

Approval process quality report

Education provider	University of East London
Name of programme(s)	PG Certificate Independent and Supplementary Prescribing (Part time)
Date Assessment commenced	19 July 2021
Visitor recommendation made	19 January 2022
Case reference	CAS-01053-Z3H6B9

Summary of findings from this assessment

This a report on the approval process undertaken by the HCPC to ensure that the programme detailed in this report meet our standards for prescribing. The report details the process itself, evidence considered, outcomes and recommendations made regarding programme approval.

The outcomes of this process were as follows:

- Further Stage 1 assessment was not required based on the new programme(s) being proposed for delivery.
- The visitors recommended the programme(s) be approved as all programme level standards were met through their Stage 2 assessment.

The Education and Training Committee will now meet to consider the visitors recommendations and make a decision regarding programme approval.

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Section 1: Background information

Who we are

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.

Our standards

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

Our standards are divided into two levels based on their relevance to the institution and programme(s). The following considerations were made when splitting standards between institution and programme level:

- Where accountability best sits, with either the accountable person for the institution or programme
- How the standard is worded, with references to the education provider and processes often best sitting at the institution level, and references to the programme or profession often best sitting at the programme level
- We have preferred seeking assurance at the institution level, to fit with our intention to put the institution at the centre of our quality assurance model.

Our approach to quality assuring education

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

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

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

The approval process

We take a staged approach to quality assurance, as we need to understand practices which will support delivery of all programmes within an institution, prior to assessing the programme level detail. The approval process is formed of two stages:

- Stage 1 – we assess to be assured that institution level standards are met by the institution delivering the proposed programme(s)
- Stage 2 – we assess to be assured that programme level standards are met by each proposed programme

Through the process we will initially review the proposal and then design our assessment based on the issues we find. As such the assessment methods will be different based on the issues which arise in each case.

How we make decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint [partner visitors](#) to design quality assurance assessments, and assess evidence and information relevant to the assessment. Visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation 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 the decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee meets in public on a regular basis and their decisions are available to view [on our website](#).

Section 2: Our assessment

Stage 1 assessment: The institution

Education provider	University of East London
Key contact	David Watkinson

As part of the initiation of the process the education provider indicated that the proposed programme would be part of the University of East London. This institution is well established with HCPC and currently delivers approved programmes in:

- Physiotherapy;
- Occupational Therapy;
- Clinical Psychology;
- Podiatry; and
- Biomedical Science

In previous standards assessments of these programmes, visitors have established the institution level standards are met. The provider has also demonstrated this through ongoing monitoring carried out by the HCPC.

As part of the provider's definition of their institution, they have defined the policies, procedures and processes that apply to the programmes delivered within it. These relate to the institution level standards we set which ensure the following areas are managed effectively:

Admissions	<ul style="list-style-type: none"> • Information for applicants • Assessing English language, character, and health • Prior learning and experience (AP(E)L) • Equality, diversity and inclusion
Governance, leadership and management	<ul style="list-style-type: none"> • Effective programme delivery • Effective staff management • Partnerships, which are managed at the institution level
Quality, monitoring and evaluation	<ul style="list-style-type: none"> • Academic components, including how curricula are kept up to date • Practice components, including the establishment of safe and supporting practice learning environments • Learner involvement • Service user and carer involvement
Learners	<ul style="list-style-type: none"> • Support • Ongoing professional suitability • Learning with and from other learners and professionals (IPL/E) • Equality, diversity and inclusion
Assessment	<ul style="list-style-type: none"> • Objectivity • Progression and achievement • Appeals

Assurance that institution level standards are met

As part of this stage we considered how the proposed programme fit into the named institution by considering any notable changes to the policies, procedures and processes related to the areas above.

We considered how the proposed programmes are assimilated with the management of existing approved programmes in the institution. We determined the proposed programmes would be managed in way that was consistent with the definition of their institution. On this basis, we were satisfied it is appropriate for the programme to sit as part of the University of East London and take assurance the institution level standards will continue to be met by its introduction .

Stage 2 assessment: The programmes

Education provider	University of East London
Accountable person (for the programmes)	David Watkinson
Programme	PG Certificate Independent and Supplementary Prescribing
Mode of study	Part time
Learner numbers	30
Intakes per year	2
Start date	19/09/2022

The education provider was asked to demonstrate how they meet programme level standards for each programme. They supplied information about how each standard was met, including a rationale and links to supporting information via a mapping document.

