

Approval process report

University of Reading, Dietitian 2024-25

Executive Summary

This is a report of the process to approve a Dietitian programme at the University of Reading. 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 programme against our programme level standards and found our standards are met in this area following exploration of key themes through quality activities.
- Decided all standards are met, and that the programme is approved

Through this assessment, we have noted:

- The areas we explored focused on:
 - Quality activity 1: the education provider explained how practice education providers had been involved with the development of the programme and described the processes in place to ensure ongoing collaboration.
 - Quality activity 2: we understood how the education provider had worked with other Higher Education Institutions to manage capacity and consider practicebased learning capacity across the region.
 - Quality activity 3: the education provider explained the mechanisms they had in place to ensure there were an appropriate number of qualified and experienced practice educators to support practice-based learning.
- The programme meets all the relevant HCPC education standards and therefore should be approved.

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

- The provider's next performance review will be in the 2027-28 academic year.
- The programme has been approved and will be delivered by the education provider from September 2025.

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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 approval process undertaken by the HCPC to ensure that the programme detailed in this report meet 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 <u>approved on an open-ended basis</u>, subject to ongoing monitoring. Programmes we have approved are listed <u>on our website</u>.

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 <u>partner visitors</u> 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:

Alexander Harmer	Lead visitor, Operating department practitioner				
Helen White	Lead visitor, Dietitian				
Saranjit Binning	Education Quality Officer				

Section 2: Institution-level assessment

The education provider context

The education provider currently delivers two HCPC approved programmes across one profession and two Independent and Supplementary Prescribing programmes. It is a Higher Education provider and has been running HCPC approved programmes since 2001. The education provider is made up of a number of academic schools and departments. The speech and language therapy programme is based in the

Health Sciences School and the Independent and Supplementary Prescribing programmes are based in the School of Pharmacy. The proposed dietetics programme will be based in the Department of Food and Nutritional Sciences.

The education provider engaged with the performance review process with our quality assurance model in 2022. The outcome of the process was a recommendation for the education provider to engage with our performance review process in five years, in the 2027-28 academic year.

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 2 of this report.

	Practice area	Delivery level	Approved since	
registration	Speech and language therapist	□Undergraduate	⊠Postgraduate	2001
Post- registration	Independent Presc	ribing / Supplemen	tary 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.

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

Data Point	Bench- mark	Value	Date	Commentary
Learner number capacity	899	914	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.
Learner non- continuation	3%	5%	2020-21	The data point is above 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 remained the same. We did not explore this data point through this assessment because there was no impact on the SETs considered.
Outcomes for those who complete programmes	92%	92%	2021-22	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 dropped by 1%. We did not explore this data point through this assessment because there was no impact on the SETs considered.
Teaching Excellence Framework (TEF) award	N/A	Silver	2023	The definition of a Silver TEF award is provision is of high quality, and significantly and consistently exceeds the baseline quality threshold

				expected of UK Higher Education. We did not explore this data point through this assessment because there was no impact on the SETs considered.
Learner satisfaction	78.6%	86.2%	2024	This data was sourced at the subject level. This means the data is the provider-level public data. 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 1%. We did not explore this data point through this assessment because there was no impact on the SETs considered.
HCPC performance review cycle length	N/A	2027-28	5 years	The education provider will engage with the performance review process in five years.

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 relating to all programmes was available on the education providers website, which included the entry criteria, the application process and information about health and character checks.
- Additional information relating to the professional body was available on the website, which included registration costs. Applicants were also offered information via open days and taster events.
- These policies are set at institution level and will apply to the proposed programme.

Assessing English language, character, and health –

- The relevant entry requirements were available on the education providers website and in the programme specifications. The University guidelines on postgraduate programme specifications outline the English language, character and health requirements. This was an institutional level policy, which had been adjusted to meet the requirements of the HCPC.
- All applicants were required to complete enhanced disclosure and barring service (DBS) clearance checks. It was the individual schools responsibility to ensure the relevant checks had been completed and applicants were aware of the process. Information relating to the process was available on the Dietetics programme website and applicants were also sent communication before they commence the programme. The same process applied to health checks.
- The education provider required applicants to provide two references to assure their good character and were also interviewed to ensure suitability to the programme. In addition to this they were required to sign a health and good character declaration annually.
- These policies were set at institution level, however we noted there were profession specific arrangements in place for DBS clearance checks and English language, character and health requirements. We will therefore consider these further through stage 2 of this process.

