

Performance review process report

Royal Holloway, University of London, Review Period 2018-2023

Executive summary

This is a report of the process to review the performance of Royal Holloway, University of London. This report captures the process we have undertaken to consider the performance of the institution in delivering HCPC-approved programmes. This enables us to make risk-based decisions about how to engage with this provider in the future, and to consider if there is any impact on our standards being met.

We have:

- Reviewed the institution’s portfolio submission against quality themes and found that we needed to undertake further exploration of key themes through quality activities.
- Reviewed the institution’s portfolio submission to consider which themes needed to be explored through quality activities.
- Undertaken quality activities to arrive at our judgement on performance, including when the institution should next be reviewed.
- Recommended when the institution should next be reviewed.

Through this assessment, we have noted:

- The areas we explored focused on:
 - How placement capacity has been developed to support more learners. Additionally, how these placements have / are monitored to ensure they have sufficient resources and support for learners.
- The provider should next engage with monitoring in five years, the 2028-29 academic year, because:
 - We have an established data delivery system in place and found the education provider to be performing well. They actively engage both regional and national organisations such as NHSE and Office for students. The education provider works with and follows the guidance of professional-level bodies such as the British Association of Behavioural Psychotherapies (BABCP) and the British Psychological Society (BPS).

Previous consideration	N/A This process was not referred from another process but determined by their periodic engagement with us.
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Decision	The Education and Training Committee (Panel) is asked to decide: <ul style="list-style-type: none"> • when the education provider’s next engagement with the performance review process should be.
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Next steps	Outline next steps / future case work with the provider: <ul style="list-style-type: none"> • Subject to the Panel’s decision, the provider’s next performance review will be in the 2028-29 academic year
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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 performance review process undertaken by the HCPC to ensure that the institution and practice areas(s) detailed in this report continue to meet our education standards. The report details the process itself, evidence considered, outcomes and recommendations made regarding the institution and programme(s) ongoing approval.

Our standards

We approve education providers and programmes that meet our education standards. Individuals who complete approved programmes will meet proficiency standards, which set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

Our regulatory approach

We are flexible, intelligent and data-led in our quality assurance of programme clusters and programmes. Through our processes, we:

- enable bespoke, proportionate and effective regulatory engagement with education providers;
- use data and intelligence to enable effective risk-based decision making; and
- engage at the organisation, profession and programme levels to enhance our ability to assess the impact of risks and issues on HCPC standards.

Providers and programmes are [approved on an open-ended basis](#), subject to ongoing monitoring. Programmes we have approved are listed [on our website](#).

The performance review process

Once a programme institution is approved, we will take assurance it continues to meet standards through:

- regular assessment of key data points, supplied by the education provider and external organisations; and
- assessment of a self-reflective portfolio and evidence, supplied on a cyclical basis

Through monitoring, we take assurance in a bespoke and flexible way, meaning that we will assess how an education provider is performing based on what we see, rather than by a one size fits all approach. We take this assurance at the provider level wherever possible, and will delve into programme / profession level detail where we need to.

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

Thematic areas reviewed

We normally focus on the following areas:

- Institution self-reflection, including resourcing, partnerships, quality, the input of others, and equality and diversity
- Thematic reflection, focusing on timely developments within the education sector
- Provider reflection on the assessment of other sector bodies, including professional bodies and systems regulators
- Provider reflection on developments linked to specific professions
- Stakeholder feedback and actions

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 a review of this education provider:

Garrett Kennedy	Lead visitor, Practitioner psychologist
Sue Boardman	Lead visitor, Paramedic
Catherine Rice	Service User Expert Advisor
Alistair Ward-Boughton-Leigh	Education Quality Officer
Sue Elves	Advisory visitor, Practitioner psychologist

We encourage reflections through portfolios to be made at the institution level wherever possible. The performance review process does not always require profession level scrutiny which requires all professionals to be represented in the assessment panel. Rather, the process considers how the education provider has performed at institution level, linked to the themes defined in section 1. Lead visitors have the option to appoint additional advisory partners where this will benefit the assessment, and / or where they are not able to make judgements based on their own professional knowledge.

In this assessment, we considered we did not require additional professional expertise across all professional areas delivered by the education provider. We considered this because the lead visitors were satisfied they could assess performance and risk without needing to consider professional areas outside of their and the support visitors own expertise.

Section 2: About the education provider

The education provider context

The education provider has 1 HCPC-approved programme across 1 profession. It is a Higher Education Institution and has been running HCPC approved programmes since 1997. The programme is a Doctorate in Clinical Psychology (DClinPsy).

This is the education providers first interaction with the performance review process. In this review period (2018 – 2023) we have regularly engaged with the education provider. I have found them to be open and communicative, keeping me informed of any developments occurring internally.

They have informed me of their intention to seek approval of a new programme. The formal approval process has not yet began but they have started their internal development of a MSc level Occupational therapy programme. This resulted from a request of Surrey NHS trust who will work in partnership on the programme development and be responsible for organising / securing the practise based learning placement places. Originally this was intended to run from September 2024 with 15 learners. But at this time no approval request form has been received and the HCPC process has yet to begin. They have also said they have no future plans at this time to expand beyond 15 learners.

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	Practitioner psychologist	<input type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	1997

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 programmes¹.

