
Performance review process report

University of Sunderland, 2018-21

Executive summary

This report covers our review of the education provider's performance in the period between 2018 and 2021.

Following their review of the portfolio, the visitors have recommended a five-year review period. Through the reflection provided and after engaging with quality activity, we were able to gain assurance the education provider is performing well in all areas. Practice-based learning is closely monitored to ensure its effectiveness. We recognise the expansion of the simulation environment to other programmes, in addition to the Paramedic programme. Apprenticeship programmes are adequately resourced in line with apprenticeship guidance. Staff development is given adequate consideration and service user involvement remains integral at all levels of programme management.

There are no referrals or issues identified from this review. 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 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:

Peter Abel	Lead visitor, Biomedical Scientist
Matthew Catterall	Lead visitor, Paramedic
Rachel O'Connell	Service User Expert Advisor
Temilolu Odunaike	Education Quality Officer

Section 2: About the education provider

The education provider context

The education provider currently delivers 17 HCPC-approved programmes across four professions and including two Prescribing programmes. It is a Higher Education Institution (HEI) and has been running HCPC approved programmes since 2006.

The education provider recently engaged with our approval process to have their new BSc (Hons) Occupational Therapy (Accelerated) and BSc (Hons) Occupational Therapy (Apprenticeship) approved. Both programmes were approved by our Education and Training Committee at their August 2022 meeting. The education provider has not had any other engagement with any of our processes.

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	Biomedical Scientist	<input checked="" type="checkbox"/> Undergraduate	Postgraduate	2018
	Occupational Therapist	<input checked="" type="checkbox"/> Undergraduate	<input type="checkbox"/> Postgraduate	2019
	Paramedic	<input checked="" type="checkbox"/> Undergraduate	<input type="checkbox"/> Postgraduate	2016
	Physiotherapist	<input checked="" type="checkbox"/> Undergraduate	<input type="checkbox"/> Postgraduate	2019
Post-registration	Independent Prescribing / Supplementary prescribing			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	Benchmark	Value	Date	Commentary
Total intended learner numbers compared to	473	498	2022	Across the institution, the enrolled learner numbers are within reasonable range of the numbers approved by the

total enrolment numbers				HCPC. This provided reassurance around sustainability of the provider and its provision.
Learners – Aggregation of percentage not continuing	3%	1%	2019-20	The education provider has a very small percentage of learners not continuing. This may indicate the majority of learners are satisfied with their studies. We also note an improvement from the previous academic year (2018-19) where the value was 2%.
Graduates – Aggregation of percentage in employment / further study	94%	98%	2021/22	The percentage in employment or further study is above the benchmark at the education provider. This data implies learners who successfully complete their learning at this education provider make significant progress by gaining employment or continuing to further their studies.
Teaching Excellence Framework (TEF) award	N/A	Silver	2017	Silver indicates there is room for improvement, but also worth noting that this award was several years ago and the TEF replacement has not yet been introduced that would provide an alternative score. Silver is also a positive score and TEF states “this shows a ‘high quality’ of teaching and that the provider ‘consistently exceeds rigorous national quality requirements for UK higher education”.
National Student Survey (NSS) overall satisfaction score (Q27)	77.4%	61.7%	2022	We noted the decline in NSS scores in the last two academic years. The education provider has reflected on this in their portfolio and identifying specific programmes with low satisfaction ratings. The education provider has explained the processes and

				procedures they have put in place to address the issues. We were satisfied with the reflection submitted and reassured the education provider is aware of the issues and are managing them effectively.
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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.

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.

Quality theme 1 – how paramedic placement challenges were addressed

Area for further exploration: The education provider stated they have long standing partnerships with a range of stakeholders. This has enabled the continued use of existing governance structures around placements, quality management and escalation of issues. We noted evidence provided to demonstrate the strategic and operational partnerships in action. We also noted the Applied Biomedical Science/Healthcare Science/Healthcare Science Practice, Occupational Therapy and Physiotherapy programmes were all thriving in relation to their partnerships with practice education providers. However, for the Paramedic programme, it was not clear how partnership challenges around securing practice-based learning for all learners were managed. We noted clearances were identified as an issue, and they have plans in place to address the issues, but it was not clear how and when the plans will be actioned.

