

Performance review process report – University of Ulster, May 2018-2021

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

Once a programme 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; and
- 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 programme institution context

The University of Ulster delivers seventeen HCPC-approved programmes across ten professions. The review of the programmes started during the pilot of the new quality assurance process and as such, commenced as two separate cases. This was due to the differences in approach between the programmes.

One case was for the 'Faculty of Life and Health Sciences', which considered fifteen of the approved programmes. The second case was for the 'Belfast School of Art' and considered two Art Psychotherapy programmes.

Following the completion of the pilot and roll out of the final process, the two cases were merged into one and as such, the following report covers the seventeen programmes running during the review period of 2018-2021. Where appropriate, clear and separate visitor feedback has been included.

An eighteenth programme, the BSc (Hons) Paramedic Science, Full time programme, was not considered as part of this review as it commenced in September 2021 and was therefore outside the review period.

The education provider engaged with HCPC regularly via previous annual monitoring processes as required. We brought nothing forward from previous interactions to specifically consider through this process.

Institution performance scoring information

Data Point	Benchmark	Value	Score	Executive Comments
Total intended learner numbers compared to total enrolment numbers	321	391	-0.03	This data point is for all the existing programmes within the provider, for the last academic year. This has resulted in a negative score because the actual total learner numbers is higher than the benchmark value. This occurred across the range of programmes, within this institution.
Learners – Aggregation of percentage not continuing	7.3	6.8	0.01	We collected this data from the Higher Education Statistics Agency (HESA). The score, indicates the provider is performing well in this area.
Graduates – Aggregation of percentage in employment / further study	95	94.4	-0.01	We collected this data from the Higher Education Statistics Agency (HESA). The score, indicates the education provider is very close to a score of 0.
Teaching Excellence Framework (TEF) award	N/A	N/A	N/A	The education provider did not take part in this award, and therefore there is no score for this. TEF is voluntary for providers in Northern Ireland. There was no other standardised benchmarking data available to consider.
National Student Survey (NSS) overall satisfaction score (Q27)	81.98	83.36	0.02	We collect this data from the Office for Students (OfS), who run a survey for learners and graduates of undergraduate Higher Education. This score indicates the education provider is performing well in this area.

Overall score	N/A	N/A	0.96	This data indicates the education provider is performing well overall.
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The programmes considered

<u>Programme name</u>	<u>Mode of study</u>	<u>Entitlement</u>
Pharmacotherapeutics in Prescribing	Part time	Prescription only medicines – sale / supply (CH)
Certificate in Medicines Management (Conversion to Independent Prescribing)	Part time	Supplementary Prescribing, Independent Prescribing, POM - Sale / Supply (CH)
Postgraduate Certificate in Medicines Management (Independent and Supplementary Prescribing)	Part time	Supplementary Prescribing, Independent Prescribing, POM - Sale / Supply (CH)
Postgraduate Certificate in Medicines Management (Supplementary Prescribing)	Part time	Supplementary Prescribing, POM - Sale / Supply (CH)
BSc (Hons) Applied Biomedical Science with DPP Pathology)	Full time	N/A
BSc (Hons) Podiatry	Full time	N/A
BSc (Hons) Dietetics	Full time	N/A
MSc Dietetics	Full time	N/A
Pg Dip Dietetics	Full time	N/A
BSc (Hons) Occupational Therapy	Full time	N/A
BSc (Hons) Physiotherapy	Full time	N/A
BSc (Hons) Diagnostic Radiography and Imaging	Full time	N/A
BSc (Hons) Radiotherapy and Oncology	Full time	N/A
BSc (Hons) Speech and Language Therapy	Full time	N/A
MSc Art Psychotherapy	Part time	N/A
MSc Art Psychotherapy	Full time	N/A

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	Partnerships with other organisations
	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 (by the relevant body in each home country)
	Other professional regulators / professional bodies
Profession specific reflection	Curriculum development
	Development to reflect changes in professional body guidance
	Capacity of practice-based learning
Stakeholder feedback and actions	Service users and carers
	Learners
	Practice placement educators
	External examiners

The education provider's self-reflection was focused on providing a description before outlining their evaluation, analysis and conclusions relating to each portfolio area. They also supplied data, supporting evidence and information.

As outlined earlier in the report, this review originally started off as two cases and that following the roll out of the new process, the cases were merged. By that point, much of the reviews had been undertaken by separate visitor panels. This is outlined below.

