

Agenda Item 10

Enclosure 5

Paper ETC29/02

Education and Training Committee

**NOTES OF MEETINGS OF JOINT VALIDATION / JOINT
QUALITY ASSURANCE COMMITTEES SINCE 1 APRIL 2002**

From the Executive

FOR DISCUSSION AND DECISION

Executive Summary

This item includes the notes of the Joint Validation Committees/Joint Quality Assurance Committees which have met since 1 April 2002.

A number of matters will require the Committee's approval in the terms to have been agreed under the previous item. These matters should all be identified in covering schedules to the notes, except for Radiography where the schedule was still be prepared at the time of despatch. Where there is no schedule, then the notes are for information only, but they may be drawing attention to important issues the Committee will wish to note.

It is planned that a representative from each body will be present to talk to the notes as needed and answer any queries.

**JOINT ACCREDITATION COMMITTEE
of the Health Professions Council
and the Royal College of Speech & Language Therapists**

**A meeting of the JAC was held on Tuesday, 23 April 2002, at
2 White Hart Yard, London SE1 1NX**

MINUTES

Present: Dr Gaye Powell, Chair
Ms Lesley Culling
Dr Susan Edwards
Mrs Aileen Patterson

In attendance: Dr Peter Burley, Deputy Registrar, HPC
Ms Lucinda Pilgrim, HPC
Ms Sylvia Stirling, RCSLT

5/02 Apologies for absence (Item 1)

There were no apologies for absence.

6/02 Minutes of the last meeting (Item 2)

The Committee received and approved Minutes of the last meeting [Minutes 1/02 - 5/02] held on 29 January 2002.

7/02 Work which had taken place since the last meeting (Item 3)

Dr Burley reported on events and work which had taken place since the previous meeting on 29 January 2002.

- (1) The Council for Professions Supplementary to Medicine had ceased to exist on 31 March 2002, and the Health Professions Council had come into being on 1 April 2002.
- (2) To mark the new Council a launch had been held on Wednesday, 17 April at the Queen Elizabeth II Conference Centre in Westminster, at which John Hutton, Minister for Health, had spoken. The event had been well received, and had been an opportunity for a large number of the people whose expertise the CPSM, and now the HPC, would call upon in future.
- (3) The Health Professions Council was now in its first transitional phase, and this would last for twelve months to 31 March 2003. During this phase arrangements for validation/accreditation of pre-registration courses would continue as before, except that the Reports from the

- Panel visits would be sent to the Education and Training Committee for approval, rather than to the uni-professional boards, which no longer existed.
- (4) Diane Waller (Arts Therapists) is the chair of the Education & Training Committee and she has said that she wants to work as closely as possible with the professional bodies in determining the way forward on quality assurance for pre-registration courses. The Educationalists Forum meeting on 22 May would be joint with the Education & Training Committee. This would be an important meeting for considering the issues to be consulted on, and to ensure that the right questions are being asked.
 - (5) The Allied Health Professions Forum has been given the contract for providing advice on CPD for the professions. Again, it was important that the questions surrounding CPD, including what, and how it is to be monitored, are framed.
 - (6) Anna van der Gaag is the profession representative on the Education & Training Committee, which is a statutory committee of the HPC, and Jacki Pearce is on the Registration Committee, which is advisory only to the HPC.
 - (7) Re-accreditation of courses will be dealt with at the level of the Education & Training Committee, whereas new courses will be sent for approval to the full Council.
 - (8) The consultation period for all matters relating to the HPC will start on 1 July 2002 with a consultation document and the period for response will be until end September. Feedback will be published on 1 November, with the new arrangements published on 1 December. The new arrangements would be taken to the Privy Council on 3 February 2003, to come into effect on 1 April 2003, when all old systems will be replaced.
 - (9) The results of the QAA Pilot visits may inform the new working arrangements, but there are a large number of issues surrounding the pilot visits which will need consideration.
 - (10) Sites in the first-wave of the modernising agenda were not proving particularly problematic in terms of quality assurance and validation, because the courses were being re-arranged, rather than having significant changes to content. Under these circumstances, it was simply necessary for the JAC to receive the documentation concerning the course, and to make recommendations to the Education & Training Committee as to its acceptability.

Responses to re-accreditation reports

The Committee received an oral report from Lucinda Pilgrim on the current situation relating to previous visits and re-accreditations, and noted that there was action outstanding in providing the Privy Council with all documentation relating to all SLT pre-registration courses, which included all possible qualifications, ie with or without honours, etc.

Sylvia Stirling and Lucinda Pilgrim agreed to go through the degree list and check on documentation. Outstanding documentation was likely to be available in RCSLT if Lucinda had not received it from the HEIs concerned.

Re-accreditation visit reports

10/02 City University (Item 6)

The Committee considered a report prepared by the Panel who visited City University on 21 and 22 March 2002, and noted that some amendments were required to the document before it was passed to City University to look at any corrections of fact, and to the Education & Training Committee for approval.

The secretary was asked to make the amendments, and re-circulate the report to the Panel members.

Future re-accreditation visits

11/02 Manchester Metropolitan University (Item 7)
BSc(Hons) Speech Pathology & Therapy
BSc(Hons) Psychology and Speech Pathology

The Committee suggested Panel members for the re-accreditation visit to Manchester Metropolitan University, and noted the dates proposed by the University, of 3 and 4 July 2002.

12/02 University of Sheffield (Item 8)
BMedSci(Hons)(Speech)

The Committee suggested Panel members for the re-accreditation visit to Sheffield, and noted the dates of 21 and 22 November were best dates for the Panel to use with the University.

13/02 University of Reading (Item 9)
Revisions to BSc(Hons) Linguistics & Speech Pathology

The Committee considered what action should be taken relating to the revisions to the undergraduate course at the University of Reading, and agreed to ask for documentation on the changes to be provided by the next meeting in September.

14/02 College of St Mark & St John (Item 10)
Multi-professional education for level 1,
BA(Hons) in Human Communication Studies

The Committee considered action to be taken relating to the revisions to the undergraduate course in the light of the Peninsula Collaboration initiative, and agreed to request full documentation on the changes to be available for their next meeting in September.

Similarly, the change from BA to BSc could be dealt with by post, and would not require any visit.

Accreditation/validation of new courses

15/02 University of East Anglia (Item 11)

The Committee noted that the University of East Anglia was proposing to introduce a speech and language therapy pre-registration course with effect from 1 October 2003, and that advertising for a course leader was to be placed in the national press very shortly.

The Committee discussed accreditation arrangements, and agreed that documentation for the course should be requested, at least so far as it had been prepared, to be view at the next meeting in September.

16/02 Joint Accreditation Committee: Panel Members (Item 12)

The Committee considered the list of possible Panel members, willing to act on behalf of the JAC, which has been submitted to the Health Professions Council, and requested that the names of Julia Robb and Jeanette Seaman should be added immediately. The Education & Workforce Development Board should be invited to put forward the names of additional managers for the list, which is given below:

James Law	Vickie Joffe
Anne Hesketh	Sue Franklin
Thomas Klee	Susan Edwards
Joy Stackhouse	Bill Wells
Shelagh Brumfitt	Rosemary Varley
Sian Munroe	Calum Delaney
Eryl Evans	Jane Maxim
Rosalind Gray	Aileen Patterson
Julie Nettleton	Jenny Ford
Alison Ross	Monica Bray
Martin Duckworth	Gaye Powell
Sandra Robertson	Anne French
Jois Stansfield	Catherine Mackenzie
Lesley Culling	Lorna Povey
Jacki Pearce	Chris Code
Daphne Waters	Elspeth McCartney
Karen Bunning	Julia Robb
Jeanette Seaman	Fiona Gibbon

Managers are listed in bold.

17/02 Any other business (Item 13)

Education & Workforce Development Board

- (1) The Committee referred the matter of SLT student numbers and the needs of the national workforce for discussion at the Education & Workforce Development Board, particularly relating to the need for national planning.

Police Checks

- (2) Peter Burley referred to the NHS website regarding police checks, and also reported that Universities UK will consult on this matter shortly. Paul Turner, at the Council of Nursing Deans was also knowledgeable on the situation and it was suggested the secretary get in touch with him on this matter.

In discussion it was noted that the Criminal Records Bureau does not cover Scotland.

SLT Benchmark

- (3) The course Leader at the University of Strathclyde had drawn attention to the fact that the benchmark gave 105 weeks as the minimum period for an undergraduate degree, whereas at Strathclyde the period was 97 weeks. In discussion Peter Burley expressed his view that the benchmark was only that, not a rule, and therefore that there was no reason why there should not be variation from it.

18/02 Dates of meetings for the year (Item 14)

The Committee agreed that it was appropriate that each member had an alternate to attend in case the member was unable to do so. The Secretary would liaise with JAC members, the Chair of the RCSLT Education Board, and the HPC professional member to provide names of alternate members.

The next meeting will be held at

12.30 p.m. on Monday, 16 September 2002,

with a sandwich lunch served beforehand.

Circulation:

Dr Gaye Powell, JVC Chair

Ms Lesley Culling

Dr Susan Edwards

Mrs Aileen Patterson

Dr Peter Burley, HPC

Ms Lucinda Pilgrim, HPC

Dr Sue Franklin, RCSLT Chair, Education & Workforce Devt. Board

Mrs Sylvia Stirling, JAC Secretary

MINUTES of a meeting of the '1st Transitional Period Pre-registration Education and Training Group for Chiropody' (so designated by the HPC and formally known as JQAC), held at the offices of the Society on Thursday 9th May at 10.30 am

Present: Mrs J McInnes (PB)
Paul Shenton (SB)
Mr G Burrow (PB)
Mr W McCartney (SB)
Mr D Jessett (SB)
Miss G French (PB)
Mr P Frowen (SB)
Miss P Sabine (SB)
Mr S Baird (PB) (In the Chair)
Mr P Frowen (SB)

In Attendance: Mr G Milch (SB)
Mr D Ashcroft (PB) (Director of Education & Development)
Miss A Hart (PB) (Undergraduate Education Officer)
Mr D Lorimer (JQAC Visits Co-ordinator)
Mr P Graham (PB) (Chairman of Council)

Apologies: Ms H De Lyon (PB) (Chief Executive)
Mrs P Renwick (PB)
Mr M Potter (PB)
Mrs G Bligh (SB)
Mr R Ariori (SB)
Ms C Farrell (SB)
Professor S Frost (SB) (Educationalist)
Mrs J Shanks (SB)
Mr J Black (SB)

NB (PB) Professional Body
(SB) Statutory body

**JQAC
Membership
17**

An E-mail from Dr Peter Burley regarding the new composition of the Pre-registration Education and Training Group for Podiatry (PRETWG-P) was received. It was noted that Mr Alan Hutchinson had not been included. Those not re-included on PRETWG's were those who ceased to fulfil the capacity in which they were originally appointed. This was a specific new consequence of the HPO, which makes continuing to fulfil a capacity a requirement of continued appointment. It was agreed that Alan should be invited to the next meeting to mark his many years of excellent voluntary service on JQAC and the Board as the educationalist appointed by the Privy Council. It was also noted that all the appointments/re-appointments were for the HPC's transitional period only.

**Minutes
18**

Miss Sabine proposed and Mr Graham seconded that the minutes be approved as an accurate record. This was agreed.

Matters Arising
19

It was noted (Minute 91) that the paper on Clinical Training had not been re-circulated. The paper would be sent out with a request for comment in time for the next meeting

University of Salford
20

In response to her letter on University Degree Classifications, it was agreed that Mr Ashcroft would write to Ms Rona Howard, Associate Dean (Teaching) at the University of Salford to establish if registration was coupled with both the honours and an ordinary degree

Listening to the Professions
21

An account of the meeting was given by Mr Shenton. Of note was the intention to determine what the professions had in common, devolution issues and breaking down professional barriers. It was generally felt that a little more clarity on how the rhetoric would be translated into reality would be welcome

QAA
22

An invitation to the Professional Body from the QAA, on behalf of the HPC, to nominate three representatives from the original QAA Benchmarking group to help draft the Standards of Proficiency for the Podiatry section of the Register was discussed. The Committee agreed the three nominations would be: Mr Ashcroft (convenor); Mrs McInnes and Mrs Renwick. There was an inconclusive discussion on what exactly was meant by 'Standards of Proficiency' and in particular the word 'proficiency' but it was agreed that there should not be any dilution from the benchmark statements on which the standards would most likely be based

Qualifying Educational Approval
23

Mr Baird reported on a meeting of Chairmen of JVC's/JQAC called by the Chartered Society of Physiotherapists to discuss the future of qualifying educational approval and review together with the potential for collaboration between all twelve professions. It was apparent that existing mechanisms varied very considerably across the professions. The CSP was keen to lead a project, based on a set of value statements, for an agreed common format for the future. The committee felt the common values were a little imprecise and should concentrate on individual professional training strengths as well as a 'one size fits all strategy' based on the experience of one or two professions. The principle of multiprofessional validations/approvals was accepted, but different HEI's had arbitrary 'ad-hoc' groups of health professional courses based on historical accident and not necessarily on the groupings that reflected those who might best 'learn together to work together' in the 'modernised' NHS. The common values were agreed in principle but with the reservation that profession specific strengths were as equally important as multiprofessional ones and should be highlighted and preserved at validation/approval events, particularly where ad-hoc healthcare course groupings were assembled.

**Local
Analgesia
Certificates**
24

It was agreed to change the wording on the certificates issued to both qualifying students and overseas registrants to reflect the approval of the Statutory Body, rather than the CPSM as at present. Overseas applicants would continue to have certificates awarded by the HPC and students by the Society, with the approval of the HPC. It was confirmed that pass lists of students qualifying in 2002 should be sent to the ETC

**Modernising Pre-
Registration Training**
25

Mr Ashcroft tabled a paper on a meeting called by the Cumbria & Lancashire Workforce Development Confederation to discuss key issues to be addressed by the pilot sites (Southampton, Huddersfield, Plymouth and Salford for podiatry) held at the Reebok Stadium, Bolton on 18th April. The WDC were promoting a skilled, flexible workforce with step on/step off programmes of training with *'clearly identified essential/desirable skills and competencies for the two levels of worker'*. Both the professional and statutory body representatives indicated that these two levels of worker did not, strictly speaking, fall within their remit, as neither would be eligible for registration or membership. The key issue would be how the level one and two 'journey' might impinge on the overall final outcomes (QAA Benchmark statement) expected of a student eligible for registration and membership on graduation. There was no clear vision expressed about what the competencies might be at level one and two, though whatever they were they should be multiprofessional and suitable for an Assistant Practitioner at level two. This concept appeared to be open to interpretation at a local level and differently by each institution. There was logic in the opportunity to step off as a Footcare Assistant at level one and as an Assistant at level two and to be able to step back on within a reasonable time interval. However, the waters appeared muddied with the addition of a vague ideological multiprofessional concept at these levels, with no expressed idea of the practical, as distinct from the theoretical multiprofessional competencies required for employment.

**New Generation
Project**
26

Mr Ashcroft reported on progress to date as the podiatry representative on the Steering Group. Minutes of meetings were available on the New Generation Website. The intention is to develop an interprofessional Common Learning Programme across ten professions in two universities (medicine, midwifery, nursing, occupational therapy, pharmacy, physiotherapy, podiatry, radiography-diagnostic & therapeutic and social work). Common modules for shared learning had been identified, spread throughout the duration of the courses. A very large validation/approval event would eventually be required for a projected start date of 2003. The logistical challenge encompassed by this flagship project will be massive.

A report of the validation/approval event held on 22/23 April, attended by Penny Renwick and Mike Potter was received. Essentially the new course documentation was regarded as a 'work in progress' and no final approval could be recommended to JQAC at this stage. The document was to be re-drafted and the externals reconvened with the course team in July to consider progress. At that point the two representatives of JQAC would consider a recommendation to JQAC that approval should be given for one or two intakes providing there was progress on a number of issues. The principal concerns were the development of the training clinic in Plymouth PCT and the commitment of service providers to support the placement programme with evidence of mentor training. A considerable number of other issues also required attention. In view of the report and the lack of a definitive course document, no approval could currently be considered. It was possible that if delay was considerable, postponement of an intake for one year might be an option. Institutional approval was also necessary. A letter from Professor Mary Watkins explaining that Dr Simon Spooner had replaced Anne-Marie Carr, who had declined the offer as programme leader was noted.

a) A request from Dr Margaret Johnson for JQAC to consider the appointment of Mrs Liz Pope as External Examiner was discussed. It was noted she had been appointed by the college and was acting in that capacity already, without prior notification. JQAC was concerned that while Mrs Pope had been in full-time teaching she was no longer so employed and had not been for a number of years but had retired when the Chelsea School had closed. It was understood that she did some occasional part-time clinical teaching but did not strictly fulfil the criteria as laid down in the JQAC Handbook. It was determined that Mr Ashcroft would write to Dr Johnson expressing concern at the late notification and that an examiner with a full-time teaching appointment and current educational expertise should be considered for next year. It was also understood Mrs Pope could not attend the final examinations this year. Mr Ashcroft had suggested to Dr Johnson that Ms Jodi Booth (co-examiner) should act in her place.

b) The response from the Principal of New College Durham on progress regarding the requirements of the Quinquennial Visit was discussed. Mr Widdowson was particularly concerned about the implications of a 'move to withdrawal of approval' and its impact on current and potential future students as the matter of the Bishop Auckland centre was likely to take time to resolve. Following considerable discussion, it was decided that Mr Milch should write to Mr Widdowson explaining the significance of a 'move to withdrawal of approval' and the rationale for this. It was important to emphasise the current good quality of the course but that the issue was the uncertain future of facilities or alternative strategy to provide the necessary clinical training. It was also felt that the Principal at the earliest opportunity should inform students and staff. It was further decided that representatives of JQAC should see Mr Cowie, Chief Executive, Durham and Teeside WDC regarding future provision of facilities for clinical training and the

responsibility of the NHS jointly with HEI's to provide adequate clinical resources to meet its training and manpower requirements. It was further noted that it was the policy of JQAC for all courses to be in HE, not FE

UWIC
29

A letter from Professor Kate Ashcroft, Vice-Principal Academic, University of Wales Institute Cardiff, stating that the funding provided by the National Assembly for Wales will be used solely for improvements to clinical facilities was noted with pleasure

**Camden & Islington
NHS Trust**
30

A letter from the Chief Executive of the Camden & Islington NHS Trust, in response to a letter from Gerald Milch, which had raised concerns about proposed changes to management structures in the Trust were noted. Of particular note was the final paragraph, which carried an accusation of an 'aggressive and threatening approach that was regarded as wholly unacceptable and based on a fundamental misunderstanding of the nature of general management'.

**Glasgow Caledonian
Quinquennial Visit**
31

Mr Baird and Mr Burrow withdrew for this item. The draft report of the visit was tabled, but in the absence of comments on factual accuracy received only that day, the final report could not be considered. It was decided to refer the report to the next meeting

**Matthew Boulton
Quinquennial Visit**
32

A verbal report of the recent visit was received. The written report would follow for the next meeting. A number of issues were discussed, the main points being a move of the College to a new build site in 2005 next to Aston University where podiatry students could share learning with pharmacy and optometry students. The course would remain in FE however, which was not JQAC policy, nor was it favoured by the Workforce Development Confederation despite recognition that students were currently fit for purpose on qualification. However the new agenda for change favoured multiprofessional education in a HE environment and consideration was still being given by the WDC to both the future of the school and the potential for contracting for a further school or replacement school in another University in the region

**Northampton School
Course Re-validation**
33

Appointed JQAC externals could not recommend approval to JQAC. The course document was to be re-submitted before approval could be considered.

