). It has a broad suite of HCPC-approved programmes, offering undergraduate and postgraduate qualifications across nine professions as well as non-medical prescribing and podiatric surgery. As noted in the “Programmes considered” table on page six, the education provider has a long experience of

educating HCPC registrants, with some programmes in the relevant areas beginning in the 1990s.

QMU has a well-developed central administration, developing, implementing and monitoring relevant policies across the university. Key bodies include:

- Academic Planning Board (APB) – responsible for general academic and curriculum matters
- School Academic Boards (SABs) – responsible for academic matters within particular schools
- Student Experience Committee (SEC) – university-wide body responsible for generating feedback on learners’ views on the institution
- Student Staff Consultative Committee (SSCC) – responsible for co-ordinating programme-level learner feedback
- Practice Based Learning Advisory Group (PBLAG) – responsible for considering matters related to placement across all programmes
- Peer Assisted Learning Scheme (PALS) – initiative through which more advanced learners can help those earlier on in programmes

These clear and well-established structures, coupled with the education provider’s good record of previous engagement with the HCPC, suggest that there is a strong culture of quality engagement at the education provider.

In 2020 there was a multiprofessional HCPC approval event at QMU, which reviewed changes to a large number of pre-registration programmes. The focus of these changes was to align the programmes more closely with the appropriate professional and educational benchmarks.

Institution performance scoring information

Data Point	Bench- mark	Value	Score	Executive Comments
Total intended learner numbers compared to total enrolment numbers	1410	1391	0.00	The score is zero because the benchmark and the actual value are closely aligned.
Learners – Aggregation of percentage not continuing	4.9	4.5	0.00	These scores are zero because there is close alignment between benchmark and actual value.

Graduates – Aggregation of percentage in employment / further study	96.1	97.1	0.00	
Teaching Excellence Framework (TEF) award	N/A	N/A	N/A	TEF is available to Scottish HEIs but QMU has chosen not to participate. We can assess teaching quality via other pathways and means.
National Student Survey (NSS) overall satisfaction score (Q27)	83.47	86.68	0.05	This small positive score is because the NSS satisfaction score is higher than the expected benchmark.
HCPC AEPM cycle length	N/A	N/A	N/A	This data point is not currently available, as will be decided through this performance review exercise.
Overall score			1.00	This score means that we have not identified any serious risk factors through this exercise.

The programmes considered

We considered the whole suite of HCPC-approved programmes at the education provider. The provider has 53 approved programmes in the following professional and post registration areas, at the levels noted.

Arts therapist

MSc Art Psychotherapy – Full-time (FT) / Part-time (PT)
 BSc (Hons) Speech and Language Therapy - FT
 MSc Music Therapy – FT
 MSc Dramatherapy - FT

Chiropodist / podiatrist

BSc (Hons) Podiatry – FT (new programme)
 BSc (Hons) Podiatry – FT (approval withdrawn, being taught out)
 Pharmacology for Podiatrists – PT
 Master of Science in Podiatry (Pre-registration) -
 Master of Podiatry (MPod) – FT

PG Cert Pharmacology for Podiatrists – PT
Podiatric Surgery Training Programme – FT / PT

Dietitian

BSc (Hons) Dietetics – FT (closed, being taught out)
MSc Dietetics – FT / PT (closed, being taught out)
PgDip Dietetics – FT / PT (closed, being taught out)
Master of Dietetics (MDiet) – FT
BSc (Hons) Dietetics – FT
Master of Science in Dietetics (Pre-registration) – FT

Hearing aid dispenser

Aptitude Test in Hearing Aid Dispensing – Distance learning
Diploma in Higher Education Hearing Aid Audiology – FT

Occupational therapy

BSc (Hons) Occupational Therapy – FT (closed, being taught out)
MSc Occupational Therapy (Pre-registration) – FT (closed, being taught out)
PgDip Occupational Therapy – FT (closed, being taught out)
Master of Occupational Therapy (MOccTher) – FT
BSc (Hons) Occupational Therapy (BSc(Hons)OT) – FT
Master of Science in Occupational Therapy (Pre-registration) (MScOT pre-reg) – FT
PGDip Occupational Therapy (PGDipOT) – FT

