Approval process report

Cardiff Metropolitan University, Biomedical Science, 2023-24

Executive Summary

This is a report of the process to approve the Biomedical Science programmes at Cardiff Metropolitan University. This report captures the process we have undertaken to assess the institution and programme against our standards, to ensure those who complete the proposed programme are fit to practice.

We have:
- Reviewed the institution against our institution level standards and found our standards are met in this area.
- Reviewed the programmes against our programme level standards and found our standards are met in this area.
- Recommended all standards are met, and that the programme(s) should be approved.

Through this assessment, we have noted:
- The programme meets all the relevant HCPC education standards and therefore should be approved.

The programme meets all the relevant HCPC education standards and therefore is approved. The education provider's observations were considered in making this decision.

Previous consideration	Not applicable. This approval process was not referred from another process.
Decision	The Education and Training Committee (Panel) is asked to decide: • whether the programme(s) is approved.
Next steps	Outline next steps / future case work with the provider: • The education provider is currently engaging with the performance review process for 2018-2023.

Included within this report

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 approval process undertaken by the HCPC to ensure that the programme detailed in this report meets our education standards. The report details the process itself, evidence considered, outcomes and recommendations made regarding the programme 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 approval process

Institutions and programmes must be approved by us before they can run. The approval process is formed of two stages:
- Stage 1 – we take assurance that institution level standards are met by the institution delivering the proposed programme(s)
- Stage 2 – we assess to be assured that programme level standards are met by each proposed programme

Through the approval process, we take assurance in a bespoke and flexible way, meaning that we will assess whether providers and programmes meet standards based on what we see, rather than by a one size fits all approach. Our standards are split along institution and programme level lines, and we take assurance at the provider level wherever possible.

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

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 this review:

Emmanuel Babafemi	Lead visitor, Biomedical Scientist
Garrett Kennedy	Lead visitor, Practitioner psychologist
Louise Winterburn	Education Quality Officer

Section 2: Institution-level assessment

The education provider context

The education provider currently delivers 13 HCPC-approved programmes across 5 professions. It is a Higher Education provider and has been running HCPC approved programmes since 1992.

The education provider engaged with the major change process in the legacy model of quality assurance 2020 to report changes to the Pg Dip Dietetics, full time, BSc (Hons) Human Nutrition and Dietetics, full time, and MSc Dietetics, full time programmes. The education provider made changes to modules on all programmes, to align them with the institution's 20 and 40 credit model. Learning outcomes were being repackaged across the modules. There was a change to how interprofessional education was delivered. There was also a small change to the admissions criteria on the postgraduate provision only, to reflect delivery for the education provider's undergraduate Nutrition programme, which appears to be a feeder programme for the approved PG Dip Dietetics programme. We were satisfied that there was sufficient evidence that the standards continued to be met, and the Education and Training Committee agreed the programme remains approved in 2020. The

education provider engaged with the annual monitoring assessment process in the legacy model of quality assurance in 2020.

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	☒Undergraduate	☐Postgraduate	2013
	Chiropodist / podiatrist	☒Undergraduate	☐Postgraduate	2011
	Dietitian	☒Undergraduate	☒Postgraduate	1992
	Practitioner psychologist	☐Undergraduate	☒Postgraduate	2014
	Speech and language therapist	☒Undergraduate	☐Postgraduate	2011

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.

This data is for existing provision at the institution, and does not include the proposed programme(s).

