

Annual monitoring visitors' report

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Section One: Programme Details

| | |
|------------------------------|--|
| Education provider | The University of Bolton |
| Programme name | Non-Medical Prescribing (HE6) |
| Mode of delivery | Part Time |
| HPC visitor(s) | Jim Pickard (Chiropodist/Podiatrist) Bob Dobson (Paramedic) |
| Education executive | Lewis Roberts |
| Date of postal review | 11 July 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

- Guidelines on assessment and marking 2009 – 2010
- Student module handbook
- CV's
- Student module handbooks
- Short module descriptors
- Application and CRB forms
- Designated medical practitioner pack

Section Three: Additional Documentation

The visitors agreed that no further documentation was required in order to make a recommendation.

Section Four: Recommendation of the visitor(s)

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|---|-------------------|--------------------|
| 2010-07-12 | a | EDU | PPR | AM Report - Bolton - Non Medical Prescribing - PT | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|------------------------------|--|
| Education provider | The University of Bolton |
| Programme name | Non-Medical Prescribing (HE7) |
| Mode of delivery | Part Time |
| HPC visitor(s) | Jim Pickard (Chiropodist/Podiatrist) Bob Dobson (Paramedic) |
| Education executive | Lewis Roberts |
| Date of postal review | 11 July 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

- Guidelines on assessment and marking 2009 – 2010
- Student module handbook
- CV's
- Student module handbooks
- Short module descriptors
- Application and CRB forms
- Designated medical practitioner pack

Section Three: Additional Documentation

The visitors agreed that no further documentation was required in order to make a recommendation.

Section Four: Recommendation of the visitor(s)

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|---|-------------------|--------------------|
| 2010-07-12 | a | EDU | PPR | AM Report - Bolton - Non Medical Prescribing (HE7) - PT | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|------------------------------|--|
| Education provider | City University |
| Programme name | BSc (Hons) Speech and Language Therapy |
| Mode of delivery | Full time |
| HPC visitor(s) | Gillian Stevenson (Speech & Language Therapist) Aileen Paterson (Speech & Language Therapist) |
| Education executive | Benjamin Potter |
| Date of postal review | 2 July 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
 - Internal quality report for one year ago
 - Internal quality report for two years ago
 - External Examiner's for one year ago
 - External Examiner's Report for two years ago
 - Response to External Examiner's report one year ago
 - Response to External Examiner's report for two years ago
- CV of member to cover for Course Leader during maternity leave.
 - Confirmation letter re Honours classification as requested by N Fraser.

Section Three: Additional Documentation

The visitors agreed that no further documentation was required in order to make a recommendation.

Section Four: Recommendation of the visitor(s)

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|-------------|-------------|------------------|-----------------|---------------------------------|-------------------|--------------------|
| 2010-08-16 | a | EDU | PPR | AM Report - City BSc (Hons) SLT | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|------------------------------|---|
| Education provider | City University |
| Programme name | MSc Speech and Language Therapy |
| Mode of delivery | Full Time |
| HPC visitors | Aileen Patterson (Speech and Language Therapist) Gillian Stevenson (Speech and Language Therapist) |
| Education executive | Ben Potter |
| Date of postal review | 22 July 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

Section Three: Additional Documentation

The visitors agreed that no further documentation was required in order to make a recommendation.

Section Four: Recommendation of the visitors

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|---------------------------------|-------------------|--------------------|
| 2010-08-12 | a | EDU | PPR | AM Report - City - MSc SLT - FT | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|------------------------------|---|
| Education provider | City University |
| Programme name | Pg Dip Speech and Language Therapy |
| Mode of delivery | Full Time |
| HPC visitors | Aileen Patterson (Speech and Language Therapist) Gillian Stevenson (Speech and Language Therapist) |
| Education executive | Ben Potter |
| Date of postal review | 22 July 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

Section Three: Additional Documentation

The visitors agreed that no further documentation was required in order to make a recommendation.

Section Four: Recommendation of the visitors

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|-----------------------------------|-------------------|--------------------|
| 2010-08-12 | a | EDU | PPR | AM Report - City - PgDip SLT - FT | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|-------------------------------|---|
| Education provider | Edge Hill University |
| Programme name | Non-Medical Prescribing |
| Mode of delivery | Part time |
| HPC visitor(s) | Paul Bates (Paramedic) Kathryn Heathcote (Physiotherapist) |
| Education executive | Ruth Wood |
| Date of assessment day | 17 June 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

Other documents submitted:

- Minor Modification - Non Medical Prescribing credits towards masters awards

Section Three: Additional Documentation

The visitors agreed that additional documentation was required in order to make a recommendation. The additional documentation is listed below with reasons for the request. Following receipt of the documentation, the visitors made a final recommendation which can be found in Section Four.

4.1 The learning outcomes must ensure that those who successfully complete the programme meet the Standards of Proficiency for their part of the Register.

Reason

The annual monitoring audit submitted made specific reference to changes to the module in that the “structure of the module will need to incorporate a greater emphasis on clinical examination for students” (Annual Monitoring and Review Report 2007-2008). These changes were to be made as a response to conditions made at an approval visit by the Royal Pharmaceutical Society of Great Britain (RPSGB). The visitors require further information (such as both original and amended module descriptors) about the changes made to the module to ensure HPC Standards of Proficiency are still being reflected in the learning outcomes of the programme in light of the greater emphasis that was placed on clinical examination and the possible omissions this could have led to.

Section Four: Recommendation of the visitor(s)

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|---------------------------|-------------------|--------------------|
| 2010-08-04 | b | EDU | PPR | AM Report Edge Hill SP PT | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|-------------------------------|--|
| Education provider | University of Essex |
| Programme name | MSc Speech and Language Therapy |
| Mode of delivery | Full time accelerated |
| HPC visitor(s) | Pauline Douglas (Dietitian) Lesley Culling (Speech and Language Therapist) |
| Education executive | Lewis Roberts |
| Date of assessment day | 17 June 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
 - Internal quality report for one year ago
 - Internal quality report for two years ago
 - External Examiner's for one year ago
 - External Examiner's Report for two years ago
 - Response to External Examiner's report one year ago
 - Response to External Examiner's report for two years ago
- The education provider stated the following within the audit submission:
'Please note no response was deemed necessary to the external examiner's report for 2007-2008 & 2008-2009'
 - Report from the Royal College of Speech and Language Therapy -
January 2008

Section Three: Additional Documentation

The visitors agreed that additional documentation was required in order to make a recommendation. The additional documentation is listed below with reasons for the request. Following the receipt of further documentation the visitors made a final recommendation which can be found in Section Four.

3.4 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

Reason: The visitors noted that within the 2009 external examiner's report it is stated that a member of the programme team was due to go on maternity leave and that no provision had been put in place to fund the replacement. The visitors require further information to demonstrate that this provision has been put in place and that the programme has an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

5.5 The number, duration and range of placements must be appropriate to the achievement of the learning outcomes.

Reason: The visitors noted that within the Programme Committee report dated 29 January 2008 it is stated that 'clinical placements continue to be problematic with many hours of work required to identify enough clinical placements for the students'. The visitors require further information to demonstrate how the education provider has responded to the potential shortage in practice placement provision outlined within the Programme Committee report. The visitors also require information outlining the processes in place to deal with students if they are unable to be placed in a practice placement setting due to a lack of provision. Linked to this the visitors require further information outlining the mechanism used to decide which students would not receive a practice placement if a shortage of practice placements does occur.