Paramedic

BSc Paramedic Science – FT

Physiotherapist

BSc (Hons) Physiotherapy – FT (closed, being taught out)
MSc Physiotherapy (Pre-registration) – FT (closed, being taught out)
Post Graduate Diploma Physiotherapy (Pre-registration) – FT
Master of Physiotherapy (MPhys) – FT
BSc (Hons) Physiotherapy – FT
Master of Science in Physiotherapy (Pre-registration) – FT

Radiographer

BSc (Hons) Therapeutic Radiography – FT (closed, being taught out)
BSc (Hons) Diagnostic Radiography – FT (closed, being taught out)
PgDip Radiotherapy and Oncology – FT (closed, being taught out)
MSc Diagnostic Radiography (pre-registration) – FT (closed, being taught out)
PgDip Diagnostic Radiography (pre-registration) – FT
Master of Radiography: Diagnostic (MDRad) – FT
BSc (Hons) Radiography: Diagnostic – FT
Master of Radiography: Therapeutic (MTRad) – FT

BSc (Hons) Radiography: Therapeutic – FT
 Master of Science in Diagnostic Radiography (Pre-registration) – FT
 Master of Science in Therapeutic Radiography (Pre-registration) – FT

Speech and language therapist

MSc (pre registration) in Speech and Language Therapy – FT / PT
 Post Graduate Diploma (pre-registration) in Speech and Language Therapy – FT
 Master of Speech and Language Therapy (MSLT) – FT
 BSc (Hons) Speech and Language Therapy – FT

Prescribing

Certificate in Non Medical Prescribing – PT

	Practice area	Delivery level		Approved since
Pre-registration	Arts therapist	<input type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	2020
	Chiropodist / podiatrist	<input checked="" type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	1994
	Dietitian	<input checked="" type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	2002
	Hearing Aid Dispenser	<input checked="" type="checkbox"/> Undergraduate	<input type="checkbox"/> Postgraduate	2014
	Occupational therapy	<input checked="" type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	1994
	Paramedic	<input checked="" type="checkbox"/> Undergraduate	<input type="checkbox"/> Postgraduate	2020
	Physiotherapist	<input checked="" type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	1996
	Radiographer	<input checked="" type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	2003
	Speech and language therapist	<input checked="" type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	2003
Post-registration	Independent Prescribing / Supplementary prescribing			2019
	Podiatric surgery			2017

Quality assurance assessment

The education provider was asked to provide a self-reflective portfolio submission covering the following broad topics:

Broad portfolio area	Specific area addressed
Institution self-reflection	Partnership arrangements
	Resourcing, including financial stability
	Academic and placement quality
	Interprofessional education
	Equality and diversity

	Horizon scanning
Thematic reflection	Impact of COVID-19
	Use of technology: Changing learning, teaching and assessment methods
Sector body assessment reflection	Assessments against the UK Quality Code for Higher Education
	Scottish Funding Council Guidance to Institutions on Quality QAA Scotland Quality Enhancement Framework (QEF)
	Assessment of practice education providers by external bodies - For example Healthcare Improvement Scotland National Student Survey (NSS) outcomes
	Student Partnerships in Quality Scotland (SPARQS) Other professional regulators / professional bodies
Profession specific reflection	Impact & learning from upcoming introduction of new programmes
	Development to reflect changes in professional body guidance
	Capacity of practice-based learning
Stakeholder feedback and actions	Service users and carers
	Learners (those engaging with an approved programme)
	Practice placement educators
	External examiners

The education provider's self-reflection was focused on challenges, developments, and successes related to each portfolio area. They also supplied data, supporting evidence and information.

