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## Approval process report

Manchester Metropolitan University, Occupational Therapy, 2023-24

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### Executive Summary

This is a report of the approval process to approve the MSc Pre-registration Occupational Therapy programme at Manchester Metropolitan University. 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.

We have reviewed the programme against our programme level standards and found our standards are met, following exploration of key themes through quality activities.

- Quality activity 1 explored how the education provider will use equality, diversity and inclusion (EDI)-related feedback from learners to drive programme improvement.
- Quality activity 2 explored how the education provider plans to broaden the range of the practice-based learning opportunities available to learners.
- Quality activity 3 explored how the education provider will ensure that there are adequate numbers of suitably qualified and experienced practice educators on the programme.

Through this assessment, we have noted the programme meets all the relevant HCPC education standards and therefore should be approved.

The programme meets all the relevant HCPC education standards and therefore is approved. The education provider's observations were considered in making this decision.

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Previous consideration	N / A as this case did not emerge from a previous process
Decision	The Education and Training Committee (Panel) is asked to decide whether the programme is approved.
Next steps	If the Education and Training Committee (Panel) approves the visitors' recommendation, the programme will be approved and added to the Register.  The education provider will next go through performance review in 2026-27.

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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 detailed in this report meet our education standards. The report details the process itself, evidence considered, outcomes and recommendations made regarding the programme 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:

Jennifer Caldwell	Lead visitor, Occupational therapist
Joanne Stead	Lead visitor, Occupational therapist
Niall Gooch	Education Quality Officer

## **Section 2: Institution-level assessment**

### **The education provider context**

The education provider currently delivers 16 HCPC-approved programmes across 5 professions including 4 Prescribing programmes. It is a Higher Education provider and has been running HCPC approved programmes since 1996.

## 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
<b>Pre-registration</b>	Biomedical scientist	<input checked="" type="checkbox"/> Undergraduate	<input type="checkbox"/> Postgraduate	2007
	Dietitian	<input type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	2022
	Physiotherapist	<input checked="" type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	2003
	Practitioner psychologist	<input type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	2021
	Speech and language therapist	<input checked="" type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	1996
<b>Post-registration</b>	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	Benchmark	Value	Date	Commentary
Total intended learner numbers compared to total enrolment numbers	1321	1421	March 2024	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

				<p>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>Learners – Aggregation of percentage not continuing</p>	<p>3%</p>	<p>3%</p>	<p>2019-20</p>	<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 equal to the benchmark, which suggests the provider’s performance in this area is in line with sector norms.</p> <p>When compared to the previous year’s data point, the education provider’s performance has been maintained.</p> <p>We did not explore this data point through this assessment because the figure did not give any cause for concern.</p>
<p>Graduates – Aggregation of percentage in employment / further study</p>	<p>93%</p>	<p>93%</p>	<p>2020-21</p>	<p>This data was sourced from a data. This means the data is a bespoke HESA data return, filtered bases on HCPC-related subjects.</p> <p>The data point is equal to the benchmark, which suggests</p>

				<p>the provider's performance in this area is in line with sector norms.</p> <p>When compared to the previous year's data point, the education provider's performance has improved by 1%.</p> <p>We did not explore this data point through this assessment because we considered that the data did not give any cause for concern.</p>
Learner satisfaction	77.0%	75.4%	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>We explored this by considering in detail how well learners on the programme would be supported.</p>
HCPC performance review cycle length				<p>The education provider went through performance review in 2021-22 and was granted a five year interval until the next review. They will next undertake the process in 2026-27.</p>

### 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 –**
  - Applicants will be provided with similar information as on the education provider's existing programmes. The relevant webpage sets out the nature of the programme and notes the specific requirements. These include the need for applicants to have a previous relevant undergraduate degree. There are also Open Days and Visit Days available.
  - Potential applicants will have the opportunity to talk to programme staff and to tour the learning and teaching spaces.
  - We consider the standards are met because the education provider have a clearly defined approach to ensuring appropriate information for applicants.
- **Assessing English language, character, and health –**
  - In the approval request form the education provider sets out an approach closely aligned to existing procedures. There are specific tests for the relevant attributes and abilities. Specifically, the education provider referred to their recruitment and admissions policy, which describes how they ensure that all those coming on to the programme are suitable. We know that there is alignment with existing approaches based on information provided and reflection received through the 2021-22 performance review.
  - We consider the standards in this area are met because the education provider have shown that they are able to make appropriate assessments of applicants' suitability for the programme.
- **Prior learning and experience (AP(E)L) –**
  - There is an established mechanism at the education provider for assessing AP(E)L, which they refer to as Recognition of Prior Learning (RPL). Programmes are given significant autonomy in how they approach this area.
  - Individual programmes can choose to not offer AP(E)L at all. This new programme will offer AP(E)L opportunities for certain applicants as necessary and appropriate
  - This is closely aligned with the provider's existing approach, which they additionally reflected on as part of their 2021-22 performance review portfolio. We consider the relevant standards are met because the education provider have shown that they are able to make appropriate arrangements for potential learners who may be suitable for the programme while not meeting the normal academic requirements.