Pre-Registration Year
34

Mr Lorimer felt that JQAC should consider recommending that fitness for award and registration should be uncoupled and that students should have a compulsory year working in the NHS after leaving university before gaining registration. He felt the students were perhaps only just about competent, more so in theoretical disciplines but less in clinical and that managers were concerned about clinical standards with students not being as clinically competent as they used to be on qualification. It was agreed that there would be considerable implications in recommending this course of action and that instead the recently qualified should be

mentored for a period on qualification. However, if it was as difficult to provide mentorship as was claimed by the managers, then it would be even more difficult to provide the necessary supervision for a pre-registration year (assuming employment for every graduate near home) and carry out an assessment of competence at the end. It was also felt graduates were competent or they were not, there were no grades of competency. What they all lacked on qualification was experience but this should not be confused with incompetence. It was agreed that this should be further discussed and referred to the Faculty of Undergraduate Education and the Heads of Schools meeting for recommendations to be made to JQAC at a future meeting

Finance
35

Mr Ashcroft reported that the Director of Finance's first quarter committee expenditure analysis showed spending against the Undergraduate Education budget equated to that expected at the half yearly, not first quarter stage. Expenditure codes indicated JQAC institutional visits as the main cost. As the Chief Executive had a remit from Council for every spending committee to stay within budget, JQAC would need to consider what action might be proposed should expenditure for the rest of the year continue at 1st quarter level. Mr Lorimer agreed to produce an estimate of forward visit costs to be presented to the next meeting

AOB
36

- 1) Mr Lorimer requested names to draw on for the Edinburgh Quinquennial Visit. Those suggested were: Miss Sabine; Mr Pickard; Mrs McInnes; Mr Jessett; Miss French and Mrs Bligh
- 2) Miss French requested consideration of a replacement for her on the H&CPEF as she intended to step down. It was felt that Mr Jessett (in his absence) might be interested?
- 3) Mr Shenton would be representing JQAC at the forthcoming revalidation of the course in Brighton in place of Mr Ashcroft
- 4) The request from Plymouth to cease the practice of negative marking for pharmacology was agreed providing the pass mark was marginally adjusted upwards accordingly
- 5) An intercepted email indicating that the BMA were willing to recommend examiners for courses currently not leading to eligibility for registration should be referred to Mr Rawlins (ex BMA Board representative) for action

Date of Next
Meetings
37

Wednesday 17th July 2002 at 10.30
Tuesday 19th November 2002 at 10.30

Signed
17 7 02

Stuart Baird Chairman.....

JOINT VALIDATION COMMITTEE

The College of Radiographers
health professions council

ITEMS FOR HEALTH PROFESSIONS COUNCIL FROM JVC MEETING of 23RD APRIL 2002

A. RECOMMENDATIONS FROM JVC:

* 6.3.2 CITY UNIVERSITY (London) (R&T)

THAT THE RADIOTHERAPY DEPARTMENT, OLDCHURCH HOSPITAL (BARKING, HAVERING AND REDBRIDGE NHS TRUST) BE APPROVED AS A MAJOR CLINICAL PLACEMENT IN ASSOCIATION WITH THE BSc (Hons) RADIOGRAPHY (RADIOTHERAPY) FOR PURPOSES OF STATE REGISTRATION

(following scrutiny of the documentation by a member of the JVC)

THAT THE POSTGRADUATE DIPLOMA DIAGNOSTIC RADIOGRAPHY (WITH ELIGIBILITY FOR STATE REGISTRATION) AND ASSOCIATED CLINICAL PLACEMENTS AT BLOOMFIELD HOSPITAL, MID ESSEX HOSPITALS NHS TRUST AND SOUTHEND HOSPITAL BE APPROVED FOR PURPOSES OF STATE REGISTRATION

(This is a new programme report of the Validation and Definitive Course Document forwarded under separate cover)

6.3.8. SOUTH BANK UNIVERSITY (R&T)

THAT THE RADIOLOGY DEPARTMENT OLDCHURCH HOSPITAL (BARKING, HAVERING AND REDBRIDGE NHS TRUST) BE APPROVED AS A MAJOR CLINICAL PLACEMENT IN ASSOCIATION WITH THE BSc (Hons) DIAGNOSTIC IMAGING (RADIOGRAPHY) PROGRAMME, SOUTH BANK UNIVERSITY FOR THE PURPOSES OF STATE REGISTRATION

(following scrutiny of the documentation by a member of the JVC)

6.3.10. ST MARTIN'S COLLEGE (Lancaster) (R)

THAT THE RADIOLOGY DEPARTMENT X-RAY DEPARTMENT, NORTH TYNESIDE DISTRICT GENERAL HOSPITAL BE APPROVED AS A MAJOR CLINICAL PLACEMENT IN ASSOCIATION WITH THE BSc (Hons) DIAGNOSTIC RADIOGRAPHY PROGRAMME, ST MARTIN'S COLLEGE FOR THE PURPOSES OF STATE REGISTRATION

(following scrutiny of the documentation by a member of the JVC)

* 6.3.11. UNIVERSITY OF SALFORD (R)

THAT THE BSc (Hons) DIAGNOSTIC RADIOGRAPHY, UNIVERSITY OF SALFORD AND ASSOCIATED CLINICAL PLACEMENTS CONTINUE TO BE APPROVED FOR THE PURPOSES OF STATE REGISTRATION

(Report of periodic review forwarded under separate cover)

* Items marked by an asterisk require approval (or approval in principle) by the Committee.

* 6.3.14 UNIVERSITY OF DERBY (R)

Forwarded under Chair's action subsequent to the JVC Meeting

THAT THE RADIOLOGY DEPARTMENT AT QUEENS HOSPITAL, BURTON HOSPITALS TRUST BE APPROVED AS A MAJOR CLINICAL PLACEMENT IN ASSOCIATION WITH THE BSc (Hons) DIAGNOSTIC RADIOGRAPHY PROGRAMME, UNIVERSITY OF DERBY FOR PURPOSES OF STATE REGISTRATION

(following scrutiny of the documentation by a member of the JVC)

NB: This was formerly approved for the University of Central England with which it is no longer associated.

* 6.3.18 UNIVERSITY OF TEESSIDE (R)

THAT THE BSc (Hons) DIAGNOSTIC RADIOGRAPHY, UNIVERSITY OF TEESSIDE AND ASSOCIATED CLINICAL PLACEMENTS CONTINUE TO BE APPROVED FOR THE PURPOSES OF STATE REGISTRATION

THAT THE CENTURIA BUILDING, UNIVERSITY OF TEESSIDE, BE APPROVED AS AN INSTITUTION FOR THE PROVISION OF RADIOGRAPHY EDUCATION

THAT THE RADIOLOGY DEPARTMENTS QUEEN ELIZABETH HOSPITAL GATESHEAD, BISHOP AUCKLAND HOSPITAL AND FRIAGE HOSPITAL NORTHALLERTON BE APPROVED AS A MAJOR CLINICAL PLACEMENTS IN ASSOCIATION WITH THE BSc (Hons) DIAGNOSTIC RADIOGRAPHY PROGRAMME, UNIVERSITY OF TEESSIDE, FOR THE PURPOSES OF STATE REGISTRATION

(Confirmed AHP framework and BSc (Hons) Diagnostic Radiography validation reports forwarded)
NB The response to the conditions is awaited. - *for continued approval.*

B. REPORTS FROM JVC

8. WORKSHOP FOR VALIDATORS

- 8.1 The Committee received the report of the JVC workshop for validators held on 24th January 2002. It was agreed that the report should be circulated to validators and parent bodies.

(report attached)

- 8.2 The Committee received the summary of the evaluation of the workshop for validators held on 24th January 2002. It was agreed that the summary of the evaluation be forwarded to parent bodies.

(report attached)

- 8.3 The JVC usually holds workshops for validators every 18 months. The Committee agreed that it will need to hold the next workshop in May/June 2003. This would enable validators to be briefed on new systems under the HPC and the evaluation of Modernising Education initiatives. It was agreed that this be drawn to the attention of parent bodies.

9. MONITORING SCHEDULE

- 9.1.1 The Committee received the draft report to education centres on the monitoring schedule returns in relation to the 2000/2001 academic year. It was agreed to circulate the report to parent bodies.

(report attached)

10. ANNUAL REPORT OF THE JVC

The Committee received the draft Annual Report of the JVC for the 2000/2001 constitutional year and agreed that, subject to minor amendments, it be forwarded to parent bodies and Education Centres.

(report attached)

11. DEVELOPMENT AND APPROVAL OF CLINICAL PLACEMENTS

The Committee received and subject to one minor amendment approved the paper drafted by the working party which was thanked for its work. The JVC agreed that it be forwarded to parent bodies for note and circulated to validators and workforce development confederations indicating it was a further development from 'Meeting the Challenge – The JVC Response'.

(report attached)

C. RESPONSE AWAITED PRIOR TO CHAIR'S ACTION

6.3.1. CANTERBURY CHRIST CHURCH UNIVERSITY COLLEGE (R)

6.3.1.1 The Committee noted that Christ Church University College had advised the Secretariat it is in negotiations with Darent Valley Hospital and South Bank University with a view to developing the Medical Imaging Department as a shared clinical placement. It was agreed that when received the documentation would be reviewed by the Link Person and Chair's action would be take on receipt of the Link Person's advice

6.3.3 GLASGOW CALEDONIAN UNIVERSITY (R&T)

The Committee noted that Glasgow Caledonian University had advised the Secretariat that it will be submitting a proposal for an additional major diagnostic clinical placement using Crosshouse and Ayr Hospitals and possibly an additional therapeutic placement. It was agreed that when received the documentation would be reviewed by the Link Person and Chair's action would be take on receipt of the Link Person's advice.

6.3.5 UNIVERSITY OF LEEDS (R&T)

6.3.5.1 The Committee noted that University of Leeds had advised the Secretariat that the University are planning to submit a proposal for the Radiology Department at Scarborough Hospital to be approved as an addition major clinical placement. It was agreed that when received the documentation would be reviewed by the Link Person and Chair's action would be take on receipt of the Link Person's advice.

6.3.8. SOUTH BANK UNIVERSITY (R&T)

6.3.8.3 Postgraduate Diploma in Radiation Oncology Practice

6.3.8.3.1 Kathy Burgess presented a verbal report of the periodic review held of the Postgraduate Diploma in Radiation Oncology Practice held on 12th March 2002. She reported that overall the proposal was satisfactory however, there were some conditions. It was noted that Privy Council approval will be required for both a change in title to Radiotherapy Practice and change of awarding body.

It was agreed that on receipt of the documentation Chair's action be taken to forward a recommendation to parent bodies.

6.3.9 SHEFFIELD HALLAM UNIVERSITY (R&T)

* 6.3.9.1 Kathy Burgess gave a verbal report of the revalidation event held on 18th April 2002 to consider proposed major modification of the BSc (Hons) Radiotherapy and Oncology to facilitate a part-time route and a proposed Postgraduate programme leading to eligibility for state registration. The panel agreed that the fulltime undergraduate programme should be approved. The programme team had been asked to revisit and develop further the postgraduate and ~~part-time route~~ proposals. They were congratulated on their flexible approach to education provision.

6.3.9.2 It was agreed that Chair's action be taken on the advice of JVC representatives following receipt of the Clinical Placement proforma in regard to the proposed increase in approved intake and additional clinical placements.

and part-time route.

6.3.11. UNIVERSITY OF SALFORD (R)

6.3.11.2 The Committee noted that the University of Salford had advised the Secretariat of the relocation of clinical placements at Bury and Fairfield Hospital to a new site at Fairfield Hospital, Bury Health Care Trust, and Withington and Wythenshawe Hospital, to South Manchester Health Care Trust. It was agreed that when received the documentation would be reviewed by the Link Person and Chair's action would be take on receipt of the Link Person's advice

6.3.13 UNIVERSITY OF CENTRAL ENGLAND IN BIRMINGHAM (West Midlands School of Radiography) (R&T)

6.3.13.2 The Committee noted that University of Central England had advised the Secretariat that it wishes to submit a proposal which address the way it manages the loss of Burton as a clinical placement and also takes into account the development of other clinical placement to meet the demands of commissioned numbers for the coming academic year. It was agreed that when received the documentation would be reviewed by the Link Person and Chair's action would be take on receipt of the Link Person's advice.

* **6.3.15 UNIVERSITY OF HERTFORDSHIRE (R&T)**

6.3.15.1 Angela Duxbury reported on the periodic review of the BSc (Hons) Radiography (Diagnostic and Therapeutic) held on 11th April 2002. She reported that the event had been satisfactory. There were no substantive changes.

The Committee agreed that on receipt of the documentation Vice-Chair's action be taken to forward a recommendation to parent bodies.

Will include a recommendation for 2 new titles.

As of 17th June 2002

Amended & Confirmed Report

UNIVERSITY OF TEESSIDE

ACADEMIC STANDARDS COMMITTEE

REVIEW OF ALLIED HEALTH PROFESSIONS PROGRAMMES (BSc (Hons) Diagnostic Radiography, BSc (Hons) Occupational Therapy, BSc (Hons) Physiotherapy) held on Tuesday 5th & Wednesday 6th March 2002

FRAMEWORK REPORT

PANEL

Dr Nick Hodge (Chair)	Director Academic Projects
Ms Liz Barnes	Deputy Director School of Health & Social Care
Ms Joanna Brayton	Validation Officer Chartered Society of Physiotherapy
Mr Ian Clarke	Chief of Non-Medical Services James Cook University Hospital
Ms Carole Dennison	Director of INSET programmes School of Arts & Media
Ms Carolyn Edwards	Representative Chartered Society of Physiotherapy
Ms Mary Embleton	Validation Officer Joint Validation Committee (Radiography)
Ms Anne Galbraith	Observer Chartered Society of Physiotherapy
Ms Lesley Greer	Learning & Teaching Co-ordinator Teesside Business School
Mrs Ruth Heames	Representative College of Occupational Therapists
Mrs Shirley Ingraham	Head of Quality University of Teesside
Mrs Jane Lockwood	Representative Chartered Society of Physiotherapy
Ms Joanne Pratt	Representative College of Occupational Therapy
Mr Richard Price	Representative Joint Validation Committee (Radiography)
Ms Remy Reyes	Validation Officer College of Occupational Therapists
Mr Mark Viner	Representative Joint Validation Committee (Radiography)
Ms Fiona Terry (Secretary)	Quality Unit

PROGRAMME TEAM (Framework Meeting)

Mr Iain Baird	Library & Information Services
Ms Tricia Bowler	School of Health & Social Care
Ms Claire Brewis	School of Health & Social Care
Mr Philip Casson	School of Health & Social Care
Ms Rachel Charles	School of Health & Social Care
Ms Joanne Gray	School of Health & Social Care
Ms Liz Holey	School of Health & Social Care
Ms Sarah Johnson	School of Health & Social Care
Mr Paul Keane	Director
	School of Health & Social Care
Ms Carolyn Mallaby	School of Health & Social Care
Ms Sue Nixon	School of Health & Social Care
Mr Michael Parr	School of Health & Social Care
Dr Keith Rome	School of Health & Social Care
Ms Shirley Taylor	School of Health & Social Care
Mr John Waine	School of Health & Social Care
Ms Barbara Wilford	School of Health & Social Care
Ms Marjorie Wilson	School of Health & Social Care

1. CONCLUSIONS

The Panel approved all three programmes for 5 cohorts from September 2002 with reviews of the programmes due to take place in the 2006/7 Academic Session. The approval is subject to an enhanced Annual Monitoring process for each programme given the need for an enhanced evaluation strategy for these programmes. The Panel also approved the Transfer arrangements for the BSc (Hons) Diagnostic Radiography programmes.

The Radiography Panel members will recommend to the JVC that the Royal Victoria Infirmary, Newcastle-upon-Tyne, Queen Elizabeth Hospital, Gateshead, Darlington Memorial Hospital and Bishop Auckland General Hospital, and Friarage Hospital, Northallerton are suitable sites to deliver clinical placements and that those other placements previously approved should continue in approval. (A report of the clinical placement visits is included as Appendix 2 of the Radiography Report). They will also recommend that the Centuria Building of the University of Teesside be approved as an institution for the provision of Radiography education (A report of the Institutional visit at Appendix 3 of the Radiography Report).

CONDITIONS

The approval is subject to the Programme Team meeting the following conditions to the satisfaction of the Chair of the Approval Panel by 31 May 2002 (unless otherwise indicated):

Framework

1. Revise the documentation to take account of the following:
 - Ensure that errors, omissions and inaccuracies are corrected

- Learning hours must be displayed in the same format within module specifications
 - An appendix should be added to the Critical Appraisal/Self-Evaluation Document to include the following:
 - External Examiner response(s) and report(s)
 - Current programme structure diagrams
 - Details on meetings with clinicians about the development of the Clinical Assessment Form
 - Include the placement audit tool
 - Include a copy of the student module evaluation form
 - Remove references to "CPSM" and amend to "Health Professions Council"
 - Re-visit the wording of the aims and outcomes for Diagnostic Radiography to ensure clarity
 - The transfer documentation for Diagnostic Radiography should be colour coded
 - Include the proportion of the classification attributed to placement learning
 - Amend the diagram on page 155 of the Physiotherapy documentation to show 12 credits for the portfolio rather than the 24 stated
 - Remove the last sentence on page 175 of the Physiotherapy document under Criteria for Placements
 - Revisit the Programme Assessment Map on page 163 of the Physiotherapy document to include Clinical Placements 5 – 8, which had been omitted, and to ensure that all modules have a mode of assessment and weighting attached.
2. The following regulatory matters should be addressed in the documentation:
- Inclusion of a section entitled 'Programme Specific Regulations'
 - An explicit procedure for monitoring ongoing professional suitability of students
 - Details of the final end assessment for qualifying status for each profession
 - Annual follow-on self-declarations following initial police checks.
3. Provide a clear evaluation strategy for the new programmes within a specific time frame. The strategy must include evaluation of the shared learning approach from practice.

Diagnostic Radiography

1. Ensure there are robust agreements in relation to placement provision both from the education and clinical placement providers.
2. Produce a staff development strategy for the Medical Imaging team which should make explicit reference to Research.
3. Approval of the delivery of clinical placements at the Friarage Hospital, Northallerton, is conditional upon confirmation being received by the JVC that the room for student and radiography staff use, equipped with a computer with internet access is ready for use prior to the first student being placed there in February 2003.

4. That the level of Information Technology (IT) facilities with internet access for students on clinical sites is reviewed annually to ensure equality of access across all clinical sites.

Occupational Therapy

1. Documentation should be amended to take account of the fact that an Honours award will now be the minimum requirement for State Registration as an Occupational Therapist.
2. Document where fieldwork failure can be retrieved, including the regulations on retrieval of failure with specific reference to only one resit attempt (in fieldwork) throughout the programme.

Physiotherapy:

1. Placements:
 - Expand the criteria for Level 2 and Level 3 placements, revisiting the wording of placement outcomes to reflect progression
 - Identify the placement areas accessed by students, being explicit as to which client care group they belong to
 - Be explicit that students only need to complete 4 out of 5 placements in Year 2
 - Ensure that students undertake a respiratory placement within the duration of the programme.
2. Modules:
 - Ensure that electrotherapy is included within the indicative content of appropriate module specifications.
3. Learning, Teaching & Assessment:
 - Be explicit on how shared learning will be organised, managed and evaluated
 - Include the process for resits (particularly in relation to placements) within the Student Handbook
 - Include a statement on option modules, plus a sample of 'popular' modules students will be directed to.
4. Quality Management & Enhancement:
 - Amend statements within the documentation to reflect that the statutory body (not the programme) confers 'licence to practice'. The programme allows students to be eligible for membership of the Chartered Society of Physiotherapy and whilst students are on the programme they are registered with the Chartered Society of Physiotherapy
 - Evaluate shared learning at the end of Year 1 (to include an evaluation of the effectiveness of groupwork)
 - Clarify the award titles for interim awards.

RECOMMENDATIONS

The Programme Team are asked to give due consideration to the following recommendations:

Framework

1. Make further reference to the "graduate" level of the successful students.

2. Review the outcomes with a view to reducing the total number.
3. Produce guidelines for the Portfolio which should include clarification of where and how students are prepared to undertake the portfolio and issues of confidentiality relating to the portfolio.
4. Further develop the links with clinicians.
5. Clarify stepping on and stepping off points for the programme and, in due course, links to the proposed Foundation Degrees within the School of Health & Social Care.
6. Work towards equity, in terms of Information Technology and Learning Resources, across all clinical placement sites as soon as possible.
7. In light of the intended inter-disciplinary approach in the overall Allied Health Profession Scheme, review the module specification and delivery of 'Introduction to Appraising Evidence' to maximise inter-disciplinarity in delivery in terms of both content and staffing.

Diagnostic Radiography

1. Review the requirement for a three week placement at the end of year 3.
2. Ensure that there is sufficient flexibility within programme delivery, especially as regards the scheduling of practical sessions, to ensure equality of treatment for students.
3. Consider the development of x-ray equipment facilities (both simulated and live equipment) within the Centuria Building.
4. The Team should apply for additional placement numbers (particularly for the Newcastle-upon-Tyne sites) with a view to allowing some flexibility. There should normally be a minimum of three students at any one placement site.