We appointed the following panel to assess the above information:

Gemma Howlett	Paramedic
Sarah Illingworth	Dietitian
Niall Gooch	Education Officer

We undertook thematic performance review of the information provided, and worked with the education provider on our understanding of their portfolio. Based on our understanding, we defined and undertook the following quality assurance activities to take assurance that the education provider is performing well against our standards:

Initial review:

- The visitors reviewed the evidence submitted and provided their feedback.
- Within their initial review, visitors did not identify any major risks. However, they required further clarity around the education provider's overall institutional approach to ensuring that their programmes continued to perform well. These areas are identified and explored below.

Quality activity: Conversation with representatives of the education provider

We design our assessment to be proportionate and appropriate to the issues identified and to seek input from relevant stakeholders when necessary.

Based on their review of the portfolio, the visitors explored the following themes as part of the video conference with representatives of the education provider:

- Institution-level strategic approach
 - How planning of learner involvement and service user and carer involvement across HCPC-registered programmes is co-ordinated and monitored
 - How QMU maintains institutional oversight of individual programme relationships with providers of practice-based learning
 - The functioning of lines of accountability and responsibility for the above
- Co-ordination of audit and quality assurance
 - How programme-level information and best practice about quality and related issues is shared and acted upon at the institutional level

During this conversation the education provider explained in detail the processes used by central quality functions at QMU, and indicated the named persons who had particular responsibilities with regard to ensuring that individual programmes were working within the appropriate institutional frameworks.

For instance, QMU made use of the Enhancement-led Institutional Review process, developed by Quality Assurance Agency (QAA) Scotland to help education providers maintain a focus on continuous improvement. There was also an Effective Learning Service (ELS) in operation, which sought to ensure that all programmes were using the most appropriate teaching and learning approaches. The physiotherapy and paramedic programmes had updated their teaching methods and their recording of assessment in practice-based learning in response to feedback received from the ELS.

The HCPC also explored how the education provider ensured that monitoring of individual programmes' practice-based learning took into account the differing requirements between professions. The education provider stated during this conversation that there were regular meetings of strategic steering groups featuring senior representatives of both QMU and relevant partners, to ensure that placement partnerships continued to fulfil the needs of both parties.

The visitors considered that this conversation had filled the gaps in their understanding of how QMU ensured that there was an appropriate and productive approach across all their HCPC-approved provision. This was because they had been given examples of specific individuals and particular processes who worked across the allied health programmes with a view to ensuring good institutional standards.

Quality summary

Portfolio area	How was this area met?
Partnership arrangements	<p>QMU noted within the portfolio that they have been working with a wide range of local stakeholders and partners, to deliver the practice components of their programmes. They have some longstanding partnerships and others that are more recent, and there is a defined process for assessing how well partnerships are working and adding new ones. The submission laid out the role of the Academic Planning Board (APB)..</p> <p>The visitors saw evidence that during the review period the APB had considered the suitability of additional settings for programmes, alongside discussion of performance of existing settings in other professional areas. The visitors were satisfied from these minutes that the type and level of scrutiny applied by the APB was appropriate to ensure that these new placements would support learners to achieve the requirements of the programmes.</p> <p>Records of discussions and decision-making in this area clearly reflected a good level of collaboration and mutual knowledge between QMU and their practice partners. The visitors did not have any reason to conclude from the evidence they had seen that there were differences in performance between professional areas. This was because there was discussion of most subject areas in the various APB records. The visitors similarly did not see any indication in these records of particular concerns around specific subject areas.</p>
Resourcing, including financial stability	<p>The visitors saw evidence in the portfolio that the education provider's HCPC-approved programmes had been well-resourced and well supported by a strategic plan at the higher levels of management. This was shown by records of decision-making by the Academic Planning Board (APB), which itself is responsible to the University Senate, and by the Division of Dietetics, Nutrition, Biological Sciences, Physiotherapy, Podiatry and Radiography, the School in which most of the pre-registration programmes sit.</p> <p>These records showed that within the review period, representatives of faculties were expected to give regular updates on resourcing and stability of the programmes within those faculties, and to note any potential future challenges that could arise. By definition this input was coming from senior and experienced staff, which enabled the visitors to have confidence that across all professional areas there was an effective means of</p>

