
Approval process report

The University of Northampton, Physiotherapy, 2023-24

Executive Summary

This is a report of the process to approve physiotherapy programmes at the University of Northampton. This report captures the process we have undertaken to assess the institution and programme(s) against our standards, to ensure those who complete the proposed programme(s) are fit to practice.

We have:

- Reviewed the institution against our institution level standards and found our standards are met in this area
- Reviewed the programme(s) against our programme level standards and found our standards are met in this area following exploration of key themes through quality activities
- Recommended all standards are met, and that the programme(s) should be approved
- Decided that all standards are met, and that the programme(s) are approved

Through this assessment, we have noted:

- The following are areas of best practice:
 - The visitors noted how the programme team worked in partnership with the University's Learning Design team in designing the programmes to ensure constructive alignment. The visitors considered this good practice by the programme team and the institution as a whole.
- The following areas should be referred to another HCPC process for assessment:
 - The education provider noted they are developing a new learner-led physiotherapy clinic. We understood this involves a redesign of their existing podiatry learner-led clinic and is due to be completed in June/July 2025 and commence in the 2025/26 academic year. To understand how the clinic has impacted on the availability and capacity of practice-based learning, we will review this at the education provider's next performance review in 2028/29 academic year.
- The programme(s) meet all the relevant HCPC education standards and therefore should be approved.

Previous consideration	Not applicable. This approval was not referred from another process.
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Decision	The Education and Training Committee (Panel) is asked to decide: <ul style="list-style-type: none">• whether the programme(s) is / are approved• whether issues identified for referral through this review should be reviewed, and if so how
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Next steps

Outline next steps / future case work with the provider:

- The provider's next performance review will be in the 2028-29 academic year.
 - Subject to the Panel's decision, we will undertake further investigations as per section 5
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Section 1: About this assessment

About us

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.

This is a report on the approval process undertaken by the HCPC to ensure that the programme(s) detailed in this report meet our education standards. The report details the process itself, evidence considered, outcomes and recommendations made regarding the programme(s) approval / ongoing approval.

Our standards

We approve education providers 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 regulatory approach

We are flexible, intelligent and data-led in our quality assurance of programme clusters 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; and
- engage at the organisation, profession and programme levels to enhance our ability to assess the impact of risks and issues on HCPC standards.

Providers 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

Institutions and programmes must be approved by us before they can run. The approval process is formed of two stages:

- Stage 1 – we take assurance 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 approval process, we take assurance in a bespoke and flexible way, meaning that we will assess whether providers and programmes meet standards based on what we see, rather than by a one size fits all approach. Our standards are split along institution and programme level lines, and we take assurance at the provider level wherever possible.

This report focuses on the assessment of the self-reflective portfolio and evidence.

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 [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. 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 takes decisions through different levels depending on the routines and impact of the decision, and where appropriate meets in public. Their decisions are available to view [on our website](#).

The assessment panel for this review

We appointed the following panel members to support this review:

Fleur Kitsell	Lead visitor, Physiotherapist
Jo Jackson	Lead visitor, Physiotherapist
Temilolu Odunaike	Education Quality Officer

Section 2: Institution-level assessment

The education provider context

The education provider currently delivers eight HCPC-approved programmes across four professions. It is a higher education institution and has been running HCPC approved programmes since 2002. This includes one post-registration programme for the supplementary prescribing, independent prescribing annotations. The

education provider already runs approved degree apprenticeship programmes across different professions.

The new programmes sit within the Faculty of Health, Education and Society. There are five subject areas within the faculty, one of which is the Social, Therapies and Communities. The new programmes sit directly under this area alongside Occupational Therapy, Public Health and Health & Social programmes.

The education provider engaged with the performance review process in 2023/24 and received the maximum review period of five years. Overall, we determined the education provider is performing well across all areas. There were no issues referred to other processes and their next performance review is in the 2028/29 academic year. The education provider engaged with the approval process in the legacy model of quality assurance in 2020 for a new MSc Physiotherapy (pre-registration), full time programme. We were satisfied there was sufficient evidence to demonstrate our standards were met, and the programme was approved by the Education and Training Committee (ETC) in 2020.

The education provider engaged with the major change process in the legacy model of quality assurance in 2020 about changes to the BSc (Hons) Occupational Therapy - Apprenticeship Route, full time programme. They informed us of their intention to increase the learner cohort by 15 learners per cohort, from the previously approved numbers of 10 learners per cohort. The education provider confirmed current teaching staff and practice educators would be providing the necessary support to accommodate this change. We were satisfied there was sufficient evidence the standards continued to be met, and ETC agreed the programme was to remain approved in 2020.

The education provider engaged with the major change process in 2018 about changes to the Supplementary and Independent Prescribing for Allied Health Professionals, part time programme. They reported they amended the number of learning outcomes for the programme. After considering the education provider's response the ETC agreed the programme was to remain approved in 2019.

The education provider engaged with the programme closure process in the legacy model in 2019 when the level of qualification for paramedics' registration was raised and approval was withdrawn from programmes that were below the threshold.

Practice areas delivered by the education provider

The provider is approved to deliver training in the following professional areas. A detailed list of approved programme awards can be found in [Appendix 1](#) of this report.

	Practice area	Delivery level	Approved since
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Pre-registration	Chiropracist / podiatrist	<input checked="" type="checkbox"/> Undergraduate	<input type="checkbox"/> Postgraduate	2002
	Occupational therapy	<input checked="" type="checkbox"/> Undergraduate	<input type="checkbox"/> Postgraduate	2002
	Paramedic	<input checked="" type="checkbox"/> Undergraduate	<input type="checkbox"/> Postgraduate	2006
	Physiotherapist	<input type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	2015
Post-registration	Independent Prescribing / Supplementary prescribing			2016

Institution performance data

Data is embedded into how we understand performance and risk. We capture data points in relation to provider performance, from a range of sources. We compare provider data points to benchmarks, and use this information to inform our risk based decisions about the approval and ongoing approval of institutions and programmes.

This data is for existing provision at the institution, and does not include the proposed programme(s).