Prior learning and experience (AP(E)L) –

- The Policy and Procedure on the Recognition of Prior Learning was an institutional level policy, which assessed applicants prior learning and experience.
- This policy applied to most programmes, however, did not apply to the proposed programme. The education provider explained, that due to Professional Statutory and Regulatory Body (PSRB) requirements, all applicants were required to complete all modules.
- These policies were set at institution level, however, will not apply to the proposed programme and will therefore be considered through Stage 2.

Equality, diversity and inclusion –

- The education provider's Equal Opportunities Policy demonstrated they were committed to equality, diversity and inclusion. This had also been recognised through the various awards they had received, such as the Advance HE Athena Swan silver award and the bronze award for the Race Equality Charter. This policy applied at institution level to both staff, learners and applicants.
- The Quality Assurance Agency (QAA) Code of Practice on Admissions also applied across the institution. This ensured the admissions processes were applied fairly and transparently.
- These policies are set at institution level and will apply to the proposed programme.

Non-alignment requiring further assessment: We have noted the prior learning and experience policy will not apply to the proposed programme. Alongside this, we have noted there are profession specific arrangements in place for DBS clearance checks and English language, character and health requirements. We will therefore consider these areas further through stage 2 of this process.

Management and governance

Findings on alignment with existing provision:

- Ability to deliver provision to expected threshold level of entry to the Register¹ –
 - The processes and procedures regarding award classifications, awarding methods and conditions were outlined in the Assessment Handbook. These processes required external examiner input and were implemented through the University Programmes Board. This ensured the delivery of the provision to the expected threshold level of entry to the Register for all programmes.
 - The Guidelines on the structure of undergraduate and taught postgraduate programmes provided details on the number of credits programmes should consist of. This ensured programmes were designed at the appropriate level.
 - These policies are set at institution level and will apply to the proposed programme.

The Sustainable Planning System ensured the sustainability of the provision and the financial planning process for the schools. All schools

Sustainability of provision –

were required to complete five year plans, which identified priorities for the period, financial forecasting and learner numbers. These plans were submitted to the University's Planning and Change Board where they considered the sustainability of programmes. This process was further supported by the School Teaching Enhancement Action Plans

(STEAP), which were reviewed annually by the University Sub-

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

- Committee. Data from the Teaching and Learning Excellence Framework (TEF) was also considered as part of this process.
- The Risk Management Policy applied at institution level and was overseen by the Risk Management Group who reported to the University Executive Board. All schools were required to complete a risk register annually, which was reviewed and approved by the Risk Management Group.
- These policies are set at institution level and will apply to the proposed programme.

Effective programme delivery –

- The education provider ensured they recruited appropriately qualified staff who were HCPC registered professionals.
- The Enhancement-led Quality Assurance Process enabled programmes to be monitored at three levels. These were:
 - Module and Programme level the Boards of Study and Student Experience (BoSSEs) were responsible for quality assurance mechanisms at this level and involved input from programme directors.
 - School level School Management Boards (SMBs) were responsible and had oversight of the awards and approved the STEAP and monitor their progress. These boards work with BoSSEs and directors to also enhance the learner experience.
 - University level The University Board of Teaching, Learning and Student Experience (UBTLSE) oversees all teaching, learning and student experience matters and reported to the Senate.
- These policies are set at institution level and will apply to the proposed programme.

• Effective staff management and development –

- The education provider operated robust staff recruitment processes. All staff were provided with a 'New starter welcome' link, which provided them with key information prior to them starting their role. All staff were offered an induction programme and mentor. In addition to this, staff new to teaching were required to complete two modules on teaching and learning, which led to Fellowship of the Advance HE (FHEA).
- Staff were supported with staff development centrally with teaching and learning resources available to all staff. These included classroom and online teaching, mandatory training, leadership and management development, research staff development and coaching and mentoring opportunities. This was further supported by the FLAIR Framework which was a platform that offered continuous professional and academic development.
- These policies are set at institution level and will apply to the proposed programme.
- Partnerships, which are managed at the institution level –

- The education provider had effective partnerships with local NHS Trusts and voluntary and independent sector healthcare provision. They worked with practice-based learning partners to ensure the requirements of the policy for management of practice-based learning and work-based learning were met. This included risk assessment, health and safety, and auditing to assure there were learning opportunities and the quality of the learner experience was maintained.
- The University Code of Practice on Work-based and Placement Learning applied to all programmes. This policy ensured all practicebased learning opportunities were quality assured and monitored and learning outcomes were being met.
- A Strategic Partnership Group had been established with the Royal Berkshire NHS Foundation Trust. This partnership enabled the education provider to develop funded research opportunities and collaborate on various projects.
- These policies are set at institution level and will apply to the proposed programme.