	<p>oversight. They did not consider it likely, based on the formal written requirements they had seen, that problems with the sustainability of a programme would not be detected and discussed.</p> <p>Within the APB's terms of reference there was a clear mechanism for ensuring that feedback loops were closed when programme leads highlighted issues that needed addressing, i.e. there was a standing item on the APB agenda.</p> <p>The visitors considered that in this area the institution was working appropriately, because of the well-defined processes and responsibilities laid out in the evidence.</p>
<p>Academic and placement quality</p>	<p>The education provider submitted evidence which showed that each individual programme had means of assessing the placements which it used. This was in the form of a centralised audit document issued by the Practice Based Learning Advisory Group, which was required to be used by all programmes, with relevant amendments as necessary.</p> <p>There was evidence of service users and learners giving input via the feedback / review process, and the visitors were satisfied that this process was working as intended.</p> <p>The visitors considered that performance in this area was acceptable because the education provider had a reliable mechanism to ensure good quality in the academic and placement settings. This was based on what they had viewed in the portfolio, namely, the clearly set out institutional monitoring process.</p> <p>However, they did wish to explore further how QMU as an institution ensured in practice that individual programmes were following processes appropriately. In a conversation as part of the quality activity the visitors were reassured that the institutional mechanisms in place were robust because there was specific defined oversight from particular individuals and clear processes, of which they were shown examples.</p>
<p>Interprofessional education</p>	<p>The visitors could see from the evidence supplied that interprofessional education (IPE) was well embedded across all the programmes and across the faculties. There was a clear institutional strategy and philosophy for IPE, which was described as part of the portfolio submission. This was the responsibility of the university-level group known as the Inter-disciplinary Education and Learning Programme (IDEALP) with which individual programmes were required to engage to ensure a consistent approach. The visitors and the service user expert advisor considered that QMU's requirements for IPE, as laid out by the IDEALP, reflected best practice. For example,</p>

	<p>programmes were required to submit written planning for IPE to the IDEALP, and to go through a feedback loop.</p> <p>During the review period several programmes had formally reviewed their IPE in line with QMU's guidance, and made changes.</p> <p>From this evidence the visitors were satisfied with performance. They were confident that programmes understood and followed the expectations for IPE, including requirements for continuous improvement. They did not see any evidence to suggest that any programmes were failing to engage appropriately with IDEALP, and had seen evidence to help them understand how the feedback loop was closed.</p>
<p>Equality and diversity</p>	<p>QMU provided evidence of their participation in the Widening Participation and Student Retention (WISER) scheme, including action points arising from discussions. Matters related to equality and diversity had also been discussed at the Student-Staff Consultative Committee (SSCC).</p> <p>In the visitors' judgment, the discussions and actions evidenced by the above showed that they were monitoring relevant issues both in the admissions processes and on individual programmes.</p> <p>For example, during this review period, attempts had been made by QMU to investigate why certain programmes had demographic imbalances compared to the general local population.</p> <p>The visitors considered that this was a good example of proactive engagement with the requirements of equality and diversity standards. In conversation around the quality activity QMU shared some of the difficulties they had had around widening participation, and the visitors considered that their frankness about this was a sign of thoughtful engagement with ways they might improve representation.</p> <p>In light of the clear work being undertaken around equality and diversity issues by the institution, involving data from several separate programmes, the visitors considered that this was an area where performance was satisfactory.</p>
<p>Horizon scanning</p>	<p>In the evidence about the Academic Planning Board and the steering committee of the Division of Dietetics, Nutrition, Biological Sciences, Physiotherapy, Podiatry and Radiography, the visitors saw evidence of regular discussions of changes within the education and health landscapes in Scotland. Future developments were a standing item.</p> <p>During the review period, all programmes had changed aspects of their delivery to adapt to COVID-19, and evidence was provided of clear efforts to engage with NHS Education Scotland</p>