Therefore the visitors seek reassurance that mechanisms are in place to ensure students are undertaking the clinical aspects of the programme and the education provider is ensuring that the placement experiences are appropriate in terms of number, duration and range and that all students meet the learning outcomes and are fit to practice.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|--|-------------------|--------------------|
| 2010-06-17 | a | EDU | RPT | AM Report - Essex - MSc SL - FT (acc) | Draft DD: None | Public RD: None |

Section Four: Recommendation of the visitor(s)

In response to requests for further information from the education providers, there is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

Visitors' Comment

The visitors noted that placement capacity is a continual challenge in a number of health professions and that the education provider may want to consider putting into place a best practice formal process to deal with students who may be unable to be placed.

The visitors also noted that where concerns were expressed within the Programme Committee Report dated 29 January 2008 it was difficult to follow through how the education provider responded to these concerns. The visitors also noted that the SETs mapping document was incomplete and the referencing was lacking.

The visitors suggest that the education provider may want to consider reviewing the mechanism the education provider uses to document the responses to the Programme Committee report. The visitors also suggest that the education provider revisits the SETs mapping document to address the issues identified.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|--|-------------------|--------------------|
| 2010-06-17 | a | EDU | RPT | AM Report - Essex - MSc SL - FT (acc) | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|-------------------------------|---|
| Education provider | Glasgow Caledonian University |
| Programme name | BSc (Hons) Human Nutrition and Dietetics |
| Mode of delivery | Full time |
| HPC visitor(s) | Pradeep Agrawal (Biomedical Scientist) Pauline Douglas (Dietitian) Lesley Culling (Speech and Language Therapist) |
| Education executive | Lewis Roberts |
| Date of assessment day | 17 June 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

Section Three: Additional Documentation

The visitors agreed that additional documentation was required in order to make a recommendation. The additional documentation is listed below with reasons for the request. Following receipt of the documentation, the visitors made a final recommendation which can be found in Section Four.

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

Reason: The visitors noted that within the external examiner's report for 2007-2008 it states that '3 students remained unplaced'. The visitors also noted that within the same report it outlines that students that joined the 2008-2009 cohort were asked to sign an agreement that states that they understand the risk of not being placed in a practice placement setting. The visitors require further information outlining the information that is made available to applicants and students about the provision of placements both at the point of admissions but also once they have taken up an offer of a place on the programme. The visitors require further information outlining the mechanism that is used to decide which students do not receive a practice placement if a shortage of practice placements does occur and how this is communicated to applicants and students at the point of admission.

The visitors require further information to demonstrate that applicants are able to make an informed choice about whether to take up an offer of a place on a programme and how the education provider communicates the consequences of not being able to complete the practice placement elements of the programme.

5.5 The number, duration and range of placements must be appropriate to the achievement of the learning outcomes.

Reason: The visitors noted that within the external examiner's report for 2007/--2008 it states that '3 students remained unplaced'. The visitors also noted that within the same report it outlines that students that joined the 2008-2009 cohort were asked to sign an agreement that states that they understand the risk of not being placed in a practice placement setting. The visitors require further information to demonstrate how the education provider has responded to the lack of practice placement provision outlined in the external examiner's report for 2007-2008. The visitors also require information outlining the processes in place to deal with students if they are unable to be placed in a practice placement setting. Linked to this the visitors require further information outlining the mechanism used to decide which students do not receive a practice placement if a shortage of practice placements does occur.

Therefore the visitors seek assurance that students are undertaking the clinical aspects of the programme and the education provider is ensuring that the

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|---|-------------------|--------------------|
| 2010-06-17 | a | EDU | RPT | AM Report - GCU - BSc (Hons) DT - FT | Draft DD: None | Public RD: None |

placement experiences are appropriate in terms of number, duration and range and that all students meet the learning outcomes and are fit to practice.

Section Four: Recommendation of the visitor(s)

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|-------------|-------------|------------------|-----------------|---|-------------------|--------------------|
| 2010-06-17 | a | EDU | RPT | AM Report - GCU - BSc (Hons) DT - FT | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|-------------------------------|--|
| Education provider | Glasgow Caledonian University |
| Programme name | Pg Dip Dietetics (Pre-Registration) |
| Mode of delivery | Full time |
| HPC visitor(s) | Pradeep Agrawal (Biomedical Scientist) Pauline Douglas (Dietitian) Lesley Culling (Speech and Language Therapist) |
| Education executive | Lewis Roberts |
| Date of assessment day | 17 June 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

Section Three: Additional Documentation

The visitors agreed that additional documentation was required in order to make a recommendation. The additional documentation is listed below with reasons for the request. Following receipt of the documentation, the visitors made a final recommendation which can be found in Section Four.

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

Reason: The visitors noted that within the external examiner's report for 2007-2008 it states that '3 students remained unplaced'. The visitors also noted that within the same report it outlines that students that joined the 2008-2009 cohort were asked to sign an agreement that states that they understand the risk of not being placed in a practice placement setting. The visitors require further information outlining the information that is made available to applicants and students about the provision of placements both at the point of admissions but also once they have taken up an offer of a place on the programme. The visitors require further information outlining the mechanism that is used to decide which students do not receive a practice placement if a shortage of practice placements does occur and how this is communicated to applicants and students at the point of admission.

The visitors require further information to demonstrate that applicants are able to make an informed choice about whether to take up an offer of a place on a programme and how the education provider communicates the consequences of not being able to complete the practice placement elements of the programme.

5.5 The number, duration and range of placements must be appropriate to the achievement of the learning outcomes.

Reason: The visitors noted that within the external examiner's report for 2007-2008 it states that '3 students remained unplaced'. The visitors also noted that within the same report it outlines that students that joined the 2008-2009 cohort were asked to sign an agreement that states that they understand the risk of not being placed in a practice placement setting. The visitors require further information to demonstrate how the education provider has responded to the lack of practice placement provision outlined in the external examiners report for 2007-2008. The visitors also require information outlining the processes in place to deal with students if they are unable to be placed in a practice placement setting. Linked to this the visitors require further information outlining the mechanism used to decide which students do not receive a practice placement if a shortage of practice placements does occur.

Therefore the visitors seek assurance that students are undertaking the clinical aspects of the programme and the education provider is ensuring that the

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|--|-------------------|--------------------|
| 2010-08-16 | b | EDU | RPT | AM Report - GCU - Pg Dip (Pre-Reg) DT - FT | Draft DD: None | Public RD: None |

placement experiences are appropriate in terms of number, duration and range and that all students meet the learning outcomes and are fit to practice.

Section Four: Recommendation of the visitor(s)

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|-------------|-------------|------------------|-----------------|--|-------------------|--------------------|
| 2010-08-16 | b | EDU | RPT | AM Report - GCU - Pg Dip (Pre-Reg) DT - FT | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|-------------------------------|--|
| Education provider | Glasgow Caledonian University |
| Programme name | MSc Dietetics |
| Mode of delivery | Full time Part time |
| HPC visitor(s) | Pradeep Agrawal (Biomedical Scientist) Pauline Douglas (Dietitian) Lesley Culling (Speech and Language Therapist) |
| Education executive | Lewis Roberts |
| Date of assessment day | 17 June 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

Section Three: Additional Documentation

The visitors agreed that additional documentation was required in order to make a recommendation. The additional documentation is listed below with reasons for the request. Following receipt of the documentation, the visitors made a final recommendation which can be found in Section Four.

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

Reason: The visitors noted that within the external examiner's report for 2007-2008 it states that '3 students remained unplaced'. The visitors also noted that within the same report it outlines that students that joined the 2008-2009 cohort were asked to sign an agreement that states that they understand the risk of not being placed in a practice placement setting. The visitors require further information outlining the information that is made available to applicants and students about the provision of placements both at the point of admissions but also once they have taken up an offer of a place on the programme. The visitors require further information outlining the mechanism that is used to decide which students do not receive a practice placement if a shortage of practice placements does occur and how this is communicated to applicants and students at the point of admission.

