

Performance review process report

University Centre South Devon, 2018-21

Executive summary

This report covers our performance review of the programmes offered by University Centre South Devon. During this review no referrals were made. The visitors initiated some quality activities to reassure them the provider has processes in place to ensure future sustainability, regarding staff and placement capacity. There is a lack of comparable data points to inform us of progress, therefore our recommendation for the performance review period is two years.

This report will now be considered by our Education and Training Panel who will make the final decision on the on the review period.

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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 performance review process undertaken by the HCPC to ensure that the institution and practice areas(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.

Thematic areas reviewed

We normally focus on the following areas:

- Institution self-reflection, including resourcing, partnerships, quality, the input of others, and equality and diversity
- Thematic reflection, focusing on timely developments within the education sector
- Provider reflection on the assessment of other sector bodies, including professional bodies and systems regulators
- Provider reflection on developments linked to specific professions
- Stakeholder feedback and actions

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 a review of this education provider:

| | |
|------------------|---|
| Garrett Kennedy | Lead visitor, Practitioner Psychologist |
| Robert MacKinnon | Lead visitor, Hearing Aid Dispenser |
| Sarah Hamilton | Service User Expert Advisor |
| Niall Gooch | Education Quality Officer |
| Sophie Bray | Education Quality Officer |

Section 2: About the education provider

The education provider context

The education provider currently delivers four HCPC-approved programmes across one profession]. It is a Higher Education Provider and has been running HCPC approved programmes since 2020.

University Centre South Devon is in the Southwest region of England. There are no ongoing issues identified within the region which could impact on the provider's performance/ quality.

University Centre South Devon is part of South Devon College. The Health Professions and Nursing Team is one of the largest teams at the College and in 2019 the team were approved to deliver the FdSc Hearing Aid Audiology programme. The education provider is therefore relatively new to delivering HCPC approved programmes.

In 2021 the provider engaged with us through the Annual Monitoring process, where the Hearing Aid Audiology programmes were looked at. The outcome of this monitoring process concluded the programmes continued to meet the standards and ongoing approval was granted with no conditions.

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 | Hearing Aid Dispenser | <input checked="" type="checkbox"/> Undergraduate | <input type="checkbox"/> Postgraduate | 2020 |

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.

| Data Point | Bench mark | Value | Date | Commentary |
|--|------------|-------|------|---|
| Total intended learner numbers compared to total enrolment numbers | 100 | 54 | 2022 | The number of learners enrolled is significantly lower than the number of learners their programmes are approved. |

| | | | | |
|---|-------|------|---------|--|
| | | | | However, the provider has outlined they cap their learner cohorts in line with the placements and resources they have available. Smaller cohorts ensured equipment was available and there were suitable staff and facilities to support learners. The potential impact to this is explored in quality theme 1 . |
| Learners – Aggregation of percentage not continuing | 3% | N/A | 2019/20 | The value for this data point is not available. The education provider has provided a narrative in the portfolio and explained the reason for this data not being available. This data will be available from October 2022 (which will be reflected on in their next performance review). This is explained in the data section . |
| Graduates – Aggregation of percentage in employment / further study | 93% | N/A | 2019/20 | The value for this data point is not available. The education provider has provided a narrative in the portfolio and explained the reason for this data not being available. Data relating to the progression of the first cohort of learners into further study or employment via Graduate Outcomes is due to be released in Spring 2023. This is explained in the data section . |
| Teaching Excellence Framework (TEF) award | N/A | Gold | 2017 | South Devon College was awarded a TEF gold award in 2017. This indicates they were assessed as consistently deliver outstanding teaching, learning and outcomes for their learners. |
| National Student Survey (NSS) overall satisfaction score (Q27) | 74.1% | 100% | 2022 | This score indicates the percentage of learners who are satisfied with their learning is higher than average. There was a response rate of 92%, providing an overall satisfaction rating of 100% for the programmes, however the provider reflected that this is representing a small cohort, for |

| | | | | |
|---------------------------------------|-----|--|---------|---|
| | | | | new programmes so will continue to monitor this. This is reflected upon in the data section . |
| HPCPC performance review cycle length | N/A | | 2018-21 | We have recommended a review period of two years after reviewing the providers portfolio and being satisfied with their performance but limited by the number of data points available. This will be confirmed once the report has been reviewed by the Education and Training Panel who will make the final decision |

Section 3: Performance analysis and quality themes

Portfolio submission

The education provider was asked to provide a self-reflective portfolio submission covering the broad topics referenced in the [thematic areas reviewed](#) section of this report.

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

Performance data

We also considered intelligence from others (e.g., professional and sector bodies which provided support) as follows:

- The provider are partners with the University of Plymouth. The purpose of this partnership is to work closely with employers to increase employment and career progression opportunities for learners

Quality themes identified for further exploration

We reviewed 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 linked to the quality themes referenced below. This allowed us to consider whether the education provider was performing well against our standards.