We appointed the following panel to assess the above information for programmes within the 'Faculty of Life and Health Sciences' (FLHS):

Alaster Rutherford	Independent prescriber
Caroline Sykes	Speech and language therapist
Ian Hughes	Service user expert advisor
Rabie Sultan	Education Officer

For programmes within the 'Belfast School of Art' (BSA), we appointed the following panel:

Julie Allan	Art therapist
John Crossfield	Art therapist
Prisha Shah	Service user expert advisor
Rabie Sultan	Education Officer

We reviewed the information provided, and worked with the education provider on our understanding of their portfolios. 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 review, visitors identified a small number of areas to explore further.

Quality activity one: Email response to questions / additional documentation

We design our assessment to be proportionate and appropriate to the themes identified and to seek input from relevant stakeholders when necessary. We considered it appropriate and proportionate to consider additional evidence via an email response to a series of questions.

For the FLHS, the main themes explored by visitors as part of the quality activity were in the following areas:

- Learners. Specifically around what support was available for them should they have any issues or concerns during any time on their respective programme including practice-based learning;
- NSS overall student satisfaction score for the BSc (Hons) Podiatry and BSc (Hons) Occupational Therapy programmes. This was lower than expected and the visitors explored the factors behind these figures and what steps had been taken to address this; and
- Interprofessional education. Visitors recognised how Interprofessional learning occurred across the FLHS. They explored whether any interprofessional education took place with relevant learner groups in other faculties, or whether there were plans to do so in the future.

For BSA, the main themes explored by visitors explored as part of the quality activity were in the following areas:

- Academic and placement quality. Visitors queried whether the education provider had clarification in terms of numbers required and a timescale for on-site practice-based learning to fully resume;
- Equality, diversity and inclusion (EDI). Visitors explored what support mechanisms or policies were available for Black, Asian and Ethnic minority (BAME) staff and learners involved within the programmes;
- Horizon scanning. Visitors noted the education provider had plans in development which included an online teaching seminar with learners from an education provider in New York. Additionally, there were also plans to organise an all-Ireland art therapy conference and a proposal to develop an on campus open studio. Visitors queried the timescales and sought clarification about progression of these plans as they had been put on hold because of COVID-19;

- Impact of COVID-19. Visitors explored what plans had been in place to manage and support learners who struggled with the new initiatives of blended and online learning;
- Curriculum development. Visitors explored whether the planned staff meeting to discuss the feedback from the External Examiner, regarding the final year thesis, had been arranged. As part of this, the visitors explored whether there were any timescales or action points noted from that meeting; and
- Service users and carers. Visitors could not determine how service users were involved and explored whether there was an overall strategy of engaging and supporting them.

Quality activity two: Email response to questions / additional documentation (BSA only)

From their review of education provider's response to quality activity one, questions remained regarding two of the themes mentioned above for the BSA programmes. We considered it remained appropriate and proportionate to consider this additional information via an email response to these themes.

- EDI. The visitors noted the additional information submitted by the provider. This included which stated the provider has asked two practicum educators to speak to learners about equality and diversity. However, the visitors were unclear about what was currently in place regarding this theme. The visitors therefore sought clarification about this.
- Service users and carers. The visitors recognised that the programmes were in their infancy and that much of the information submitted was about the planned or intention direction of travel. However, visitors could still not determine how service users had been involved in the delivery of the programmes and sought further information about how this stakeholder had been involved.

Quality activity three: Executive discussion with provider / additional documentation (BSA only)

From their review of the additional evidence submitted through the two previous quality activities, the visitors continued to have queries regarding the following themes. As the remaining themes were specific, we considered it more appropriate for the Executive to discuss the visitors remaining queries with the provider. As part of this discussion, the provider was asked to submit additional documentation to outline and confirm the conversation.

- EDI. The provider submitted a number of links to policies (such as the Equality, Diversity and Inclusion Strategy 2019-22 and the Mental Health Strategy in Northern Ireland). The visitors appreciated these policies together with the narrative providing context around EDI in Northern Ireland. The visitors also noted the references to the BAME network and steering group, plus the extra support in terms of reasonable adjustments. However, the visitors remained unclear about how the programmes prepare learners to

recognise, understand and support service users as BAME themes within practice-based learning.