The visitors require further information to demonstrate that applicants are able to make an informed choice about whether to take up an offer of a place on a programme and how the education provider communicates the consequences of not being able to complete the practice placement elements of the programme.

5.5 The number, duration and range of placements must be appropriate to the achievement of the learning outcomes.

Reason: The visitors noted that within the external examiner's report for 2007-2008 it states that '3 students remained unplaced'. The visitors also noted that within the same report it outlines that students that joined the 2008-2009 cohort were asked to sign an agreement that states that they understand the risk of not being placed in a practice placement setting. The visitors require further information to demonstrate how the education provider has responded to the lack of practice placement provision outlined in the external examiners report for 2007-2008. The visitors also require information outlining the processes in place to deal with students if they are unable to be placed in a practice placement setting. Linked to this the visitors require further information outlining the mechanism used to decide which students do not receive a practice placement if a shortage of practice placements does occur.

Therefore the visitors seek assurance that students are undertaking the clinical aspects of the programme and the education provider is ensuring that the

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|-------------------------------------|-------------------|--------------------|
| 2010-08-16 | b | EDU | RPT | AM Report - GCU - MSc DT - FT PT | Draft DD: None | Public RD: None |

placement experiences are appropriate in terms of number, duration and range and that all students meet the learning outcomes and are fit to practice.

Section Four: Recommendation of the visitor(s)

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|-------------|-------------|------------------|-----------------|-------------------------------------|-------------------|--------------------|
| 2010-08-16 | b | EDU | RPT | AM Report - GCU - MSc DT - FT PT | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|-------------------------------|---|
| Education provider | Goldsmiths College University of London |
| Awarding institution | Goldsmiths College University of London |
| Programme name | MA Art Psychotherapy |
| Mode of delivery | Full time Part time |
| HPC visitors | Kathryn Heathcote (Physiotherapist) Simon Willoughby-Booth (Art therapist) |
| Education executive | Ben Potter |
| Date of assessment day | 4 May 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

Other documents:

- MA Art Psychotherapy, Handbook 2009 – 2010
- MAAP Lectures 2008/09

Section Three: Additional Documentation

The visitors agreed that additional documentation was required in order to make a recommendation. The additional documentation is listed below with reasons for the request. Following receipt of the documentation, the visitors made a final recommendation which can be found in Section Four.

3.2 The programme must be managed effectively.

Reason

The visitors noted that the responses to the external examiners' reports provided lacked rigour when addressing any issues raised. While the issues were responded to the visitors could not determine clear examples about how they were to be mitigated against and how the programme team was going to provide solutions to the issues where possible. The visitors also noted that the response to the external examiners report from 2008 was not included in the submission. The visitors felt that the documentation provided did not demonstrate that clear and effective systems were in place to deal with the issues highlighted by the external examiners which may also affect SET 6.5. The visitors therefore require action plans or exemplar action plans which demonstrate that there are effective systems in place to manage the programme and that individuals involved have the skills and expertise they need to work within these systems. They also require the programme teams' response to the external examiners report from 2008.

3.4 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

Reason

The visitors noted the programme team have changed in number. However the visitors could not determine the level of staffing for the programme as there was no clear indication of the number of previous and current staff. The visitors therefore could not determine if there is an adequate number of appropriately qualified and experienced staff in place to deliver the programme. The visitors therefore require a full staffing list which includes areas of expertise and where appropriate CVs which will give a clear indication of the level of staff within the overall context of the education provision for this programme.

3.12 The resources provided, both on and off site, must adequately support the required learning and teaching activities of the programme.

Reason

The visitors noted in the previous HPC visitors' report and the external examiners report that there have been ongoing issues around the provision of teaching and learning spaces since 2006 which could also affect SET 3.7. While the visitors have noted that these issues have been acknowledged by the programme team they could not determine from the documentation if there was any way in which

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|-------------------------------------|-------------------|--------------------|
| 2010-08-09 | c | EDU | PPR | AM Report - Goldsmiths - MA AT - FT | Final DD: None | Public RD: None |

the programme team were working to address them (as in SET 3.1). If these issues were to continue to affect the programme it may affect the learning and teaching activities of the programme and as a consequence affect how students could meet the standards of proficiency (SoPs) for Art therapists. The visitors therefore require action plans or indicative work plans to demonstrate that the education provider has a programme in place to address the need for adequate and effectively used spaces to support the required learning and teaching activities of the programme.

6.4 The measurement of student performance and progression must be an integral part of the wider process of monitoring and evaluation, and use objective criteria.

Reason

The visitors noted in the 2009 external examiners reports that significant issues around the assessment board and student feedback had been raised by the external examiners and students. As in SET 3.1 the visitors have noted that these issues have been acknowledged by the programme team but they could not determine from the documentation if there was any way in which the programme team were working to address them as highlighted in the 2008 external examiners report (Brown). The visitors stated that the issues around the assessment board and provision of student feedback could affect how student performance is monitored and assessed at different stages in their learning and what the expectations were for student progression. This in turn could affect how students could meet the standards of proficiency (SoPs) for Art therapists. The visitors therefore require any action plans around student feedback to demonstrate that the concerns raised about the assessment board and provision of feedback are being, or have been, addressed.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|-------------------------------------|-------------------|--------------------|
| 2010-08-09 | c | EDU | PPR | AM Report - Goldsmiths - MA AT - FT | Final DD: None | Public RD: None |

Section Four: Recommendation of the visitors

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|-------------------------------------|-------------------|--------------------|
| 2010-08-09 | c | EDU | PPR | AM Report - Goldsmiths - MA AT - FT | Final DD: None | Public RD: None |

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Section One: Programme Details

| | |
|-------------------------------|--|
| Education provider | London Ambulance Service NHS Trust |
| Awarding institution | Institute of Health Care Development (IHCD) |
| Programme name | IHCD Paramedic Award |
| Mode of delivery | Block release |
| HPC visitors | Jackie Waterfield (Physiotherapist) Gwyn Thomas (Paramedic) |
| Education executive | Ben Potter |
| Date of assessment day | 15 June 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago
- Additional documentation for Ambulance Trust AM requirements

- Student Paramedic Programme Handbook
- Practice Placement Educator Handbook
- Assignments sent to External moderator

Section Three: Additional Annual Monitoring Requirements

The following documentation was submitted in response to the additional annual monitoring requirements for the programme:

1. An update on the progress of implementing and embedding professional skills into the delivery of their programme.

Section 3, Student paramedic programme folder

Section 4, Student paramedic programme folder

2. An update on the progress of implementing the range of appropriate placements.

Student paramedic programme folder

Practice placement educator folder

3. An update on the availability resources and confirmation of the ongoing provisions.

Student paramedic programme folder

Practice placement educator folder

Section Four: Additional Documentation

The visitors agreed that additional documentation was required in order to make a recommendation. The additional documentation is listed below with reasons for the request. Following receipt of the documentation, the visitors made a final recommendation which can be found in Section Five.

However, the visitors agreed that no documentation was required in order to make a recommendation on how the programme has addressed the Education & Training Committee's requirements for updates on: progress of implementing and embedding professional skills into the delivery of the programme; progress of implementing the range of appropriate placements; availability of resources and confirmation of the ongoing provisions. Following receipt of the documentation, the visitors made a final recommendation which can be found in Section Five.

