

### Visitors' report

Name of education provider	University of Leicester
Programme name	BSc (Hons) Operating Department Practice
Mode of delivery	Full time
Relevant part of the HCPC Register	Operating department practitioner
Date of visit	19 – 20 April 2016

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#### Executive summary

The Health and Care Professions Council (HCPC) approve educational programmes in the UK which health and care professionals must complete before they can apply to be registered with us. We are a statutory regulator and our main aim is to protect the public. We currently regulate 16 professions. All of these professions have at least one professional title which is protected by law. This means that anyone using the title 'operating department practitioner' must be registered with us. The HCPC keep a register of health and care professionals who meet our standards for their training, professional skills, behaviour and health.

The visitors' report which follows outlines the recommended outcome made by the visitors on the approval of the programme. This recommended outcome was accepted by the Education and Training Committee (Committee) on 9 June 2016. At the Committee meeting on 7 July 2016, the programme was approved. This means that the education provider has met the conditions outlined in this report and that the programme meets our standards of education and training (SETs) and ensures that those who complete it meet our standards of proficiency (SOPs) for their part of the Register. The programme is now granted open ended approval, subject to satisfactory monitoring.

#### Introduction

The HCPC visited the programme at the education provider as it was a new programme which was seeking HCPC approval for the first time. This visit assessed the programme against the standards of education and training (SETs) and considered whether those who complete the programme meet the standards of proficiency (SOPs) for their part of the Register.

This visit was an HCPC only visit. The education provider did not validate or review the programme at the visit and the professional body did not consider their accreditation of the programme. The education provider supplied an independent chair and secretary for the visit.

#### Visit details

Name and role of HCPC visitors	Tony Scripps (Operating department practitioner)	
	Andrew Steel (Operating department practitioner)	
	Susanne Roff (Lay visitor)	
HCPC executive officer (in attendance)	Tracey Samuel-Smith	
Proposed student numbers	30 per cohort, 2 cohorts per year	
Proposed start date of programme approval	September 2016	
Chair	Robert Norman (University of Leicester)	
Secretary	Day 1 – David Parker (University of Leicester)	
	Day 2 – Beverley Island (University of Leicester)	

#### Sources of evidence

Prior to the visit the HCPC reviewed the documentation detailed below, sent by the education provider:

	Yes	No	N/A
Programme specification			
Descriptions of the modules	$\boxtimes$		
Mapping document providing evidence of how the education provider has met the SETs			
Mapping document providing evidence of how the education provider has met the SOPs			
Practice placement handbook			
Student handbook	$\boxtimes$		
Curriculum vitae for relevant staff			
External examiners' reports from the last two years	$\boxtimes$		
Internal programme review reports	$\boxtimes$		
Mentor database and handbook			
E-portfolio examples			
Service user and carer involvement			

The visitors reviewed the external examiners' and internal programme review reports from the DipHE in Operating Department Practice programme as the programme seeking approval is new.

During the visit the HCPC saw the following groups or facilities:

	Yes	No	N/A
Senior managers of the education provider with responsibility for resources for the programme			
Programme team			
Placements providers and educators / mentors			
Students	$\boxtimes$		
Service users and carers			
Learning resources	$\boxtimes$		
Specialist teaching accommodation (eg specialist laboratories and teaching rooms)			

The HCPC met with students from the DipHE in Operating Department Practice as the programme seeking approval currently does not have any students enrolled on it.

#### Recommended outcome

To recommend a programme for approval, the visitors must be satisfied that the programme meets all of the standards of education and training (SETs) and that those who complete the programme meet our standards of proficiency (SOPs) for the relevant part of the Register.

The visitors agreed to recommend to the Education and Training Committee that a number of conditions are set on the programme, all of which must be met before the programme can be approved.

The visitors agreed that 48 of the SETs have been met and that conditions should be set on the remaining ten SETs.

Conditions are requirements that the education provider must meet before the programme can be approved. Conditions are set when certain standards of education and training have not been met or there is insufficient evidence of the standard being met.

The visitors have also made one recommendation for the programme.

Recommendations are observations on the programme or education provider which do not need to be met before the programme can be approved. Recommendations are made to encourage further enhancements to the programme, normally when it is felt that the particular standard of education and training has been met at, or just above the threshold level.

#### **Conditions**

2.1 The admissions procedures must give both the applicant and the education provider the information they require to make an informed choice about whether to take up or make an offer of a place on a programme.

**Condition:** The education provider must demonstrate how the advertising materials provide applicants with the information they require to make an informed choice about whether to take up a place on the programme.

**Reason:** From a review of the programme documentation the visitors noted the admissions procedures were incorporated in the student handbook which, the programme team confirmed, was not available to applicants. While the visitors received a promotional brochure, they were informed the programme was currently unable to advertise on the university website due to an internal policy restricting them from doing so until HCPC approval had been granted. Therefore only limited information was available to applicants on the website at the time of the visit. The visitors were unclear how the programme team disseminated information to all potential applicants around the design of the programme. Particularly, the visitors noted that potential applicants would need to know about the 48 week university year and the 65 / 35 per cent clinical placement / academic split. In addition they were unclear how applicants were informed about Disclosure and Barring Service (DBS) checks, and entry requirements relating to health, English language and accreditation of prior (experiential) learning. To ensure all applicants understand the commitment and entry requirements of the programme so they can make an informed choice about whether to take up a place on the programme, the visitors require further evidence.