Data Point	Benchmark	Value	Date of data point	Commentary
Numbers of learners	28	56	10/01/2024	<p>The benchmark figure is data we have captured from previous interactions with the education provider, such as through initial programme approval, and / or through previous performance review assessments. Resources available for the benchmark number of learners was assessed and accepted through these processes. The value figure was presented by the education provider through this submission.</p> <p>The education provider is recruiting learners above the benchmark. The visitors were made aware of this before their assessment, and it was considered in their review.</p>
Learner non continuation	3%	0%	2020-21	<p>This data was sourced from a data delivery. This means the data is a bespoke HESA data return, filtered bases on HCPC-related subjects.</p> <p>The data point is below the benchmark, which suggests the provider is performing above sector norms</p> <p>The education provider's performance has improved by 1% compared to the previous year's data point. The visitors</p>

¹ An explanation of the data we use, and how we use this data, is available [here](#)

				were made aware of this before their assessment and considered in their review.
Outcomes for those who complete programmes	93%	93%	2020-21	<p>This data was sourced from a data delivery. This means the data is a bespoke HESA data return, filtered bases on HCPC-related subjects.</p> <p>The data point is 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 dropped by 3%. But still remains equal to the benchmark.</p> <p>The visitors were made aware of this before their assessment and was factored into their reasoning.</p>
Learner satisfaction	79.6%	78.4%	2023	<p>There is data available, but it is worth noting that the education provider reflects on this section and how this is not taken from their HCPC-approved provision. This data was sourced at the summary, which means it is provider-level public data.</p> <p>The data point is broadly equal to the benchmark, which suggests the provider's performance in this area aligns with sector norms.</p> <p>When compared to the previous year's data point, the education provider's performance has dropped by 0.7%</p>

				The visitors were made aware of this before their assessment and was considered in their review.
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Section 3: Performance analysis and quality themes

Portfolio submission

The education provider was asked to provide a self-reflective portfolio submission covering the broad topics referenced in the [thematic areas reviewed](#) section of this report.

The education provider’s self-reflection was focused on challenges, developments, and successes related to each thematic area. They also supplied data, supporting evidence and information.

Quality themes identified for further exploration

We reviewed the information provided, and worked with the education provider on our understanding of their portfolio. 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 was performing well against our standards.

Quality theme 1 – Capacity of Practise-based learning

Area for further exploration: We noted from the education providers' reflections that there had been a rapid expansion of learner numbers and, therefore, a greater requirement for placement places. We did not find detailed reflections on how the education provider has sourced additional placement places or how they considered the impact of this expansion on placement capacity. We also did not find sufficient reflections to discuss how placement places were monitored to ensure they are fully equipped to cater to learner numbers. It is important we ensure these practice-based learning sites are equipped and able to meet the expanded learner numbers. We therefore chose to explore this further to ensure how this expansion has been resourced. We also wanted to clarify how the education provider ensures practice-based sites are equipped and resourced for the learner numbers.

Quality activities agreed to explore theme further: We decided to explore this by requesting an additional documentary submission from the education provider and also allowing them the opportunity to submit further reflections. We found this was the most effective way to explore the theme as we decided it was a query to which we needed to clarify our understanding. This also allows the freedom for the education provider to answer our concerns in their own words.

Outcomes of exploration: The education provider responded to the quality activity by submitting further information. They detailed how there had been a rapid expansion of practice placements over the monitoring period and specifically since 2020, with a 93% increase in cohort size between 2019 and 2020. They discussed that this has required strategic planning by their programme teams' clinical staff in collaboration with their colleagues across other DClinPsy North Thames programmes, who share practice placements. This planning had the dual aims of increasing placement capacity whilst supporting placement providers to accommodate expanded learner numbers. The strategic planning included the securing additional NHS England funding. This has now been secured to expand the programme and increase the time of both clinical-academic and administrative staff.

The education provider also detailed how efforts were being made to raise awareness and support for DClinPsy practice placements to receive NHSE's education and training tariff payments. This tariff aids in maintaining high-quality placements by providing resources for staff training, development, administration, and infrastructure costs. The also detailed how the programme offers a comprehensive and free series of supervisor workshops to enhance supervisor skills. These include introductory workshops for new supervisors and various other workshops for ongoing supervisor CPD.

The education provider explained how other planning efforts included a regional practice placement capacity mapping exercise. They discussed how through partnership working, placement needs across the region had been effectively mapped. Each Higher Education Institution (HEI) is responsible for building relationships with supervisors from specific clinical specialties across the region. The education provider has reported that this has led to increased capacity without compromising quality.

Practice placements are also continuously monitored through placement quality and feedback processes. The programme organises approximately 300 high-quality practice placements annually, with learners raising concerns about less than 4% of placements used.

The visitors considered that this was an appropriate response overall, which enabled them to gain a full understanding of how education ensures provider placement capacity is available for all learners. They also gained a greater understanding of the education providers' processes to monitor and review practice placement sites / providers. They understand now how this capacity has been developed and will continue to be developed. They are also assured that appropriate mechanisms are in place to monitor placements in the future.

Section 4: Findings

This section provides information summarising the visitors' findings for each portfolio area, focusing on the approach or approaches taken, developments, what this means for performance, and why. The section also includes a summary of risks, further areas to be followed up, and areas of good practice.

Overall findings on performance

Quality theme: Institution self-reflection

Findings of the assessment panel:

- **Resourcing, including financial stability –**
 - The education provider has reflected on several challenges in this area. These were principally related to financial challenges as fee income fails to keep pace with inflation. This led to a small deficit in the last financial year (2022-23). However, explained that this deficit was offset by reduced provisions for the Universities Superannuation Scheme (USS) pension scheme.
 - They also reflected on how they are continually working to increase income. They stated that their approved Doctorate in Clinical Psychology (DClinPsy) programme has been crucial to this, bringing income growth through a 93% increase in NHS-funded places since 2019, resulting in a budget surplus. In future, the programme needs to plan resources for expansion, explore cost savings, and consider opportunities for further growth in learner numbers. This is in line with both institutional strategy and NHS policy. The programme have held discussions with the Executive Dean for the School of Life Sciences and the Environment to explore these growth potentials.
 - The education provider has discussed how expansion of their approved programme has led to a significant investment in academic staffing (4.3 full time equivalent or FTE). This was required to support the programme and maintain the required 1:10 learner-lecturer ratio. The budget, including staff costs, is managed by the Program Director, allowing for strategic planning and resource allocation. Despite a major review in 2019 that centralised administration, the programme was allocated 2.5 FTE dedicated administrators due to its specific needs.
 - They have discussed how administrative staffing has not kept pace with the expansion in learner numbers. Efforts have been made to create efficiencies, and it is hoped that requests for additional administrative resources will continue. The programme team will continue to work on streamlining administrative processes to improve efficiency for larger learner cohorts.
 - The NHS workforce policy expects a consistent funding increase for clinical psychology in the next 10 years, potentially growing by 10-15%. This requires continuous improvement of their program, especially in setting up the systemic pathway and broadening the CBT pathway, backed by sufficient academic and administrative staff.
 - The visitors agreed that the education provider successfully demonstrated that they appropriately resourced an increase in their provision. They understood how this linked to the sustainability of the programmes and the institution. We were, therefore, satisfied with how the education provider is performing in this area.
- **Partnerships with other organisations –**

