

HCPC approval process report

| Education provider | Buckinghamshire New University |
|----------------------|--------------------------------|
| Name of programme(s) | MSc Physiotherapy, Full time |
| Approval visit date | 25 – 26 February 2021 |
| Case reference | CAS-16241-T8M3K3 |

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Executive Summary

We are the Health and Care Professions Council (HCPC), a regulator set up to protect the public. We set standards for education and training, professional knowledge and skills, conduct, performance and ethics; keep a register of professionals who meet those standards; approve programmes which professionals must complete before they can register with us; and take action when professionals on our Register do not meet our standards.

The following is a report on the approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards of education and training (referred to through this report as 'our standards'). The report details the process itself, the evidence considered, and recommendations made regarding programme approval.

Section 1: Our regulatory approach

Our standards

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

Programmes are normally <u>approved on an open-ended basis</u>, subject to satisfactory engagement with our monitoring processes. Programmes we have approved are listed <u>on our website</u>.

How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint <u>partner visitors</u> to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee meets in public on a regular basis and their decisions are available to view <u>on our website</u>.

HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

| Fleur Kitsell | Physiotherapist |
|---------------|-----------------|
| Jo Jackson | Physiotherapist |
| Niall Gooch | HCPC executive |

Other groups involved in the virtual approval visit

There were other groups involved with the approval process as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

| Kevin Maher | Independent chair (supplied by the education provider) | Head of School for Business, Law and Computing, Buckinghamshire New University |
|-------------|--|--|
| Naj Riaz | Secretary (supplied by the education provider) | Buckinghamshire New University |
| Reena Patel | Assessor | College and Society of Physiotherapists |

| Dearbhla Gallagher | Internal panel member | Buckinghamshire New |
|--------------------|-----------------------|---------------------|
| | | University |
| Melanie Hayward | Internal panel member | Buckinghamshire New |
| | | University |

Section 2: Programme details

| Programme name | MSc Physiotherapy |
|-----------------------|-------------------|
| Mode of study | FT (Full time) |
| Profession | Physiotherapist |
| Proposed first intake | 01 September 2021 |
| Maximum learner | Up to 30 |
| cohort | |
| Intakes per year | 1 |
| Assessment reference | APP02279 |

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meet our standards for the first time.

Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

| Type of evidence | Submitted | Comments |
|-------------------------------------|-----------|----------|
| Completed education standards | Yes | |
| mapping document | | |
| Information about the programme, | Yes | |
| including relevant policies and | | |
| procedures, and contractual | | |
| agreements | | |
| Descriptions of how the programme | Yes | |
| delivers and assesses learning | | |
| Proficiency standards mapping | Yes | |
| Information provided to applicants | Yes | |
| and learners | | |
| Information for those involved with | Yes | |
| practice-based learning | | |
| Information that shows how staff | Yes | |
| resources are sufficient for the | | |
| delivery of the programme | | |

| Internal quality monitoring | No | Only requested if the programme |
|-----------------------------|----|---------------------------------|
| documentation | | (or a previous version) is |
| | | currently running |

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

| Group | Met |
|------------------------------------|-----|
| Learners | Yes |
| Service users and carers (and / or | Yes |
| their representatives) | |
| Facilities and resources | Yes |
| Senior staff | Yes |
| Practice educators | Yes |
| Programme team | Yes |

Section 4: Outcome from first review

Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 30 April 2021.

- 3.5 There must be regular and effective collaboration between the education provider and practice education providers.
- 3.6 There must be an effective process in place to ensure the availability and capacity of practice-based learning for all learners.

The following condition applies to the above standards. For simplicity, as the issue spans several standards, the education provider should respond to this condition as one issue.

Condition: The education provider must demonstrate how they will ensure ongoing effective collaboration with their practice partners, and that the collaboration can deliver

sufficient availability and capacity of an appropriate scope and breadth of practice in practice-based learning.

Reason: The visitors were aware from the documentation and from discussions at the visit that the education provider had various contacts with the organisations that they were planning to use to provide practice-based learning. The main one of these was the London and South East Area Partnership for Placements (LSEAPP). In the initial submission the visitors had seen some information about meetings and contacts between the education provider and the LSEAPP, as well as about some of the other potential partners. This information provided the visitors with an overall understanding of how the education provider intended to use relationships with these bodies to deliver sufficient appropriate placements for the programme. They also had an opportunity to discuss placement development at the visit, and were given an update on further meetings and consultations that had taken place. However, they considered that they had not been provided with sufficient detail about how the collaboration would work going forward; they had not seen plans for further meetings, noting for example attendees and agenda items, or memoranda laying out relationships. They noted also that they had not seen evidence of how the education provider intends to finalise agreements with those bodies, and that there was a lack of information, either from the documentation or from the visit, about placement providers other than the LSEAPP. The visitors additionally considered that it was not clear how the relationships with placement partners would be managed at the education provider's end. They therefore were unable to determine whether the standards were met and require further evidence demonstrating that the education provider will have effective ongoing collaboration with providers of practice-based learning, and how this relationship delivers sufficient placement capacity for the programme to function effectively.

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

Condition: The education provider must demonstrate how the current appointment process will ensure an adequate number of appropriately qualified and experienced staff, and what contingency planning is in place if an appointment is not made.

Reason: The visitors were aware that the education provider was planning to bring its staff team up to full strength and to fill certain skills and knowledge gaps through a recruitment process that was currently ongoing. The intention was to recruit two additional FTE. The visitors were able to discuss this at the visit and it had been indicated in the documentation. From these discussions, the visitors knew that the position had been advertised. They considered that the job description was appropriate, but they were not clear what the education provider's plan was if they were not able to make an appointment before the planned start of the programme. The visitors took the view was that if the appointment was not made, the programme would not be able to run in the way intended by the education provider. They therefore require that the education provider submit further evidence showing that an appointment will be made and explaining what they would do if they were not able to make an appointment.

3.11 An effective programme must be in place to ensure the continuing professional and academic development of educators, appropriate to their role in the programme.

Condition: The education provider must demonstrate how they will ensure that clinical educators have access to appropriate continuing professional and academic development.

Reason: The visitors were satisfied with the arrangements for continuing professional development for the programme team, as outlined in the documentation and elaborated by the senior team during discussions at the visit. However, it was not clear to them from the initial evidence how the education provider would ensure that clinical educators working in practice-based learning settings would have access to professional and academic development. They asked about this at the visit. The senior team and the programme team both reported that they had plans to take this forward, but there was no formal evidence of what form the development would take. They therefore require further evidence showing that those working in supervision roles in practice-based learning would have access to appropriate development activities.