- **Equality, diversity and inclusion (EDI)–**
  - The education provider state that they have an institutional approach to EDI based on a range of relevant policies that specifically address different aspects of inclusion and diversity.
  - Initiatives used to ensure appropriate approaches to EDI include the Inclusive Learning Communities Project and the BAME2 Ambassador Scheme, both of which involve proactive outreach to under-represented groups.

The proposed approach for his programme is therefore closely aligned with the overall institutional approach. We consider the standards in this area are met because the education provider have shown they have clear mechanisms for making the programme as inclusive as possible.

**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 has a large suite of HCPC-approved provision. Although they do not currently have an occupational therapy programme, they have existing undergraduate and postgraduate programmes in a wide range of areas and so are institutionally well-prepared to run an HCPC-approved programme.
  - In their submission the education provider referred to their institutional Regulations for the Academic Awards of the University as a demonstration of having a defined and coherent approach to delivering programmes at Level 7.
  - The education provider has the staff, and the institutional infrastructure and experience, to deliver Level 7 education in occupational therapy. We consider the standards in this area are met because the education provider have shown they have clear mechanisms for making the programme as inclusive as possible.
- **Sustainability of provision –**
  - The education provider is a well-established provider who recently completed performance review and no issues around sustainability were highlighted through that process.
  - The approval request form (ARF) notes that the new programme is part of an institutional strategy to expand the education provider's suite of allied health programmes. This is set out in the Road To 2030 strategy and the Education Strategy, supplied with the ARF. These strategies set out the institutional support for new programmes and the mechanisms by which these programmes will be monitored and reviewed, i.e. through annual reviews and periodic curriculum reviews.

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<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

- The arrangements for maintaining programme sustainability are appropriate. We are confident of this based on the above information and on the recent performance review. We consider the standards in this area are met because the education provider have shown they have clear mechanisms for ensuring institutional oversight of, and support for, new programmes at the education provider.
- **Effective programme delivery –**
  - The education provider has been delivering HCPC-approved programmes for a sustained period of time. This means there is a large amount of institutional experience and expertise available, as well as the facilities to enable effective delivery of the programme. As indicated through the 2021-22 performance review, all programmes at the education provider are expected to make annual reports to ensure their ongoing effectiveness and viability.
  - These annual reports are used to develop action plans for areas where improvements or developments are required, and to provide insight for programme teams on overall programme performance.
  - Considering this, we are confident that the new programme can be delivered effectively and align with existing approaches. We consider the standards in this area are met because the education provider have shown they can ensure programmes are delivered effectively.
- **Effective staff management and development –**
  - Established development and management systems at the education provider will be used for the new programme as well. This assessment is based on the approval request form (ARF), which sets out mechanisms such as the Professional Development Review (PDR) Scheme. The education provider also requires all staff to undertake defined career development and seeks to make permanent rather than short term appointments where possible.
  - We are already familiar with these systems from the education provider's performance review, which took place during the 2021-22 academic year. The visitors considered that performance in this area was good.
  - We consider the standards in this area are met because the education provider have shown they have clear mechanisms for developing and managing their staff.
- **Partnerships, which are managed at the institution level –**
  - The education provider has a Framework for Academic and Collaborative Partnerships which sets out the terms on which they co-operate and liaise with key stakeholders. The approval request form states that, for the new programme, existing relationships will continue within these overall framework. New clinical placements will be developed and monitored through the mechanisms set out in the Framework.
  - We can be satisfied from the information provided and from their recent performance preview (2021-22, with a five year review period recommended) that the mechanisms in place for managing partnerships are strong and appropriate. We consider the standards in this area are met

because the education provider have shown they have clear mechanisms for developing and managing their staff

