
Approval process report

University of Worcester, diagnostic radiography, 2022-23

Executive Summary

This is a report of the process to approve a diagnostic radiography programme at University of Worcester. This report captures the process we have undertaken to assess the institution and programme(s) against our standards, to ensure those who complete the proposed programme(s) 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
- Recommended all standards are met, and that the programme should be approved
- Decided that all standards are met, and that the programme is approved

Through this assessment, we have noted:

- The following are areas of best practice:
 - The visitors recognised the education provider's approach to the introduction of the new practice-based learning and involving other local education providers.

Previous consideration	Not applicable. The approvals was not referred from another process.
Decision	The Education and Training Committee (Panel) is asked to decide: <ul style="list-style-type: none">• whether the programme(s) is / are approved
Next steps	Outline next steps / future case work with the provider: <ul style="list-style-type: none">• The provider will be undertaking their next performance review, in 2023-24 academic year

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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(s) detailed in this report meet our education standards. The report details the process itself, evidence considered, outcomes and recommendations made regarding the programme(s) approval / ongoing approval.

Our standards

We approve education providers and programmes that meet our education standards. Individuals who complete approved programmes will meet proficiency standards, which set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

Our regulatory approach

We are flexible, intelligent and data-led in our quality assurance of programme clusters and programmes. Through our processes, we:

- enable bespoke, proportionate and effective regulatory engagement with education providers;
- use data and intelligence to enable effective risk-based decision making; and
- engage at the organisation, profession and programme levels to enhance our ability to assess the impact of risks and issues on HCPC standards.

Providers and programmes are [approved on an open-ended basis](#), subject to ongoing monitoring. Programmes we have approved are listed [on our website](#).

The 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:

Shaaron Pratt	Lead visitor, diagnostic radiographer
Mark Widdowfield	Lead visitor, diagnostic radiographer
John Archibald	Education Quality Officer

Section 2: Institution-level assessment

The education provider context

The education provider currently delivers six HCPC-approved programmes across four professions. It is a higher education institution and has been running HCPC approved programmes since 2007. The paramedic and supplementary prescribing programmes which started in 2007 are now closed.

This programme under review sits within the education provider's College of Health, Life and Environmental Science.

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	Occupational therapy	<input checked="" type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	2013
	Paramedic	<input checked="" type="checkbox"/> Undergraduate	<input type="checkbox"/> Postgraduate	2017
	Physiotherapist	<input checked="" type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	2013
Post-registration	Independent Prescribing / Supplementary prescribing		2014	

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	672	697	2022	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

				<p>proposing through the new provision.</p> <p>As detailed in quality themes 3, 4, 5 and 6 the visitors sought reassurance there were sufficient resources for the programme and were assured.</p>
Learners – Aggregation of percentage not continuing	3%	4%	2019-2020	<p>This data was sourced a data delivery. This means the data is a bespoke Higher Education Statistics Agency (HESA) data return, filtered bases on HCPC-related subjects.</p> <p>The data point is above the benchmark, which suggests the provider is performing below sector norms.</p> <p>When compared to the previous year’s data point, the education provider’s performance has been maintained.</p> <p>We explored this by considering factors which could affect the learner experience on the programme.</p>
Graduates – Aggregation of percentage in employment / further study	94%	97%	2019-2020	<p>This data was sourced from a data delivery. This means the data is a bespoke HESA data return, filtered bases on HCPC-related subjects.</p> <p>The data point is above the benchmark, which suggests the provider is performing above sector norms.</p> <p>When compared to the previous year’s data point,</p>

				<p>the education provider's performance has dropped by 1%.</p> <p>We did not explore this data point through this assessment because the education provider is performing above sector norms.</p>
Teaching Excellence Framework (TEF) award	n/a	Silver	June 2017	<p>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."</p> <p>We explored this by considering factors which could affect the quality of teaching on the programme.</p>
National Student Survey (NSS) overall satisfaction score (Q27)	74.9%	72.2%	2022	<p>This data was sourced at the summary. This means the data is the provider-level public data.</p> <p>The data point is below the benchmark, which suggests the provider is performing below sector norms.</p> <p>When compared to the previous year's data point, the education provider's performance has dropped by 23%. However, the previous year's score was sourced at the subject level and hence the large swing in results.</p> <p>We explored this by considering factors which could affect the learner experience.</p>

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 –**
 - Programme information is accessible on the webpages of the education provider. In line with current education provider practices and expectations, the education provider has set appropriate entry requirements, including for those who have studied outside of the UK.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.

