

Health Professions Council

Visitors' report

Name of education provider	Staffordshire University and Keele University
Name and titles of programme(s)	Diploma of Higher Education Operating Department Practice (delivered at Staffordshire University and Keele University concurrently)
Mode of delivery (FT/PT)	FT
Date of visit	22 nd – 23 rd May 2007
Proposed date of approval to commence	September 2007
Name of HPC visitors attending (including member type and professional area)	David Bevan, (ODP, Clinician) Paul Brown (Radiographer, Educationalist)
HPC executive officer(s) (in attendance)	Osama Ammar
Joint panel members in attendance (name and delegation):	Dr Mike Hamlyn (Chair), Faculty Director – Learning and Teaching, Faculty of Computing, Engineering and Technology, Staffordshire University Andrea Jones (Secretary), Quality Improvement Officer, Quality Improvement Service, Staffordshire University Christopher Pike (Internal Panel Member), Director of Quality Assurance, Keele University Peter Considine (Internal Panel Member), Senior Lecturer in Strategic Management, Business School, Staffordshire University Peter Grannell (Faculty Representative), Deputy Director of Quality Assuarance, Keele University
	Dawn Holding (Faculty Representative), Faculty Director – Learning and Teaching, Faculty of Health, Staffordshire University

Scope of visit (please tick)

New programme	
Major change to existing programme	
Visit initiated through Annual Monitoring	
New Profession	

Confirmation of meetings held

	Yes	No	N/A
Senior personnel of provider with responsibility for resources for the programme			
Programme team	\boxtimes		
Placements providers and educators	\boxtimes		
Students (current or past as appropriate)	\boxtimes		

Confirmation of facilities inspected

	Yes	No	N/A
Library learning centre	\boxtimes		
IT facilities	\boxtimes	AD.	
Specialist teaching accommodation			

Confirmation that particular requirements/specific instructions (if any) of the Education and Training Committee that have been explored e.g. specific aspects arising from annual monitoring reports.

Requirement (please insert detail)	Yes	No	N/A
1			\boxtimes
2			\boxtimes
3			

Proposed student cohort intake number please state	32 total cohort
	16 Staffordshire (March start)
	16 Keele (September start)



The following summarises the key outcomes of the approval event and provides reasons for the decision.

CONDITIONS

SET 2 Programme admissions

The admission procedures must:

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

Condition: The programme team must redraft and resubmit the programme documentation to remove references to *statutory* registration or regulation. The documentation must also be amended to ensure it is clearly stated that successful completion of the programme leads to eligibility to *apply for* registration.

Reason: In the submitted documentation, there were incorrect references to statutory regulation and registration and an indication that completion of the programme led to eligibility for registration. The Visitors felt students might misunderstand the regulatory framework and process of registration unless these references are corrected.

2.2.2 apply selection and entry criteria, including criminal convictions checks;

Condition: The programme team must redraft and resubmit the programme documentation to clearly articulate the process for monitoring criminal record status throughout the programme.

Reason: In the documentation it is stated students undergo an enhanced CRB check prior to the commencement of the programme but monitoring of criminal record status was not described. In discussion, it was clear a continued self declaration of criminal record status was being implemented, but this was not reflected in the documentation.

2.2.5 apply selection and entry criteria, including accreditation of Prior Learning and other inclusion mechanisms

Condition: The programme team must redraft and resubmit the programme documentation to clearly articulate the process for applying accreditation of prior learning or experience to an applicant to the programme.

Reason: In discussion, the programme team stated the APEL information provided in the documentation would require redrafting to bring it in line with Staffordshire University policy. In order to determine the effectiveness of the changed APEL process, the Visitors require the opportunity to assess the updated document.

SET 3. Programme management and resource standards

3.1 The programme must have a secure place in the education provider's business plan.

Condition: Staffordshire University and Keele University must submit the signed final draft of the Memorandum of Agreement between both institutions.

Reason: The Memorandum of Agreement issued to the panel was unsigned and, in order to effectively determine if the programme has a secure place in the business plan of both Universities, the Visitors felt a signed copy was required.

3.9 Where students participate as patients or clients in practical and clinical teaching appropriate protocols must be used to obtain their consent.

Condition: The programme team must redraft and resubmit the programme documentation to clearly articulate the protocols in place to obtain student consent when participating as a patient or client in practice and in the academic and clinical environment.

Reason: In discussion, it was clear students participated in practice as patients in manual handling teaching. The documentation submitted for approval did not make reference to protocols to obtain consent from students. Accordingly, the Visitors felt the programme team must put in place a relevant process and provide details in the programme documentation.