**Non-alignment requiring further assessment:** None.

### Quality, monitoring, and evaluation

#### **Findings on alignment with existing provision:**

- **Academic quality –**
  - The proposed new programme will follow all the established procedures at the education provider for monitoring and enhancing quality, including the Programme Approval, Review and Amendment Policy. This in line with their established approach.
  - One of the areas addressed through this policy is the pathway through internal approval processes for new provision. The quality of proposed new programmes is considered and arrangements for ongoing monitoring established. The approach set out in the ARF is consistent with our current understanding.
  - We consider the standards in this area are met because the education provider have shown they have clear mechanisms for ensuring and maintaining academic quality. The education provider completed performance review in 2021-22 and the visitors considered performance in this area to be good.
- **Practice quality, including the establishment of safe and supporting practice learning environments –**
  - The education provider participates in the North West Quality Assurance and Enhancement Framework (NWQAEF) to ensure quality of their practice placement settings. The NWQAEF is a set of standards mutually agreed by regional stakeholders and used to maintain and improve the quality of clinical placements. Part of this system is the Practice Assessment Record and Evaluation (PARE) process, which enables the education provider to monitor placements in real time.
  - In the recent performance review, the visitors considered that performance in this area was good. We consider the standards are met because there are clear mechanisms at the education provider for monitoring and developing practice quality.
- **Learner involvement –**
  - Similar mechanisms will be used to gather and implement learner feedback on the new programme as on the existing HCPC-approved provision. The Programme Approval, Review and Amendment Policy (PARAP) has been developed to integrate all implementation of learner feedback and development.
  - Those arrangements have been recently reviewed by the HCPC via performance review and the visitors considered that performance in this area was good. Learners have regular opportunities to feed back, and there is a Course Rep who is part of the programme's structure. The

relevant standards in this area are met because the education provider has clear mechanisms for gathering and making use of learner feedback.

- **Service user and carer involvement –**
  - Individual programmes at the education provider develop their own service user involvement within the framework of an institutional policy. This policy sets out general principles and expectations, including that service users and carers should be treated respectfully and that their involvement be meaningful.
  - The recent performance review considered that use of service users by the education provider was effective and appropriate. Service users take part in programme development, assessment and admissions. There will be regular meetings between the programme team and the service users involved with the programme.
  - We consider the standards in this area to be met, because we have seen good evidence of how service users will be involved with the new programme.

**Non-alignment requiring further assessment:** None.

### Learners

#### **Findings on alignment with existing provision:**

- **Support –**
  - The approval request form (ARF) notes that learners on the new programme will have access to all the normal pathways for support. These include matters relating to study support, finance, and mental health.
  - These arrangements are aligned with the existing arrangements at the provider. We considered these arrangements through the 2021-22 performance review, and determined that performance was good. Learner feedback and satisfaction scores indicated that learners felt involved and listened to.
  - The standards in this area are met, because the education provider has demonstrated that they have clear and effective mechanisms for supporting learners on the new programme.
- **Ongoing suitability –**
  - In the approval request form (ARF), the education provider note their Fitness To Practice policy and their Fitness To Study Policy and Procedure, which between them are used across the HCPC-approved provision to ensure ongoing suitability of learners. If any FTP-related issues do arise, learners are expected to self-report. If the education provider becomes aware of such issues, there is a clear pathway set out for them to consider whether learners can continue with their programme.
  - These arrangements were considered through the 2021-22 performance review and the visitors determined that performance in this areas was good. We consider the relevant standards to be met because the

education provider have laid out clear mechanisms by which they will ensure that their learners continue to be suitable for professional practice.

- **Learning with and from other learners and professionals (IPL/E) –**
  - The approval request form states the arrangements for IPL/E will be aligned with those used on existing programmes, based on the education provider's institution-level Education Strategy for Manchester Metropolitan University.
  - IPL/E will take place through shared learning sessions, through workshops, and in practice-based learning. The education provider's intention is that learners working in multi—disciplinary teams (MDTs) in their placements will constitute IPLE/E.
  - The education provider undertook performance review in 2021-22, and the visitors considered that performance in this area was good. We consider that the relevant standards are met because there is a strong institutional approach to IPL/E which will also be adopted for this programme. The education provider has demonstrated a clear mechanism for ensuring programmes have good IPL/E.
- **Equality, diversity and inclusion –**
  - In the ARF the education provider referred back to the EDI policies cited in the Admissions section. These policies govern the institutional approach to EDI and provide a framework for how the education provider will seek to promote fair and equal participation in programmes.
  - In the 2021-22 performance review, we considered that the education provider's performance was good in this area. This was because they had many different workstreams for promoting EDI. There were mechanisms for ensuring the policies were followed.
  - We consider that the standards in this area are met because the education provider has a clear pathway for promoting inclusion.

