# Approval process report

# University of East Anglia, Operating Department Practice, 2023-24

#### **Executive Summary**

This is a report of the process to approve the Operating Department Practice programme at the University of East Anglia. This report captures the process we have undertaken to assess the institution and programme against our standards, to ensure those who complete the proposed programme are fit to practice.

health & care professions council

We have

- Reviewed the institution against our institution level standards and found our standards are met in this area.
- Reviewed the programme 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 should be approved.
- Decided that all standards are met, and that the programme is approved.

Through this assessment, we have noted:

• The programme meets all the relevant HCPC education standards and therefore should be approved.

	Not applicable. This is a new programme the education provider is seeking approval for.
Decision	<ul><li>The Education and Training Committee (Panel) is asked to decide:</li><li>the programme is approved</li></ul>
Next steps	<ul> <li>Outline next steps / future case work with the provider:</li> <li>The provider's next performance review will be in the 2026-27 academic year</li> <li>The programme has been approved and will be delivered by the education provider from February 2025.</li> </ul>

# Included within this report

Section 1: About this assessment	3
About us Our standards	3
Our regulatory approach	
The approval process How we make our decisions	
The assessment panel for this review	4
Section 2: Institution-level assessment	
The education provider context	4
Practice areas delivered by the education provider	
Institution performance data	
The route through stage 1	
Admissions Management and governance	
Quality, monitoring, and evaluation	
Learners	
Outcomes from stage 1	. 17
Section 3: Programme-level assessment	. 17
Programmes considered through this assessment	. 17
Stage 2 assessment – provider submission	
Quality themes identified for further exploration	
Quality theme 1 – ensuring there are an adequate number of experienced sta to deliver the programme over the next couple of years	
Section 4: Findings	
0	
Conditions Overall findings on how standards are met	
•	
Section 5: Referrals	$- \Lambda$
Recommendations	. 24
Recommendations Section 6: Decision on approval process outcomes	. 24
	. 24 . 24
Section 6: Decision on approval process outcomes	. 24 . 24 . 24 . 26

# 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 <u>approved on an open-ended basis</u>, subject to ongoing monitoring. Programmes we have approved are listed <u>on our website</u>.

# 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 <u>partner visitors</u> 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 <u>on our website</u>.

## The assessment panel for this review

Julie Weir	Lead visitor, Operating department practice
Luke Ewart	Lead visitor, Operating department practice
Temilolu Odunaike	Education Quality Officer
Saranjit Binning	Education Quality Officer

We appointed the following panel members to support this review:

# Section 2: Institution-level assessment

#### The education provider context

The education provider currently delivers 13 HCPC-approved programmes across seven professions and including one Independent and Supplementary Prescribing programme. It is a Higher Education provider and has been running HCPC approved programmes since 1992.

The education provider is made up of four faculties and there are several schools within each faculty. The HCPC approved programmes are based in the Faculty of Medicine and Health, which consists of the School of Health Sciences and Norwich Medical School. All their HCPC approved pre-registration programmes are based in the School of Health Sciences. The proposed programme will also be based in this School.

# 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 <u>Appendix 1</u> of this report.

	Practice area	Delivery level		Approved since
	Dietitian	⊠Undergraduate	⊠Postgraduate	2022
	Occupational therapy	⊠Undergraduate	⊠Postgraduate	2001
Pre-	Operating Department Practitioner	⊠Undergraduate	□Postgraduate	2021
registration	Paramedic	⊠Undergraduate	□Postgraduate	2014
	Physiotherapist	⊠Undergraduate	⊠Postgraduate	1997
	Practitioner psychologist	□Undergraduate	⊠Postgraduate	1992
	Speech and language therapist	⊠Undergraduate	⊠Postgraduate	2019
Post- registration	Independent Prescribing / Supplementary prescribing			2014

## 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	Bench- mark	Value	Date	Commentary
Total intended learner numbers compared to total enrolment numbers	950	980	2023/24	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 education provider is proposing through the new provision.
Learners – Aggregation of percentage not continuing	3%	2%	2020-21	<ul> <li>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.</li> <li>The data point is below the benchmark, which suggests the provider is performing above sector norms.</li> <li>When compared to the previous year's data point, the education provider's performance has improved by 1%.</li> <li>We did not explore this data point through this assessment because there was no impact on the SETs considered.</li> </ul>