Quality activities agreed to explore theme further: We requested for the provider to submit further information that outlines how the challenges identified were being addressed. We considered this the most effective way to gain clarification on how this issue was managed.

Outcomes of exploration: We understood from the additional information provided that a group, Placement Allocation Network Meeting – was responsible for the strategic allocation of placement numbers with all Trusts. The group was also responsible for managing placement capacity across the region and this included paramedic placements. Through the monthly operation meeting with the North East Ambulance Service (NEAS) education team and weekly meetings with The University of Sunderland placement team, programme lead(s) and NEAS placement team as well as monthly planning meetings, we saw how and when challenges raised around placement capacity for paramedic learners are being dealt with.

We were therefore reassured that the education provider continues to perform well in this area.

Quality theme 2 – ensuring quality of practice-based learning

Area for further exploration: From the initial review of the portfolio, we noted variation across programmes in how the education provider ensured quality of practice-based learning, particularly as it relates to the support given to learners and practice educators in practice. We decided to explore how the education provider ensures the quality of practice-based learning for all their programmes.

Quality activities agreed to explore theme further: We sought clarification via further information to allow the provider evidence how they ensured quality of practice-based learning across all their programmes. We considered further information on how feedback was collected and used across the programmes would give reassurance on how quality was ensured.

Outcomes of exploration: We understood that for the Paramedic, and the Applied Biomedical Science/Healthcare Science/Healthcare Science Practice programmes, learners' feedback was collected via a survey tool called Qualtrics surveys, Programme Studies Boards and Staff-Student Liaison Meetings. Placement evaluation feedback was also collected by the placement provider, and this is used to improve the quality of practice-based learning. Through placement audits, the education provider checked to ensure feedback was continually taken to improve the quality of practice-based learning. In addition, Paramedic learners were encouraged to complete the National Education & Training Survey (NETS) which has been developed to allow both placement and education providers to view, evaluate and act on responses from learners completing. Although the survey is new, we understood it will continue to be used to inform any developments and best practices.

Physiotherapy programme used a mix of regional strategy and personal contacts to collate feedback while for the Occupational Therapy programme, feedback was collected after each practice placement.

Overall, we understood that both learners and practice educators on each of the programmes were satisfied with how feedback was collected and actioned on their individual programmes, to ensure quality, and learners on the whole were satisfied with their placements.

This demonstrated the provider has performed well in this area.

Quality theme 3 – projection and contingency plans for future growth of programmes and learner numbers

Area for further exploration: We noted the education provider is considering expansion of their health provision in line with changing health and social care needs and workforce priorities. The education provider referred to centralisation of programmes into a 'Health Campus' to contribute to their strategic ambition to be professions-facing. We also noted development of staff induction/support activities to support the project. However, there was lack of detail around:

- the possibility of this development leading to further growth in learner numbers;
- sustainability within placement capacity and resource constraints; and
- how current challenges were being resolved.

We also noted engagement with strategic and operational planning of placements, however, projection and contingency for likely practice-based learning numbers that could result from the education provider's plans was not presented.

Quality activities agreed to explore theme further: We sought clarification on this point via email communication to allow the education provider to elaborate on the previous information they had sent.

Outcomes of exploration: Through quality activity, we received confirmation that the Health Campus would support any growth in numbers on HCPC approved programmes. However, such growth will be influenced by placement capacity. The provider is not planning to increase learner numbers significantly and for any agreed growth, staffing and resources will be made available to the School during planning.

There are avenues, such as the Health Campus Steering group and the Timetabling group, to discuss and address challenges around campus facilities and timetabling. A new full time School Operations Manager is in post whose role is to have overview of all activities in the School, be a part of all the strategic and stakeholder meetings and be the main point of contact with the HCPC. This in turn ensures any issues are dealt with effectively and efficiently.

We were further reassured that capacity of practice-based learning has been and is expected to remain stable for some programmes such as the Biomedical Sciences programmes. The education provider noted that the Occupational Therapy provision has more placement provision than is required and for Paramedics and Physiotherapy programmes, we took reassurance from the various avenues (such as the monthly meetings) where issues around capacity were addressed.

Through the further clarification submitted, we were reassured that there are plans in place to ensure any growth in learner numbers will be adequately managed and contingency to ensure future capacity of practice-based learning is in place. This showed the provider is performing well in this area.