- **Assessing English language, character, and health –**
 - To reflect the standards of education and training, applicants are expected to have GCSE grade 4 or above in English, Maths, and a science or equivalent qualifications. To reflect the standards of proficiency for radiographers, applicants must be able to communicate in English to the standard equivalent to IELTS level 7, with no element below 6.5.
 - Applicants are required to have enhanced disclosure and barring service (DBS) clearance. This is arranged by the education provider for applicants accepting an offer for a place. References are reviewed for each applicant to assure of good character. All shortlisted applicants are assessed of their understanding of attributes, values, and behaviours related to professionalism.
 - Applicants are also required to satisfy the education provider's health requirements and have occupational health clearance. This is arranged by the education provider.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.

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

- Applicants may apply for consideration of recognition of prior learning. These are considered on an individual basis and scrutinised internally by two assessors and externally by the external examiner. All successful applications are recorded through the learning, teaching and quality enhancement and registry services and reported via the education provider's governance system.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Equality, diversity and inclusion –**
 - No applicant is subject to discrimination on grounds such as race, gender, age, sexuality, parental status, marital status, and disability status. Recruitment of staff and applicants is subject to the Equality and Diversity Policy.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.

Non-alignment requiring further assessment: None

Management and governance

Findings on alignment with existing provision:

- **Ability to deliver provision to expected threshold level of entry to the Register¹ –**
 - The programme is subject to the requirements of the education provider's Taught Courses Regulatory Framework and Assessment Policy which meets the Quality Assurance Agency (QAA) (2014) UK quality code for higher education. The education provider delivers education across a range of professions.
 - An external examiner is appointed to provide an external overview of academic and professional standards.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Sustainability of provision –**
 - The education provider established partnerships with local NHS Trusts and private / voluntary organisations within their integrated care

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

system. The education provider reviews resourcing to ensure there are appropriate resources for programme delivery.

- The education provider has an annual budget process and performance against this budget is monitored monthly, with any changes from the original budget updated in the full year forecast. These processes capture additional resource or capital investment requirements and consider any increase in learner numbers.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Effective programme delivery –**
 - Programmes have a programme specification which aligns with:
 - the requirements of the Taught Courses Regulatory Framework;
 - HCPC standards of education and training; and
 - the professional body curriculum framework.
 - The programme handbook contains information about how the programmes are run.
 - The programme is compliant with the education provider's Annual Evaluation Reporting requirements. This enables programme teams and the wider education provider to evaluate the academic health of the programme, to identify good practice, strengthen accountability and act based on review and analysis. Through this, quality assurance of standards is maintained, and enhancements are identified to ensure the programme remains current and vibrant. The programme is subject to the education provider's six-yearly periodic review.
 - The programme meets the education provider's requirements for the regulations for the appointment of external examiners.
 - The education provider stated the learner voice is central within management and governance of this programme. Two learner and staff liaison committee meetings occur per academic year. The learner voice feeds into and informs the curriculum through consideration of learner surveys and module evaluations. The Academic Representation Committee and programme representatives ensure there is active and constructive learner engagement to provide assurance and enhancement of quality. Learner programme representatives' feedback on experiences on the programme, the school and college. They work with education provider staff to bring about learner-led change which will have an impact for their and future cohorts. The education provider aims to empower learners to take a leading role in enabling change, resulting in a more rounded learning experience.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.

- **Effective staff management and development –**
 - The education provider operates robust staff recruitment processes. All staff are offered an induction programme and mentorship. All academic staff new to teaching are supported to undertake the Postgraduate Certificate in Learning and Teaching in Higher Education. The education provider has a substantial staff development and training programme. This is in accordance with the staff development policy.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.

- **Partnerships, which are managed at the institution level –**
 - The education provider has effective partnerships with local NHS Trusts and voluntary and independent sector healthcare provision. They work with practice-based learning partners to ensure the requirements of the policy for management of practice-based learning and work-based learning are met. This includes risk assessment, health and safety, and auditing to assure there are learning opportunities and quality of the learner experience is maintained.
 - The programme team meets regularly with practice educators to review practice-based learning provision, including capacity and compliance, learner experience and outcomes. The Head of School meets regularly with allied health professions leads across NHS Trusts and the integrated care system.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.