Non-alignment requiring further assessment: None.

Quality, monitoring, and evaluation

Findings on alignment with existing provision:

- Academic quality -
 - There were a range of policies and processes to monitor any changes to programmes and ensure the quality and compliance of all programmes. All programmes were reviewed annually by the Delivery and Enhancement of Learning and Teaching (DELT) sub-committee and University Board of Teaching, Learning and Student Experience (UBTLSE), where they review data relating to continuation, completion and progression. The Enhancement-led Quality Assurance process also applied to all programmes and was implemented through the BoSSEs and reported to the School Management Boards. The Periodic Evaluation and Enhancement Review process monitored all programmes and identified any risks linked to the programmes. It focussed specifically on data.
 - External Examiners were involved with all programmes and provided input into all aspects of the assessments including the practice-based learning elements.
 - These policies are set at institution level and will apply to the proposed programme.
- Practice quality, including the establishment of safe and supporting practice learning environments –
 - The University Code of Practice on Work-based and Placement Learning ensured practice quality and a safe and supportive practice learning environment. This policy outlined the support learners should

be provided with and the responsibilities of the staff involved with practice-based learning. These included information for learners, monitoring supervisor training requirements and maintaining the placement provision.

- The education provider had an NHS Education contract with NHS England. This contract outlined responsibilities and expectations of the education provider, NHS England and the practice-based learning providers. This ensured all parties were clear and provided safe and supportive practice learning environments.
- Where concerns were raised, processes were in place to work with the Head of School to address the concerns. Information relating to this process was made available through the placement handbook and learners had access to the School Raising Concerns Policy.
- These policies are set at institution level and will apply to the proposed programme.

• Learner involvement -

- The Student Representation Policy outlined the roles and responsibilities of student representatives. Student representatives were nominated for all programmes and were involved at programme, school and institution level. They were responsible for ensuring they raise, and discuss, issues the learners had about the programmes and acted as a link between the learners and programme teams.
- Learners also had the opportunity to be involved with other aspects of the programme, such as the programme design and reviews.
- There were three stages at which learners provided feedback, which was evaluated by the teams. Further details regarding this process were outlined in the Policy on Student Evaluation of Teaching and Learning. The education provider demonstrated there were appropriate systems in place to gather feedback and respond positively to learner feedback.
- The Student-Staff Partnership Groups (SSPGs) met regularly to discuss feedback and issues raised by learners. The purpose of this group was to address issues and improve the learning experience. In addition to comments from learners, the group also considered data from the NSS and PTES.
- These policies are set at institution level and will apply to the proposed programme.

Service user and carer involvement –

- The Experts by Experience (EbE) forum supported the HCPC provision. This forum was made up of service users and carers who had accessed speech and language therapy services. They were involved with panel meetings where they had the opportunity to share ideas on how they could be involved and contribute to programmes.
- The school were currently working with the speech and language therapy team to develop a shared service user and carer policy to involve service users and carers in all the health programmes.

 This policy was in the process of being developed at School level and will apply to the proposed programme. We will therefore consider this through the Stage 2 assessment.

Non-alignment requiring further assessment: We noted the service user and carer policies were currently profession specific. The education provider noted they were working on a shared policy across all health programmes. As such, we will review the relevant policies for the proposed programme through Stage 2 of this approval case.

<u>Learners</u>

Findings on alignment with existing provision:

• Support -

- Learners were offered a range of support services. These included the Counselling and Wellbeing team, Disability Advisory Service, Student Welfare team and the Student Finance Team. In addition to this all schools had Student Support Coordinators and Disability Coordinator who provided individual support to learners and signposted them accordingly.
- The Academic Tutor System Policy ensured all learners were allocated an Academic Tutor who provided them with academic support, which included monitoring their progress and providing them with pastoral support. Learners were required to meet with their Academic Tutors three times a year. This support was ongoing through the duration of the programme for learners.
- In addition, learners were allocated practice-based learning tutors who supported them through their placements. There was also a Food and Nutrition Sciences (FNS) Disability Representative who worked alongside the Disability Service to support learners on the programme with reasonable adjustments.
- These policies are set at institution level and will apply to the proposed programme.