We sought out clarification on each quality theme via email communication to allow the provider to elaborate on previous information they had sent or send further evidence documents to answer the queries.

Quality theme 1 – Sustainability of growing provision

Area for further exploration: The provider has invested in additional staff to support learning, and they state the importance they place on staff as a valuable resource. They explained how staffing has been and continues to be a challenge in the Southwest of England due to lack of availability of qualified professionals and demands on salary. This has directly impacted on the number of learners the programme is recruiting each year, resulting in lower than intended learner numbers.

They have reflected on staff issues; however, it was unclear if the provider is aiming to achieve a certain staff to learning ratio to ensure they have appropriate capacity to increase cohort size. The visitors explored how many staff they employ which are HCPC registered and sought clarity on the staffing plans that will allow a larger learner cohort to be recruited. The provider's ability to recruit the required number of qualified staff directly impacts the number of learners they can recruit which has an impact on the sustainability of the programme. Learner numbers must be taught and supported by appropriate numbers of staff to ensure sustainability of the programme, therefore it important to ensure the provider has reflected on processes to ensure this.

Outcomes of exploration: The provider is considering their learner intake in relation to staffing numbers. They always ensure they are only accepting the number of learners they can suitably support with their staff resources. They have three staff who are HCPC registered, another who is registered with the Council for Clinical Physiologists (RCCP) and with interprofessional collaboration and delivery with the Nursing and Midwifery Council (NMC) registered colleagues.

There are currently a total 60 apprentices on their programme, with a ratio of 15 learners to 1 staff for HCPC or RCCP registered staff with additional staff with other professional registrations. They expect learner numbers to rise to a maximum of 96 across the next 12 months. They have experienced a significant demand for increase cohort sizes and will continue to increase this in line with staff recruitment. The provider has reviewed pay for staff to support with increased recruitment. They plan to improve pay and improve conditions to increase staff numbers to support this increase in cohort size. The visitors are satisfied they currently have sufficient staff in place to support current learners and have plans to address staffing issues in the future to ensure appropriate staff resources for increasing cohort numbers.

Quality theme 2 – Management of placements

Area for further exploration: Placement quality is monitored within the clinical placement audit procedure, which provides the framework to ensure placements are suitable. Any concerns raised during the duration of the programme are managed through the placement incident and concerns procedure. The visitors explored how placements were managed to ensure placement quality monitoring and learner support was adapted to account for COVID 19 restrictions and post pandemic processes. It was unclear how the quality of placements was monitored and how learners were supported in response to significant changes implemented as a result of the pandemic, as well as continuing to be effective moving forward. It is important for the provider to reflect and adapt practices to ensure monitoring and support is still effective in placements and reflect upon managing future placement capacity.

Outcomes of exploration: During the pandemic the provider adapted their methods of monitoring the quality of placements. To increase the overall compliance and support provided by employers and placement partners, the provider increased the dedicated, group training sessions with employers, mentors, and supervisors. The provider adjusted where appropriate to ensure learners were meeting the professional standards on placements and received adequate support in practice. This included delivering teaching sessions online, using simulators and manikins for practical sessions, organising regular virtual meetings, and provided extra support to learners, supervisors, and placement educators.

They also provided the updated educational audit procedure which the visitors agreed was a helpful addition to outline the process which ensures ongoing placement quality. The visitors are satisfied the provider made appropriate adjustments which ensured the effective monitoring of placements during the pandemic and have updated processes to ensure the ongoing management of placements. They put suitable mechanisms in place to support learners and staff during the pandemic. This further detail ensured the visitors that the provider is appropriately addressing their concerns.

Quality theme 3 – Integrating interprofessional learning into the curriculum

Area for further exploration: Learners on different programmes delivered by the provider have opportunities to interact with learners on different programmes during their study, through shared delivery of taught sessions. The provider has a practice learning committee where a range of representatives (stakeholders from a range of professions) are invited to discuss the development of practical placements. The provider has however identified there is limited learning from other professionals across different professions, and interprofessional learning which take place is currently based largely on placement sites. It was unclear how the provider ensures that interprofessional learning is a formal part of the taught modules of the programmes, rather than being left as an unmonitored part of placements. The visitors explored how interprofessional education is integrated as a coordinated part of the different programmes. Having interprofessional learning as an element of the taught and integral part of the programme ensures all learners gain appropriate experience of a range of professionals.