Non-alignment requiring further assessment: None

Quality, monitoring, and evaluation

Findings on alignment with existing provision:

- **Academic quality –**
 - The programme is compliant with the Course Planning and Approval / Re-approval Process, and the Annual Evaluation Process. Assurance of academic quality is demonstrated through benchmarking to internal and external benchmarks. An external examiner is appointed to provide oversight of quality and academic standards.
 - Quality is reflected through the appointment and continuing professional development of teaching and administrative staff. Staff complete requirements of peer-supported review of teaching and staff appraisal review for development, achievement, and performance each academic year.

- This aligns with our understanding of how the education provider runs programmes.
- We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Practice quality, including the establishment of safe and supporting practice learning environments –**
 - The programme complies with the education provider’s policy of the management of practice-based learning and work-based learning. The education provider reviews Care Quality Commission (CQC) reports and completes exceptional reporting. The education provider meets quarterly with NHS England and has the processes in place to satisfy all quality review, monitoring and reporting requirements for the current provision.
 - Learners evaluate their practice learning after each practice-based learning. These evaluations are reviewed by the programme team, across the school and across the wider education provider to review themes and respond. Practice evaluations are shared with practice partners and summaries of the evaluations are incorporated into the practice-based learning audit.
 - Where concerns are raised, processes are in place to work in collaboration with practice partners to agree and implement action plans. The education provider has implemented a process of ‘speaking up’. This is to support and enable learners to raise concerns about their peers, practice colleagues or practice-based learning.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Learner involvement –**
 - Learners are involved in all aspects of curriculum development, delivery, and evaluation. Learners are represented at approval events to ensure their voice and learner’s experience is central to the approval process. Learners are required to evaluate all modules, and module leaders’ feedback to learners to ‘close the loop’.
 - In addition, learners are asked to take part in an annual programme experience survey or the National Student Survey (NSS) in their final year of study. Programme leaders respond to these surveys. Learner and staff liaison committees are scheduled twice a year.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Service user and carer involvement –**

- The education provider has a service user and carer group, IMPACT. Those involved in IMPACT have experience of both contemporary and historical experiences of health services. They are intrinsic to the work and ethos of the education provider. New programme developments involve the involvement of IMPACT members from the outset. Their involvement in programmes is holistic, through involvement in recruitment, teaching, assessment, and review.
- Co-ordination is via a part-time principal lecturer and dedicated administrative support. The co-ordinator arranges induction and training, liaises with the range of allied health disciplines, meets regularly with the IMPACT group, and allocates work. Members are remunerated for pro-active input, such as teaching or assessment. IMPACT members are part of both admissions and staff selection processes. Involvement in learning and teaching ranges from members 'telling their stories' to offering critique on policy, theory, and practice.
- This aligns with our understanding of how the education provider runs programmes.
- We think this as the education provider has indicated there have not been any changes to how they meet this area.

Non-alignment requiring further assessment: None

Learners

Findings on alignment with existing provision:

- **Support –**
 - Learners are offered a range of support services. These include:
 - Wellbeing support;
 - Careers and employability;
 - Chaplaincy;
 - Counselling and mental health;
 - Disability and dyslexia; and
 - Money advice.
 - Every learner is allocated a Personal Academic Tutor (PAT). They are required to meet with their PAT a minimum of four times a year in the first year of their studies and a minimum of three times a year thereafter. Personal academic tutoring supports learners in engaging with the academic requirements and expectations of their learning, and professional and personal development.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Ongoing suitability –**

- Learners are subject to the education provider's Fitness to Practice Procedures, Student Disciplinary Procedures, and the Student Attendance Policy. All learners are required to confirm their good health and good character at the start of each academic year.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Learning with and from other learners and professionals (IPL/E) –**
 - The programme sits within the College of Health, Life and Environmental Science and is subject to the requirements of the college's Interdisciplinary Learning Policy (IDL). Learners have timetabled sessions to learn with, about and from other professionals, learners, and academics. IDL is incorporated into curriculum development.
 - IDL takes place in different formats including case studies, simulated learning, and augmented and virtual reality. The education provider has in place a strategic lead for IPE.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Equality, diversity and inclusion (EDI) –**
 - The education provider is committed to EDI and considers it is integral to excellence in teaching and learning. In line with current education provider practices and expectations, EDI is embedded and promoted in the development of this programme. The education provider's EDI Policy Statement sets out their commitment and responsibilities about EDI. The education provider's Equality, Diversity and Inclusion Framework 2022-2027 describes the themes, areas of focus, and governance of EDI from 2022 - 2027.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.