**Non-alignment requiring further assessment:** None.

### Assessment

#### **Findings on alignment with existing provision:**

- **Objectivity –**
  - Assessment on the new programme will follow the same policies and approaches as on the existing provision. The key piece of evidence submitted through the ARF is the Verification, Marking and Moderation Policy, which the education applies to all programmes to ensure that assessment is undertaken in a fair and reasonable manner. There is institution-level moderation and checking of assessment, and regular discussions of assessment approaches.
  - In the recent performance review in 2021-22, performance in this area was found to be good. We consider therefore that the relevant standards are met, because the education provider has clear means for ensuring objectivity in assessment on the new programme.

- **Progression and achievement –**
  - Monitoring of learner progress will involve the normal mechanisms in place at the education provider, notably the Taught Postgraduate Assessment Regulations. The education provider’s general approach to assessment was considered through the 2021-22 performance review and found to be effective and appropriate.
  - If there are concerns about the progress or achievement of individual learners, these concerns will be addressed through informal individual meetings, formal meetings and formal written processes. If there are serious issues with particular learners, they will be offered additional support and guidance.
  - We consider the standards are met because the education provider has a clearly defined process for ensuring that learners are progressing and achieving appropriately.
- **Appeals –**
  - Learners will have access to appeals through the normal pathways governed by appropriate policies. The main one of these will be the Procedure for Academic Appeals and Review of Assessment-Related Matters.
  - In the 2021-22 performance review we determined that performance in this area was good. We consider that the relevant standards are met now because learners on the programme will have access to a structured, clear process for appealing their assessments.

**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:

- There is a large skills laboratory available to the programme.
- The programme team are able to book teaching and learning spaces and dedicated time is available for them.
- The education provider also has a wide suite of education software available, with up to date licences. In their submission they note that their virtual learning environment (VLE) has been adapted to ensure accessibility for all.

### **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
MSc Pre-registration Occupational Therapy	FTA (Full time accelerated)	Occupational Therapist	27, one cohort per year	03/09/2024

### 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 – clarifying mechanisms for implementing feedback from equality and diversity monitoring

**Area for further exploration:** In their evidence for SET 3.12, the education provider submitted information about how their equality and diversity policies, and their approach to inclusion. The visitors considered that this was useful evidence. However, they did not see information about how data gathered under the equality, diversity and inclusion (EDI) policies would be used to drive programme improvement.

Without this evidence, they could not determine whether the standard was met. They therefore requested additional evidence about how the education provider would use EDI-related information to make changes to the programme as required. This evidence would enable the visitors to make a clear and informed determination of whether the standards were met.



**Quality activities agreed to explore theme further:** To further explore this area, we undertook an email exchange with the education provider to gain additional information about how they would meet the standard. We considered this the most effective way for us to clarify our understanding.

**Outcomes of exploration:** In their written response, the education provider set out the pathways that would be used to implement feedback about EDI. They listed the ways in which they will monitor differential achievement gaps, noting that this data is part of the programme's university-level annual reviews and assessment reviews.

Additionally they explained the mechanisms by which learners could raise issues, for example through the Internal Student Survey and Staff Student Liaison Meetings. Actions taken in response are fed back to learners via the virtual learning environment (VLE) in a "you said, we did" format.

The education provider also noted that role-specific staff training on EDI was provided, shaped by the university-level Inclusive and Diverse Culture Strategy. Staff-related EDI issues are addressed through line management and programme meetings, among other pathways. Actions taken in response are noted in staff forums.

The visitors considered that this was strong evidence and that the standard was now met at threshold. This was because they had seen evidence of clear mechanisms for putting into practice the lessons learned.

### Quality theme 2 – broadening the range of placements

**Area for further exploration:** In their evidence for SET 5.2, the education provider referred to their efforts to broaden the range of placements available to learners. At present, they intend for learners to be on mostly NHS placements but they plan to make use of more non-NHS settings in the longer term.