- 4.1 The learning outcomes must ensure that learners meet the standards of proficiency for the relevant part of the Register.
- 6.1 The assessment strategy and design must ensure that those who successfully complete the programme meet the standards of proficiency for the relevant part of the Register.

The following condition applies to the above standards. For simplicity, as the issue spans several standards, the education provider should respond to this condition as one issue.

Condition: The education provider must demonstrate how they will ensure that the learning outcomes on the programme are clearly aligned with the standards of proficiency, and that assessment will ensure that the learners meet the standards of proficiency.

Reason: The visitors reviewed the standards of proficiency (SOPs) mapping exercise during their documentary review. The education provider had mapped the SOPs to module outlines. However, the module outlines submitted at this stage of the process were so broad that the visitors were not able to understand how specific SOPs would be met by particular parts of the modules. SOPs were not connected to specific learning outcomes. This also meant that it was not clear how the SOPs would be delivered or assessed. As a result the visitors did not have a clear idea of how specifically the education provider intended to deliver and assess some of the knowledge, skills and aptitudes that learners would require for safe and effective practice.

During discussions at the visit the programme team stated that the details of the alignment of SOPs and learning outcomes would be finalised once they had recruited appropriate additional staff (see the condition under SET 3.9 above) who would be able to carry out this task. Nevertheless, at present the lack of clarity about the alignment of learning outcomes and SOPs made meant the visitors were unable to fully understand how the different parts of the programme would link together, and how the curriculum noted above would be assessed. They therefore were unable to determine that these

standards were met, and require further evidence showing how the education provider will deliver and assess the standards of proficiency through the leaning outcomes.

4.4 The curriculum must remain relevant to current practice.

Condition: The education provider must clarify how they will ensure that the curriculum remains relevant to current practice.

Reason: The visitors were able to review the documentation relating to the module descriptors and the curriculum. They also asked the programme team about how they intended to maintain professional and clinical currency in the curriculum. The visitors understood that the education provider were relying on good relationships with practice partners to meet this standard. However, as noted in the condition under SETs 3.5 and 3.6 above, there remained some uncertainty about the form of these ongoing relationships, The visitors were therefore unclear that this standard was met, because they were not sure what the education provider's ongoing relationship with practice partners would look like and so were not sure how it would be used to ensure relevance to current practice. They require further evidence demonstrating that the curriculum will remain relevant to current practice.

- 5.6 Practice educators must have relevant knowledge, skills and experience to support safe and effective learning and, unless other arrangements are appropriate, must be on the relevant part of the Register.
- 5.7 Practice educators must undertake regular training which is appropriate to their role, learners' needs and the delivery of the learning outcomes of the programme.

The following condition applies to the above standards. For simplicity, as the issue spans several standards, the education provider should respond to this condition as one issue.

Condition: The education provider must demonstrate how they will ensure that practice educators are suitable persons for their role, and that they are appropriately trained.

Reason: The visitors reviewed the documentation submitted by the education provider, and discussed how practice educators were going to be selected, prepared and trained for their roles. The visitors understood that there were clear plans for this, but they were not able to see detail for how the training and preparation would work. They considered that this was potentially linked to other parts of this report, for example the conditions set under SETs 3.5, 3.5 and 3.9 above, because it would be difficult for the education provider to clarify their plans for practice educators without clarifying their overall staffing situation and the relationships with practice partners. The visitors therefore require further evidence showing that practice educators will have relevant knowledge, skills and experience, and that they will undertake regular training.

- 6.3 Assessments must provide an objective, fair and reliable measure of learners' progression and achievement.
- 6.5 The assessment methods used must be appropriate to, and effective at, measuring the learning outcomes.

The following condition applies to the above standards. For simplicity, as the issue spans several standards, the education provider should respond to this condition as one issue.

Condition: The education provider must clarify how they will ensure that the assessments used on the programme are appropriate for assessing learner progress, and that they constitute a reliable and fair approach.

Reason: The visitors had reviewed the documentation as regards assessment, and asked the programme team about their approach. Some details about assessment were not clear either from the initial submission or from conversations at the visit. For example, the visitors were not given a clear understanding of how moderation would work. This was especially important given the planned small size of the programme team. They were also not clear about how assessment in placement was intended to be monitored and its quality assured. They considered that there was a link between this condition and the one set under SETs 4.1 and 6.1 above; the fact that SOPs were not clearly aligned to specific learning outcomes made it difficult for them to be sure that the assessment would be fair and reliable and that it would measure learning outcomes appropriately. They therefore require further evidence demonstrating how assessment will work.



HCPC approval process report

| Education provider | University of Greenwich |
|----------------------|---|
| Name of programme(s) | BSc (Hons) Operating Department Practitioner, Full time |
| | BSc (Hons) Operating Department Practitioner, Part time |
| | BSc (Hons) Operating Department Practitioner (Degree |
| | Apprenticeship), Full time |
| | BSc (Hons) Operating Department Practitioner (Degree |
| | Apprenticeship), Part time |
| | BSc (Hons) Operating Department Practitioner (Truro & |
| | Penwith College), Full time |
| | BSc (Hons) Operating Department Practitioner (Truro & |
| | Penwith College), Part time |
| | BSc (Hons) Operating Department Practitioner (Degree |
| | Apprenticeship) (Truro & Penwith College), Full time |
| | BSc (Hons) Operating Department Practitioner (Degree |
| | Apprenticeship) (Truro & Penwith College), Part time |
| Approval visit date | 11-12 February 2021 |
| Case reference | CAS-16224-Z4S8K2 |

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Executive Summary

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Programmes are normally <u>approved on an open-ended basis</u>, subject to satisfactory engagement with our monitoring processes. Programmes we have approved are listed on our website.

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The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee meets in public on a regular basis and their decisions are available to view on our website.

HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

| David Bevan | Operating department practitioner |
|---------------|--|
| Shaaron Pratt | Radiographer - Diagnostic radiographer |
| Rabie Sultan | HCPC executive |

Other groups involved in the virtual approval visit

There were other groups involved with the approval process as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

| Jennifer Marie | Independent chair (supplied by the education provider) | University of Greenwich |
|--------------------|--|-------------------------|
| Jonathan Gascoigne | Secretary (supplied by the education provider) | University of Greenwich |
| Debora Almeida | External panel member | Bournemouth University |

Section 2: Programme details

| Programme name | BSc (Hons) Operating Department Practitioner |
|----------------------|---|
| Mode of study | FT (Full time) |
| Profession | Operating department practitioner |
| First intake | 01 September 2021 |
| Maximum learner | Up to 15 shared across the programmes at relevant |
| cohort | campuses of University of Greenwich |
| Intakes per year | 1 |
| Assessment reference | APP02276 |

| Programme name | BSc (Hons) Operating Department Practitioner |
|----------------------|---|
| Mode of study | PT (Part time) |
| Profession | Operating department practitioner |
| First intake | 01 September 2021 |
| Maximum learner | Up to 15 shared across the programmes at relevant |
| cohort | campuses of University of Greenwich |
| Intakes per year | 1 |
| Assessment reference | APP02277 |

| Programme name | BSc (Hons) Operating Department Practitioner (Degree |
|----------------------|--|
| | Apprenticeship) |
| Mode of study | FT (Full time) |
| Profession | Operating department practitioner |
| First intake | 01 September 2021 |
| Maximum learner | Up to 15 shared across the programmes at relevant |
| cohort | campuses of University of Greenwich |
| Intakes per year | 1 |
| Assessment reference | APP02280 |

| Programme name | BSc (Hons) Operating Department Practitioner (Degree |
|----------------------|--|
| | Apprenticeship) |
| Mode of study | PT (Part time) |
| Profession | Operating department practitioner |
| First intake | 01 September 2021 |
| Maximum learner | Up to 15 shared across the programmes at relevant |
| cohort | campuses of University of Greenwich |
| Intakes per year | 1 |
| Assessment reference | APP02281 |

| Programme name | BSc (Hons) Operating Department Practitioner (Truro & Penwith College) |
|----------------------|--|
| Mode of study | FT (Full time) |
| Profession | Operating department practitioner |
| First intake | 01 September 2021 |
| Maximum learner | Up to 15 shared across the programmes at the 'Truro and |
| cohort | Penwith College' campus |
| Intakes per year | 1 |
| Assessment reference | APP02340 |

| Programme name | BSc (Hons) Operating Department Practitioner (Truro & |
|----------------------|---|
| | Penwith College) |
| Mode of study | PT (Part time) |
| Profession | Operating department practitioner |
| First intake | 01 September 2021 |
| Maximum learner | Up to 15 shared across the programmes at the 'Truro and |
| cohort | Penwith College' campus |
| Intakes per year | 1 |
| Assessment reference | APP02341 |

| Programme name | BSc (Hons) Operating Department Practitioner (Degree |
|----------------------|---|
| | Apprenticeship) (Truro & Penwith College) |
| Mode of study | FT (Full time) |
| Profession | Operating department practitioner |
| First intake | 01 September 2021 |
| Maximum learner | Up to 15 shared across the programmes at the 'Truro and |
| cohort | Penwith College' campus |
| Intakes per year | 1 |
| Assessment reference | APP02342 |

| Programme name | BSc (Hons) Operating Department Practitioner (Degree |
|----------------------|---|
| | Apprenticeship) (Truro & Penwith College) |
| Mode of study | PT (Part time) |
| Profession | Operating department practitioner |
| First intake | 01 September 2021 |
| Maximum learner | Up to 15 shared across the programmes at the 'Truro and |
| cohort | Penwith College' campus |
| Intakes per year | 1 |
| Assessment reference | APP02343 |

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meet our standards for the first time.

The education provider proposes to deliver full and part time BSc (Hons) Operating Department Practitioner (Degree Apprenticeship) and BSc (Hons) Operating Department Practitioner pogrammes, at their campus in Greenwich, London. These programmes would have up to 15 learners across the programmes.

The education provider also proposes to deliver the same programmes with their partner Truro and Penwith College. Again, the proposal is to have up to 15 learners across the programmes.

The University of Greenwich retains overall responsibility for the delivery, design and award of the qualifications for all the programmes.

Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

| Type of evidence | Submitted | Comments |
|-------------------------------------|-----------|------------------------------|
| Completed education standards | Yes | |
| mapping document | | |
| Information about the programme, | Yes | |
| including relevant policies and | | |
| procedures, and contractual | | |
| agreements | | |
| Descriptions of how the programme | Yes | |
| delivers and assesses learning | | |
| Proficiency standards mapping | Yes | |
| Information provided to applicants | Yes | |
| and learners | | |
| Information for those involved with | Yes | |
| practice-based learning | | |
| Information that shows how staff | Yes | |
| resources are sufficient for the | | |
| delivery of the programme | | |
| Internal quality monitoring | No | As these programmes have not |
| documentation | | yet commenced, this was not |
| | | required |

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

| Group | Met | Comments |
|---|-----------------|--|
| Learners | Not Required | As the visit was virtual and the visitors were able to determine through the programme documentation, that standards related to learners' involvement had been met, they decided it was unnecessary to meet this group |
| Service users and carers (and / or their representatives) | Not Required | Visitors were able to determine through the programme documentation, that standards related to service users and carers had been met. |
| Facilities and resources | Not Required | As the visit was virtual and the visitors were able to determine through the programme |

| | | documentation, that standards related to resources had been met, they decided it was unnecessary to have a virtual tour of the facilities and resources. |
|--------------------|-----|--|
| Senior staff | Yes | Visitors met the respective senior team members from University of Greenwich and their partner, Truro and Penwith College |
| Practice educators | Yes | Visitors met the respective practice educators for University of Greenwich and their partner, Truro and Penwith College |
| Programme team | Yes | Visitors met the respective programme team members from University of Greenwich and their partner, Truro and Penwith College |

Section 4: Outcome from first review

Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 16 April 2021.

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

Condition: The education provider must ensure that the required information about the programmes, and their relevant pathways, is available to potential applicants, so that they can make an informed decision about whether to take up a place on the programme.

Reason: For the proposed BSc (Hons) Operating Department Practitioner programmes, the visitors reviewed the "D6 programme document" .The visitors noted that information regarding entry requirements, additional costs on the programmes, requirements for

criminal conviction checks and health requirements were available. The visitors considered this was an internal document available to the education provider and for the HCPC approval process review and as such could not see how applicants would have access to this information prior to securing a place on the relevant programmes.