Data Point	Bench-mark	Value	Date	Commentary
Total intended learner numbers compared to total enrolment numbers	229	261	2024	The benchmark figure is data we have captured from previous interactions with the education provider, such as through initial programme approval, and / or through previous performance review assessments. Resources available for the benchmark number of learners was assessed and

			accepted through these processes. The value figure is the benchmark figure, plus the number of learners the provider is proposing through the new provision. The enrolled number of learners is higher than the approved intended numbers on record, however this also includes the figures for the new programme.
Learners – Aggregation of percentage not continuing	3%	3%	2020-21	This data was sourced a data delivery. This means the data is a bespoke HESA data return, filtered based on HCPC-related subjects. The data point is equal to the benchmark, which suggests the provider's performance in this area is in line with sector norms. When compared to the previous year's data point, the education provider's performance has been maintained.
Graduates – Aggregation of percentage in employment / further study	93%	96%	2020-21	This data was sourced a data delivery. This means the data is a bespoke HESA data return, filtered based on HCPC-related subjects. The data point is above the benchmark, which suggests the provider is performing above sector norms. When compared to the previous year's data point, the education provider's performance has improved by 9%

Learner Satisfaction	77.8%	73.4%	2023	This data was sourced the subject level. This means the data is for HCPC-related subjects. The data point is below the benchmark, which suggests the provider is performing below sector norms. When compared to the previous year's data point, the education provider's performance has dropped by 4%.
HCPC performance review cycle length				The education provider is currently engaging in the performance review process 2018-2023.

The route through stage 1

Institutions which run HCPC-approved provision have previously demonstrated that they meet institution-level standards. When an existing institution proposes a new programme, we undertake an internal review of whether we need to undertake a full partner-led review against our institution level standards, or whether we can take assurance that the proposed programme(s) aligns with existing provision.

As part of the request to approve the proposed programme(s), the education provider supplied information to show alignment in the following areas.

Admissions

Findings on alignment with existing provision:
- **Information for applicants** –
  - Information related to admissions requirements and processes are available on the education provider's website under 'Advice for Applicants' as well as on their programme pages.
  - The education provider refers to their 'Criteria for the Admission of Students onto Taught Programmes' document which sets out their admissions policy and provides information on contextual admissions and offers.
  - The education provider states that they follow the Quality Assurance Agency (QAA) code of practice on recruitment and admissions procedures together with guidance set out by Universities and Colleges Admissions Service (UCAS).
  - These policies are set at institutional level and will apply to all programmes. This aligns with our understanding of how the education provider operates.

- **Assessing English language, character, and health** –
  - The education provider's requirements for English Language proficiency are included in the 'Admissions Policy' document and are available online, as well as via individual programme pages.
  - Applicants are required to provide evidence of an approved English Language qualification as part of the criteria for admission. Non-UK applicants are required to provide evidence of sufficient proficiency in English Language before being accepted onto the programme.
  - The education provider refers to their 'Admissions Policy and Occupational Health Assessments' webpages which contain information for applicants on assessing character and health during the interview and selection stages.
  - These policies are set at institutional level and will apply to all programmes.
  - This aligns with our understanding of how the education provider operates.
- **Prior learning and experience (AP(E)L)** –
  - The education provider's approach to Recognised Prior Learning (RPL) is set out in the 'Procedure for the Administration of Recognised Prior Learning' document.
  - The education provider acknowledges that previous study, training, and experience gained via work or volunteering, may be counted towards an applicants' programme of study.
  - These policies are set at institutional level and will apply to all programmes.
  - This aligns with our understanding of how the education provider operates.
- **Equality, diversity and inclusion** –
  - The education provider's approach to equality, diversity and inclusion is set out in their 'Admissions Policy' and included in their 'Equality, Diversity and Inclusion Policy'. They state they are committed to ensuring they provide a working and learning environment which is free from harassment, intimidation, or victimisation. They recognise that discrimination is unacceptable and are committed to equality of opportunity for all staff and learners.
  - All prospective learners are made offers of a place on programmes in accordance with the 'Equality, Diversity and Inclusion Policy' and are therefore not discriminatory beyond the Selection Criteria determined for each programme.
  - These policies are set at institutional level and will apply to all programmes.
  - This aligns with our understanding of how the education provider operates.

Non-alignment requiring further assessment: None.

