Approval process report

Buckinghamshire New University, Diagnostic Radiography, 2023-24

Executive Summary

This is a report of the approval process to approve the BSc (Hons) Diagnostic Radiography (Degree Apprenticeship) programme at Buckinghamshire New 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 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.

In the quality activity we explored how the education provider will ensure appropriate capacity in practice-based learning, and how they will ensure that practice educators are appropriately trained and prepared for effective clinical supervision.

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

Previous consideration	N / A as this case did not emerge from a previous process
Decision	The Education and Training Committee (the Panel) is asked to decide whether the programmes are approved.
Next steps	If the Education and Training Committee (the 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.

Included within this report

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.

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
Rachel Picton	Lead visitor, Radiographer, Diagnostic Radiographer
Niall Gooch	Education Quality Officer

Section 2: Institution-level assessment

The education provider context

The education provider currently delivers 11 HCPC-approved programmes across 4 professions. 9 are pre-registration programmes and 2 programmes are for post-

registration annotations. It is a Higher Education Institution and has been running HCPC approved programmes since 2011.

The last annual monitoring for Buckinghamshire New University in the legacy model of quality assurance was in 2019-20. Since then, they have engaged with the performance review process in 2021-22 and through this review they achieved a five-year monitoring period and will therefore engage with this process again in 2026-27.

The education provider engaged with the approval process twice in the legacy model of quality assurance for new paramedic, and physiotherapy programmes in 2021. They also engaged with the major change process in the legacy model of quality assurance for a new degree apprenticeship route through the BSc (Hons) Operating Department Practice programme that was already approved in 2019. In 2019 they engaged with the major change in the legacy model of quality assurance for an increase to the learner numbers for their prescribing education, and 2021 for a series of further changes to them.

They engaged with our approval process in the current model of quality assurance for a new physiotherapy programme in 2021 and a diagnostic radiography programme in 2023.

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
Pre-registration	Operating Department Practitioner	☒Undergraduate	☐Postgraduate	2011
	Paramedic	☒Undergraduate	☐Postgraduate	2021
	Physiotherapist	☒Undergraduate	☐Postgraduate	2021
	Radiographer	☒Undergraduate	☐Postgraduate	2023
Post-registration	Independent Prescribing / Supplementary prescribing			2017

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	319	269	2023	The benchmark figure is data we have captured from previous interactions with the education provider, such as through initial programme approval, and / or through previous performance review assessments. Resources available for the benchmark number of learners was assessed and accepted through these processes. The value figure is the benchmark figure, plus the number of learners the provider is proposing through the new provision.
Learners – Aggregation of percentage not continuing	3%	8%	2020-21	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. The data point is above the benchmark, which suggests the provider is performing below sector norms. When compared to the previous year's data point, the education provider's performance has dropped by 1%. We explored this by considering how the new

				programmes would support learners and enable them to remain engaged with the programme.
Graduates – Aggregation of percentage in employment / further study	93%	98%	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 been maintained. We did not explore this data point through this assessment because the data did not indicate any issues with learner progression.
Teaching Excellence Framework (TEF) award	N/A	Silver	2023	The definition of a Silver TEF award is "Provision is of high quality, and significantly and consistently exceeds the baseline quality threshold expected of UK Higher Education." We did not explore this data point through this assessment because we considered there was no impact on the SETs.
Learner positivity score	78.1%	88.8%	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.
HCPC performance review cycle length				The education provider wen through performance review in 2021-22 and was given a five year interval until their next review in 2026-27.

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 Admissions policy and procedure outlines the institution wide policies covering information for applicants. In addition to this, there are programme specific policies which apply to individual disciplines.
  - ○ The information includes programme specific applicant guides, programme information and programme specifications.
  - ○ For the proposed degree apprenticeship programme, applicants will be employed, and learning will take place both in employment and on campus. Due to the nature of the programme, employers will be involved with the recruitment and selection process.
  - ○ These processes will apply to the proposed programmes.
- **Assessing English language, character, and health** –
  - ○ The Admissions policy and procedure relating to this area is institution wide and applies to all programmes. For some programmes it is adjusted to accommodate the profession specific requirements such as health and Disclosure and Barring Service (DBS) check requirements.
  - ○ In addition to the institution level policies, the BSc (Hons) Diagnostic Radiography and BSc (Hons) Diagnostic Radiography (Degree

Apprenticeship) applicant guide would also apply to the proposed programmes and applicants would be required to meet the criteria outlined.
  - o These policies will apply to the proposed programmes.
- **Prior learning and experience (AP(E)L)** –
  - o The Accreditation of Prior Learning Policy and Procedure is an institution wide policy and applies to all programmes. This policy functions as the standard for accreditation of certified learning and accreditation of experiential learning.
  - o This policy will apply to the proposed programmes.
- **Equality, diversity and inclusion** –
  - o The Equality, diversity and inclusion policy is included in the Admissions Policy and is an institution wide policy.
  - o This will apply to the proposed programmes.