- Service users and carers. The provider submitted further narrative regarding how service users and carers will be involved in the programme. The visitors noted the plans with the Recovery College, Belfast Trust. This would entail “service users (peer trainers)” presenting to the learners. In addition, the organisations will be working together to develop a practice-based learning opportunity. The College runs courses for individuals with an interest in mental health and wellbeing. However, the visitors remained unclear about how service users and carers were currently involved in the programme and how their feedback had been monitored and utilised to enhance the quality of the programmes.

Quality summary

Portfolio area	How was this area met?
Partnerships with other organisations	<p>For the FLHS, information provided through the portfolio outlined the education tri-partite agreement in place between the provider, NHS Trusts and the Department of Health (DoH) for Northern Ireland. The institution works closely with the DoH Northern Ireland, the Chief Allied Health Professions Officer, the Allied Health Profession (AHP) leads and Heads of Service in Health & Social Care Trusts. This allowed the institution to ensure a solid base on which to deliver sufficient practice-based learning opportunities. During COVID-19, the institution developed closer, collaborative relationships to support the delivery of the AHP programmes. The comprehensive narrative provided demonstrated there continues to be well developed and strong relationships in place with the relevant organisations to ensure the AHP programmes continue to be delivered to the standards required.</p> <p>For BSA, the portfolio outlined the wide range of organisations regularly worked with. For example, a member of the programme team is the Northern Ireland representative on the British Association of Art Therapists (BAAT). In addition, the portfolio outlined the development of international links. For example, the art therapy residency with a charity (Mather (Creative ways to age well)) in the USA. The visitors were satisfied the provider has appropriate and robust relationships with a wide variety of organisations to ensure the programmes provide a range of opportunities for learners.</p>
Resourcing, including financial stability	For the FLHS, a document outlining the AHP commissioned numbers for 2018 – 2021, alongside a narrative, was submitted. This outlined they are the sole provider within Northern Ireland offering these programmes. Learner numbers are commissioned by the DoH Northern Ireland

	<p>and numbers are agreed with them annually based on workforce planning requirements. As such, commissioned learner numbers for physiotherapy have increased 50% and for diagnostic radiography by approximately 30% recently. Also, additional training placements for trainee dietitians have been announced. Commissioned learner numbers for the other AHP programmes remain stable. The visitors therefore consider the FLHS to be in a strong and stable financial position in relation to their AHP programmes.</p> <p>The portfolio also outlined the relocation of the AHP programmes from the Jordanstown campus to the Magee Campus (part of existing facilities). This was to provide strategic consolidation, specialisation and new initiatives, such as increasing the opportunity of interprofessional learning with the medical, nursing and pharmacy learners. From the information outlining the mitigations, analysis and conclusions relating to this move, the visitors were satisfied that any potential risks had been considered and planned for appropriately while facilitating this move.</p> <p>For BSA, the visitors received a Resourcing and Financial Stability letter. This outlined the number of available staff, including administrative support, and details of how the budget is allocated and managed. This explained how the budget is used to enhance the learner experience, such as bringing in visiting lecturers. The budget is monitored by the School Officer to ensure it is used within University finance guidelines. The visitors were satisfied with the assurances received that the BSA is secure and plans are in place for additional staffing hours and are appropriately costed for.</p>
Academic and placement quality	<p>For the FLHS, the visitors noted the Programme Approval Management and Review Handbook. This outlined the Continuous Assurance of Quality Enhancement (CAQE) introduced in 2018/19. This is a risk based approach to monitoring the delivery of programme to ensure “academic excellence”. This covers all AHP programmes. The visitors noted the information in this document provided a clear and robust description of how risk is managed. The visitors also recognised the policies in place to manage the quality of practice-based learning via regular liaison with practice educators and their audit process. The visitors felt there were clear and robust policies in place to determine the academic and placement quality.</p> <p>For example, the visitors noted the reflection about the workshop held between the dietetic course team, the British Dietetic Association (BDA) and the five Health and Social Care Trusts in Northern Ireland. This was to discuss the new BDA guidelines the new curriculum guidance. From this it</p>