Data Point	Benchmark	Value	Date	Commentary
Learner number capacity	205	235	2024/25	<p>The benchmark figure is data we have captured from previous interactions with the education provider, such as through initial programme approval, and / or through previous performance review assessments. Resources available for the benchmark number of learners was assessed and accepted through these processes. The value figure is the benchmark figure, plus the number of learners the provider is proposing through the new provision.</p> <p>The education provider intends to recruit 30 learners per academic year – 25 on the BSc (Hons) Physiotherapy and 5 on the</p>

				BSc (Hons) Physiotherapy Degree Apprenticeship.
Learner non-continuation	3%	5%	2020-21	<p>This data was sourced from a data delivery. This means the data is a bespoke Higher Education Statistics Agency (HESA) data return, filtered bases on HCPC-related subjects.</p> <p>The data point is above the benchmark, which suggests the provider is performing below sector norms.</p> <p>When compared to the previous year's data point, the education provider's performance has dropped by 1%.</p>
Outcomes for those who complete programmes	92%	91%	2021-22	<p>This data was sourced from a data delivery. This means the data is a bespoke HESA data return, filtered bases on HCPC-related subjects.</p> <p>The data point is below the benchmark, which suggests the provider is performing below sector norms.</p> <p>When compared to the previous year's data point, the education provider's performance dropped by 2%.</p> <p>We did not explore this as we have not identified any concerns within this area and it did not impact on SETs considered.</p>

Teaching Excellence Framework (TEF) award	N/A	Silver	2023	<p>The definition of a Silver award is “Provision is of high quality, and significantly and consistently exceeds the baseline quality threshold expected of UK Higher Education.”</p> <p>We did not explore this data point through this assessment because there is no impact on SETs considered.</p>
Learner satisfaction	78.7%	69.8%	2023	<p>This National Student Survey (NSS) positivity score data was sourced at the subject level. This means the data is for HCPC-related subjects.</p> <p>The data point is below the benchmark, which suggests the provider is performing below sector norms.</p> <p>Following this assessment, we have received the 2024 data and have seen an improvement of 13% when compared to the 2023 data.</p> <p>We recognise that this is a significant improvement from the education provider’s previous performance. We did not explore this because the 2024 data was received following the visitors’ review.</p>
HCPC performance review cycle length		5 years	2023/24	<p>The education provider received the maximum review period of 5 years at their last performance review. Overall, we determined the education provider is performing well across all areas. There were no issues referred to other processes and their next</p>

				performance review will be in the 2028/29 academic year.
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The route through stage 1

Institutions which run HCPC-approved provision have previously demonstrated that they meet institution-level standards. When an existing institution proposes a new programme, we undertake an internal review of whether we need to undertake a full partner-led review against our institution level standards, or whether we can take assurance that the proposed programme(s) aligns with existing provision.

As part of the request to approve the proposed programme(s), the education provider supplied information to show alignment in the following areas.

Admissions

Findings on alignment with existing provision:

- **Information for applicants –**
 - The education provider has an Admissions process and marketing guidelines. There is an education provider approach with regards to open days, school and college liaison teams, admission support and events. Learner support teams help with the admissions process, such as accommodation.
 - The education provider undertakes a full year of marketing and support for applicants before programmes start.
 - Applicants are given information about the programme and careers through all the policies and processes in place. They are also provided with access to social media platforms which have information about the campus and learner life.
 - If applicants meet the entry criteria, they are offered an interview. This allows the programme team and applicant to determine their suitability for the programme. It also allows them to make an informed decision about studying with the education provider.
 - The education provider has an existing Occupational Therapy degree apprenticeship programme to which they are aligning the admissions process for the new degree apprenticeship programme. The programme team works with organisations through stakeholder consultations to identify sources of apprenticeship applications. Employer / client contract will stipulate admissions. The education provider confirmed that the employers they are working in partnership with for the 2025 intake for the degree apprenticeship programme. These are Northampton General Hospital (NGH), East London Foundation Trust (ELFT) and Cambridgeshire and Peterborough NHS Foundation Trust (CPFT).

- This aligns with our understanding of how the education provider runs programmes, including degree apprenticeship programmes.
- We think this as the education provider has indicated there have not been any changes to how the programmes meet this area.
- **Assessing English language, character, and health –**
 - The education provider sets out the English language requirements within the Admissions policy. This applies to all allied health professions (AHP) programmes. These requirements can be found in the Programme Specification, the programme-specific webpage, and the prospectus.
 - Applicants to both routes need to sign an honorary contract on enrolment. They agree to uphold and adhere to the education provider's and professional body's ethical and professional requirements.
 - As part of the Admissions policy AHP applicants are required to undertake a disclosure and barring service (DBS) and occupational health checks. These are to ensure good character and individual health and wellbeing respectively. The placement team and programme team monitor, and check compliance related to these, as well as mandatory training.
 - All requirements are checked throughout the admissions and post-enrolment processes.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area. The procedures in place are required for both new programmes with no alterations required.
- **Prior learning and experience (AP(E)L) –**
 - The Accreditation of Prior Learning (AP(E)L) and Credit Transfer policy is set at institutional level and highlights the requirements and process of transfer of credits. Information also appears in the learner handbook and programme specification document.
 - Applicants meet with the programme lead to discuss AP(E)L options. The programme lead ensures prior learning maps to the current programme learning outcomes. The outcome of this process will determine whether, and at what point on a programme, the applicant will be able to AP(E)L onto.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how both programmes meet this area.
- **Equality, diversity and inclusion (EDI) –**
 - The education provider stated they are committed to providing a learning environment that values equality, diversity, and inclusion.
 - Equality and diversity activity is managed through committees such as Faculty Academic Committee (FAC) and the Access and Participation

Plan implementation group. These committees ensure processes are monitored and are informed by the principles of equality, diversity and inclusion and implemented via formal policies, guidance, and plans. The responsibility of equality and diversity extends beyond the education provider to also include all collaborative partnerships and stakeholders. This applies to both programmes.

- Programmes are committed to providing an inclusive environment from the point of application through to alumni.
- Faculty activities are reflected in the access and participation plan as well as the EDI plan. These are monitored through the faculty executive team and the University Access and Participation lead. This is to ensure action plans are monitored and supported for successful learner progression and completion.
- The programme team collaborate with practice-based learning providers to ensure learners have an equal experience throughout their practice-based learning.
- EDI actions are discussed and problem-solved at the Faculty Placement forum, where all AHP programmes are represented. The Student Experience Committees at faculty and education provider level ensure actions are monitored and addressed.
- This aligns with our understanding of how the education provider runs programmes.
- We think this as the education provider has indicated there have not been any changes to how they meet this area.

Non-alignment requiring further assessment: None.