Graduates – Aggregation of percentage in employment / further study	93%	95%	2020-21	This data was sourced from a data delivery. This means the data is a bespoke HESA data return, filtered bases on HCPC-related subjects. The data point is above the benchmark, which suggests the provider is performing above sector norms. When compared to the previous year's data point, the education provider's performance has dropped by 2%. We did not explore this data point through this assessment because there was no impact on the SETs considered.
Learner positivity score	77.5%	79.9%	2023	This National Student Survey (NSS) positivity score data was sourced at the subject level. This means the data is for HCPC-related subjects. The data point is above the benchmark, which suggests the provider is performing above sector norms. We did not explore this data point through this assessment because there was no impact on the SETs considered.
HCPC performance review cycle length	N/A	2026-27	2022-23	The education provider was given the maximum review period of five years at their last performance review.

# 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 policy which helps to ensure the admissions service is professional and fair, and such that facilitates entry to the institution.
  - In line with education provider's admissions information for apprenticeships, applicants will need to meet their partner organisations conditions of employment in addition to meeting the education provider's minimum entry criteria for the programme.
  - Recognition of prior learning (RPL) will be available on a case-by-case basis. Programme information including entry requirements is available on the education provider's website.
  - Applicants must be of good health and character, which is sufficient to enable safe and effective practice. The assessment of this includes satisfactory Occupational Health (OH) and enhanced criminal record checks (DBS) on entering the programme.
  - This aligns with our understanding of how the institution runs.
  - We think this because the education provider has indicated these will apply to the proposed programme.

# • Assessing English language, character, and health –

- The education provider has English language requirements for all their taught programmes.
- For degree apprenticeships, applicants must meet employer and education provider requirements for English Language and Maths. They must also be cleared to work with vulnerable people by having an enhanced Disclosure and Barring Service (DBS) and Occupational Health clearance, in line with existing regulations. The education provider requires applicants to be of good health and character, which is sufficient to enable safe and effective practice.
- $\circ$  This aligns with our understanding of how the institution runs.
- The education provider has stated that the new programme will follow the same English language, character and heath requirements.
- Prior learning and experience (AP(E)L) -

- The education provider's Recognition of Prior Learning Policy enables applicants and/or current learners to gain recognition for qualifications they have already achieved at other institutions or for the learning they have gained from their experiences, for example in the workplace. It does this by providing exemption from some part(s) of the chosen programme.
- Recognition of prior learning will be available to applicants on a caseby-case basis.
- This aligns with our understanding of how the institution runs.
- The education provider has indicated there will be no changes to how the new programme aligns with institutional policy in this area.
- Equality, diversity and inclusion (EDI) -
  - The education provider has institutional policies that apply to equality, diversity and inclusion. The institutional admissions policy ensures that the application process, how interviews are conducted, working with applicants with additional support needs, are all undertaken in a way that ensures equality, diversity and inclusion. In addition, employer organisation policies will also be applicable.
  - The education provider noted they use a range of quantitative and qualitative methods to ensure they have oversight of full cohort information, such as learner population. The analysis of this data enables them to identify trends and areas that require further development. Some of the insight is obtained from the Office for Students (OfS) access and participation dataset, HESA Key Performance Indicators, and Teaching Excellence Framework (TEF) data.
  - The School of Health Sciences Equality Diversity and Inclusion Committee ensures recruitment and admissions data is regularly reviewed by the EDI committee. This data is used to inform the School's Athena Swan award submission and action planning.
  - $\circ$  This aligns with our understanding of how the institution runs.
  - We think this because the education provider has indicated these policies and processes will apply to new programme in the same way.

## 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 Register<sup>1</sup> –
  - The education provider already delivers an approved BSc (Hons)
     Operating Department Practice degree. The processes applied to this programme, such as the course development process will apply to the

<sup>&</sup>lt;sup>1</sup> 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

proposed programme. This will ensure it is delivered to the expected threshold level of entry to the Register.

- We also understand that the new programme will be delivered online with synchronous and asynchronous teaching and learning activities. The education provider's Centre for Technology Enhanced Learning (CTEL) will oversee the online learning platform to ensure it delivers the provision to expected threshold required for entry to the Register.
- External examiners are appointed and are involved with all assessment processes and regular reviews of the programmes
- $\circ~$  All of these align with our understanding of how the institution runs.
- The education provider has noted these policies and processes will apply to the new programme.