For the BSc (Hons) Operating Department Practitioner (Degree Apprenticeship) programmes, the visitors reviewed information contained within the 'Final_Apprenticeship_Doc' document. The visitors found relevant information similar to the BSc (Hons) Operating Department Practitioner programmes, with additional aspects such as the applicants' interview process and the end point assessment. The visitors noted this was again an internal document with the education provider and as such were not clear how applicants, who are employees working within a practice-based learning setting, will have access to relevant information for the proposed programmes.

The weblink provided in the mapping document contained information regarding the Paramedic programme and not the BSc (Hons) Operating Department Practitioner nor BSc (Hons) Operating Department Practitioner (Degree Apprenticeship) programmes.

At the visit, the education provider provided a draft document which they aim to publish on the website, as information for potential applicants. The visitors noted that information, such as entry and selection criteria, English language requirements and criminal conviction checks were not contained within this draft document. In addition, the fee for the relevant programmes was stated as yet to be confirmed.

It was not clear if this draft document applied to the BSc (Hons) Operating Department Practitioner or the BSc (Hons) Operating Department Practitioner (Degree Apprenticeship) programmes. It was also not clear whether this information was for the relevant programmes' to be delivered at the Greenwich campus or the partner college in Cornwall. For example, the visitors could not find any information relevant to the degree apprenticeship programmes, such as the end point assessment or interview selection process. The programme team confirmed this is in draft form and is yet to be updated and agreed.

The programme team also confirmed their intention to upload relevant information on their website with clear differentiation between the different programmes, including signposting awareness of the programmes' delivery to be undertaken at the Greenwich campus and their partner Truro and Penwith College (TAPC) in Cornwall. As visitors have not seen this information, they were unable to determine whether applicants will have all the information they require to make an informed choice about taking up an offer of a place on the programmes, at either the Greenwich campus or their partner TAPC. Therefore, the visitors require the education provider to provide up to date information with appropriate content regarding the proposed programmes, including the relevant pathways. Additionally, the education provider must clarify how they will ensure relevant information relating to all programmes is made available to potential applicants. From this, the visitors will be able to determine whether applicants for the proposed programmes, will have the relevant information they need to make an informed choice about taking up the offer of a place on the relevant programmes offered at Greenwich campus or their partner TAPC.

2.5 The admissions process must ensure that applicants are aware of and comply with any health requirements.

Condition: For the BSc (Hons) Operating Department Practitioner programmes, the education provider must demonstrate how the admissions procedures clearly outline to applicants what the health requirements are.

Reason: In their review of the documentation for this standard, the visitors noted that applicants with a conditional offer for the BSc (Hons) Operating Department Practitioner programmes need to attend an Occupational Health (OH) appointment as part of their registration process. The OH appointment is arranged by the education provider and applicants need to obtain clearance, prior to commencement on the programmes.

From their review of the documentation, the visitors were clear that an OH appointment is part of the application process but it was not clear what the OH assessment would be taking into consideration nor what health requirements the applicants needed to demonstrate as part of this. In discussion with the programme team, the visitors were informed that information about health requirements, such as immunisations and OH processes, would normally be communicated to applicants as it is currently done as per other existing programmes. However, the visitors noted that requirements such as immunisation, were not made explicit within the documentation. As such, the visitors could not ascertain how applicants would know what the health requirements were, and the process they needed to engage in to determine whether they comply with the requirements for the BSc (Hons) Operating Department Practitioner programmes. As such, the visitors require further information about what the health requirements are for these programmes, and how this is communicated to potential applicants. In this way, the visitors can determine whether this standard is met.

3.3 The education provider must ensure that the person holding overall professional responsibility for the programme is appropriately qualified and experienced and, unless other arrangements are appropriate, on the relevant part of the Register.

Condition: The education provider must demonstrate the process in place to appoint an appropriately qualified and experienced person to hold overall professional responsibility for the programme, or their replacement if this becomes necessary.

Reason: It was mentioned in the mapping document that in the first instance, the programmes will be led by an experienced Nursing and Midwifery Council (NMC) registrant with a theatre background, supported by the newly appointed Operating Department Practitioner (ODP) staff. The visitors reviewed the curriculum vitae (CV) of the person holding overall responsibility for the programmes, plus the job description and person specification submitted as evidence for this standard. From discussions at the visit, the visitors understood the indicated programme lead will be responsible for leading of the proposed programmes at Greenwich only and this appointment is an interim measure. However, the visitors could not gather if the education provider will continue with the interim appointment post commencement of the programmes or their plans to recruit a permanent appointment. The roles, responsibilities and requirements for the professional lead were clear within the person specification and job description, such as having HCPC registration as an ODP. However, the visitors could not see that the clear process which would be followed to identify and secure a suitable person if it becomes necessary to do so in future.

During the TAPC programme team meeting, the visitors were informed of the appointment of a separate programme lead who will be leading the proposed

programmes at TAPC. It was stated that the new programme lead has relevant experience of leading an ODP programme in a similar role, previously at another education provider. However, without seeing any documentary evidence regarding the appointment process of the new programme lead at TAPC, the visitors could not make a judgement on what qualifications and experience or recruitment process were considered when appointing for this position. For example, the visitors were unsure whether the process at TAPC followed the same steps as the process undertaken at the Greenwich campus. During further discussions, it was made clear that the senior team is responsible for programme lead appointments but the appointment process was not clearly articulated nor explained within the documentation submitted. For example: it was unclear whether possible suitable replacements in future, will be made internally or externally. As such, the visitors could not see if there was a clear process in place to identify a suitable person for this role, or secure a replacement if it becomes necessary to do so in the future. Based on this, the visitors could not make a judgement if this standard has been met.

Therefore, the education provider must clearly articulate the process in place at the Greenwich campus and TAPC to identify an appropriately qualified and experienced person, and if it becomes necessary, a suitable replacement

- 3.9 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.
- 3.10 Subject areas must be delivered by educators with relevant specialist knowledge and expertise.

Condition: The education provider must demonstrate that there is an adequate number of appropriately qualified and experienced staff in place, with relevant specialist knowledge and expertise to deliver effective programmes.