- The education provider discussed how the approved programme faced challenges due to its expansion from 29 to 56 learners per cohort between 2019 and 2023. This led to increased demand for practice placements within the NHS and other partners, and pressure on Human Resources Services provided by the Camden & Islington NHS Foundation Trust (CIFT). To address these, the programme expanded its provision to new placement providers, including those within the third (voluntary) sector, and maintained regular communication with the Learner line manager in CIFT. However, concerns remain about the slow Human Resources (HR) response times to learner queries. The HR provision has recently transitioned to a partnership model with the North London Mental Health Partnership (NLMHP), and the Occupational Health service provision has moved to a new provider.
- Going forward, the education provider aims to strengthen its partnership with NHS Trusts and improve HR communication following the transition to NLMHP. Regular review meetings have been scheduled to address transition difficulties, and a named programme coordinator within the HR shared service has been requested.
- They have also discussed how a new contract has been signed with NHSE that went live in September 2023. Furthermore, a legal review of the new NHS placement agreements has commenced and planning with NHSE has taken place to implement this renewal of agreements through 2023-4. A review and renewal of the placement agreement arrangements between the education provider, CIFT, and other placement providers to support expanded provision and uphold the new NHS contract is now required.
- The visitors were satisfied there are established positive relationships with other organisations which support the delivery of their programme. We were satisfied how the education provider is performing in this area.
- **Academic quality –**
 - The education provider has stated that there have been significant quality improvements in the programme due to new external guidance, stakeholder guidance, and an internal curriculum review. This coincided with an institution-wide restructure that dissolved the existing faculty structure into academic schools and created a 'Doctoral School'. This change led to new policies and procedures and a shift from a six-yearly 'Periodic Departmental Review' to a strengthened annual review process.
 - The academic restructuring, coupled with sector changes like the regulatory shift from QAA to OfS and the TEF's introduction, enabled a reassessment and update of the education provider's quality assurance methods.
 - They stated the new Doctoral School was responsive to the pandemic, allowing for online viva voce (spoken) examinations and electronic thesis submissions. They also committed to providing all learners with an outcome at the end of the 2019-20 academic year.

This led to some adjustments to the academic regulations that were taught.

- Going forward, their research degree regulations have been permanently amended. This will allow learners the choice of attending a viva-voce examination in-person or online, and hard copy thesis submissions are no longer required. The programme will continue to run all viva voce examinations online and use the DClinPsy Annual Curriculum Review Group and the enhanced annual review system to improve academic quality.
- Through clarification, the education provider submitted further information on how their external examiners are appointed. This is in line with their Regulations on the Conduct of Assessment, with appointments approved by the School Progression and Awards Board Chair. The EEs complete examinations, review coursework assessments, discuss course changes or learner progression concerns, and give verbal reports to the Department Assessment Board. The education provider detailed how this helps to ensure academic quality.
- Following this expansion, the visitors satisfied with the performance of the education provider over the review period in regards to ensuring academic quality.
- **Placement quality –**
 - The education provider has discussed how they organise roughly 300 practice-based learning placements annually. They noted challenges in obtaining accurate learner feedback about placement and supervision quality. They suggested this may be because learners may feel unable to provide honest feedback due to concurrent competence evaluations by their placement supervisors.
 - To address these potential concerns, a bi-annual procedure for evaluating and managing placement quality was developed and is detailed in the North London Doctoral Programmes in Clinical Psychology Placement Quality Management policy. This policy was reviewed and updated in 2021 to make descriptions of appropriate concerns more explicit and encourage learner feedback. Learners are encouraged to provide open feedback at any point during their placement journey and after completion.
 - Various opportunities are offered to support this, including placement and personal tutor meetings, regular placement Q&A sessions with clinical tutors, and termly staff-learner committees. Regular end-of-placement audits are conducted to review placement feedback, and action plans are set to improve quality. They plan to continue reviewing placement quality management processes and factor in feedback from learners and supervisors.
 - The education provider has discussed how, over the review period, a requirement from NHS England to improve equity and inclusion in placements. In response to this, the education provider conducted a review of support available to practice placement supervisors to address Equality, Diversity and Inclusion (EDI).
 - The review led to quality improvements, including a revision of the supervisors' workshops and the introduction of online diversity

reflective spaces for programme practice placement supervisors. In 2023, a 'Whiteness in Clinical Psychology workshop' was added to the placement supervisor training programme, which included follow-up reflective sessions. Additionally, a new EDI and anti-racism guidance document was developed in September 2023 to support placement supervisors in creating inclusive learning environments, with further resources available.

- The education provider stated that these new initiatives were met with enthusiasm and received positive feedback from attendees
- To ensure learners gain the necessary clinical competencies, they document their placement experiences using an electronic Audit of the Clinical Experience log (ACE). Detailed surveys are also used to gather information from learners about their competencies at key points in their training. If certain experiences aren't available by mid-training, efforts are made to allocate future placements where these opportunities exist.
- The visitors were satisfied that the education provider has effective feedback and monitoring processes to ensure placement quality.
- **Interprofessional education –**
 - The education provider has detailed how they require their learners to work collaboratively with their peers and different professionals. This includes the multidisciplinary teams learners' are part of whilst on placements as per the British Psychological Society's (BPS) professional guidance and accreditation standards. Learners are placed in various settings throughout their three-year training, providing opportunities for interprofessional learning.
 - They also discuss the risk that learners may miss out on these opportunities if allocated to specific psychological therapy placements like 'Improving Access to Psychological Therapies' (IAPT, also known as NHS Talking Therapies).
 - The education programme is designed to prepare students to collaborate in multidisciplinary teams, comprehend different professions, and build relationships with various professionals. They explained how they were developing a new interprofessional education initiative to support integrated care systems. This initiative will involve shared learning with social work learners through workshops, collaborative activities, and discussions. It will focus on understanding each other's professions, roles, and identities and exploring collaboration opportunities. They said this aligns with the NHS Long-Term Plan, promoting holistic client care, communication, and teamwork skills.
 - The education provider explained how they have diversified the use of place, enabling learners to access supervisors from multiple professional backgrounds.
 - This has been achieved by liaising with supervisors to increase the number of first-year placements, encouraging the use of supervisors from various professional backgrounds, and promoting split placements. As a result, learners have developed significant multidisciplinary team and interprofessional working skills.