Outcomes of exploration: One module of the programmes is delivered by a health professional outside of the field of practice to enable interprofessional interaction and collaboration. The provider plans to enhance research strategies in line with programme revision which will be delivered by wider teaching colleagues within Health Professions and Nursing team. For further interprofessional learning they will have sessions within the clinical simulation suite and training clinic where learners from a range of programmes will undertake training together. The visitors are satisfied the provider is continually reflecting and working on their development of interprofessional learning in the curriculum to ensure learners have a broad experience of other professionals.

Quality theme 4 – Service user input into programmes

Area for further exploration: Overall, the visitors noted good performance and reflection of the use of service users in the programmes delivered by the provider. The pandemic significantly impacted the service user interactions on the programmes which the provider intends to address through their Service User Group (this is outlined further [here](#)). Through the information the provider supplied, it was not clear how they intend to return to pre-pandemic levels of service user involvement. The visitors explored how the provider has ensured service users, who are an integral part process, continue to input into the programmes design and development. Service users input ensures learners have a curriculum designed around those they will be working for as qualified professionals. Moving forward, after the challenges faced during the pandemic, it is important to ensure processes are in place for service users to effectively contribute to the programme.

Outcomes of exploration: At the time of submission of the portfolio, the provider was in the process of recruiting to the Patient Service User Group (PSUG) with support from their Practice Placement Co-ordinator. The objective is to rebuild service user interactions with the programmes. The PSUG feedback inputs into the questions used in learner interviews and into the design of the curriculum. The curriculum team plans to hold clinics within their own environments, providing a broader engagement of types of service users. The visitors are satisfied the provider is addressing the need for increased service user input since the pandemic through staff support and planned recruitment to the PSUG.

Quality theme 5 – Reflections on the National Student Survey (NSS) outcomes

Area for further exploration: The NSS scores have been noted as commendable considering they have not gone below the benchmark value (74,4%) for the last two years, despite the disruption of the pandemic. The only area to be noted for improvement through the NSS was regarding the Student's Union, but it was unclear what actions are being taken to address this. The visitors explored how the provider has reflected on this feedback and if there are plans in place to address this area. The performance review is institutional wide, and this would show how the provider responds to negative feedback. It is important for providers to consider all areas which impact on overall learner satisfaction and have processes in place to address potential weak points to continue to improve the learner experience.

Outcomes of exploration: The provider has acknowledged low learners' satisfaction in relation to the student union is an area which requires improvement. The visitors explored the processes implemented by the provider to ensure they effectively reflect and take appropriate actions in response to NSS outcomes. Each cohort of learners within a programme is asked to nominate a Course Representative who acts as the liaison between the learners and the higher education lead course rep (who is also a member of the Governing body). They hold regular committee meetings where the course reps come together virtually with the Lead Course Rep and members of the College management. They have appointed a new coordinator to development and improve a range of learner experience measures. The visitors are satisfied the provider is addressing and should continue to address the areas of concern highlighted through NSS through appropriate processes. It demonstrates the provider is taking action to improve practices in relation to learner satisfaction.

Quality theme 6 – Processes to review changes in professional body guidance

Area for further exploration: The provider has responded to changes in guidance across multiple groups including the British Society of Audiology (BSA), HCPC, and the Institute for Apprenticeships & Technical Education. Appropriate adjustments have been made to recommended procedures and referral guidelines in the programme. It was not clear if there are processes in place to ensure regular monitoring and reviewing of the programme in relation to the relevant professional bodies, and how these changes will be managed. The visitors explored the formal mechanisms the provider uses to review changes with the relevant professional bodies. They wanted to ensure programmes are updated in a timely and appropriate manner to reflect professional body guidance changes.

Outcomes of exploration: The provider has an effective committee structure to ensure mechanisms to review changes. The Health Professions and Nursing Committee meets multiple times a year to review any changes to regulations and standards from regulatory bodies. This committee reports incidents relating to a professional body guidance to the Higher Education Academic Board where decisions are made about any reportable events to the Office for Students (OfS). Changes are reviewed and documented alongside policy or procedural changes. Each programme undergoes annual programme monitoring where a review of the programme across the previous academic year takes place noting any changes required.

The visitors are satisfied the provider has the appropriate mechanisms in place to respond accordingly to changes in professional body guidance. This was noted as an excellent part of the providers core offering and a good practice point.

Quality theme 7 – Effective monitoring of learner ongoing suitability

Area for further exploration: The provider collects feedback from learners via a variety of methods including induction surveys, early and end of module reviews, programme committee meetings and learner consultative forums. However, it was unclear how the provider is monitoring ongoing suitability of learners' conduct, character, and health in the programme. The visitors explored how the provider monitors and ensures learner's ongoing suitability through effective and thorough processes. The visitors suggested this could be demonstrated through examples of records from meetings in which ongoing suitability has been discussed, to show the provider is performing satisfactorily with reference to their processes and policies around ongoing suitability.