Quality theme 4 – simulation enhancement across all relevant programmes, during Covid -19

Area for further exploration: We noted that despite considerable disruption during the pandemic, several learning aspects, including the simulation into clinical laboratory training and the modulation of cohort size for workshops, have been identified and embedded into the curriculum. The introduction of online and virtual activities for learning and placement provision appeared suitable and effective. However, simulation enhancement appeared to have been only identified as a paramedic requirement. It was unclear if there were sufficient simulation resources to deliver all programmes effectively during the pandemic.

Quality activities agreed to explore theme further: We sought clarification on this point via email communication to allow the provider to elaborate on the previous information they had sent.

Outcomes of exploration: We understood from the provider's clarification that simulation is also being used in the Healthcare Science Hub. This has enabled the implementation of "innovative" practice-based simulation into clinical laboratory training, in a new blended model of practice education. The education provider also submitted a comprehensive list of equipment which will add to their existing supply. For Occupational Therapy provision, we noted the provider has developed a simulated environment – 'Occupational Therapy in a Box'. This was to enable learners undertake practical sessions without incurring additional expense, during the pandemic. However, they confirmed there is no longer a need for simulated practice-based learning because they have sufficient places for all learners. For Physiotherapy learners, who are a relatively small cohort, adjustments were also made to adapt to the pandemic. There is now funding available for the development of a media room where both educators and learners have resources required to make short films, podcasts and other media resources to support and enhance learning.

With this clarification, we were satisfied simulation resources were made available to all relevant programmes during the pandemic. This reassured us that the provider has performed well in how they managed the impact of Covid-19.

Quality theme 5 – proposed structure of apprenticeship model

Area for further exploration: We noted apprenticeship provision is self-sustaining without impacting upon traditional provision. Widening participation features have also been identified from the recruitment of apprentice learners. In their reflection, the education provider referred to a proposed enhanced flexible model, but it was not clear what this would look like or how it will work in order for us to determine its effectiveness.

Quality activities agreed to explore theme further: To have a clear understanding of the proposed structure of the enhanced flexible model of apprenticeship, we requested further clarification. We considered this would allow the provider to give more detail on the previous, limited information they had earlier submitted.

Outcomes of exploration: We understood from the detailed information provided, the apprentices go through a rigorous initial assessment process in line with the

Education and Skills Funding Agency (ESFA) apprenticeship requirements. For each apprentice, a bespoke detailed training plan is created and is mapped against their knowledge, skills and behaviours. The apprenticeship model is designed to allow increased accessibility from the workplace and allows some modules to be delivered online. The model also ensures regular meetings between the education provider and employers which enable engagement and consultation to continue and feedback to be addressed on a regular basis. It was clear from this information what the proposed apprenticeship model will look like. We were satisfied the model will allow learners meet the standards of proficiency following successful completion.

Quality theme 6 - assessment of practice education providers by external bodies

Area for further exploration: We noted the provider has established relationship with their practice education providers. We also reviewed the provider's reflection on the impact of the assessment by the Nursing and Midwifery Council (NMC) on their Nursing programme. However, we were made aware there has been no "incidence" at any of the practice providers for their HCPC approved provision and there was no further detail on how this group of practice education providers are being assessed or monitored.

Quality activities agreed to explore theme further: We sought further clarification via additional evidence to understand how practice providers for HCPC programmes are assessed by external bodies.

Outcomes of exploration: From the additional information submitted, it was clear that although there had not yet been any "incidences" by practice providers for their HCPC provision, there are service level agreements (SLAs) in place for all Trusts and placement providers to ensure they continued to perform as required. There are also specific requirements for practice education providers for individual programmes. For example, for the Applied Biomedical Science/Healthcare Science/Healthcare Science Practice provision, we understood training must be undertaken in an Institute of Biomedical Science approved training laboratory. We also noted outcome from NETS survey is shared with Health Education England. Although there was no specific information submitted on outcome of assessment of practice providers by external bodies, we were reassured the provider continues to ensure there is external oversight on their practice educators to ensure quality. This demonstrated the provider has performed well in this area.

Quality theme 7 – approach to curriculum and staff development

Area for further exploration: We noted the provider's reflection on curriculum development was limited. The provider highlighted their plan to operationalise the Student Success Plan 2020-24 which would amongst other things, incorporate Instructional Design in the development of teaching and learning resources and activities and increase staff development opportunities on the use of technology. However, there was lack of information to show how any curriculum development plan was monitored or implemented. There was also no evidence of staff development. For example, attendance at conferences and seminars.