Occupational Therapy

1. Assessment:
 - keep under review the timing of presentation of assessment tasks to students to allow adequate preparation time. Consider presenting draft assessment proposals to External Examiners a semester in advance
 - document the approach to the dissertation more explicitly in light of the discussions at the approval event. Consider providing a range of possible approaches e.g. extended literature search/case study.
2. Fieldwork:
 - document quality assurance procedures e.g. vetting of placements
 - monitor the introduction of pass/fail arrangements for the assessment of the placement
 - review the intended two viva voce examinations and consider the alternative of peer presentation (*NB the College of Occupational Therapy representatives commended the inclusion of a clinician as a member of the viva voce examination team*)
3. Modules:
 - review the level 2 module descriptors to indicate more explicitly where theory is covered to support subsequent placement
 - review module descriptors to ensure explicit coverage of current issues e.g. National Service Framework for provision of examples of the 'variety of conditions' to be covered (*NB The College of Occupational Therapy representatives encouraged the use of options modules from across the School of Health & Social Care*).

Physiotherapy

1. Placements:
 - Clinical areas should be encouraged to produce a 'minimum standard' induction pack for students
 - In due course, revisit the Clinical Assessment Form to reflect discussions about clear marking criteria and reducing subjectivity.
2. Learning, Teaching & Assessment:
 - Provide more guidance on project criteria (word limit).

2. INTRODUCTION

The School of Health and Social Care at the University of Teesside was established in 1996 and delivers Healthcare Education to a wide geographical area encompassing County Durham and Teesside.

The School is a major provider of Healthcare Education in the fields of Nursing, Midwifery, Clinical Psychology, Radiography, Physiotherapy, Occupational Therapy, Medical Ultrasound and Social Work. Provision for the majority of these programmes is through a contracting process primarily with the Durham and Teesside Education and Training Consortium, which is part of the Northern and Yorkshire Regional Executive of the NHS although some programmes, such as Social Work are funded through the Higher Education Funding Council for England (HEFCE).

The School has broadened its provision from primarily undergraduate programmes to satisfy increasing demand for study at postgraduate level. The Centre for Health and Medical Research, the Rehabilitation Research Unit and the Centre for Practice Development all contribute to these developments and in 2000, the School established a Post-Graduate Institute.

The University's provision of programmes in the Allied Health Professions Diagnostic Radiography, Occupational Therapy and Radiography are well established. All three Allied Health Profession programmes have been approved and reviewed on a conjoint basis with the appropriate professional bodies. The BSc (Hons) Physiotherapy degree programme was first approved in 1989 and has been subject to regular periodic review since that time. The BSc (Hons) Diagnostic Radiography programme was first approved in 1993 with the most recent periodic review having been held in June 1996. The BSc (Hons) Occupational Therapy programme was first approved in 1994 with a major review being undertaken in June 1997. In May 1999, a further review was undertaken along with the approval of a top-up degree BSc (Hons) Applied Rehabilitation.

The Diagnostic Radiography and Physiotherapy programmes were required to undergo professional revalidation by their respective professional bodies, the College of Radiographers (COR) and the Chartered Society of Physiotherapy (CSP), and the University, during the Academic Year 2001/02. Permission was also sought from the College of Occupational Therapists (COT) to bring their validation forward by three years in order to enable a new curricula,

designed to maximise shared learning opportunities, to be developed concurrently. In 2001, the Durham and Teesside Workforce Development Confederation and the School of Health & Social Care at the University were successful in their bid for First Wave site status for modernisation of pre-registration for the Allied Health Professions. This created an opportunity for an inter-professional project to modernise the curricula in line with Government expectations (Meeting the Challenge) and Service developments. Therefore, all three Allied Health Profession programmes are presented for review and re-approval.

The Allied Health Professions within the School of Health and Social Care are to be the subject of a prototype Quality Assurance Agency (QAA) Review, one of only six pilot reviews in England. This will take place over a six week period commencing 15th April 2002 based upon a formal Self Evaluation Document (SED) to be written by the University. Therefore the Team presented the SED in place of the Critical Review document.

3. DISCUSSION

Critical Appraisal/Self Evaluation Document

The Panel asked the Team to describe how they had arrived at the changes proposed in the documentation. The Radiography Team informed the Panel that there had been a need to make a significant number of changes to the programme due to the amount of time since the previous approval (June 1996). In addition to the changes to take account of Meeting the Challenge and the modernisation agenda, it was reported that there had been significant changes in the approach to placements following feedback from the clinicians who had indicated a wish for third year and first year students to be out on placement at different times. Another change for the Radiography programme has been to make Physics more integrated into the programme e.g. the appropriate module would assess the knowledge and application of ionising radiation. There had also been a reduction in the amount of time in specialist areas such as CT scanning.

The Team had also developed a clinical assessment scheme and identified competencies. The students currently undertook 2-3 observed sessions but the Team were now looking to integrate competencies throughout the programme. Dialogue in observed sessions had been re-introduced. Summer placements had been retained as students were very supportive of these and did not perceive it as an additional burden.

The Physiotherapy programme team informed the Panel that the main elements of change proposed for the programme reflected the modernisation and Meeting the Challenge agenda. The Team had reflected on the strengths of the current programme and the theory/practice cycle and had decided to retain the current length of clinical placements as the four week period was felt to provide sufficient balance. The modules had generally been re-organised in order to integrate more fully theory/practice. The Physiotherapy Team had also redefined clinical placements with a more community based emphasis. The Team had retained the sequence of semesters in and out of the

University but the students did return to the University at the end of the programme in order to reflect and prepare for qualification.

The Occupational Therapy programme Team noted that their programme had only been running for two years since the last approval event (May 1999) and therefore they had made less changes. However the increased elements of shared learning were significant and there had been developments around the professional development portfolio module. Also, the Research Methods module was now earlier in the programme and the Fieldwork modules were assessed differently (on a pass/fail basis rather than graded) following discussions with clinicians and students. The Team had also looked at ways to reduce the assessment burden on students.

Programme Rationale & Philosophy

The Panel noted that one of the main drivers for change for the programme was "Meeting the Challenge" but asked what other drivers for change were included. The Team replied that they had worked closely with the curriculum development group to make sure that students would be prepared to meet the requirements of practice in 5 years time. It was not just a focus on the curriculum but also on students and the type of practitioner they would become. The career opportunities in the Allied Health Professions were greater than ever before but it was important to ensure that students still valued the routine day to day work at junior level. The Team had chosen to go along the Client Centred Care model and this theme has threaded through the programme. The Team had also utilise the QAA Benchmarks in order to guide programme development. Therefore the Team felt that they had been influenced by three areas – the QAA, curriculum development and government.

The Panel asked why there had not been joint developments with other areas of the School such as Social Work, Nursing and Midwifery and asked whether there would therefore be a constraint on opportunities. The Team suggested that the decision had been made for them under meeting the Challenge but that there had also been a strong history of working together from the Allied Health Professions (AHP) Team. However, the Development Team had not been exclusively from the AHP area as there had also been development from the Foundation degree team, Research Methods Team and the Social Work Team. The Team had been working to a very tight timescale and therefore had to keep the process manageable but it was intended to roll it out across the professions.

Aims & Outcomes

The Panel noted that the Team were very committed to the approach but asked what were the possible risks within the programme and how would shared learning be facilitated. The Team replied that the module leaders would take a lead in ensuring that all the Team were clear on the aims and outcomes and maximised the learning opportunities. The Team were getting the students used to working in multi-disciplinary groups and after the Easter break it was intended to bring the module teams together to finalise the programme details.

It was acknowledged that some Teams would be more comfortable with the shared learning approach than others.

It was intended to have regular module and team meetings and the programmes would be carefully evaluated. The Team had already identified, for example, that appropriate rooms for groupwork would be an issue but other rooms within the University would be accessed.

The Team acknowledged that one of the risks was that students may not perceive equity across all three programmes and also acknowledged that the students may be going into practice where the emphasis was not on shared learning. However, the new strategic Health Authority, mentors and site co-ordinators were committed to this approach.

The Panel noted that gradueness was well documented but asked how honours worthiness enhanced practice. The Team replied that diplomates retained their Continuing Professional Development but clinical reasoning had not been emphasised in the past. There was now a need for honours level graduates within the professions who were able to synthesise information and be able to enhance and effect change in practice.

The Panel noted that some programmes had a considerable number of outcomes and asked whether it was possible to assess all the outcomes identified in the document. The Team suggested that all the outcomes fed from each other. The Team had started with the QAA descriptors and the University level descriptors and from these had developed the programme aims and outcomes and module outcomes. The Team acknowledged that it would be difficult to assess every outcome but had mapped every module against the year 1-3 outcomes. Not all outcomes were assessed in written form as some could be assessed verbally or through observation. The Mapping of outcomes was key to this exercise. The Team suggested that the module outcomes could be assessed and if they are mapped to the programme outcomes then the Panel could be assured that students were fit for practice on completion of the programme. The Radiography JVC pointed out that they would be looking for overall meeting of outcomes rather than every single one being identified. There were University outcomes that required cross-reference. Students would be presented with outcomes on a module by module basis rather than as programme outcomes.

Curriculum

The Panel felt that the "stepping off" points were clear in the documentation but asked for further details in relation to "stepping on" and the relationship of the programme to Foundation Degrees and to Accreditation of Prior Learning (APL). The Team replied that the School had a well developed APL system with modules within which students could acquire APL credits and also a specific member of staff who co-ordinated APL applications. The Foundation Degree programmes were currently being developed and the programme developer had been involved within the development of the AHP programmes. The concept behind the Foundation Degrees was to prepare students to step on half way through year 2 and was being developed with conjunction with practice with a Health Care Science and a Health & Social Care route. These

students would not obtain the depth of theoretical knowledge and clinical reasoning skills required for the programme and therefore these students would "step on" at an early stage in the programme and may need to undertake some bridging work. The precise details were still under discussion. The rationale behind the Foundation degrees was not as a stepping on point for the AHP programme but rather the fitness for purpose and award.

The Panel noted that there were a number of issues relating to the accuracy and consistency of the documentation. A list would be provided for the Team. The Panel also pointed out that the module descriptor for the module "Psychology of Health & Illness" was missing.

Portfolio

The Panel welcomed the development of the portfolio from the start of the programme and the appreciation of the need for Continuing Professional Development but asked how the Portfolio would operate in practice. The Team replied that in year 1 the portfolio would be formative and would act as a resource for the students. The Occupational Therapy programme currently operated with a similar module over two years and this had been seen as a benefit with students engaging with it very well, particularly in view of the widened access to the programme. The module was supported by personal tutors and Workshops would be part of the Team approach. The Panel noted that the portfolio would include applications for jobs and production of a CV and asked whether this was located too late in the programme. The Panel also asked how it would be assessed. The Team replied that the portfolio would be marked as a whole but they would expect to see signs of development across the programme. It was intended to be part of CPD and to be a rolling document with the elements of reflection being clear. Students would be required to complete a reflective report at the end. The Panel asked whether the Team had given consideration to the confidentiality of the portfolio. The Team replied that very clear guidance would be provided and the reflective aspects would be removed before submission (except for the reflective report). The module leaders would clearly articulate to Personal Tutors what was required and good practice had been shared across disciplines e.g. Physiotherapy have not previously assessed portfolios. The School also had a working party looking at portfolios and there is considerable experience in this area across the School.

Teaching, Learning & Assessment

The Panel asked for details on the use of Information & Communication Technology (ICT) and Blackboard in particular. The Team replied that the School was a pilot site within the University for the use of the Blackboard Virtual Learning Environment (VLE). It has been piloted on a programme delivered overseas and the students were generally very happy with it. There was an induction period for both students and staff. The School had an Intranet and Extranet which has been extended to the Trusts. NHS net links were also being developed in order to extend Intranet access and this had been successfully piloted. The School also had ICT co-ordinators who ensured staff were familiar with the programme and it has been rolled out in a very

deliberate way. The project had been carefully evaluated by both the School and the University.

The Panel asked how placements were monitored. The staff went out to visit each student whilst on placement and the students also evaluated the placements. The School had recently revised its placement audit tool. Placements were monitored by the School Placements Office and Programme Managers were notified immediately of any issues and a visit was arranged. The Clinicians were given an opportunity to meet staff through clinical liaison and staff visits. Each profession had a database and this was in the process of being linked to the University Student Records System (SITS).

The Panel asked how clinicians were involved in the assessment of placements. The Team replied that for Occupational Therapy, clinical staff would assess on a pass/fail basis with the academic elements of the programme being left to academic staff to assess. This prevented skewing of assessment at the higher end and was welcomed by clinical colleagues. In Radiography, there had been a similar problem with skew at the higher end of the marking scheme and therefore elements of the competencies had been assessed on a pass/fail basis and staff would undertake the grading. Within Physiotherapy, the Programme Team had noted comments from External Examiners that the students were over-assessed and so development work had been undertaken with clinicians and an annual roadshow introduced. This had meant that marks were not generally skewed. Clinicians were also encouraged to undertake the School module "Facilitating Learning in Clinical Practice" but this was not a requirement. Mentor training also took place. It was acknowledged that the take up was not universal and there was a need for Radiography to develop more in this area.

The Panel asked for details on Teamwork and Shared Learning which incorporated and encouraged leadership skills and asked how this accommodated individual learning styles. The Team replied that it was important to identify individual learning styles and they had therefore utilised a wide variety of learning styles, activities and assessments within the programmes. The Team did acknowledge that everything would not suit everyone but it was intended to identify strengths and weaknesses. The Panel asked whether this was incorporated into the teaching styles of tutors. The Team replied that all staff undertook the Postgraduate Certificate in Learning & Teaching in Higher Education which acted as a starting point. The School had also developed Problem Based Learning Skills. With a diverse range of learning styles it was felt that this enabled students strengths to develop in different ways. The Panel asked whether there was a leadership model. The Team replied that the Government and NHS were planning to emphasise leadership skills within the practice environment and it was intended to develop skills in practitioners which could effect change in practice. The School also subscribed to the political change/process model through political awareness. The School had a module which explored Leadership in Health & Social Care Practice.

Student Progression

The Panel did not wish to raise any general issues in relation to Student Progression but would take it up in individual programme sessions.

Learning Resources

The Panel asked whether the School was able to ensure equality of access to facilities for students undertaking remote placements in terms of an appropriate learning environment and ICT facilities. The Team replied that, on the move to the Centuria Building, the School made a conscious effort to provide remote access at 6 sites and to put network links into the Postgraduate Libraries within hospitals in the area. The School provided an Information and Management Support Technician who provided support for this area. At these sites, access is the same as for students in the Centuria Building. It is more difficult to provide access outside the Durham & Teesside Workforce Development Confederation but the School is trying to develop links using the Intranet, Extranet and Internet. The School acknowledged that there were some tensions in relation to the use of hospital libraries but this was being resolved on an individual site basis. The Confederation have appointed a Library Alliance Co-ordinator who is developing a Service Level agreement with the confederation.

The Team acknowledged that access at remote sites would be a particular issue for Radiography students. The ICT Co-ordinator for Radiography had been out to sites to identify facilities and to facilitate access. With regard to journals, 150 titles were available to all students and staff within the Northern and Yorkshire Region through the Library Alliance.

Quality Management & Enhancement

The Panel noted the Schools Research Strategy and its commitment to evidence based practice and asked how individual staff development related to this. The Team replied that the School had submitted to the RAE under Unit 11 with a theme focused on Rehabilitation and other research themes developed from this. Research did incorporate some student work where appropriate. In addition, some staff were researching into Learning & Teaching which in turn fed into research. The Panel were also informed that the School housed the Rehabilitation Research Unit which was a collaboration between the local NHS Trusts and the University. This utilised collaboration between the Staff, Students and Clinicians. The School had utilised a number of lecturer/practitioner posts but all 15 had since moved to employment within the School. This role has been evaluated and a presentation made to the Confederation.

The Team acknowledged that the research element within the Radiography programme has not been that strong but some staff had recently been seconded to the Research Methods section and the School provided a considerable amount of support for those staff wishing to engage with research including the dedicated research team and the Postgraduate Institute for Health. There were also a number of opportunities to work in collaborative teams.

The Panel were informed that all new staff were required to complete the Postgraduate Certificate in Learning & Teaching in Higher Education (unless they had previous Higher Education Teaching experience) and the School

were very supportive of new staff undertaking this award. The University also had an Academic & Staff Development Unit which provided a range of development opportunities and support. Funding was available for the use of external consultants and with the introduction of Problem Based Learning (PBL), the School had utilised consultants in order to develop staff. The School would look to develop shared triggers for PBL wherever possible.

The Panel queried the evaluation strategy for the programme. The Team replied that they would maintain the normal evaluation methods but would strengthen the qualitative aspects. In addition, both employers and graduates were surveyed at the end of the first year of employment and this would be continued.

UNIVERSITY OF TEESSIDE

ACADEMIC STANDARDS COMMITTEE

REVIEW OF ALLIED HEALTH PROFESSIONS PROGRAMMES (BSc (Hons)
Diagnostic Radiography, BSc (Hons) Occupational Therapy, BSc (Hons) Physiotherapy)
held on Tuesday 5th & Wednesday 6th March 2002

SECTION OF REPORT RELATING TO BSc (Hons) DIAGNOSTIC RADIOGRAPHY

PANEL

Dr Nick Hodge (Chair)	Director Academic Projects
Ms Liz Barnes	Deputy Director School of Health & Social Care
Ms Mary Embleton	Validation Officer Joint Validation Committee
Mr Richard Price	Representative Joint Validation Committee
Mr Mark Viner	Representative Joint Validation Committee
Ms Fiona Terry (Secretary)	Quality Unit

PROGRAMME TEAM

Mr Philip Cosson	School of Health & Social Care
Ms Susan Cutler	School of Health & Social Care
Ms H. Rosemary Lee	School of Health & Social Care
Mr Ken Moore	School of Health & Social Care
Ms Sue Nixon	School of Health & Social Care
Ms Margaret Trevor	School of Health & Social Care
Ms Karen Turner	Site Co-ordinator Darlington Memorial Hospital
Ms Barbara Wilford	School of Health & Social Care
Ms Cynthia Wilson	Site Co-ordinator City Hospitals Sunderland

1. CONCLUSIONS

The Panel were very impressed with the thorough documentation presented for the Review. The Panel acknowledged that visits had taken place in the previous year on behalf of the JVC and that there had been a considerable improvement in relation to the programme since that visit. Feedback from the placements and from the students on this review visit had been very good.

The Panel approved the programme for 5 cohorts from September 2002 with reviews of the programme due to take place in the 2006/7 Academic Session. The approval is subject to an enhanced Annual Monitoring process for each programme given the need for an enhanced evaluation strategy for these programmes.

The Panel also approved the Transfer arrangements for the BSc (Hons) Diagnostic Radiography programmes.

The Radiography Panel members will recommend to the JVC that the Royal Victoria Infirmary, Newcastle-upon-Tyne, Queen Elizabeth Hospital, Gateshead, Darlington Memorial Hospital and Bishop Auckland General Hospital, and Friarage Hospital, Northallerton are suitable sites to deliver clinical placements and that those other placements previously approved should continue in approval (A report of the clinical placement visits is included as Appendix 2). They will also recommend that the Centuria Building of the University of Teesside be approved as an institution for the provision of Radiography education (A report of the Institutional visit at Appendix 3).

Conditions

(Please also refer to the main Framework report)

The approval is subject to the Programme Team meeting the following conditions to the satisfaction of the Chair of the Approval Panel by 31 May 2002 (unless otherwise indicated):

1. Ensure there are robust agreements in relation to placement provision both from the education and clinical placement providers.
2. Produce a staff development strategy for the Medical Imaging team which should make explicit reference to Research.
3. Approval of the delivery of clinical placements at the Friarage Hospital, Northallerton, is conditional upon confirmation being received by the JVC that the room for student and radiography staff use, equipped with a computer with internet access is ready for use prior to the first student being placed there in February 2003.
4. That the level of Information Technology (IT) facilities with internet access for students on clinical sites is reviewed annually to ensure equality of access across all clinical sites.

Recommendations

(Please also refer to the main Framework Report)

The Programme Team are asked to give due consideration to the following recommendations:

1. Review the requirement for a three week placement at the end of year 3.
2. Ensure that there is sufficient flexibility within programme delivery, especially as regards the scheduling of practical sessions, to ensure equality of treatment for students.

3. Consider the development of x-ray equipment facilities (both simulated and live equipment) within the Centuria Building.
4. The Team should apply for additional placement numbers (particularly for the Newcastle-upon-Tyne sites) with a view to allowing some flexibility. There should normally be a minimum of three students at any one placement site.