	<p>was determined there was a need to increase the number of placement sites and develop new areas for trainee dietitians to undertake. The visitors also noted the reflections on the challenges relating to ensuring appropriate physiotherapy placements during the pandemic. Through the quality processes and additional support and liaison with practice partners during this period, the visitors recognised the flexibility and resilience in sustaining placement capacity through COVID-19.</p> <p>For BSA, the visitors received a comprehensive narrative and copies of the Course Committee Minutes (CCM) and External Examiners Report 2019-20. The narrative outlined that a review is currently underway to evaluate and enhance practice-based learning standards. From the External Examiners report, the visitors noted the overall positive feedback about how the programme was delivered during the pandemic. From the CCM, the visitors noted that learners would be returning to campus in the summer. In response to quality activity one, the BSA confirmed that on-site clinical practice-based learning resumed from July 2020. Therefore, the visitors were satisfied with the education provider's approach in this area.</p>
Interprofessional education	<p>For the FLHS, the visitors noted a firm commitment was maintained towards interprofessional education (IPE). This was appropriately evidenced in the modules within the portfolio submission, particularly through the Knowledge & Skills for Personal and Professional Development module in year 1. This module runs for all AHP programmes across the first two semesters. During COVID-19, this module was run solely online using synchronous and asynchronous lectures and tutorials. The visitors noted the positive learner feedback relating to this module.</p> <p>From exploring this further during quality activity one, the provider confirmed plans to further integrate interprofessional education for AHP programmes via the convening of an IPE taskforce. This taskforce has commenced a few pilot projects to fully support greater development and coordination of a range of IPE activities. The taskforce will also develop a Framework for greater IPE. This will be implemented from September 2022 along with other health related programmes such as MBBS Medicine, BSc (Hons) Nursing and BSc (Hons) Social Work programmes in the FLHS. As such, the visitors noted the additional evidence clearly demonstrated that learners will be able to learn with and from a wider range of professions.</p> <p>For BSA, the narrative outlined that IPE takes place through practice-based learning where learners work with a range of</p>

	<p>professionals, including occupational therapists, social workers and teachers. Overall, the visitors were satisfied the programme continues to provide a good range of professionals for learners to learn with and from.</p>
<p>Equality and diversity</p>	<p>For the FLHS programmes, a copy of the Equality, Diversity and Inclusion Strategy 2019-2022 was submitted. The visitors noted this applied to learners and staff and outlined the provider's commitment to the Northern Ireland (1998) Act. From this, and the narrative in the portfolio, the visitors identified that clear policies were in place and monitored appropriately throughout the programmes. The visitors also noted how the admissions policy strives to be inclusive for all and makes reasonable adjustments for applicants through a Needs Assessment form. The visitors were therefore satisfied with the provider's approach in this area.</p> <p>For BSA, visitors sought further information through three quality activities. Within the additional information, the provider submitted a copy of the Equality, Diversity and Inclusion Strategy 2019-2022 amongst other information. As part of the quality activities, the provider submitted additional evidence demonstrating policies and support mechanisms in place for BAME staff and learners on the programmes. At the meeting with the provider, the expanded upon the previously submitted policies and narrative. From this, and the subsequent documentation, the visitors were clear this information was communicated via the module Art Psychotherapy: Working with Diversity. Therefore, the visitors were satisfied with the education provider's approach in this area.</p>
<p>Horizon scanning</p>	<p>For the FLHS, the visitors considered the opportunities created and utilised by the programme teams to horizon scan and develop new partnerships, via regular high level meetings and fostering of networks. For example, the recent move from the Jordanstown campus to the Magee campus to enable greater synergy between the medical and AHP programmes. The visitors also recognised the recent development of the BSc (Hons) Paramedic Science programme which represents the first Bachelors level programme in Northern Ireland. In addition, the visitors noted the faculty is considering developing MSc level programmes for occupational therapy and physiotherapy. The visitors were satisfied the development of the new paramedic programme, enhancements to existing programmes and the consideration of future programmes, demonstrated how the horizon scanning policies and processes produced appropriate outcomes.</p> <p>For BSA, the narrative outlined the summer teaching seminar with learners from New York (2021). Benefits of</p>