<u>Management and governance</u>

Findings on alignment with existing provision:

- **Ability to deliver provision to expected threshold level of entry to the Register[1]** –
  - The education provider refers to their 'Academic Handbook-Section 14' and their 'Awards of Cardiff Metropolitan University' documents in support of this area.
  - They have been delivering BSc and MSc programmes since 1992. They have existing BSc programmes in this subject area. They are a well-established education provider with undergraduate and post-registration programmes in this curriculum area.
  - This suggests there is a large amount of institutional experience and expertise available to be confident in their ability to deliver the proposed new programme to expected threshold level.
- **Sustainability of provision** –
  - The education provider refers to several policies and procedures in support of this area, including their 'Guidelines for submitting a new academic development proposal for Portfolio Development Committee approval'. They also have a 'Procedure for the Validation of Programmes' document.
  - There is a three-stage approach to the development of new provisions, including the initial consideration of the proposal by the Portfolio Development Committee. This stage ensures the proposed programme is aligned with the institutions' strategic plans and checks the sustainability of the proposal. Academic scrutiny is the next stage to ensure alignment with the 'University Curriculum Principles'. Finally, all programmes are reviewed every five years with a rolling Programme Enhancement Planning (PEP) cycle.
  - The Portfolio Development Group sits within the School of Sport and Health Sciences. They review portfolios to support sustainability and manage staff resourcing. This is supported by an annual review of staff:student ratios per programme which is submitted to the Directorate as part of its staff planning review. These processes are in place to underpin long-term viability of provision and to support the learner experience.
  - This process has been undertaken for the new programme and has been deemed by the education provider as an important inclusion to the current portfolio. The arrangements for maintaining programme sustainability are appropriate. We are confident of this based on the above information.
- **Effective programme delivery** –
  - As explained in the approval request from, all programmes undergo validation, periodic review, and ongoing enhancement through the Programme Enhancement Planning (PEP) cycle. The purpose of this is to ensure programmes are aligned to the 'University's Strategic Plan and Curriculum Principles'. This ensures appropriate levels of quality and standards, and to take account of external benchmark statements as necessary. The PEP process is designed for constant reflection, evaluation, and planning.

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[1] This is focused on ensuring providers are able to deliver qualifications at or equivalent to the level(s) in SET 1, as required for the profession(s) proposed

- o The education provider stated the annual monitoring applies to all programmes they deliver for which a formal, recognised qualification is awarded. It is carried out across the academic year to identify and address any issues, putting into place any action as necessary. In this way, the quality of teaching and learning activities, curriculum, and the learner experience is reflected upon via a quality enhancement approach.
  - o Programme Directors are in place to coordinate, manage and reflect on programmes. They ensure that programmes meet the needs of disciplines and practice areas.
  - o These policies and procedures are set at institutional level and will apply to all programmes.
  - o This aligns with our understanding of how the education provider operates.
- **Effective staff management and development** –
  - o The education provider stated its 'People Strategy 2023-2030' sets out its vision for supporting a high-performance culture to enable learners to engage in outstanding learning, teaching, and research experiences. The document also contains procedures for Academic Staff and Promotion, Induction, Performance Review, Managing Performance, and Workload Allocation, among other policies.
  - o The People Strategy and Organisational Development team offer a range of compulsory and optional development sessions for academic staff. These include bite-size sessions, short courses, e-learning sessions, and a mentoring network.
  - o The education provider has developed a programme for staff called, 'Manage @Met Programme'. This programme contains twelve essential and two optional modules required for all staff are line manager. This aims to enhance capability and consistency in people management across the institution.
  - o New staff are supported by a compulsory academic induction where they can engage in scheduled workshops and seek support from existing team members.
  - o There are no staffing changes required for the proposed new programme. All staff delivering the new provision are existing members of staff, utilising the existing management and development structures.
  - o This aligns with our understanding of how the education provider operates.
- **Partnerships, which are managed at the institution level** –
  - o The education provider noted several existing policies and procedures in support of this area which are maintained at institution level. These include, 'Policy Statement on Collaborative Provision', and 'Guidelines for Work-based Placement Learning' documents.
  - o The Academic Handbook contains information on minimum standards for work-based and placement learning at institutional level.
  - o The Academic Quality and Standards Committee (AQSC) oversee the outcomes of external scrutiny of accredited provision by Professional and Statutory Reporting Bodies (PSRB). This is to ensure the

education provider continues to operate in line with PSRB guidance and requirements.