2. INTRODUCTION

The School of Health and Social Care at the University of Teesside was established in 1996 and delivers Healthcare Education to a wide geographical area encompassing County Durham and Teesside.

The School is a major provider of Healthcare Education in the fields of Nursing, Midwifery, Clinical Psychology, Radiography, Physiotherapy, Occupational Therapy, Medical Ultrasound and Social Work. Provision for the majority of these programmes is through a contracting process primarily with the Durham and Teesside Education and Training Consortium, which is part of the Northern and Yorkshire Regional Executive of the NHS although some programmes, such as Social Work are funded through the Higher Education Funding Council for England (HEFCE).

The School has broadened its provision from primarily undergraduate programmes to satisfy increasing demand for study at postgraduate level. The Centre for Health and Medical Research, the Rehabilitation Research Unit and the Centre for Practice Development all contribute to these developments and in 2000, the School established a Post-Graduate Institute.

The University's provision of programmes in the Allied Health Professions Diagnostic Radiography, Occupational Therapy and Radiography are well established. All three Allied Health Profession programmes have been approved and reviewed on a conjoint basis with the appropriate professional bodies. The BSc (Hons) Diagnostic Radiography programme was first approved in 1993 with the most recent periodic review having been held in June 1996.

The Diagnostic Radiography and Physiotherapy programmes were required to undergo professional revalidation by their respective professional bodies, the College of Radiographers (COR) and the Chartered Society of Physiotherapy (CSP), and the University, during the Academic Year 2001/02. Permission was also sought from the College of Occupational Therapists (COT) to bring their validation forward by three years in order to enable a new curricula, designed to maximise on shared learning opportunities, to be developed concurrently. In 2001, the Durham and Teesside Workforce Development Confederation and the School of Health & Social Care at the University were successful in their bid for First Wave site status for modernisation of pre-registration for the Allied Health Professions. This created an opportunity for an inter-professional project to modernise the curricula in line with Government expectations (Meeting the Challenge) and Service developments. Therefore, all three Allied Health Profession programmes were presented for review and re-approval.

3. DISCUSSION

Structure of the Year

The Panel noted the very long Academic Block covering semesters 4 and 5 and asked why the programme was designed this way. Also, the Panel asked why the Diagnostic

Radiography students undertook a 3 week placement at the end of the programme when all other Allied Health Profession (AHP) programmes had completed. The Team replied that in Year 1 of the programme it was intended to consolidate the basic clinical skills and then for the students to bring information from practice, and in different clinical areas, into the academic Semester 4. The programme had also been planned in order to ensure equity between the number of clinical weeks and the number of academic weeks without losing any clinical experience. The specialist placements in year 3 had been reduced a little. Between the end of semester 6 and starting work, the students tended to obtain work in hospitals and the three weeks placement fed into this. In addition, it provided a space in which to achieve clinical competencies if students were failing. The staff had received no negative feedback from students and most students used it as an opportunity to consolidate their confidence as practitioners. The Panel suggested that the Team consider making the last 3 week placement period optional in order to ensure equity with the other AHP programmes.

The Panel asked about the necessity for Summer Placements. The Team replied that the students gained a considerable amount from the Summer Placements. The period permitted them to concentrate on their clinical practice and build up their confidence as practitioners. The programme was by necessity tightly structured so the Summer Placement allowed some element of Choice. As the Summer Placement was part of the programme, it made it easier for students to negotiate the form and location of the placement. Some students utilised the placement to go abroad or to access other areas of practice e.g. Paramedics. The experience also fed into the portfolio.

The Panel asked whether the clinical placement was about "Hands-on" experience. The Panel suggested that it was about clinical reasoning, integrating theory and practice, holistic approach to patient management, attitudinal and cognitive skills rather than just about examining patients. The placements were negotiated closely with clinical sites and the feedback from the placements had been extremely good.

The Panel asked how the Team would reinforce the theory/practice links. The Team replied that the Professional Development Portfolio would develop learning outcomes through the Summer Placement. A series of Objectives for the placement would be set and identified. There would be clinical aspects but it would involve an element of negotiation.

Facilities

The Panel asked for details on practical experience of students prior to placement. The Team had negotiated space in local facilities in order to undertake practical tutorials and basic techniques before students went out on initial placement. The staff took students in small groups for late afternoon/evening sessions in appropriate facilities. The Panel asked what would happen if a student was unable to attend for example, due to family commitments. The Team replied that all sessions outside the normal working day had been negotiated with the students and there had not been any problems. It was not possible to access these facilities during the normal working day.

The Team were keen to enhance a students practical experience before they went out on their initial placement and had been offered some equipment from Middlesbrough General Hospital when it closes next year. This would not be live equipment but would give students some practical experience of using and moving. The Team were also liaising with students on the MSc Computer Aided Graphical Technology Applications (CAGTA) programme with a view to developing virtual medical imaging. The Panel asked why the Team were not intending to maintain a live

equipment facility. The Team replied that in the past, the University had had a live X-ray unit but the upkeep year on year was very expensive and the equipment quickly became dated. The Team felt it more appropriate for students to go out to sites where the equipment was always up to date and working. As long as the Team were able to access the facilities at the sites they did not feel the need to have a live facility within the University. The Team also felt that there were benefits in maintaining links between clinical and academic staff and providing students with small group experience. The Students were well prepared before going out in order to make the best use of the time available with the facilities and specific learning outcomes were identified for each of these practical sessions.

The Panel asked whether there would be induction into Clinical Placement. The Team replied that this would take place within the "Introduction to Radiographic Practice" module where students would be taken out into practice. Each student would also undertake an orientation visit to their Clinical Placement prior to the placement commencing. Students were also required to send a letter and CV to the Clinical Site they would be working with in order to introduce themselves. The Team were also looking in to the possibility of students undertaking Information Technology Induction at local trusts on areas such as the Data Protection Act. etc. prior to commencing their placement.

Inter-Professional Learning on Clinical Sites

The Panel questioned inter-professional learning at clinical sites. The Team had discussed the remit and role of the Practice Placement Facilitators. The School was a pilot for "Making a Difference" and within that the Practice Placement Facilitator role was introduced and was in the process of being evaluated. The School was generally awaiting that feedback in order to develop the role for the AHP programmes. The Team were trying to set up clinical scenarios with input from each professional but acknowledged that there was still a need for further work in this area.

Information Technology

The Panel noted that there was disparity between clinical sites in relation to Information Technology (IT) access for study. The Panel felt that with the use of the Blackboard Virtual Learning Environment within the Programme, there was a greater emphasis on access to IT facilities. The Team replied that the IT Co-ordinator for the Programme had developed an audit tool against which each department within which placements took place had been evaluated through a visit by the Co-ordinator and a member of the School IT support service. This audit had found that there was generally not a problem provided students had received appropriate IT induction. Most sites had access to the Intranet but the Team had also investigated access at Postgraduate Medical Education facilities. Opportunities were provided for students to book these facilities.

The sites at Gateshead, Royal Victoria Infirmary (Newcastle-upon-Tyne), Freeman Hospital, Middlesbrough General, Friarage in Northallerton and Sunderland had all been visited and the staff are confident that students would have access to the facilities and know how and where to access them. There was an issue of who owns and maintains the facilities. The School has an IT Co-ordinator for sites who spent half a day each week in every hospital site and students were able to make appointments to discuss issues with him. The Panel suggested that there should be a robust agreement in place in relation to the provision of facilities.

Placement numbers

The Panel asked how the numbers on each clinical placement were determined. The Team undertook this in negotiation with clinical departments based on what they could realistically cope with e.g. the numbers at James Cook University Hospital lowered this year as they were in the process of merging with Middlesbrough General. The Panel suggested that the current JVC approved number of placements of 31 did not allow sufficient flexibility and suggested that the Team apply to increase this to 35 with a recommendation that there be normally a minimum of 3 students at any one placement site.

The Panel noted that there was a placement (Sunderland) that was shared with students from St. Martins College, Lancaster and asked how this worked in practice. The Team replied that this placement had been negotiated and students were very positive in their feedback on the experience. The Team were concerned about possible pressures on clinical staff but the site had recently recruited 4 Radiographers so this did not appear to be an issue. The Teesside Staff had met with staff from St. Martins and the JVC asked for regular feedback on the operation.

Content

The Panel referred the Programme Team to the programme aim "Develop a radiographer who can comment on diagnostic images of premium quality, from a current evidence-base, whilst simultaneously ensuring a high level of patient care" and asked for further details on this. The Team replied that this was about informing clinical colleagues. The development of skills came from the evidence of practice. The Panel asked how skills were developed. The Team replied that this year they had piloted the OSCI and this had received very positive feedback. Students were asked to identify and evidence. Students would be expected to look at images and see whether the images were the best possible from the lowest radiation dose possible. There was also a need to ensure that patients had a very positive experience. The Panel asked whether students would be able to take an image and produce a report but the Team suggested that the outcome was about being able to comment on an image. The Panel asked the Team to revisit the Aims and Outcomes to ensure clarity.

The Panel asked whether students were intended to undertake injections. The Team replied that students would be required to undergo an IV course at their Trust for Medical and Ethical reasons. Students did practice on phantoms in the skills labs. However clinicians and staff were not prepared to take the risks associated with students undertaking injections.

Communication Issues for Allied Health Professions

The Panel asked for comment on this module which asked students to mark work. The Team replied that it worked well but students needed to be led slowly into the process. The group built up a marking scheme and identified where marks were lost but it was undertaken in a very supportive environment initially.

Options

The Panel asked for the remit behind the choice of option modules. The Team replied that part of the remit was based around staff specialisms. Within the current programme there was a module on cross-sectional imaging but this had become a core module in the new programme. The options were also to be made available on a free-standing basis as a number of staff wished to access the Ultrasound module which was also used as a taster for those interested in the Postgraduate Ultrasound Programme.

The Team did also look at some multiprofesional modules that could be made available e.g. Trauma, Elderly Care, Leadership etc.

The Panel asked for confirmation as to the minimum numbers acceptable on a module. The Team replied that the School requirement was generally 10 but there was some flexibility and modules did run with 5-10 students.

The Panel noted no reference to Nuclear Medicine Journals within the proposals. The Team replied that students would gain some experience but this was not a first post competency. It would be discussed within alternative imaging strategies and a section would be located within the Vascular Imaging Module. The Team also pointed out that there were a lot of Journals that were desirable rather than essential but resources were limited. Students were able to access journal articles using inter-library loans as required.

Transfer

The Panel asked for clarification of the Transfer package noting that the current project requirement was 10-12,000 words but in the new proposal it was 6-10,000 words. The Team replied that this was to move into line with the standard school policy. The Team pointed out that the transfer arrangements had been discussed with the students who would be affected and clinicians and all were supportive of the arrangements. Two new modules had been specifically written for the transfer.

Radiographic Input to Shared Modules

The Panel asked for further details on the radiographic input to all shared modules e.g. was their input into the "Introduction to Pathophysiology" module. The Team replied that this was a totally shared module offered by the Biological Sciences Team. The themes within the module would be taken up in the Radiographic Practice module later where it provided the underlying Theory. The Pathophysiology Module leader did ask for examples related to Radiography Practice and students did feel that it was orientated towards their requirements as a result of the negotiation and consultation. The Team also informed the Panel that radiologists and other professions were brought onto the delivery team as required with the relevant staff being identified at the start of each year. Other relevant staff were also utilised such as Medical Physicists and those with experience of drug and alcohol abuse. Other specialists were also utilised such as equipment manufacturers representatives. Those external specialists inputting to the programme were given the module details and specific details of the learning outcomes to be met which they found helpful.

Extra-curricular Activities

The Panel asked whether students were fully able to participate with extra-curricular University activities with the heavy loading on the programme. The Team replied that they were negotiating with placement providers in order to allow students one day per week off during placements. The Team also tried to negotiate with the working environment to cover particular student issues. If students missed a specialist rota area, however, they would need to make it up. Students were able to fully integrate into University life provided their requirements were made clear to staff.

Research Strategy

The Panel asked for details of the Research Strategy for the Medical Imaging Team. The Team replied that, as a new team, they were developing their research strategy. All staff received in-house training in Research Project Supervision and support was

available from the Postgraduate Institute. The University also provided some inter-school research funding.

The Team commented that the process of developing the new awards had been very beneficial for all concerned. It had allowed the Radiographers to articulate their own profession to others and helped the new staff to integrate into the team and the wider School. The Team also felt that it had raised the profile of the Team within the School.

Meeting with Radiography Student Representatives

The Panel met with 2 female second year students and 1 male first year student. Apologies were received from a first year female student.

The Panel asked whether the students had been consulted about the proposed changes to the Programme. The students said that the issue had first been raised at the November Staff/Student Liaison Committee where a brief was given on the implications of the proposals. Student Representatives were asked to obtain the opinions of their colleagues and feed back. Further consultation was undertaken in February at which point the new and transition schemes were explained and any queries answered. Students were provided with details of both the old and new programmes and provisional timetables. Students were generally happy with the proposals for the new scheme although the first year students had only undertaken one semester of the old scheme.

The students were particularly supportive of the placement in semester 6 and the reading week before placements which allowed time for preparation. The Panel noted that the new structure meant that students would undertake academic sessions in semesters 4 and 5 but the students felt this would not be a problem as there was a Summer placement in between. The Panel asked why the students undertook a Summer Placement. The students replied that it was part of making up clinical hours but also it allowed students to concentrate on an aspect of learning clinical practice without the additional academic studies and was very welcomed by students. The students were able to gain a broad overview and expand their experiences with negotiated Summer Placements (which included opportunities for studying abroad). Students did visit other sites in order to obtain specialist placements where necessary.

The Panel asked how students chose their options in Year 3. The students chose 2 options and noted that they could change up to 2 weeks from commencing on the module. The Panel noted that there was no module in MRI and Nuclear Medicine but the students stated that it was studied in Physical Science 2. Students did 3-5 days in MRI and 3-5 days in Nuclear Medicine but the students felt that they needed further training in MRI.

The Panel asked whether the students had used Blackboard. Second year students had used it a little for Research but the first year student had completed the Research Methods module fully using Blackboard based at the University. The students felt it was not necessarily the best way to learn but acknowledged that it was a different learning experience. The main comments were that it was very impersonal although the module tutors did make themselves available.

The Panel asked about access to IT facilities on placements. The students suggested that it varied with the placements but it was available along with support. Students did feel they got time within clinical placements to access IT. Although they worked a 9-5 day, there was a half day a week for academic work and within the new programme there would be a whole day. The use of the "free" time was left to the discretion of the student.

The Panel asked whether students were able to fully access other aspects of student life such as sport. The students suggested that the programme was not conducive to additional activities. There had been a very good female rugby player on the programme who had highlighted a number of issues.

The Panel asked whether the workload on the programme was manageable. The students felt it was manageable but tough, particularly in the first year. The reduction in core clinical was welcomed by the students.

The Panel noted that there was a big inter-disciplinary focus in the new programme and asked students how they felt about this. The students felt this was a very positive aspect to the programme and welcomed the approach suggesting that this would be a way they could influence practice in the future.

The Panel asked for details of clinical resources. The students felt that resources were good at the sites but they would welcome facilities in the University. The students had been to James Cook University Hospital for some pre-practice work. However things such as positioning were not studied prior to placement as every hospital had its own ideas and therefore these issues had to be learnt in practice. Students would welcome some basic preparation and knowledge before going out on placement. All clinical staff at placement sites were very helpful and supportive.

The second year students also commented that the programme had been much better this year and the lectures very good. A number of issues had arisen in the previous year but these appeared to have been resolved.

**Joint Validation Committee
The Radiographers Board and the College of Radiographers**

CLINICAL PLACEMENT VISITS

to the Royal Victoria Infirmary, Newcastle, Queen Elizabeth Hospital, Gateshead, Darlington Memorial Hospital and the Friarage Hospital, Northallerton associated with the Periodic Review of the BSc (Hons) Diagnostic Radiography, University of Teesside on 5th March 2002

Visitors Mr R Price
Mr M Viner
Mrs M Embleton (Darlington Memorial Hospital and the Friarage Hospital, Northallerton only)

1. Acknowledgements

The visitors wish to acknowledge the hospitality extended to them by the staff of the Radiology Services Department at the Royal Victoria Infirmary, Newcastle, Queen Elizabeth Hospital, Gateshead, Darlington Memorial Hospital and the Friarage Hospital, Northallerton. The visitors wish to thank Mrs Susan Nixon, Radiography Programme Leader, and colleagues, School of Health & Social Care for making the arrangements as well as escorting the visitors to the sites. They also wish to thank everyone involved for giving up their time to speak freely to the visitors.

2. Rationale and Background to the Visits

These visits were arranged as part of the periodic review of the BSc (Hons) Diagnostic radiography at the University of Teesside. The University was seeking approval for new clinical placements due to an increase in the contracted number of places for diagnostic radiography students. Approval was being sought for new placements at Queen Elizabeth Hospital, Gateshead, and the Friarage Hospital, Northallerton and Bishop Auckland Hospital. The University had supplied documentation on all the clinical placements well in advance of the periodic review.

The JVC representatives decided they wished to visit the Radiology Services Department at the Royal Victoria Infirmary, Newcastle, Queen Elizabeth Hospital, Gateshead, Darlington Memorial Hospital and the Friarage Hospital, Northallerton as part of the periodic review. Darlington Memorial Hospital was the first clinical department to be approved by the JVC by scrutiny of documentary evidence following the procedure for accreditation of clinical placements approved in December 1996.

3. Visit to the Victoria Royal Victoria Infirmary, Newcastle upon Tyne

Students are placed at the three main hospitals in Newcastle, Newcastle General Hospital, The Freeman Hospital and the Royal Victoria Infirmary that form the Newcastle Upon Tyne Hospitals NHS Trust. The Victoria Infirmary was visited as representative of the Newcastle placements. Between them the radiology departments conduct in excess of 345,000 examinations in a year. Radiographer numbers were presented as 112.34 FTE.

3.1 Tour of the department and facilities

The visitors were met by Mrs Rosemary Lee, Visiting Lecturer, who introduced them to Mrs Chris McGregor, Training Co-ordinator for the Newcastle placements, Mr Russell Bowman, one of the mentors and Mr Philip

Wilson, Radiology Manager. Russell Bowman guided the visitors around the department and associated facilities. The visitors were shown the department library and the lecture room. The clinical areas visited included the two general rooms, two paediatric rooms (one general and one ultrasound) a screening room and the MRI reporting area. Mr Bowman explained that the radiology services on site were being re-developed as part of the Trust's strategic plan and the installation of computed radiography (CR) was anticipated in the near future.

The department appeared to be well organised, with all appropriate Health & Safety documentation readily available to staff. Radiodiagnostic rooms were equipped with appropriate exposure charts and radiation protection information was displayed. Radiography texts were readily available to staff working in the department.

A student noticeboard gave details of student placement rotation, clinical placement objectives and other information for staff and students.

3.2 Links with the University

Both the Radiology Service Manager and the site Training Co-ordinator commented that the communication between the University had greatly improved over the past 12 months. Mr Wilson had been involved in the development of the new undergraduate and postgraduate. Mrs McGregor was a member of the Training Co-ordinators group, which met every two months. The introduction of Blackboard was also seen as a significant development.

3.3 Staff Development

Mr Wilson confirmed the commitment of the department to staff development. The Trust supported staff attending external courses as well as the comprehensive Trust programme which included health and safety issues, management training, counselling etc. Staff are encouraged to hold their own CPD folders.

3.4 Student Support and Facilities

The visitors met separately with Philip Wilson, Chris McGregor and Russell Bowman.

Mr Philip Wilson confirmed the commitment of the Trust to radiographer education and recognised that their involvement was critical for future recruitment. He remarked upon the significant improvement in communication over the past 12 months. He had been involved in the development of the new programme and supported the pre-registration MSc development.

Mrs McGregor, site co-ordinator explained her role. She is responsible for organising the students' experience across the Newcastle sites and was allowed a half a day dedicated to direct student support. However, she admitted that on occasions it has been difficult to provide the support within this allocation. As site co-ordinator Mrs McGregor liaises with the University visiting lecturer who visits between two and three times per semester. She stated that communication between the University and clinical placements are good. The University were good at providing information for students who had their own notice board in the department. She confirmed that site-co-ordinators from each participating hospital associated with the degree programme met every two months and considered this to be an excellent practice. Mrs McGregor

confirmed that Blackboard was accessible from the site and that passwords were provided for both students and mentors.