Management and governance

Findings on alignment with existing provision:

- **Ability to deliver provision to expected threshold level of entry to the Register¹ –**
 - The education provider has a quality assurance process to ensure the standards of awards given are appropriate, learners have suitable opportunities to meet the threshold standards, and the expectations of Professional, Statutory and Regulatory (PSRBs) are met. The education provider's quality assurance process include validations and periodic subject reviews which are overseen by Bodies PSRBs. The education provider's degree outcomes statement, in response to the UK Standing Committees for Quality Assessment, provides assurance they meet its ongoing conditions for registration.
 - The education provider's Quality Assurance Framework monitors, reviews and enhances academic standards and the quality of teaching

¹ This is focused on ensuring providers are able to deliver qualifications at or equivalent to the level(s) in SET 1, as required for the profession(s) proposed

and learning. This is informed by the Quality Assurance Agency for Higher Education (QAA) UK Quality code.

- There are a range of committees, such as Academic Quality and Standards Committee (AQSC), Faculty Academic Committee (FAC) who work to implement the quality assurance framework. There are also processes such as Quality Improvement Plan (QuIP) to ensure the delivery of provision is validated and is maintained at the expected level.
- Quality checks happen through the external examiner. There is a process in place for a response and action plan from the programme team to the external examiner if required. Further feedback is gathered from service user and carer involvement, as well as learner and partner feedback.
- This aligns with our understanding of how the education provider runs programmes, including degree apprenticeships.
- We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Sustainability of provision –**
 - Through the validation process, long-term sustainability is considered, and the budget is set. This considers staffing and resource requirements against the planned curriculum and anticipated learner numbers. Learner numbers and programme viability is considered through business planning with Development Approval Forms (DAF) submitted to the leadership team prior to programme development and approval.
 - The faculty has annual portfolio reviews which evaluate programme's ongoing sustainability. Any recommendations are actioned as required.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Effective programme delivery –**
 - The programmes are managed through the Governance and Management process. This ensures the financial and resource sustainability of each programme is monitored through, for example, annual portfolio reviews.
 - Each Programme Leader and teaching staff are expected to maintain their registration with the HCPC.
 - The Line Management process ensures the person holding full responsibility for the programme is sufficiently qualified and experienced to ensure the quality of the programme required.
 - The programme team collaborates with stakeholders throughout the development and review stages to ensure appropriate and contemporary practice is delivered through the curriculum and the teaching, learning and assessment processes are effective.

- This aligns with our understanding of how the education provider runs programmes.
- We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Effective staff management and development –**
 - A programme’s fitness for purpose is ensured through quality processes. To support elements of this, staff development and continuing professional development (CPD) is ensured to enable staff to remain up to date in their practice and maintain the sustainability and quality of programmes.
 - All academics are expected to engage in CPD appropriate to their programme and are allocated 25 days of scholarly activity.
 - The education provider has an internal CPD programme, which supports academic staff. The Annual Personal Development Review process identifies key objectives based on individual and faculty priorities, with actions to support this. Staff are supported to engage with CPD required to maintain their registration. A process is in place for staff to request and attend both internal and external CPD opportunities.
 - The induction and probation process ensures new staff are supported within the institution. They are set objectives in line with the programme requirements to manage and identify training needs.
 - Programme teams have an in-service training and supervision process to maintain effective staff development.
 - Additional staff development will be provided to support the requirements of apprenticeship provision.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Partnerships, which are managed at the institution level –**
 - Partnerships are evaluated and monitored for fit for purpose through the institutional audit process every two years. Learner, partner, and External Examiner feedback is captured through evaluation mechanisms and action plans are developed from this. The education provider uses the Faculty Escalation process where immediate action needs to be addressed.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how the new programmes meet this area.

Non-alignment requiring further assessment: None.

Quality, monitoring, and evaluation

Findings on alignment with existing provision:

- **Academic quality –**
 - Regular and effective monitoring and evaluation of programmes follow the education provider's quality and standard mechanisms. They are conducted through processes such as External Examiner reporting. They are evaluated through committees such as Academic Quality and Standards Committee (AQSC).
 - Internal scrutiny of External Examiner applications ensure they are appropriately qualified and experienced to ensure the quality of programmes.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how both programmes meet this area.
- **Practice quality, including the establishment of safe and supporting practice learning environments –**
 - The Faculty Escalation process allows learners to raise concerns about the safety and wellbeing of service users. This process is completed with the Practice Escalation process, where all incidents are recorded so they can be monitored. Actions are put in place where required. Governance processes monitor actions at faculty level through the Faculty Placement Committee.
 - The faculty has an audit system for approving and ensuring quality within practice-based learning. All practice-based learning environments are evaluated and monitored through this system. The audit system includes an initial audit of the learning environment. The education provider also uses External Examiner feedback and communication with stakeholders through partnership meetings and placement steering group meetings to ensure quality assurance.
 - The programme team ensure Practice Educator training is provided to all Practice Educators before they supervise their first learner. The training provides them with the knowledge and understanding of quality assurance processes, practice assessment processes and learning outcomes. Practice Educators have access to Pebblepad. This is the system the programme uses for practice assessment information. Practice Educators also have access to MYPAD, where documents and guidance such as the placement handbook are kept.
 - Additional CPD is also offered to Practice Educators by the programme team twice yearly. This training is informed via surveys, discussion at placement forums and feedback from learners. Bespoke new Practice Educator training will be provided to all existing educators to ensure they have the knowledge and understanding of the new programme.
 - Before practice-based learning begins, information is shared between the practice organisation, Practice Educator and the learner in a timely manner, so all parties have adequate information to support and prepare them for practice-based learning.

- This aligns with our understanding of how the education provider runs programmes.
- We think this as the education provider has indicated there have not been any changes to how the new programmes meet this area.
- **Learner involvement –**
 - Learners are involved in the development of the programmes. They co-create new programmes and are involved in amending existing programmes through the Creating Aligned Interactive Educational Resource Opportunities (CAIeRO) process.
 - Ongoing learner involvement includes mid-module evaluations and end of year programme assessment. These highlight areas of satisfaction and areas for development. These are actioned by the programme. Student Voice meetings give the opportunity for learners to work with staff from the programme team on improvements to the programme. There are cross-cohort Student Voice meetings to capture feedback and discuss issues between all cohorts studying a programme.
 - Current learners participate in a buddy system between those in year 1 and year 2 of study. This will be implemented in the new programmes and will start with 'buddies' between the new programmes and the currently approved MSc Physiotherapy (pre-registration) programme.
 - Learners can feedback through the National Student Survey (NSS). Actions are monitored through Quality Improvement plans at programme, faculty, and institution level.
 - This aligns with our understanding of how the education provider runs programmes and applies to both new programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Service user and carer involvement –**
 - Service users and carers are involved throughout the quality assurance process. This includes the development of new and existing programmes through the CAIeRO processes. Involvement includes the delivery of programme sessions, assessment, and the recruitment of staff and learners, being involved in recruitment activities such as interviews.
 - Service users and carers attend quarterly meetings to discuss challenges, share good practice and identify areas for personal development.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how both programmes meet this area.