	<p>(NES) in order to undertake planning for increased recruitment across the allied health professions over the next few years. The visitors considered that this engagement with external agencies in making plans for future recruitment across the HCPC-approved provision demonstrated that the education provider were taking a constructive and effective approach.</p> <p>It was clear from the evidence reviewed that all programmes had been part of the conversation, and that there were no gaps in the horizon scanning. The visitors' conclusion, therefore, was that QMU were appropriately preparing for future developments, and initiating early contacts with outside bodies whose decision-making could affect QMU's own institutional planning.</p>
<p>Impact of COVID-19</p>	<p>The education provider had mitigated the impact of COVID-19 through the following means:</p> <ul style="list-style-type: none"> - Move to virtual learning and teaching activities; - Development of new methods for online assessment, such as virtual OSCEs; - Clarified for learners expectations around attendance at remote sessions; - Trained practice educators in mentoring and supervising remotely. <p>Their stated aim was to keep the programme structure intact where at all possible while retaining integrity of assessment and giving learners equal and fair opportunities to study. Feedback about how well they had managed this during the review period was gathered via the Staff Student Consultative Committee and the matter was also discussed regularly at programme and School level.</p> <p>The visitors concluded from this review that under the circumstances the education provider had adapted in a reasonable and timely way. Questions and concerns had been raised but it was clear from the minutes and feedback records that these had been addressed where at all possible.</p> <p>In particular with regard to practice educators, the visitors saw good feedback on how well practice educators felt they had been prepared to supervise learners remotely, and to organise virtual consultations and examinations. This pattern was across all the programmes. In subjects like physiotherapy where physical touch was almost unavoidable in practice-based learning, strict protocols had been developed and the visitors considered that these were appropriate.</p> <p>Additionally, support had been in place for staff, learners and others as necessary to ensure that those with concerns or those who felt under pressure were able to access appropriate</p>

	<p>avenues. The SSCC had played a key role here, as a forum for discussion, and informal feedback to tutors was also a feature. Records from the SSCC and from the Academic Planning Board demonstrated that QMU had tried to respond nimbly to challenges arising, for example in updating their health advice to learners and practice educators in line with changing government advice.</p> <p>In light of the above, the visitors considered that the education provider had followed their mitigation plan, which was reasonable, and had shown themselves able to adapt as necessary.</p>
<p>Use of technology: Changing learning, teaching and assessment methods</p>	<p>The portfolio gave clear evidence that the education provider put a strong emphasis on keeping up to date with learning technology. Technology Enhanced Learning is a recurring theme in discussions between programme boards and the steering group of the Division of Dietetics, Nutrition, Biological Sciences, Physiotherapy, Podiatry and Radiography. Funding for new technology was mentioned in these discussions and there was evidence of grants having been made.</p> <p>An example of this was that the education provider had been making use, across the HCPC-approved provision, of new software for monitoring practice-based learning and for remote submission of work. This was especially useful as part of the COVID-19 adaptation. The visitors took the view that, because of this clear evidence of an ongoing process of review evidenced by minutes of meetings, QMU were seeking to use technology in the most effective and appropriate ways during the review period.</p>
<p>Sector body assessment reflection</p>	<p>In the portfolio, the education provider included assessments of their programmes against the QAA Scotland Quality Code for Higher Education, as well as data from the National Student Survey and the Scottish Funding Council's Quality enhancement framework (QEF).</p> <p>The visitors considered that taken together these documents showed that over the review period QMU was closely engaged with the requirements of those organisations. They were mentioned in minutes of School and programme level meetings.</p> <p>Evidence of QMU's use of the QAA's Enhancement-led Institutional Review methodology was provided. It was clear to the visitors that the education provider were committed to integrating the support offered by sector bodies into the normal operational business of the HCPC-approved programmes. This was the case across all programmes, and gave the visitors confidence that the education provider had a genuine commitment to ensuring and preserving quality. There did not</p>