• Ongoing suitability -

- Policy on, and Procedures for, the Determination of "Fitness to Practise" applied to all learners. Suitability was considered through this policy and was investigated further by the Standing Committee on Fitness to Practise. The membership of this committee included one internal and external registrant member from the profession.
- Other policies outlining the education providers expectations of learners and addressing concerns raised included the Policy on and Procedures Relating to Student Academic Engagement and Fitness to Study and Student Charter and Contract. Learners were required to complete annual declarations at the start of each academic year to confirm their fitness to practise.

 These policies are set at institution level and will apply to the proposed programme.

• Learning with and from other learners and professionals (IPL/E) –

- Interprofessional learning policies were profession specific.
 Interprofessional learning was therefore delivered alongside other professions within the school, such as speech and language therapy and nursing.
- Other interprofessional learning opportunities were available to learners through the hospital and clinical placements where they would have access to a range of professions. They would also be taught by visiting healthcare professionals.
- The interprofessional learning approach that was used for the current health care programmes will also apply to the proposed programme at programme level. We will therefore consider this through the Stage 2 assessment.

Equality, diversity and inclusion –

- The Diversity Policies and Procedures and Equal Opportunities Policy and Code of Practice demonstrated the education providers commitment to equality, diversity and inclusion. They achieved an Athena SWAN Silver Award and Race Equality Bronze Award, which was evidence of their commitment to this area.
- There were a range of other policies to promote this area and support learners, such as the Students with Disabilities: Key Principles for Staff Students and Applicants policy, Policy on Inclusive Practice in Teaching and Learning and Code of Practice for Supporting Students relating to Religion, Belief ad Teaching and Learning.
- These policies are set at institution level and will apply to the proposed programme.

Non-alignment requiring further assessment: We have noted the interprofessional learning policies were profession specific. As such, we will review the relevant policies for the proposed programme through Stage 2 of this approval case.

Assessment

Findings on alignment with existing provision:

Objectivity –

The Assessment Handbook outlined the education providers approach to assessment and ensured consistency, fairness, and transparency across all programmes. They did this by offering a range of assessment methods across all programmes and used the same approach when marking and moderating work. All work was marked anonymously, which was the education providers policy unless there were exceptional circumstances.

- External Examiners were also involved with all assessments and provided independent input into the assessments in accordance with the education provider's procedures.
- These policies are set at institution level and will apply to the proposed programme.

Progression and achievement –

- All assessment processes were outlined in the Assessment Handbook.
 It was noted Masters programmes were not subject to any progression
 requirements unless they were specified for individual programmes.
 For the proposed programme there were programme specific
 requirements learners must meet to achieve the MSc Dietetics degree.
 If these requirements were not met, learners could be awarded a
 Postgraduate Certificate if they were eligible for the exit award.
- These policies were set at institution level, however we noted profession specific adjustments had been made that would apply to the proposed programme. We will therefore consider these further through stage 2 of this process.

Appeals –

- The Appeals on Examination Results and Appeals for the review of marks policy applied to all programmes and allowed learners to appeal their marks. This policy outlined the purpose and criteria for appealing and the process to follow if learners were not satisfied with the outcome.
- These policies are set at institution level and will apply to the proposed programme.

Non-alignment requiring further assessment: We noted the progression policies were profession specific and will apply to the proposed programme. We will therefore review the relevant policies for the proposed programme through Stage 2 of this approval case.

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 dietetics team consisted of 0.9 full time equivalent (FTE) HCPC
registered dietitians, a programme director and a clinical placement liaison
officer, which later increased to 1.7 FTE. In addition to this some module
convenors are in place for some of the year one modules and they have also
identified some visiting lecturers and experts who will be involved with the
delivery of the programme. The business plan outlines any anticipated costs
relating to recruitment and will be reviewed annually.