The visitors met two second year students who were very satisfied with their placement in Newcastle although they felt that they were at a distance from the University and did not have the same access to learning facilities as some other students. They would have liked to have chosen their placement hospital when commencing the course but that was not the system at the time but they understood that the arrangements had now changed and students were allowed to state a preference. They were unsure of what access they had to learning facilities in the department and they had not been shown the departmental library. At the time of the visit they were unsure of how Blackboard would work, as the internet access was not functional and needed attention.

There were no separate facilities for students in the department and they were encouraged to integrate with staff and use the Trust facilities accordingly.

4. Visit to the Queen Elizabeth Hospital Gateshead

4.1 Tour of the department and facilities

The visitors were met by Mrs Sue Cutler, Visiting Lecturer, who introduced them to Mr Martin Bell, Senior Radiographer, who showed the visitors around the department in the absence of the Training Co-ordinator.

The department undertakes a wide range of work including general radiography, accident and emergency, ultrasound, barium studies, CT, angiography, mammography and MRI. At the time of the visit building work was underway to expand the department and a number of the radiodiagnostic rooms were scheduled for replacement. Pre visit information showed an establishment of 32.12 FTE radiographers including the service manager. The last year for which data was available revealed a number of 134,014 examinations.

Perhaps as a result of the ongoing building works, the viewing areas and x-ray rooms appeared disorganised and lacked display boards for appropriate Health & Safety information. In addition, comprehensive exposure charts and radiation protection information did not appear to be present in all x-ray rooms. Whilst students had access to some radiography texts in a separate section of the department, there did not appear to be any such texts available for staff whilst working within the viewing areas.

A student noticeboard gave details of student placement rotation, clinical placement objectives and other information for staff & students.

4.2 Links with the University

The visitors met with Mr Phil Robinson, the Radiology Service Manager. Mr Robinson had been consulted on the new programme design and was of the opinion that communication between the Department and University was good. Email contact was used and he has used Blackboard, which he considered to be a powerful tool.

Sue Cutler was new to the University staff but has extensive clinical experience previously being employed within the NHS in Middlesbrough. She has assumed responsibility as visiting lecturer for Gateshead and was working closely with the Trust to establish student education at the site.

4.3 Staff Development

Mr Robinson was in the first year of his appointment to the Trust and clearly was committed to and enthusiastic about the activities taking place within the department, in particular he referred to developments in plain film reporting and barium enema reporting. The department was looking at new ways of working and supported development at all staffing levels; for example, he made reference to a helper undertaking an NVQ programme. He was committed to establishing a learning culture in the department.

4.4 Student Support and Facilities

As a new placement the University had dedicated time to briefing the department staff on the programme requirements and the role requirements of clinical staff. The University provides training for mentors and assessors. A clinical co-ordinator had been identified although was away from the Department on the day of the visit. As indicated above Sue Cutler is the University's visiting lecturer.

There are separate student facilities on site, which consist of a private study area with bench books. Students have access the department's film library, quality assurance test tools and the postgraduate library. Living accommodation is available at the trust.

The visitors met a second year student at the site. Because of students leaving the course she was the only 2nd year placed at Gateshead but would have liked to be with at least one another student from the same year. However, she felt she was gaining very good experience and was made most welcome at the site and received good support from staff.

5. Visit to the Darlington Memorial Hospital

5.1 Tour of the department and facilities

The visitors met Phil Cosson, Visiting Lecturer, who introduced them to Mr Paul Stephenson, Superintendent Radiographer, who escorted them round the department and associated facilities. It is a 12-room department, which includes CT and Ultrasound imaging facilities as well as a few mobile units and has a staff compliment of 25.5 WTE Radiographers. The Department is the Trauma centre for the Trust and has a digital room linked to Orthopaedics. The workload exceeds 85,000 examinations per annum.

The department appeared to be very well organised, with all appropriate Health & Safety documentation readily available to staff. Radiodiagnostic rooms were well equipped, and appropriate exposure charts and radiation protection information was displayed. Radiography texts were readily available to staff working in the department. It was noted that the Trust had recently achieved HQS accreditation.

A student noticeboard gave details of student placement rotation, clinical placement objectives and other information for staff & students.

5.2 Merger with Bishop Auckland General Hospital

Paul Stephenson explained that Darlington Memorial Hospital and Bishop Auckland General Hospitals had merged the previous year. Ingrid Walker, Radiology Manager and Paul Stephenson alternate between the two sites, with one of them usually on each site.

A rebuilding programme under PFI at Bishop Auckland Hospital is nearing completion. It is a 10-room department, which includes spiral CT and Ultrasound imaging facilities as well as a few mobile units. It has a staff compliment of 20 WTE Radiographers. The workload is around 70,000 examinations per annum.

Students are currently placed in the Department at Bishop Auckland Hospital for a week. It is proposed that it be approved for the placement of two students per cohort in rotation with the Darlington Memorial Hospital.

5.3 Links with the University

The department feels that links with the school are good, Ingrid Walker is on the Programme Steering Group and clinical staff participate in student interviews. There is feedback through students and mentors. Phil Cosson, the Visiting Lecturer was previously a radiographer in the department.

5.4 Staff Development

The visitors were informed that a majority of the staff had either obtained or were pursuing additional qualifications. It was observed that the extended role of radiographer is well established and the CPD is given a high priority with the department producing a training plan and detailed bid for funding. There is a Clinical Governance Group, a QA group, in which all staff have a role, and involvement in CIRUS. Students participate in reject analysis sessions.

The Department has its full complement of staff, including three who have recently returned to practice.

5.5 Student Support and Facilities

Paul Cosson, visiting lecturer, the member of the medical imaging team at the university appointed to this clinical site, visits the department 3 or 4 times each Semester.

The visitors met Karen Turner, site co-ordinator who explained her role. She is responsible for organising the students' experience in the clinical placement. She liaises closely with the visiting lecturer and considers that links with the University are now strong. There has been consultation on the new programme via the clinical liaison group meetings. There are also 3 members of the staff who act as student mentors who receive training for this role.

The visitors met a second year student who commented that she had been allocated to the site and although it is not the placement she would have chosen, she is pleased to have been placed there. She felt students receive extra support from the department. She commented that she tends to use the University rather than the department for study during clinical placement as there are more resources and the books in the department are slightly old. The students have seen the course proposals and have voted in favour of transferring to the new programme.

Facilities available to the students include a computer lab with 5 computers providing internet access and hence a link to Blackboard and the film library and evening access to the PgME library. Living accommodation is available if required. Students use the staff room like members of staff.

6. Visit to the Friarage Hospital, Northallerton

6.1 Tour of the department and facilities

The visitors met by Janet Townsend, Radiography Services Manager, who escorted them round the department and associated facilities. It is a 12-room department, which includes CT and Ultrasound imaging facilities plus a general room at a community hospital as well as a few mobile units and has a staff compliment of 21 WTE Radiographers. The workload is 47,000 examinations per annum. The department has hosted DCR student placements in the past and is keen to restore its involvement with radiographer education. The Hospital is 23 miles from Middlesborough and is due to merge with the South Tees NHS Trust next year.

The department appeared to be very well organised, with all appropriate Health & Safety documentation readily available to staff. Radiodiagnostic rooms were well equipped and appropriate exposure charts, and radiation protection information was displayed. Radiography texts were readily available to staff working in the department.

The department is currently fully staffed except for 2 members of staff on maternity leave, however one member will be leaving.

Visitors were informed that Sue Nixon, Principal Lecturer and Barbara Wilford, the visiting lecturer designate, had visited on several occasions to speak to staff about what was involved in having students. Training days are being arranged. 2 members of staff have attended mentor training days.

6.2 Meeting with Radiographers

The visitors were able to meet Anne Scott who will be site co-ordinator for the students who has attended a mentor training and attends clinical liaison committee meetings.

The visitors also spoke separately to two radiographers who confirmed their commitment to student training.

The visitors established that a majority of the staff had either obtained or were pursuing additional qualifications. It was observed that CPD is given a high priority in this department and the extended role of the radiographer is well established.

6.3 Student Support and Facilities

Visitors were informed that in addition to the site co-ordinator 2 other radiographers, currently on maternity leave, had attended a mentor training day.

There is no residential accommodation available but it is envisaged that students will be recruited locally. Students will share use of the staff room. A room has been identified where the intention is to locate a computer with internet access for the use of students.

Approval was being sought for 2 students per cohort, which had been the number of DCR students placed there. Staff felt the department could support 2/3 students but were reluctant to commit themselves to a third student until they had experience of exactly what was involved. The visitors considered that a cohort of 3 student was to be recommended as this would provide better peer support for students.

7. Conclusions and Recommendations to the Joint Validation Committee

The visitors consider that the Radiology Department at the Royal Victoria Infirmary, Newcastle, the Queen Elizabeth Hospital, Gateshead, Darlington Memorial Hospital and Bishop Auckland General Hospital, South Durham Health Care Trust and Friarage Hospital, Northallerton can support adequately students from the University of Teesside.

Based on the visits, validation event and documentation the following recommendations are made to the JVC:

- 1 Newcastle on Tyne Hospital NHS Trust, which includes the Royal Victoria Infirmary, Newcastle should continue to be approved for student placements from University of Teesside for 7 students per annum (maximum of 14 at any time). The visitors consider that the number of students at the Trust could be increased but leave this observation to be considered by programme team and Trust management.**
- 2 Darlington Memorial Hospital and Bishop Auckland General Hospital, South Durham Health Care Trust should be approved for student placements from University of Teesside for 6 students per annum (maximum of 12 at any time).**
- 3 Queen Elizabeth Hospital, Gateshead should be approved for student placements from University of Teesside for 3 students per annum (maximum of 6 at any time).**
- 4 Friarage Hospital, Northallerton should be approved for student placements from University of Teesside for 3 students per annum (maximum of 6 at any time).**
- 5 On the basis of evidence provided by the visits and previously submitted documentation that the designated placements not visited continue to be recognised as providers of appropriate education provision for the students following the BSc programme in Diagnostic Radiography offered by the University of Teesside.**

8. Conditions

Recommendation 4 is subject to:

Confirmation being received by the JVC that the room with a computer with internet access at the Friarage Hospital, Northallerton is ready for use prior to the first student being placed there in February 2003.

**Joint Validation Committee,
The Radiographers Board and the College of Radiographers**

**INSTITUTIONAL VISIT TO CENTURIA BUILDING, UNIVERSITY OF TEESSIDE
on 6th March 2002
in association with Periodic Review of the BSc (Hons) Diagnostic Radiography**

Visitors Mr R Price
 Mr M Viner
 Mrs M Embleton

Acknowledgements:

The visitors would like to thank the staff of the School of Health and Social Care for showing them round the building and answering questions.

1. Background

The School of Health and Social Care at the University of Teesside moved into the purpose built Centuria Building in Autumn 2000. The JVC agreed that an Institutional visit be undertaken in conjunction with the periodic review scheduled for early 2002, in order to fulfil the statutory requirement of the PSM Act 1960 for the approval of teaching premises.

2. Tour of the Building and the Facilities

The Senior Technical Manager acted as a guide for the visitors.

At the core of the building is a lofty atrium, which houses the canteen and informal meeting area. Situated on the ground floor are two well-equipped lecture theatres with a seating capacity for 280 and 150 students respectively. There are 6 or 7 general-purpose teaching rooms suitable for 25 - 40 people.

There is comprehensive computer provision including 30 workstations in an open access area (8am-9pm) and three computer laboratories, one of which is designated for radiography teaching.

The visitors were shown one of the four "interaction rooms" which is equipped for video recording and is used for teaching communication skills, role play and interviewing.

The tour also included a visit to the anatomy laboratory, occupational therapy and physiotherapy practical rooms and one of six nursing laboratories which was set up as a hospital ward that offers potential for use by the Radiography students and staff.

There are also nine small meeting/tutorial rooms.

Single occupancy offices are provided for programme leaders and other staff share offices for four people. There is also a staff kitchen on each of the three floors.

3 Radiography Teaching Facilities

The Medical Imaging Suite was situated on the first floor. The room contained 24 workstations, a feature of which was IMM software and the Platypus Ultrasound system. The workstations were also networked allowing access to the web-based Blackboard learning environment that is used as a resource for staff and students and for course delivery where appropriate. The visitors had a brief demonstration of the system. Blackboard can also be accessed from clinical placement sites. An ultrasound unit was also situated in the room.

Adjacent to the Medical Imaging Suite was the radiography teaching room that is equipped with viewing boxes and houses the film library. The Visitors noted there was no X-ray equipment on site.

4. Meetings with staff and students

Within the meeting with the programme team held as part of the periodic review the visitors enquired as to the facilitation of learning and teaching of positioning, dosimetry and other practical aspects within the University.

Staff explained that students were taken in small groups to clinical departments, where arrangements were made to use an x-ray room. These sessions often take place in an evening but had not so far caused a problem for students.

The students, however, considered it would have been useful to be able to practise positioning in the University prior to a clinical placement.

5. Tour of Learning Resource Centre

Iain Baird, Subject Team Leader for Health and Social Care, Library Information Services, showed the visitors, accompanied by Sue Nixon, round the purpose built Learning Resource Centre (LRC). The Ground floor contained general facilities for all students: counters for borrowing books; general reference materials; the Drop In Student Skills Centre (DISSC), where staff explained their role; and a Maths Centre. The LRC is well equipped with ICT facilities having a total of 400 networked computers and ample photocopying, printing and DVD and Video facilities.

The first floor of the LRC houses documentation relating to the School of Health and Social Care. On this floor there are: 2 large work station areas with computers; two quiet study areas; 2 group rooms with facilities for giving PowerPoint presentations and overhead projection, suitable for seminars; and a series individual study rooms, primarily for the use of research students. The visitors were shown the shelves containing books and journals, discussed the allocation of the budget for books and were shown a list of the journals available online. The university is hoping in the future to introduce a postal loan system for students on placements.

6. Conclusions

Overall, the visitors considered that the School of Health and Social Care offers a suitable environment for radiography education. The visitors were particularly impressed with the level of access to IT facilities in both the Learning Resource Centre and the Medical Imaging Suite. The latter in particular provided an excellent IT facility both for specific teaching of imaging with the IMM software and the more general educational support provided by Blackboard. However the visitors had some concern regarding the non-availability of x-ray equipment within the School.

7. Recommendations to the JVC

That the JVC recommend approval of the Centuria Building University of Teesside as an institution for the provision of Radiography Education subject to the following:

Recommendation

That the School of Health and Social Care consider the development of x-ray imaging facilities (both simulated and live equipment) within the Centuria Building.

Course: PG Dip Diagnostic Radiography (pre-registration)

Board of Studies: Allied Health Professions

Presented by: Dr Martin Benwell, Ms Jaggie Brah, Ms Sue Crowther, Ms Celia Goreham, Ms Delia Hayes, Mr Roger Hicks, Ms Rosie Simpson and Ms Mary Tod

Review panel: Professor Bencie Woll (chairman), Professor Ewart Carson, Dr Jennifer Edie, Ms Mary Embleton, Professor Chris Haines, Professor Rosemary Klem, Ms Pam Parker, Ms Beverley Snaith and Mr Aidan Whitty

Decision: Held until 28 February 2002

**Approved
Referred-back**

Stage: II

Date: 10 January 2002

Coversheet

Information: Complete

Signatures: Complete

The proposed new course would be offered from September 2002.

Purpose of course

The main aim of the course was to develop graduates from related subject areas to produce competent and reflective practitioners in radiography. It was anticipated that the aim to empower students to work autonomously would be achieved through building student confidence and preparing students to accept such opportunities when they arose in working life. The course team confirmed that the course objectives set out in the proposal could be interpreted as learning outcomes.

Promotion, recruitment and course development

Covered at stage I.

Resources

Identified at stage I.

Consultation Timetabling, Library, Budget, Computing, Other BoS – covered at stage I.

Course scheme

The panel was concerned over the stated H level of clinical skills learning outcomes and their assessment. The course team confirmed that in fact this assessment was carried out at M level, for example self-reflective statements and critical evaluation were expected. It was agreed that assessment of competency in clinical skills was not level based, students passed or failed.

The panel noted that the 80 point course credit scheme was in line with other courses within the Institute of Health Sciences, but that a change to the national norm of 120 for a postgraduate diploma would be a likely requirement in the future.

The shared learning opportunities which had been identified for this course were certain, but shared teaching would be subject to timetabling constraints. The innovative one week multi-discipline placement in the second year would contribute particularly to the experience of shared learning, as well as to the wider education modernisation agenda.

Assessment

There would be one 3 hour 'traditional' written examination. The rationale for using it was as a means to test a basic range of discipline knowledge and understanding. The assessment tables provided in the proposal might usefully indicate the size (eg number of words, time involved) of each assessment. The timetable should show all the assessment dates/deadlines. The panel felt there may be too many assessments, and the course team was invited to examine the possibility that the course may be over assessed.

There was some confusion over the purpose of the assessment weightings, given that the final course result was just a pass or fail. The course team must decide whether to retain these weightings, and if so, make their purpose clear to students.

The course team presented a coherent argument to support the statement that the Examination Board may, rather than will, offer a second attempt to candidates who have demonstrated the potential to satisfy the requirements. It was confirmed that the External Examiner would be a state registered radiographer.

Syllabuses, including project/dissertation

A total of 234 self-directed study hours were included in the study unit syllabuses, although the course structure indicated 259 self-directed study hours. Notwithstanding the particular nature of the course, this was felt to be a very low proportion (about 30%) of the total 800 academic hours. The hours of a typical City postgraduate course were split into one-third contact and two-thirds self-directed study. The course team was invited to review the nature of the contact hours and consider re-classifying some activities as self-directed, where appropriate, in order to increase comparability with other similar postgraduate courses in the Institute of Health Sciences. In revising the study unit outlines the course team must ensure all information required by the University Courses Committee checklist (cc4) is provided.

The course team confirmed that the Research Methods study unit had been strengthened with increased hours for critical appraisal and information searching. The unit's focus on healthcare research would differentiate it from research methods training likely to have been undertaken during students' undergraduate studies.

Placements – industrial, clinical, study abroad

The JVC members of the panel had held a previous meeting with members of the course team to consider the proposed clinical placement locations. Further information on facilities and staff available to support a postgraduate level course and expected student numbers was required. A summary of this meeting is appended.

Course management and quality assurance

It was confirmed that individual APL arrangements were not anticipated.

A course Liaison Committee comprising senior staff from clinical placement sites and the University would be formed. The committee would not report formally to the Course Management Team (there would be much common membership); issues would be referred as appropriate to relevant committees.

Student support

Support received in the clinical environment from hospital-based lecturers would be in addition to pastoral support provided by University-based personal tutors. Students would maintain a Personal, Professional and Academic Record.

Commendations

- The panel recognised that the course team had addressed recommendations made during the previous panel review on 14 May 2001, and commended the team on their excellent presentation to the panel on this occasion.
- The innovative one week second year placement in a multi-disciplinary training ward at the London Hospital (Mile End) was much welcomed.

Recommendations

The following issues are to be addressed within a draft definitive course document and submitted by the end of February. The panel authorised chairman's action to be taken in then recommending approval or referral of the course on behalf of the University. The JVC would follow normal procedures in confirming or otherwise accreditation of the course.

- M level learning outcomes and their assessment in clinically-related study units, including the research methods study unit, must be clearly documented.
- Study unit outlines must be revised to appropriately modify the contact/self-directed study hours split to better reflect the postgraduate nature of study, and provide all the information required by the University Courses Committee checklist (cc4). Hours must add up consistently throughout the course documentation.
- The shared learning aspects of the course should be given, and indeed merit, a greater prominence in the course documentation.
- The assessment tables should indicate the magnitude of each assessment. The timetable should show all the assessment dates/deadlines.
- The course team should revisit the course assessment strategy in light of possible over assessment, and clearly justify the choice and number of assessments used.
- The course team must decide whether to retain the assessment weightings, and if so, make their purpose clear.
- Further information on facilities and staff available to support a postgraduate level course, and expected numbers of postgraduate and if applicable undergraduate students at the proposed clinical placement locations must be provided.

Completed by: Helen Uglov

Date: 1 February 2002

Minutes

Joint Validation Committee

1

Committee Joint Validation Committee

Date Tuesday 14 May 2002

Time 10.30 a.m.

Venue Council Room, CSP

Present:

Margaret Curr

Lynne Clouder

Anne Galbraith

Sheila Lennon

Jenny Morris

Janet Price

Eileen Thornton (mins 40 & 55ff.)