Non-alignment requiring further assessment: None.

Learners

Findings on alignment with existing provision:

• Support –

- The education provider ensures there are effective services in place to support the wellbeing and learning needs of all learners. For example, Additional Student Support and Inclusion Services Team (ASSIST), who provide disability and additional needs support, mental health and wellbeing support, study assistance, mentoring and advice.
- Applicants are required to undertake an occupational health assessment during the application process. The programme team implement any reasonable adjustments. Learners are advised to share occupational health outcomes with ASSIST to ensure a rounded approach to learner support.
- Personal Tutor sessions are scheduled with learners, to provide personalised support based on the needs of each learner. Support is given at specific points in the programme. Effectiveness of this support is monitored through the Student Voice meetings.
- Other elements of support for learners include:
 - Programme Leader support
 - Student Union support
 - Academic Advisors
 - Pastoral and faith support
- Additionally, the degree apprenticeship programme will have a dedicated academic contact for learner support.
- This aligns with our understanding of how the education provider runs programmes.
- We think this as the education provider has indicated there have not been any changes to how they meet this area.

• Ongoing suitability –

- All learners must also complete an annual self-declaration to ensure their fitness to study and suitability of character to the programme.
- Ongoing suitability is assessed through practice-based learning, using the Common Placement Assessment form, and Practice Educator and service user feedback. Learner's conduct is monitored through ongoing assessment within the programmes taught sessions.
- The learner's role and responsibilities in relation to character, health, and suitability whilst studying is captured through the Honorary Contract all learners must sign.
- The emerging concerns process can be used to raise concerns about a learner's conduct, character, and health. If escalation is required, concerns are considered through the fitness to study and practice processes.
- The degree apprenticeship programme will have an additional employer / learner contract to ensure that responsibilities are being met by all involved. The education provider noted this will be similar to current contracts already used in the Faculty but has been made specific to physiotherapy apprentices.

- This aligns with our understanding of how the education provider runs programmes.
- We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Learning with and from other learners and professionals (IPL/E) –**
 - The Interprofessional Education Strategy outlines the education provider’s approach to IPL/E. Bespoke activities are created following feedback from learners. IPL/E is embedded at all levels throughout programmes. Programmes have shared modules within the curriculum.
 - The IPL/E lead for the faculty evaluates sessions from the perspectives of a learner, tutor and service user for quality improvement and enhancement. Feedback is also requested at programme level through Student Voice meetings and session evaluations.
 - Learning outcomes relating to IPL/E are embedded at all levels, from programme learning outcomes to specific module learning outcomes. Learning outcomes are identified within module specifications. IPL/E takes place on campus as well as in practice-based learning.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area. Both programmes will be integrated into the existing IPL/E provision.
- **Equality, diversity and inclusion –**
 - The Quality Assurance framework monitors all activity to ensure it is informed by the principles of equality, diversity, and inclusion.
 - Programme teams are given the skills and knowledge through EDI training, to ensure all learners have equal opportunity to have a positive learning experience and are supported to progress and complete their programmes.
 - The Business Intelligence Management Information (BIMI) unit collects programme data in relation to protected characteristics. This identifies any disparities between groups of learners, which are addressed through actions and any impact monitored through quality processes.
 - Programme teams encourage learner involvement in professional body representative groups who focus on EDI principles in practice.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how they meet this area.

Non-alignment requiring further assessment: None.

Assessment

Findings on alignment with existing provision:

- **Objectivity –**

- The education provider's Quality Assurance framework ensures assessments provide an objective, fair and reliable measure of learner's progression and achievement. All assessment practices are monitored to ensure objectivity. For example, by internal and external panel members at validation and revalidation events.
- Internal quality assurance mechanisms such as assessment moderation and standardisation meetings monitor the objectivity of the assessment process. This is to ensure learners are supported to achieve module and programme learning outcomes. Within the programme design processes, feedback is gained from multiple stakeholders to ensure assessments are appropriate and effective and to ensure inclusive practice.
- Exam boards monitor learner progress and completion of programmes. This is overseen by External Examiners. Advice offered by External Examiners to enhance the assessment and feedback process for all assessments, including placements, are responded to by programme teams and monitored at faculty level.
- To ensure an objective, reliable and fair measure of learner progression and achievement within practice-based learning, practice educators receive training. During practice-based learning, a Visiting Tutor will meet the Practice Educator and learner to ensure the expectations and marking criteria are being implemented. Assistance can be provided by the Visiting Tutor to ensure there are adequate learning opportunities and action plans for development of the learner in place. Moderation of learner evidence is completed by the Visiting Tutor.
- This aligns with our understanding of how the education provider runs programmes.
- We think this as the education provider has indicated there have not been any changes to how they meet this area. All processes apply to both proposed programmes.
- **Progression and achievement –**
 - The education provider's external and internal quality assurance mechanisms are used to ensure learners' eligibility to apply to the HCPC register.
 - Progression and achievement for learners is supported through the Personal Academic Tutor (PAT) system and the 'My Engagement' application. These record learner engagement and is monitored so any learners who may need some additional support is identified. PATs signpost learners to any of the support mechanisms which may be appropriate. For example, library and learning support.
 - The Student Handbook and Programme Handbook identify the requirements which must be met to enable learners to apply for HCPC registration. Learners are made aware of all supplementary regulations and PSRBs in the Programme Handbook, so they are aware of the requirements for progression and completion.