3.2 The programme must be managed effectively.

Reason

The submission from the education provider was missing several documents which are required for the visitors to make a recommendation. The visitors therefore require an internal quality document, or equivalent, from one year ago and one from two years ago. They also require an external examiners report, or equivalent, from two years ago with a programme team response to this as well as a programme team response to the external examiners report provided. This

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|---|-------------------|--------------------|
| 2010-07-26 | b | EDU | PPR | AM Report Ambulance Trust - LAS NHS Trust - IHCD PA - BR | Draft DD: None | Public RD: None |

documentation will allow them to be satisfied that there are effective management processes in place to ensure the quality of education provision on the programme is maintained.

Section Five: Recommendation of the visitors

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

There is also sufficient evidence the programme has addressed the Education & Training Committee's requirements for updates on: progress of implementing and embedding professional skills into the delivery of the programme; progress of implementing the range of appropriate placements; availability of resources and confirmation of the ongoing provisions. An approval visit is not required and continued approval should be granted.

Visitors' Comment

The visitors were satisfied that the programme continues to meet the standards of education and training (SETs). However, the visitors wished to point out that the comprehensive nature of the submission was not entirely conducive to coming to their decision. While HPC's Education and training committee asked for some additional information and while it is recognised that this required additional documentation; the visitors articulated that the education provider should consider the relevance of submitted documentation as the documentation necessary for an audit submission such as this is usually far less than provided for this audit. The Annual monitoring process is a retrospective one focusing on programmes with ongoing approval and as such a submission usually only consists of the required documentation as highlighted above. Any additional information is only needed when the programme has undergone changes which affect how the SETs continue to be met. The visitors would therefore like to highlight to the education provider that the volume of documentation, and subsequently work, is not necessary for any future HPC annual monitoring audit.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|---|-------------------|--------------------|
| 2010-07-26 | b | EDU | PPR | AM Report Ambulance Trust - LAS NHS Trust - IHCD PA - BR | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|--|---|
| Education provider | Medway School of Pharmacy |
| Awarding institution (if different from education provider) | Universities of Kent and Medway |
| Programme name | Post Graduate Certificate in Supplementary Prescribing |
| Mode of delivery | Distance learning |
| HPC visitor(s) | Gordon Burrow (Paramedic) Gordon Pollard (Podiatrist) |
| Education executive | Mandy Hargood |
| Postal review | 22 July 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
 - Internal quality report for one year ago
 - Internal quality report for two years ago
 - External Examiner's for one year ago
 - External Examiner's Report for two years ago
 - Response to External Examiner's report one year ago
 - Response to External Examiner's report for two years ago
- CV's of three staff

Section Three: Additional Documentation

The visitors agreed that no further documentation was required in order to make a recommendation.

Section Four: Recommendation of the visitor(s)

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|------------------------|-------------------|--------------------|
| 2010-08-12 | a | EDU | PPR | AM Report Medway SP PT | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|------------------------------|--|
| Education provider | The University of Northampton |
| Programme name | BSc (Hons) Occupational Therapy |
| Mode of delivery | Full time Part time |
| HPC visitor(s) | Claire Brewis (Occupational Therapist) Joanna Goodwin (Occupational Therapist) |
| Education executive | Lewis Roberts |
| Date of postal review | 3 August 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

Section Three: Additional Documentation

The visitors agreed that additional documentation was required in order to make a recommendation. The additional documentation is listed below with reasons for the request. Following receipt of the documentation, the visitors made a final recommendation which can be found in Section Four.

3.3 There must be a named programme leader who has overall responsibility for the programme and who should be either on the relevant part of the HPC Register or otherwise appropriately qualified and experienced.

Reason

The visitors noted that within the annual monitoring mapping document it states that the programme leader has changed to Leonie Siddons. The visitors noted that Leonie Siddons is named as Field Chair and Programme Leader for the full time mode. The visitors also noted from the annual monitoring mapping document that Rhoshni Khutri is the programme leader for the part time route. The HPC have on record Sue Griffiths as Divisional lead and as such has overall responsibility for the programmes. The visitors require conformation that Sue Griffiths remains the person with overall professional responsibility for both programmes. If this provision does not remain the same then the visitors will require a CV for Leonie Siddons and Rhoshni Khutri to ensure that they are on the relevant part of the register and appropriately qualified and experienced.

Section Four: Recommendation of the visitor(s)

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|--|-------------------|--------------------|
| 2010-08-04 | a | EDU | PPR | AM Report - Northampton - BSc (Hons) OT - FT and PT | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|-------------------------------|--|
| Education provider | The University of Northampton |
| Programme name | BSc (Hons) Podiatry |
| Mode of delivery | Full Time |
| HPC visitor(s) | Jim Pickard (Chiropodist/Podiatrist) Derek Adrian-Harris (Radiographer) |
| Education executive | Ruth Wood |
| Date of assessment day | 4 May 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

Other Documents Submitted:

- CV for newly appointed Senior Lecturer
- Minutes for Field Board of Studies meetings – Podiatry (28/11/2007 to 13/15/2009)
- Minutes for Field Examination Board meetings (13/06/2008 to 16/06/2009)
- Minutes for Field Examination Resit Board meetings (05/09/2008 to 04/09/2009)

Section Three: Additional Documentation

The visitors agreed that additional documentation was required in order to make a recommendation. The additional documentation is listed below with reasons for the request. Following receipt of the documentation, the visitors made a final recommendation which can be found in Section Four.

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

Reason

The documentation submitted for the annual monitoring submission (minutes for the Field Board of Studies – Podiatry 4 March 2009) described problems students had experienced with using the library – noise levels and PC access in quiet study areas. In order to ensure the resource provided by the library is appropriate to effectively support student learning the visitors require further information about how the education provider dealt with these recorded problems.

5.6 The education provider must maintain a thorough and effective system for approving and monitoring all placements.

Reason

The documentation submitted for the annual monitoring submission (minutes for the Field Board of Studies – Podiatry 26 November 2008) described problems the students had reported with the clinical placements. Some placements had “dropped out” and as a result new placements had to be sourced at short notice. The visitors were satisfied the original placements had met the education providers approval and monitoring system but aware that the ‘new placements’ may not have fully been able to go through the approval and monitoring systems in place. In order to ensure the placements were subject to the same approval and monitoring processes as the original placements, the visitors require further evidence that those ‘new placements’ have been approved and subsequently monitored effectively.

Section Four: Recommendation of the visitor(s)

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|-------------|-------------|------------------|-----------------|---|-------------------|--------------------|
| 2010-06-28 | b | EDU | PPR | AM Report - Northampton - BSc (Hons) CH - FT | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|-------------------------------|--|
| Education provider | Northern Ireland Ambulance Service Health and Social Care Trust |
| Programme name | Paramedic-in-training |
| Mode of delivery | Full time |
| HPC visitors | Jackie Waterfield (Physiotherapist) Gwyn Thomas (Paramedic) |
| Education executive | Ben Potter |
| Date of assessment day | 15 June 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago
- Additional documentation for Ambulance Trust AM requirements

- Major/minor change submission form DOC1, DOC2, DOC3, DOC4
- IHCD External Examiner Report – 2006
- IHCD Examination and Assessment Process
- IHCD Examination Logs

- Course Evaluation Documentation
- Paramedic Training Record Book

Section Three: Additional Annual Monitoring Requirements

The following documentation was submitted in response to the additional annual monitoring requirements for the programme:

1. An update on the progress of implementing and embedding professional skills into the delivery of their programme.

| |
|-----------------------|
| No evidence submitted |
|-----------------------|

2. An update on the progress of implementing the range of appropriate placements.

| |
|-----------------------|
| No evidence submitted |
|-----------------------|

3. An update on the availability resources and confirmation of the ongoing provisions.

| |
|-----------------------|
| No evidence submitted |
|-----------------------|

Section Four: Additional Documentation

The visitors agreed that additional documentation was required in order to make a recommendation. The additional documentation is listed below with reasons for the request. Following receipt of the documentation, the visitors made a final recommendation which can be found in Section Five.