Quality activities agreed to explore theme further: We sought clarification through additional information to allow the provider to elaborate more on information previously supplied.

Outcomes of exploration: In their response to the quality activity, the education provider explained that their BSc (Hons) Physiotherapy programme which was only approved in 2019 has had a series of minor module modifications in response to learners and External Examiner feedback. The provider also submitted data and further information on several other developments that the programme has had during the review period, including the development of a workshop on curriculum development which was evaluated and disseminated via an International Conference (NET 2021).

It was also clear that staff development was crucial to driving curriculum development. We noted a breakdown of evidence of staff development for each of the programmes. For the Biosciences and Health Care Science, we understood that The Centre for Enhancement of Learning and Teaching (CELT) <https://www.sunderland.ac.uk/more/celt/> supports staff involved in teaching through provision of services and resources. Subject specific training and development was managed through the staff appraisal process as well as the education provider's procedures in place to support academic staff undertaking research activity. It was also evidenced that staff were able to attend several conferences, seminars, and other training.

Paramedic staff have had the opportunity to attend conferences such as the Paramedic Mental Health Curricula project ran with Health Education England (HEE). The programme team have also undertaken extensive Continuing Professional Development (CPD)/online sessions ran via the College of Paramedics and other advertised activities.

From the additional information supplied, it was clear how the provider has implemented and monitored curriculum development for their programmes and we were satisfied that staff development has enhanced curriculum development. Therefore, we were able to take assurance that the provider has performed well in this area.

Quality theme 8 – how service users and learner feedback was used and monitored

Area for further exploration: We noted service user engagement and involvement has been described as “an established and integrated process across all programmes.” However, there was no evidence of how service users’ feedback has informed this strategy. There was also lack of detail around how the process was monitored. We noted feedback from learners evidenced in the learner meeting documentation submitted. The education provider also referred to some 3-hour blocks of lecture to be scheduled into full days but there was lack of clarity around this.

Quality activities agreed to explore theme further: We sought further information through email response to allow the education provider to elaborate further on information previously supplied.

Outcomes of exploration: Through the provider's response to quality activity, we understood service users (PCPI participants) are embedded at every stage of the learner journey. This includes involvement in the development of new programmes, the selection of learners, module feedback, supporting development of communication skills as well as gaining a greater understanding of living with long terms and their impact on a person's life. We were also provided with evidence of feedback from service users, academics and learners. Minutes of PCPI strategic reference group where topics were discussed and then actioned were also shared and we saw how responses were collated and actioned. An example of this was the consultation on new HCPC standards.

We also understood that service user feedback is included in the feedback made available to learners during the interview process for all programmes. Service users were also able to give verbal feedback to learners as part of the standard sessions and feedback received from learners was also forwarded to relevant service users.

The provider also clarified their point on the 3-hour lecture blocks. We understood that this applied only to the Applied Biomedical Science/Healthcare Science/Healthcare Science Practice programmes and module leaders gave regular breaks in these sessions. Active learning strategies which included discussion groups, quizzes, gamification of learning, formative assessment, laboratory simulation and associated worksheets were adopted. Formal and informal feedback was shared within the team for wider implementation of good practice.

From the information provided, it was clear how the education ensured feedback from both service users and learners was used and monitored to improve the programmes. As such, we were satisfied that the provider has performed well in this area.

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 education provider seeks to improve their financial sustainability and to ensure they have sufficient resources to invest in, and deliver on, their ambition to be educationally sustainable whilst at the same time having sufficient cash reserves and contingencies to help them withstand impact of any future economic or political pressures.
 - Despite challenges resulting from the pandemic, the provider continued to deliver on strong financial performance through strong income

growth and robust cost-control. The provider has invested more in health-related disciplines as well as additional facilities. This has led to a growth of programmes and learner numbers.