# • Sustainability of provision –

- The education provider has processes in place to ensure sustainability of provision both at institution level and at school level.
- To ensure adequate staffing for all HCPC regulated and other programmes within the School, staffing strategy is overseen by the School of Health Sciences Appointments Committee. The Committee meets every six weeks throughout each academic year and reports to the School of Health Sciences Executive Committee.
- The Appointments Committee works initially to the education provider's benchmark staff to student ratio (SSR) of 1:18. However, where professional bodies recommended or stipulate a maximum staff to student ratio or separate, subject specific expertise requirements, these are taken into consideration accordingly.
- There is support provided from the Senior Management Team within the Faculty.
- For all HCPC regulated and other programmes within the School of Health Sciences, there are partnership agreements between the education provider and several local Trusts and regional practice placement providers. Partnership arrangements with Private, Voluntary and Independent sector partners are also in place.
- This aligns with our understanding of how the institution runs.
- The education provider has noted that the new programme will also benefit from the above processes.

# • Effective programme delivery –

- The education provider has noted their internal institutional processes support all programmes. They noted a support system in place for programme management, delivery and support and a dedicated Apprenticeship team. Additional resources for online support and module content delivery are also in place.
- For all programmes within the School of Health Sciences, clear role descriptions and criteria are published and circulated with expressions of interest when programme lead roles are advertised.
- For all HCPC regulated and other programmes within the School of Health Sciences programme leads are appointed and selected based

on being appropriately experienced, qualified and are a registered professional with the HCPC for pre-registration programmes.

- Professional leads focus on keeping up to date on Professional, Statutory and Regulatory Body (PSRB) and specific requirements associated with the relevant professional discipline. This helps to provide the leadership and developmental support and empowerment of staff associated with the relevant programme(s) /provision.
   Professional leads are also responsible for the leadership and coordination of the education provision related to the relevant profession. This ensures the programme remains current and fit for purpose and supports employability demands within the workforce.
- This aligns with our understanding of how the institution runs.
- We think this because the education provider has noted the new programme will follow the same approach.
- Effective staff management and development
  - The education provider noted they have established staff governance and line management processes in place to support staff development.
  - The Annual University staff appraisal process enables a regular review of the performance, workload, training needs and career aspirations of each member of staff. This is considered in relation to the requirements of their School, Faculty or Division and to help realise individual's potential.
  - The education provider also noted they have practices that help to support and develop employees such as mentoring and on-the-job feedback from line managers. The annual review process is used to reward progress where an employee is doing well; and the Capability process to help where an employee may be struggling.
  - As part of the terms and conditions of appointment, all academic staff are required to undertake the Post Graduate Certificate in Higher Education Practice or Masters in Higher Education. For practitioners, there is also the option for them to complete the Masters in Clinical Education if they do not currently hold a requisite teaching qualification.
  - The Higher Education Academy (HEA) Fellowships Scheme is an institutional policy. The policy sets out the procedure for peer observation of teaching which is mandated. This policy is relevant for all staff roles which involve teaching. Schools are able to determine the frequency and details of their own peer observation of teaching schemes, subject to the minimum requirements of the policy.
  - $\circ$  This aligns with our understanding of how the institution runs.
  - We think this because the education provider has noted the policies and processes will apply to new programme.
- Partnerships, which are managed at the institution level -
  - The education provider has a centralised Academic Partnerships Team. This is led by a Head of Partnerships working closely with the Associate Pro Vice Chancellor for Partnerships and Apprenticeships to ensure the quality of all academic partnerships. The team leads,

monitors and oversees all aspects of the quality assurance of partnership provision.

- The School of Health Sciences has developed link lecturer/visiting tutor role to maintain and develop education/practice links in order to facilitate an effective practice-based learning.
- For all HCPC regulated programmes within the School, the education provider has developed an educational audit process and tool collaboratively with practice providers in the region. It is based on a continuous up-dating process augmented by bi-annual quality monitoring and exceptional reporting checks. All new practice-based learning/providers are assessed, evaluated, and approved prior to learners going on practice-based learning.
- The education provider has a dedicated resource website with policies, guidance and training for all HCPC and other programmes within the School of Health Sciences.
- $\circ$  This aligns with our understanding of how the institution runs.
- We think this as the education provider has noted the new programme will also benefit from all these policies and processes.