- Through clarification, the education provider detailed how several lecturers on the programme's curriculum contribute to interprofessional education. These are delivered by a range of multidisciplinary team professionals, including social workers, nurses, psychotherapists, and psychiatrists. Examples of these include an 'Introduction to Child Psychiatry' and 'Psychiatric Aspects of Psychosis', both delivered by a Psychiatrist and 'Forensic Practice' co-delivered by a Clinical Psychologist and a Nurse Manager.
- Following the expansion, the visitors were satisfied with the education provider's performance in this area and assured that interprofessional education is fully integrated into placements.
- **Service users and carers –**
 - The education provider has discussed how their Service User and Carer Involvement Group (SUCIG), established in 2005, is integral to the programme. It was commended by the BPS in 2019 for its innovative involvement of service users in teaching design and delivery. To support the SUCIG, a review of 'Experts by Experience' (EBE) involvement and payment processes was conducted in 2023, leading to a new payment process that better reflects different levels of involvement. The programme will continue to seek feedback from EBEs and work with the institution to ensure fair and appropriate reimbursement for EBE involvement activities.
 - The EBE provision has been enhanced during the review period, with increased direct EBE involvement and co-facilitation in DClinPsy teaching sessions. This includes adult mental health service users and carer involvement in first-year induction sessions. Enhanced involvement of people with learning disabilities in second-year induction teaching and direct involvement of a young person in child teaching. The education provider has stated that learner feedback has been positive, highlighting the value of EBE involvement. Going forward, feedback will continue to be sought, and teaching sessions will be audited for EBE involvement to identify further enhancement opportunities.
 - The education provider has discussed the efforts made to engage younger people as EBEs. Their 'youth EBE' was involved in various teaching aspects of the programme and was nominated for the "David Cottrell 'Education of CAMH Professionals' Award" in November 2023. The EBE was highly commended in the award, reflecting the positive impact of her involvement in training over 100 clinical psychology learners and mental health professionals within a year on the programme. The education provider stated that they plan to continue to explore ways to acknowledge the significant value of EBE involvement.
 - The visitors noted the education providers' use of their Service User and Carer (SU&C) Group and ensuring fair payments to these members. They found their processes for SU&C to be well-established and effective and are satisfied with their performance in this area.
- **Equality and diversity –**

- The education provider has discussed their dedication to enhancing diversity, which is outlined in their Equality, Diversity and Inclusion (EDI) Policy and Framework. They aim to develop the programme's Equality, Diversity, Inclusion and Anti-Racism (EDIAR) strategy and an EDIAR committee. The education provider recognised the significant lack of diversity in the UK's clinical psychology trainee cohorts. They found this particularly high among minoritised ethnicities and men.
- The reflected on the actions they have taken to increase diversity through selection processes and outreach schemes. This has resulted in a yearly improvement in ethnic diversity, with current cohorts having 27-32% representation from minoritised ethnicities. However, male representation has seen minimal improvement. They aim to keep introducing measures until their cohorts are about 50% composed of individuals from underrepresented ethnic groups, reflecting the demographics they cater to.
- The education provider reflected on how they have been changing their selection process to increase cohort diversity, as highlighted in the Anti-racism in AHP Education report. Applications are anonymised, and various measures are used throughout the application, shortlisting, and interview processes. The academic threshold has been reduced, contextual data has been included since 2022, and positive action is applied to ethnic background and male gender. Interview panels have increased diversity and use clinical vignettes of diverse ethnic backgrounds. Experts by Experience are included as panel members and provided with unconscious bias training.
- They have also discussed how a scheme was set up for successful applicants from minoritised ethnicities to speak to learners. The education provider monitors diversity statistics and considers further positive action. They work with NHSE, regional higher education institutions (HEIs), and NHS Trusts to improve learner selection and qualified staff recruitment across London.
- The visitors noted the education providers concerted efforts to increase EDI with year-on-year improvement in this area. They noted the continually monitor of diversity statistics and reviewed selection processes. They found the education provider to be performing satisfactorily in this area.
- **Horizon scanning –**
 - The education provider has discussed how they are developing their 2030s strategy with four key themes. These are;
 - Skills for Opportunity and Change
 - Civic Minded, Globally Engaged
 - Inclusive Education and Research
 - Partnerships for Collaboration.
 - The strategy acknowledges that education providers are increasingly diverse in the student community and need to accommodate various learning and health needs.
 - They reflected that despite a challenging financial environment and the need for decade-long capital investment for ageing physical

resources, they are committed to updating their digital infrastructure and pursuing an ambitious environmental sustainability program. They stated that the programme won't be directly affected and the strategy will be accompanied by financial planning and investment, including new office and teaching spaces for the Department of Psychology.

- The education provider reflected on how the NHS Long Term Plan and Workforce Plan have led to a 93% expansion of Clinical Psychology Training at the education provider since 2019. This included an increase in annual intake from 29 to 56 learners per cohort. Over the next five years, they aim to modestly grow the programme by 10-15%, expanding their provision to around 65 learners per cohort. They stated their recent retendering of the NHS contract should ensure appropriate remuneration for the programme and continued stability. The programme leadership team have actively continued working with senior NHS psychology service leaders to determine future strategic developments. They have worked to translate these into programme developments, engaging in various external forums for effective horizon scanning.
- The visitors noted the education providers reflections in this area and found them to be performing satisfactorily.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Quality theme: Thematic reflection

Findings of the assessment panel:

- **Embedding the revised Standards of Proficiency (SOPs) –**
 - The education provider reflected on their assessment of their current provision against the revised SOPs for the 2023 cohort intake. This involved:
 - A scoping review of the syllabus and placement learning processes.
 - Raising staff awareness of the new standards.
 - Identifying and addressing gaps in the syllabus,
 - and informing learners of the new standards and curriculum changes.
 - They also discussed the new SOPs with their programme Equality, Diversity & Anti-Racism Committee, revising handbooks and documentation to align with the new SOPs. They plan to conduct a more comprehensive curriculum review in 2024 and plan a review of SOPs implementation. The progress of SOP / systemic pathway development will be reviewed more formally at a staff away day and through discussion at the Course Management Committee in June 2024-5.
 - The education provider explained how the programme is positioned and committed to equipping learners with the necessary knowledge, skills, and attitudes to deliver appropriate psychological therapy.