The education provider offers a range of facilities to support the programme.
 These include lecture theatres, classrooms and laboratories with specialist facilities such as sensory and cognitive testing suites and product development kitchens. Learners will also have access to the Hugh Sinclair Nutrition Research group facilities, which include Hugh Sinclair clinical trials unit and exercise and performance laboratories.

Risks identified which may impact on performance: None

Outstanding issues for follow up: There are five areas we will need to review further through stage 2 of the process. These are:

- SETs 2.3, 2.4 and 2.5: We noted there were institutional level policies for English language, character and health requirements, and DBS checks. However, these were adjusted to meet the requirements of the HCPC. Through stage 2 of this process, we will review the adjusted polices and consider how it will apply to the proposed programme.
- SET 2.6: We noted the education provider had a prior learning and experience policy that applied at institution level but would not apply to the proposed programme. There were no HCPC requirements that specify prior learning and experience cannot be considered, so it would be helpful to explore this further to understand the rationale for this not applying to the proposed programme. We will need to consider this as part of stage 2 of the approval process.
- SET 3.7: We noted the service user and carer policies were currently
 profession specific. We understand the education provider was working on a
 shared policy across all health programmes. We will need to consider how
 service users and carers will be involved with the proposed programme as
 part of stage 2 of the approval process.
- SET 4.9: The education provider does not have an interprofessional learning policy at institution level. They currently offer interprofessional learning at programme level alongside other professions across the schools. We will need to consider how the interprofessional learning that is currently offered to learners is appropriate and will prepare learners to work with other professions. In addition to this, we will explore what interprofessional learning opportunities will be available to learners on the proposed programme. We will need to consider this as part of stage 2 of the approval process.
- SET 6.4: We have noted the progression policies were profession specific and will apply to the proposed programme. Through stage 2 of this process, we will consider how the policies will be applied and how learners will be made aware of these profession specific policies.

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
MSc Dietetics	FT (Full time)	Dietitian	15 learners, 1 cohort per year	01/09/2025

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.

We have reported on how the provider meets standards, including the areas below, through the Findings section.

Quality theme 1 – ensuring ongoing collaboration with practice education providers

Area for further exploration: Visitors acknowledged the education provider's engagement with stakeholders, noting that two formal and three informal meetings were held annually. However, they were unclear about the mechanisms in place to support ongoing collaboration with practice education providers. This was important because structured collaboration with practice education providers was essential to ensure the development and quality of the programme. As a result, visitors requested a detailed narrative explaining how the education provider ensured sustained collaboration with these partners. To support this narrative, we sought information such as minutes from meetings held to date, along with documentation which demonstrated collaboration and agreements with stakeholders.

Quality activities agreed to explore theme further: We agreed to explore this area further by requesting email and documentary evidence from the education provider. We considered this would be the most effective method to understand the mechanisms in place to ensure ongoing engagement with practice education providers.

Outcomes of exploration: In their response, the education provider explained how they would continue ongoing collaboration through the Placement Partnership Forum meetings and the programme management group. We noted the programme management group meet quarterly and oversee parts of the programme, such as admissions, practice-based learning and resources to support the programme. The Placement Partnership Forum focused more on stakeholder engagement and meet twice a year. The purpose of these meetings was to discuss placement capacity and quality and strengthen relationships. Visitors noted further engagement would continue through other activities, such as using guest lecturers from the practice education providers to deliver sessions, involving them with recruitment events, feedback surveys and working on joint research projects. Visitors acknowledged the additional information supplied by the education provider and confirmed they were satisfied the education provider had processes in place to support ongoing engagement with practice education providers through meetings and other activities.

Quality theme 2 – effective process to ensure the availability and capacity of practice-based learning

Area for further exploration: Visitors acknowledged the education provider had taken appropriate steps to establish a process for ensuring the availability and capacity of practice-based learning and had worked collaboratively with practice education providers to plan placements. However, there was insufficient evidence to demonstrate whether consideration had been given to the practice-based learning capacity of other higher education institutions (HEIs) within the region. It was important to understand this because capacity is often shared across regions. Without this collaboration, there was a risk of placing undue pressure on practice education providers, which could impact both the quality and availability of placements. Further information was therefore requested on how the education provider will work with other HEIs in the region to manage placement capacity.

Quality activities agreed to explore theme further: We agreed to explore this area further by requesting a narrative from the education provider. We considered this would be the most effective method to understand how the education provider had worked with other HEIs to manage capacity and considered practice-based learning capacity within the region.