## Non-alignment requiring further assessment: None.

## Quality, monitoring, and evaluation

# Findings on alignment with existing provision:

- Academic quality
  - The education provider has an Internal Quality Assurance Policy and Procedures which is a set of formalised processes surrounding module and programme review.
  - There is a Learning and Teaching Committee (LTC) who oversees the annual monitoring and regular reviews of taught provision on behalf of Senate. These processes have to comply with the Office for Students (OfS) Conditions B of registration and the Expectations and Core Practices of the Quality Assurance Agency (QAA) Quality Code for Higher Education. The processes also enable the education provider to assure their Council that it is monitoring quality and standards appropriately such that Council can provide assurances to the OfS.
  - A Mid module review is conducted each academic year with learners for all modules. End of Semester Surveys are also delivered to learners at the end of each semester as appropriate within their programme structure.
  - The Quality Review and Evaluation Framework (QREF) Review and QREF Panels ensure programme and module enhancements arising from quality assurance activity are incorporated into programme and module update processes.
  - For the School of Health Sciences external examiner reports are reviewed and scrutinised by the School, Chair of relevant Examination Board and the Faculty Learning Teaching and Quality Committee.

Responses to external examiner feedback are provided by the School and the institution.

- All the above policies, processes and procedures will apply to the new programme in the same way.
- Practice quality, including the establishment of safe and supporting practice learning environments –
  - Practice quality is monitored through placement audits. Existing institutional clinical placement audit policies will be applied.
  - The Student Whistleblowing Policy enables learners to raise a concern with the education provider and supports them with resolving the issue.
  - For all HCPC regulated and other programmes within the School of Health Sciences the raising concerns policy informs learners of the process for raising a concern when they have any issue that they feel adversely affects service users in their care. In addition, School of Health Sciences learners can also raise a concern about the practice learning environment that may be impacting on their ability to engage in their practice-based learning experience.
  - $\circ$  This aligns with our understanding of how the institution runs.
  - We have been reassured that it will apply to the new programme in the same way.

# • Learner involvement –

- Learners have representation via cohort reps and through mid and end of module assessments. In addition, placement evaluations will be used. Learner representatives will be included in programme committee meetings.
- Through feedback forms in teaching and placement, collated feedback is shared termly with tutors for review and feeds directly into curriculum development. Cohort representatives are included in all programme management committees.
- For the School of Health Sciences, the appointed School convenor (School level learner representative) sits on the School Education Committee.
- For all pre-registration programmes within the School of Health Sciences a student representative from each programme sits on the Staff and Student Liaison Committee and provides two-way communication between that group and programme cohort.
- This aligns with our understanding of how the institution runs.
- The education provider has stated that the new programme will equally benefit from these processes.

# • Service user and carer involvement –

 The School of Health Sciences has a Service User Handbook which introduces service user involvement and reminds staff about their responsibilities with regards to this area. Service users are embedded in all aspects of the School of Health Sciences programme development and delivery. Service users and carers are involved in programme design, governance, admissions recruitment and interviews as well as programme accreditation.

- Service users can also provide feedback on the quality of care received from learners via existing feedback pathways and the apprentice practice assessment document.
- This aligns with our understanding of how the institution runs and we understand that service user and carers will be involved in the new programme in the same way.

## Non-alignment requiring further assessment: None.

## Learners

## Findings on alignment with existing provision:

- Support
  - There is an institutional Student Academic Engagement Process which is designed to identify learners experiencing difficulties in engaging with their studies. The process aims to help ensure that learners are engaging with their studies as expected, and to provide support and signpost them to appropriate services to help them with this and their wellbeing.
  - The University Extenuating circumstances (Taught Programmes) 2021/22 is an institutional Regulation that recognises a learner may experience some difficulties outside of their control. Such difficulties may affect their ability to study and complete assessments. In these situations learners can access the "extenuating circumstances" (ECs) process which ensures learners are not disadvantaged.
  - The education provider has several other processes and procedures which support learners. Some of these include University Academic Appeals and Complaints Procedures, University Wellbeing Service, University Student Services and University Disability Support.
  - The education provider has noted that these institutional policies will apply to the new programme in the same way.

# • Ongoing suitability –

- The University General Regulations Academic Discipline are institutional regulations that apply to learners throughout their period of registration, including during university breaks and vacations falling within their period of registration. If a learner is alleged to have breached one or more of these Regulations, the education provider will apply the University Disciplinary and Investigative Procedures and Powers, or any other procedures provided in these Regulations.
- Teaching attendance reports ensure sickness/holiday leave is monitored to ensure minimum days on practice-based learning are met.
- Learners are also required to make an annual declaration of good health and good character. For the new programme, these aspects will

be managed by the employer in collaboration with the education provider.