- We recognised that the education provider has continued to identify ways of strengthening the financial sustainability of their provision and has continued to deliver on this. This reassured us that the provider continues to perform well in this area.
- **Partnerships with other organisations –**
 - The education provider engages with a wide range of stakeholder including practice education providers, learners, external examiners, their Patient, Carer and Public Involvement Group (PCPI) and Health Education England. They use existing governance structures around placements, quality management and escalation of issues to be built on and adapted to align with regulatory requirements.
 - Challenges were noted for different programmes. For example, delays in occupational health (OH) assessments for learners on the Occupational Therapy programmes and slow engagement in OH processes by learners. The provider has addressed this by initiating regular monthly meetings with OH providers and a new online submission portal for learners' documentation and appointment processes was introduced.
 - As noted in [Quality theme 1](#), we have clear understanding of how practice-based learning challenges were managed in relation to partnership with paramedic practice providers. Therefore, we are satisfied that the provider continues to manage their partnerships with other organisations effectively.
- **Academic and placement quality –**
 - There are opportunities to improve the provision through the outcome of academic and placement quality assessment. The provider identified challenges with assessing academic quality for the different programmes. For example, lack of effective engagement of learners with feedback opportunities in the Applied Biomedical Science/Healthcare Science/Healthcare Science Practice programme.
 - The provider has now identified ways to increase accessibility to feedback opportunities. For example, by making specific reference to feedback and signposting during personal academic tutor meetings. They have also introduced a Programme level Qualtrics survey. This has led to an improved engagement in feedback both at module and programme level and the feedback has been successfully incorporated into teaching and learning practice.
 - Through quality activity ([Quality theme 2](#)), we have clear understanding of how placement quality was assessed for the different professions and are reassured the provider is effectively using these assessments to drive improvement of their programmes. This demonstrated the provider has performed well in this area.
- **Interprofessional education –**
 - Interprofessional learning (IPL) activities are developed and run through collaboration across several programmes within the Faculty of Health Sciences and Wellbeing. Other faculties are also involved as

appropriate including the Faculty of Education and Society. Some of the overarching learning objective for IPL sessions include:

- understand, value and respect all roles (including your own) within the immediate and wider team, as well as team members' skill sets and knowledge;
 - demonstrate willingness to facilitate others' learning through sharing own knowledge/experience and/or supporting others when learning; and
 - build and maintain meaningful and trusting relationships with team members and other health and social care professionals outside your own professional group
- As with many providers and programmes, maintaining IPL online was a challenge as not all programmes were able to maintain engagement and learners' experience of simulation when delivered online was reduced. However, since recovering from the pandemic, face-to-face IPL activities have restarted and has been well attended by learners.
 - The provider also highlighted several other new IPL opportunities, including planned IPL with midwifery from September 2022 and other opportunities for multidisciplinary team working.
 - We were satisfied that learners on HCPC approved provision at this education provider continue to learn with and from one-another and this has improved service user experience.
- **Service users and carers –**
 - The provider has a Patient, Carer and Public Involvement Group (PCPI) comprising of about 200 participants. There is a PCPI programme which is underpinned by the values within the NHS constitution. PCPI participants are able to provide feedback to learners as part of their involvement activities and learners also feedback via module evaluation forms, direct emails to their module leaders or to the academic lead for the PCPI programme.
 - During the pandemic, the provider developed additional support systems to ensure their PCPI participants were adequately supported. A switch to remote learning and a hybrid model of education delivery enabled accessibility for PCPI involvement. This has led to more people joining the programme from across the country. The provider noted several developments within the PCPI group across the different programmes. For example, the development of new teaching materials such as a recorded focus group (role play) to enhance learning and teaching on the Occupational Therapy provision.
 - The education provider's reflection demonstrated they continue to involve service users and carers in all their HCPC approved provision. Service user involvement is effectively monitored, and the education provider is developing innovative ways to continue to involve their service user and carer group. Therefore, we are satisfied that the education provider is performing well in this area.
- **Equality and diversity –**
 - Learners are required to complete relevant mandatory training on equality, diversity and inclusion (EDI).
 - The education provider has identified areas that need to be developed within their Paramedic provision to ensure equality and diversity

requirements are met in future years. For example, ensuring equality and diversity forms part of standard agenda item for stakeholder engagement; and developing an equality and diversity lead within the programme. The education provider has also recognised under-representation of BAME Registered practitioners in Occupational Therapy and Physiotherapy. Programme teams have reviewed marketing and interview process to encourage applications. Module teaching has been reviewed to ensure equality and diversity was visible throughout and the education provider now intends to share examples of EDI good practice across the school.