We also considered other sources of information , intelligence, and data points as noted in the table below:

Performance area	Data point / comparison	Benchmark	Data	Score	Executive comments
Performance indicator	Total intended learner numbers compared to total enrolment numbers	316	262	-0.03	This data point is for all the existing programmes within the institution, for the last academic year. This has resulted in a slightly negative score because the actual total learner numbers is very close to the benchmark value but is lower. This occurred across the physiotherapy, podiatry

					and biomedical science programmes, within this institution. It is worth noting that the actual enrolled numbers is lower than courses are intended.
Performance indicator	Aggregation of percentage not continuing	10.4	12.7	-0.03	We collected this data from the Higher Education Statistics Agency (HESA). The score indicates the education provider is performing slightly below the minimum score.
Performance indicator	Aggregation of percentage in employment / further study	92.2	91	-0.01	We collected this data from the HESA. The score indicates the education provider is very close to the minimum threshold of 0.
Teaching quality	TEF award	N/A	Bronze	-0.07	The data point 'Bronze' is the lowest score in this area. This means the provision of the university is of satisfactory quality.
Learner / graduate satisfaction	NSS overall satisfaction score (Q27)	73.53	72.23	-0.02	We collect this data from the Office for Students (OfS). This score indicates the education provider is performing slightly below the minimum threshold level.
Total				0.85	This overall score is considered a good score as it is close to the maximum score of 1. This indicates the education provider is performing well overall.

Visitors appointed to undertake this assessment

We appointed the following panel to assess the above information against our programme level standards:

Registrant visitors	Alaster Rutherford – Independent prescriber
	Nicholas Haddington – Independent prescriber

Assessment of the proposal

Initial review:

- The visitors reviewed the education provider’s submission and considered their approach to each standard.
- This first review culminated in a virtual HCPC meeting in which the visitors discussed and made decisions around the standards they considered to be met and the areas they required further information around.
- Following the finalisation of areas to explore, the visitors discussed and finalised the most appropriate quality activity to undertake this investigation.

Quality activity one: Email response to questions

We design our assessment to be proportionate and appropriate to the issues identified and to seek input from relevant stakeholders when necessary. We considered it was appropriate and proportionate to consider additional information via an email response to a series of questions.

The themes we explored are as follows

Theme	Reason for email response to questions
Clarity about the mode of delivery and if these modes would differ in their delivery	Within the approval request form, it was noted that Full time and Part time programmes were outlined. Both were due to start at the same time. The Full time programme would be 12 months long with 2 cohorts of 25 learners per year. The Part time programme would be 24 months long with 2 cohorts of 10 learners per year. The visitors sought confirmation that the institution was seeking approval for two programmes, and if so, how they differed in their delivery. The visitors also recognised that understanding the number of programmes, and therefore the number of learners each year, would assist them in their discussions about whether there was an appropriate number of appropriately qualified and experienced staff involved. From an HCPC perspective, it was important to clarify this to ensure our records accurately reflected the programme(s) seeking approval.
Ensuring there are adequate, experienced and qualified staff to support learners on this programme.	The visitors received a number of curriculum vitae’s (CVs) within the initial submission. From these the visitors noted the range of qualifications and experience outlined. However, they noted from this that few of the individuals appeared to be independent prescribers or have the experience of teaching such a programme. As such, from the CVs, and the rest of the submission, they were unable to determine whether how these individuals would be involved in the prescribing programme(s). Therefore the visitors were unclear as to which staff would teach on, assess, or contribute towards, the proposed programme(s). This included pastoral learner support and leadership of the programme(s). In addition, the visitors could not gather, the proportion of time staff will dedicate to the proposed programme(s), what they will be teaching nor any further roles / responsibilities. As part of the overall staffing structure, the visitors were also unclear about the

	<p>process in place which would ensure an appropriately qualified and experienced programme leader would be appointed.</p>
<p>Ensuring there are adequate and experienced practice educators, within the practice-based learning setting for this programme.</p>	<p>The visitors could not locate information regarding the process for appointing Designated Prescribing Practitioners (DPP) within the submission. This included information on how the education provider determines a DPPs' suitability in terms of qualifications and experience. Additionally, visitors were also unable to locate information regarding the necessary programme specific training for the DPPs and asked for further information regarding this.</p>
<p>How applicants are made aware of the selection and entry criteria, as part of the admissions process.</p>	<p>The visitors noted the Validation Document as part of the submission. This included the majority of the information / evidence for the programme(s). This document appeared to be an internal document put together for this submission. Therefore the visitors were unclear about the included entry requirements, admissions information and process, will be made available to potential applicants going forward.</p> <p>Additionally, visitors also sought clarity about one of the bullet points within the Validation Document which outlined "Be HCPC registered under the title, Physiotherapist/Podiatrist for the past 3 years". This suggested to the visitors that only registrants from these professions could apply to the programme(s). As such, visitors wanted to know if this proposed programme(s) were available to other appropriate HCPC registrants too.</p>
<p>How the learning outcomes demonstrate learners meet the standards in the Competency Framework for all Prescribers</p>	<p>From reviewing the initial mapping document, which indicated which competence in the framework every learning outcome was matched to, the visitors noted that some standards appeared not to match. For example, competency 1.6 (Understands the condition(s) being treated, their natural progression and how to assess their severity, deterioration and anticipated response to treatment).</p> <p>In the mapping document, the visitors were referred to "LO5". Referring to the Validation Document, the visitors noted the Module Specification in Appendix 1. This stated Learning Outcome 5 was "Apply patient centred, and population centred practice in relation to the use of or not, of prescribed medicines". From this, the visitors were unable to clearly identify how competency 1.6 would be covered by Learning Outcome 5.</p> <p>The visitors also noted that competency/learning outcome mapping is just one example out of a list of concerns, and that the mapping in totality was reviewed and revised in response to the comments and feedback. Visitors also note that there will be variances in the mapping between institutions and that their concern at the first juncture was that there was imprecise and illogical mapping, which was revised satisfactorily by the institution.</p>