Non-alignment requiring further assessment: None

Assessment

Findings on alignment with existing provision:

- **Objectivity –**
 - The education provider's Assessment Policy requires internal and external verification of assessments, one of the processes through

which objectivity is assured. The programme satisfies this policy's standardisation procedures. This ensures the programme team are familiar with, and understand, the marking standards and conventions in relation to giving feedback.

- The programme meets internal moderation procedures. This ensures academic standards are appropriate and consistent across programmes and subject teams and feedback reflects agreed assessment policies and assessment criteria. Therefore, the assessment outcomes are fair and reliable.
 - The programme is responsible for external moderation. External examiners are consulted and agree a schedule for standardisation and internal and external moderation of assessments.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Progression and achievement –**
 - The programme complies with the requirements of the education provider's Taught Courses Regulatory Framework. Progression and achievement decisions are ratified by the board of examiners.
 - Learners will need to achieve 120 credits at each level to progress to the following year of study. There is no compensation between assessments for modules where a practical skill component exists. Learners need to achieve all elements of their programme to be eligible to apply for registration with HCPC.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Appeals –**
 - The programme complies with both the Student Academic Appeals Procedures (2021) and the Student Complaints Procedures (2018). The appeals procedures define the grounds for making an appeal and describe how they are investigated and heard. The complaints procedures defines the grounds for learners to bring their dissatisfaction or concern to the attention of the education provider and how the complaint will be investigated and heard.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.

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.

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) Diagnostic Radiography	FT (Full time)	Radiographer, Diagnostic Radiographer	25 per cohort, 1 cohort per year	11/09/2023

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.

Data / intelligence considered

We also considered intelligence from others, as follows:

- NHS England Midlands - We received information considering current pressures regarding practice-based learning in the Midlands. The information was reviewed but we considered it would not impact on this assessment.

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 – future collaboration between education provider and practice education partners

Area for further exploration: The visitors noted the minutes and notes of recent meetings between practice education providers and the education provider. They therefore considered there had been effective collaboration in the development of the programme. However, the visitors were unable to see evidence of how regular and effective collaboration will take place in the future.

For example, the visitors considered the minutes did not indicate any action points for ongoing discussion. They were therefore unclear of any future actions and how any future actions would be recorded and would be subsequently worked on. The visitors also noted the meeting notes did not indicate who the attendees were, or their roles. The visitors were unable to see whether the most appropriate individuals would be attending these meetings to ensure appropriate collaboration.

The visitors were therefore unsure whether the collaboration between practice education providers and the education provider would continue once the programme gained approval. Therefore, they were unable to determine if this was regular or effective. The visitors sought more information about these areas.

Quality activities agreed to explore theme further: We decided to explore this by requesting an email response from the education provider. We thought this was the most effective way to explore the theme as we decided it was a query to which we needed to clarify our understanding.

Outcomes of exploration: The education provider informed the visitors that regular meetings will take place between the practice educators and the academic team. There will be practice-based learning feedback meetings held by the education provider which practice educators will be invited to. These meetings will involve gaining feedback from clinical staff and provide updates on new developments within both the academic and clinical setting. Minutes will be taken and sent to all practice-based learning sites to ensure the information is available. Feedback is welcome from those who are not able to attend. The education provider envisaged these meetings will ensure all parties are fully informed of changes and developments and can make any necessary changes.

The education provider will also have regular meetings with the NHS England West Midlands Diagnostic Radiography Workforce Action Group. This will ensure they know about local developments and are involved in key discussions.

The education provider informed the visitors of the action points relating to the areas which needed addressing from each meeting and who was responsible for each task. The visitors were informed of the roles of staff who attended the meetings. We were satisfied with the evidence provided and considered the quality activities adequately addressed the issues raised.

Quality theme 2 – ensuring sufficient capacity of practice-based learning

Area for further exploration: The visitors recognised the education provider will introduce new practice-based learning sites and involve local education providers in discussions regarding these areas. However, they were unclear how the education provider will manage these places in terms of monitoring the learner experience relating to the capacity of practice-based learning. They were also unclear how the education provider ensures there are a sufficient number of practice-based learning sites should learner numbers increase. The visitors were therefore unsure of the process so all learners on the programme, including future learners, will have access to practice-based learning which meets their learning needs.

The visitors therefore sought more information about these areas.

Quality activities agreed to explore theme further: We decided to explore this by requesting an email response from the education provider. We thought this was the most effective way to explore the theme as we decided it was a query to which we needed to clarify our understanding.