- o We understand from the information provided that all institution wide policies will apply in the same way to the new provision.

Non-alignment requiring further assessment: None.

Quality, monitoring, and evaluation

Findings on alignment with existing provision:
- **Academic quality** –
    - o The education provider reported that there are frameworks and processes covering academic quality which are set at institution level. These include 'Academic Board', 'Academic Standards and Quality Committee', 'Quality Assurance and Standards Overview and Policy Policies for Programme Validation', and 'Periodic Review and Annual Monitoring'.
    - o The Academic Board is responsible for ensuring the standards and quality of all provision leading to the award of credit. The Academic Standards and Quality Committee oversees the academic standards of awards and ensures quality of the learner experience.
    - o Appropriately qualified external examiners are appointed to ensure programme assessment design is appropriate and to confirm assessment criteria and marking schemes are at the right level. This ensures assessment processes are fair, robust, and thorough.
    - o We understand from the information provided that all institution wide policies and procedures will apply in the same way to the new provision.
- **Practice quality, including the establishment of safe and supporting practice learning environments** –
    - o The education provider has several policies and procedures in place to ensure the quality of practice and a safe and supportive learning environment. Some of these include a 'Placements Toolkit,' local level agreements, and the' All-Wales Healthcare Student PACT'. This information is included in the approval request form.
    - o The education provider participates in regional collaborative education consortium meetings and works together with the Commissioner's Head of Placement Improvement to develop innovative placement opportunities.
    - o The education provider has an in-house placement clinic/Allied Clinical Health Hub. This enables learning to be quality assured and integrates with the simulated learning environment. This also ensures opportunities for interprofessional education.
    - o These arrangements are aligned with existing quality practice at the education provider which are being considered through 2023-2024 performance review process.
- **Learner involvement** –
    - o The 'Student Participation in Quality Processes Policy' and the 'Student Charter' document sets out the education provider's approach to its

partnership with learners. They work with the Students' Union to build an effective, independent, and democratic system of learner representation. Learners are recognised as both partners and experts in the learning process.

- o Learners across all levels, including those on distance learning programmes, are represented at Programme Committee. Representatives are trained by the Students' Union on how to raise any issues or concerns, and to provide feedback. This is further supported by School Teaching and Learning Committee which also includes learner representatives, and a School Staff Student Liaison Committee.
- o These policies and procedures are set at institution level and will apply to the new provision.

- **Service user and carer involvement** –
  - o The education provider stated that service user and carer involvement is embedded within programmes and is aligned with individual programme needs. This is due to specific challenges associated with engaging service users and carers from some professions e.g. forensic psychology.
  - o Service users and carers are involved in the content and support for teaching materials, educational strategies, oversight of programme delivery, student recruitment and engagement.
  - o The education provider is developing an institutional/school-based policy to support the establishment of cross-provision service user and carer involvement groups.
  - o The education provider stated that research hubs and centres have well established patient and public involvement groups (PPI). The good practice identified within these groups is being used to inform the new School-level policy and guidance.
  - o These policies and procedures are set at institution level and will apply to the new provision.

Non-alignment requiring further assessment: None.

Learners

Findings on alignment with existing provision:
- **Support** –
  - o The education provider notes that learners on the new programme will have access to all the usual and established pathways for support. These include access to Wellbeing Services, financial support, academic skills, and Inclusive Learning Officers.
  - o A system of online triage is used to allow learners to access support at any time and includes automated responses in terms of next steps, timescales and what to expect.
  - o The education provider operates a 'Cause for Concern' referral process whereby staff or learners can flag any emergency concerns about wellbeing. This is followed up within an hour of reporting by the Wellbeing Team.
  - o These policies are aligned with the existing arrangements at the education provider and apply to all programmes.