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[1]** –
  - o There are institution wide policies covering the delivery of the provision to the expected threshold level of entry to the Register.
  - o The Academic Qualifications Framework sets out the framework for qualifications, academic level credit and structural requirements and the Academic Assessment Regulations cover requirements for achievement of credit and awards by individual learners.
  - o External Examiners are appointed to confirm standards of achievement.
  - o These policies will apply to the proposed programmes.
- **Sustainability of provision** –
  - o The Annual Monitoring Policy is an institution wide policy and ensures the sustainability of the provision.
  - o They also have Student Protection Plans in place. These policies assess the risks to programmes and where necessary action plans are created.
  - o This policy will apply to the proposed programmes.
- **Effective programme delivery** –
  - o To ensure effective delivery of the programmes, there are institution level policies in place. The Academic Qualifications Framework, Annual Monitoring Policy and External Examiner Policy ensure programmes are effectively supported and managed. These policies clearly outline

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

the requirements of programme delivery and will apply to the proposed programmes.

- **Effective staff management and development** –
  - o The Performance Development Review Policy and the Learning and Development Policy outline the education provider's commitment to providing training and development opportunities to their staff.
  - o The Learning and Development Policy is specifically designed to ensure all staff are provided with the relevant support to undertake their duties.
  - o These policies and procedures are institution wide and will apply to the proposed programmes.
- **Partnerships, which are managed at the institution level** –
  - o The Placement Learning Policy is an institution wide policy and covers core principles, academic quality, responsibilities and insurance.
  - o The Buckinghamshire, Oxfordshire and Berkshire West Integrated Care System (BOB ICS) is a key stakeholder. In addition to this, the education provider collaborates with clinical sites across the Thames Valley region and Bucks Academy.
  - o This policy supports partnerships and will apply to the proposed programmes.

Non-alignment requiring further assessment: None.

Quality, monitoring, and evaluation

Findings on alignment with existing provision:
- **Academic quality** –
  - o The Academic Qualifications Framework, Annual Monitoring Policy, Fitness to Practise Procedure, Programme Approval and Amendment Policy and Personal Tutoring Policy are institution wide policies.
  - o These policies and procedures ensure academic quality on all programmes and will apply to the proposed programme.
- **Practice quality, including the establishment of safe and supporting practice learning environments** –
  - o There are several policies and procedures set at institution level to ensure practice quality and a safe and supportive practice learning environment. Some of these include Student Bullying and Harassment, Student Complaints procedure and the Placement Learning Policy.
  - o These policies and procedures are institution wide and will apply to the proposed programmes.
- **Learner involvement** –
  - o Student Representation Policy supports and encourages learner involvement on all programmes and is an institution wide policy. In addition to this, the Learning Contract ensures learners are involved with the specific programmes.
  - o These policies will apply to the proposed programmes.

- **Service user and carer involvement** –
  - o Diagnostic Radiography Placement Educators and Expert By Experience Involvement Strategy is a profession specific policy and will be written specifically for the proposed programmes.
  - o The education provider is also working on introducing an institutional expert by experience strategy and this will be an institution wide policy.

Non-alignment requiring further assessment: The education provider is currently in the process of developing the Expert By Experience Involvement Strategy, which will be the profession specific policy. This should be explored further through stage 2 of this process and the exploration should include a timeframe on when this policy will be developed.

It is noted they are also in the process of developing an institutional strategy for Expert By Experience Involvement, however they have not indicated a timeframe within which this will be completed. This strategy should therefore be considered further and referred to the education provider's next performance review in 2026-27.