- The Programme Leader or the Academic Tutor analyse learner data, such as successful module completion, to ensure all required competencies are achieved. The Programme Specification document and the Student Handbooks specify the requirement for progression and achievement throughout the programme. Data such as progression, achievement, engagement, and module evaluations are used to inform the programme team of common themes to be addressed to support progression and completion. The programme team respond to feedback and this data to implement appropriate strategies to support progression and achievement.
- For the degree apprenticeship programme, progression and achievement monitoring will be a key component for discussion and review at tri-partite meetings.
- This aligns with our understanding of how the education provider runs programmes.
- We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Appeals –**
 - The Complaints and Appeals policy allows learners to appeal. These arrangements are in line with the QAA code of practice.
 - Information relating to the process is made available to all learners through the education provider's website and the learner's Northampton integrated learning environment (NILE). Appeals are monitored through the Faculty Academic Committee (FAC) and the Undergraduate Reflective Board.
 - Actions to mitigate and reduce appeals are monitored and reflected upon at these committees. Actions are also monitored by External Examiners to ensure processes are robust.
 - This aligns with our understanding of how the education provider runs programmes.
 - We think this as the education provider has indicated there have not been any changes to how both proposed programmes meet this area.

Non-alignment requiring further assessment: None.

Outcomes from stage 1

We decided to progress to stage 2 of the process without further review through stage 1, due to the clear alignment of the new provision within existing institutional structures, as noted through the previous section

Findings of the assessment panel:

Education and training delivered by this institution is underpinned by the provision of the following key facilities:

- The education provider informed us they expected to have the following staff involved with delivery and management of the programme:
 - Programme team – for example, programme lead for each programme;
 - Senior leadership team – for example, head of subject; and
 - Administrative support – for example, faculty managers.
- There will also be physical resources, including any specialist teaching space, for example, physiotherapy teaching rooms with plinths.
- The education provider will ensure resources to support the programme will be in place for the intended start date of the programme. They stated many resources are already in place, and a timeline is in place for building work to expand existing clinic and teaching space. This is due to be completed in summer 2025.

Risks identified which may impact on performance: None.

Outstanding issues for follow up: None.

Section 3: Programme-level assessment

Programmes considered through this assessment

Programme name	Mode of study	Profession (including modality) / entitlement	Proposed learner number, and frequency	Proposed start date
BSc (Hons) Physiotherapy	FT (Full time)	Physiotherapist	25 learners, 1 cohort	29/09/2025
BSc (Hons) Physiotherapy Integrated Apprenticeship Route	FT (Full time)	Physiotherapist	5 learners, 1 cohort	29/09/2025

Stage 2 assessment – provider submission

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.

Quality themes identified for further exploration

We reviewed the information provided, and worked with the education provider on our understanding of their submission. Based on our understanding, we defined and undertook the following quality assurance activities linked to the quality themes

referenced below. This allowed us to consider whether the education provider met our standards.

We have reported on how the provider meets standards, including the areas below, through the [Findings section](#).

Quality theme 1 – evidence of collaboration with practice education providers

Area for further exploration: The education provider noted that they have quarterly practice education partner meetings held by the programme team, however, there was no evidence provided. For example, there were no meeting notes etc to support the statement. A process of regular meetings between all stakeholders was described in the BSc (Hons) Rationale Document but there was no evidence that these have taken place or how they were effective. Therefore, we requested evidence of the collaboration discussions/meetings with practice education providers.

Quality activities agreed to explore theme further: We explored this area through email clarification and additional evidence. We considered we needed to see the evidence of the process of collaboration and that the narrative would explain how the education provider ensures the process is effective.

Outcomes of exploration: The education provider responded by providing the minutes of their Practice partner steering group meetings and a link to their website where they noted useful information and resources are made available to practice partners. We understood the meetings are held quarterly and the education provider noted effectiveness of the meetings is determined in relation to reviewing, analysing and evaluating all programmes' audit and compliance processes with their practice partners.

In addition, the education provider noted that following their meetings with practice education providers in July and September, a working group had commenced the review of their online system (pebblepad) for online learning and portfolio engagement. They noted the review will explore whether the pebblepad is still the best platform and consider alternatives after which they will decide on the most suitable for different programme teams and educator requirements. We understood practice education providers will be a key part of the stakeholder discussions in this working group.

The education provider added that the team also has representatives at two Allied Health Professions (AHP) councils in the region, facilitating regular discussions on practice-based learning provision, capacity, governance, and quality. These discussions are supported by practice education providers within the councils' workstreams.

The visitors were satisfied that the additional information provided demonstrated effective collaboration between the education provider and the practice education

providers. Therefore, they determined that the quality activity had adequately addressed their concerns.

Quality theme 2 – how the new programmes run alongside the existing provision in relation to practice-based learning demand

Area for further exploration: We noted the University of Northampton (UON) Partnership Agreement is comprehensive and outlines key responsibilities for all involved. The visitors noted this is a standard document used across England but does not give any information about capacity and availability of practice-based learning specific to each provision. The visitors also noted an audit process in place. Reference was made to a clinic space but no detail was provided.

Given that the education provider already offers an MSc Physiotherapy programme the visitors requested to see some commentary about how these three programmes will run alongside each other in relation to practice-based learning demand.

The education provider also noted there are capacity issues in the West Midlands so we considered clear information on how this might impact the new provision was required as we considered other education providers will be using local practice-based learning provision alongside the existing MSc programme.

Quality activities agreed to explore theme further: We decided to explore this through email clarification and additional evidence. We considered these would provide the clarification and supporting evidence required to assure the visitors that this standard was met.

Outcomes of exploration: The education provider referred the visitors to their practice placement strategy and practice placement capacity review which were not previously included in their submission.

The education provider explained that the Physiotherapy team currently has no issues with practice-based learning capacity and can accommodate up to 50 learners per academic year. With an anticipated increase of 30 learners per year, they noted they were proactively exploring new practice education providers who currently do not work with any other higher education institution (HEI). The education provider informed us of their existing podiatry clinic. We understood they are developing a learner-led physiotherapy clinic from the podiatry clinic and advancing long-arm supervision and leadership projects to ensure sufficient practice capacity by the 2026/27 academic year. They noted this timeline allows for continued expansion of practice-based learning opportunities as there will be no practice-based learning in the first year of the programmes.

They explained further that the team avoids requesting practice-based learning in the West Midlands, except for local learners, and maintains strong relationships with providers in Northamptonshire, the Bedford Luton and Milton Keynes (BLMK) area, and the East Midlands.

We understood the proposed clinic space will support sustainable physiotherapy practice-based learning, social impact, and service diversification. Collaborations with local NHS providers aim to reduce waiting lists by treating fewer complex patients in the clinic, leveraging a successful model from their podiatry clinic.