Outcomes of exploration: The provider ensures the ongoing suitability of learners is reviewed is set out in the Programme Quality Handbook. It has recently been updated to reflect the emphasis of the Office for Student conditions of registration. The current version includes new sections on curriculum design, assessment strategy, learner support and preparation for employment, further learner, and personal development. All these factors contribute towards regularly updating the programme, aligning to ensuring learners can be taught, and assessed suitably with regards to ongoing suitability. The Fitness to Practice and Causes for Concern

Procedures are reviewed by the Assistant Principal. These reviews ensure that the policies are suitable and relevant for maintaining learner's ongoing suitability. Any curriculum changes and recommendations are made to the Policy Review Group. The committee subgroup report was provided which acted as evidence of ongoing suitability monitoring. The visitors are satisfied the provider has adequate processes and monitoring in place to ensure ongoing suitability.

Section 4: Summary of findings

This section provides information summarising the visitors' findings for each portfolio area, focusing on the approach or approaches taken, developments, what this means for performance, and why. The section also includes a summary of risks, further areas to be followed up, and areas of good practice.

Overall findings on performance

Quality theme: Institution self-reflection

Findings of the assessment panel:

- **Resourcing, including financial stability –**
 - The provider ensures their programmes remains sustainable with continued investment in resourcing of the curriculum. The senior leaders are responsible for the Higher Education Quality Assurance and Enhancement Action Plan to ensure all provision remains fit for purpose.
 - The provider shows detailed reflections on their financial position, addressing the challenges they faced during the pandemic through a clear strategy and action plan. They intend to achieve stronger financial health by 2023.
 - Numbers of learners have been significantly capped due to limited workforce resourcing; places will increase when additional resourcing is available. This was addressed in [quality theme 1](#). The provider has a strategy in place to increase staffing resources, and this as a key priority.
 - The provider has reflected suitably on changes in learner recruitment and addressed expectations for the future. Whilst they have highlighted their weaker financial position due to the pandemic, the provider is considering actions to improve this. The visitors were satisfied the provider is performing well.

- **Partnerships with other organisations –**
 - The provider works across the Southwest of England with a range of partners and strategic interactions to respond to a wider range of sector needs. This enables them to continue to meet the workforce needs of local and regional communities.
 - They continue to grow their strategic partnerships to ensure curriculum development and activity meets the needs of their community, and to increase placement opportunities. The employer learning partners provide practice-based learning supporting the ongoing quality and effectiveness of the programme and act as mentors for each of the

learners. The provider acknowledged they only have a small number of partners to provide practice-based learning at this point and are addressing the need for a more clearly defined structure for feedback and curriculum input.

- The visitors considered there was good engagement shown both at a macro level with partnership development and a more micro level with maintenance of supervision partnerships for specific organisations and individual learners. The provider reflected upon the value of partnerships and outlined the improvements they have made and are making, demonstrating good performance in relation to their partnerships.

- **Academic and placement quality –**

- The maintenance of academic standards is a key focus of the provider's annual quality monitoring cycle. Regular and systematic review of academic quality matters are monitored at subject, academic cluster, department, and College level, and reported into the Higher Education Academic Board.
- There is a process to undertake educational audits and to monitor and evaluate the suitability which establishes continuing assurance of placement learning environment to provide a safe and supportive environment for learners and service users.
- The provider has worked to ensure stability of placement provision during the pandemic. Some placements have needed to be more numerous and shorter and sub-optimal in terms of specialism in the view of the learners, but they are working towards securing more placements. The visitors explored this in [quality theme 2](#).
- The provider has continued to recruit staff to support their programmes. There is a new head of curriculum who has focused on addressing and additional Programmes Co-ordinators (programme leads) were appointed for each programme.
- The visitors considered the development of a Practice Learning Committee, and associated procedures is a good practice point. They provided clear reflections on how they have ensured academic and placement quality during the review period, especially with the challenges due to the pandemic. There are appropriate processes in place, and the visitors were satisfied the provider is performing satisfactorily.

- **Interprofessional education –**

- Interprofessional education was linked to the shared delivery of taught sessions where learners were able to share their understanding and experiences. There are opportunities for learning from other professions within the Practice Learning Committee where a range of representatives from professions are invited to discuss the development of practical placements.
- They provide residential blocks where learners from different professions will attend the faculty together which enables wider interaction.