The visitors considered that they needed further information about this expansion of placement in order to determine whether a sufficient breadth of appropriate placements would be available for the learners. We therefore explored with the education provider the progress that had been made in obtaining the new placements to which the education provider had referred.

**Quality activities agreed to explore theme further:** To further explore this area, we undertook an email exchange with the education provider to gain additional information about how they would meet the standard. We considered this the most effective way for us to clarify our understanding.

**Outcomes of exploration:** In their response the education provider explained that they have initiated discussions with local private, independent and voluntary organisations (PIVOs), both on their own initiative and through the stakeholder forums of which they are a part. They stated also that they have begun discussions

to increase the number of placements available with existing providers. Their current plan, they stated, was for these additional placements to come on stream in the 2025-26 academic year, i.e. the second full year of the new programme. They did provide sufficient evidence in the original submission to show that they have appropriate placements for the 2024-25 academic year. The new placements are intended to expand learner opportunities rather than make up a shortfall.

The visitors considered that this was a good response as it demonstrated that the education provider had identified areas where practice-based learning capacity and range could be improved. They therefore determined that the relevant standards were met.

### Quality theme 3 – ensuring sufficient numbers of appropriately qualified practice educators

**Area for further exploration:** In their evidence for SETs 5.5 and 5.6, the education provider explained how they intended to ensure appropriate settings for practice-based learning. This will include regular audits, and regular meetings between programme staff and practice educators. They also stated that they would provide preparation and training for practice educators, and monitor their ongoing suitability.

The visitors found this useful, but considered that they would like to see additional evidence concerning how the education provider would ensure that they maintained an adequate number of appropriate staff in practice education. Without seeing such information they could not determine whether the education provider had a strategy for ensuring that learners would be appropriately supervised in practice-based learning. We therefore explored with the education provider their approach to ensuring that they had sufficient practice educators, and that those individuals were suitable.

**Quality activities agreed to explore theme further:** To further explore this area, we undertook an email exchange with the education provider to gain additional information about how they would meet the standard. We considered this the most effective way for us to clarify our understanding.

**Outcomes of exploration:** The education provider responded by noting that they were part of regional practice education forums, which had regular structured discussions of practice educator-related issues. They had already supplied evidence of how they would collaborate with local stakeholders through these bodies. The education provider gave the example of how they were co-operating closely with the University of Salford to enable a consistent and fair availability of qualified practice educators in Greater Manchester. They also stated they would use real-time workforce data from the North West Occupational Therapy HEI forum to identify possible issues and opportunities with practice educator availability and suitability.

In light of this response, the visitors considered that the standards were now met, because the education provider had clearly explained the mechanism by which they would ensure that all learners had access to suitably qualified practice educators.

## 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 education provider set out their admissions requirements in detail in the mapping exercise, referring to the more detailed information available in the documentation.
  - They noted the academic and personal requirements, including “a minimum 2:1 UK undergraduate degree, or equivalent and evidence of academic study in the five years prior to application.” They provided an example of the Professional Suitability form and explained the nature of the interview process. This process will involve an NHS values-based assessment. They also outlined the Disclosure and Barring Service (DBS) and occupational health requirements of the programme.
  - The visitors considered that the relevant standard was met. They agreed the education provider was applying appropriate academic and professional entry standards. This should enable those admitted to the programme to have a strong likelihood of completing the programme.