The visitors also agreed that additional documentation was required in order to make a recommendation on how the programme has addressed the Education & Training Committee's requirements for updates on: progress of implementing and embedding professional skills into the delivery of the programme; progress of implementing the range of appropriate placements; availability of resources and confirmation of the ongoing provisions. Following receipt of the additional documentation, the visitors made a final recommendation which can be found in Section Five.

3.2 The programme must be managed effectively.

Reason

The submission from the education provider was missing several documents which are required for the visitors to make a recommendation. The visitors therefore require an internal quality document, or equivalent, from one year ago and one from two years ago. They also require an external examiners report, or equivalent, from two years ago with a programme team response. This documentation will allow them to be satisfied that there are effective

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|--|-------------------|--------------------|
| 2010-07-26 | b | EDU | PPR | AM Report Ambulance Trust - NIAS H&SC Trust - PA - FT | Draft DD: None | Public RD: None |

management processes in place to ensure the quality of education provision on the programme is maintained.

The submission also included no documentation to address the Education & Training Committee's requirements for updates on: progress of implementing and embedding professional skills into the delivery of the programme; progress of implementing the range of appropriate placements; availability of resources and confirmation of the ongoing provisions. The visitors need documentation to be confident that the education provider has addressed the requirements of the Education and Training Committee.

4.1 The learning outcomes must ensure that those who successfully complete the programme meet the Standards of Proficiency for their part of the Register.

Reason

The visitors noted in the documentary submission that the education provider has claimed that '...no HPC programme has commenced as yet...' despite that at the HPC approval visit for this programme it was highlighted that this course was to commence in March 2009. The visitors also noted that the 2009 'IHCD Qualification Report Form (Ambulance)' that there were 124 Paramedic registrations on the course with 18 seen by the evaluator. The visitors therefore need clarification from the education provider about the status of the course. They need documents to clearly explain that if no 'HPC approved programme' is running what course are the current cohort on which generated the 2009 'IHCD Qualification Report Form (Ambulance)'.

In this clarification the visitors also need precise details regarding when the current cohort started on the programme, what date these students are likely to graduate and if these students will be going onto any pass-lists submitted to the HPC. The visitors require this information to be clear about what programme is currently running and to be confident that students completing this programme can meet the relevant HPC standards of proficiency for Paramedics.

6.1 The assessment design and procedures must assure that the student can demonstrate fitness to practice.

Reason

The visitors noted in the documentary submission that the education provider has claimed that '...no HPC programme has commenced as yet...' despite that at the HPC approval visit for this programme it was highlighted that this course was to commence in March 2009. The visitors also noted that the 2009 'IHCD Qualification Report Form (Ambulance)' that there were 124 Paramedic registrations on the course with 18 seen by the evaluator. The visitors therefore need clarification from the education provider about the status of the course. They need documents to clearly explain how students who complete the programme being delivered by the education provider are being assessed to ensure that they meet the learning outcomes of the course. The visitors require this information to be clear about how the assessment on the programme

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| 2010-07-26 | b | EDU | PPR | AM Report Ambulance Trust - NIAS H&SC Trust - PA - FT | Draft DD: None | Public RD: None |

currently running is organised and to be confident that students exiting this course can meet the relevant HPC standards of proficiency for Paramedics.

Section Five: Recommendation of the visitors

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

There is also sufficient evidence the programme has addressed the Education & Training Committee's requirements for updates on: progress of implementing and embedding professional skills into the delivery of the programme; progress of implementing the range of appropriate placements; availability of resources and confirmation of the ongoing provisions. An approval visit is not required and continued approval should be granted.

Visitors' Comment

The visitors noted that in appendix 9 and 10 there were examples of a students' results. The visitors stated that any documentation pertaining to specific students should be anonymised before being provided to the HPC. The HPC has no requirement to see documentation relating to specific students. If needed, anonymous examples will suffice.

The visitors also noted that there were four distinct major change notification forms included in the submission. The visitors stated that the annual monitoring process is not the correct process to submit major change notification forms. This must be done using the HPC major change process.

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| 2010-07-26 | b | EDU | PPR | AM Report Ambulance Trust - NIAS H&SC Trust - PA - FT | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|-------------------------------|--|
| Education provider | North West Ambulance Service NHS Trust |
| Awarding institution | Institute of Health Care Development (IHCD) |
| Programme name | IHCD Paramedic Award |
| Mode of delivery | Block release |
| HPC visitors | Jackie Waterfield (Physiotherapist) Gwyn Thomas (Paramedic) |
| Education executive | Ben Potter |
| Date of assessment day | 15 June 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago
- Additional documentation for Ambulance Trust AM requirements

- Approval Letter date 26 March 2009

- Paramedic Admissions procedure MC 2010
- Special Bulletin student paramedics
- Student Handbook MC B1 V3
- New Structure Document
- Module u Aspects of pre-hospital care UCLan handbook.
- NWS disciplinary policy
- E-learning flyer

Section Three: Additional Annual Monitoring Requirements

The following documentation was submitted in response to the additional annual monitoring requirements for the programme:

1. An update on the progress of implementing and embedding professional skills into the delivery of their programme.

| |
|---|
| Paramedic Clinical Education Managers Job description Practice Placement Educators (PEF) Job description Module Descriptors New Placement documentation New Audit processes documentation Paramedic Preregistration Sub-Group minutes Updated practice placement Skills Log Updated Assessment Record Trusts Vision document and overall strategic plan |
|---|

2. An update on the progress of implementing the range of appropriate placements.

| |
|--|
| Audit Examples for students reports PEF forum minutes and agenda for Cumbria area of region |
|--|

3. An update on the availability resources and confirmation of the ongoing provisions.

| |
|---|
| Clear Vision for library resources Cost plan for secondment of students onto the programme |
|---|

Section Four: Additional Documentation

The visitors agreed that additional documentation was required in order to make a recommendation. The additional documentation is listed below with reasons for

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|---|-------------------|--------------------|
| 2010-07-26 | b | EDU | PPR | AM Report Ambulance Trust - NWS NHS Trust - IHCD PA - BR | Draft DD: None | Public RD: None |

the request. Following receipt of the documentation, the visitors made a final recommendation which can be found in Section Five.

However, the visitors agreed that no documentation was required in order to make a recommendation on how the programme has addressed the Education & Training Committee’s requirements for updates on: progress of implementing and embedding professional skills into the delivery of the programme; progress of implementing the range of appropriate placements; availability of resources and confirmation of the ongoing provisions.

3.2 The programme must be managed effectively.

Reason

The submission from the education provider was missing a document which is required for the visitors to make a recommendation. The visitors therefore require an internal quality document, or equivalent, from two years ago. This will allow them to be satisfied that there are effective management processes in place to ensure the quality of education provision on the programme is maintained.

Section Five: Recommendation of the visitors

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

There is also sufficient evidence the programme has addressed the Education & Training Committee’s requirements for updates on: progress of implementing and embedding professional skills into the delivery of the programme; progress of implementing the range of appropriate placements; availability of resources and confirmation of the ongoing provisions. An approval visit is not required and continued approval should be granted.