The education provider confirmed they are recruiting only five learners onto the degree apprenticeship programme and as such they do not envisage any impact this could have on the capacity of practice-based learning. From discussions, we understood employers who have demonstrated commitment to provide practice-based learning to the degree apprenticeship learners include Northampton General Hospital (NGH), East London Foundation Trust (ELFT) and Cambridgeshire and Peterborough NHS Foundation Trust (CPFT). The education provider also noted the expansion routes noted above for the direct entry learners would also be utilised for the degree apprenticeship learners. They noted that through conversations with employers at stakeholder consultations, employers have shown confidence in their ability to provide practice-based learning for all learners. We understand that there is an agreement with employers that learners would be rotated around the organisations. If there are situations where this is not possible, they will form part of the education provider's wider practice-based learning allocation process which also includes the learner clinic and existing long arm supervision practice-based learning in care home settings. The education provider noted that they currently have more practice-based learning offers than current learners and are constantly working to increase this further.

The education provider added that dates for the two new programme routes have been confirmed alongside the existing approved MSc Physiotherapy through stakeholder consultations, with practice-based learning scheduled throughout the academic year. The design includes deliberate cross-over between programmes to foster leadership, supervision, and mentoring skills among learners, ensuring continuity of the projects and interventions.

The visitors considered the information provided helpful and that it had addressed their concerns. For example, the information about the clinic and the spreadsheet which illustrated how practice-based learning for all the three programmes will work. Following the quality activity, the visitors had no further concerns.

Quality theme 3 – ensuring practice educators have relevant specialist knowledge and expertise to deliver subject areas

Area for further exploration: The visitors considered the module leads were appropriate for the taught modules. The UON Partnership Agreement outlined key responsibilities for all involved, including the requirement for the practice educators to undertake training for their role. However, the visitors could find no detail of what the training included. The visitors therefore requested an indicative outline of what the practice educator training includes to understand how the education provider ensures their suitability and that they are well equipped to take in teaching and to support learning in the subject areas they are involved in.

Quality activities agreed to explore theme further: We decided to explore this through email clarification and additional evidence. We considered these would provide the clarification and supporting evidence required to assure the visitors that this standard was met.

Outcomes of exploration: The website link to where information and resources for practice educators was provided to the visitors. We noted the link also provides the practice educator training dates as well as their quality assurance processes. The visitors noted examples of sessions covered in the training, for example, 'Theory and Practise in Supervision' and 'Managing the Failing Student and Effective Goal Setting' and considered these helpful. They also noted the education provider's process for gathering feedback from educators on topics they wish to cover in future sessions.

The visitors were satisfied that the quality activity had provided sufficient clarity on how the education provider ensures educators have the relevant specialist knowledge and expertise to deliver subject areas. Therefore, they were satisfied that this standard is met.

Quality theme 4 – ensuring practice-based learning resources are effective at supporting the delivery of the programmes

Area for further exploration: We noted the teaching and learning resources described in the BSc (Hons) Rationale Document were appropriate, as well as the process of them being co-created with appropriate stakeholders, including learners. However, there was no information in the document about how to access resources. The Programme Handbook provided details on how to access information through the Library Services. The Programme Specification document included a section on 'Access to Specialist resources' as well as a section on Support for Learning and other resources available to all learners at the education provider.

We noted there was lack of adequate practice-based learning information which made it difficult for the visitors to confirm if practice-based learning resources also were effective to support the delivery of the programmes.

Quality activities agreed to explore theme further: We decided to explore this through email clarification and additional evidence. We considered these would provide the clarification and supporting evidence required to assure the visitors that this standard was met.

Outcomes of exploration: The education provider explained that in practice-based learning, learners and practice educators use the PebblePad system and each practice-based learning module includes a PebblePad workbook for learners. They explained that the workbook contains all necessary information and resources for the practice-based learning period. It includes the Common Placement Assessment Form (CPAF) marking criteria, supervision templates, reflection templates, and

functionality for learners to upload evidence and self-learning. We understood the resources support learners in achieving the learning outcomes in the CPAF. The education provider explained further that learners receive support and guidance during practice-based learning preparation sessions and from their visiting tutor throughout their practice-based learning. Practice educators receive support through educator training, the MyPad website, and the visiting tutor.

The visitors considered the additional information helpful, demonstrating that there is an effective system in place that ensures both learners and educators have the tools and support needed for successful practice-based learning.

Section 4: Findings

This section details the visitors' findings from their review through stage 2, including any requirements set, and a summary of their overall findings.

Conditions

Conditions are requirements that must be met before providers or programmes can be approved. We set conditions when there is an issue with the education provider's approach to meeting a standard. This may mean that we have evidence that standards are not met at this time, or the education provider's planned approach is not suitable.

The visitors were satisfied that no conditions were required to satisfy them that all standards are met. The visitors' findings, including why no conditions were required, are presented below.

Overall findings on how standards are met

This section provides information summarising the visitors' findings against the programme-level standards. The section also includes a summary of risks, further areas to be followed up, and areas of good practice.

Findings of the assessment panel:

- **SET 1: Level of qualification for entry to the Register** – this standard is covered through institution-level assessment.
- **SET 2: Programme admissions** –
 - Admissions procedures align with the HCPC and the professional body - Chartered Society of Physiotherapy (CSP) standards. Applicants are required to complete Disclosure and Barring Service (DBS) and occupational health clearances and sign a learner honorary contract.
 - English language requirements follow HCPC guidance. For example, where English is not the applicant's first language, they are required to have a certificate showing a minimum overall achievement in the

International English Language Testing System (IELTS) (or equivalent) of 7.0, with no element less than 6.5 in each component. Applicants will be interviewed to further determine their ability to communicate in English.