- The visitors therefore considered the relevant standards within this SET area met at threshold level.
- **SET 3: Programme governance, management and leadership –**
  - The education provider set out their approach to this SET in their mapping document and supporting evidence.
  - Regarding collaboration with practice partners and the maintenance of placement capacity, they noted that there will be “regular partnership meetings with all major NHS trust providers. Practice educators will be invited to attend regular events and meetings during the programme. Relationships with non-NHS providers will be managed via a regional forum involving other education provider higher education institutions (HEIs). Additionally, there will be practice educator representatives on the programme Stakeholder Involvement Group. The education provider have met with other local and regional stakeholders and HEIs to ensure that capacity can be managed appropriately. Evidence provided to support these standards included a Stakeholder Engagement Plan and the Placement Handbook.
  - The education provider demonstrated through the submission of CVs, programme handbooks, and agreements with visiting staff that they will have an appropriate number of qualified and experienced staff.
  - The visitors reviewed evidence of a range of on-campus resources in the Accreditation Handbook and the Student Handbook. This included both welfare / pastoral support, through for example inclusion policies, and academic support. The visitors understood that there was a clear strategy for ensuring access to resources for practice educators (PEs), and learners. Staff and PEs would have access to the clinical skills suite and other resources on campus, including study areas, libraries, and teaching rooms.
  - The visitors considered that they needed additional clarification of the backgrounds of the expert input into the programme, in the research methods module. In the education provider response, they clarified that this module would be delivered by a combination of speech and language therapists and occupational therapists (OTs), with overall responsibility held by the OTs.
  - We engaged in quality activity related to this SET area. We explored [how the education provider intended to implement feedback](#) related to equality, diversity and inclusion to drive programme improvement.
  - The visitors considered, after the clarification and quality activities, that the standards in this area were met. This was because there was sufficient evidence to show that the education provider would be able to collaborate effectively with placement providers, and to staff and resource the programme appropriately.
- **SET 4: Programme design and delivery –**
  - The education provider submitted module specifications, as well as a standards of proficiency (SOPs) mapping exercise which will be

integrated and assessed on the programme. These documents support the standard requiring alignment between learning outcomes and SOPs.

- The visitors were satisfied that the education provider had met the other standards within SET 4. The student handbook they reviewed to illustrate how learners' adherence to the standards of conduct, performance and ethics (SCPEs) would be monitored. A programme specification document and an Assessment Handbook were used by the education provider to explain the specific requirements of the programme.
- The education provider demonstrated that the programme would reflect the philosophy, core values, skills and knowledge base of the profession. They had also shown that theory and practice would be appropriately integrated, and that there were mechanisms for ensuring that the programme continued to reflect current practice. The visitors saw evidence that a range of learning and teaching approaches would be used on the programme. The curriculum documents they reviewed demonstrated that evidence-based practice and autonomous working would be taught appropriately and integrated with the content of the programme.
- There was sufficient evidence to satisfy the visitors that all standards within this SET area have been met. This was because the education provider had submitted evidence which clearly explained the specific requirements of the programme, and which showed how its content and approach would be appropriate for the profession.
- **SET 5: Practice-based learning –**
  - The education provider demonstrated that practice-based learning was integral to the programme by citing the detail of the structure in the Accreditation Handbook. They also referred to specific parts of the Placement Handbook to show how the various parts of clinical learning would integrate with the academic learning on the programme. The module specifications were also referred to in this section, as a way of showing which aspects of clinical learning were integrated with individual modules. The visitors considered that this evidence also demonstrated that the structure, duration and range of practice-based learning was appropriate.
  - The education providers demonstrated they have an appropriate number of experienced practice educators, to support programme learning and ensure a safe clinical environment. The education provider referred to specific sections of the Accreditation Handbook, which demonstrated how placements would be initially approved, and then audited on an ongoing basis.
  - The education provider stated that a placement lead from the programme team would be appointed, and would work with the university-level placement team, but was not yet in place.

- They noted the different mentoring approaches that would be used on the programme. The visitors considered that there was a good range of such approaches.
- We undertook [quality activities](#) to explore how the education provider would meet SETs 5.2, 5.5 and 5.6. Following this quality activity, , we considered there was sufficient evidence that all standards within this SET area are met. This was because the education provider had clear mechanisms to ensure that practice-based learning was fit for purpose, integrated with the other parts of the programme, and overseen by appropriate practice educators.
- **SET 6: Assessment –**
  - The education provider submitted several pieces of evidence to support their strategy in this area. These included the Assessment Regulations, the module specifications and the programme specification. The mapping document specifically outlines how they have ensured that HCPC SOPs and the standards of conduct, performance and ethics (SCPEs) are integrated with the programme content. They also provided evidence of having considered assessment guidance from the Royal College of Occupational Therapists (RCOT).
  - The education provider also set out their Fitness To practice policy, which the visitors considered was appropriately informed by HCPC and RCOT standards and guidance.
  - Additionally, they provided sample assessment templates and assessment descriptors, as a way of enabling the visitors to understand the range and appropriateness of the assessment methods used.
  - The visitors considered that the evidence provided showed that all the standards in this area were met. This was because the education provider had a defined and clear approach to ensuring that learning outcomes were linked to the SOPs and the SCPEs, and that assessment methods were appropriate to measure the learning outcomes.