	<p>international teaching related to diversity informed teaching and the sharing of clinical skills and approaches. The narrative also described a planned all Ireland conference and on campus open studio. Through quality activity one, the BSA confirmed discussions have commenced to organise the conference and set up the open studio. The visitors were satisfied with the provider’s approach in this area.</p>
<p>Impact of COVID-19</p>	<p>For the FLHS, the 2019/20 Academic Assurance Report: University Response to COVID-19 clearly demonstrated a robust and comprehensive approach from an early stage. This included actions to mitigate areas of risk such as technology poverty, ensuring that no learner was disadvantaged by the impact of the pandemic. A COVID-19 Response Team (CVRT) was established in February 2020 to ensure flexible and agile plans were taken forward. This allowed the provider to continuously review their protocols, to ensure that staff and learners continued to feel supported and that teaching continued to be delivered and assessed, albeit in different ways.</p> <p>Additional study support was provided for the AHP programmes through a service called Studiosity. A specific example of additional support during COVID-19 was outlined from the speech and language therapy programme. This was to ensure a cohesive and professional community. This included, for all programme years, a “Coffee, cake and a conversation with a clinical colleague” – a 4 C’s session.</p> <p>For BSA, the range of amendments to the academic delivery, practice-learning (i.e. simulated role plays) and support for learners (i.e. how to undertake counselling online) was outlined. The visitors recognised the positive feedback from the External Examiner about the inclusion of simulated practice role plays. Through quality activity one, it was confirmed that learners who struggled with these changes were provided appropriate support by the student wellbeing department. Support was also provided through reading materials and videos on the virtual learning platform. The visitors were satisfied with the provider’s approach in this area.</p>
<p>Use of technology: Changing learning, teaching and assessment methods</p>	<p>For all the programmes, as with many providers, COVID-19 accelerated the use of technology. For example, the FLHS, in conjunction with practice educators, established an online AHP Project ECHO (Extension of Community Healthcare Outcomes). This supported new graduates moving into the working environment where normal clinical services had been impacted.</p>

	<p>The narrative also highlighted the work being undertaken within the biomedical science programme to embed digital literacy within the programme. This included the long running Virtual Learning Environment, adoption of Electronic Management of Assessment practices, electronic rubric-based assessment (where appropriate) and continual training for staff from the Office for Digital Learning (ODL). Visitors noted the provider had an effective strategy in place to embed digital literacy across its portfolio.</p> <p>The narrative for the BSA outlined how a home studio had become a feature of the art physiotherapy programmes with artists sharing art making techniques for home-based practises.</p> <p>COVID-19 demonstrated the provider’s agile and intelligent approach to rapidly changing the use of technology, including how they delivered learning and conducted assessments. On line learning was identified as a challenge across the programmes. This included how to provide learners with the necessary proficiency and access to equipment. This was addressed by providing regular remote training, along with supporting learners by supplying or providing access to laptops, iPads and other devices. The visitors appreciated the support given to learners during the pandemic and were satisfied the provider was performing well in this area.</p>
<p>Assessments against the UK Quality Code for Higher Education (by the relevant body in each home country)</p>	<p>For the FLHS, the portfolio identified how the Annual Provider Review (APR) allows the Department for the Economy Northern Ireland (their funding provider) to “discharge its responsibilities for assessing the quality and standards of the Higher Education providers it funds”. The portfolio goes on to identify two key themes of the APR process since 2017/18. In summary, these related to the oversight of academic governance to continuously improve academic experience and learner outcomes. In addition, the process considered learner data which provider’s already submit to HESA and the Department for the Economy. COVID-19 meant the APR process was suspended, however, the provider recognised the importance of these activities and continued to undertake the quality assurance assessments to ensure the ongoing enhancement of programmes. The outcome of the 2019/20 Annual Academic Assurance Report was submitted as evidence. From this, and the narrative, the visitors noted the evidence demonstrated strong and robust practices.</p> <p>For BSA, the narrative outlined how the programmes had been recently reviewed by the Academic Office at the education provider and how external feedback was</p>

	<p>considered as part of this. The portfolio goes on to illustrate how the programme leader has recently undertaken a module about curriculum design as part of a Post Graduate Certificate. This module aligns with the QAA UK Quality Code for Higher Education, which promotes an integrated curriculum design framework. The visitors were therefore satisfied the BSA was performing at the required level in this area.</p>
<p>Other professional regulators / professional bodies</p>	<p>For the FLHS, the portfolio outlined the QAA audits and the regular liaison and discussions undertaken with professional bodies. There was also mention of the education provider keeping professional bodies regularly updated with regards to the changes made to teaching and assessments in response to COVID-19, which ensured continuity in learners progressing in their studies. Early in the pandemic, senior staff had ongoing discussions with each of the relevant professional body around the achievement of the learning outcomes and practice hours. For example, the podiatry programme moved away from a specific number of placement hours to an achievement and sign off of clinical competences model.</p> <p>In addition, ongoing collaboration with the professional bodies is part of the Education Work Package for the move to the Magee Campus. From this, the visitors considered the alignment with professional and regulatory bodies was managed well and as such were satisfied with the approach in this area.</p> <p>For BSA, the portfolio outlined a range of organisations, professional bodies and regulators which the programmes liaise with. In addition, the portfolio outlined the range of policies and processes issued by these organisations which are utilised in the delivery and assessment of the programmes. For example, the BAAT Code of Ethics. The visitors were therefore satisfied the programmes were kept up to date so learning and assessment was appropriately current.</p>
<p>National Student Survey (NSS) outcomes – how the provider use this metric to inform development</p>	<p>For the FLHS, the visitors noted the CAQE processes which, annually, assess the quality of the programmes using quantitative and qualitative indicators. The NSS results are a key part of this. In quality activity one, the visitors requested further information about the action plans in place to address the low scores for the BSc (Hons) Podiatry and BSc (Hons) Occupational Therapy programmes. The UU Response to HCPC QA Further Clarification, confirmed how learners' feedback had been taken seriously and the mitigations and interventions which had been put in place to ensure concerns were addressed in a focused and timely way. For example, the provider identified a number of common issues</p>