Outcomes of exploration: In their response, the education provider explained that they had recently joined the Southern Higher Education Institutions Dietetics Group, which included the University of Winchester, Oxford Brookes University, Health Sciences University, University of Plymouth and the University of Surrey. The group aimed to support regional higher education institutions in managing practice-based learning opportunities collaboratively. It was also noted that, prior to joining the group, the education provider had proactively engaged with these institutions to explore regional opportunities. Additionally, they have engaged with colleagues at the University of Hull and the University of Hertfordshire to understand their strategies for developing and expanding practice-based learning capacity. This

demonstrated clear and ongoing communication among regional education providers to coordinate capacity and ensure sufficient practice-based learning opportunities for students. Visitors acknowledged the additional information supplied by the education provider and confirmed they were satisfied the education provider had processes in place to ensure there was sufficient capacity within the region and were coordinating this with education providers within the region.

<u>Quality theme 3 – appropriate number of suitably qualified and experienced practice</u> educators to support practice-based learning

Area for further exploration: From the list of professional experts provided it was not clear to visitors how the education provider ensured there were an adequate number of staff involved in practice-based learning. This was important because sufficient staffing was crucial to maintaining the quality of practice-based learning experiences. Without clear evidence of staffing arrangements, there was a risk that learners may not receive the necessary support and supervision. To gain a better understanding of this, they requested further information outlining how the education provider will consider and determine there was an adequate number of appropriately qualified and experienced practice educators to support practice-based learning.

Alongside this, it was also not clear to visitors what mechanisms were in place to ensure practice educators who were supporting or supervising learners had undertaken the relevant training. This was important because practice educators needed to be appropriately trained to support learners with meeting the learning outcomes and preparing them for practice. Without the relevant training, there was a risk that learners may not receive consistent supervision, which could impact their readiness for practice. Visitors therefore sought further information to understand how the education provider ensured practice educators were appropriately qualified and experienced to support learners in practice-based learning. In particular, they were interested in the processes used to confirm practice educators had completed relevant training, such as supervision.

Quality activities agreed to explore theme further: We agreed to explore this area further by requesting a narrative from the education provider. We considered this would be the most effective method to understand how the education provider ensured there were an appropriate number of suitably qualified and experienced practice educators to support practice-based learning.

Outcomes of exploration: In their response, the education provider informed us of the formal placement agreement that required practice-based learning providers to identify and allocate appropriately qualified and experienced practice educators to support learners. Alongside this, we noted the education provider reviewed the qualifications and availability of practice educators through the placement approval process and the quality audit process. In addition, visitors recognised there were other mechanisms to ensure learners were supported by appropriately qualified and experienced practice educators. These included the requirement for all placements to be overseen by a registered dietitian and where this was not possible, the long

arm supervision model would be used. This would be when the education provider would supply a practice educator who was a registered dietitian.

Through this process, information was also provided relating to practice educator training records. We noted the education provider offered online and face to face training to ensure practice educators were appropriately prepared to support safe and effective learning.

Visitors acknowledged the additional information supplied by the education provider and confirmed they were satisfied the education provider had processes in place to ensure practice educators were appropriately qualified and experienced to support learners in practice-based learning.

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.

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
 - o This standard is covered through institution-level assessment.
- SET 2: Programme admissions
 - The selection and entry criteria are clearly articulated and set at an appropriate level for the proposed programme. The entry criteria is available on the education provider's website and is accessible to applicants. The information available includes academic grade requirements, which is typically an undergraduate degree at 2.1 or above in a relevant life science and criminal and occupational health check requirements.
 - Through clarification we noted, applicants would be required to demonstrate their proficiency in English language. They would therefore have to provide evidence in the form of a language test certificate or equivalent, such as the International English Language Testing System (IELTS) at level 7.0 with no element below 6.5.
 - We noted all applicants were informed of the Disclosure and Barring Service (DBS) check and health check and vaccination requirements via the Dietetics programme website. Alongside this, once on the programme, learners were also required to sign annual declarations and declare any changes to their DBS, health and character,

- Regarding the Accreditation of Prior Learning (APL) policy, to ensure learners meet the required standards, all modules within the programme were compulsory. This was consistent with other professional programmes within the school. It was however, noted that APL, would be considered on a case-by-case basis for the proposed programmes.
- As part of the application process, applicants are required to attend an interview to demonstrate their values and professional skills. Written and verbal communication skills are also assessed as part of this process through the personal statement.
- The visitors therefore considered the relevant standards within this SET area met.