- As the faculty increases in breath of disciplines, there will be opportunity for increasing interprofessional education at all levels. This will include developing clinical activity and involvement of patient carer and services users. All practical sessions will provide further exposure which can be taken into the workplace, enhancing the skillset of learners in preparation for working with other professionals
 - The provider has clear plan in place to increase interactions between learners and other professions and take these interprofessional learning opportunities outside of the classroom and onto the ward or clinic depending on the scenario and profession. The visitors explored this in [quality activity 3](#).
 - Based on the outcome of the exploration, the visitors were satisfied the provider was able to reflect on multiple areas of interprofessional education and demonstrate their intentions to further embed it within their programmes.
- **Service users and carers –**
 - The provider has a policy for their Patient, Carer and Service User Group (PSUG), who support student readiness for placements. The policy outlines how the programme will engage with service users and carers who will be involved with various aspects of the programme. Service users are included in the interview panel for learner entry onto the programme.
 - The provider has outlined how the pandemic has impacted the involvement of service users and carers in the programme. There have been on-going challenges with recruitment of the PSUG. The provider is addressing these challenges through active recruitment to the PSUG with support from the practice placement coordinator, as explored in [quality theme 4](#). They have also considered ways to involve service users in the development of the programme coordinator.
 - The visitors were satisfied the provider is performing satisfactorily following the additional information provided and can see they are actively addressing the challenges which they have identified during the review period.
- **Equality and diversity –**
 - The provider uses an institution wide equality and diversity policy, ensuring recruitment of learners is conducted in line with the code of practice on admissions and equality and diversity policy. There are processes to regularly monitor and review these policies.
 - They have an Inclusive Practice Policy which ensures teaching staff consider teaching, learning and assessment activity which supports all learners. The policies are reviewed regularly by the Equality, Diversity, Access and Participation Committee and actions are reported on in the annual Equality and Diversity Report. This shows the provider has a range of policies in place which are actively monitored.
 - The provider uses an access and participation plan and appears aware of the needs of learners from diverse backgrounds. The visitors agreed

this demonstrates good performance. 90% of learners are identified as from underrepresented groups by the Office for Students (OfS).

- The visitors are satisfied the training and processes are in place, and feedback mechanisms, are sufficient to ensure the provider is performing satisfactorily. Their data continues to highlight areas to enhance and develop to ensure equality of opportunity for all learners. The access and participation plan enables regular monitoring and updating of actions regarding this as data trends change year on year. The provider continues to monitor their performance in relation to equality and diversity to support learners.
- **Horizon scanning –**
 - The provider reviews the sustainability of programmes annually but has noted despite the lower-than-expected learner intake numbers, there is no risk to their HCPC approved programme being closed. They intend to increase these numbers in line with staff resource increases is discussed in [quality theme 1](#).
 - The provider has a strategic planning framework upon which horizon scanning is based and this links to future thinking about the where the organisation near future. The strategic overview encompasses the core of the organisation and visions link to the short, medium, and long-term planning of the organisation. They have plans to incorporate this at faculty level.
 - Each faculty has a curriculum map which outlines the programme and where this provision is still in planning stages and subject to approval, there is now consideration for a five-year view for the faculty to identify further curriculum changes aligning with the curriculum approvals process.
 - In their portfolio, the provider submitted as evidence documents for various committees, showing ongoing monitoring and improvement. They have reflected on the likely impacts of new technologies, changes to education reform and regulation, admission routes and growing learner numbers.
 - They have also reflected on the changes made during the pandemic and changes to the education and health care sectors post-pandemic. The visitors were satisfied the provider is suitably reflecting upon the future and planning for horizon scanning.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Areas of good and best practice identified through this review:

- The visitors identified that development of the patient service user group (PSUG) as originally envisioned will be an excellent area for improvement (and understandable this has not happened yet). The provider is already planning for this, showing good practice.
- The development of a Practice Learning Committee, and associated procedures is a good practice area.

Quality theme: Thematic reflection

Findings of the assessment panel:

- **Impact of COVID-19 –**
 - At the start of the pandemic, the format of learning and assessments were adapted for guidance changes. Blended learning was adapted when face-to-face teaching was reinstated. Practical sessions were adapted to align to restrictions, and when not possible for learners to engage with certain activities alternative arrangements were made.
 - Staff were supported with this transition through appropriate training and resources. The Student Support Hub offered learners support throughout the pandemic, and vulnerable learners received enhanced support or hardship funding awards.
 - There was positive feedback about the fast transition to online learning.
 - The provider has highlighted the challenges for learners relating to placements and staff absenteeism, and how they appropriately addressed them. The provider also acknowledged the financial impact of the pandemic and have made reassurances from their financial reserves, investments, and action plans to ensure they are more financially stable by 2023.
 - Despite considerable disruption to the delivery of the programme due to the pandemic, several online learning aspects have been identified and embedded into the curriculum. The support available to learners during and post-pandemic was explored in [quality activity 2](#). The actions taken appears suitable and effective and show how the provider has reflected upon the impacts of COVID effectively and in a suitable timeframe. The visitors were satisfied the provider is performing satisfactorily, and no quality activities were required.