- This aligns with our understanding of how the institution runs.
- We think this as the education provider has stated that the new programme will follow the same processes and procedures.
- Learning with and from other learners and professionals (IPL/E) -
  - IPL/ E is embedded throughout programmes. Through all programmes, learners are supported and encouraged to engage with external opportunities and activities that facilitate their engagement and learning from other professions, for example professional conferences and external training / events.
  - The education provider noted they are committed to interprofessional learning and actively supports this across provision. This includes dedicated IPL teaching sessions with other learners in the Faculty, such as the Inter Professional Learning Conference. There are also shared modules in different professional groups to learn together with, such as Evidence Based Practice year 2. This included the following professions:
    - Operating Department Practice
    - Physiotherapy
    - Speech and Language Therapy
    - Occupational Therapy
    - Paramedics
  - This aligns with our understanding of how the institution runs and the education provider has noted that the new programme will align with the institutional processes in the same way.
- Equality, diversity and inclusion (EDI) -
  - The University's Statement of Policy on Equality for Students and Code of Practice recognises the education provider's legal obligations as an employer, a provider of education and other services, and purchaser of goods, works and services.
  - This Code of Practice is designed to promote equality for all learners and to ensure that individual educational decisions are related only to the relevant merits, abilities and potential of individuals.
  - The purpose of this Code of Practice is to outline practices by which the University's Statement of Policy may be given full effect and to ensure that the education provider fulfils its obligations under current equality legislation.
  - The University Equality and Diversity Code of Practice for Staff demonstrates the steps that will be taken to ensure equality and diversity and to ensure its compliance with the Equality Act 2010. It sets out how the education provider intends to create a working environment and culture where diversity is embraced by all, and staff are treated with dignity and respect and valued in their diversity.
  - The University Student Charter ensures the education provider thoroughly investigates all reports of inappropriate behaviour and

conduct and take appropriate action to address the situation that is proportionate to each case in line with the relevant University Disciplinary, Grievance and Equality & Diversity Code of Practice for Staff.

• These are all institutional policies, and the education provider has noted that the new programme will align with these policies.

## Non-alignment requiring further assessment: None.

## Assessment

## Findings on alignment with existing provision:

- Objectivity -
  - There is an Apprenticeship Quality and Improvement Cycle which feeds into the education provider's quality management and enhancement process. This is further supported by the University's Code of Practice 'Assuring and Enhancing Teaching Quality' policy.
  - The education provider's Teaching and Learning policies provide clear objectives and learning outcomes for modules and learning / teaching sessions. All assessments are provided to the external examiner for review. Marking and moderation is conducted in line with the education provider's policy and reviewed by the external examiner.
  - All assessments include a formative assessment opportunity with feedback to assist with understanding and familiarisation of the summative process. Clear assessment briefs and marking criteria are provided at the start of each module.
  - This aligns with our understanding of how the institution runs. We understand the new programme will follow the same policies and processes.

# • Progression and achievement –

- The institutional Student Academic Engagement Process helps to identify learners at an early stage when they are experiencing difficulties in engaging with their studies and university life. It sets out what learners can expect if the education provider has concerns about their absence from classes, missed coursework submission or other indications that they are not engaging with their studies.
- The Board of Examiners is made up of academics, administrative staff and external examiners and it is responsible for making decisions about learner grades, including progression and awards. Each School has at least one Board of Examiners.
- For all HCPC undergraduate programmes within School of Health Sciences, there is a school level guidance document that explains the process to School of Health Sciences learners.
- For learners on the new programme, progression and achievement will follow existing practice and be upon successful completion of each academic year of study.

- Learners on the new programme will also have an initial needs assessment at the start of their learning to identify appropriate support that may be offered. In addition to their formative and summative assessments, learners will have regular progress review meetings to support their progression.
- All of these align with our understanding of how the institution runs and the new programme will follow the same approach.
- Appeals
  - The University Non-Academic Complaints Regulations 2021/22 are intended to allow the formal raising of concerns by learners undertaking taught or research programmes. These concerns relate to matters which are the responsibility of the education provider, but which do not directly relate to a learner's programme of study, its associated academic facilities nor to an academic result, such as marks.
  - The Academic Appeals Regulations are intended to allow the formal raising of concerns by learners undertaking taught or research programmes regarding their academic results or circumstances relating to them.
  - The education provider noted that the new programme will align with existing institutional appeal process.

## 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.

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

- The existing resources the education provider offers learners will be sufficient to support the delivery of the proposed programme. In addition to this, the education provider have invested in online resources and training for staff and are continuing to develop these resources.
- The proposed programme will be supported by the existing undergraduate programme staff the education provider has. Associate tutors will also be involved with the delivery.