SET 3: Programme governance, management and leadership –

- There was evidence of ongoing collaboration between the education provider and practice education partners. For example, Royal Berkshire NHS Foundation Trust and Buckinghamshire Healthcare NHS Foundation Trust were both involved with the design of the proposed programme in the early stages. Through <u>Quality theme 1</u> we explored how the education provider ensured ongoing engagement with practice education providers.
- Visitors acknowledged there was a process in place to ensure the availability and capacity of practice-based learning. They noted the extensive work that had been undertaken to plan practice-based learning. This also involved considering peak periods when NHS Trusts would be providing practice-based learning opportunities to other education providers across the region. Through Quality theme 2 we explored how the education provider worked with other education providers within the region to manage placement capacity.
- Visitors noted the education provider had an adequate number of staff to deliver the programme effectively. The staff team had appropriate teaching qualifications and three members of staff were registered dietitians, which increased the FTE from 0.9 to 1.7. Alongside this they also held qualifications at MSc and Doctoral level.
- The staff CVs demonstrated there were an appropriate number of staff who had relevant knowledge and experience to deliver the proposed programme. There was evidence of a diverse range of expertise across the team, which included Applied Nutrition, Food Science, Dietetics and Biochemistry.
- There were a wide range of resources available to support the effective delivery of the proposed programme. These included access to a range of simulation facilities, which included a four bed hospital ward, three consultation rooms and two debriefing rooms. Alongside this it was noted learners would also have access to health clinics and virtual reality resources. Other resources included the virtual learning environment, new library facilities and microbiology and chemistry laboratories.

- We noted service users and carers would be actively involved in the delivery of the programme through various channels, including practice-based learning, workshops facilitated by the education provider and participation in the programme management group.
- The visitors therefore considered the relevant standards within this SET area met.

• SET 4: Programme design and delivery -

- The learning outcomes were mapped against the Standards of Proficiency (SOPs) mapping document and outlined in the module descriptors. The structure of the modules ensured learners can meet the SOPs.
- Learners were supported to meet the HCPC standards of professional behaviours, which included the standards of conduct, performance and ethics. Visitors acknowledged these were embedded throughout the programme, within the learning outcomes in the clinical practice and placement modules and the academic modules.
- The programme was comprehensive and addressed the philosophy, core values, skills and knowledge base of the profession. Visitors noted the modules had been mapped against the British Dietetic Association (BDA) Curriculum Framework and the three domains, which were Dietetic knowledge, Dietetic Values and behaviours and Dietetic skills.
- There were appropriate mechanisms in place to ensure the curriculum remained relevant to current practice. This included the programme being designed to reflect the HCPC standards of proficiency and the BDA curriculum.
- The structure of the programme ensured the integration of theory and practice throughout. It was clear there was a strong practice-based approach, which was supported through the academic learning, practical and simulation sessions and research skills within the dissertation module.
- There was evidence of a variety of learning and teaching methods, which were outlined in the Professional, Statutory and Regulatory Body Mapping. These included a combination of lectures, tutorials, practical workshops, online learning, experiential learning and use of simulation.
- Autonomous and reflective thinking were embedded in a range of learning outcomes and assessments, including the practice modules. Visitors noted the Dietetic Theory and Practice module specifically focused on reflection, which was a key outcome of the module. The programme design ensured learners were able to develop autonomous and reflective thinking throughout the programme at each level.
- The structure of the curriculum ensures evidence-based practice is embedded throughout the programme. This is demonstrated through the module specifications and the research project learners complete.
- Guest lecturers will be involved with taught sessions and this will include professionals from a range of professions, such as nurses, nutritionists, pharmacists, speech and language therapists and biomedical scientists. In addition, we noted the learners on the

proposed programme would be able to attend sessions with learners from other professional programmes. These would include speech and language therapy, pharmacy, nursing, paramedic and occupational therapy learners. They would also have the opportunity to attend conferences and teaching sessions delivered by other medical professions during their practice-based learning experiences.

 The visitors therefore considered the relevant standards within this SET area met.