- **Use of technology: Changing learning, teaching, and assessment methods –**
 - As stated above, the provider moved to online learning during the pandemic and has since adapted to a blended learning provision. The provider's Digital Strategy focuses on core elements of the business and considers the learner experience.
 - The provider has adapted the quality of teaching and continue to provide learning with a mixed delivery of online resourcing, pre-recorded video lectures, face to face lectures and virtual meetings.
 - Learners have been supported with accessing technical equipment through bursary packages, in addition to hardship funding. Training is also provided by the staff in the HE Support Hub, via pre-entry activity as well as drop in and on demand support for all learners.
 - The provider continues to invest in hardware, software and staff training and development to improve technology for teaching, learning and assessment.
 - The visitors were satisfied staff are getting suitable support to implement technology use into the programme and are satisfied the provider is continually improving the learner experience through online

platforms. The provider has reflected well and demonstrates good performance.

- **Apprenticeships –**

- The provider has been offering apprenticeships for a significant number of years, offering more than 50 different apprenticeship standards across a range of sectors and from Level 2 to Level 7.
- They have several mechanisms in place to support learners on apprenticeships. For example, apprentices are employed and not entitled to Student Finance England (SFE) support for disability, so they have a process in place whereby a formal needs assessment is completed for any individual who has identified a need.
- The provider has a clear approval process for all apprenticeship standards which includes evidence of 100% mapping to the knowledge, skills, and behaviours of the standard in addition to the occupational standards by regulators.
- They haven't experienced any significant challenges or concerns with apprenticeships and have responded accordingly to changes when needed. They continue to monitor the quality of their apprenticeships using committees. The visitors are satisfied the provider has addressed funding and provision implications and have engaged well with the apprenticeship programme.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Areas of good and best practice identified through this review: The visitors noted the provider has adapted well to the impact of COVID and use of technology, through supporting their staff and learners.

Quality theme: Sector body assessment reflection

Findings of the assessment panel:

- **Assessments against the UK Quality Code for Higher Education –**
 - Committees within the provider regularly review the expectations for standards and quality. The main way they assess against the Quality Code is through curriculum area Self Evaluation Documents (SEDs) which are compiled by Head of Curriculum in association with one of the higher education coordinators with feedback from curriculum teams, external examiner reports and course reviews feed into the committee structure.
 - For one year overall scores on the HEAB Self-evaluation document dropped to “requires improvement” but have otherwise remained satisfactory. The change in score has been attributed to a non-regulated programme. A new head of curriculum has been appointed to address the areas of concern. However, this is against an improving backdrop with an increase from three to five out of eight dimensions

being rated as “commended”, which the visitors highlighted as a strong positive indicator.

- This shows positive performance and suggests the provider is addressing issues appropriately. The visitors are satisfied the provider is performing to the required level with regards to alignment to the UK Quality Code.
- **Assessment of practice education providers by external bodies –**
 - The provider currently works with four practice providers through both direct and apprenticeships provision of the Foundation Degree Hearing Aid Audiology programme. Three of the practice providers are accredited by the NHS in line with Clinical Commissioning Groups and all four provide private assessments and hearing aids.
 - Practice partners demonstrate a continuing approach to professional development through accreditation to partners including The British Society of Hearing Aid Audiologists and The British Academy of Audiology. One partner is accredited by United Kingdom Accreditation Service (UKAS) with an Improving Quality in Physiological Services (IQIPS) accreditation. This demonstrates their competence in their field.
 - The provider expects further practice providers to join the programme in supporting Hearing Aid Audiology learners. The provider will continue to adjust the requirement to include a robust Clinical Placement Audit across apprentice employers also. This will become part of the new Practice Placement Co-ordinator role to co-ordinate support for PLP’s across the HCPC approved programmes.
 - The visitors are satisfied the provider is performing to the required level with regards to ensuring their practice providers are regulated.
- **National Student Survey (NSS) outcomes –**
 - Due to the provision offered by the provider, only around 30% of learners are eligible to undertake the NSS. All other learners undertake the annual Student Perception Questionnaire (SPQ). The SPQ mirrors the NSS in its questionnaire items but is internally delivered and analysed.
 - It was noted overall satisfaction has remained around benchmark, including the previous two years. The visitors agreed this is to be commended particularly in light of COVID. The provider’s response to the lower scores in relation to the student’s union was explored in [quality activity 5](#), and the provider is appropriately addressing this.
 - The provider has action plans in place to address the areas for improvement. Namely the leadership, management and organisation, and student voice, in one curriculum area. The learner voice and learning community have both been negatively impacted by COVID and are a focus of the Tutorial Curriculum this academic year.
 - The visitors are satisfied the provider has acknowledged challenges they have faced and are addressing them appropriately.
- **Office for Students monitoring –**