Chair

In attendance:

Joanna Brayton

Jenny Carey

Helen Russell (mins 34 - 52, not 40)

Elaine Venables

Secretary

WELCOME & APOLOGIES

34. Apologies were received from Louise Jones, Val Maehle, Jane Lockwood, Carolyn Edwards, John Harper (HPC) and Nigel Palastanga. Helen Russell was welcomed as the new students' officer at the CSP and Elaine Venables, registration officer was observing.

MINUTES OF THE LAST MEETING

35. The minutes of the meeting of the Joint Validation Committee held on Tuesday 12 February 2002 were confirmed as an accurate record of the meeting.

MATTERS ARISING

36. i) AHP work on qualifying education

The value statement and project plan on qualifying education had been circulated to all allied health professional bodies and relevant committees and it was hoped that all professions would have signed up to the statement and the work plan by the end of the week. The statement and plan would be on the agenda for the educationalists forum

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meeting with the HPC education and training committee on 22 May. JVC would receive updates as appropriate.

ii) Development of M level attributes

The Committee noted that the endorsement group for qualifying programmes had held a detailed discussion on the attributes of M level study at post-qualifying level, and a paper bringing together these principles would provide a basis for discussion of pre-qualifying M level attributes at the July meeting of the JVC.

iii) Honours level entry

All institutions had agreed to implementing the honours level entry regulation in accordance with their own programme review. It was noted however that while the regulation had been agreed by various clinician and educator groups, including Council, some concern from clinicians was noted.

HPC UPDATE

37. The Health Professions Council took powers on 1 April and had agreed that until further notice, the arrangements for programme approval and review through the JVC would continue. The working title for qualifying approval groups was "Pre registration education and training working groups" although "JVC" would continue to be used. Members who represented the CPSM would until further notice represent the education and training committee of the HPC. The formal consultation on HPC procedures and policy was due to start in July and report at the end of the year. The Committee would receive consultation material in due course.

NEW CSP GROUP ON QUALIFYING EDUCATION ISSUES

38. The Committee noted the formation of a group at the CSP which was to take forward issues arising from the review of the curriculum in 2001. The Committee requested that a representative from the JVC be considered as a member of the group, given members' experience and the Committee's remit. This recommendation would be taken forward to the group's meeting in July.

JVC (02) 16

FEEDBACK FROM STUDENT CONFERENCE

39. The Committee received a summary of the feedback from its questions to the student conference in March 2002. The student's responses were welcomed and the Committee wished to particularly express support for increasing standardisation of clinical assessment forms.

JVC (02) 17

APPLICATIONS FOR AN INCREASE IN INTAKE

40. The Committee received the following applications for an increase in student

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numbers for the 2002 intake and appropriate responses were agreed for each institution.

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JB/JC

i) **University of Birmingham – from 88 to 100 students**

The Committee approved the increase, subject to some clarification on placement increase capacity.

ii) **Keele University – from 76 to 90 students**

The Committee approved the increase, in accordance with the review visit conclusions which had taken place on 10 May 2002.

iii) **Brunel University – from 98 to 120 students**

The Committee approved the increase and agreed that some clarification was needed on the funding arrangements and the exact numbers for the full and part time routes.

iv) **Leeds Metropolitan University – from 50 to 60 students**

The Committee approved the increase for 2002 entry. Further increases cited in their application would need to be submitted at a future date.

v) **University of East London – from 96 to 106 students**

The Committee approved the increase and noted that the validation visit for the flexible route on 29/30 May would provide further opportunity for JVC representatives to be assured of the resources for the provision.

vi) **Oxford Brookes University – from 36 to 48 students**

The Committee agreed that some further information was needed on the capacity for placements and detail of where placements to cater for the increased numbers would be found. This would be requested before approval could be given.

vii) **Colchester Institute – from 29 to 30 students**

The Committee approved the increase.

viii) **University of Liverpool – from 40 to 45 students**

The Committee agreed that some further information was needed on the capacity for clinical placements. This would be requested before approval could be given.

ix) **University of Hertfordshire – from 72 – 94 students**

The Committee agreed the need for more information on current placement surplus and capacity for 02/03 academic year.

x) **University of Wales College of Medicine from 79 to 80 students**

The Committee approved the increase for the full time BSc (Hons) Physiotherapy from 2002.

xi) **Sheffield Hallam University – from 88 to 100 students**

The Committee agreed the need for further information on the surplus placements and possibilities of new sites and additional placements in existing provision.

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41. The Committee discussed issues which had arisen as a result of the process and agreed that:

- i) Applications for increases less than 5 students would not require the same level of information.
- ii) The pro forma needed to be simplified to cover the total placements existing, total surplus for the current year, and number of placements assured and secured for the following year. Information on specific areas of practice for years beyond the following, was not feasible for institutions to provide. Further work would be done on streamlining the forms for future use.

42. NEW PROGRAMMES

CHRISTCHURCH COLLEGE CANTERBURY

- i) A meeting was held at the CSP in February with the Dean of Health at the College and plans for a physiotherapy qualifying programme were discussed. Since there had been no further contact, it was agreed that a letter be sent to the college, clarifying JVC time scales and indicating the need to submit a programme proposal document by the end of the year for a validation event in 2003.

ST MARTIN'S COLLEGE

- ii) The Dean was coming to the CSP for a meeting in June and an advert for a physiotherapist to assist in programme development had been published. The Committee would receive further information in due course.

SOUTH BANK UNIVERSITY

- iii) The University had won commissions for a part time route to start in Spring 2003. The interviews for programme leader were being held on 16 May. A programme proposal was expected for the July meeting.

PHYSIOTHERAPY PROGRAMMES

University of Birmingham

43. The Committee received the additional information in support of the proposal for the flexible learning route and approved the programme for submission to validation later in the year. The University would be informed.

University of Brighton

44. The Committee received a response to issues raised on the proposal for the MSc pre registration Physiotherapy and approved the programme for submission to validation in September. The University would be informed.

THE CHARTERED SOCIETY OF PHYSIOTHERAPY

validation in September. The University would be informed.

Brunel University

JVC (02) 20

JB

45. The Committee noted and accepted the response from the course team to concerns raised during the annual monitoring process.

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Coventry University

46. The Committee welcomed an evaluation from Karen Harrison on the impact of the large increase in intake approved for 2001 and was assured that the university was able to continue to manage the increased numbers.

JVC (02) 21

University of East Anglia

47. The Committee noted some notice of minor modifications to the third year of the BSc (Hons) programme, which would apply to the final cohort of students on the existing programme. The new programme started in September 2001. The scrutineer for the programme would be sent the details for noting when they were submitted.

JVC (02) 22

Glasgow Caledonian University

48. The Committee noted minor modifications to the BSc (Hons) Physiotherapy programme. The scrutineer had noted these.

University of Hertfordshire

49. The Committee noted and accepted the University's response to concerns raised in the annual monitoring process.

King's College London

50. The Committee noted that the approval of the increase in intake had been agreed on Chair's action, following the validation event at KCL on 17 April. In addition, the Committee noted and accepted the team's response to annual monitoring concerns.

JVC (02) 23

51. University of Salford

- i) The Committee received a letter from the University giving some initial details of a possible franchise arrangement between the university of Central Lancashire and Salford for a qualifying physiotherapy programme. The University would be reminded of the need to keep JVC up to date with developments and to submit appropriate documentation before approval could be considered.

JVC (02) 24

- ii) The Committee received an oral report of a meeting with South Cumbria and

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THE CHARTERED SOCIETY OF PHYSIOTHERAPY

Lancashire workforce development confederation outlining details of an inter-professional foundation programme, proposed to begin in September 2002. The programme was sub-degree and would not give a licence to practice, but there were some areas where further clarity was needed, particularly around stepping on and off. It was agreed that those involved would be invited to JVC in July to present the programme proposal so far.

- iii) The Committee noted that the University had implemented some minor modifications to the methods used to calculate degrees.
- iv) The Committee noted and accepted the additional information provided in response to annual monitoring concerns.

University of Southampton

52. The Committee received and accepted the additional information submitted as a result of the concerns raised during the annual monitoring process.

St George's Medical School/Kingston University

53. The Committee approved the increase in intake, having received further information in support of the application. The revalidation visit on 21 May would confirm this decision.

University of the West of England

54. The Committee welcomed the evaluation of the first intake of 130, requested last year and was assured that the university was able to continue to manage the increase, although the problems with clinical placement availability were recognised. The Committee also noted and accepted the response to issues raised as part of the annual monitoring process.

VALIDATION SCHEDULE

55. The Committee noted the outstanding events planned for 2002.

56. ANY OTHER BUSINESS

- i) The Committee noted a report that some trusts were making a first class honours degree a condition of employment. Members indicated that this practice had been occurring in some areas for a number of years and that the problem was likely to increase with the large numbers of graduates applying for junior posts. It was agreed the issue should be raised at the joint meeting of Education and Professional Practice Committees in July.
- ii) As a result of recent visits, a number of concerns were raised around the JVC expectations of review visits. The Committee agreed that clinical visits were useful as a PR exercise and to meet students and clinicians in the clinical

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JVC (02) 27

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JVC (02) 28

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environment but that further meetings as part of the validation could be a duplication of discussion. It was agreed that future event time tables should be considered to ensure that meetings with clinicians and students were not duplicated. The Committee also agreed the importance of making explicit in programme documentation the relationship between the programme outcomes, the CSP framework outcomes and the QAA benchmark statements for physiotherapy. Finally, members agreed the need to ensure specialist areas of practice were somewhere embedded into the curriculum, although not always allocated a particular placement.

- iii) The students had suggested that a questionnaire be completed by students prior to a validation event, as additional documentation for the JVC visitors. The Committee agreed that there were sufficient mechanisms in place for students to feed concerns into an event and a letter would be sent highlighting these.
- iv) The Committee received draft copies of revised material on the accreditation of clinical educators, which had been produced as a result of a meeting of educators from all physiotherapy qualifying programme providers. Members welcomed the proposals and accepted the need to look at accreditation of clinical educators as part of validation and review visits. However, the Committee felt that given that the accreditation was an aspect of CPD for physiotherapists, their role was not to accredit the programmes, and that the higher education consortium for CPD and the CSP endorsement group were more appropriate groups to consider programmes for accreditation. There would be further discussion on the issue at meetings of these groups.

DATE OF NEXT MEETING

- 57. The date of the next meeting was Thursday 18 July 2002.

JRB
24 May 2002

JB/JC

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Joint Validation Committee

Occupational Therapists Board / College of Occupational Therapists

REPORT FROM A MEETING OF THE JOINT VALIDATION COMMITTEE 5 JUNE 2002

For Action by the Education and Training Committee (HPC) and the Education and Practice Board (COT)

1 Page 5 Item 8.1 - Queen Margaret University College, Edinburgh - Postgraduate Diploma in Occupational Therapy (Pg Dip OT) - revalidation 7 February 2002

The JVC recommends the continued approval of the graduate entry PG Dip OT at Queen Margaret University College, Edinburgh, as a programme and qualification conferring eligibility for state registration with the HPC for a period of not more than five years, commencing September 2002.

2 Page 6 Item 8.4 - York St John College, University of Leeds - Bachelor of Health Science in Occupational Therapy with Honours (BHSc (Hons) OT) - revalidation of the 3-years full time and the 4-years part-time programmes; validation of graduate entry 2-year programme 8-9 April 2002

2.1 The JVC recommends the continued approval of the 3-years full time and the 4-years part-time BHSc (Hons) Occupational Therapy awarded by the University of Leeds at York St John College, as a programme and qualification conferring eligibility for state registration with the HPC for a period of not more than five years, commencing September 2002.

2.2 The JVC recommends the approval of the new 2-years graduate entry BHSc (Hons) Occupational Therapy awarded by the University of Leeds at York St John College, as a programme and qualification conferring eligibility for state registration with the HPC, for a period of not more than five years, commencing September 2002.

FOR INFORMATION

3 Page 10 Item 9.9 - University of Ulster - Bachelor of Science in Occupational Therapy with Honours (BSc (Hons) OT) - interim visit 11 March 2002

The attention of the ETC and the E&P Board are drawn to issues of concern to the Committee relating to staffing resources and workload, the training and development of practice-based educators, and the high attrition rate for this programme. The JVC is monitoring the situation and will keep the ETC and E&P Board informed of developments (report of visit attached).

Remy R Reyes
Validation Officer

20 June 2002

MINUTES OF A MEETING OF THE JOINT VALIDATION COMMITTEE
held at the College of Occupational Therapists
on Wednesday 05 June 2002

JVC3/01-02

Present

Mrs Ruth Heames
Dr Jai Kulkarni
Mrs Carol Lloyd (HPC Alternate member)
Mrs Sue Thompson (alternate to Mrs Gacal) – withdrew for Item 8.4
Mr Paul Turner
Mrs Gill Urquhart
Mrs Carol Walker – withdrew for Item 8.4
Mrs Catherine Wells (in the Chair)

In attendance

Ms Lucinda Pilgrim, HPC
Dr Irene Ilott (from Items 1-6; 11.1 and 13)
Miss Remy R Reyes, Validation Officer

ACTION

1 WELCOME

The Chair welcomed all members present, in particular Mrs Carol Lloyd, OT professional member (alternate) on the Health Professions Council (HPC), who was attending as an observer.

2 APOLOGIES FOR ABSENCE

2.1 Apologies were received from Dr Jennifer Caldwell, Ms Joanne Pratt (alternate to Dr Caldwell) Mrs Pauline Gacal, Mrs Liz Gilbert, Ms Deb Hearle and Mrs Sandy Moffat.

2.1 The Chair stated that JVC has been experiencing serious attendance problems for the last few meetings which was affecting the discussion of important matters. It was pointed out that this was a reflection of people's increasing workload and busy schedules.

3 JVC MEMBERSHIP

3.1 HPC Approved Members

3.1.1 Noting item 6.2.1 of the Minutes of the first meeting of the Education and Training Committee (ETC) of the HPC, members expressed concern that the Department of Health wanted to extend review processes into validation and post-registration qualifications. How the process would be articulated for

ACTION

Scotland was asked. It was pointed out that the Value Statement to which professional bodies had signed identified on-going good practice and should be reinforced.

- 3.1.2 Members wished to know why issues of good character and health should fall to the Council for the Regulation of Health Care Professionals and not the HPC (item 6.2.2).

L. Pilgrim

- 3.1.3 It was AGREED to accept the offer from Ms Pilgrim to seek clarification from Dr Peter Burley on the above matters.

- 3.1.4 It was pointed out that the HPC Consultation Document to be circulated at the end of July might also be an opportunity for raising the above issues. In view of the short consultation period, the JVC must ensure that its response was fed to the appropriate body.

JVC

4 MINUTES OF THE PREVIOUS MEETING - 27 FEBRUARY 2002

The Minutes were confirmed as a correct record of the meeting and signed by the Chairman.

5 MATTERS ARISING - 27 FEBRUARY 2002**5.1 Training for External Examiners**

- 5.1.1 In the absence of Mrs Gacal, Ms Thompson read Mrs Gacal's report. The Chartered Society of Physiotherapy no longer runs courses for external examiners. It was suggested that a joint event between the COT and CSP might be held to look at common issues.

- 5.1.2 Mrs Heames stated that since some institutions only wish to appoint experienced examiners, new people were not being used. This practice was not widening the pool of examiners. Dr Ilott informed that Henny Pearmain (COT Professional Affairs Officer) was collating a list of practitioners who are willing to do clinical audit and suggested that they might be invited to enter their names in the register. It was suggested that the JVC may be able to assist by running workshops which people could attend and put on their CV or educationalists may be given opportunity to shadow experienced examiners, but these have resource and cost implications.

- 5.1.3 It was AGREED to find out how many people on the register did not have external examining commitments and to accept the offer from Mrs Heames to raise this issue at the next meeting of the Education and Practice Board.

R Heames/ E&P Board / V. Officer

5.2 Group Head for Education

- 5.2.1 Dr Ilott reported that two applications have been received from re-advertisement but the College failed to appoint anyone to the post. A copy of the recent letter from the Chief Executive to all Programme Directors in response to comments made at the meeting of the Network of OT Educators held in March was circulated. Mrs Richards invited Programme Directors to

ACTION

apply for the post or to suggest potential candidates. Dr Ilott has been providing Group Head for Education cover but only for particular high priority projects. She commended the Education staff for continuing to carry out their duties despite the difficulties. The Department was looking at some ways of sharing some of the work of the Validation Officer.

5.2.2 Members stated that it was important to make the financial package attractive to entice the appropriate candidate to uproot and transfer to London.

5.3 **COT Position Statement on Lifelong Learning**

5.3.1 COT Council had approved the position statement at the Council meeting in April 2002. The statement was published in the May issue of the British Journal of Occupational Therapy. Dr Ilott reported that very positive feedback from readers of the journal has been received.

5.3.2 Dr Ilott informed that the statement was being printed as a separate document for wider circulation particularly to Chairs of workforce development confederations. Members suggested the following for inclusion in the circulation list:

- Academic registrars of HEI (so that the document could be placed with their validation procedure)
- Trusts (so that focus on the requirement for staff to be released for CPD)
- Scottish Health Board and Scottish Education
- Welsh Assembly
- Department of Health and Social Services and Public Safety in Northern Ireland.

5.4 **Curriculum Review – MSc Occupational Therapy as pre registration qualification**

5.4.1 Mrs Heames pointed out that the pressure on the professional body to state its position on the approval of programmes at master's level using the title 'occupational therapy' had originated from HEI wishing to move forward from the Postgraduate Diploma to the MSc. When the position statement of lifelong learning was drafted, the Curriculum Framework Review Working Group had considered if there was a need for stating the maximum level of the academic award for pre registration. The Education and Practice Board recognized the need for an open discussion of named master's awards for pre registration especially since both the Chartered Society of Physiotherapy and the College of Radiographers have moved along this route. It now seems timely to have this discussion in order for the JVC to have a stronger base from which to work. The Board asked the JVC to prepare the paper that would form the basis of the discussion.

5.4.2 It was AGREED to form a small working group of 5 or 6 members to draft the paper and to invite suggestions and informed comments from all members on the issues that would need to be covered. Suggestions from members present at the meeting were:

JVC

ACTION

- Recognition that not everyone with a first degree can perform at Master's level
- Pre registration programmes in Canada will be at Master's level from 2008
- The title of the award linked with the level of professional practice
- QAA definition of postgraduate awards was not particularly helpful
- The user's perspective (inclusion of lay person's viewpoint)
- Can the professional body (via the JVC) impose a particular award or is this the remit of the HEI

5.4.3 It was AGREED that members who wished to be part of the working group inform the Validation Officer. It was also AGREED that Ms Joanne Pratt be invited to be part of group to share the Scottish perspective and her experience of the MSc at Glasgow Caledonian University. (Post-meeting, Ruth Heames, Gill Urquhart, Carol Walker and Catherine Wells volunteered to be in the working group.)

6 DRAFT JVC HANDBOOK OF PROCEDURES

6.1 Dr Ilott reported that following Council's approval of the statement on lifelong learning, she and the Validation Officer reviewed the JVC handbook of procedures to ensure that it conformed to the requirements of the professional body. They agreed that the handbook needed updating in view of the many changes that had taken place in recent years that directly affected pre registration OT education.

6.2 Members concurred that although the future of the JVC was uncertain under the new structure of the HPC and the planned DoH arrangements for validation and subject review, it was still necessary to ensure that JVC arrangements were up to date and meet the requirements of the professional and statutory bodies. It was AGREED that auditable criteria would be preferred and that the COT standards document format would be followed. The target time for implementation was September 2002.

6.3 It was AGREED to address the following issues in the revised document:

- Timetable: the minimum amount of time for single profession events and inter-professional shared events
- Documentation: timing of submission; amount of documentation; content and evaluation
- Shared elements: contents of shared elements and maximum amount; minimum assessment and credit rating of profession specific elements for the named professional award
- Standards of teaching and learning: peer review of teaching
- External examiners reports; annual programme reports (for all stakeholders)
- Admission strategies
- SSR: formula for each route to qualification (add as appendix)
- Common terminology (glossary to be added where different terminologies are used by stakeholders)
- Timescale for completion of programme; intercalation; stepping-on/stepping-off: criteria

Dr Ilott / R Reynolds

ACTION

In addition to the above issues, the meeting considered the 2nd draft and members suggested amendments to the text for the preparation of the 3rd draft to be circulated to all members in the summer.

6.4 It was **AGREED** to seek further comments and suggestions from absent members. **Absent members**

6.5 The meeting recorded its thanks to Dr Ilott and the Validation Officer for their work on the draft handbook.

7 CHAIRMEN'S ACTIONS**7.1 University of Derby – Reconfiguration of student intakes**

Members endorsed Chairs' action to approve the re-configured intakes to the three routes to qualification at this institution. It was noted that the total intake across all routes remained the same.