	<p>across these programmes (i.e. timeliness, quality and clarity of feedback). The response document outlined the School wide approach put in place to address these issues, (i.e. more open communication channels). As a result the visitors noted the significant improvement of the overall NSS score for these programmes in the following 2020/21 year. Therefore, the visitors recognised the robust policies and processes in place in this area.</p> <p>For BSA, the visitors acknowledged that the programmes are set at Masters level and are therefore postgraduate programmes. The NSS only applies to undergraduate programmes and therefore the visitors did not consider this area within their review.</p>
Curriculum development	<p>For the FLHS, the visitors evaluated the information provided within the portfolio submission. This outlined how, due to COVID-19, there had been many changes to curriculum delivery. For example, moving to online delivery with specific face to face practical classes across the range of programmes. More specifically, for the BSc (Hons) Speech and Language Therapy programme, learners provided positive feedback about the recorded online conversations with service users. In addition, the supplementary and independent prescribing programmes adopted the pillars of the Flipped Learning Network. In terms of curriculum development, the biomedical science programmes aligned their curriculum with the pedagogical practice and updated teaching and learning guidance of the provider. The narrative provided the visitors with a good description of how curriculum has been delivered and developed in relation to internal and external factors and via regular contact with professional bodies.</p> <p>For BSA, further evidence was submitted through quality activity one. The provider confirmed that learners voted against the proposal to change the thesis to a professional portfolio. The idea behind making this change was to enhance the dissertation module to align it with employability. As part of this, it was planned that learners would explore the inter-relationships between art therapy, research and career development. It was outlined the External Examiner will consult with learners, as per the academic regulations, about this decision during his annual meeting with year groups later this year. The External Examiner will provide learners with a clear rationale outlining the proposed change and seek their feedback. Therefore, the visitors were satisfied with the education provider's approach in this area.</p>
Development to reflect changes in	<p>For the FLHS, the narrative outlined changes which have occurred to the diagnostic radiography, physiotherapy,</p>

<p>professional body guidance</p>	<p>occupational therapy, dietetics and biomedical science programmes. These changes ensured the programmes continued to meet the relevant professional body guidance. For example, the diagnostic radiography programme amended module content in line with the Society of Radiographers “Have you paused and checked?” guidance. In addition to these formal changes, temporary changes were made based on guidance from professional bodies as to how programmes could continue to meet the practice-based learning requirements during COVID-19. For example, for the physiotherapy programme. The visitors noted that relevant changes were well described in the portfolio submission to respond to legislative and regulatory changes to adhere to guidance from the relevant professional body. Therefore, the visitors were satisfied with the education provider’s approach in this area.</p> <p>For BSA, the portfolio outlined how the programmes ensure they continue to reflect any changes in the BAAT guidance. The portfolio also outlined how the programmes ensured learners are aware of, and can access new policies and guidance, of the BAAT by becoming trainee members of the association. The visitors were satisfied with the providers approach.</p>
<p>Service users and carers</p>	<p>For the FLHS, the visitors received a copy of the Faculty Guidance on People Engagement as well as a detailed narrative about how these policies / processes are demonstrated in the BSc (Hons) Radiotherapy and Oncology programme. In addition to meeting service users and carers in practice-based learning and meeting associated learning outcomes, a patient involvement project was started. This project worked in partnership with local cancer support groups and brought the ‘patient’s perspective’ to learners. Alongside the introduction of service user’s voice to the programme, a study was undertaken to evaluate the benefits and risks in including service users in the programmes when they shared their experiences and journey through their treatment. The outcome of this study was shared with the visitors. The visitors and service user expert reviewed the information relating to the involvement of service users and carers across the AHP programmes. It was clear from the submission that the provider is performing well in relation to the involvement of service user and carer in the programmes. It is clearly appropriate and ensures their involvement contributes to the overall quality and effectiveness of the programmes.</p> <p>For BSA, visitors sought further information through three quality activities. Through the additional evidence and</p>