Learners

Findings on alignment with existing provision:
- **Support** –
  - o The education provider offers a range of services to support the wellbeing and learning needs of their learners. Some of these services include the Student Health and Wellbeing Service, Academic Registry Helpdesk and Academic Advice and Student Learning and Achievement Unit. In addition to this there is also a Personal Tutor Policy, and this is available to all learners.
  - o Learners on the proposed apprenticeship route will be provided with additional support through the Tripartite Reviews Learner Guidance – Apprenticeships. This guidance is used to discuss the progress of apprentices when they meet with their employer at the Tripartite Review meeting.
  - o These policies are institution wide and will apply to the proposed programmes.
- **Ongoing suitability** –
  - o Suitability is considered through the Fitness to Practise Procedure and Personal Tutor Policy.
  - o There are additional procedures that would also apply to learners on the proposed apprenticeship route when considering suitability.
  - o All these policies are institution wide and will apply to the proposed programmes.
- **Learning with and from other learners and professionals (IPL/E)** –
  - o Inter-professional learning policies are currently programme specific and a specific policy will be developed for the proposed programmes. In addition to this as part of the curriculum 2023 project the education

provider is working on establishing a school-wide policy, which will embed inter-professional learning within the school and provide some consistency across the programmes.
  - o This policy will apply to the proposed programmes.
- **Equality, diversity and inclusion** –
  - o The Equality, diversity and inclusion policy, Mitigating Circumstances policy and Interruption Withdrawal and Transfer procedure are all institution wide policies and procedures and cover equality, diversity and inclusion.
  - o These policies and procedures will apply to the proposed programmes.

Non-alignment requiring further assessment: We acknowledge the education provider is the process of developing a programme specific inter-professional learning policy, however no timeframe has been specified for this. This should therefore be explored further through stage 2 of this process.

It is noted they are also working on developing a school-wide interprofessional learning policy as part of the curriculum 2023 project but they have not indicated when this policy will be finalised. The development of this policy should be considered further and referred to the education provider's next performance review in 2026-27.

Assessment

Findings on alignment with existing provision:
- **Objectivity** –
  - o To ensure assessments are objective, all programmes follow the guidance set out in the Assessment and Feedback policy, Academic Assessment regulations and External Examiner policy.
  - o These policies and procedures ensure objectivity and clear quality processes for assessment and marking and will apply to the proposed programmes.
- **Progression and achievement** –
  - o All assessment processes comply with the Assessment and Feedback policy and Academic Assessment regulations.
  - o These policies are institution wide and will apply to the proposed programmes.
- **Appeals** –
  - o The appeals procedure is an institution wide policy and allows learners to appeal their marks.
  - o This policy will apply to the proposed programmes.

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:
- o Library facilities – the education provider has a large central library with space for several hundred learners at any one time, as well as laptops available for loan and staff on hand to guide and assist learners with reference. Library electronic facilities are also widely accessible remotely.
- o Imaging suites – a brand new imaging suite will be available to both programmes. It is shared with other professions but the new programmes will have appropriate and defined access to the suites.
- o Teaching and learning spaces – the education submitted evidence showing that the programmes would have access to a wide range of areas for teaching, workshops, seminars and group sessions.
- o Virtual learning environment (VLE) - The education provider submitted details of how staff, learners and practice educators would be enabled to access and use the digital learning system. This would give all stakeholders the ability to share, complete and assess the relevant materials.

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) Diagnostic Radiography	Full time	Diagnostic radiographer	10 learners, 1 cohort	23/09/2024
BSc (Hons) Diagnostic Radiography (Degree Apprenticeship)	Full time	Diagnostic radiographer	5-10 learners, 1 cohort	23/09/2024

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 – Maintenance of sufficient capacity in practice-based learning

Area for further exploration: SET 3.6 focuses on how education providers ensure sufficient capacity in practice-based learning through their collaboration with practice education partners. For this standard the education provider submitted a sample placement audit document. The visitors considered this was useful evidence, but that it did not sufficiently explain how the education provider intended to use this collaboration to ensure appropriate capacity in practice-based learning. The risk identified by the visitors was that the non-apprenticeship programme would not be able to maintain appropriate capacity in practice-based learning.

Without this information they were not able to determine whether the standard was met. We therefore explored this further using quality activity.