- **Ongoing suitability** –
  - There are several institution wide policies which the education provider notes are in place to ensure ongoing suitability of the new programme. This ranges from academic misconduct to concerns regarding ability to study or suitability to practice. They are included in the 'Academic Misconduct Procedure' and 'Student Disciplinary Procedure' documents.
  - Concerns regarding plagiarism or collusion are investigated through established Misconduct Procedures. The programme team or placement partners may use the Fitness to Study procedure where there are concerns regarding learners' attitudes or behaviour both on and off campus.
  - These policies are aligned with the existing arrangements at the education provider and apply to all programmes.
- **Learning with and from other learners and professionals (IPL/E)** –
  - The education provider's Interprofessional Education Steering Group operates institution wide and feeds into the School Learning and Teaching Committee. The Committee is developing formal procedures for simulation activities and service user engagement.
  - The education provider is a member of the Centre for Advancement of Interprofessional Practice (CAIPE) and engages with forums, developmental activities, and international conferences.
  - Whilst the on-campus provision of interprofessional learning will not apply to the new provision, opportunities will be facilitated in online forums and within the learners existing workplace. These opportunities are already in place for the full-time programme and as such will be adapted to meet the needs of the part-time learners.
- **Equality, diversity and inclusion**
  - The education provider has various policies including 'Equality, Diversity and Inclusion' and a 'Strategic Equality Plan 202-2024' which are institution wide.
  - The 'Curriculum Principles' document sets out the education provider's approach to equality, diversity, and inclusion within its curriculum development. This ensures the curriculum is diverse, inclusive, and recognises a wide range of diverse voices and different perspectives.
  - These policies are aligned with the existing arrangements at the education provider and apply to all programmes.

Non-alignment requiring further assessment: None.

Assessment

Findings on alignment with existing provision:
- **Objectivity** –
  - Objectivity of assessment is ensured through the education provider's 'Assessment and Feedback Policy. This policy, which was designed as a key document and informed by the UK Quality Code for Higher Education, enables a consistent and high-quality student-centred approach to assessment and feedback.

- o The policy underpins the Regulatory Framework and is in line with the commitments of the Student Charter.
  - o Regulations governing marking and moderation are available to staff and learners in the 'Academic Handbook' and ensure that marking is fair, consistent, and transparent.
  - o These policies are aligned with the existing arrangements at the education provider and apply to all programmes.
- **Progression and achievement** –
  - o The education provider's regulations for learner progression and achievement are set out in its 'Academic Regulations Handbook' and apply to all programmes.
  - o There reported that where bespoke regulations are required, these are set out in the programme specification and communicated to learners through programme and module handbooks.
  - o Where mandatory levels of attendance are required, this is communicated to learners via programme handbooks and discussed during open days. This is to ensure all applicants are aware of any specific requirements from the outset.
  - o These policies are aligned with the existing arrangements at the education provider and apply to all programmes.
- **Appeals** –
  - o The appeal and complaints procedures are set out in the 'Academic Handbook' and apply to all learners. The procedures are mapped to Quality Assurance Agency (QAA) and Office of the Independent Adjudicator (OIA) best practice and monitored via the Academic Quality and Standards Committee and the Academic Board.
  - o These policies are aligned with the existing arrangements at the education provider and apply to all programmes.

Non-alignment requiring further assessment: None.

Outcomes from stage 1

We decided to progress to stage 2 of the process without further review through stage 1, due to the clear alignment of the new provision within existing institutional structures, as noted through the previous section.

Education and training delivered by this institution is underpinned by the provision of the following key facilities:
- The programme already has a person with overall responsibility in place and a team of existing permanent academic staff. Existing staff who deliver on the biomedical sciences programmes have HCPC registration as biomedical scientists.
- Specialist laboratory and teaching space is already in place.
- Staffing resources follow the education provider's employment pattern and will be in place at the start of the programme. All other resources are in place or planned for purchase.