- The visitors noted the education provider has recognised areas that require development within their EDI strategy and are actively making efforts to ensure EDI is promoted across all their HCPC provision. This demonstrated the education provider is performing well in this area.
- **Horizon scanning –**
 - The education provider strives to evolve their health provision in line with changing health and social care needs and workforce priorities. This has led to the development of several new programmes and significant investment in staff and facilities.
 - As outlined in [Quality theme 3](#), we sought further information around the development of the “Health Campus” to understand how future growth in learner numbers and resulting capacity of practice-based learning would be managed.
 - We were reassured the plans the education provider has in place to ensure there are adequate resources for teaching and in practice-based learning are effective. Therefore, we are satisfied the education provider is performing well in this area.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Quality theme: Thematic reflection

Findings of the assessment panel:

- **Impact of COVID-19 –**
 - For many of their programmes, the education provider developed and operationalised strategies to maintain delivery of education and training to support learners’ progression and achievement during the pandemic. For example, simulation helped to achieve competencies and placement hours for the different programmes as detailed in [Quality theme 4](#). Staff were enabled to use timetabling format to organise workloads. There were minor modifications to some modules in partnership with learners and external examiner.
 - Through the initial information submitted and engagement with quality activity to seek further clarification where needed, we saw sufficient evidence that demonstrated the education provider has adequately managed the impact of Covid-19.
- **Use of technology: Changing learning, teaching and assessment methods –**

- The education provider noted rapid innovation in technology in teaching and learning has revolutionised programme content creation and delivery and this has led to increased training needs in technology for both staff and learners.
- As noted in the area above, there was also the need to react to the impact of Covid-19 in order to continue to support learners. For example, the education provider used Video Enhanced Observations for placement assessment document submission during the pandemic and poster presentation for their Paramedic programme. As noted earlier, a media room was also created to record a wide range of resources for the Physiotherapy learners and apps such as Padlet and Flipgrid are now used to support learning and formative assessment.
- The innovations introduced by the education provider both to adapt to rapid changes in technology in teaching and learning and in response to Covid-19, as well their continued effort to ensure the changes remain effective demonstrated the education provider has performed well in this area.
- **Apprenticeships –**
 - The education provider noted apprenticeship programmes are co-created with employers and has not had any significant impact to recruitment to their mainstream programmes.
 - The education provider also noted demands of service provision in the workplace and staff pressures, particularly during Covid-19 has led to a challenge in balancing apprentices' learning time on campus with employer requirements to meet service delivery needs in their Healthcare Service Practice programmes. This has now led to the development of a more flexible model of delivery as detailed in [Quality theme 5](#). As such, the education provider is now looking to grow their Healthcare Science apprenticeship provision using the proposed flexible model and develop further apprenticeship programmes.
 - We are satisfied with the information provided and are reassured that the education provider continues to perform well in this area.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Quality theme: Sector body assessment reflection

Findings of the assessment panel:

- **Assessments against the UK Quality Code for Higher Education –**
 - The education provider noted they have not been assessed by the Quality Assurance Agency for Higher Education (QAA) during the review period and therefore did not include any reflection in this area. Information showed the last assessment was carried out in 2015-16 and no feedback or actions were carried over to this performance review period. As nothing was flagged, we took reassurance that the education provider had continued to perform well in this area.
- **Assessment of practice education providers by external bodies –**
 - As outlined in [Quality theme 6](#), the education provider noted they have not had any notable events regarding assessment of their practice

education providers by external bodies. Although we realise the education provider may not have fully understood what this area entails, as we expect practice providers would go through regular assessments by external bodies, which the education provider should be aware of. However, we took assurance from their response to quality activity that their practice education providers continue to be monitored and there are also set guidelines to ensure quality in practice.

- **National Student Survey (NSS) outcomes –**

- The education provider noted overall satisfaction scores have improved each year for their BSc (Hons) Applied Biomedical Science and BSc (Hons) Healthcare Science programmes. Although some individual categories have not yet improved. The education provider also noted a significantly low NSS score for their Paramedic provision. NSS data for the BSc (Hons) Physiotherapy and BSc (Hons) Occupational therapy's first cohort were not yet available as at time of submission.
- To address the issues that resulted in low scores for the Paramedic programme, the education provider noted the programme team have implemented several measures to address learners' concerns. Measures to address issues around assessment and feedback, organisation and management, as well as student voice, have also been introduced. A new member of staff has been appointed to provide oversight of learner feedback collation at programme and school level. This in turn has facilitated consistency between programme teams and sharing good practice.
- Although we recognised the continued decline in the NSS scores meant it remains an area for improvement, we took assurance that the education provider is aware of the situation and continues to seek ways to improve overall student satisfaction on all their programmes.