Reason: From reviewing the 16 CVs evidenced for these two standards, the visitors noted there is a range of staff from different professions which included nurses, midwives, paramedics, independent prescribers, and speech and language therapists. It was also stated in the mapping document that there is an intention to recruit additional ODP staff, to form part of the teaching team on these programmes. Within the documentation, it was clear to the visitors which staff member will be responsible for teaching the relevant list of modules mentioned, though it was not clearly stated in this list, where each staff member was based. However, it was stated there was one link tutor for TAPC which the visitors considered was unclear as it could possibly mean the remainder of staff will be teaching only at the Greenwich campus. Without having further information as to who will be involved in teaching at Greenwich campus and TAPC, it was not possible to determine whether there will be an adequate number of staff in place to deliver effective programmes at the education provider and their partner TAPC.

At the visit, the senior team and programme team mentioned that two additional ODP staff have been recruited, with one each to be part of the teaching team at the Greenwich campus and TAPC. Additionally, it was stated by the senior team that the education provider and their partner TAPC have the commitment and financial resources to approve further ODP teaching staff appointments, subject to HCPC approval of the proposed programmes in Greenwich and TAPC. The programme teams also stated that they intend to use some hourly paid ODP lecturers and involve some of

the practice-based learning staff, to contribute to the teaching activities at the Greenwich campus and TAPC. As the visitors were unable to see the qualifications or experience of the two new ODP staff appointed, they could not determine whether the new staff are appropriately qualified and experienced. Though the evidence submitted contained job descriptions of ODP lecturers, there was no confirmation provided regarding an exact total number of further staff to be recruited, including the timelines. It was also not made clear what contingency plans are in place, if the recruitment of additional staff is not complete by the September 2021 start.

Additionally, from discussions held at the visit, the visitors were unclear what experience and knowledge was required of individuals working as an hourly-paid lecturer for them to be suitable, so they are well-equipped to take part in teaching and to support learning in the subject areas they are involved in.

Considering the above mentioned aspects, the visitors were not clear how many staff will be involved in teaching at each site, how many staff are yet to be recruited and what qualifications and experience the newly appointed ODP staff will possess. The visitors therefore considered the standards were not met, as they could not determine whether there are an appropriate number of staff who are able and equipped to deliver the programmes effectively at across the sites at Greenwich and TAPC, and that staff have the necessary knowledge and expertise to deliver their parts of the programmes effectively. Therefore, the education provider must demonstrate and confirm:

- how they will ensure that there is an adequate number of appropriately qualified staff in place to deliver the proposed programmes effectively for all learners at Greenwich and TAPC, by September 2021 start. This should include contingency plans in place, should they not recruit staff in time for September 2021;
- clarity about the ODP profession specific staff numbers they intend to recruit, including the timelines for Greenwich and TAPC. This should include information regarding their required knowledge and experience; and
- what qualifications and experience will be considered for utilising hourly paid lecturers or practice-based learning staff to teach on the relevant programmes.

5.5 There must be an adequate number of appropriately qualified and experienced staff involved in practice-based learning.

Condition: For all the relevant proposed programmes at the University of Greenwich campus, the education provider must define what they consider as an adequate number of appropriately qualified and experienced practice-based learning staff.

Reason: It was stated in the mapping document that practice educator numbers are discussed and agreed as part of the practice education provider placement audits. There was also reference to a 'Practice Based Learning' document, as evidence for this standard. From their review, the visitors noted detailed information regarding the practice-based learning environment, roles and responsibilities of practice educators, learning and assessment during placements, allocation of placement and various other policies. On page 48 of the document, the visitors noted it contained a generic audit form containing tick boxes, to confirm aspects such as whether there are enough practice educators to support the agreed maximum capacity of learners. It was noted that this form was used for all HCPC approved programmes and information had to be confirmed by the Placement Manager and Education Lead for the relevant programmes. However, the documentation did not provide specifics about practice educator numbers

or what the education provider considered to be a suitable number for staff involved in practice-based learning, for the number of learners across the proposed programmes.

During the practice educators meeting for the programmes delivered in Greenwich, the visitors were informed about the preparation that has been undertaken for the proposed programmes. It was also stated that the practice educators are confident of providing the necessary support to learners on the proposed programmes, considering the relevant experience their relevant Trust and hospitals have of dealing with ODP learners from other education providers in London.

The visitors considered there was information within the documentation, which was also clearly articulated at the visit, regarding how practice educators are selected. However, from the discussions held, the visitors could not determine what the education provider considered to be a suitable number of staff for the proposed number of learners they wish to recruit across all the programmes in Greenwich. The visitors were therefore unclear how the education provider ensured there was enough support for learners to take part in safe and effective practice-based learning. Therefore, the education provider must clarify and define what they consider as an adequate number of appropriately qualified and experienced practice-based learning staff for the proposed BSc (Hons) Operating Department Practitioner and BSc (Hons) Operating Department Practitioner (Degree Apprenticeship) programmes at Greenwich. From this, the visitors will be able to determine if this standard is met for the programmes based at the Greenwich campus.



HCPC approval process report

| Education provider | University of Salford |
|----------------------|---|
| Name of programme(s) | BSc (Hons) Prosthetics and Orthotics, Full time |
| Approval visit date | 26-27 January 2021 |
| Case reference | CAS-16181-F2X8N2 |

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Executive Summary

We are the Health and Care Professions Council (HCPC), a regulator set up to protect the public. We set standards for education and training, professional knowledge and skills, conduct, performance and ethics; keep a register of professionals who meet those standards; approve programmes which professionals must complete before they can register with us; and take action when professionals on our Register do not meet our standards.

The following is a report on the approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards of education and training (referred to through this report as 'our standards'). The report details the process itself, the evidence considered, and recommendations made regarding programme approval.

Section 1: Our regulatory approach

Our standards

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

Programmes are normally <u>approved on an open-ended basis</u>, subject to satisfactory engagement with our monitoring processes. Programmes we have approved are listed on our website.

How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint <u>partner visitors</u> to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee meets in public on a regular basis and their decisions are available to view on our website.

HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

| Hazel Anderson | Prosthetist / orthotist |
|----------------|--|
| Martin Benwell | Radiographer - Diagnostic radiographer |
| John Archibald | HCPC executive |

Other groups involved in the virtual approval visit

There were other groups involved with the approval process as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

| Helen Matthews | Independent chair (supplied by the education provider) | University of Salford |
|----------------|--|-----------------------|
| Julie Evans | Secretary (supplied by the | University of Salford |
| | education provider) | - |

Section 2: Programme details

| Programme name | BSc (Hons) Prosthetics and Orthotics |
|------------------------|--------------------------------------|
| Mode of study | FT (Full time) |
| Profession | Prosthetist / orthotist |
| First intake | 01 January 1998 |
| Maximum learner cohort | Up to 30 |
| Intakes per year | 1 |
| Assessment reference | APP02270 |

We undertook this assessment via the approval process, which involved consideration of documentary evidence and virtual approval visit, to consider whether the programme continues to meet our standards. We decided to assess the programme via the approval process due to the outcome of a major change submitted in 2020.

The education provider notified us of their intention to make changes across the programme. We considered the changes were likely to have a considerable impact on the way the programme meets a large number of our standards, and affect the way in which the programme delivers the standards of proficiency for prosthetists / orthotists. As well as increasing programme enrolment by 50%, the education provider made the following changes:

- rewriting learning outcomes across the whole programme;
- making significant amendments to module content;
- introducing new modules and changing the weighting of existing ones;
- changing the structure and duration of practice-based learning, including the introduction of a new three-week clinical assessment; and
- changes to assessment strategy across many of the modules, including all the Level 6 modules.

Given the different programme content, we considered the delivery of our standards would be different. The differing components of the programme will relate to each other in different ways. Staff would have to be redeployed and given different responsibilities, and the overall demands on staff time and resources will increase because of the increased recruitment of learners, from the current 30 to 45. The expectations on learners will change due to the restructuring of the programme and the new assessment approach across large parts of the programme.

Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

| Type of evidence | Submitted |
|--|-----------|
| Completed education standards mapping document | Yes |

| Information about the programme, including relevant policies and | Yes |
|---|-----|
| procedures, and contractual agreements | |
| Descriptions of how the programme delivers and assesses learning | Yes |
| Proficiency standards mapping | Yes |
| Information provided to applicants and learners | Yes |
| Information for those involved with practice-based learning | Yes |
| Information that shows how staff resources are sufficient for the | Yes |
| delivery of the programme | |
| Internal quality monitoring documentation | Yes |

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

| Group | Met | Comments |
|---|-----|--|
| Learners | Yes | |
| Service users and carers (and / or their representatives) | No | Since the move to virtual visits, we do not ask to meet with service users and carers. We explored any areas with them through the submission of written statements. |
| Facilities and resources | No | Since the move to virtual visits, we do not ask for a session about facilities and resources. We explored areas relating to resourcing in other, appropriate meetings. |
| Senior staff | Yes | |
| Practice educators | Yes | |
| Programme team | Yes | |

Section 4: Outcome from first review

Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 03 March 2021.

5.7 Practice educators must undertake regular training which is appropriate to their role, learners' needs and the delivery of the learning outcomes of the programme.

Condition: The education provider must demonstrate how they record the training practice educators have undertaken, so the practice educators are appropriately prepared to support learning and assess learners effectively.

Reason: The visitors were made aware from the SETs mapping document that the education provider offers initial training and updates for practice educators. The visitors were informed in the meeting with the programme team that the education provider is in the process of creating a new system, which would have the potential to let the education provider record the training practice educators have completed. However, the visitors understood, and the programme team confirmed, that there is no system at present for the education provider to see the training records – initial and updates - practice educators have completed. The visitors therefore considered the education provider currently has no knowledge of who has done initial training and any updates, to ensure practice educators are prepared to support and assess learners. We expect that all new practice educators are trained and that this is followed up with regular refresher training and support. The visitors therefore require further information about how the education provider takes responsibility for recording the details of the training and updates practice educators have completed.

Section 5: Visitors' recommendation

Considering the education provider's response to the conditions set out in section 4, the visitors are satisfied that the conditions are met and recommend that the programme(s) are approved.

This report, including the recommendation of the visitors, will be considered at the 27 April 2021 meeting of the ETC. Following this meeting, this report should be read alongside the ETC's decision notice, which are available on our website.



HCPC approval process report

| Education provider | Teesside University | |
|----------------------|--|--|
| Name of programme(s) | BSc (Hons) Physiotherapy (Apprenticeship), Full time | |
| | BSc (Hons) Occupational Therapy (Apprenticeship), Full | |
| | time | |
| Approval visit date | 10-11 March 2021 | |
| Case reference | CAS-16777-W5W2L2 | |

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Executive Summary

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The following is a report on the approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards of education and training (referred to through this report as 'our standards'). The report details the process itself, the evidence considered, and recommendations made regarding programme approval.

Section 1: Our regulatory approach

Our standards

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Programmes are normally <u>approved on an open-ended basis</u>, subject to satisfactory engagement with our monitoring processes. Programmes we have approved are listed <u>on our website</u>.

How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint <u>partner visitors</u> to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee meets in public on a regular basis and their decisions are available to view on our website.

HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

| Anthony Power | Physiotherapist |
|-------------------|------------------------|
| Angela Ariu | Occupational therapist |
| Temilolu Odunaike | HCPC executive |

Other groups involved in the virtual approval visit

There were other groups involved with the approval process as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

| Tim Thompson | Independent chair (supplied by the education provider) | Teesside University |
|----------------|--|---------------------|
| Andrea Joyce | Secretary (supplied by the education provider) | Teesside University |
| Debbie Osborne | University Panel member | Teesside University |
| Dawn Westwood | University Panel member | Teesside University |
| Jackie England | University Panel member | Teesside University |
| lain Baird | University Panel member | Teesside University |

| Lisa McKeown | University Panel member | Teesside University |
|------------------|-------------------------|-----------------------------|
| Nick Pollard | External Panel member | Sheffield Hallam University |
| Philip Howard | External Panel member | External Practitioner |
| | | (Physiotherapy) |
| Beverley Hingley | External Panel member | External Practitioner |
| | | (Occupational Therapy) |
| Debbie Smith | Service User/carer | Teesside University |
| | representative | |
| Nina Paterson | Professional body | The Chartered Society of |
| | representative | Physiotherapy |
| | (Physiotherapy) | |
| Reena Patel | Professional body | The Chartered Society of |
| | representative | Physiotherapy |
| | (Physiotherapy) | |
| Dougie Lauchlan | Professional body | The Chartered Society of |
| | representative | Physiotherapy |
| | (Physiotherapy) | |
| Karen Newberry | Professional body | Royal College of |
| | representative | Occupational Therapists |
| | (Occupational Therapy) | |
| Caroline Grant | Professional body | Royal College of |
| | representative | Occupational Therapists |
| | (Occupational Therapy) | |
| Patricia McClure | Professional body | Royal College of |
| | representative | Occupational Therapists |
| | (Occupational Therapy) | |
| Emma Furber | Observer | Teesside University |