Visitors' Comment

The visitors noted that for the internal quality document that the person who was doing the internal quality evaluation was the same person doing the external quality evaluation. In future the nature of the evaluation needs to be made clear as to the intention of the report, for example whether it is an internal quality report or an external examiners report.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|--|-------------------|--------------------|
| 2010-07-26 | b | EDU | PPR | AM Report Ambulance Trust - NWAS NHS Trust - IHCD PA - BR | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|-------------------------------|---|
| Education provider | University of Plymouth |
| Programme name | BSc (Hons) Occupational Therapy |
| Mode of delivery | Full Time Part Time |
| HPC visitor(s) | Bernadette Waters (Occupational Therapist) Joanna Goodwin (Occupational Therapist) |
| Education executive | Lewis Roberts |
| Date of assessment day | 16 March 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

Section Three: Additional Documentation

The visitors agreed that additional documentation was required in order to make a recommendation. The additional documentation is listed below with reasons for the request. Following receipt of the documentation, the visitors made a final recommendation which can be found in Section Four.

3.3 There must be a named programme leader who has overall responsibility for the programme and who should be either on the relevant part of the HPC Register or otherwise appropriately qualified and experienced.

Reason

The visitors noted that there has been a change in programme leader and a new programme leader has been appointed on a temporary basis. The visitors were not provided with the information to assess whether the new temporary programme leader is either on the appropriate part of the register or is appropriately qualified and experienced. The visitors would like to receive further information to illustrate how this standard of education continues to be met.

Section Four: Recommendation of the visitor(s)

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|-------------|-------------|------------------|-----------------|-------------------------------------|-------------------|--------------------|
| 2010-04-19 | b | EDU | RPT | AM Report Plymouth BSc (Hons) OT | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|------------------------------|--|
| Education provider | University of Plymouth |
| Programme name | Supplementary Prescribing |
| Mode of delivery | Part Time |
| HPC visitor(s) | Jim Pickard (Chiropodist/Podiatrist) Gordon Pollard (Paramedic) |
| Education executive | Ruth Wood |
| Date of postal review | 4 June 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

The programme did not run in academic year 2007-2008 and as such have not submitted external examiner's reports or a response to the external examiners report for two years ago.

- Student Module Handbooks
- Short Module Descriptors
- Application and CRB Forms
- Designated Medical Practitioner Pack
- Guidelines On Assessment and Marking 2009 – 2010
- CV's

Section Three: Additional Documentation

The visitors agreed that no further documentation was required in order to make a recommendation.

Section Four: Recommendation of the visitor(s)

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|-----------------------------|-------------------|--------------------|
| 2010-06-28 | b | EDU | PPR | AM Report- Plymouth SP - PT | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|---|--|
| Education provider | Queen Margaret University |
| Programme name | BSc (Hons) Diagnostic Radiography |
| Mode of delivery | Full time |
| HPC visitor(s) | Emma Supple (Podiatrist) Derek Adrian-Harris (Radiographer) |
| Education executive | Ruth Wood |
| Date of assessment day / postal review | 4 May 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

Section Three: Additional Documentation

The visitors agreed that additional documentation was required in order to make a recommendation. The additional documentation is listed below with reasons for the request. Following receipt of the documentation, the visitors made a final recommendation which can be found in Section Four.

2.2.1 The admission procedures must apply selection and entry criteria, including evidence of a good command of written and spoken English.

Reason

The annual monitoring documentation (Annual Monitoring report 2007-2008) submitted made reference to the International English Language Testing (IELT) standards required by programme admissions not being met in all cases for students. The documentation also describes the recommended English Language Support not being taken up in all cases. The action plan at the end of the report states that the entry standards will be enforced. The annual monitoring report the following year also refers to this problem (under section 5) where the students felt they were not getting enough help with their written English and it is apparent that “entry qualification has not been enforced again”. There is no reference to follow up actions for this in the action plan at the end of the report. In order for the programme admission procedures to maintain a good command of written and spoken English the visitors require further evidence that the education provider is satisfied the reasons they have not followed their own admissions procedures are appropriate and further evidence that the programme enforces language entry standards to ensure the students undertaking the programme have a good command of spoken and written language.

4.1 The learning outcomes must ensure that those who successfully complete the programme meet the Standards of Proficiency for their part of the Register.

Reason

The annual monitoring documentation (Annual Monitoring report 2007-2008) submitted made reference to the International English Language Testing (IELT) standards required by programme admissions not being met in all cases for students. The documentation also describes the recommended English Language Support not being taken up in all cases. The action plan at the end of the report states that the entry standards will be enforced. The annual monitoring report the following year also refers to this problem (under section 5) where the students felt they were not getting enough help with their written English and it is apparent that “entry qualification has not been enforced again”. There is no reference to follow up actions for this in the action plan at the end of the report. The programme must produce individuals who successfully complete the programme and meet the Standards of Proficiency for their part of the Register including the requirement to “1b.3 – be able to communicate in English to the standard equivalent to Level 7 of the International English Language Testing

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| 2010-08-16 | b | EDU | PPR | AM QMU BSc (Hons) DRAD FT | Draft DD: None | Public RD: None |

System, with no element below 6.5". In order to ensure this standard continues to be met the visitors require further evidence that the education provider is satisfied the reasons they have not followed their own admissions procedures are appropriate and further evidence that the programme enforces language entry standards to ensure the students who successfully complete the programme meet the Standards of Proficiency for their part of the Register.

5.1 Practice placements must be integral to the programme.

Reason

The annual monitoring documentation described a possible concern with the number of available placements for students. The annual monitoring report for 2007-2008 noted as point 12.4 that clinical placements "for diagnostic students are reducing rather than increasing". This is noted as creating the stipulation that "student numbers must not exceed available placements at training sites". This is followed up in the action plan at the end of the report where it is stated the admission numbers will be reassessed. The annual monitoring report for the following year (2008-2009) makes no mention of the issue of student numbers in relation to placement numbers. The visitors are concerned by the potential problem of the lack of placements and therefore require further information about the actions the education provider has made in response to these concerns.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|---------------------------|-------------------|--------------------|
| 2010-08-16 | b | EDU | PPR | AM QMU BSc (Hons) DRAD FT | Draft DD: None | Public RD: None |

Section Four: Recommendation of the visitor(s)

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

Visitors' Comment

The annual monitoring documentation submitted describes a lack of a fitness to practice policy (External Examiners' report – Norton 2008-2009). The response to the external examiners' report (reviewed 4 November 2009) describes the development of a "Fitness to Practice Committee for all Health Care students". The visitors were pleased to note this development of a fitness to practice policy to ensure safety measures in place for both students and the service users that students may be working with.

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|------------|------|-----------|----------|---------------------------|-------------------|--------------------|
| 2010-08-16 | b | EDU | PPR | AM QMU BSc (Hons) DRAD FT | Draft DD: None | Public RD: None |

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| Visitors' Comment | 3 |

Section One: Programme Details

| | |
|-------------------------------|--|
| Education provider | Queen Margaret University |
| Programme name | BSc (Hons) Therapeutic Radiography |
| Mode of delivery | Full time |
| HPC visitor(s) | Emma Supple (Podiatrist) Derek Adrian-Harris (Radiographer) |
| Education executive | Ruth Wood |
| Date of assessment day | 4 May 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

Section Three: Additional Documentation

The visitors agreed that additional documentation was required in order to make a recommendation. The additional documentation is listed below with reasons for the request. Following receipt of the documentation, the visitors made a final recommendation which can be found in Section Four.

2.2.1 The admission procedures must apply selection and entry criteria, including evidence of a good command of written and spoken English.