How the education provider ensures learners understand and are able to meet the expectations of professional behaviour in prescribing practice, including the standards of conduct, performance and ethics (SCPEs).	<p>From reviewing the Validation Document, the visitors noted there was no reference to the SCPEs within the document. The visitors were unable to locate information about the SCPEs elsewhere within the submission. As such, they queried how learners will be made aware of the relevance and application of the SCPEs in prescribing practice.</p> <p>As the visitors were unable to identify reference to the SCPEs, they could not gather how the learning outcomes ensure assessments allow learners to demonstrate they are able to meet the expectations of professional behaviour, including the SCPEs.</p>
The range of practice-based learning will be provided to learners during practice-based learning.	Within the initial submission, the visitors noted that learners would undertake 85 hours of practice-based learning. However, they were unsure what range of activities or placements will be undertaken by learners within their practice-based learning. As such, they wanted to know more about the range of activities which contributed to the clinical practice and how this will ensure learners are able to meet the standards set out in the Competency Framework for all Prescribers.
The assessment strategy and methods applicable to the learning outcomes	From the validation document, the visitors noted the details relating to the assessment strategy and methods for the modules. However, they required further clarity to understand the pass marks and how they were to be calculated when some components were pass / fail and others numeric based marking. The visitors also required information about which assessments were compulsory.
Ensuring assessment requirements clearly define progression requirements on this programme.	Visitors noted that general progression requirements were set out, however there was no mention of how learners progressed through practice-based learning. As such, visitors wanted to query whether the hours in practice-based learning were a compulsory assessment element and how is this made clear to learners.

Quality activity two: Email response to questions

From their review of education provider's response to quality activity one, questions remained regarding two of the themes mentioned above. We considered it remained appropriate and proportionate to consider this additional information via an email response to these themes.

As such, a further quality activity was used to explore the following themes:

Theme	Reason for email response to questions
Ensuring there are adequate, experienced and	In response to quality activity one, the visitors received confirmation of the process used to appoint an appropriately qualified and experienced individual who will be responsible for the overall

<p>qualified staff to support learners on this programme.</p>	<p>programme. The visitors also received confirmation that approval was being sought for only one programme (as outlined earlier in the report).</p> <p>The visitors also reviewed the additional CVs for the Allied Health and Nursing departments. Within the wider response, the visitors did not receive a breakdown, or analysis of, the number of staff involved and who, specifically, would be participating in the associated activities of running a programme. The visitors therefore were unable to determine the headcount, the participation rate (i.e. whole time equivalent (WTE)) and their overall contribution to the programme. As such, the visitors could not determine whether there would be an adequate number of staff to support the number of learners on this proposed programme. Therefore, visitors requested information demonstrating a breakdown regarding the knowledge, skills and experience of staff and the WTE dedicated to this programme.</p>
<p>How the education provider ensures learners understand and are able to understand and meet the expectations of professional behaviour in prescribing practice, including the standards of conduct, performance and ethics.</p>	<p>From reviewing the HCPC UEL response document submitted as part of quality activity one, visitors noted the statement “For AHPs this would require that they are aware of the HCPC’s SCPE this is assessed in practice and via their extended case studies”. The visitors also noted this document outlined that Learning Outcome 2 required learners to “Demonstrate a critical awareness of ethical principles, professional practice standards ...”. Without specific reference to the HCPC SCPEs either in the validation document, module specific learning outcomes or elsewhere in the documentation, the visitors could not determine how learners will be made aware of their obligations to understand and meet the SCPEs. Therefore, the visitors required further evidence to determine how the learning outcomes, along with assessments, will ensure that learners understand and are able to meet the expectations of professional behaviour set out in the SCPEs.</p>

Quality activity three: Virtual meeting and follow up narrative

From their review of education provider’s response to quality activity two, questions remained regarding one of the themes mentioned above. We considered it was appropriate and proportionate to consider this remaining theme via a virtual meeting between the HCPC, visitors and programme team. Following the meeting, the education submitted a narrative to support the discussions within the meeting.