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 set out the process they would use for securing appropriate capacity. On the apprenticeship programme this is a less pressing issue, because all learners are already employed by NHS Trusts or private sector employees, by definition. For the non-apprenticeship, the education provider laid out how they would schedule specific meetings with practice education partners, and what would be discussed at these meetings. Capacity would be a standing agenda item, and all clinical settings would have to demonstrate how they would provide sufficient capacity. This was supported by minutes of meetings and by the results of a consultation with practice partners.

The visitors considered that this response clearly explained how the education provider would ensure appropriate capacity in practice-based learning, and they therefore considered that the relevant standard was now met.

Quality theme 2 – Training, preparation and selection of practice educators

Area for further exploration: SET 5.6 focuses on how education providers ensure that practice educators have appropriate training and experience to supervise clinical learning. For this standard, the education provider submitted programme handbooks and the templates that would be used for the practice portfolios.

The visitors considered this was good evidence of the education provider's general approach. However, this evidence did not enable them to understand how the education provider would ensure that practice educators were suitable for their roles. This was because it did not set out a process by which education providers would be appropriately trained and prepared. The visitors could not determine whether the relevant standard was met and so we explored further through quality activity.

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 described the detailed requirements for practice educators on the programme. Practice educators will have to be HCPC registrants, and to undergo annual training. Additionally, they will be strongly encouraged to undertake pedagogical qualifications, such as a PGCert. in Practice Education. The details of practice educator training were set out in a specific document.

The visitors considered that this response clearly explained how the education provider would ensure that practice educators were suitably qualified and experienced. There was a clear process by which the education provider could monitor and develop the skills of practice educators. They therefore considered that the relevant standard was now met.

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** –
  - o The education provider submitted a Programme Specification setting out the requirements for entry on to the programme. These included academic, personal and skills-based qualifications. They also explained clearly the apprenticeship pathway on to the programme, and the requirements of that particular aspect. The visitors asked for clarification of how the requirements are communicated to learners. The education provider noted that they hold information sessions, and create virtual and physical handouts. They also noted that they have an Apprenticeships Hub, which works with prospective applicants.
  - o We considered that the relevant standard was met, because the education provider had a clear and defined process for assessing applicants and ensuring they were suitable for the programme.
- **SET 3: Programme governance, management and leadership** –
  - o . The education provider submitted a program context document and program handbook concerning collaboration with practice partners and maintaining appropriate placement capacity. They also provided a narrative explaining their regular meetings with practice education providers. The context document explained programme governance, and how they impacted on their stakeholder engagement. The visitors asked for clarification on how collaboration with partners was organised and the education provider expanded on the information provided in the documentation.
  - o Regarding the staffing of the programmes, the education provider submitted staff curriculum vitaes, and cited the curriculum planning sections of the context document and module specifications that showed where specific staff would be deployed within the programme.
  - o To demonstrate that the programmes would be appropriately resourced, the education provider submitted a programme handbook, and a job description of the role of apprenticeship manager. They also provided links outlining the availability of libraries and personal academic tutors. The visitors asked for some clarification around this area. They asked for an update on the completion of the imaging suite

and for assurances that the learners on the new programmes would have appropriate access to the facilities. The education provider noted that the imaging suite had been completed, and stated that the scheduling of different programmes using the facilities had been arranged to avoid clashes.

- o We explored SET 3.6 further through quality activity, focused on capacity in practice-based learning. Following this quality activity, the visitors considered that all the relevant standards were met. This was because the education provider had clearly demonstrated their ability to collaborate effectively with relevant partners, to staff the programme appropriately, and to provide sufficient appropriate resources.

- **SET 4: Programme design and delivery** –
  - o The education provider submitted detailed information about the detail of the curriculum, including:
    - a standards of proficiency (SOPs) mapping document;
    - module specifications;
    - learning outcomes document;
    - practice handbook;
    - delivery schedule ;
    - individual pieces of guidance for learners and staff
  - o This evidence covered all the key areas of SET 4. It demonstrated the programmes would be appropriately aligned with the SOPs and the standards of conduct, performance and ethics (SCPEs). It showed that the learning outcomes could be delivered, and that the programme would promote the values of the profession, and encourage evidence-based and autonomous practice.
  - o We considered that all the relevant standards were met, because the education provider had demonstrated that the programmes would prepare all learners for safe and effective practice within the expectations and parameters of the profession.