JVC**8 VALIDATION AND REVALIDATION REPORTS****8.1 Queen Margaret University College, Edinburgh – Postgraduate Diploma in OT (revalidation 7 February 2002)**

8.1.1 The full confirmed report of the event, the programme team's response to the conditions and recommendations and the JVC representatives' comments on the team's response were received and fully considered. The programme was submitted for review, which was a condition to its approval three years earlier. The programme team had also submitted the Master's degree route for validation..

8.1.2 The JVC was represented at the event by Ms Deb Hearle, Programme Manager, All Wales Part time Programme, University of Wales College of Medicine and Mrs Rhonda Pike, Head of Occupational Therapy, Norfolk and Norwich University Hospital NHS Trust. Ms Hearle and Mrs Pike considered the revised documentation and were satisfied that it had met all the conditions for the continued approval of the postgraduate diploma and that the programme team had adequately addressed the panel's recommendations.

8.1.3 It was **AGREED** that the continued approval of the graduate entry Postgraduate Diploma in Occupational Therapy be recommended to the Education and Practice Board (COT) and the Education and Training Committee (HPC) for a further five years as follows:

**JVC
E&P Board, COT
ETC (HPC)**

<u>Course</u>	Postgraduate Diploma in Occupational Therapy
<u>Type of Course</u>	Graduate entry
<u>Institution</u>	Queen Margaret University College, Edinburgh
<u>Qualification</u>	PG Dip Occupational Therapy
<u>Awarded by</u>	Queen Margaret University College, Edinburgh

ACTION

<u>Length of Course</u>	Two years (full time attendance) or Three Years (part time attendance)
<u>Start Date</u>	September 2002
<u>Date of Next Review</u>	Before Academic Year 2007

8.1.4 The Master's degree route was not validated.

8.2 **University of Teesside – BSc (Hons) OT (revalidation 5-6 March 2002)**

8.2.1 The report of the event was received and considered. The response by the programme team to the revalidation panel's conditions for continued approval, and recommendations have not been received. They were submitted to the Academic Registrar who had been on sick leave. The approval by the Chair of the panel therefore had not yet been obtained. Mrs Ruth Heames and Ms Joanne Pratt represented the JVC on the panel.

8.2.2 Mrs Heames spoke to the report. This was a shared event with the JVC of Physiotherapy and Diagnostic Radiography. The shared common framework was thoroughly discussed. The JVC representatives of each profession separately considered the profession specific modules and issues. Visits to practice placements were undertaken. The OT programme and team have moved forward since the last review.

JVC

8.2.3 It was AGREED to await the submission of the response by the programme team and to deal with this by post or email.

JVC

8.3 **University of Teesside – Graduate Entry Postgraduate Diploma in OT (validation 19-20 March 2002)**

In the absence of the confirmed report of the event and the response by the programme team, it was AGREED to defer this to the September meeting. It was noted that the programme was not scheduled to start until February 2003.

Agenda Sep 2002

8.4 **York St John College, University of Leeds – BHSc (Hons) OT (revalidation and approval of new route 8-9 April 2002)**

8.4.1 The full confirmed report of the event, the programme team's response to the conditions and recommendations and the JVC representatives' comments on the team's response were received and fully considered. Mrs Catherine Wells, Lecturer at the University of East Anglia and Ms Stephanie Hobson, Senior Lecturer at Oxford Brookes University, represented this Committee at the event.

8.4.2 Mrs Wells spoke to the report and response document. The event was shared with the JVC of the Chartered Society of Physiotherapy. The shared common framework was thoroughly discussed. The enormous amount of repetition in the submitted documentation could have been reduced by the production of a single common framework document. The JVC representatives of each profession separately considered the profession specific modules and issues. The programme team was commended for their

ACTION

excellent mapping of the learning outcomes against the QAA subject benchmark statements for all the routes to qualification. Visits to practice placements were undertaken. The panel was informed that the programme would be moving to new purpose built accommodation in 2003 and the panel was shown the site of the new build. Ms Hobson and Mrs Wells considered the revised documentation and were satisfied that it had met all the conditions for the continued approval of the honours degree programme and that the programme team had adequately addressed the panel's recommendations.

- 8.4.3 It was AGREED that the continued approval of the BHSc (Hons) Occupational Therapy be recommended to the Education and Practice Board (COT) and the Education and Training Committee (HPC) for a further five years as follows:

<u>Course</u>	BHSc (Hons) Occupational Therapy
<u>Type of Course</u>	Full time/part-time in-service/graduate entry
<u>Institution</u>	York St John College
<u>Qualification</u>	BHSc (Hons) Occupational Therapy
<u>Awarded by</u>	University of Leeds
<u>Length of Course</u>	Two and three years (full time attendance) or Four years (part time attendance)
<u>Start Date</u>	September 2002
<u>Date of Next Review</u>	Before Academic Year 2007

- 8.5 University College Northampton – BSc (Hons) OT (revalidation 29-30 April 2002)

- 8.5.1 In the absence of a written report of the event, Mrs Walker gave a preliminary verbal report. Mrs Moffat and Mrs Walker represented the JVC on the validation panel. The event was jointly held with the JQAT for Podiatry. It was intended that the shared common framework would be shared also with nursing and medicine. The programme team submitted three routes to qualification for approval – 3 years full time attendance; 4 years part time attendance; 4 years in-service by part time attendance. The latter was innovative in which students practice placements would be within the region and recognition of the stage of their progression through the programme would be reflected in their employment grading and pay. Conditions in respect of the documentation and staffing were made.

- 8.5.2 It was AGREED to await the full report and programme team's responses to the conditions and recommendations.

- 8.6 St Love's School of Health Studies, Exeter – BSc (Hons) OT (approval of amendments to Level 1 – 6 June 2002)

Mrs Walker informed that she would be accompanied by the Validation

ACTION

Officer at a meeting to be held at St Loye's at which the Programme Leaders of the Podiatry and Speech and Language Therapy degree programmes, and representatives from the University of Exeter, would also be present. The occupational therapy programme team was seeking approval of amendments to level 1 of the validated programme. This comprised the delivery of modules that would be shared between the BSc (Hons) in Occupational Therapy, Podiatry and Speech and Language Therapy across two universities (University of Exeter and University of Plymouth). Students would be given the option of attending these modules at the site of their choice, and returning to the host institution for profession specific modules. It was AGREED to await the outcome of the meeting.

9 **ROLLING LIST OF VALIDATED PROGRAMMES**

The meeting received information updates and reports of interim visits.

9.1 **The Robert Gordon University – BSc (Hons) OT**

The Validation Officer reported that Miss Paterson would be retiring as Principal at the end of June 2002. The University had been asked about the arrangements for the appointment of her successor and reminded of the requirement by the professional body to be represented in the interview panel.

9.2 **Crawley College – BSc (Hons) OT**

The letter from Mrs Zielfa Maslin, Course Director, was tabled. She informed that she had resigned as Course Director effective the end of August 2002. The post will be advertised in the June 2002 issue of the British Journal of Occupational Therapy. The staffing update was noted. It was AGREED to await the outcome of the advertisement.

JVC

9.3 **The University of Liverpool – BSc (Hons) OT (interim visit 21 March 2002)**

9.3.1 The report was noted. The interim visit was undertaken in view of the extension of the validation approval of the programme for 2 years. Ms Hearle and Mrs Urquhart represented the JVC, with the Validation Officer in attendance.

9.3.2 Mrs Urquhart spoke to the report of the visit. The JVC representatives were provided with copies of the external examiners reports and the course annual reports. External examiners raised their concerns with the assessments, which appeared to be rigorous for Levels 1 and 2 but seemed to have leveled off at Level 3. Issues around physical resources were also raised at the visit.

9.3.3 It was AGREED that the attention of the JVC representatives be drawn to the issues raised in the visit when the programme is revalidated in 2003.

JVC reps to
Revalidation 2003

ACTION

9.4 Queen Mary, University of London – Postgraduate Diploma in OT (meeting held on 23 May 2002)

9.4.1 Noted the report of the meeting and QMUL's response to the issues raised by the JVC regarding the staffing complement for the OT programme. The joint Chairmen represented the JVC at the meeting, with the validation Officer in attendance. Mrs Heames gave a brief background to the visit. A meeting with senior management from the School of Medicine and Dentistry and the OT Programme Director was requested by the JVC to inform itself fully of the reported changes to the validated programme as a result of budget constraints imposed on the School due to reduced funding from HEFCE in response to the result of the Research Assessment Exercise (RAE). Two representatives from the North East London Workforce Development Confederation were present at the meeting. The confederation assured the JVC of its commitment to continue commissioning for OT education in the northeast region of London. The discussion also focused on the Division's arrangements for the short- and long-term future of the OT programme at QMUL.

9.4.2 It was AGREED to await further developments with staff appointments and the arrangements for the short and long term future of the occupational therapy programme.

JVC

9.5 South Bank University – BSc (Hons) OT

9.5.1 Noted the staffing update provided by the Programme Director. The appointment of Ms Veronica Putnam, practitioner at Newcastle City Health Trust (Mental Health) as new external examiner to the programme was noted.

9.5.2 Members continued to be concerned that the University had not appointed an experienced educationalist to the external examiners panel for this programme in light of the high number of students who were awarded a first class degree in 2001. Members noted that Ms Ruth Living, the remaining educationalist examiner was due to complete her term at the end of this academic year.

9.5.3 It was AGREED that the final results from this programme be forwarded to JVC members as soon as they are released.

Validation Officer

9.6 University of East Anglia – BSc (Hons) OT – minor changes to assessments

Noted for information. It was AGREED to endorse the amendments.

JVC

9.7 University of Salford- BSc (Hons) OT – postponement of revalidation

Noting that plans were underway to develop a faculty framework for ~~effective inter-professional education across the allied health professions,~~ nursing and social work, it was AGREED to approve the request to defer the revalidation of the programme to Spring 2004.

JVC/ U. Salford

ACTION**9.8 University of Teesside – BSc (Hons) OT – appointment of Principal Lecturer/Subject Leader**

The appointment of Mrs Sarah Johnson as Acting Principal Lecturer and Subject Leader was noted.

9.9 University of Ulster – BSc (Hons) OT – interim visit (11 March 2002)

9.9.1 The report of the interim visit and the responses from the Dean of Faculty and Head of School of Rehabilitation Sciences were noted. The visit was undertaken in accordance with the requirements under section 4(c) of the PSM Act 1960. Mrs Walker and Mrs Wells represented the JVC, with the Validation Officer in attendance.

9.9.2 Mrs Walker reported that the University's response to the visit was very negative. The visit focused on the staffing level for the programme, staff workload, technical and administrative support, development and quality issues on fieldwork education, staff development and research activities. The programme had been operating for many years with a staff / student ratio (SSR) that exceeded the 1:15 recommended by the JVC. There was also concern at the loss of the Practice Development Officer whose workload had been distributed to the remaining academic staff, and the lack of a strategy for the training and development of practice based educators.

9.9.3 Noting the responses from the Dean and the Head of School, it was AGREED to monitor carefully the changes in the next annual report and to draw the attention of the Education and Practice Board and the Education and Training Committee to the issues that give cause for concern. Members expressed the high attrition rate for a singularly small programme.

JVC
ETC
E&P Board

10 DRAFT REPORT OF THE ANNUAL MONITORING SCHEDULES 2000-2001

10.1 The draft report was tabled. The meeting recorded its thanks to the Validation Officer for her work on the report. It was pointed out that high attrition rate for Scotland for this year was due to the way that the results were reported for students who had completed the requirements for the ordinary degree and those who wished to continue to study for the honours degree. It had been suggested that first destinations of new graduates might be included in the next reports. It was pointed out that not all institutions collect this data and since this information was not within the remit of the JVC, this report may not be the appropriate place for the data.

10.2 It was AGREED that any additional comments should be forwarded to the Validation Officer for the final report for publication and wider circulation.

All members

11 REPORTS FROM MEETINGS OF THE PROFESSIONAL AND STATUTORY PARENT BODIES

ACTION

11.1 Position Statement on the continuation of approvals and continued approvals under Sections 4 & 5 of the PSM Act 1960 during the transitional period of the HPC

This was noted for information.

11.2 Report from the final meeting of the Occupational Therapists Board held on 15 March 2002

The Minutes were noted for information. Mrs Wells offered to follow up with the Board Chairman the letters which should have been sent to Queen Mary University of London and the University of Ulster, regarding outstanding concerns (see Items 9.4 and 9.9).

C Wells

11.3 Report from the meeting of the Education and Practice Board held on 13 March 2002

Noted for information.

12 **UPDATE ON QAA/DOH PROTOTYPE REVIEWS**

The update from Mrs Heames was received.

13 **FOUNDATION DEGREES**

Dr Ilott reported that the second draft of the COT statement was being prepared. It was AGREED that approval of these programmes lay outside the remit of the JVC.

14 **JVC FINANCE**

The report of the budget expenditure to date was noted. The Validation Officer reported that she had alerted the Acting Group Head for Education and Practice JVC was likely to overspend this year because of the rise in the volume of work which had not been provided for in the budget planning.

15 **ANY OTHER BUSINESS**

15.1 Coventry University – expansion of OT commissions and course delivery

Noted that discussions were underway for the expansion of course delivery in partnership with Keele and Staffordshire Universities, in conjunction with the West Midlands South Confederation (Coventry and Warwickshire).

15.2 All Wales Part-time Occupational Therapy Programme – BSc (Hons) OT – relocation

Noted the planned move of the programme to Eastgate House, Cardiff, from September 2002. The meeting recorded its best wishes to the programme team on their relocation and looked forward to visiting the new accommodation when they have settled in.

JVC programme of visits

		ACTION
15.3	<u>Learning and Teaching Support Network (LTSN) – First Occasional Paper</u>	
	Noted. It was AGREED to circulate the information to all members.	Validation Officer
16	DATE OF NEXT MEETING	
	25 September 2002	

The Chair thanked all members present for their reports and contribution to the discussions. There being no further business, the meeting was closed at 15.25 hours.

**DIETITIANS
PRE-REGISTRATION EDUCATION & TRAINING
WORKING GROUP
27 May 2022**

**CATEGORIES OF APPROVAL AND CONTINUED APPROVAL FOR
DECISIONS AT THE EDUCATION AND TRAINING COMMITTEE**

1. **Approval of New Courses under Section 4(1)(a) and (b) of the PSM Act 1960**
(By the Privy Council, forwarded from the Council on the recommendation of the ETC acting on the advice of a subordinate body)

Minute 11.1 University of Surrey
Minute 11.3 University of North London
Minute 11.4 Chester College of Higher Education (University of Liverpool)

2. **Approval of Clinical Placements under Section 4(1)(c) of the PSM Act 1960**
(For Chairman's Action)

Minute 10.2.13 North Glasgow University Hospitals NHS Trust
Minute 12.1 West Hertfordshire Hospitals NHS Trust
Minute 12.3 St Mary's NHS Trust
Minute 12.4 Bradford Hospitals NHS Trust
Minute 12.5 Forth Valley Acute NHS Trust
Minute 12.6 King's Lynn & Wisbech NHS Trust
Minute 12.8 Kingston Hospital NHS Trust

MINUTES of a meeting of the Dietitians Pre-Registration Education and Training Working Group held at 11.00am on Monday 27 May 2002 in the Council Chamber, Park House, 184 Kennington Park Road. London SE11 4BU.

Present: Miss G C Pearson (*Chairman*)
Mr D J Barham
Mrs S E Butson
Mrs P L Douglas
Dr S A Jebb
Professor A E de Looy
Miss M D MacKellar
Miss M E Sanderson
Miss J E Thomas

In attendance: Ms R Simpson (*BDA*)
Mrs J C Smith (*Visit reports*)
Mr G L Milch (*Secretary*)

Item 1. 15/02 APOLOGIES FOR ABSENCE

Received from Mrs Firmin, Mr Ross and Mrs Spalding.

Item 2. 16/02 MINUTES OF THE LAST MEETING

It was agreed that the minutes of the meeting held on 7 February 2002 be confirmed as a true record and signed by the Chairman.

Item 3. 17/02 MATTERS ARISING FROM THE MINUTES

3.1 Placements

3.1.1 The Group noted that, as at 16 May 2002, there were 51 approved A placements, 8 B placements and 0 C placements.

3.1.2 The Group noted that a database was being created. It would not be possible to arrange for external access to the database. It was agreed that a copy of the latest position would be sent regularly on at least a monthly basis to the Placements Officer.

3.1.3 It was reported that there had been some confusion over the letters sent to Trusts over the type of placement and there was a need to review the standard letters. There was concern that the standardisation of report presentation had been allowed to drift and should be re-imposed. It was recommended that visit reports be put on the HPC website. It was agreed that a small working party (Mr Barham, Mrs Butson, Miss Pearson and Miss MacKellar) should meet to review standard documentation and processes given that the Dietitians Board had been abolished.

- 3.1.4 There were concerns that students were being sent to unapproved placements. It was reported that one A placement and two B placements had been used without approval. Mechanisms were in place to facilitate approval swiftly at the HPC on receipt of the documentation.

3.2 External Examiners

The Group noted that the issue of external examiners had been remitted to the HPC's Education & Training Committee. The Director of Education & Policy as secretary to the Committee had returned the request. Clarification would be sought as to the role of the HPC in approving external examiners for courses leading to State Registration.

3.3 Leeds Metropolitan University

The Group noted that the former Board Chairman had written to the Deputy Dean of the Faculty of Health & Environment of Leeds Metropolitan University agreeing the closure of the issue of module descriptors. There would be no further action.

Item 4. 18/02 JOINT QUALITY ASSURANCE COMMITTEE

4.1 Meeting with Representatives of the BDA

- 4.1.1 The Group was informed that there had been a meeting earlier that day with the Chief Executive and the Education & Training Officer of the BDA. The Group had been represented by Miss MacKellar and Miss Pearson accompanied by Mr Milch.

- 4.1.2 It was reported that there had been a useful discussion resulting in the need for the BDA to look further into the process to clarify the issues involved that required to be managed via the Secretariat. It was hoped to set up the Committee within the next two months and run it on a pilot basis for the remainder of the first transitional period to 31 March 2003.

- 4.1.3 It was agreed that the principal purpose of the JQAC was to include representation by the BDA to involve the Association more closely with pre-registration education and training.

- 4.1.4 It was agreed that the Working Group was forerunner of the proposed JQAC from the HPC's perspective.

4.2 Job Description

It was agreed that the circulated Job Description for the JQAC secretary covered the requirements other than the need to chase up missing documentation for placements and any follow-up requirements.

Item 5. 19/02 NEW TRAINING PLACEMENTS

- 5.1 The Group received explanatory flow charts to explain the training system approval process.

- 5.2 Several suggestions were made as to changing the charts to make them more self-explanatory. Miss Pearson and Ms Simpson undertook to do the revisions. The final version would appear in *Dietetics Today* which should ensure that most of those involved in training at any level should receive the information. The final version would be sent separately to course tutors and current approved trainers.

Item 6. 20/02 PLACEMENT QUALITY ASSURANCE STATEMENT

Professor de Looy tabled her report and it was agreed to discuss it together with Item 14.

Item 7. 21/02 REVIEW OF SHORT-LIFE WORKING GROUP ON PLACEMENTS

- 7.1 The meeting received an oral report on the work of the Working Group.
- 7.2 Notes of the meeting held on 18 April 2002 had been circulated. It was explained that the notes represented 'blue sky' thinking and had been the outcome of a brain-storming session to be reviewed at the next meeting. The meeting was advised that the Working Group had been arranged before the BDA had decided that, in the long term, it would withdraw from involvement in the brokerage of the placement system. Miss MacKellar requested that any comments on the notes should be sent to her before the next meeting on 24 June 2002.

Item 8. 22/02 MEETING ON PLACEMENT PROVISION

- 8.1 The meeting noted that the Faculty of Health & Environment of Leeds Metropolitan University was arranging to host a meeting for key stakeholders to discuss placement shortage. The meeting was due to be held in Leeds on Tuesday 18 June 2002.
- 8.2 It was noted that the meeting would and could only cover the situation in England.

Item 9. 23/02 REVIEW OF THE IMPLEMENTATION OF THE NEW PRE-REGISTRATION EDUCATION AND TRAINING SCHEME

- 9.1 There was discussion on several aspects of the scheme. There was concern over flexibility of dates of starting placements. Some courses operated within tight timing constraints and the former Board's concerns on the issue had been pointed out. The need to advise approved institutions on the matter and suggest adopting more flexibility was considered.