They stated this is achieved through a blend of academic learning and practical experience, focusing on evidence-based interventions such as cognitive behavioural therapy and systemic interventions. In response to the revised SOPs, the programme has enhanced opportunities for learners to learn about policy, public health care, and digital practice.

- Following an initial review of the SOPs, several changes were implemented across all three cohorts. These included reviewing speaker guidelines for lectures, emphasising relevant EDI legislation, and adjusting the first-year induction block to focus more on practical well-being and self-care strategies. They also introduced a new lecture on NHS staff and personal well-being for final-year learners. The programme has also expanded its teaching on digital health across the curriculum and increased the involvement of service users and carers in lecture delivery. They introduced journal club seminars to provide additional opportunities for guided reading and reflection on EDI issues.
- Through clarification, the education provider submitted further details of the impact of implementing the new SOPs. This includes an e-Learning package being introduced to develop learner digital competences and the development of new learner resources to provide more practical wellbeing and self-care strategies.
- Following this expansion, the visitors were satisfied with the education provider's performance in this area and welcomed their detailed approach.
- **Learning and developments from the COVID-19 pandemic –**
 - The education provider has discussed how they and their approved programme have been impacted by COVID-19, which led to changes in the programme's delivery. This included a pivot to digital delivery of the taught content.
 - The education provider reflected on the impact the Covid-10 pandemic had on academic quality. The pandemic necessitated a rapid shift to online teaching and assessment for the approved programme. This was successfully achieved and reflected through a blended learning approach. This involved a mix of large group teaching and smaller group skills learning and reflective exercises, with options for all online, all in-person, or a hybrid model. To support this transition, the education provider describes how learners and staff were upskilled in online learning and teaching, and trainee "IT Helpers" were recruited.
 - Moving forward, they plan to retain the blended approach to teaching delivery while also addressing issues of learner engagement in online delivery.
 - In response, key aspects of digital delivery have been retained, including online Vivas, selection interviews, suitable teaching, and digital submission of all assessments and research thesis. An evaluation will be conducted in 2023-24 to assess the impact of online teaching on learner engagement and attendance, which will inform the decision on the most appropriate model for future delivery.

- The visitors were satisfied with the education provider's reflections in this area and found their submission to detail their approach and learning from the pandemic appropriately.
- **Use of technology: Changing learning, teaching and assessment methods –**
 - The education provider has discussed how all teaching was moved to online platforms during the pandemic, with extensive resources and training provided to staff. Despite positive feedback from learners, there was variability in teaching methods. To enhance consistency and quality, it's crucial to continue supporting lecturers in developing their digital teaching skills using available education provider resources. The Programme Director's contribution to NHS England's evidence-based guidelines for online teaching will further aid this process.
 - The DClinPsy programme at the education provider has significantly developed its use of Moodle's online learning platform over the past two years. This platform, used for communication, resource access, work submission, and feedback, has enhanced learners' access to resources and improved communication with staff. The delivery of lectures and seminars has transitioned to Teams following staff training. Moving forward, the programme staff will integrate Teams into their regular practices to further improve communication and information sharing.
 - Through clarification, the education provider submitted further thoughts and reflections on the advent of Artificial Intelligence (AI). Here, they informed us that they are reviewing their curriculum and guidance on the use of AI in assessments. This is aimed to consider how these can be used critically and constructively by learners. They also acknowledged that the use of Generative AI has proved particularly challenging in the design of traditional assessments that draw more heavily on academic knowledge.
 - The visitors welcomed this expansion and found the education provider to be performing satisfactorily in this area.
- **Apprenticeships in England –**
 - The education provider has discussed how they do not currently offer an apprenticeship provision. They explained how an apprenticeship programme was piloted at the education provider through an MSc in Clinical Associate Psychology from Feb 2022- Sept 2023. They noted how this was successfully delivered and received a positive initial Ofsted evaluation. Following an organisational review, their Academic Board decided they would not pursue this or further apprenticeship programmes as part of the organisational strategic plan going forward.
 - The visitors noted the education provider reflections here and how they do not currently offer apprenticeships. We were satisfied with the education provider reflections in this area.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Quality theme: Sector body assessment reflection

Findings of the assessment panel:

- **Assessments against the UK Quality Code for Higher Education –**
 - The education provider discussed how, in 2018, the Office for Students (OfS) became the regulator of Higher Education in England. This introduced a learner-focused, risk-based approach that led to a revision of their quality assurance processes. This change, coupled with their internal restructuring, allowed the education provider to shift from 5-yearly periodic reviews to a risk-based approach. This means they trigger a 'Periodic Departmental Review' only when significant concerns are raised. Their examination board arrangements were also revised, introducing 'Chief External Examiner' roles to ensure standard consistency and comparability of awards.
 - They detailed how the pandemic delayed the full implementation of these changes. From 2023-24, the new board structure will be fully operational, providing greater clarification of responsibilities between department and school boards. This is a move welcomed by their External Examiners.
 - The education provider has discussed their commitment to enhance the learner experience and outcomes by proactively considering changes to the Quality Code. This includes the introduction of the 12 new principles into existing review processes. New initiatives include implementing the 'Assessment Futures' project for an institution-wide review of all undergraduate and postgraduate taught provision, introducing new validation processes and greater scrutiny of curriculum design. They also initiated a 3-year cyclical review process from the 2024-25 academic year and implemented a new curriculum design system. They also detailed that there will be further refinement of the role of examination boards, focusing on module review, progression, award outcomes, and data embedding in curriculum review and validation processes.
 - The education provider is transitioning from 5-yearly reviews to a risk-based approach, enhancing the annual review process with more metrics and ceasing regular departmental reviews. All programmes will reference benchmarking statements and other external sector reference points, fully integrating subject benchmarking into their validation processes. They proactively considered changes to the Quality Code function, including changes to internal monitoring mechanisms. Changes to the QAA Quality Code in 2024 will be incorporated into existing quality review processes, with continuous improvement in validation processes for taught degrees. New validation processes and the Course Design and Management System (CDMS) will be introduced from November 2024, giving the school-level more scrutiny and autonomy to evaluate new programme proposals.
 - The visitors found the reflections on this area detailed, outlines of the actions on feedback, and a detailed awareness of