- For the degree apprenticeship, employers participate in the admissions process for apprentices to ensure candidates meet the programme criteria.
- The visitors were satisfied that the education provider has effective ways of ensuring the admission criteria are appropriate to the level and content of the programmes.
- The visitors therefore determined that the programme level standard within this SET area has been met.
- **SET 3: Programme governance, management and leadership –**
 - Collaboration between the education provider and their practice education providers is through quarterly meetings held between the programme team and the practice education providers. We understood regular meetings are held with groups such as practice-based learning partners, Integrated Care Systems, NHS England, the Midlands regional AHP Faculty group and local AHP Council groups. Employers who have demonstrated commitment include NGH (providing one learner), ELFT (providing two learners) and CPFT (also committing two learners) to the programme. Discussions are ongoing with other organisations who may be interested in partnering with the education provider for future cohorts.
 - As noted in [quality theme 1](#) above, we noted evidence of these meetings and how the education provider determines the effectiveness of their collaboration.
 - The education provider noted that members of the academic staff are responsible for ensuring practice-based learning capacity and that this is monitored on a monthly basis as part of their programme review meetings. They noted the team is developing a learner-led physiotherapy clinic based on the podiatry clinic model to increase capacity for practice-based learning and sustainability of provision.
 - As outlined in [quality theme 2](#) above, further clarification was received on how the education provider would ensure all learners on the new programmes will have access to practice-based learning without negatively impacting on the existing approved programme.
 - Curriculum vitae (CVs) that were submitted demonstrated that staff are adequate and appropriately qualified. Further clarity was sought around the current full-time and part-time staff and planning for additional staff which demonstrated how much of the staff members' time is committed to the programmes and plans for additional staff to cater for future increase in learner numbers.
 - All the teaching staff, including the supporting teams, hold appropriate qualifications and expertise aligned to their teaching area. As detailed [in quality theme 3](#) further information was received on how the

education provider ensures practice educators have the relevant specialist knowledge and expertise to deliver subject areas.

- The education provider described the resources available for teaching and learning on the programmes. They explained that the degree apprenticeship learners have additional resources to support their 'on the job' learning. Through [quality theme 4](#), as detailed above, we received further information on the resources that are available to learners and educators in practice-based learning to ensure they are appropriate to the delivery of the programme.
- The visitors considered there was sufficient evidence through their initial review and quality activity to determine that all standards within this SET area are met.
- Regarding the new physiotherapy learner clinic, we understood the plan is to have this completed by June/July 2025 and for it to commence operating in the 2025/26 academic year. The education provider noted they have adequate time to set this up as the practice-based learning capacity would need increasing in 2027 when the first practice-based learning is scheduled. To ensure this was delivered as anticipated, we will review this at the education provider's next performance review scheduled for 2028/29 academic year.
- **SET 4: Programme design and delivery –**
 - The education provider submitted a comprehensive mapping of learning outcomes to the HCPC standards of proficiency (SOPs), CSP learning and development principles, and apprenticeship requirements. This reassured us that learners who complete the programmes successfully will be able to meet the SOPs for physiotherapists.
 - The learning outcomes were also mapped to the HCPC standards of conduct, performance and ethics (SCPEs). The programme handbooks noted that learners are expected to adhere to the HCPC SCPEs. The visitors noted the SCPEs are well covered within relevant modules.
 - The programme's mission statement is to ensure it enables the learners to develop as reflective critical thinkers for the future. The education provider noted this approach is underpinned by active-blended learning and problem-solving to enhance clinical reasoning, communication, and leadership skills. Through the Programme Handbooks and Programme Specifications, it was clear how the programme will ensure it reflects the philosophy, core values, knowledge and skills of the profession.
 - We noted a regular review of modules and programmes to ensure they remain relevant. Relevance of the curriculum to current practice was stated throughout the documentation. The education provider noted the academic team is given time for scholarly activities to maintain professional competence and engage in continuous professional development (CPD).
 - Through further clarification sought, we understood feedback from practice regarding curriculum structure and learners' preparedness for practice is regularly sought as an agenda item at the practice

placement steering group. The reading list submitted also provided additional evidence of how the education provider ensures the curriculum remains relevant and effective in preparing learners for practice.

- Integration of theory and practice was clearly evident within the module information and the programme specification. The education provider noted that for both programmes, practice-based learning is designed to integrate theory with practice, allowing time for reflection and ongoing personal and professional development.
- The education provider highlighted different teaching and learning methods they use to deliver the learning outcomes. They mentioned their Changemaker Outcomes for Graduate Success (COGS) toolkit is used to scaffold learning outcomes and instil changemaker values in every module. For the apprenticeship route, appropriate learning and teaching methods have been decided based on the mapping of content to potential 'on the job' and 'off the job' opportunities.
- We understood all programme team members are supported by the learning designers at the education provider to storyboard modules and ensure constructive alignment. The visitors considered this as good practice.
- The programmes use active blended learning to encourage learners to actively participate in their learning journey. Reflective practice is emphasised across theoretical modules, practice-based learning modules, and some assessments. Learning outcomes for autonomous and reflective thinking develop progressively throughout the programmes.
- The mapping of the learning outcomes demonstrates that evidence-based practice is integrated into all modules, with additional support for academic study skills and transitioning into level 4 during induction and the first semester. This is clearly demonstrated in modules PHY2006 Exploring Evidence to Inform Practice and PHY3005 Embedding Evidence into Practice.
- The visitors were satisfied that there is sufficient evidence to determine that all standards within this SET area are met.
- **SET 5: Practice-based learning –**
 - Practice-based learning is integrated throughout the programmes, with learning outcomes tailored to the level of study. The education provider noted the programme design allows for the scaffolding of learning and the application of theory to practice, including time for reflection. The full-time route includes a one-week observational practice-based learning for early integration into the physiotherapy profession. Both routes offer additional practice experience opportunities in the voluntary sector through the Changemaker Awards.
 - The education provider noted all learners will complete five practice-based learning opportunities to explore diverse settings and develop skills linked to practice standards. This experience will align with the pillars of physiotherapy practice and help learners to achieve the

learning outcomes and the SOPs. The visitors considered that the information provided in the Practice Educator Handbook along with the fact that the programmes will be using the CSP's Common Placement Assessment Form (CPAF) forms in practice-based learning provides assurance that learners who successfully complete the programme will meet the SOPs.