Section 2: Programme details

| Programme name | BSc (Hons) Physiotherapy (Apprenticeship) |
|----------------------|---|
| Mode of study | FT (Full time) |
| Profession | Physiotherapist |
| First intake | 01 September 2021 |
| Maximum learner | Up to 25 |
| cohort | |
| Intakes per year | 1 |
| Assessment reference | APP02304 |

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meet our standards for the first time.

| Programme name | BSc (Hons) Occupational Therapy (Apprenticeship) |
|----------------------|--|
| Mode of study | FT (Full time) |
| Profession | Occupational therapist |
| First intake | 01 September 2021 |
| Maximum learner | Up to 25 |
| cohort | |
| Intakes per year | 1 |
| Assessment reference | APP02305 |

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meet our standards for the first time.

Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

| Type of evidence | Submitted | Comments |
|---|-----------------|--|
| Completed education standards mapping document | Yes | |
| Information about the programme, including relevant policies and procedures, and contractual agreements | Yes | |
| Descriptions of how the programme delivers and assesses learning | Yes | |
| Proficiency standards mapping | Yes | |
| Information provided to applicants and learners | Yes | |
| Information for those involved with practice-based learning | Yes | |
| Information that shows how staff resources are sufficient for the delivery of the programme | Yes | |
| Internal quality monitoring documentation | Not Required | Only requested if the programme (or a previous version) is currently running |

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

| Group | Met | Comments |
|---|-----|--|
| Learners | Yes | |
| Service users and carers (and / or their representatives) | Yes | |
| Facilities and resources | N/A | As the visit was carried out virtually, the facilities and resources were covered in discussions and the documentary submission. |
| Senior staff | Yes | |
| Practice educators | Yes | |
| Programme team | Yes | |

Section 4: Outcome from first review

Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 21 April 2021.

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

Condition: The education provider must ensure that appropriate information is available about the employment status of a learner, should they be unsuccessful on the programmes, to allow them to make an informed choice about taking up a place.

Reason: The visitors were able to view information made available to applicants regarding the programmes, both on the education provider's website and in the programme documentation. From discussions at the visit, the visitors understood that the education provider's apprenticeship manager would have regular face-to-face contacts with applicants to provide them with information that would assist them in deciding about the programmes. However, the visitors noted that there was no

information provided about what would happen to the employment status of the learners should they be unsuccessful on the programmes. Although the apprenticeship manager explained that this would be covered during face-to-face discussions with the applicants, the visitors considered that such information should be documented and made available to potential applicants to assist their decision-making about the programmes. As the visitors did not see this information within the documentation, they could not be certain that all potential applicants would have access to the information they need to make a fully informed decision about taking up a place on the programmes. Therefore, the visitors request that the education provider demonstrate how they would ensure clear and easily accessible information, particularly around possible consequences that being unsuccessful on the programme could have on their employment (if any), is provided to applicants to allow informed decision-making.

4.11 The education provider must identify and communicate to learners the parts of the programme where attendance is mandatory, and must have associated monitoring processes in place.

Condition: The education provider must define the attendance requirement, how this is communicated to learners and the effective system in place to monitor the attendance of learners on the programmes.

Reason: The visitors reviewed a narrative from the programme handbooks explaining that 100 per cent attendance is required for both the academic modules and in practicebased learning. The information in the handbooks showed that learners who do not meet the attendance requirements may be deemed ineligible to take part in the assessment for that particular module or undertake a practice placement and will therefore be unable to progress to the next level of the programmes. However, the visitors noted a lack of clarity around what 100 per cent attendance meant as learners are only required to be present on campus twice a month with the rest of their "off the job" learning being completed independently. At the visit, the visitors heard that currently, all lectures are recorded and that learners must watch them. The programme team explained that there are different software systems that they would use to monitor attendance. For example, they mentioned that Blackboard Collaborate would show if a learner has not accessed any material. In which case, a member of staff would get in touch with the learner to find out the reasons for this. The visitors were also informed that the education provider would accommodate a degree of flexibility around attendance if arranged ahead of time for situations like childcare or work requirements.

For practice-based learning, the visitors noted that the handbook detailed what a learner should do if they are absent, however, there was no information provided about how the education provider would respond in the event of a learner failing below 100 per cent attendance in their practice-based learning.

From the documentary review and discussions at the visit, the visitors were still unclear how the education provider would measure what constitutes 100 per cent attendance both in theory and in practice-based learning or how it would be monitored. Although the education provider explained that they have a central attendance monitoring system, it remained unclear to the visitors what would be the trigger point for a learner not meeting the required attendance or what the consequences would be. The visitors were also unclear about how attendance would be managed and how clearly attendance requirements are communicated to learners. The visitors therefore require

further evidence defining the attendance policy, providing clarity around attendance requirements and how it would be effectively monitored on the programmes.



HCPC approval process report

| Education provider | University of Worcester |
|----------------------|--|
| Name of programme(s) | MSc (Pre-registration) Physiotherapy, Full time accelerated |
| | MSc (Pre-registration) Occupational Therapy, Full time accelerated |
| Approval visit date | 10-11 February 2021 |
| Case reference | CAS-16283-D9V0G4 |

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HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

| Joanne Stead | Occupational therapist |
|----------------|------------------------|
| Carol Rowe | Physiotherapist |
| John Archibald | HCPC executive |

Other groups involved in the virtual approval visit

There were other groups involved with the approval process as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

| Marie Stowell | Independent chair (supplied by the education provider) | University of Worcester |
|-------------------|--|---|
| Teresa Nahajski | Secretary (supplied by the education provider) | University of Worcester |
| Jane Cronin-Davis | External Adviser | Kingston University and St Georges University of London |

| Debbie Thackray | External Adviser and | University of Southampton |
|--------------------|------------------------|---------------------------|
| | Chartered Society of | and Chartered Society of |
| | Physiotherapy | Physiotherapy |
| | representative | |
| Jenny Pinfield | Internal Panel Member | University of Worcester |
| Annette De La Cour | Service User | University of Worcester |
| | Representative | |
| Jack Austin | Student Representative | University of Worcester |
| Nicola Rawlings | Quality Unit | University of Worcester |
| | Representative | |
| Alison Reeves | Observer | University of Worcester |
| Nina Paterson | Professional body | Chartered Society of |
| | representative | Physiotherapy |
| Rachel Wadlow | Professional body | Chartered Society of |
| | representative | Physiotherapy |
| Caroline Grant | Professional body | Royal College of |
| | representative | Occupational Therapists |
| Patricia McClure | Professional body | Royal College of |
| | representative | Occupational Therapists |
| Beth McKay | Professional body | Royal College of |
| | representative | Occupational Therapists |