Reason

The annual monitoring documentation (Annual Monitoring report 2007-2008) submitted made reference to the International English Language Testing (IELT) standards required by programme admissions not being met in all cases for students. The documentation also describes the recommended English Language Support not being taken up in all cases. The action plan at the end of the report states that the entry standards will be enforced. The annual monitoring report the following year also refers to this problem (under section 5) where the students felt they were not getting enough help with their written English and it is apparent that “entry qualification has not been enforced again”. There is no reference to follow up actions for this in the action plan at the end of the report. In order for the programme admission procedures to maintain a good command of written and spoken English the visitors require further evidence that the education provider is satisfied the reasons they have not followed their own admissions procedures are appropriate and further evidence that the programme enforces language entry standards to ensure the students undertaking the programme have a good command of spoken and written language.

4.1 The learning outcomes must ensure that those who successfully complete the programme meet the Standards of Proficiency for their part of the Register.

Reason

The annual monitoring documentation (Annual Monitoring report 2007-2008) submitted made reference to the International English Language Testing (IELT) standards required by programme admissions not being met in all cases for students. The documentation also describes the recommended English Language Support not being taken up in all cases. The action plan at the end of the report states that the entry standards will be enforced. The annual monitoring report the following year also refers to this problem (under section 5) where the students felt they were not getting enough help with their written English and it is apparent that “entry qualification has not been enforced again”. There is no reference to follow up actions for this in the action plan at the end of the report. The programme must produce individuals who successfully complete the programme and meet the Standards of Proficiency for their part of the Register including the requirement to “1b.3 – be able to communicate in English to the standard equivalent to Level 7 of the International English Language Testing

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| 2010-07-23 | c | EDU | PPR | AM Report - QMU - BSc (Hons) TRAD - FT | Draft DD: None | Public RD: None |

System, with no element below 6.5". In order to ensure this standard continues to be met the visitors require further evidence that the education provider is satisfied the reasons they have not followed their own admissions procedures are appropriate and further evidence that the programme enforces language entry standards to ensure the students who successfully complete the programme meet the Standards of Proficiency for their part of the Register.

5.1 Practice placements must be integral to the programme.

Reason

The annual monitoring documentation described a possible concern with the number of available placements for students. The annual monitoring report for 2007-2008 noted as point 12.4 that clinical placements "for diagnostic students are reducing rather than increasing". This is noted as creating the stipulation that "student numbers must not exceed available placements at training sites". This is followed up in the action plan at the end of the report where it is stated the admission numbers will be reassessed. The annual monitoring report for the following year (2008-2009) makes no mention of the issue of student numbers in relation to placement numbers. The visitors are concerned by the potential problem of the lack of placements and therefore require further information about the actions the education provider has made in response to these concerns.

Section Four: Recommendation of the visitor(s)

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

Visitors' Comment

The annual monitoring documentation submitted describes a lack of a fitness to practice policy (External Examiners' report – Norton 2008-2009). The response to the external examiners' report (reviewed 4 November 2009) describes the development of a "Fitness to Practice Committee for all Health Care students". The visitors were pleased to note this development of a fitness to practice policy to ensure safety measures in place for both students and the service users that students may be working with.

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| 2010-07-23 | c | EDU | PPR | AM Report - QMU - BSc (Hons) TRAD - FT | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|-------------------------------|---|
| Education provider | Queen Margaret University |
| Programme name | Extended Independent Prescribing and Supplementary Prescribing |
| Mode of delivery | Part time |
| HPC visitor(s) | Bob Fellows (Paramedic) Caroline Sykes (Speech and Language Therapist) |
| Education executive | Paula Lescott |
| Date of assessment day | 4 May 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

The responses to the External Examiner's reports were not provided as the external examiners did not provide any specific recommendations for this programme.

- Programme documentation
- Student handbook
- Designated medical practitioners handbook

Section Three: Additional Documentation

The visitors agreed that no further documentation was required in order to make a recommendation.

Section Four: Recommendation of the visitor(s)

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

Visitors' Comment

The visitors noted that there had been problems in the past with the responses to external examiner reports on the programme and ensuring the continuity of feedback within the education providers monitoring systems. In particular it was noted that for 2007/2008 there were two external examiners reports and for 2008/2009 this reduced to one so it was unclear if one of the external examiners was no longer linked to the programme. The visitors also saw that due to the problems with responding to external examiner reports there were instances where external examiner comments appeared to have been overlooked.

The visitors recognised that the programme team had identified these weaknesses and were taking steps to improve the mechanisms involved. The visitors wished to encourage these improvements to the external examiner report and response mechanism for the ongoing monitoring of the programme.

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| 2010-08-16 | a | EDU | PPR | AM Report - QMU - SP- PT | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|-------------------------------|---|
| Education provider | Teesside University |
| Programme name | Foundation Degree Paramedic Science |
| Mode of delivery | Full time |
| HPC visitor(s) | Paul Bates (Paramedic) Kathryn Heathcote (Physiotherapist) |
| Education executive | Ruth Wood |
| Date of assessment day | 17 June 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

Other documents submitted:

- Letters from HPC detailing confirmation on ongoing approval from major change submissions

Section Three: Additional Documentation

The visitors agreed that additional documentation was required in order to make a recommendation. The additional documentation is listed below with reasons for the request. Following receipt of the documentation, the visitors made a final recommendation which can be found in Section Four.

3.4 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

Reason

The annual monitoring audit submitted made reference to an increase in student numbers “total student numbers have increased by 45 on the previous year” (Programme Report Form for academic year 2008-2009 section 4.1). This was confirmed in the same report (section 4.3a) where student numbers were indicated when looking at student progression and completion rates. The HPC approval report from the visit on 16 May 2007 stated the proposed student cohort intake number was 20 per cohort twice a year. The visitors are concerned by this increase in numbers and the impact this may have on the number of staff in place needed to deliver an effective programme. The visitors require further evidence to describe how this change in student numbers was managed in relation to staff on the programme.

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

Reason

The annual monitoring audit submitted made reference to an increase in student numbers “total student numbers have increased by 45 on the previous year” (Programme Report Form for academic year 2008-2009 section 4.1). This was confirmed in the same report (section 4.3a) where student numbers were indicated when looking at student progression and completion rates. The HPC approval report from the visit on 16 May 2007 stated the proposed student cohort intake number was 20 per cohort twice a year. The visitors are concerned by this increase in numbers and the impact this may have on the effectiveness of the resources in place used to support student learning. The visitors require further evidence to describe how this change in student numbers was managed in relation to resources used to support student learning.

3.12 The resources provided, both on and off site, must adequately support the required learning and teaching activities of the programme.

Reason

The annual monitoring audit submitted made reference to an increase in student numbers “Total student numbers have increased by 45 on the previous year” (Programme Report Form for academic year 2008-2009 section 4.1). This was confirmed in the same report (section 4.3a) where student numbers were indicated when looking at student progression and completion rates. The visitors are concerned by this increase in numbers and the impact this may have on the

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| 2010-07-20 | b | EDU | PPR | AM Report - Teesside - FdPA - FT | Draft DD: None | Public RD: None |

resources provided, both on and off site, used to support the required learning and teaching activities of the programme. The HPC approval report from the visit on 16 May 2007 stated the proposed student cohort intake number was 20 per cohort twice a year. The visitors require further evidence to describe how this change in student numbers was managed in relation to resources provided on and off site used to support learning and teaching activities of the programme.