	<p>appear to be any disparity between the education provider's high-level intentions for incorporating the insights of sectoral bodies – namely, that they should be a key part of all planning – and the way in which this data was used at programme level.</p>
<p>Impact & learning from upcoming introduction of new programmes</p>	<p>Within the review period the Academic Planning Board (APB) had discussed planned new provision at the education provider, for example the expansion of the arts therapy suite of programmes. This was part of the stated remit of the APB, given in its terms of reference, and there was a standard process for programme leads to come to the APB with requests for additional programmes. It seemed clear that programme leads were well aware of their responsibilities in this regard. Evidence of APB deliberations showed a structured process for examining the strengths and weaknesses of new proposals.</p> <p>The visitors also gathered from the evidence that the APB received updates on new provision, and so enabled discussion of areas for improvement. The visitors were satisfied that this was a robust mechanism for testing, and getting ongoing reflection on, new programmes.</p>
<p>Development to reflect changes in professional body guidance</p>	<p>The education provider submitted monitoring reports for each individual programme, and it was through these reports that they intended to show how programmes had developed to reflect professional body guidance.</p> <p>The visitors' review of these reports suggested that there was a culture at the education provider of close engagement with professional bodies.</p> <p>The visitors saw evidence of discussion of professional body requirements at both programme and School level. They were satisfied that development was taking place in a structured and formal way in response to professional body guidance.</p>
<p>Capacity of practice-based learning</p>	<p>Within the individual programme monitoring part of their reflective portfolio, the education provider set out how those programmes each developed relationships with practice partners. Elsewhere in the submission the Practice Based Learning Advisory Group was mentioned in this connection, as an institutional focal point for programmes to manage practice-based learning appropriately.</p> <p>The visitors considered that these various layers were sufficient to ensure that programmes should be able to secure the right amount of capacity in practice-based learning. Placements were a standing item for the Academic Planning Board's meetings, which meant that the subject would be frequently discussed.</p> <p>There were good channels of communication in place with placement partners and it was shown that these channels were</p>

	<p>being used. This area was expanded upon considerably in the quality activity conversation mentioned above.</p> <p>As a result the visitors considered that there were appropriate mechanisms in place for monitoring and if necessary developing capacity in practice-based learning. This was true across all the programmes.</p>
<p>Service users and carers</p>	<p>Reflection on service user and carer involvement was mostly included in the individual programme's internal monitoring documentation. The education provider focused on service user and carer involvement at the programme level and did not provide a great deal of information about the overarching institutional approach.</p> <p>The visitors noted that all programmes involved service users and carers, albeit in differing ways. All programmes had service user and carer input to some degree during the review period, using them in teaching activities, admissions, curriculum development and practice-based learning.</p> <p>Programme boards discussed and reviewed this involvement at regular intervals. Improvements were implemented as a result of these discussions.</p> <p>Institutional co-ordination in this area over the review period was not discussed in depth in the portfolio but was discussed in the quality activity. The visitors were given examples of such co-ordination, such as an away day with training and socialisation opportunities for all QMU service users and carers, and a steering group made up of service users and carers from various programmes. The visitors considered that this reflected a commitment on behalf of both the institution and individual programmes to ongoing improvement of service user and carer involvement. Such improvements would help to ensure that the involvement remained a strong area for QMU.</p>
<p>Learners (those engaging with an approved programme)</p>	<p>Evidence was supplied relating to learner involvement with the Staff Student Consultative Committee (SSCC), the Student Experience Committee, and the Peer Assisted Learning Scheme (PALS). These were the key ways in which learners were involved with the programmes at QMU. It was clear from this evidence that learners from across the HCPC-approved provision had regular and meaningful input into continuous improvement and programme governance.</p> <p>The visitors did not highlight any significant differences between how the various programmes used input from learners.</p> <p>The evidence showed that there were established mechanisms for obtaining and applying feedback, and that learners had been made aware of these as part of standard admissions and induction processes. Alongside internal processes, the SSCC</p>