Section 2: Programme details

| Programme name | MSc (Pre-registration) Physiotherapy |
|------------------------|--------------------------------------|
| Mode of study | FTA (Full time accelerated) |
| Profession | Physiotherapist |
| Proposed first intake | 01 July 2021 |
| Maximum learner cohort | Up to 32 |
| Intakes per year | 1 |
| Assessment reference | APP02286 |

| Programme name | MSc (Pre-registration) Occupational Therapy |
|------------------------|---|
| Mode of study | FTA (Full time accelerated) |
| Profession | Occupational therapist |
| Proposed first intake | 01 July 2021 |
| Maximum learner cohort | Up to 32 |
| Intakes per year | 1 |
| Assessment reference | APP02287 |

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meet our standards for the first time.

Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for certain evidence and information from education providers. The following is a list of

evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

| Type of evidence | Submitted | Comments |
|-------------------------------------|-----------|---------------------------------|
| Completed education standards | Yes | |
| mapping document | | |
| Information about the programme, | Yes | |
| including relevant policies and | | |
| procedures, and contractual | | |
| agreements | | |
| Descriptions of how the programme | Yes | |
| delivers and assesses learning | | |
| Proficiency standards mapping | Yes | |
| Information provided to applicants | Yes | |
| and learners | | |
| Information for those involved with | Yes | |
| practice-based learning | | |
| Information that shows how staff | Yes | |
| resources are sufficient for the | | |
| delivery of the programme | | |
| Internal quality monitoring | No | Only requested if the programme |
| documentation | | (or a previous version) is |
| | | currently running |

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

| Group | Met | Comments |
|---|-----|---|
| Learners | Yes | As the programmes have yet to run, we met with learners from the BSc (Hons) Occupational Therapy and BSc (Hons) Physiotherapy programmes. |
| Service users and carers (and / or their representatives) | No | Since the move to virtual visits, we do not ask to meet with service users and carers. If necessary, we explore areas relating to service users and carers in other, appropriate meetings. However, the visitors did not have any areas to explore with service users and carers. |
| Facilities and resources | No | Since the move to virtual visits, we do not ask for a session about facilities and resources. We explored areas relating to resourcing in other, appropriate meetings. |

| Senior staff | Yes | |
|--------------------|-----|--|
| Practice educators | Yes | |
| Programme team | Yes | |

Section 4: Outcome from first review

Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 25 March 2021.

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

Condition: The education provider must demonstrate the time permanent members of staff spend delivering the programme, plus the use of other educators such as associate lecturers, to ensure the programme can be delivered effectively.

Reason: To evidence this standard, the education provider informed the visitors the course team are suitably qualified and experienced educators who will ensure achievement of the course outcomes. The education provider said both programmes would run in parallel with each other. Four modules are shared modules and will be delivered by experienced academics who may be either occupational therapists, physiotherapists, or from another discipline. Associate lecturers, and other academic staff from the School, support physiotherapy and occupational therapy modules with specialist knowledge in specific area of practice. All permanent staff are members of the Higher Education Academy or are current students of the Postgraduate Certificate in Learning and Teaching in Higher Education (PGCertHE), and will become members on completion of the qualification. Associate lecturers undergo a formal recruitment process to confirm teaching skills and suitability, including their qualifications.

From the information given, the education provider informed the visitors that to ensure the programme will be delivered effectively, two new members of staff were to be recruited to start in July 2021, one new member for September 2021, and one new member for September 2022. The visitors were also provided with information as to the whole time equivalent staff who were employed at the education provider. In the meeting with the senior team, the visitors were made aware that staff teaching on the

MSc programmes also have the option of teaching on the BSc (Hons) Occupational Therapy and BSc (Hons) Physiotherapy programmes.

From the information given, the visitors could not be sure of the time staff spent on delivering the MSc programmes. Therefore, they were unclear whether the resources provided for the programme allow for an appropriate number of staff who are able and equipped to deliver the programme effectively for the proposed number of learners. The visitors were also unclear how much time the MSc staff would be asked to commit to the already approved BSc (Hons) programmes and whether this would impact on their ability to deliver the MSc programmes.

The visitors require more information about the time staff, including staff to be recruited before the programme starts in July, and other educators, such as associate lecturers, spend working on the programme. This is so that the education provider can justify the number of staff they have in place in relation to the practical requirements of the programme, the number of learners, their needs and the learning outcomes to be achieved.

4.9 The programme must ensure that learners are able to learn with, and from, professionals and learners in other relevant professions.

Condition: The education provider must demonstrate how the decisions about designing and delivering interprofessional education (IPE) were made, so learners are prepared to work with other professionals and across professions for the benefit of service users and carers.

Reason: To evidence this standard, the education provider informed the visitors that inter-disciplinary learning is a core feature of both programmes, with shared modules in both years. The visitors were also informed that there is a college-wide inter-disciplinary learning group, which includes members from physiotherapy and occupational therapy, and a strategy for developing and embedding inter-disciplinary learning at the university. All practice-learning modules include opportunities for inter-disciplinary learning where possible.

The visitors were made aware that both programmes would run in parallel with each other. Four modules are shared modules and will be delivered by experienced academics who may be either occupational therapists, physiotherapists, or from another discipline.

The HCPC does not set how a programme should include interprofessional education (IPE), the types of learning activity, the professions involved or length of time. At the visit, the learners informed the visitors that they learned with, and from, learners and professionals from occupational therapy or physiotherapy disciplines as part of shared learning. However, the visitors were aware learners did not have opportunities to do so with, and from, other professions and so the visitors were unclear about how the education provider ensures IPE is as relevant as possible for learners. The education provider must therefore demonstrate how they have made decisions about the design and delivery of IPE so learners are prepared to work with other professionals and across professions for the benefit of service users and carers.