responsibilities in this area. The visitors were satisfied with their reflections and found the education provider to be performing well in this area.

- **Office for Students (OfS) –**

- The education provider has stated that the Office for Students (OfS) has not monitored them during the review period. They prepare an annual quality and standards report to confirm their adherence to OfS registration conditions. This report, which includes details on academic governance, quality assurance processes, validation, annual review, and standards, is submitted to their Assessment, Quality and Standards Committee, academic board, and governing body for review. This ensures independent oversight of their quality assurance systems and processes.
- The education provider also produces a 'Degree Outcome Statement' each year, reflecting the review of standards and the quality of courses and awards. In addition to these processes, the education provider discussed how they have various mechanisms in place to meet the conditions of registration. This includes their admissions policies, an access and participation plan, action plans arising from National Student Survey (NSS) and Teaching Excellence Framework (TEF) metrics. They conduct a regular review of fair and transparent procedures for appeals and complaints these measures ensure their commitment to maintaining high standards and quality of education.
- The visitors were satisfied the education provider is responding to and continuing to meet the OfS conditions, despite not having been directly monitored during this period. We were satisfied how the education provider is performing in this area.

- **Other professional regulators / professional bodies –**

- The education provider has discussed how the programme currently has three professional bodies for quality management. These being: the HCPC, the British Psychological Society, and the British Association of Behavioural and Cognitive Psychotherapies (BABCP). In 2024-25, they plan to seek accreditation from the Association of Family Therapy (AFT) due to the development of a systemic pathway.
- In 2021, the education provider reduced the assessment burden by removing an exam and a case report from the assessment structure. In line with the College Assessment futures strategy, they plan to review summative and formative assessments during 2023-4, focusing on the spread and timing of assessments across the academic year.
- Under the new NHSE contract, DClInPsy is required to develop a systemic pathway and expand the CBT pathway. This requires more BABCP-accredited supervisors for learner placements. In 2023, BABCP updated its Minimum Training Standards to recognize the broader application of CBT. Funding was secured for two cohorts of placement supervisors to attend BABCP accreditation training at the University of Oxford and Exeter, leading to an increase in accredited supervisors and expanded trainee numbers.

The BABCP Handbook was updated accordingly. Future plans include continued support for learners and supervisors, seeking feedback on the assessment burden, and evaluating and developing the pilot systemic pathway introduced in September 2023.

- The education provider's program had two successful re-accreditation visits. The first was from BPS in 2019, resulting in re-accreditation until 2024-5 and a recommendation to monitor administrative staffing. The second was from BABCP in November 2022, resulting in re-accreditation until 2027 with no change recommendations. Despite no specific recommendations, the program has continued to improve in line with NHSE's quality direction and HCPC SOP developments. The future focus is on successful DClinPsy program delivery and identifying innovations to maintain its leading position in educational delivery.
- Through clarification the education provider discussed how they are scrutinised and required to meet the standards of several regulators. This includes the HCPC, BPS and BABCP, with plans for AFT systemic pathway accreditation in the future. They have reviewed the bodies' standards and integrated them within their programme handbooks and academic, clinical and research assessments to manage these different requirements.
- The visitors welcomed this expansion, which helped inform their decision-making. They found the education provider to be performing well in this area.

Risks identified which may impact on performance: None.

Outstanding issues for follow up: None

Quality theme: Profession specific reflection

Findings of the assessment panel:

- **Curriculum development –**
 - The education provider discussed how they conducted actions to review and embed the new SOPs once published. For 2024, their priority is to complete a more in-depth holistic review of the curriculum against the new profession-specific SOPs and a range of other professional standards at their annual curriculum review group.
 - The curriculum review process aims to align the program with the standards of governing bodies, focusing on new HCPC SOPs, BABCP minimum training standards, revised BPS accreditation standards, and AFT systemic pathway requirements. This complex task requires flexible teaching methods and coordinates learning activities. A working group led by the academic director will oversee the project in 2024, collaborating with the Academic Quality and Policy Office (AQPO) and involving various stakeholders. The review implementation will start with a mapping document outlining each professional body's accreditation requirements, leading to an

action plan for identifying overlaps and unified implementation methods. Stakeholder and learner feedback will be considered in the Annual Curriculum Review Group in 2024.