SET 4. Curriculum Standards

4.2 The programme must reflect the philosophy, values, skills and knowledge base as articulated in the curriculum guidance for the profession.

Condition: The programme team must redraft and resubmit the programme documentation to remove the reference on page 21 of the *Award Handbook* to entry to the HPC Register relying on successful completion of 3000 hours of study.

Reason: The requirement for completion of 3000 hours is a requirement of the College of Operating Department Practitioners for the programme duration and not a requirement of the HPC for entry to the register. Accordingly, the Visitors felt the statement on page 21 of the *Award Handbook* must be amended.

SET 5. Practice placements standards

The practice placement settings must provide

- 5.3.1 a safe environment
- 5.3.2 for safe and effective practice.
- 5.6 The education provider must maintain a thorough and effective system for approving and monitoring all placements.

5.13 The placement providers must have an equal opportunities and anti-discriminatory policy in relation to candidates and students, together with an indication of how this will be implemented and monitored.

Condition: The programme team must redraft and resubmit the programme documentation to include a description of the process for approval and monitoring of placement environments utilised by Staffordshire University and Keele University. The resubmission should include information on how confirmation that practice environments are safe and effective for practice and also ensure placement environments are covered by appropriate equal opportunities and anti-discriminatory policies.

Reason: In discussion it was clear that both Universities operate robust processes for approving and monitoring placement environments. However, neither process was documented in the submission the panel received. Further, in light of the utilisation of private practice environments, the Visitors felt the approval and monitoring process should be clearly documented to include equal opportunities and anti-discriminatory policies in the assessment to ensure students in non-NHS areas received the same level of protection.

- 5.2 There must be an adequate number of appropriately qualified and experienced staff at the placement.
- 5.8.1 Unless other arrangements are agreed, practice placements educators must have relevant qualifications and experience
- 5.8.2 Unless other arrangements are agreed, practice placement educators must be appropriately registered

Condition: The programme team must resubmit amended mentor database reports for Oswestry, Staffordshire, North Staffordshire and Burton hospitals to include all details of qualifications and registration.

Reason: The submitted information the panel received from the mentor database included some omissions in the qualifications and registration of some members of practice staff. The Visitors felt the database must be brought up to date to ensure these mentors were suitable to receive and supervise students.

SET 6. Assessment standards

6.5 There must be effective mechanisms in place to assure appropriate standards in the assessment.

Condition: The programme team must redraft and resubmit the programme documentation to include evidence of the system of moderation of clinical assessment.

Reason: The programme team indicated there were current challenges in ensuring parity in the assessment of clinical practice. It was indicated that steps were being made to ensure a moderation process was in place, which would require the completion and the dissemination of workbooks for each year of the programme.

Date Ver. Dept/Cmte Doc Type 2007-05-31 b APV APV

6.7.5 Assessment regulations clearly specify requirements for the appointment of at least one external examiner from the relevant part of the Register.

Condition: The programme team must redraft and resubmit the programme documentation to include the stipulation that at least one external examiner must be from the appropriate part of the HPC Register.

Reason: The current external examiner for the programme is a from the relevant part of the HPC Register, however, in order to ensure this will always be the case, the Visitors felt the documentation should be amended to include the stipulation on external examiners.

Deadline for conditions to be met: 21st June 2007 Expected date visitors' report submitted to Panel for approval: 5th July 2007 Expected date programme submitted to Panel for approval: 3rd August 2007

RECOMMENDATIONS

SET 5. Practice placements standards

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

Recommendation: The programme team should consider developing and implementing contingency protocols for periods when Theatre Training Supervisors are unavailable to support students.

Reason: With the change in programme structure to introduce block placement patterns, the Visitors recognised increased demand on the time of Theatre Training Supervisors. Accordingly, the Visitors felt the Theatre Training Supervisors and the students would benefit from clear routes of delegation when the Theatre Training Supervisors were unavailable.

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

Recommendation: The programme team should consider providing feedback from the placement audit mechanisms directly to Theatre Managers.

Reason: In discussion with the Theatre Managers, it was suggested submission of the feedback from the educational audit of placements would be very helpful to assess the resource requirements of student supervision and how well they are being met.

Date Ver. Dept/Cmte Doc Type 2007-05-31 b APV APV

COMMENDATIONS

The Visitors commend:

- the collaboration with stakeholders conducted by the programme team. Evidence of a strong consultative process was demonstrated in discussion.
- the evident commitment to the provision and its development from clinical staff at all levels.

The nature and quality of instruction and facilities meets the standards of education and training.

We recommend to the Education and Training Committee of the HPC that they approve this programme, subject to any conditions being met.

Visitors' signatures:

David Bevan

Paul Brown

Date: 23rd May 2007