- **SET 5: Practice-based learning** –
  - o In their evidence for these standards, the education provider submitted a delivery schedule, to demonstrate how the structure, duration and range of the practice-based learning would be appropriate. They also referred to sections of the programme handbook, the placement handbook, and the module specifications. Sample audits and sample placement portfolios were also submitted.
  - o The visitors considered that the sample audits of practice-based learning and the placement handbook helped their understanding of how the education provider would ensure an appropriate number of practice educators. They did, however, seek clarification from the education provider about this procedure. The education provider stated that they require placement partners to have appropriate policies in place to maintain sufficient numbers of practice educators.
  - o We explored through quality activity the process used to ensure that practice educators were suitably experienced and qualified, because

the visitors could not see a reference in the documentation to how this was achieved.
- o We considered that the standards were met. This was because the education provider had clearly demonstrated their ability to have appropriate practice-based learning on the programme, and to ensure a sufficient supply of appropriately qualified and experienced staff in practice-based learning.
- **SET 6: Assessment** –
  - o The education provider referred to module specifications, an assessment map, and the SOPs mapping in their evidence for these standards. They demonstrated that their programmes' structures would enable them to assess learners' understanding of both SOPs and SCPEs appropriately. They also provided evidence that their approach to assessment would be able to measure the learning outcomes, through the use of different methods and appropriate moderation.
  - o We considered that the relevant standards were met. The education provider had clearly demonstrated an ability to assess learners' knowledge and skill, and had reflected on the best assessment approach to achieve this.

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.

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 programmes 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
Buckinghamshire New University	CAS-01470-R3Y8C3	Jennifer Caldwell Rachel Picton	Through this assessment, we have noted the programmes meet all the relevant HCPC education standards and therefore should be approved.	o Library facilities – the education provider has a large central library with space for several hundred learners at any one time, as well as laptops available for loan and staff on hand to guide and assist learners with reference. Library electronic facilities are also widely accessible remotely. o Imaging suites – a brand new imaging suite will be available to both programmes. It is shared with other professions but the new programmes will have appropriate and defined access to the suites. o Teaching and learning spaces – the education submitted evidence showing that the

| | | | | programmes would have access to a wide range of areas for teaching, workshops, seminars and group sessions. |
| | | | | o Virtual learning environment (VLE) - The education provider submitted details of how staff, learners and practice educators would be enabled to access and use the digital learning system. This would give all stakeholders the ability to share, complete and assess the relevant materials. |

Programmes		
Programme name	**Mode of study**	**Nature of provision**
BSc (Hons) Diagnostic Radiography	FT (Full time)	• Taught (HEI)
BSc (Hons) Diagnostic Radiography (Degree Apprenticeship)	FT (Full time)	• Apprenticeship

Appendix 2 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
BSc (Hons) Diagnostic Radiography	FT (Full time)	Radiographer	Diagnostic radiographer		23/09/2024
BSc (Hons) Diagnostic Radiography (Degree Apprenticeship)	FT (Full time)				23/09/2024
BSc (Hons) Occupational Therapy	FT (Full time)	Occupational therapist			01/04/2024
BSc (Hons) Occupational Therapy – Apprenticeship	WBL (Work based learning)	Occupational therapist			01/04/2024
BSc (Hons) Operating Department Practice	FT (Full time)	Operating department practitioner			01/09/2018
BSc (Hons) Operating Department Practice – Apprenticeship	WBL (Work based learning)	Operating department practitioner			01/08/2019
BSc (Hons) Operating Department Practice with Foundation Year	FT (Full time)	Operating department practitioner			01/09/2018
BSc (Hons) Paramedic Science (Uxbridge)	FT (Full time)	Paramedic			01/02/2022
BSc (Hons) Paramedic Science (High Wycombe)	FT (Full time)	Paramedic			01/09/2021
BSc (Hons) Physiotherapy	FT (Full time)	Physiotherapist			19/09/2022
Dip (HE) Operating Department Practitioner	FT (Full time)	Operating department practitioner			01/09/2011
Graduate Certificate Non-Medical Prescribing	PT (Part time)			Supplementary prescribing; Independent prescribing	01/09/2017
MSc Diagnostic Radiography (Pre-Registration)	FT (Full time)	Radiographer	Diagnostic radiographer		01/09/2023
MSc Physiotherapy (pre-registration)	FT (Full time)	Physiotherapist			01/09/2021
Postgraduate Certificate Non-Medical Prescribing	PT (Part time)			Supplementary prescribing; Independent prescribing	01/09/2017