	<p>conversation, the visitors appreciated that the programmes started in September 2019. Due to the implications of COVID-19, service user and carer activity had not occurred as originally planned. As such, the provider reflected on feedback from practice educators related to service user's experience of therapy provided by learners during practice-based learning. The examples provided information of how feedback was used during practice-based learning and how it was incorporated and added value to the programmes. The portfolio also outlined how the provider plans to increase the voices of services users on the programme i.e. through clinical seminars to introduce the mental health experience of service users. While these are relatively new programmes and due to the difficulties COVID-19 presented, the visitors considered there was sufficient evidence to demonstrate service user and carer involvement at a threshold level. However, the visitors felt there was a risk should there be any further restrictions on how service users and carers are involved in the programmes. This is explored in more detail in the 'Risks' section of the report.</p>
<p>Learners (those engaging with an approved programme)</p>	<p>For the FLHS, the visitors reviewed the Partnership Framework which was developed in collaboration with the Student's Union (UUSU). This outlined the shared values and work being undertaken to enhance learner representation at all levels. Examples included, course representatives on Staff Student Consultative Committees, involvement in revalidation exercises and senior committees involving UUSU representation to discuss key metrics and reports to provide the learner perspective. For example, learner feedback received by the dietetics programme discussed the receipt of timely feedback. As a result, the programme team prioritised repeating clear messages to staff and learners about turnaround times and the importance meeting these and of communication.</p> <p>Through quality activity one, the visitors sought further information about the support available for learners if they had issues or concerns while on their respective programme, including practice-based learning. The provider explained that learners are advised to follow the Student Complaints process. Their response also included a flowchart (as an extract from the Student Handbook). This explained how the process was explained to learners and the steps that would be undertaken to protect service users if the learners thought they were at risk. The visitors were satisfied with the providers approach in this area.</p> <p>The visitors noted the range of effective feedback mechanisms in place to support learners. Visitors also considered the efforts made by the education provider</p>

	<p>based on learners' feedback, to minimise the impact of COVID-19 to ensure learners continued to progress onto their respective programmes. This showed the provider is doing well in this portfolio area.</p> <p>For BSA, the portfolio included a range of positive feedback received from current learners and recent graduates. The portfolio also discusses how learner feedback is sought and utilised by the programme. For example, the discussions about the mode of delivery and the suggestion to invite art therapists to talk about their career and practice. Also submitted was an example Staff Student Consultative Committee Meeting, 2nd Year Reps minutes. This outlined the points of discussions and resulting actions to be taken. The visitors were therefore satisfied the provider is appropriately consulting and responding to learner feedback.</p>
Practice placement educators	<p>For the FLHS, the visitors recognised the close working relationship that exists between the education provider and practice education providers, which ensured education and training of practice educators was being managed well. For example, within the physiotherapy programme. During COVID-19 practice educators were stretched due to redeployment, sickness, annual leave and restricted clinical space due to social distancing measures. This created additional stress for the practice educators. As such the provider put in place a number of mitigation actions. Such as increased pastoral care for learners, support for learner / practice educator via weekly phone calls, virtual training course for new practice educators and expanding the range of placement sites outside of the traditional areas.</p> <p>Within the speech and language programme, the visitors noted the regional concerns about the readiness of learners going into the clinical environment. Practice educators, from across the region, met to determine what key skills a learner would need to be 'ready' for their practice-based learning. From this, four client 'Avatars' were created by NHS-clinical experts and lecturers to generate real time and self-directed learning for learners. Clinical experts ran the majority of the sessions around each avatar. The visitors considered that the provider clearly described the actions it had taken to mitigate limitations on practice educators, for the AHP programmes. This showed the provider has developed where it needed to and is therefore performing well in this area.</p> <p>For BSA, the portfolio outlined the training provided to practice educators and tripartite meetings held between the provider, learner and practice educators. During COVID-19, the provider ran online training seminars. This enhanced</p>