Within this meeting, the education provider confirmed that the start date of the programme had been moved from January 2022 to September 2022.

Theme	Reason for email response to questions
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<p>Ensuring there are adequate, experienced and qualified staff to support learners on this programme.</p>	<p>The visitors met with the programme team to discuss and gain more clarity about the staffing strategy for the programme. Prior to the meeting, questions had been sent to the education provider regarding the visitors remaining queries so they could prepare appropriately. These related to:</p> <ul style="list-style-type: none"> • the experience and qualifications of staff who would be involved in the teaching and assessment of the programme and which subjects these individuals would be teaching: • recruitment plans / timeframes, including any contingency plans if initially unsuccessful: and • the management of any staff overlaps due to the running of two cohorts of 30 learners each academic year. <p>At the meeting, the education provider undertook a presentation which addressed the points above. In subsequent discussions, the visitors were reassured that the education provider comprehended their concerns and could demonstrate how they met the associated standards.</p>
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Summary of visitor findings

A: Admissions

Visitors considered the revised Validation Document and the Programme Application form, clearly outlined the information which would be provided to potential applicants. The visitors recognised that the information was not yet available on the website as this was in development. However, as together the submitted documents clearly described the academic, professional entry and selection criteria, the application process and other requirements for entry to programme, the visitors were confident applicants would receive appropriate and suitable information in order to apply to the programme. On this basis, there were no conditions set in relation to this area of the standards.

B: Programme governance, management and leadership

Through the initial Validation Document and subsequent confirmation of the number of programmes seeking approval and the number of proposed learners, the education provider demonstrated the availability of sufficient and adequate resources. This included digital and physical resources to effectively support learners and delivery of the proposed programme.

Through the presentation at the virtual meeting, the education provider demonstrated the profile of the programme team, along with providing clear information regarding their qualifications and experience. This included discussions regarding their contingency plans to ensure there will be appropriate and sufficient support for learners if the need should arise.

As part of the narrative submitted following the virtual meeting, the visitors received a revised staffing plan, organogram and additional CVs. This provided the information which the visitors had sought through the earlier quality activities and confirmed there was an adequate number of appropriately qualified staff in place at a threshold level for the proposed programme.

On this basis, there were no conditions set in relation to this area of the standards.

C: Programme design and delivery

The visitors received confirmation from the provider that all of the competencies within the Royal Pharmaceutical Society competency Framework for all Prescribers are assessed in the practice setting. This was supported with the provision of the 'IP placement assessment form'. Therefore, the visitors considered the assessment approach is appropriate to assure that learners meet the competencies set out in the Framework for all Prescribers.

Within the second quality activity, the visitors received a revised Validation Document and module descriptor. This clearly outlined the education provider's expectations of learner's professional behaviour, including reference to the standards of conduct, performance and ethics. Additionally, the module descriptor outlined how and when learners would be taught about this, and how and when they would be assessed. On this basis, there were no conditions set in relation to this area of the standards.

D: Practice-based learning

From reviewing the submission and via quality activity one, visitors received evidence which demonstrated where the 85 hours of practice-based learning would be undertaken. This identified the range of practice-based learning and provided reassurance to the visitors that the structure, duration and range of practice-based learning would be appropriate for the learning outcomes. In addition, the visitors were satisfied with how the auditing process will take place to ensure the practice-based learning is of the appropriate quality.

Additionally, in response to quality activity one, the visitors received a placement assessment form within the revised Validation Document. This outlined the process the education provider would use to assure themselves there will be adequate number of practice educators, with the necessary knowledge and experience, to support learners on these programme.

On this basis, there were no conditions set in relation to this area of the standards.

E: Assessment

In the initial submission, the visitors received information about the assessment strategy and methods of assessment for the programme. In the revised Validation Document, clarity was provided about the pass marks and how they were to be calculated when differing assessment methods were used. Also within this document, comprehensive clarity was provided about progression, particularly within practice-based learning.

Within the second quality activity, the visitors received a second revised Validation Document and module descriptor. This clearly outlined the education provider's expectations of learner's professional behaviour, including reference to the standards of conduct, performance and ethics. Additionally, the module descriptor outlined how and when learners would be taught about this, and how and when they would be assessed. As such, visitors were satisfied that standards under assessment were met. On this basis, there were no conditions set in relation to this area of the standards.

Section 3: The visitors' recommendations

Based on these findings the visitors made the following recommendations to the Education and Training Committee:

Programme approval

The programme is recommended for approval, without conditions.

Section 4: Committee decision on approval

- We will record the decision of the Education and Training Committee here following their meeting on 31 March 2022.