Outcomes of exploration: The visitors were informed an annual meeting will be held between the Trusts providing practice-based learning and education providers, in the geographical region, who have learners undertaking practice-based learning at the Trust. This will facilitate discussions surrounding the capacity of practice-based learning and the accommodation of learners from each education provider. These numbers will be decided before recruitment onto the programmes commences. In addition, the visitors learnt that all practice-based learning is evaluated by audits. This will take place every three years and will be shared between education providers in the geographical region.

After reviewing the above information, the visitors required more information about this area. The visitors considered the triennial practice-based learning audit may not be able to capture changes to capacity which occur in that period. They were therefore unclear how this practice-based learning audit ensured there is availability of practice-based learning for all learners. They sought more information about this. We decided to explore this by meeting with the education provider.

The education provider informed the visitors they meet with practice education providers regularly. We learnt the number of places for practice education is reviewed on an annual basis. We were also informed the education provider meets with other providers in their geographical region to agree their capacity of practice education as part of the tripartite agreement. It was clear to the visitors that collaborative arrangements were in place, across the region, to ensure that all approved programmes had sufficient practice capacity.

The visitors considered the education provider had the processes in place to ensure practice education for all learners. We were satisfied with the evidence provided and considered the quality activities adequately addressed the issues raised.

Quality theme 3 – recruitment of an adequate number of appropriately qualified and experienced teaching staff

Area for further exploration: The visitors recognised the programme team currently has one whole time equivalent (WTE) member of staff who has a radiography qualification. They understood two physiotherapists, each 0.8 WTE, and one professor of sports, health, and exercise, of 1 WTE, are also part of the programme team. The visitors were unsure how all areas specific to diagnostic radiography, such as computed tomography, would be taught with such a programme team.

The visitors noted the use of visiting or honorary lecturers on the programme, to deliver sessions in their area of expertise. The visitors understood, although, they will be subject to an employment contract, they are not employed directly by the education provider. They therefore considered their engagement may be more limited than those employed by the education provider and may not be available to deliver teaching sessions as required.

They were unclear about whether the programme would have an appropriate number of staff, with the appropriate skills and experience, to deliver the programme. For example, they were unsure how the education provider ensures all subject areas are delivered by educators with relevant specialist knowledge and expertise. They were also unsure whether the education provider planned to recruit more staff members, and whether they had sufficient resources to employ additional staff to cover staff sickness and leave. They sought more information about this.

Quality activities agreed to explore theme further: We decided to explore this by requesting an email response from the education provider. We thought this was the most effective way to explore the theme as we decided it was a query to which we needed to clarify our understanding.

Outcomes of exploration: The education provider informed the visitors they are currently recruiting for a member of staff who can deliver material in computed tomography, as this is a core requirement of the programme. We were also informed the education provider had requested an additional member of staff to teach on the programme.

We were informed clinical staff are keen to be involved in the delivery of the programme. They will deliver more specialist topic areas such as magnetic resonance imaging, ultrasound, and image interpretation. As part of this, the visitors were informed there are opportunities for joint posts and secondments, and this will be further explored as learner numbers increase. The education provider informed us they use a model of engaging clinical staff on associate or visiting lecturer contracts and that it works well in other areas of the school. They will use the same model for the proposed programme.

After reviewing the above information, the visitors noted the education provider was not at the stage of recruiting an additional member of staff. They remained unclear

about whether the education provider would have a sufficient number of staff with the appropriate background to deliver the programme. They therefore sought more information about this. We decided to explore this by meeting with the education provider.

The education provider informed the visitors they had recently recruited a new member of staff and had had the additional recruitment signed off. They were therefore in the process of recruiting another diagnostic radiographer. The education provider stated that they were looking for someone with academic experience to help deliver the first year of the programme. We were informed they had also advertised for associate lecturers for individuals with specialist skills and experience. Associate lecturers would be contracted to prepare, deliver, and assess learners. We were informed the associate lecturers would be expected to have experience of teaching. Successful individuals would have access to, and be supported if they wanted to, undertake continuous professional development. The education provider also informed us associate lecturers would have access to a programme for staff who were moving into teaching. The education provider would also observe their teaching.

The visitors considered the education provider has an effective plan in place to recruit for both a diagnostic radiographer and for associate lecturers. This would ensure subject areas are delivered by educators with relevant specialist knowledge and expertise. We were satisfied with the evidence provided and considered the quality activities adequately addressed the issues raised.