Section 3: Programme-level assessment

Programmes considered through this assessment

Programme name	Mode of study	Profession (including modality) / entitlement	Proposed learner number, and frequency	Proposed start date
BSc (Hons) Healthcare Science (Blood Sciences) (Part-time)	DL (Distance Learning)	Biomedical Science	8 learners, 1 cohort per year	30/09/2024
BSc (Hons) Healthcare Science (Cellular Sciences) (Part-time)	DL (Distance Learning)	Biomedical Science	8 learners, 1 cohort per year	30/09/2024
BSc (Hons) Healthcare Science (Genetic Sciences) (Part-time)	DL (Distance Learning)	Biomedical Science	8 learners, 1 cohort per year	30/09/2024
BSc (Hons) Healthcare Science (Infection Sciences) (Part-time)	DL (Distance Learning)	Biomedical Science	8 learners, 1 cohort per year	30/09/2024

Stage 2 assessment – provider submission

The education provider was asked to demonstrate how they meet programme level standards for each programme. They supplied information about how each standard was met, including a rationale and links to supporting information via a mapping document.

Quality themes identified for further exploration

We reviewed the information provided, and worked with the education provider on our understanding of their submission. 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 met our standards.

Quality theme 1 – How the education provider/programme will address artificial intelligence (AI) issues around online assessments

Area for further exploration: The programme documentation demonstrated a variety of appropriate assessment methods, including online assessments. The visitors sought assurance on how the use of artificial intelligence (AI) would be considered and mitigated against for assessment where learners were required to sit these online rather than on campus.

Quality activities agreed to explore theme further: We explored this area through clarification via email. We considered this the most effective way to address the visitors' concerns.

Outcomes of exploration: The education provider clarified that there are only two online assessments within the proposed programme, both of which are online examinations. These use an online platform called 'Moodle'. They explained that all examinations will be invigilated within the learner's employing laboratory and will run at the same time that on-campus examinations take place. The invigilators will be provided with training for this by the education provider. The education provider also explained that they have developed institution-wide materials and guides for staff to use with learners on the use of AI. They are seeking approval for revised assessment briefs to include information about AI and staff expectations of how it can be used in assessment.

The visitors were satisfied that the education provider's response had explained how they are managing concerns around AI use in assessments. Therefore, they determined that the quality activity had adequately addressed their concern and that the standard was met.

Section 4: Findings

This section details the visitors' findings from their review through stage 2, including any requirements set, and a summary of their overall findings.

Conditions

Conditions are requirements that must be met before providers or programmes can be approved. We set conditions when there is an issue with the education provider's approach to meeting a standard. This may mean that we have evidence that standards are not met at this time, or the education provider's planned approach is not suitable.

The visitors were satisfied that no conditions were required to satisfy them that all standards are met. The visitors' findings, including why no conditions were required, are presented below.

Overall findings on how standards are met

This section provides information summarising the visitors' findings against the programme-level standards. The section also includes a summary of risks, further areas to be followed up, and areas of good practice.

Findings of the assessment panel:
- **SET 1: Level of qualification for entry to the Register** – this standard is covered through institution-level assessment.
- **SET 2: Programme admissions** –
    - The programme documentation clearly articulates the entry and selection criteria of the programme.