- **Office for Students monitoring –**

- The education provider noted they met the requirements for initial registration and achieved registered status in July 2018. Since then, they have continued to comply with ongoing conditions and have had no specific conditions of registration imposed.
- We took assurance from this reflection that the education provider continues to perform well in this area.

- **Other professional regulators / professional bodies –**

- For their Applied Biomedical Science/ Healthcare Science/ Healthcare Science Practice provision, the education provider reports annually to the Institute of Biomedical Science on recruitment, achievement, comments and responses to external examiners, changes to programmes, employer liaison, and staffing. Changes are reported to The National School of Healthcare Science through their change notification process. Both organisations have provided additional guidance on programme delivery and assessment during the Covid-19 pandemic, and the education provider noted their programme team fully engaged with this support. There are also active engagements with the Royal College of Occupational Therapists and The Chartered Society of Physiotherapy.

- This demonstrated the education provider has continued to engage with the relevant professional bodies and feedback and actions from engagements continue to inform programme development.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Quality theme: Profession specific reflection

Findings of the assessment panel:

- **Curriculum development –**
 - As outlined in [Quality theme 7](#), the education provider has introduced policies and guidance at programme level to operationalise their Student Success Plan 2020-24 to enhance curriculum development. Details of curriculum development particularly for the Paramedic programme were also provided. Staff development has been crucial in facilitating curriculum development.
 - From the initial submission and quality activity, we understood that there have not been major modifications to the programmes. However, the education provider has consistently invested in technology and software as well as the development of their staff to ensure curriculum development. Therefore, we are reassured the education provider has continued to perform well in this area.
- **Development to reflect changes in professional body guidance –**
 - The education provider submitted a detailed outline of how different programmes have adapted to changes in professional body guidance. As noted under the Sector body assessment, findings and guidance from The National School of Healthcare Science' Practitioner Training Programme Improvement Review in 2020 has fed into accreditation guidance and programme development for the Applied Biomedical Science/ Healthcare Science/ Healthcare Science Practice provision. All other programmes have also continued to review and refocus their curriculum, in line with regulatory and professional body guidance to ensure graduates meet the expectations of the professional and regulatory bodies and be truly fit for purpose.
 - Through the education provider's reflection, we were satisfied that they continue to reflect on and make changes to their programmes in line with professional body guidance. Therefore, we considered the education provider has performed well in this area.
- **Capacity of practice-based learning –**
 - The education provider noted practice-based learning capacity remained a challenge with additional pressures due to the Covid-19 pandemic, for some of their provision including the Biomedical Science and Paramedic programmes. Through quality activity, as outlined in [Quality theme 1](#) and [Quality theme 3](#), we were able to establish how placement capacity issues were addressed.
 - For the Biomedical Science provision, a flexible delivery model based on learner and employer pressures has contributed to a sustainable provision and continued successful outcomes for graduates. Increase and development of more bespoke simulation has supported

Paramedic Science learners in practice competency. The education provider continues to work with new organisations to establish Occupational Therapy placement opportunities. And through University level and personal staff networks, the education provider continues to develop Physiotherapy placement capacity.

- Through reviewing the education provider's initial reflection and their response to quality activity, we were able to gain assurance that the education provider has continued to develop ways of managing capacity of practice-based learning to ensure learners have access to the practice-based learning they need. Therefore, we are satisfied that the education provider has performed well in this area.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Quality theme: Stakeholder feedback and actions

Findings of the assessment panel:

- **Learners –**
 - As outlined in [Quality theme 8](#), the education provider referred to 3-hour blocks of placement to allow timetable scheduling into full days and facilitate the clinical placement day release model on the Applied Biomedical Science provision. However, feedback from learners suggested they have had difficulties in maintaining engagement in some modules. Details outlined in Quality theme 8 shows how the education provider was able to address learners' concerns. Other challenges were identified by learners on other programmes. For example, Paramedic learners reported they did not have sufficient communication with academics whilst on placement. To address this, the education provider structured in weekly sessions (via MS teams) with the clinical link tutor (CLT) to ensure there is a speedier response to learner queries. Information was provided on how learners' feedback have been used on other programmes.
 - It is clear from the initial information submitted and through quality activity that the education provider has continued to incorporate ways of ensuring feedback is collated and actions are taken in response to learners. Therefore, we are satisfied the education provider has performed well in this area.
- **Practice placement educators –**
 - One of the biggest challenges reported by the Biomedical Science learners during the pandemic was that they were unable to access wards and clinical areas to experience patient interactions to complete their training. To address this, academic staff were able to liaise with the National School of Healthcare Science to agree certain flexibilities in regard to evidence requirements and suggest alternatives. For their Paramedic provision, the education provider noted the ability to locate learners and practice educators who are in a moving vehicle and often work outside of standard university hours results in a slight delay of engagement. To address this, the practice education providers and

programme team are now working together to enable “on call managers” provide out of hours support and engagement.

- The information provided showed the education provider actively engages with their practice education providers to ensure feedback from practice educators is collected and actioned as necessary. We were therefore satisfied the education provider continues to perform well in this area.
- **External examiners –**
 - The education provider noted that external examiners have provided useful and positive feedback on their programmes. For the Applied Biomedical Science/Healthcare Science/Healthcare Science Practice and Paramedic programmes, external examiner feedback has led to robust moderation processes that would ensure parity of marking across modules. The external examiners have also highlighted the increasing use of digital technology and improved utilisation of the virtual learning environment.
 - Through external examiner feedback, the Bioscience team has embraced technological innovations and learner feedback has been very positive on the use of interventions such as Padlet and Turning Point.
 - We are satisfied that through external examiner feedback and actions, the education provider continues to embed innovations in teaching and learning practice. Therefore, we are satisfied that the education provider has performed well in this area.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Data and reflections

Findings of the assessment panel: The visitors noted data has been used carefully with many areas of positive engagement demonstrated. There is evidence that the education provider has effectively reflected on the different data points and continue to use data to drive improvement across their provision.

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 2026-27 academic year

Reason for this recommendation: We are making this recommendation as data and intelligence shows that the education provider is performing well across many areas. In addition, there are no significant issues identified from the review which the education provider would need to deal with before a five-year review period.

Appendix 1 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
BSc (Hons) Applied Biomedical Science	FT (Full time)	Biomedical scientist			01/09/2006
BSc (Hons) Healthcare Science (Blood Science)	FT (Full time)	Biomedical scientist			01/09/2011
BSc (Hons) Healthcare Science (Cellular Science)	FT (Full time)	Biomedical scientist			01/09/2011
BSc (Hons) Healthcare Science (Genetic Science)	FT (Full time)	Biomedical scientist			01/09/2011
BSc (Hons) Healthcare Science (Infection Science)	FT (Full time)	Biomedical scientist			01/09/2011
BSc (Hons) Healthcare Science Practice (Blood Science)	FT (Full time)	Biomedical scientist			01/09/2018
BSc (Hons) Healthcare Science Practice (Cellular Science)	FT (Full time)	Biomedical scientist			01/09/2018
BSc (Hons) Healthcare Science Practice (Genetic Science)	FT (Full time)	Biomedical scientist			01/09/2018
BSc (Hons) Healthcare Science Practice (Infection Science)	FT (Full time)	Biomedical scientist			01/09/2018
BSc (Hons) in Occupational Therapy	FT (Full time)	Occupational therapist			01/09/2019
BSc (Hons) in Paramedic Science and Out of Hospital Care	FT (Full time)	Paramedic			01/04/2018
BSc (Hons) in Physiotherapy	FT (Full time)	Physiotherapist			01/09/2019
BSc (Hons) Occupational Therapy (Accelerated)	FTA (Full time accelerated)	Occupational therapist			01/09/2022

BSc (Hons) Occupational Therapy (Apprenticeship)	WBL (Work based learning)	Occupational therapist			01/09/2022
Diploma in Higher Education Paramedic Practice	FT (Full time)	Paramedic			01/04/2016
Enhanced Prescribing for health professionals	PT (Part time)			Independent prescribing	01/06/2020
Prescribing for Health Professionals	PT (Part time)			Independent prescribing	01/07/2020