# 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) Operating Department Practice Degree Apprenticeship	PT (Part time)	Operating Department Practitioner	30 learners, 1 cohort per year	03/02/2025

## 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 <u>Findings section</u>.

Quality theme 1 – ensuring there are an adequate number of experienced staff to deliver the programme over the next couple of years

**Area for further exploration**: The education provider submitted staff CVs, which provided an overview of the teams qualifications and experience to deliver the programme. Visitors acknowledged these and noted there were an adequate number of staff to deliver the programme but queried how staffing would be managed with the growth in learner numbers.

They also noted the use of associate tutors, however it was not clear how and what areas these tutors would be involved in within the programme. Additionally, the visitors acknowledged there were some unique features about the programme, which would require involvement from staff who had specific knowledge and expertise. From the information supplied it was not clear when the education provider would appoint additional staff and what the criteria was for this. It was important to understand the criteria, as this applied to specific subject areas being

taught to learners where staff would be required to have specific knowledge and expertise.

Visitors therefore requested further information to understand at what point the education provider would appoint additional staff and involve them with the delivery of the programme and what the criteria would be for this. An explanation was also sought on how staffing levels would be increased as learner numbers grow.

**Quality activities agreed to explore theme further**: We agreed to explore this area further by requesting email clarification from the education provider. We considered the email clarification would be the most effective method to understand how the education provider ensured there would be an adequate number of experienced staff to deliver all areas of the programme.

**Outcomes of exploration:** In their response, the education provider confirmed the associate tutors would be from clinical practice and would be used to support teaching with lecturers, such as the skills-based training. All associate tutors would be required to submit CVs and hold a contract of employment with the education provider, which would be renewed annually. To support them with the role they would be offered training by the education provider and support from the module organisers. To ensure the associate tutors had the appropriate knowledge and experience to support a specific teaching area the module organisers would select them accordingly and they would then be the key link to support them with the preparation of sessions and materials.

With regards to delivering some of the unique areas of the programme, the team will involve other experienced staff from within the faculty. 'For example, when the 2nd Year ODP students are learning about obstetric emergencies, a midwifery lecturer will contribute to the programme with specific sessions on the care of the parturient.' This is just one example, however, due to the School of Health Sciences and the Medical School being based within the same Faculty, the team also have access to a range of experienced and skilled staff, such as surgeons.

The appointment of additional staff in relation to programme growth will be managed through the staffing strategy for the Operating Department Practice Degree Apprenticeship programme. This will be overseen by the executive team who will monitor the increase in learner numbers and ensure staffing levels are maintained within the staff to student ratio that is stipulated by the professional bodies. They noted the current staffing levels to deliver the programme were appropriate, however if learner numbers increased, a request for additional staff would be made in Spring of the previous academic year.

The visitors acknowledged the additional information supplied by the education provider and confirmed they were satisfied the education provider had appropriate processes in place to ensure there were an adequate number of experienced staff to deliver the programme.

# 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
  - The selection and entry criteria are clearly articulated and set at an appropriate level for the proposed programme. The entry criteria is available on the education provider's website and is accessible to applicants.
  - The information available includes academic grade requirements and criminal and health check requirements.
  - The education provider noted all criteria included both academic requirements and professional standards. We understood these aligned with apprenticeship standards for entry and meet the education provider's degree entry requirements.
  - The visitors therefore considered the relevant standard within this SET area met.
- SET 3: Programme governance, management and leadership
  - We acknowledged there was a process for the education provider to collaborate with practice education providers. Through clarification, we noted the education provider had held two stakeholder events where workforce demand, the viability of the programme and design were considered. Stakeholders involved with these events included Queen

Elizabeth Hospital King's Lynn, James Paget University Hopsital, West Suffolk NHS Foundation Trust, Norfolk and Norwich University Hospital NHS Foundation Trust and East Suffolk and North Essex NHS Foundation Trust. It was clear the collaboration between them had been effective and influenced the development and design of the proposed programme. This ensured it was fit for purpose and would enable practice education providers to develop their own workforce and provide them with an alternative career pathway. Currently the education provider have agreements in place with ESNEFT and QEHKL to send apprentices on the proposed programme in February. They are also waiting for JPUH to confirm if they will be in a position to send any apprentices when the programme commences.