	<p>discussed external mechanisms for gaining learner feedback and views, such as the National Student Survey.</p> <p>In conjunction with the information provided through the quality activity, the visitors considered that over the review period QMU took seriously engagement with learners, both through programme level feedback mechanisms and through external feedback sources and learner mentoring schemes.</p>
<p>Practice placement educators</p>	<p>The portfolio showed that the Practice Based Learning Advisory Group (PBLAG) worked across all the programmes. Each programme was expected to contribute to this group and to take on board its recommendations, including as regards preparation, training and selection of practice educators.</p> <p>The PBLAG distributed materials and co-ordinated training across all the programmes. Examples of such materials and the structure of training events was provided to the visitors. It was clear from this evidence that the PBLAG was working effectively to ensure that practice educators were suitable and continued to work effectively.</p> <p>During the review period, 2018-21, there were a number of training events each year, and a number of selection cycles for practice educators. The visitors considered that these training events were appropriate for maintaining and developing the practice educators' skills and that the criteria for selection were appropriate. In particular they considered that the experience requirements were not so onerous that they limit recruitment.</p> <p>In the quality activity the visitors sought additional detail relating to how QMU as an institution ensured that all programmes had engaged with and developed their practice educators, especially in regard to the specific requirements of individual programmes. As noted above, clear explanations and examples were given and the visitors' outstanding concerns about central co-ordination and oversight were met.</p>
<p>External examiners</p>	<p>For each professional area, the visitors were provided with relevant external examiner reports from the 2018-21 review period.</p> <p>This provided the visitors with clear evidence that the education provider had appropriate external examiners in place, and that monitoring of the programmes was taken seriously. They were also able to view a policy for the appointment of externals, which QMU required programmes to follow.</p> <p>Several of the external examiner responses detailed changes that had been made as a result of the report. The visitors considered this was evidence of an appropriate culture of response to external examiners, and there did not appear to be significant variation across subject areas. None of the external examiners</p>

	<p>had raised serious issues in their reports during the review period, and from their review it did not appear to the visitors that comments from external examiners had been ignored.</p> <p>The visitors considered that there were no concerns with performance in this area, because across all the programmes there was evidence from external examiner reports of clear engagement with the external examiner role, and responsiveness to feedback.</p>
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Risks

The visitors did not identify any outstanding risks at the education provider.

This enabled them to conclude that QMU was performing at a high level and that there was no reason to consider that there were serious concerns around quality in any of the HCPC-approved provision.

Best practice

The visitors identified the following areas of good practice:

- QMU have excellent institutional mechanisms for practice educator development, and service user and carer involvement. At both School and programme level there is a clear commitment to continuous improvement and keeping contributors to the programme in touch with changing professional expectations and knowledge.
- QMU have a strong culture of using feedback well, from both external and internal mechanisms. It is clear from monitoring reports that individual programme staff are used to accepting suggestions and insights for how they can work more effectively and appropriately.
- QMU adapted well to the COVID-19 pandemic, using technology well and keeping closely in touch with the needs of staff and learners. Programme monitoring documents, as well as institution-wide committees, reflect an eagerness to make the most of difficult situations and to be innovative. The efforts made by staff to keep learners engaged and progressing through the programme should be noted.

Recommendation

The visitors made the following recommendations to the Education and Training Committee:

- The institution and its programmes should remain approved
- The education provider's next engagement with the performance review process should be in five years (the 2025-26 academic year)

Following documentary review and quality activity, the visitors were satisfied across the areas reflected upon in the portfolio submission. There were no major risks to the

education provider's approach to meeting the standards, which indicates adherence to standards and performance above our regulatory threshold.

Decision

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](#).

Decision on approval

As noted in the Executive Summary, a version of this report was considered at the Education and Training Committee (Panel) meeting on 31 January 2022. In the meeting, the Panel considered they were unable to make a decision about the review period with the information provided, and so requested the report was updated to give a clearer picture of the visitors' reasoning related to performance and quality.

We will record the decision of the Education and Training Committee here following their meeting on 28 February 2022.