- The group oversees the syllabus quality and makes curriculum planning recommendations. The group ensures the program adapts to changes in professional, regulatory requirements, and NHS priorities. There's a focus on enhancing social approaches, including community and critical psychology and addressing racial trauma. The systemic pilot pathway, introduced in September 2023, aligns with revised professional standards, allowing learners to consider wider mental health determinants and systemic factors. This learning is formalised with sessions across two years, focusing on systemic thinking, practices, and models considering social, economic, cultural, and environmental factors. The curriculum will be continually evaluated and adapted based on learner feedback and formal learning outcomes assessment.
- The visitors found the education provider's reflections in this area to be detailed. They found the education provider to be performing satisfactorily in this area.
- **Development to reflect changes in professional body guidance –**
 - The education provider has integrated the six BPS Professional Guidance documents into the taught programme, programme handbooks, and clinical placement evaluations. In 2023, the NHSE's new risk assessment and suicide prevention guidance was implemented, and BABCP's new Minimum Training Standards were used to develop the CBT Level 2 Accredited Pathway. The programme ensures learners' compliance with current practice guidelines by incorporating changes into handbooks and teaching sessions. The education provider continues to monitor emerging BPS professional body practice guidelines, such as the BPS (2017) Practice Guidelines and BPS (2019) Standards on Accreditation Programmes, both currently under review.
 - The education provider has discussed how staff involvement in professional practice development enhances the quality of training for learners. For example, the Deputy Programme Director contributed to the 2021 update of the BPS Division of Clinical Psychology Faculty for People with Intellectual Disabilities' good practice guidelines. This contribution allowed the education provider to gain a deep understanding of national best practices and implement them in the programme's teaching and competency assessments. The team plans to continue supporting staff participation in relevant professional bodies committees, including the programme director's involvement in the upcoming CTCP review of the BPS Standards on Accreditation Programmes in Clinical Psychology.
 - The visitors note how the education provider used guidance documents and information from the BPS to consider the development of the programme. The visitors found the education provider to be performing well in this area.
- **Capacity of practice-based learning (programme / profession level) –**

- The education provider has noted a rapid expansion of DClInPsy training nationally, driven by increased NHS England funding. This has resulted in a 93% increase in learner numbers since 2019, a trend also observed in the North Thames region. To accommodate this growth, the provider has doubled practice placement provision, ensuring quality placements for learners and support for providers and supervisors. This was achieved through focused liaison with stakeholders to optimise placement availability. As the training expansion is expected to continue, the provider is maintaining ongoing liaison with placement providers and Trust leads to ensure placement capacity.
- The 'core competency' model, in place for years, ensures trainees achieve minimum clinical competence in core areas during their 3-year clinical placements. The programme reviews and monitors trainees' competencies using various tools, focusing on certain areas. A new comprehensive competencies document was introduced in Autumn Term 2023 to aid trainees. This careful monitoring optimises the use of available placements, ensuring trainees meet core clinical competencies, gain exposure to various service areas, enhance skills, and support workforce development.
- The education provider has discussed how, over the review period, they have worked closely with the management at CIFT and the 40+ NHS Trusts who offer placements to ensure placement capacity is available for all learners. This partnership, they reflect, has led to a considerable number of new placements across the different areas. For example, available Health placements have doubled from 52 offered in 2017-18 to 108 available for 2023/24.
- The visitors noted a rapid expansion in terms of placement sites but did not find expansive reflections on how these were assessed prior to use. We, therefore, chose to explore this via quality theme [one](#).
- Following this exploration, the visitors were satisfied the education provider is performing well in this area.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Quality theme: Stakeholder feedback and actions

Findings of the assessment panel:

- **Learners –**
 - The education provider has said that learners are generally satisfied with their practice placements. Concerns raised by learners or supervisors have been low at 3.8% of placements used. These concerns were addressed through the North London DClInPsy Placement Quality Management processes. There was one institution-level appeal and one informal learner complaint about placement evaluation, leading to plans for additional training on giving difficult feedback.

- The education provider has also stated that learners often comment positively on the quality of teaching and value the inclusion of Service users and Carers. They desired an increased focus on issues of difference and diversity, which has been expanded in the programme. Feedback on the flexibility offered by digital and online delivery of some lectures and seminars was positive, though some concerns were raised about engagement across the cohort.
- The education provider has discussed several mechanisms for learners to provide feedback on research aspects of the Programme. These include individual electronic feedback following specific lectures, termly staff-learner action meetings, and a research-specific feedback form at the point of programme completion. These exit surveys reveal high levels of learner satisfaction with the research provision on the DClinPsy.
- In response to feedback, several changes have been made. For first-year students, the thesis process starts earlier for better supervisor discussions. A 2023 algorithm efficiently matches trainees and supervisors. Second-year students have an additional NHS ethics workshop and a research team member as an NHS liaison. Pre-recorded statistics sessions were created, and the research teaching module is under review. Third-year students now have minimum supervision contact hours, with early supervisory needs discussions. The timing of information access is being reviewed, and many supervisors have shifted to group supervision for systematic/conceptual reviews.
- Through clarification, the education provider discussed their approach to the Postgraduate Research Experience Survey (PRES) and the Postgraduate Taught Experience Survey (PTES). They explained that the results are difficult to interpret because although technically a research degree, being a professional degree makes it a different experience for our students. They also reflect a very low response rate for the 2022-3 academic year, making the data and representativeness of opinions very difficult to evaluate. They note from the results that overall, learners were satisfied with the supervision standards and did not consider leaving the programme. However, a number of areas of dissatisfaction were noted related to research culture and clarity of research supervision / thesis standards. As a result, they have implemented clearer guidance on supervisory meeting frequency for learners and supervisors. In addition, their Research Director has been implementing ways to develop the research culture within Clinical Psychology for both staff and learners.
- Following this expansion, the visitors were satisfied the education provider is performing well in this area.
- **Practice placement educators –**
 - The education provider has discussed how efforts have been made to work with placement providers, coordinators, supervisors, and trust psychology and workforce leads. The goal is to address the challenges of providing more placements to meet the demands of Clinical Psychology training. This has fostered strong relationships

between placement providers and university placement list coordinators.