- The apprenticeship model supports capacity and availability of practice-based learning with input from employers. This is further supported by the completion of the multi professional audit form, which ensures there is sufficient capacity. It was also noted how the February start date for the apprenticeship had been agreed to maximise capacity and learning opportunities. This demonstrated the education provider had considered this area when developing the programme to address any issues relating to lack of capacity and availability of practice-based learning. This approach ensured the practice-based learning environment did not reach capacity and learners had access to sufficient learning opportunities.
- The staff CVs demonstrated there were an appropriate number of staff who had relevant knowledge and experience to deliver the proposed programme. Alongside this there was also a clear plan that outlined how the team would expand based on the growth of the programme. This was explored further through <u>Quality theme 1</u>.
- Through clarification we noted, due to the blended approach to teaching and the nature of the programme, associate tutors would have limited involvement with the delivery of the programme. Their involvement would be predominantly with the development of learning materials and resources, such as pre-recorded scenarios and skills and simulation sessions. To ensure associate tutors were selected appropriately the education provider used the skills matrix and all associate tutors were required to complete the appointments process.
- There were appropriate resources available to support learners with a range of learning needs. This included the reasonable adjustments process, student services, two disability liaison officers and support for learners with dyslexia.
- Through clarification we noted, other resources learners had access to included the Student Information Zone, Learning and Teaching Service, Library, and Wellbeing service. All these resources supported learners in various ways, for example the library offered learners online guides and drop in sessions and the wellbeing service offered workshops and podcasts to support learners with their wellbeing. In addition to these resources learners have access to a skills and

simulation suite, which enables learners to develop their clinical skills. We acknowledged practice educators did not have access to the same resources learners had access to through the education provider. However, they did have access to the HSC Practice Education webpage, where documentation relating to the curriculum was available and Practice Educator training modules could be accessed. These resources ensured practice educators were prepared appropriately to support learners.

- Through <u>Quality theme 1</u>, visitors received assurances there were an adequate number of experienced staff with relevant skills and knowledge to deliver the proposed programme effectively.
- Learners on the new programme will have the opportunity to respond to external auditor surveys. These will provide them with an opportunity to share their views on experiences with the auditing bodies that monitor the quality of the apprenticeships at the education provider.
- $\circ~$  The visitors therefore considered the relevant standards within this SET area met.

## • SET 4: Programme design and delivery –

- The learning outcomes were mapped against the Standards of Proficiency (SOPs) mapping document and outlined in the module descriptors. The structure of the modules ensured learners met the SOPs.
- Professional behaviours and the Standards of conduct, performance and ethics were embedded throughout the programme to ensure learners understand the expectations. This has been considered in the programme handbook, curriculum documents and module descriptors.
- The philosophy, core values, skills and knowledge base were clearly articulated in the structure and delivery of the programme. This was evidenced through the module outcomes and programme specification.
- There were appropriate mechanisms in place to ensure the curriculum remained relevant to current practice. This included the programme being designed to reflect the HCPC Standards of Proficiency (2022) and CODP curriculum (2018).
- The structure of the programme ensured the integration of theory and practice throughout. This was demonstrated through the programme specification and handbook. It was clear there was a strong practicebased approach, which was supported through the blended approach the education provider was using. Learners were also required to attend campus at various points in the year for sessions.
- Autonomous and reflective thinking were embedded in a range of learning outcomes and assessments, including the practice modules. The programme design ensured learners were able to develop this throughout the programme at each level and reflect on their learning through the practice assessment document (PAD).
- The structure of the curriculum ensures evidence-based practice is embedded throughout the programme across all three years. This is demonstrated through the modules and learning outcomes.

- Through clarification, we noted due to the design of the programme and the blended approach, a significant amount of the programme would be delivered online. This approach would offer flexibility and accommodate adult learners and would therefore be an appropriate teaching method to effectively deliver the programme. To support the delivery of the programme, associate tutors will be used to co-produce and co-deliver the programme and support simulation based learning, however this will be kept to a minimum where possible.
- The visitors therefore considered the relevant standard within this SET area met.