- The education provider noted they have regular audit process in place to ensure the quality of practice-based learning and the appropriate level of experience of the staff that support learners in practice-based learning. Through the Placement Strategy, we understood the education provider has a practice-based learning database that covers all practice educators and their training completion dates. It contains up-to-date audits and practice-based learning profile forms. It ensures all staff are suitable and provide a supportive environment for learners.
- There is a mandatory initial training session that all practice educators must attend with the education provider before supervising learners. We understood learner feedback is collected after practice-based modules and discussed in 'student voice meetings'. Issues raised through feedback are escalated and an audit is conducted to review the practice-based learning provision. From reviewing the Placement Strategy, we further understood the process that the education provider uses in practice-based learning settings where there is no practice educator that is a physiotherapist. We understood that in such cases the long-arm supervision model is adopted. This refers to when an academic is named as the educator and are linked with a 'named' mentor in the practice area. The academic works with the mentor to deliver the objectives and weekly expectations in practice-based learning.
- The visitors were satisfied that the evidence provided clearly demonstrates that the standards within this SET area are met.
- **SET 6: Assessment –**
 - Within the Programme Handbooks and the Programme Specification, there is clear evidence of how the assessment strategy and design ensures that learners who complete the programmes can meet all the learning outcomes. The education provider noted the assessment strategy is varied and inclusive, designed to be authentic and applicable to physiotherapy practice and the evolving profession.
 - The education provider noted assessments have been designed with the support of their learning and teaching enhancement team to ensure they meet the programme learning outcomes and HCPC's standards of conduct, performance and ethics. The visitors also noted the use of the CSP's CPAF at appropriate levels demonstrating the integration of professional behaviour as a key component of assessment.
 - The education provider noted they use assessment mapping and module storyboarding to ensure that assessment methods align with module learning outcomes, indicative content, and the teaching and

- learning strategy. This helps to ensure the assessment methods are appropriate to and effective at measuring the learning outcomes.
- The visitors are satisfied with the evidence presented and determined that all standards within this SET area have been met.

Risks identified which may impact on performance: None.

Areas of good and best practice identified through this review: The visitors noted how the programme team worked in partnership with the University's Learning Design team to ensure constructive alignment. The visitors considered this good practice by the practice team and the institution as a whole.

Section 5: Referrals

This section summarises any areas which require further follow-up through a separate quality assurance process (the approval, focused review, or performance review process).

Referrals to next scheduled performance review

Development of a new learner-led physiotherapy clinic

Summary of issue: The education provider discussed they are developing a new learner-led physiotherapy clinic. We understood this involves a redesign of their existing podiatry learner-led clinic and is due to be completed in June/July 2025 and commence in the 2025/26 academic year. We will review this at the education provider's next performance review in 2028/29 academic year to understand how the clinic has impacted the availability and capacity of practice-based learning. Reviewing this at the next performance review would provide sufficient time for the education provider to have completed the development of the clinic and evaluate its impact.

Recommendations

We include recommendations when standards are met at or just above threshold level, and where there is a risk to that standard being met in the future. They do not need to be met before programmes can be approved, but they should be considered by education providers when developing their programmes.

The visitors did not set any recommendations.

Section 6: Decision on approval process outcomes

Assessment panel recommendation

Based on the findings detailed in section 4, the visitors recommend to the Education and Training Committee that the programmes should be approved subject to the conditions being met.

Based on the findings detailed in section 4, the visitors recommend to the Education and Training Committee that:

- All standards are met, and therefore the programmes should be approved
- The issues identified for referral through this review should be carried out in accordance with the details contained in section 5 of this report

Education and Training Committee decision

Education and Training Committee considered the assessment panel's recommendations and the findings which support these. The education provider was also provided with the opportunity to submit any observation they had on the conclusions reached.

Based on all information presented to them, the Committee decided that:

- The programmes are approved
- The issues identified for referral through this review should be carried out as outlined in Section 5 above.

Reason for this decision: The Panel accepted the visitors' recommendation that the programme(s) should receive approval.

Appendix 1 – summary report

If the education provider does not provide observations, only this summary report (rather than the whole report) will be provided to the Education and Training Committee (Panel) to enable their decision on approval. The lead visitors confirm this is an accurate summary of their recommendation, and the nature, quality and facilities of the provision.

Education provider	Case reference	Lead visitors	Quality of provision	Facilities provided
The University of Northampton	CAS-01480-F7W7J0	Fleur Kitsell Jo Jackson	<p>Through this assessment, we have noted:</p> <ul style="list-style-type: none"> • The following are areas of best practice: <ul style="list-style-type: none"> ○ The visitors noted how the programme team worked in partnership with the University's Learning Design team in designing the programmes to ensure constructive alignment. The visitors considered this good practice by the programme team and the institution as a whole. 	<p>The education provider informed us they expected to have the following staff involved with delivery and management of the programme:</p> <ul style="list-style-type: none"> • Programme team – for example, programme lead for each programme; • Senior leadership team – for example, head of subject; and • Administrative support – for example, faculty managers. <p>There will also be physical resources, including any specialist teaching space, for example, physiotherapy teaching rooms with plinths.</p>

			<ul style="list-style-type: none">• The following areas should be referred to another HCPC process for assessment:<ul style="list-style-type: none">○ The education provider noted they are developing a new learner-led physiotherapy clinic. We understood this involves a redesign of their existing podiatry learner-led clinic and is due to be completed in June/July 2025 and commence in the 2025/26 academic year. To understand how the clinic has impacted on the availability and capacity of practice-based learning, we will review this at the education provider's next	<p>The education provider will ensure resources to support the programme will be in place for the intended start date of the programme. They stated many resources are already in place, and a timeline is in place for building work to expand existing clinic and teaching space. This will be completed in summer 2025.</p>
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			<p>performance review in 2028/29 academic year.</p> <ul style="list-style-type: none"> The programme(s) meet all the relevant HCPC education standards and therefore should be approved. 	
Programmes				
Programme name			Mode of study	Nature of provision
BSc (Hons) Physiotherapy			Full time	Taught (HEI)
BSc (Hons) Physiotherapy Integrated Apprenticeship Route			Full time	Apprenticeship

Appendix 2 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
BSc (Hons) Podiatry	FT (Full time)	Chiropodist / podiatrist		POM - Administration; POM - sale / supply (CH)	01/01/2002
BSc (Hons) Occupational Therapy	FT (Full time)	Occupational therapist			01/09/2002
BSc (Hons) Occupational Therapy	PT (Part time)	Occupational therapist			01/09/2002
BSc (Hons) Occupational Therapy - Apprenticeship Route	FT (Full time)	Occupational therapist			01/09/2019
FDS Sc Paramedic Science	FT (Full time)	Paramedic			01/09/2009
BSc (Hons) Paramedic Science	FT (Full time)	Paramedic			01/09/2015
MSc Physiotherapy (pre-registration)	FT (Full time)	Physiotherapist			01/01/2021
Supplementary and Independent Prescribing for Allied Health Professionals	PT (Part time)			Supplementary prescribing; Independent prescribing	01/08/2016