- The provider was successful in gaining registration with the Office for students in April 2018 and is Approved as a Fee Cap provider. The Office for Students (OfS) which is an independent public body reports to Parliament through the Department for Education (DfE). Registration with OfS ensures the education provider has the power to award degrees and university titles to learners, enabling learners' suitable qualifications to enter the Register.
- They are not subject to any enhanced monitoring by the OfS or any specific conditions. The provider is confident they have both the staff and the processes in place to appropriately respond to OfS requirements and have demonstrated this already. They are continually refining their processes as well as looking externally for mechanism to development practice. The visitors were satisfied the provider is performing satisfactorily here.
- **Other professional regulators / professional bodies –**
 - Across the provision within South Devon College, in addition to the HCPC, the wider health faculty also has provision regulated by the following professional bodies:
 - Nursing and Midwifery Council (NMC) for the Nursing Associate Foundation Degree and the
 - General Dental Council (GDC) for the Level 3 Principles and Practice of Dental Nursing
 - The Nursing Associate is validated by University South Devon/South Devon College
 - Dental Nursing is validated by an Awarding Organisation.
 - Through increasing the number of regulators which the provider works with they have improved their quality review cycles, increased sub-committees and adapted policy, procedure, and regulation as part of various application processes to enhance the provision further.
 - This reflection from the provider suggests a positive relationship with regulators and professional bodies they work with. The visitors are satisfied the provider is aligning to the necessary regulators and professional bodies in an appropriate way, showing good performance.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Areas of good and best practice identified through this review:

- Positive outlook on working closely with a number of external regulators and professional bodies demonstrated through their reflections. This collaborative work shows good practice.
- The maintenance of good learner satisfaction scores from the Student Perception Questionnaire was noted by visitors as good practice. Despite the disruption of the pandemic, learners have remained satisfied with the provision provided and there hasn't been a drop in results achieved.

Quality theme: Profession specific reflection

Findings of the assessment panel:

- **Curriculum development –**
 - There is regular and systematic review of academic quality matters, which are monitored at subject, academic cluster, department, and College level, and reported into the Higher Education Academic Board, which ultimately reports to the Governing Body.
 - External validation of their processes has been gained through the achievement of foundation degree awards under QAA scrutiny and through the University of Plymouth's periodic review process.
 - Recommendations for changing existing provision, are presented to the Higher Education (HE) Strategy board which will agree if programmes can proceed to the next development stage which leads to a formal presentation to the HE Curriculum Development panel.
 - The provider has intentions to continue to develop and enhance the process in line with external expectations. The visitors are satisfied the provider is monitoring, developing, and improving curriculum regularly.

- **Development to reflect changes in professional body guidance –**
 - The provider has acknowledged needs for development relating to professional body guidance through their regular curriculum reviews. They have made changes to recommended procedures and referral guidelines in their discipline, and updates have been made by the course team in appropriate timescales.
 - They have a detailed committee structure to ensure mechanisms are in place to ensure programmes continue to reflect industry and regulatory standards in a timely and appropriate manner. They also actively seek feedback from practice-based partners and industry specialists to support the development of the programme. The visitors explored this in [quality theme 6](#).
 - The provider has outlined the challenges of working with several different professional bodies with their apprenticeship provision. Through the provider's reflections, the visitors viewed they have handled these challenges appropriately.
 - The visitors are satisfied the provider is monitoring, reviewing, and reflecting changes regularly in line with relevant external bodies.

- **Capacity of practice-based learning –**
 - Practice-based placements are initially audited and assessed for their suitability. Numbers for learners are then capped based on the placement capacity. The provider has been able to secure local placements to support their learners. Timetables and practice requirements are shared with placement partners to model the placements available
 - The provider has a model in place to increase practice-based placement capacity and have developed a practice placement co-ordinator post. This position will support the increased professional, statutory and regulatory bodies (PSRB) regulated placements required across the faculty. The visitors explored this further in [quality activity 2](#).
 - As the curriculum is experiencing growth, staff numbers have been increased to ensure clear modelling and capacity can be achieved in

readiness for learner recruitment. The visitors are satisfied the provider is considerate of the number of learners in relation to practice-based placement capacity and have suitable plans in place to increase this capacity.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Areas of good and best practice identified through this review: The visitors noted excellent practice through the number of boards and committees organised and run to review changes. These ensure the providers core offering is regularly monitored and reviewed to reflect changes in professional guidance and shows good internal structure.