	<p>their ability to reach more practice educators as they were able to offer flexible training to fit around educators work schedules. This facilitated a sense of community and peer mentoring / communication. The visitors were therefore satisfied the provider was appropriately involving and liaising with practice educators to ensure the effective delivery of the programmes.</p>
<p>External examiners</p>	<p>For the FLHS, the visitors reviewed the External Examiner Handbook and External Examiner Reports for each AHP programme. From the handbook, the visitors noted the clear process for the involvement of External Examiners and how their feedback is considered / actioned. The Annual Assurance Report (AAR) 2019/20 included the aggregation of comments and actions taken, from each of the programme reports. Overall, this outlined the External Examiners were “generally satisfied with the range of assessment methods, and the use made of assessment criteria, and their participation in the moderation processes”. The AAR indicated a small number of concerns for a small number of courses. Specific course related issues would be addressed by the relevant programme team. Therefore, the visitors were satisfied on the fairness and robustness of the External examiners assessment which helped in contributing to the quality of the institution’s provision.</p> <p>For BSA, the portfolio included the External Examiner’s Report for 2019-20. As part of the process, they met with a range of learners to gain their feedback. It is clear that, while the learners “felt the course to be a rich experience” there were some issues relating to the move to online learning and gaining of the appropriate clinical experience during the pandemic. However, overall the feedback from the External was positive and congratulated the programme team on their dedication, in the way they supported and were able to deliver the programmes during the pandemic. The External Examiner also outlined some areas to consider over the next academic years. The visitors were therefore satisfied with the involvement and robustness of the feedback in the quality assurance of the programmes.</p>

Risks - FLHS

The visitors did not identify any risks associated with the AHP programmes. The visitors were able to note within the submission that the provider was performing at an appropriate level and, in some areas well above, as noted below. The evidence also demonstrated the provider is continuing to meet the HCPC standards.

Risks - BSA

The visitors identified one risk relating to the involvement of service users and carers.

As outlined above, an example of service user involvement in the programmes was provided. Visitors noted this is a standard expectation within practice-based learning related to this profession. Visitors recognise these are new programmes and due to COVID-19 there has been restricted service user involvement due to the move online and limited activity on campus. Therefore they considered this limited, though appropriate at threshold, service user involvement in the programmes. The visitors were also satisfied reading the future strategy to increase the involvement of service users, and how they will be contribute towards these two programmes.

The visitors recognised the provider's future plans though the visitors were unclear of the speed of introduction or any potential impacts on this may have on the programmes. The visitors therefore considered the provider monitors this and, if necessary, discusses any significant impacts on the programmes with the HCPC prior to the next monitoring period.

The visitors do not consider this risk presents a reason to require any further regulatory intervention at this time.

Best practice – FLHS

The visitors identified a number of areas of best practice for the FLHS programmes.

- Service users and carers: The Service User Expert Advisor and visitors identified good relationships with service users within the submission. For example in the BSc (Hons) Radiotherapy and Oncology programme. This indicated meaningful interaction and involvement of service users across the AHP programmes.
- Horizon scanning: The visitors wished to note the effective and ongoing approach, to horizon scanning. This was particularly evident from the development of new programmes and the exploration of new opportunities to add MSc programmes to the existing Occupational Therapy and Physiotherapy provision.
- Response to COVID-19: The visitors wished to highlight the symbiotic working relationship with the wider health community and Department of Health in Northern Ireland. In particular, the effectiveness of this as demonstrated by the response to COVID-19.
- Other professional regulators / professional bodies: The visitors recognised the effective collaboration via regular liaisons and meetings with relevant professional bodies, ensured timely adaptations to curriculum across all the programmes. This was especially demonstrated by the temporary amendments to the programmes due to COVID-19.

Best practice – all programmes

The visitors identified the following areas of good practice:

- Response to COVID-19: The visitors wished to highlight the positive response to COVID-19. Particularly how the provider sustained practice-based learning for all learners due to effective partnership working with practice education providers. In addition, innovative technology methods were used effectively to ensure the achievement of the learning outcomes and delivery of the programmes.
- Learners: The visitors noted the provider's activeness and willingness in continuously acting upon feedback from learners and other stakeholders, which has added overall value and quality across the programmes.

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 5 years (the 2025-2026 academic year).

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

- We will record the decision of the Education and Training Committee here following their meeting on 31 March 2022.