- o The admissions requirements are provided on the website so that applicants can make an informed decision about the programme.
- o We were satisfied that the entry criteria are appropriate to the level of the programme and will in turn ensure that learners are able to meet our standards for registration once they have successfully completed the programme.
- o Therefore, the visitors were satisfied that the relevant standards in this SET area are met.
- **SET 3: Programme governance, management and leadership** –
  - o The education provider delivers a range of HCPC approved programmes which have demonstrated a clear collaboration with other education providers and practice placement providers. The documentation submitted stated that the proposed programme will use the existing structures in place.
  - o The education provider used the 'Information about the programme' document to set out how the programme will run. They state that Health Education Improvement Wales (HEIW), who have commissioned the programme, require it to be fully online delivery. This is because of the wide geographical location of learners across Wales and the level 4 NHS apprenticeship entry requirement. The education provider stated that this aligns with their 2030 Strategy which aims to support greater inclusion in education. This is because the programme will attract applications from non-traditional learners.
  - o Staffing plan and Curriculum Vitae (CVs) of existing staff are provided. They show evidence of appropriate qualifications. The visitors noted that staff experience is extensive and highly relevant. The Biomedical Sciences team already deliver the full-time programme for Healthcare Science. This was commissioned by HEIW since 2013.
  - o The evidence provided within the CVs also demonstrated that there is currently a 25:1 ratio of staff to learners, with a programme team of 24 permanent academic staff within the Biomedical Sciences team. Four staff members are HCPC registered Biomedical Scientists.
  - o We understood that in addition to the core staffing of the programme, current practitioners will be involved in the delivery of specific profession-related topics. Most are Fellows or Senior Fellows of the Higher Education Academy (HEA). This is to enhance the learner experience.
  - o The visitors noted that the Programme Specification is detailed and complete, as are the Workplace Handbooks and Module Descriptors. They were satisfied there is sufficient evidentiary documentation and explanation within these documents to support this SET.
  - o The visitors saw sufficient evidence to determine that all standards within this SET area are met.
- **SET 4: Programme design and delivery** –
  - o The visitors noted that evidence in the SOPs mapping documents showed that the learning outcomes meet the current standards of proficiency for Biomedical Science. Information provided in the Practice Education guides and Module Descriptor documents also showed the standards of conduct, performance and ethics are being met.

- o The visitors noted that the programme has been mapped to the relevant Quality Assurance Agency (QAA) Benchmark Statement for Biomedical Science and/or Biomedical Sciences (2023).
  - o The visitors used the Programme Specification to determine that the programme learning outcomes are appropriate and meet necessary standards.
  - o The education provider has provided evidence of good review processes already in place. They liaise with practise partners and other stakeholders. There is evidence the process has been followed and works well.
  - o Module descriptor documentation sets out the content which helps learners to bridge theory-practise gaps in order to meet programme outcomes.
  - o The visitors noted that the teaching approach appears to be well developed. There is sufficient detail in the module descriptor documentation to evidence how teaching takes place, and how learners are supported. The visitors noted a good balance of theory and practice modules across the programme.
  - o The visitors saw sufficient evidence to determine that all standards within this SET area are met.
- **SET 5: Practice-based learning** –
  - o Information within the programme specification is detailed and sets up appropriate practice placement experiences to support learning. There is evidence of the agreement with employers to support learners toward successful completion.
  - o Documentation submitted by the education provider evidences practise-based learning and how it is managed. There is evidence of a robust process in place to manage practice placements.
  - o The education provider used their 'Laboratory training status audit' document to detail the approval process for practice placements. Evidence here suggests the team use appropriate criteria to approve and manage placements and monitor educator qualifications as part of that.
  - o The visitors saw sufficient evidence to determine that all standards within this SET area are met.
- **SET 6: Assessment** –
  - o Evidence showed that the assessment methods and practice assessments have the ability to assess the programme learning outcomes and comply with the education provider's assessment policies.
  - o The assessment strategy is clearly outlined and is well developed, using practise-based learning appropriately. Assignments are directly relevant to professional competencies and matched to HCPC standards of proficiency. The variety of assessment methods, including training that forms part of placement, is also evidence of good practice.
  - o The variety of assessment methods, including online assessments, will be used throughout the programme. This will allow the learners suitable ways to showcase their understanding and awareness of the standards of proficiency. Other methods of assessment include,

practical and written assessments, portfolios, presentations, problem solving and data analysis exercises.