Quality theme 4 – subject specific resources

Area for further exploration: The visitors noted the resources provided for the programme. These included:

- the education provider's virtual learning environment
- the library, including reading lists and subject librarians
- the website, including subject pages
- learning materials
- LearnSmart and AnatomyTV, and
- the new Health and Wellbeing School building.

The visitors recognised some of the above resources are specific to diagnostic radiography, for example, the subject librarian and subject pages on the website. They considered the resources listed also indicate there is sufficient from a generic learning and teaching perspective. However, the visitors were unsure whether there were more programme-specific learning and teaching resources. The visitors were therefore unsure whether the resources to support learning in all settings were appropriate to the delivery of the programme.

They therefore sought more information about this.

Quality activities agreed to explore theme further: We decided to explore this by requesting an email response from the education provider. We thought this was the most effective way to explore the theme as we decided it was a query to which we needed to clarify our understanding.

Outcomes of exploration: The education provider outlined appropriate profession specific resources which would be available for the programme. For example:

- an x-ray room in the Alexandra hospital in Redditch, within Worcestershire Acute Trust, which has been secured for practical teaching. This room will be available all day on each specified date of teaching.
- image viewing sessions in a computer room each week to follow up on the positioning teaching. Learners will have a bank of images to work through from each anatomical area.
- a dedicated anatomy lab where learners access skeletons, individual bones, and other anatomical models to consolidate learning of radiographic anatomy.
- simulation activities which will take place in different settings, including the x-ray room. Further simulation will be conducted with service users in the classroom. Inter-professional simulation will be facilitated by staff members in a separate building which depicts a mock hospital. The focus of this will not be about specific radiographic technique, but about justification of requests, patient and staff management and raising awareness of radiation legislation.

We were satisfied with the evidence provided and considered the quality activities adequately addressed the issues raised.

Quality theme 5 – ensuring the capacity of staff in practice-based learning, with appropriate knowledge, skills and experience

Area for further exploration: The visitors noted the practice placement handbook highlights the roles and responsibilities of the different staff members within the clinical and academic environment. The visitors understood practice educators and supervising radiographers will be involved with learning. However, the visitors were unsure of the capacity of practice educators and supervising radiographers who will be working with learners in practice-based learning. The visitors therefore were unsure whether there is enough support for learners to take part in safe and effective practice-based learning.

The education provider also informed the visitors practice educators will have a minimum of two years' experience as a diagnostic radiographer and have completed the education provider's practice educators' course or another recognised course for practice educators. The visitors however were unsure how the education provider will check these requirements, including the requirement to be on HCPC Register.

The visitors therefore sought more information about the process to ensure there is an adequate number of staff involved in practice-based learning who are appropriately trained and on the Register.

Quality activities agreed to explore theme further: We decided to explore this by requesting an email response from the education provider. We thought this was the most effective way to explore the theme as we decided it was a query to which we needed to clarify our understanding.

Outcomes of exploration: The visitors were informed there are two Practice Educators within Worcester Acute Trust and one in Wye Valley Trust. The education provider stated these staff will be responsible for learners overall learning but may not have day to day involvement. We were informed the supervising radiographer will be a qualified radiographer who is working within the same area as the learner. There may be more than one radiographer in each area, but one will be the named supervisor for each learner. The visitors considered the education provider has been clear about their process to ensure there will be an adequate number of staff involved in practice-based learning.

The education provider informed the visitors attendance on their practice educators training requires candidates to declare they have a minimum of two years' experience and are on the relevant part of the Register. The visitors were informed a register of all attendees will be kept as a record.

After reviewing the above information, the visitors remained unsure how the education provider will check the qualifications and experience of practice educators to support safe and effective learning. They therefore sought more information about this. We decided to explore this by meeting with the education provider.

The education provider informed the visitors Practice Educators, outlined above, will undertake an audit to ensure those educators in practice (clinical educators) have the requisite experience before they put forward to act in this role and undertake the training. We were informed each practice setting is subject to a yearly audit. This audit included details of the numbers and qualification of staff who are available to mentor learners.

The visitors considered the education provider has processes in place to check there is an appropriate number of qualified and experienced individuals in practice-based learning. In addition, that those attending the practice course have the appropriate experience and knowledge. We were satisfied with the evidence provided and considered the quality activities adequately addressed the issues raised.