## • SET 5: Practice-based learning -

- Theory and practice are weighted equally across the programme with both the practice and theoretical modules. It was noted how the design and structure of the programme enabled the clear integration of practice-based learning. This was further enhanced by the fact that it was degree apprenticeship programme.
- Through clarification, we noted the data relating to the number of appropriately qualified and experienced staff involved in practice-based learning was captured through the completion of the multiprofessional audit form. This audit form was completed every two years for all areas and data from the form was then monitored and stored on the PebblePad platform. However, the education provider explained they were in the process of implementing a new placement management system, InPlace, which will be the system they use to manage practice educators in future. This platform will also have the facility to hold live audit data, which will allow the education provider and practice educators to ensure there is an adequate number of practice educators to support learners.
- The UEA online platform for practice educators enables practice educators to undertake training. When this training is completed by the practice educators the data is shared with practice education providers and they update records accordingly. This ensures all practice educators have the appropriate skills and knowledge to support learners in practice-based learning. Further support is provided to practice educators by the practice education providers lead practice education facilitator and there is also the link lecturer who represents the education provider and oversees the practice assessment process.
- The programme was split 70/30 to meet the apprenticeship requirements, which would accommodate practice-based learning and academic learning. All learners would be employed on 30 hour a week contracts and would therefore complete 21 hours on the job training and 9 hours off the job training as part of their contract. The structure and duration of practice-based learning therefore demonstrated learners could achieve the learning outcomes and the standards of proficiency. The link with practice-based learning was clearly articulated throughout the documentation.

• The visitors therefore considered the relevant standard within this SET area met.

# • SET 6: Assessment –

- The programme was mapped against the HCPC standards of proficiency and a range of assessment methods were used to ensure learners met these. The evidence clearly demonstrated the assessments linked to the learning outcomes.
- Assessment methods were clear and appropriate and outlined in the module descriptors and learning outcomes. There was evidence of a variety of different assessment methods being used for academic modules and practice-based learning. This enabled learners to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics.
- There were a range of appropriate assessment methods used to measure the learning outcomes across the modules.
- The visitors therefore considered the relevant standard within this SET area met.

## Risks identified which may impact on performance: None.

# 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).

There were no outstanding issues to be referred to another process.

## 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:

• All standards are met, and therefore the programme should be approved

## **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 observations they had on the conclusions reached.

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

- The programme is approved.
- The education provider's next engagement with the performance review process should be in the 2026-27 academic year.

**Reason for this decision:** The Education and Training Committee Panel agreed with the findings of the visitors and were satisfied with the recommendation to approve the programme.

# 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
University of East Anglia	CAS-01533- Q3B2J3	Luke Ewart & Julie Weir	<ul> <li>Through this assessment, we have noted:</li> <li>The programme meets all the relevant HCPC education standards and therefore should be approved.</li> </ul>	<ul> <li>Education and training delivered by this institution is underpinned by the provision of the following key facilities:</li> <li>The existing resources the education provider offers learners will be sufficient to support the delivery of the proposed programme. In addition to this, the education provider have invested in online resources and training for staff and are continuing to develop these resources.</li> <li>The proposed programme will be supported by the existing undergraduate programme staff the education provider has. Associate tutors will also be involved with the delivery.</li> </ul>
Programmes				

Programme name	Mode of study	Nature of provision
BSc (Hons) Operating Department Practice Degree Apprenticeship	PT (Part time)	Apprenticeship

# Appendix 2 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
BSc (Hons) Occupational Therapy	FT (Full time)	Occupational therapist			01/09/2001
BSc (Hons) Occupational Therapy Degree Apprenticeship (Closed to new intakes)	FLX (Flexible)	Occupational therapist			01/09/2019
BSc (Hons) Operating Department Practice	FT (Full time)	Operating department practitioner			01/09/2021
BSc (Hons) Paramedic Science	FT (Full time)	Paramedic			01/09/2014
BSc (Hons) Physiotherapy	FT (Full time)	Physiotherapist			01/09/1997
BSc (Hons) Speech and Language Therapy	FT (Full time)	Speech and language therapist			01/09/2004
Doctorate in Clinical Psychology (ClinPsyD)	FT (Full time)	Practitioner psychologist	Clinical psychologist		01/01/1992
Doctorate in Educational Psychology - EdPsyD	FT (Full time)	Practitioner psychologist	Educational psychologist		01/08/2018
Independent and Supplementary Prescribing for PA, PH and TRad	PT (Part time)			Supplementary prescribing; Independent prescribing	01/03/2019
MSc Dietetics	FTA (Full time accelerated)	Dietitian			01/02/2022
MSc Occupational Therapy (Pre- registration)	FT (Full time)	Occupational therapist			01/02/2005
MSc Physiotherapy	FT (Full time)	Physiotherapist			01/02/2004

MSci Speech and Language Therapy	FT (Full time)	Speech and		01/09/2020
		language		
		therapist		