- The education provider has discussed how feedback from practice placement providers is received through various channels, leading to a better understanding of the challenges of providing increased placements. These include capacity issues for supervisors due to staff availability, turnover, recruitment issues, resource issues like room space and IT access, and training-specific capacity issues. In response to this feedback, individual liaisons with supervisors have been initiated to problem-solve and support services to offer increased placement opportunities. This includes shared placement offers, group supervision where appropriate, and ensuring trainees are matched to placements where resource and IT needs are understood.
- The education provider has discussed an ongoing issue concerning the staffing of Clinical Psychologists within NHS mental health services. They have discussed working closely with Trust leads to support them with post-qualified recruitment of clinical psychologists into the NHS. This includes the implementation of several Trust-wide recruitment fairs aimed at third-year learners. This will encourage them to seek qualified employment in one of our local / regional NHS Trusts. These, they reflect, were well attended, and Trust leads reported positively that the recruitment fairs appeared successful in enhancing the recruitment of newly qualified clinical psychologists to local / regional NHS services.
- The visitors were satisfied with the education providers' performance in this area. They found this section to be detailed and to evidence good relationships with placement partners.
- **External examiners –**
 - The education provider has discussed how the approved programme has a robust assessment system, with external examiners reviewing and validating all summative assessments and research projects. As learner numbers have increased, the pool of external examiners who are academic and / or clinical psychologists has expanded. These examiners play an active role in moderating programme work and conducting viva voce examinations for major research projects. They provide annual reports to the education provider, offering constructive feedback that requires a programme response.
 - The education provider states that feedback consistently indicates that learners' work is of a high standard, with them being generally successful at viva, most obtaining minor amendments. Their work, which demonstrates flexible and creative clinical skills and good reflections on issues of difference and diversity, continues to receive public recognition and results in a steady stream of publications.
 - Recent feedback has led to several programme actions to improve quality. These include reviewing the processes for gathering exam questions, ensuring that all academic staff and internal lecturers can contribute appropriately challenging questions related to their taught

material, and reviewing exam marking criteria to ensure they are sufficiently detailed and aligned with college standards.

- Through clarification, their education provider expanded on their criterion for appointing external examiners. External Examiners are appointed to a Department Assessment Board, which reports to the Life Sciences and the Environment School Board, which has a Lead External Examiner. It is not within their regulations to have a lead External Examiner for each programme. Instead, they have EEs who complete only oral examinations and others (nine in total) who have a broader overview of the programme. They complete oral examinations, review coursework, and are approached to discuss any significant course changes or learner progression concerns.
- Following this expansion, the visitors were satisfied the education provider is performing well in this area.

Risks identified which may impact performance: None

Outstanding issues for follow up: None

Data and reflections

Findings of the assessment panel:

- **Learner non-continuation:**
 - The education provider has discussed how rates for successful programme completion have remained very high. They say this aligns with the historical data and completion rates for DClinPsy programmes nationally. Learner non-continuation is usually due to an extension of training for learner health or maternity leave rather than failure related to lack of competence. They believe there have been two learners who have not continued with the programme during the monitoring period.
- **Outcomes for those who complete programmes:**
 - The education provider has stated that it is a consistent picture that graduates from the programme progress into full time employment. This is principally within the NHS. Longer-term data on retention would be helpful, they state, and they are working with London Trusts to map the continuation of NHS employment post-qualification.
- **Learner satisfaction:**
 - The education provider has said that National Student Survey (NSS) data is available for them as an institution but is not relevant to the approved programme as it is out of scope. Additionally, they do not have reliable quantitative data from the annual Postgraduate Research Experience Survey (PRES) surveys in which the University participates, as the response rates have consistently been very low. The DClinPsy does use PRES data to reflect on feedback and prepare a Postgraduate Research Annual Enhancement review for the University, detailing actions for future quality enhancement.
- **Programme level data:**
 - The education provider has discussed how, following advice from NHSE, they have undertaken significant expansion in learner numbers since 2019 (93%), when learner intake was 29 per academic year.

This, they reflect, has led to significant enrichment of the programme through an expanded staff team with a wider range of clinical expertise. This has also led to the development of a systemic training pathway. This rapid expansion also led to some logistical challenges regarding academic staff recruitment, teaching/learning space and administrative staffing support (which has had minimal expansion). Successful academic recruitment took place during 2022-3, so the academic team are now fully staffed, and the staff-learner ratio is 1:10, as required by the British Psychological Society (professional body).

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Section 5: Issues identified for further review

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

There were no outstanding issues to be referred to another process

Section 6: Decision on performance review outcomes

Assessment panel recommendation

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

- The education provider's next engagement with the performance review process should be in the 2028-29 academic year

Reason for next engagement recommendation

- Internal stakeholder engagement
 - The education provider engages with various stakeholders with quality assurance and enhancement in mind. Specific groups the education provider engages include learners, service users, practice educators, partner organisations, and external examiners.
- External input into quality assurance and enhancement
 - The education provider engaged with two number professional bodies. They considered professional body findings in improving their provision
 - The education provider considers sector and professional development in a structured way.
- Data supply:
 - Data for the education provider is available through key external sources. Regular supply of this data will enable us to actively monitor changes to key performance areas within the review period.
- What the data is telling us:
 - From data points considered and reflections through the process, the education provider considers data in their quality assurance and enhancement processes and acts on data to inform positive change.

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 education provider's next engagement with the performance review process should be in the 2028-29 academic year

Reason for this decision: The Education and Training Committee's panel agreed with the visitors' recommended monitoring period, for the reasons noted through the report.

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 the next steps for the provider. The lead visitors confirm this is an accurate summary of their recommendation (including their reasons) and any referrals.

Education provider	Case reference	Lead visitors	Review period recommendation	Reason for recommendation	Referrals
Royal Holloway, University of London	CAS-01367-C4S3Z5	Sue Boardman Garrett Kennedy	5 years	<p>We have:</p> <ul style="list-style-type: none"> • Reviewed the institution's portfolio submission against quality themes and found that we needed to undertake further exploration of key themes through quality activities. • Reviewed the institution's portfolio submission to consider which themes needed to be explored through quality activities. • Undertaken quality activities to arrive at our judgement on performance, including when the institution should next be reviewed. 	There were no outstanding issues to be referred to another process.

				<ul style="list-style-type: none">• Recommended when the institution should next be reviewed.• Through this assessment, we have noted:• The areas we explored focused on: How placement capacity has been developed to support more learners. Additionally, how these placements have / are monitored to ensure they have sufficient resources and support for learners.• The provider should next engage with monitoring in five years, the 2028-29 academic year, because: <p>We have an established data delivery system in place and found the education provider to be performing well. They actively engage both regional and national organisations such as NHSE and Office for students The education</p>	
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				provider works with and follows the guidance of professional-level bodies such as the British Association of Behavioural Psychotherapies (BABCP) and the British Psychological Society (BPS).	
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Appendix 2 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
Doctorate in Clinical Psychology (DClinPsy)	FT (Full time)	Practitioner psychologist	Clinical psychologist		01/01/1997