### 2.3 The admissions procedures must apply selection and entry criteria, including criminal convictions checks.

**Condition:** The education provider must demonstrate who pays for Disclosure and Barring Service (BDS) checks and how this is communicated to applicants.

**Reason:** From a review of the programme documentation the visitors noted the admissions procedures were incorporated in the student handbook which, the programme team confirmed, was not available to applicants. This included information about the process to undertake enhanced DBS checks prior to admission to the programme and the process to follow if an issue was raised. From their review of the documentation, the visitors were unable to determine who paid the costs associated with an enhanced check. The visitors therefore require further evidence which demonstrates who covers the costs associated with an enhanced DBS check and how this is communicated to applicants.

2.5 The admissions procedures must apply selection and entry criteria, including appropriate academic and / or professional entry standards.

**Condition:** The education provider must demonstrate how the admissions procedures apply appropriate academic entry standards.

**Reason:** From a review of the programme documentation the visitors noted the admissions procedures were incorporated in the student handbook which, the programme team confirmed, was not available to applicants. This included information

about the academic and professional entry standards in place. From the promotional brochure the visitors noted the entry requirements of a BBC / 280 UCAS points and possible alternate entry routes for applicants with equivalent qualifications. At the visit, the visitors were provided with a copy of the DipHE in Operating Department Practice application form which they were informed contained all the entry requirements for the programme seeking approval. From this, the visitors noted that applicants were required to have five GSCEs at Grade C or above, including mathematics, English language and science. Due to inconsistencies in the documentation and limited information available to applicants, the visitors were unclear as to what the academic entry requirements were for all applicants. Therefore to demonstrate this standard is met, the visitors require additional evidence.

## 2.6 The admissions procedures must apply selection and entry criteria, including accreditation of prior (experiential) learning and other inclusion mechanisms.

**Condition:** The education provider must demonstrate the accreditation of prior (experiential) learning mechanisms applicable to the programme.

**Reason:** From a review of the programme documentation the visitors noted the admissions procedures were incorporated in the student handbook which, the programme team confirmed, was not available to applicants. This included detailed information about the accreditation of prior (experiential) learning (AP(E)L) policy. In the minutes of the programme approval panel from December 2014, it was specifically stated there was no AP(E)L for any part of this programme and the programme specification makes no mention of an AP(E)L policy. During discussions with the programme team it was confirmed that, on a case by case basis, AP(E)L would be considered using the process in the handbook; though due to the design of the programme, it was difficult to offer AP(E)L to individuals. Due to inconsistencies in the evidence provided, the visitors were unsure of the policy for the programme. To be sure of the AP(E)L policy for the programme the visitors require additional evidence which demonstrates the mechanisms in place.

### 3.8 The resources to support student learning in all settings must be effectively used.

**Condition:** The programme team must revisit the programme documentation to ensure the terminology in use is correct and reflective of the current landscape of statutory regulation and the HCPC.

**Reason:** Within the programme documentation, the visitors noted discrepancies in terminology in relation to HCPC regulation. For example, page 5 of the promotional brochure states "You will then be fit to practise as an ODP upon graduation and eligible to apply for registration with the Health and Care Professions Council". Similarly the Course handbook states on page 4 "The aim of this programme is to provide the student with the educational opportunities to gain the BSc ODP Award and as such be fit to practise as an ODP upon qualification". When students successfully complete an approved programme, they become fit for award by the education provider. They become fit to practise when they have applied for and gained registration with the HCPC.

Also in the Course handbook page 72 states "The BSc (Hons) Operating Department Practice is the nationally recognised qualification for eligibility to register as an

Operating Department Practitioner as approved by the HCPC". References to HCPC registration should state 'eligibility to apply' so it is clear there is a supplementary process students need to go through before they are gain registration. In addition, SET 1 outlines the normal level of entry for operating department practice as a Diploma of Higher Education (DipHE). While programmes can be delivered above this, the DipHE is the nationally recognised level. The visitors therefore require documentation to be revised to remove all instances of incorrect terminology and clarify the role of HCPC regulation. In this way the visitors can be sure that the documentary resources available to support students' learning are being effectively used and that this standard is met.

### 3.9 The resources to support student learning in all settings must effectively support the required learning and teaching activities of the programme.

**Condition:** The education provider must demonstrate how the resources to support student learning effectively support the required learning and teaching activities of the programme.

Reason: At the visit, the visitors were shown the clinical skills facilities for the programme and observed the hand washing facilities. The programme team highlighted that the taps were incorrect as separate handles for hot and cold water had been installed. In operating theatres, the visitors' experience is of single handled taps so individuals can adjust and turn off the water with one elbow, thus meaning they can wash their hands in a sterile manner. In the first module (OP1001), the visitors noted the lecture "Infection control – universal principles" and in the practice placement associated with this module, the competency "Recognise the risks associated with infection in the Operating Department and describe effective control strategies". With the current set up of the taps, the visitors were unclear how students learnt how to use single handled taps before going out to their practice placement. Therefore to ensure the resources to support student learning effectively support the teaching and learning activities, the visitors require additional evidence to demonstrate how this standard is met.