- o The visitors noted that the on-placement checklists are helpful in ensuring an appropriately qualified supervisor can sign off on learner competencies achieved.
- o Through quality theme 1 we understood that the education provider will address artificial intelligence (AI) around online assessments. It was clarified that there are only two online assessments within the programme, both of which are online examinations. All examinations will be invigilated within the learner's employing laboratory at the same time as on-campus exams occur. Invigilators will be provided with training by the education provider, specifically around AI in assessments.
- o The visitors saw sufficient evidence to determine that all standards within this SET area are met.

Risks identified which may impact on performance: None.

Section 5: Referrals

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

There were no outstanding issues to be referred to another process.

Recommendations

We include recommendations when standards are met at or just above threshold level, and where there is a risk to that standard being met in the future. They do not need to be met before programmes can be approved, but they should be considered by education providers when developing their programmes.

The visitors did not set any recommendations.

Section 6: Decision on approval process outcomes

Assessment panel recommendation

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

- All standards are met, and therefore the programme should be approved.

Education and Training Committee decision

Education and Training Committee considered the assessment panel's recommendations and the findings which support these. The education provider was also provided with the opportunity to submit any observation they had on the conclusions reached.

Based on all information presented to them, the Committee decided that the programme is approved.

Reason for this decision: The Panel accepted the visitor's recommendation that the programme should receive approval.

Appendix 1 – summary report

If the education provider does not provide observations, only this summary report (rather than the whole report) will be provided to the Education and Training Committee (Panel) to enable their decision on approval. The lead visitors confirm this is an accurate summary of their recommendation, and the nature, quality and facilities of the provision.

Education provider	Case reference	Lead visitors	Quality of provision	Facilities provided
Cardiff Metropolitan University	CAS-01505-B0M0Y0	Emmanuel Babafemi Garrett Kennedy	Through this assessment, we have noted the programme(s) meet all the relevant HCPC education standards and therefore should be approved.	Education and training delivered by this institution is underpinned by the provision of the following key facilities: • The programme already has a person with overall responsibility in place and a team of existing permanent academic staff. Existing staff who deliver on the biomedical sciences programmes have HCPC registration as biomedical scientists. • Specialist laboratory and teaching space is already in place. • Staffing resources follow the education provider's employment pattern and will be in place at the start of the programme. All other resources are in place or planned for purchase.

Programmes		
Programme name	**Mode of study**	**Nature of provision**
BSc (Hons) Biomedical Science	Distance Learning	Taught (HEI)

Appendix 2 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
BSc (Hons) Healthcare Science (Blood Sciences)	FT (Full time)	Biomedical scientist			01/09/2013
BSc (Hons) Healthcare Science (Cellular Sciences)	FT (Full time)	Biomedical scientist			01/09/2013
BSc (Hons) Healthcare Science (Genetic Sciences)	FT (Full time)	Biomedical scientist			01/09/2013
BSc (Hons) Healthcare Science (Infection Sciences)	FT (Full time)	Biomedical scientist			01/09/2013
BSc (Hons) Human Nutrition and Dietetics	FT (Full time)	Dietitian			01/04/1992
BSc (Hons) Podiatry	FT (Full time)	Chiropodist / podiatrist		POM - Administration; POM - sale / supply (CH)	01/09/2011
BSc (Hons) Speech and Language Therapy	FT (Full time)	Speech and language therapist			01/09/2011
Doctorate in Forensic Psychology	FT (Full time)	Practitioner psychologist	Forensic psychologist		01/09/2014
Doctorate in Forensic Psychology	PT (Part time)	Practitioner psychologist	Forensic psychologist		01/09/2014

MSc Dietetics	FT (Full time)	Dietitian			01/05/1997
Pg Dip Dietetics	FT (Full time)	Dietitian			01/05/1997
Post Graduate Diploma in Practitioner Forensic Psychology	FT (Full time)	Practitioner psychologist	Forensic psychologist		01/09/2011
Post Graduate Diploma in Practitioner Forensic Psychology	PT (Part time)	Practitioner psychologist	Forensic psychologist		01/09/2011