- 9.2 It was reported that the students who had experienced Placement A had been very positive about the four weeks spent thus. It was agreed that a full review could not take place until several cohorts had been through all three placements of the new scheme. A proper audit would then need to be carried out. This would require feed-back from tutors, trainers and students. It would be essential to discover whether the ultimate output – trained registrable dietitians – were regarded as better or worse, happier or unhappier than those who had experienced the former 31 week block placement. Some of the required standards would be found in the subject benchmarking statement. It was agreed that the standards for audit would be discussed at the next meeting.
- 9.3 It was agreed that Miss Thomas and Miss Sanderson would look at the possibility of submitting a joint proposal for research funding for AHPs to undertake the audit/evaluation which would be supported by the BDA, the HPC and HEIs.

Item 10. 24/02 MINUTES OF THE FINAL BOARD MEETING

- 10.1 The meeting received the confirmed minutes of the Board meeting held on 8 March 2002. It was noted that Professor de Looy had attended but had not been shown as having done so.

10.2 Matters Arising

10.2.1 The Robert Gordon University

The meeting noted that the revised report still required amendment and would need to be returned to the visitors. It was agreed that in the light of the visitors' concerns the conclusion of the report needed to be revised to include mention of the issue of the over-didactic approach and requiring a move towards a more student-centred approach. The issue of pharmacology also needed to be highlighted. The further revision of the report would be sent to Miss Pearson, Miss MacKellar or Mrs Butson for clearance.

10.2.2 University of Wales Institute, Cardiff

Following receipt of the re-written report it was confirmed that approval under the terms of the PSM Act 1960 had been confirmed for five years subject to the stipulated requirements being met.

10.2.3 The University of Nottingham

Following receipt of the re-written report it was confirmed that approval under the terms of the PSM Act 1960 had been confirmed for five years subject to the stipulated requirements being met.

10.2.4 The Royal Infirmary of Edinburgh

The meeting was informed that the visit report had had to be amended to take account of the change in named trainer from Mrs Smart to Ms Steven.

10.2.5 St George's Healthcare NHS Trust

The meeting was informed that Ms McBean's replacement as named trainer would be Ms Hodgson.

10.2.6 Fife Primary Healthcare Trust

The meeting was informed that the named trainer had been requested to present a revised programme for Placement B.

10.2.7 Swansea NHS Trust

(Dealt with at the Board meeting on 8 March 2002.)

10.2.8 NHS Forth Valley Consortium

The revised report was awaited for forwarding to the Chief Executive.

10.2.9 United Lincolnshire Hospitals NHS Trust

It was reported that the required documentation had been received and that further documentation would be required when the Trust moved to the A/B/C Placement pattern.

10.2.10 Northern Lincolnshire & Goole Hospitals NHS Trust

It was reported that the required documentation had not been received but that the Trust could be approved for an A Placement. Miss Pearson offered to pursue the matter¹.

10.2.11 University Hospitals Coventry & Warwickshire NHS Trust

The meeting was advised that the required documentation was not due until the 30 September 2002. A report would be given to the next meeting.

10.2.12 The Royal Group of Hospitals and Dental Hospital Health and Social Services Trust (Belfast)

The meeting was advised that the two appendices referred to in the report had not been received and there were gaps in the information which were considered essential. The report would be discussed at the next meeting.

10.2.13 North Glasgow University Hospitals NHS Trust

Further to the oral report given at the last Dietitians Board meeting, it was agreed that the written report needed to incorporate a few changes before it could be sent to the Trust. The changes related in particular to the Glasgow Royal Infirmary and its potential to move to the A B C Placement pattern of training. It was confirmed that the two hospitals offering placements were using different systems – thirty-one weeks and B/C Placements. It was

RESOLVED:1

subject to the stipulated requirements being met

a. to approve the report

1 To note that since the meeting the documentation has been received.

- b. that approval of the North Glasgow University Hospitals NHS Trust be confirmed under Section 4 of the Professions Supplementary to Medicine Act 1960 for the provision of practical training and courses and qualifications for up to four student dietitians in two intakes per year in B/C Placements (Stobhill Hospital) and up to six 31-week placements in two intakes per year (Glasgow Royal Infirmary).
- c. that Ms June Seymour be confirmed as the named trainer, and
- d. that the next visit be in two years or earlier depending on the outcome of local delivery of healthcare.

Item 11. 25/02 NEW COURSES

11.1 University of Surrey

11.1.1 It was reported that the University had responded satisfactorily to the comments made following the previous visits on food skills. The University had undertaken a detailed review in order to prepare its new course. It was agreed that the Working Group needed to see the CV of a new member of staff together with details of the scale of her contribution to the course before determining an upper limit to the student intake.

11.1.2 It was

RESOLVED:2

that

- a. under the terms of Section 4(1)(a) and (b) of the Professions Supplementary to Medicine Act 1960, the course of training to be offered by and the qualification awarded by the University of Surrey be approved as meeting the standards and requirements for State Registration, and
- b. under the terms of Section 4(2) of the Professions Supplementary to Medicine Act 1960, the Working Group recommends that the Health Professions Council send its recommendation to the Privy Council that it be requested to determine approval of the application by the University of Surrey to offer the registrable course and qualification as set out below:-

In	Dietetics
Type of Course	Full-time in higher education
Institution of Training/Education	University of Surrey

Qualification	Bachelor of Science (Honours) Dietetics
Awarded by	University of Surrey
Length of Course	Four years
With effect from	September 2002
Participants in Approval Process	Dietitians Pre-Registration Education & Training Working Group University of Surrey (The British Dietetic Association (the professional body) does not participate in approval of undergraduate courses)

11.1.3 The Working Group also

RESOLVED:3

that, in accordance with the former Dietitians Board's policy concerning quality approval, approval of the new course at the University of Surrey be affirmed for a period of five years, subject to notification of any changes in the dietetic staffing complement which may affect the concurrent approval that up to thirty-six (36) students may be recruited for the course approved above.

11.2 Leeds Metropolitan University

11.2.1 PgD/MSc

There were concerns that although the documentation made reference to subject benchmarking in the introduction, it did not make clear how or where the benchmark statements were addressed in the course.

There was a lack of detail about entry requirements and how an applicant might be brought up to the required level in physiology/ biochemistry if they lacked these subjects. Nor was it clear how the student without nutrition could access the Advanced Nutrition Module although, from the module descriptor, the content of this module was not advanced. This in turn begged the question where advanced nutrition was covered and how the students' knowledge was progressed in this area.

It was considered that the entry requirements should require applicants to demonstrate the broad base of sciences including nutrition. If applicants did not have these subjects some detail of how this would be addressed needed to be given.

Generally the information given about module content needed to be

more explicit. It was not clear where the course covered educational strategies, learning disability, mental health, medicine, NHS management and there seemed to be only a limited coverage of nutrition at different stages in the life cycle especially where the elderly and infants were concerned. It was not clear to the meeting why drug-nutrient interactions were included in the Contemporary and Community Nutrition Module and whether this was related to drug abuse. It was agreed that the University be asked to cross-reference the module content either to the benchmark statements or the curriculum guidelines.

The references did not mention of the National Service Framework nor did they include documents from countries other than England. It was unclear where there was mention of the non-registrability of aegrotat awards or awards given in mitigating circumstances.

11.2.2 BSc(Hons)

Whilst the meeting congratulated the course team on the amount of choice offered to the students, it was considered that there needed to be some evidence that all the required core material was covered. The course content needed to be cross-referenced to either the benchmark statements or the curriculum guidelines.

There was concern whether the pre-placement learning outcomes would have been achieved to the required depth. As with the postgraduate diploma course there did not appear to be any mention of the non-registrability of aegrotat awards or awards made in mitigating circumstances.

There was concern at the apparent lack of research undertaken and that there was no nutritionist on the staff. It was considered that there should be a recommendation that the University gives thought to an appropriate appointment at the next opportunity.

The meeting noted that the University was considering offering both courses in part-time mode in the future and looked forward to receiving proposals.

11.2.3 The meeting agreed that clarification would need to be sought on all the expressed concerns.

Miss Sanderson offered to leave the Chamber for the next item but was requested to stay.

11.3 University of North London

11.3.1 It was reported that comments on the proposed courses had been sent to the University and all the points of issue had been addressed. Accordingly it was

RESOLVED:4

that

- a. under the terms of Section 4(1)(a) and (b) of the Professions Supplementary to Medicine Act 1960, the courses of training to be offered by and the qualification awarded by the University of North London be approved as meeting the standards and requirements for State Registration, and
- b. under the terms of Section 4(2) of the Professions Supplementary to Medicine Act 1960, the Working Group recommends that the Health Professions Council send its recommendation to the Privy Council that it be requested to determine approval of the application by the University of North London to offer the registrable courses and qualifications as set out below:-

In	Dietetics
Type of Course	Full-time in higher education
Institution of Training/Education	University of North London
Qualification	MSc/Postgraduate Diploma and Bachelor of Science (Honours) Dietetics
Awarded by	University of North London
Length of Course	Two years and Four years
With effect from	September 2002
Participants in Approval Process	Dietitians Pre-Registration Education & Training Working Group University of North London (The British Dietetic Association (the professional body) does not participate in approval of undergraduate courses)

11.3.2 The Working Group also

RESOLVED:5

that, in accordance with the former Dietitians Board's policy concerning quality approval, approval of the new courses at the University of North London be affirmed for a period of five years, subject to notification of any changes in the dietetic staffing complement which may affect the

concurrent approval that up to thirty- six (36) students may be recruited for both of the courses approved above.

11.4 Chester College of Higher Education (University of Liverpool)

11.4.1 It was noted that the revised course documents had been circulated. It was agreed that it was essential for the meeting to be advised about the appointment of the course leader² and that there needed to be clarification on the issues of compensation, mitigation and the award of aegrotat degrees. The appointment of external examiners needed to be pursued as well. There would need to be clarification about (a) compensation in order that the existing requirements were met and (b) mitigation.

11.4.2 If the above concerns could be answered satisfactorily, it was

RESOLVED:6

that

- a. under the terms of Section 4(1)(a) and (b) of the Professions Supplementary to Medicine Act 1960, the courses of training to be offered by Chester College of Higher Education and the qualification awarded by the University of Liverpool be approved as meeting the standards and requirements for State Registration, and
- b. under the terms of Section 4(2) of the Professions Supplementary to Medicine Act 1960, the Working Group recommends that the Health Professions Council send its recommendation to the Privy Council that it be requested to determine approval of the application by Chester College of Higher Education to offer the registrable course and qualification as set out below:-

In	Dietetics
Type of Course	Full-time in higher education
Institution of Training/Education	Chester College of Higher Education
Qualification	MSc/Postgraduate Diploma in Nutrition & Dietetics
Awarded by	University of Liverpool
Length of Course	Two years
With effect from	September 2002

2 To note that since the meeting it has been confirmed that Dr F Pender had accepted the offer of the post of Director of Dietetics.

Participants in Approval Process Dietitians Pre-Registration Education & Training Working Group
Chester College of Higher Education
(The British Dietetic Association (the professional body) does not participate in approval of undergraduate courses)

11.4.3 The Working Group also

RESOLVED:7

that, in accordance with the former Dietitians Board's policy concerning quality approval, approval of the new course at Chester College of Higher Education be affirmed for a period of five years, subject to notification of any changes in the dietetic staffing complement which may affect the concurrent approval that up to twenty-four students may be recruited for the course approved above.

- 11.4.4 The meeting noted that formal institutional approval of Chester College of Higher Education would be considered following the visit under Section 4(1)(c) of the Professions Supplementary to Medicine Act 1960.

11.5 King's College London

The meeting noted the receipt of the documentation for the new BSc(Hons) Dietetics which would be considered at the next meeting. The documentation for the MSc/Postgraduate Diploma course would follow.

Item 12. 26/02 VISITS TO TRAINING PLACEMENTS SINCE THE BOARD MEETING

12.1 West Hertfordshire Hospitals NHS Trust (Visit 18 March 2002)

- 12.1.1 A draft report was tabled with a request to send any comment to the convenor (Miss Thomas) by 31 May 2002. The final version would be submitted to Miss MacKellar and Mrs Butson for clearance.

- 12.1.2 It was agreed that once cleared it should be

RESOLVED:8

that, subject to the stipulated requirements being met

- a. to approve the report

- b. that approval of the West Hertfordshire Hospitals NHS Trust be confirmed under Section 4 of the Professions Supplementary to Medicine Act 1960 for the provision of practical training and courses and qualifications for up to six student dietitians in three intakes of two per year in B/C Placements
- c. that Miss Gillian Pearson be confirmed as the named trainer, and
- d. that the next visit be in five years.

12.2 Mansfield District Primary Care NHS Trust (Visit 10 April 2002)

It was confirmed that the report was awaited³.

12.3 St Mary's NHS Trust (Visit 9 April 2002)

After discussion it was

RESOLVED:9

subject to the stipulated requirements being met

- a. to approve the report
- b. that approval of St Mary's NHS Trust be confirmed under Section 4 of the Professions Supplementary to Medicine Act 1960 for the provision of practical training and courses and qualifications for three student dietitians per year in B Placements
- c. that Ms Annemarie Knight be confirmed as the named trainer, and
- d. that the next visit be in two years.

12.4 Bradford Hospitals NHS Trust (Visit 12 April 2002)

After discussion the meeting was asked to advise the convenor, Mrs Smith, of any comments by 31 May 2002. The final version of the report would be cleared by the Chairman and either Miss MacKellar or Mrs Butson.

12.4.1 Should the final report be found acceptable, it was

RESOLVED:10

subject to the stipulated requirements being met

- a. to approve the report
- b. that approval of the Bradford Hospitals NHS Trust be confirmed under Section 4 of the Professions Supplementary to Medicine Act 1960 for the provision of practical training and courses and qualifications for up to six student dietitians in three intakes of

³ To note that since the meeting the signed report was received and cleared by the Dietetic Manager for accuracy. It was sent to Miss MacKellar and Mrs Butson for clearance (20.6.02).

two per year in B/C Placements

- c. that Ms Jane Murphy be confirmed as the named trainer, and
- d. that the next visit be in two years.

12.5 Forth Valley Acute NHS Trust (Visit 2 May 2002)

After discussion it was

RESOLVED:11

subject to the stipulated requirement being met by the stipulated date

- a. to approve the report
- b. that approval of the Stirling Royal Infirmary be confirmed under Section 4 of the Professions Supplementary to Medicine Act 1960 for the provision of practical training and courses and qualifications for initially up to four student dietitians per year in B/C Placements in combination with two A Placements.
- c. that Ms Janice Fry be confirmed as the named trainer, and
- d. that the next visit be in November 2006 (to coincide with the quinquennial review of the NHS Forth Valley Consortium).

12.6 King's Lynn & Wisbech NHS Trust (Visit 16 April 2002)

12.6.1 After discussion it was agreed to ask the visitors to revise the report to remove the names of the students met. The meeting was asked to advise the convenor, Mrs Firmin, of any comments by 31 May 2002. The final version of the report would be cleared by the Chairman and either Miss MacKellar or Mrs Butson.

12.6.2 Should the final report be found acceptable, it was

RESOLVED:12

subject to the stipulated requirements being met

- a. to approve the report
- b. that approval of the Kings Lynn & Wisbech Hospitals NHS Trust be confirmed under Section 4 of the Professions Supplementary to Medicine Act 1960 for the provision of practical training and courses and qualifications for up to six student dietitians in three intakes of two per year in B/C Placements
- c. that Mrs Jane Little be confirmed as the named trainer, and
- d. that the next visit be in two years.

12.7 City Hospitals Sunderland NHS Trust (Visit 10 May 2002)

The meeting noted that the report was awaited.

12.8 Kingston Hospital NHS Trust (Visit 16 May 2002)

After discussion it was agreed that comments on the report should be sent to Mrs Butson by 31 May 2002. It was further agreed that, should no comments be forthcoming, it be

RESOLVED:13

subject to the stipulated requirements being met

- a. to approve the report
- b. that approval of the St Mary's NHS Trust be confirmed under Section 4 of the Professions Supplementary to Medicine Act 1960 for the provision of practical training and courses and qualifications for initially up to 3 student dietitians per year in B Placements.
- c. that Ms Annemarie Knight be confirmed as the named trainer, and
- d. that the next visit be in 2 years.

12.9 Oldham NHS Trust (Visit 22 May 2002)

The meeting received an e-mail from Dr Judd to say that she and Miss Scott had completed the visit on 22 May 2002 and that the Trust could be approved. It was agreed that the written report, when received, might be sent to the Chairman, Miss MacKellar or Mrs Butson for clearance.

12.10 Royal Bromley Hospital

It was reported that the Royal Bromley Hospital had been approved as part of a base training consortium across three Trusts but wished to offer a B Placement separately. It was agreed that this might be approved without a further visit as the Trust was already functioning on a stand-alone basis but must provide the essential documentation.

Item 13. 27/02 VISITS 2002-2003 TO TAKE PLACE

13.1 The meeting noted the list of visits due during the remainder of the first transitional period to 31 March 2003.

13.2 Preston & Chorley

It was agreed that Mrs Smith and Mrs Douglas undertake the visit.

13.3 Chester College of Higher Education (University of Liverpool)

It was agreed that the visiting team consist of Dr Jebb, Professor de Looy and Mrs Howard⁴.

4 To note that since the meeting Mrs Howard and Professor de Looy have found it impossible to undertake the visit on the dates proposed; Miss MacKellar will replace Mrs Howard and Dr Bishop will replace Professor de Looy.

Item 14. 28/02 BULLYING

- 14.1 It was reported that the BDA had discussed the issue of bullying which had come to the fore with a report from a number of dietitians concerned about the matter. Professor de Looy's paper on quality assurance of placements overlapped with this issue.

- 14.2 The meeting was informed that a Working Party was to be set up to devise a formal statement. An initial draft had already been prepared to be presented to a meeting in July 2002. It was hoped that the new pattern of training might address some of the issues at least. There was agreement that a clear definition of bullying was required and to obtain anonymous feedback on negative experiences. It was agreed that Professor de Looy would represent the Working Group at this meeting subject to approval from the President of the HPC.
- 14.3 It was affirmed that all NHS Trusts had to have a policy on bullying but it was considered essential that the BDA produce its own, which would need to be explicit about what was expected of trainers, and to make it available to all dietetic students.
- 14.4 The meeting considered that it was vital to discover how placements collect feedback from staff and students and what is done with the information. Previous work on this issue undertaken by the former Dietitians Board would be on the agenda of the next meeting.

Item 15. 29/02 NEW COURSE PROPOSAL

- 15.1 The meeting noted that there might be a new undergraduate course in dietetics forthcoming from the Universities of Plymouth and Exeter as part of the healthcare portfolio of courses currently available. The Podiatry, Occupational Therapy and Speech & Language Therapy courses were being reviewed at the moment with a view to offering joint teaching for part of the courses. The second phase would cover Physiotherapy, Radiography and Dietetics. Proposals might involve covering the required elements in three long academic years.

Item 16. 30/02 GUIDANCE ON WITHHOLDING AND WITHDRAWING LIFE-PROLONGING TREATMENTS

- 16.1 The meeting received the draft guidance on withholding and withdrawing life-prolonging treatments from the General Medical Council which was due to be discussed by the GMC on 21 May 2002.

Item 17. 31/02 ANY OTHER BUSINESS

17.1 Value Statement on Future Arrangements for the Approval of Qualifying Programmes under the HPC

The meeting received the document produced by the Allied Health Professions.

17.2 Statement of Strategic Alliance for Health and Social Care

The meeting received the document produced by the Department of Health and the Higher Education Funding Council for England.

17.3 Draft Position Statement on the Continuation of Approvals under Sections 4 and 5 of the PSM Act 1960 during the First Transitional Period
The meeting received the statement produced by the Director of Education and Policy.

17.4 Research
The meeting received a press release from the Department of Health and the Higher Education Funding Council for England on fund and award schemes to boost capacity of high quality research related to nursing and professions allied to medicine.

17.5 Part-Time Courses
It was agreed to discuss the issue of registrable part-time courses at the next meeting.

17.6 Disclosure Scotland
It was reported that the Scottish equivalent of the English Criminal Records Bureau was now called 'Disclosure Scotland'.

Item 18. 32/02 DATE OF NEXT MEETING

18.1 It was agreed that the next meeting be held at 11.00am on Friday 4 October 2002 at Park House.

CHAIRMAN