Quality theme 6 – reflecting the professional body framework

Area for further exploration: The visitors were informed the programme ensures that knowledge, skills, and behaviours are developed and built on across the entire programme. The education provider stated this enables learners to integrate academic development with the professional requirements of the HCPC and College of Radiographers. However, the visitors were unsure whether the College of Radiographers' Education and Career Framework (4th edition) was reflected in the

programme. This framework provided guidance for the education and career development of radiographers and was published in late 2022. The visitors were unsure whether the programme reflects the philosophy, core values, knowledge, and skills of diagnostic radiography. They therefore sought more information about this.

Quality activities agreed to explore theme further: We decided to explore this by requesting an email response from the education provider. We thought this was the most effective way to explore the theme as we decided it was a query to which we needed to clarify our understanding.

Outcomes of exploration: The education provider stated the programme has been mapped to the College of Radiographers Education and Career Framework. The visitors were able to see modules and learning outcomes mapped against curriculum outcomes. This informed them how the programme was mapped to the framework. We were therefore satisfied with the evidence provided and considered the quality activities adequately addressed the issues raised.

Quality theme 7 – time in practice-based learning and the ability to meet the SOPs

Area for further exploration: The education provider informed us learners will attend practice-based learning for two days a week. The visitors noted year 1 learners are scheduled to be in practice-based learning on Thursdays and Fridays. They were unsure when year 2 and 3 learners will be in practice-based learning. They were also unsure the days of the week the summer practice-based learning in years 1 and 2 will take place on. The visitors considered learners could be potentially in practice-based learning on the same days of the week. The visitors were therefore unsure whether any potential overlap would impact on their experience in practice-based learning and their ability to meet the learning outcomes and the SOPs.

They sought more information about this area.

Quality activities agreed to explore theme further: We decided to explore this by requesting an email response from the education provider. We thought this was the most effective way to explore the theme as we decided it was a query to which we needed to clarify our understanding.

Outcomes of exploration: The education provider informed us in each year there are two practice-based learning modules. Each have an academic assessment and a shared clinical assessment. The visitors were informed academic assessments for Diagnostic Imaging Practice 1 (DRAD1004), Diagnostic Imaging Practice 3 (DRAD2005) and Diagnostic Imaging Practice 5 (DRAD3003) will take place in the first semester of each year. The academic assessments for Diagnostic Imaging Practice 2 (DRAD1005), Diagnostic Imaging Practice 4 (DRAD2006) and Diagnostic Imaging Practice 6 (DRAD3004) will be submitted in the second semester of each year. We were also informed practice assessment for all modules will take place at the end of the second semester. The education provider stated this was to maximise the time learners can complete their practice assessments.

All learners will also attend some weekend and night shifts. The education provider informed us there will be a day of overlap in practice-based learning between the 1st and 3rd years on Thursdays. This was so that learners could use as an opportunity for collaborative learning and peer support. Third years will have the opportunity to mentor first year learners and enable peer assisted learning during these times.

The education provider explained how during the summer, learners will attend practice-based learning on their usual days. Therefore, there will be no overlap between 1st and 2nd years during the summer. We were satisfied with the evidence provided and considered the quality activities adequately addressed the issues raised.

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** –
 - Selection and entry criteria were clear and set at an appropriate level for an undergraduate programme. The criteria included GCSE qualifications or equivalent in Maths and English, an enhanced

Disclosure and Barring Service check and occupational health clearance.

- The process to apply for a place on the programme is clearly articulated.
- The visitors therefore considered the relevant standards within this SET area met.

SET 3: Programme governance, management and leadership –

- As detailed in [quality theme 1](#), the education provider meets with practice education providers regularly. These meetings involve gaining feedback from clinical staff and to provide updates on new developments. Minutes will be sent to practice-based learning sites. Feedback is welcome from those who are not able to attend.
- As detailed in [quality theme 2](#), the education provider meets with Trusts providing practice-based learning and other appropriate education providers to discuss the capacity of practice-based learning. Capacity of practice education will be decided before recruitment onto the programme. The number of available places for practice education is reviewed annually.
- The programme team currently contains one whole time equivalent (WTE) member of staff who has a radiography qualification, two physiotherapists, each 0.8WTE, and one professor of sports, health and exercise, of 1WTE. The education provider is currently recruiting for a diagnostic radiographer. Associate lecturers will also be employed on the programme to teach, deliver and mark, as detailed in [quality theme 3](#).
- As detailed in [quality theme 4](#), there are sufficient resources for the programme to run effectively. There are both generic resources, for example, the library and the virtual learning environment, as well as those which are profession specific. For example, an anatomy laboratory.
- The visitors therefore considered the relevant standards within this SET area met.