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

**Areas of good and best practice identified through this review:** 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.

## 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 observation they had on the conclusions reached.

Based on all information presented to them, the Committee decided that the programme is approved.

**Reason for this decision:** The Panel accepted the visitor's recommendation that the programme 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
Manchester Metropolitan University	CAS-01453-G9B5N6	Jennifer Caldwell Joanne Stead	Through this assessment, we have noted the programme meets all the relevant HCPC education standards and therefore should be approved.	There is a large skills laboratory available to the programme. The programme team are able to book teaching and learning spaces and dedicated time is available for them. The education provider also has a wide suite of education software available, with up to date licences. In their submission they note that their virtual learning environment (VLE) has been adapted to ensure accessibility for all.
Programmes				
Programme name			Mode of study	Nature of provision
MSc Pre-registration Occupational Therapy			FTA (Full time accelerated)	Taught (HEI)



Appendix 2 – list of open programmes at this institution

<b>Name</b>	<b>Mode of study</b>	<b>Profession</b>	<b>Modality</b>	<b>Annotation</b>	<b>First intake date</b>
BSc (Hons) Applied Biomedical Science	FT (Full time)	Biomedical scientist			01/09/2007
BSc (Hons) Applied Biomedical Science	PT (Part time)	Biomedical scientist			01/09/2007
BSc (Hons) Applied Biomedical Science (ABMS)	FT (Full time)	Biomedical scientist			01/09/2020
BSc (Hons) Applied Biomedical Science (ABMS)	PT (Part time)	Biomedical scientist			01/09/2020
BSc (Hons) Healthcare Sciences - Life Sciences (Blood Sciences)	FT (Full time)	Biomedical scientist			01/09/2012
BSc (Hons) Healthcare Sciences - Life Sciences (Blood Sciences)	WBL (Work based learning)	Biomedical scientist			01/09/2018
BSc (Hons) Healthcare Sciences - Life Sciences (Cellular Sciences)	FT (Full time)	Biomedical scientist			01/09/2012
BSc (Hons) Healthcare Sciences - Life Sciences (Cellular Sciences)	WBL (Work based learning)	Biomedical scientist			01/09/2018
BSc (Hons) Healthcare Sciences - Life Sciences (Genetic Sciences)	FT (Full time)	Biomedical scientist			01/09/2012
BSc (Hons) Healthcare Sciences - Life Sciences (Genetic Sciences)	WBL (Work based learning)	Biomedical scientist			01/09/2018
BSc (Hons) Healthcare Sciences - Life Sciences (Infection Sciences)	FT (Full time)	Biomedical scientist			01/09/2012
BSc (Hons) Healthcare Sciences - Life Sciences (Infection Sciences)	WBL (Work based learning)	Biomedical scientist			01/09/2018
BSc (Hons) Physiotherapy	FT (Full time)	Physiotherapist			01/09/2003

BSc (Hons) Psychology and Speech Pathology	FT (Full time)	Speech and language therapist		01/09/1996
BSc (Hons) Speech and Language Therapy	FT (Full time)	Speech and language therapist		01/08/2017
BSc (Hons) Speech Pathology and Therapy	FT (Full time)	Speech and language therapist		01/09/1993
MSc (Pre-Registration) Physiotherapy	FT (Full time)	Physiotherapist		01/08/2020
MSc (Pre-Registration) Speech and Language Therapy	FT (Full time)	Speech and language therapist		01/09/2015
MSc Applied Biomedical Science	FT (Full time)	Biomedical scientist		01/01/2009
MSc Dietetics	FT (Full time)	Dietitian		01/01/2022
MSc Physiotherapy (Pre-registration)	FT (Full time)	Physiotherapist		01/09/2007
MSc Pre-registration Occupational Therapy	FTA (Full time accelerated)	Occupational therapist		03/09/2024
Non-Medical Prescribing	PT (Part time)			Supplementary prescribing 01/05/2006
Non-Medical Prescribing	PT (Part time)			Supplementary prescribing; Independent prescribing 01/04/2014
Non-Medical Prescribing	PT (Part time)			Supplementary prescribing; Independent prescribing 01/03/2014
Non-Medical Prescribing	PT (Part time)			Supplementary prescribing 01/03/2014
Postgraduate Diploma in Forensic Psychology Practice	FLX (Flexible)	Practitioner psychologist	Forensic psychologist	01/03/2021