SET 5: Practice-based learning –

- Visitors noted the clear integration of practice-based learning in the programme. Practice-based learning was divided into three groups across the programme and structured around the teaching element of the programme. This approach enabled learners to build on their learning and develop their skills.
- Through Quality theme 3, we explored the process for ensuring there were an adequate number of appropriately qualified and experienced staff in place within practice-based learning to support learners. Alongside this we also explored how the education provider ensures practice educators have undertaken relevant training to support and supervise learners.
- There was evidence to demonstrate the structure, duration and range of practice-based learning was appropriate to enable learners to meet the SOPs and achieve the learning outcomes. Through clarification we noted learners who did not achieve the required supervision levels at the end of placement B would be required to repeat the placement. The process regarding repeating practice-based learning is outlined on the practice-based learning website and provides details on progression.
- The visitors therefore considered the relevant standards within this SET area met.

SET 6: Assessment –

- The education provider described how the assessment strategy and design of the programme will ensure learners who complete the programme meet the standards of proficiency. There was evidence of a diverse assessment, which included presentations, case studies and reflective assignments. Through clarification, we noted the document supplied by the education provider where the modules were mapped to the learning outcomes, clearly outlined how learners would meet the standards of proficiency.
- Visitors acknowledged the standards of conduct performance and ethics were clearly embedded in the learning outcomes of the modules and the practice-based learning assessments. This enabled learners to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics.
- We noted the progression requirements were outlined in the programme specification. This included detailed information on how learners would progress from year one to year two. The Masters

- degree classifications were also included in this information, which provided learners with clear information and guidance on academic progression and achievement.
- Visitors noted there were a range of appropriate assessment methods used to measure the learning outcomes across the modules. This approach enabled learners to demonstrate a wide range of skills, knowledge and understanding. These were evidenced within the module specifications.
- The visitors therefore considered the relevant standards within this SET area 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 observations they had on the conclusions reached.

Based on all information presented to them, the Committee decided that:

- The programme is approved.
- The education provider's next engagement with the performance review process should be in the 2027-28 academic year.

Reason for this decision: The Education and Training Committee 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
University of Reading	CAS-01723- L7G3D3	Alexander Harmer and Helen White	Through this assessment, we have noted: • The areas we explored focused on: • Quality activity 1: the education provider explained how practice education providers had been involved with the development of the programme and described the processes in place to ensure ongoing collaboration. • Quality activity 2: we understood how the education provider had worked with other Higher Education Institutions to manage capacity and consider practice-based learning capacity across the region.	Education and training delivered by this institution is underpinned by the provision of the following key facilities: • The dietetics team consisted of 0.9 full time equivalent (FTE) HCPC registered dietitians, a programme director and a clinical placement liaison officer, which later increased to 1.7 FTE. In addition to this some module convenors are in place for some of the year one modules and they have also identified some visiting lecturers and experts who will be involved with the delivery of the programme. The business plan outlines any anticipated costs relating to recruitment and will be reviewed annually.

	 Quality activity 3: the education provider explained the mechanisms they had in place to ensure there were an appropriate number of qualified and experienced practice educators to support practice-based learning. The programme meets all the relevant HCPC education standards and therefore should be approved. 		The education provider offers a range of facilities to support the programme. These include lecture theatres, classrooms and laboratories with specialist facilities such as sensory and cognitive testing suites and product development kitchens. Learners will also have access to the Hugh Sinclair Nutrition Research group facilities, which include Hugh Sinclair clinical trials unit and exercise and performance laboratories.
Programmes Programme name		Mode of study	Nature of provision
MSc Dietetics		FT (Full time)	Taught (HEI)

Appendix 2 – list of open programmes at this institution

Name	Education provider	Mode of study	First intake date	Programme status	Profession	Modality	Annotation
MSc Speech and Language Therapy	University of Reading	FT (Full time)	01/01/2001	Open	Speech and language therapist		
MSci Speech and Language Therapy	University of Reading	FT (Full time)	01/09/2018	Open	Speech and language therapist		
PGCert Independent and Supplementary Prescribing for Allied Health Professionals	University of Reading	PT (Part time)	01/01/2020	Open			Supplementary prescribing; Independent prescribing
PGCert Supplementary Prescribing for Allied Health Professionals	University of Reading	PT (Part time)	01/01/2020	Open			Supplementary prescribing