• SET 4: Programme design and delivery –

- As evidenced through the module descriptors and mapping document, visitors noted the learning outcomes were clearly outlined for the programme.
- Professional behaviour, including the standards of conduct, performance and ethics, are taught throughout the programme. This is demonstrated in the module descriptors.
- A wide variety of teaching and learning methods are used on the programme, such as independent study and taught sessions on campus.
- Integration of theory and practice is central to the programme. Learners attend practice-based learning every week so, the education provider informed us 'their theory and practice has the maximum overlap'.

- Practice learning modules demonstrate learners' requirements to work autonomously. Reflection and reflective practice are embedded into the curriculum. These are evidenced in the module descriptors.
 - The design of the curriculum will enable amendments to be made as practice develops. We noted the education provider will incorporate evidence-based practice across the programme. The curriculum has been designed in consultation with practice partners.
 - As detailed in [quality theme 6](#), knowledge, skills, and behaviours are developed and built on across the entire programme. The programme has been mapped to the College of Radiographers Education and Career Framework.
 - The visitors therefore considered the relevant standards within this SET area met.
- **SET 5: Practice-based learning –**
 - As detailed in [quality theme 5](#), the practice placement handbook highlights the roles and responsibilities of different staff within the practice environment. Practice educators will have a minimum of two years' experience as a diagnostic radiographer. They will have completed the education provider's practice educator's programme or equivalent. Each practice setting undertakes an audit. This audit includes details of practice staff who are available to mentor learners.
 - The education provider has introduced new practice-based learning and involved other local education providers. As part of this, a tri-partite agreement will be signed which considers other education providers and the fair share of practice-based learning spaces.
 - Learners attend practice-based learning for two days a week. They are required to pass a practice-based assessment at each level before they can continue into the following year.
 - Practice-based learning has been secured with two Integrated Care Systems (ICS) across the West Midlands, Herefordshire, and Worcestershire. Each ICS has a range of opportunities to ensure all learning outcomes can be met. The Practice Assessment Document details the learning outcomes for each module. Learners will need to have met all learning outcomes on completion of the document.
 - The education provider carries out audits yearly for each practice-based learning site and shares these between education providers. This sharing of the practice-based learning audits between institutions is a part of the tri-partite agreement between education providers and the two Trusts who are providing practice-based learning.
 - Each practice-based learning site will have at least one practice educator to support learning.
 - As detailed in [quality theme 7](#), in each year there are two practice-based learning modules. Each have an academic assessment and a shared clinical assessment. Practice assessment for all modules will take place at the end of the second semester. All learners will attend

some weekend and night shifts. There will be a day of overlap in practice-based learning between the 1st and 3rd years on Thursdays.

- The visitors therefore considered the relevant standards within this SET area met.
- **SET 6: Assessment –**
 - The learning outcomes of the programme are based on the HCPC standards of proficiency for diagnostic radiographers. The assessments are aligned to allow learners to demonstrate how they meet the learning outcomes.
 - Professional expectations, including the standards of conduct, performance and ethics, are embedded throughout the assessment of practice and theoretical parts of the programme.
 - Learning outcomes are written to ensure they are aligned to the assessment method. Assessments methods are identified in the module descriptors and the programme specification.
 - The visitors therefore considered the relevant standards within this SET area met.

Risks identified which may impact on performance: None

Areas of good and best practice identified through this review: The visitors commend the education provider's approach to the introduction of the new practice-based learning and involving other local education providers as this ensures capacity across the geographical region, rather than solely for the education provider.

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).

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 programmes 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 programmes are approved

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

Appendix 1 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
BSc (Hons) Occupational Therapy	FT (Full time)	Occupational therapist			01/09/2013
MSc (Pre-registration) Occupational Therapy	FTA (Full time accelerated)	Occupational therapist			01/07/2021
BSc (Hons) Paramedic Science	FT (Full time)	Paramedic			01/09/2017
FdSc Paramedic Science (Tech to Para)	FT (Full time)	Paramedic			01/09/2015
BSc (Hons) Physiotherapy	FT (Full time)	Physiotherapist			01/09/2013
MSc (Pre-registration) Physiotherapy	FTA (Full time accelerated)	Physiotherapist			01/07/2021
V300 Non-Medical (Independent and Supplementary) Prescribing Programme	PT (Part time)			Supplementary prescribing; Independent prescribing	01/02/2014