# 3.10 The learning resources, including IT facilities, must be appropriate to the curriculum and must be readily available to students and staff.

**Condition:** The education provider must demonstrate how the learning resources are appropriate to the curriculum.

Reason: At the visit, the visitors were shown the clinical skills facilities for the programme and observed the hand washing facilities. The programme team highlighted that the taps were incorrect as separate handles for hot and cold water had been installed. In operating theatres, the visitor's experience is of single handled taps so individuals can adjust and turn off the water with one elbow, thus meaning they can wash their hands in a sterile manner. In the first module (OP1001), the visitors noted the lecture "Infection control – universal principals" and in the practice placement associated with this module, the competency "Recognise the risks associated with infection in the Operating Department and describe effective control strategies". With the current set up of the taps, the visitors were unclear how students learnt how to use single handled taps before going out to their practice placement. Therefore to ensure the learning resources are appropriate to the curriculum and are readily available to students, the visitors require additional evidence to demonstrate how this standard is met.

# 5.5 The placement providers must have equality and diversity policies in relation to students, together with an indication of how these will be implemented and monitored.

**Condition:** The education provider must demonstrate how they ensure practice placement providers have equality and diversity policies in place, together with an indication of how these are implemented and monitored.

Reason: From practice placement educators, the visitors learnt that students were treated as a normal member of staff and, as with everyone working in the National Health Service, all relevant policies and procedures applied to them. This included equality and diversity policies. The programme team informed the visitors they were in discussions with independent hospitals and other sites to expand the number and range of placements available. From the Practice placement audit and Placement provider information form the visitors could not determine how the programme team checked whether equality and diversity policies were in place. To ensure students are told about the equality and diversity policies at each practice placement site, whether it is in the NHS or not, and what they should do if they felt they had been discriminated against, the education provider must ensure these are in place. Therefore further evidence is required to demonstrate how the education provider ensures equality and diversity policies are in place at all placements and how these are implemented and monitored.

## 5.6 There must be an adequate number of appropriately qualified and experienced staff at the practice placement setting.

**Condition:** The education provider must demonstrate how they ensure there is a sufficient number of appropriately qualified and experienced staff in place at practice placements to determine student competences have been met.

Reason: Prior to the visit, the visitors were provided with a copy of the mentor database. At the visit it became clear this was an abbreviated version of the information held by the programme team about their Associate and Lead mentors. It is the Lead mentor who determines whether a student has achieved a competency; the Associate mentor supports the student in the clinical environment and provides formative feedback only. The programme team confirmed that Lead mentors are required to hold the Nursing and Midwifery (NMC) Level 6 mentoring qualification as well as attend initial training provided by the programme team. The visitors met with students currently on the DipHE in Operating Department Practice programme and heard of some difficulties finding a Lead mentor when needed. From the documentation, the visitors were unable to identify who had acquired the Level 6 mentoring qualification and therefore how many Lead mentors were in place to determine whether students had met the competences. To ensure there is an adequate number of appropriately qualified and experienced staff to do this, the visitors require additional evidence.

## 5.8 Practice placement educators must undertake appropriate practice placement educator training.

**Condition:** The education provider must demonstrate how they ensure Lead mentors attend regular refresher training.

**Reason:** Prior to the visit, the visitors were provided with a copy of the mentor database. At the visit it became clear this was an abbreviated version of the information

held by the programme team about their Associate and Lead mentors. From discussions the visitors learnt that Lead mentors are required to attend initial programme specific training and are invited to attend regular refresher training through activities such as workshops or updates in the practice placement setting. The visitors were unclear how the programme team ensured all Lead mentors attended refresher training on a regular basis and therefore how changes, such as those associated with the change from DipHE to BSc (Hons), would be communicated. To demonstrate this standard is met, the visitors require additional evidence to show Lead mentors undertake regular refresher training.

#### Recommendations

### 3.8 The resources to support student learning in all settings must be effectively used.

**Recommendation:** The education provider should continue discussions with practice placement providers to allow students to use their Pebble pad at all sites.

Reason: From discussions with students, the visitors learnt about differences in the Wi-Fi access at placement sites due to Trust policy. Some students were unable to access Wi-Fi due to the firewall in place, or only in a very specific spot away from their normal working location. As all students had been issued with a Pebble pad to complete their electronic portfolio, there were some difficulties in being able to update information at the placement site. From the programme team the visitors learnt that an application for phones had been developed so that students could record their observations / reflections more easily and upload them to the Pebble pad at a later time. The visitors were therefore satisfied there was an alternative in place, however, to enhance the effective use of the electronic portfolio, they recommend that the programme team continue discussions with the practice placement providers about expanding Wi-Fi capability to their students.

Tony Scripps Andrew Steel Susanne Roff