Quality theme: Stakeholder feedback and actions

Findings of the assessment panel:

- **Learners –**
 - The provider has a variety of methods to gain feedback from learners to improve their experience and academic opportunities. Courses have learner representatives who contribute to programme committee meetings and student's consultative forums, and several opportunities for learners to be involved with feedback into the development of programmes.
 - During the pandemic, they ensured all learners had access to suitable resources to allow them to continue their studies from home where necessary. The visitors explored how the provider monitors ongoing suitability of learners' conduct, character, and health in [quality theme 7](#).
 - The provider has several complaints procedures which enable them to deal with complaints effectively and appropriately. They have reflected upon a particular complaint from a learner regarding their placement, and as a result are reviewing the Placement Policy & Procedure. They are also reviewing their Fitness to Practice procedure to ensure learners are fully supported during the process.
 - Feedback and complaints have instigated change, from policy to resourcing to facility cleanliness, and they continue to encourage learners providing feedback to develop their programmes and processes. The visitors are satisfied the provider has reflected upon their performance during the review period and are performing satisfactorily.

- **Practice placement educators –**
 - The provider views a practice educator role as being a leader, role model, coach, teacher, mentor, and assessor. They have a responsibility of ensuring the clinical supervision, leadership, and development within the practice-based education environment.
 - The provider is developing a handbook designed for practice educators, mentors, and supervisors to provide support and information whilst they are supporting the learners during their

placement to ensure there is consistency across the range of programmes. The visitors explored increasing placement capacity and support provided to these in [quality theme 2](#).

- They plan to improve feedback from practice educators within the practice learning committee. There is regular communication with practice educators, and they are developing support mechanisms to help them support learners. The visitors are satisfied the provider is continually seeking feedback from practice placement educators, as well as developing support and regularly monitoring them.
- **External examiners –**
 - The provider has reflected upon the effectiveness of their external examiner (EE) for the HCPC approved programme. In response to a lack of feedback from the previous EE, they sought a new, more experienced EE.
 - They had the intention of a new EE supporting the team in becoming reflective to action developments in line with feedback from both employers and learners. They are now working closely with the EE to gain meaningful feedback to enhance provision. Since this recruitment, the provider has already adapted to HCPC accredited curriculum following the updates HCPC general standards of proficiency. The visitors are satisfied the provider has reflected and acted upon improving their performance through their engagement with an external examiner during the review period.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Data and reflections

Findings of the assessment panel:

- There is currently no data available for learners not continuing. This data will be available from October 2022 (which will be reflected on in their next performance review). The provider has appropriate measures in place to support continuation for learners.
- Information on graduate destinations is informed via the Graduate Outcomes survey, but no data is currently available for the HCPC approved programme. The provider states anecdotal evidence would suggest most learners go on to continue in their current employment or seek higher level employment opportunities within the sector.
- Data relating to the progression of the first cohort of learners into further study or employment via Graduate Outcomes is due to be released in Spring 2023. Until then, the provider will utilise data from their internally run Graduate Destinations Survey to be able to support monitoring and review of the number of learners who are progressing into further study or higher-level employment, on completion of their foundation degree.
- A Higher Education Data Lead Quality Co-ordinator has been appointed to support the delivery, monitoring and review of data internally.

- The provider was awarded a TEF [Gold](#) in June 2017. They were flagged as above the benchmark in four of the six core metrics. Non-continuation and graduate employment (via the DLTE) were not positively flagged. Supporting learners to remain on programme and achieve positive outcomes has been a key strategic focus for the provider's Access and Participation Plan.
- From the National Student Survey, there was a response rate of 92%, providing an overall satisfaction rating of 100%. Despite this positive result, the provider is aware that as a new programme with small numbers, they need to continue to consider the quality of the provision as the cohort sizes and number of cohorts increase. They will continue to monitor this.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Section 5: Issues identified for further review

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

There were no outstanding issues to be referred to another process

Section 6: Decision on performance review outcomes

Assessment panel recommendation

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

- The education provider's next engagement with the performance review process should be in the 2023-24 academic year

Reason for this recommendation: Overall, the portfolio was completed well and showed good reflections from the provider. The visitors gave positive feedback on the narrative, stating it was largely candid and insightful. It clearly showed their progress and performance during the review period. Due to the lack of comparable data points available for this provider, the visitors recommend a review period of two years.

Appendix 1 – list of open programmes at this institution

| Name | Mode of study | Profession | Modality | Annotation | First intake date |
|--|----------------------|-----------------------|-----------------|-------------------|--------------------------|
| FdSc Hearing Aid Audiology | FT (Full time) | Hearing aid dispenser | | | 01/01/2020 |
| FdSc Hearing Aid Audiology | FLX (Flexible) | Hearing aid dispenser | | | 01/01/2020 |
| Hearing Aid Aptitude Test | FLX (Flexible) | Hearing aid dispenser | | | 01/01/2021 |
| Hearing Aid Audiology Bridging Programme | FLX (Flexible) | Hearing aid dispenser | | | 01/11/2020 |