5.2 There must be an adequate number of appropriately qualified and experienced staff at the placement.

Reason

The annual monitoring audit submitted made reference to an increase in student numbers “Total student numbers have increased by 45 on the previous year” (Programme Report Form for academic year 2008-2009 section 4.1). This was confirmed in the same report (section 4.3a) where student numbers were indicated when looking at student progression and completion rates. The HPC approval report from the visit on 16 May 2007 stated the proposed student cohort intake number was 20 per cohort twice a year. The visitors are concerned by this increase in numbers and the impact this may have on the number and availability of staff at placements used during the programme. The visitors require further evidence to describe how this change in student numbers was managed in relation to the number of staff at placements to ensure there continue to be adequate numbers of appropriately qualified and experienced staff present for the increased number of students.

5.5 The number, duration and range of placements must be appropriate to the achievement of the learning outcomes.

Reason

The annual monitoring audit submitted made reference to an increase in student numbers “total student numbers have increased by 45 on the previous year” (Programme Report Form for academic year 2008-2009 section 4.1). This was confirmed in the same report (section 4.3a) where student numbers were indicated when looking at student progression and completion rates. The HPC approval report from the visit on 16 May 2007 stated the proposed student cohort intake number was 20 per cohort twice a year. The visitors are concerned by this increase in numbers and the impact this may have on the number and availability of placements used during the programme. The visitors require further evidence to describe how this change in student numbers was managed in relation to the number of placements to ensure the number of placements available continues to be appropriate to the achievement of the learning outcomes for all students.

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|------------|------|-----------|----------|----------------------------------|-------------------|--------------------|
| 2010-07-20 | b | EDU | PPR | AM Report - Teesside - FdPA - FT | Draft DD: None | Public RD: None |

Section Four: Recommendation of the visitor(s)

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|----------------------------------|-------------------|--------------------|
| 2010-07-20 | b | EDU | PPR | AM Report - Teesside - FdPA - FT | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|-------------------------------|--|
| Education provider | University of Ulster |
| Programme name | BSc (Hons) Occupational Therapy |
| Mode of delivery | Full time |
| HPC visitor(s) | Sarah Johnson (Occupational Therapist) Julie Weir (Operating Department Practitioner) |
| Education executive | Mandy Hargood |
| Date of assessment day | 4 May 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

Section Three: Additional Documentation

The visitors agreed that additional documentation was required in order to make a recommendation. The additional documentation is listed below with reasons for the request. Following receipt of the documentation, the visitors made a final recommendation which can be found in Section Four.

6.2 Assessment methods must be employed that measure the learning outcomes and skills that are required to practice safely and effectively.

Reason: In the external examiner's report for 2007/2008 and 2008/2009 reference is made to the volume of summative assessment. The programme team responded to the external examiners concerns and have said that the assessment load has been reduced from three to two in modules where three assessments were common. In order for the visitors to be confident that these changes are appropriate in measuring the learning outcomes and skill required to practice safely and effectively, they would like to receive updated module descriptors for the relevant modules where changes have occurred.

Section Four: Recommendation of the visitor(s)

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|--------------------------------------|-------------------|--------------------|
| 2010-06-29 | b | EDU | PPR | AM Report Ulster BSc (Hons) OT FT | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|-------------------------------|---|
| Education provider | University of Westminster |
| Programme name | BSc (Hons) Applied Biomedical Sciences |
| Mode of delivery | Part time |
| HPC visitor(s) | Pradeep Agrawal (Biomedical Scientist) Martin Benwell (Radiographer) Kathryn Burgess (Radiographer) |
| Education executive | Mandy Hargood |
| Date of assessment day | 17 June 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

- Course handbook
- Clinical Placement handbook
- Programme specification 2007 document
- Supplementary evidence file

Section Three: Additional Documentation

The visitors agreed that additional documentation was required in order to make a recommendation. The additional documentation is listed below with reasons for the request. Following receipt of the documentation, the visitors made a final recommendation which can be found in Section Four.

2.2.2 The admission procedures must apply selection and entry criteria, including criminal convictions checks.

Reason

From the visitors' reading of the documentation, it was not clear to them how the education provider was ensuring that criminal convictions checks were being carried out for all applicants to the programme. The Standards of education and training mapping indicated that students would only sign to declare any criminal convictions or records. The mapping also went on to say that students were made aware of the requirement to sign a declaration to the course leader and where a student has had a criminal conviction check as a pre employment screen, a copy is kept on the student record. The student information record form only indicated that a box needed to be ticked.

From the information received the visitors had concerns regarding the criminal convictions checks process and could not determine that the education provider maintains responsibility for the process. Therefore they require further evidence regarding the criminal convictions check process. As part of this evidence the visitors require information that shows how a positive criminal conviction check is handled by the education provider, how the currency of criminal conviction checks is verified and the specified time period that the education provider ensures these checks are carried out in order to ensure that this standard continues to be met.

2.2.3 The admission procedures must apply selection and entry criteria, including compliance with any health requirements.

Reason

From the visitors' reading of the documentation, it was not clear to them how the education provider was ensuring that health requirement checks were being carried out for all applicants to the programme. The Standards of education and training mapping indicated that students would only sign to declare any health issues. The mapping also went on to say that students were made aware of the requirement to sign a declaration to the course leader. Where a student has had a check as a pre employment screen health check, a copy is kept on the student record. The student information record form only indicated that a box needed to be ticked.

From the information received the visitors had concerns regarding the health checks process and could not determine that the education provider maintains responsibility for the process. Therefore they require further evidence regarding

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|---|-------------------|--------------------|
| 2010-07-12 | a | EDU | PPR | AM Report Westminster BSc (Hons) ABMS PT Final | Draft DD: None | Public RD: None |

the health check process. As part of this evidence the visitors require information that shows how a positive health check is handled by the education provider, how the currency of health checks is verified and the specified time period that the education provider ensures these checks are carried out in order to ensure that this standard continues to be met.

Section Four: Recommendation of the visitor(s)

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

Visitors Comment:

The visitors noted that within all the documentation provided, the terms BSc (Hons) Biomedical Science and BSc (Hons) Applied Biomedical Science was interchangeable. In order for documentation to be clear and reflect accurately the title of the programme for students, all documentation should be updated to show the correct HPC approved title.

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| 2010-07-12 | a | EDU | PPR | AM Report Westminster BSc (Hons) ABMS PT Final | Draft DD: None | Public RD: None |

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Section One: Programme Details

| | |
|------------------------------|--|
| Education provider | University of Wolverhampton |
| Programme name | Non Medical Prescribing Programme |
| Mode of delivery | Part Time |
| HPC visitor(s) | Jim Pickard (Chiropodist/Podiatrist) Bob Dobson (Paramedic) |
| Education executive | Ruth Wood |
| Date of postal review | 15 July 2010 |

Section Two: Submission Details

The following documents were submitted as part of the audit submission:

- A completed HPC audit form
- Internal quality report for one year ago
- Internal quality report for two years ago
- External Examiner's for one year ago
- External Examiner's Report for two years ago
- Response to External Examiner's report one year ago
- Response to External Examiner's report for two years ago

Other documents submitted:

- CV for programme leader

Section Three: Additional Documentation

The visitors agreed that no further documentation was required in order to make a recommendation.

Section Four: Recommendation of the visitor(s)

There is sufficient evidence that the programme continues to meet the standards of education and training and that those who complete the programme will continue to meet the standards of proficiency for the profession. An approval visit is not required and continued approval should be granted.

| Date | Ver. | Dept/Cmte | Doc Type | Title | Status | Int. Aud. |
|------------|------|-----------|----------|--|-------------------|--------------------|
| 2010-07-23 | b | EDU | PPR | AM Report - Wolverhampton - SP - PT | Draft DD: None | Public RD: None |