
Performance review process report

Queen's University of Belfast, Review Period 2018 - 2022

Executive summary

This is a report of the process to review the performance of Queen's University of Belfast. 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 our institution level standards and found our standards are met in this area.
- Reviewed the institution's portfolio submission to consider which themes needed to be explored through quality activities.
- Undertook 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.
- Decided when the institution should next be reviewed.

Through this assessment, we have noted:

- The areas we explored focused on:
 - How the quality of practice-based learning was maintained for expanded learner numbers. Through the quality activity, we were reassured that the quality of practice-based learning will be maintained despite the increase in learner numbers.
 - Contributions from experts by experience. Service user and carer involvement is at development stage. Further reflection on their involvement was sought through a quality activity. However, to allow the education provider to reflect further on their evaluation of the outcome of service user and carer involvement, we will review this at the education provider's next performance review.
 - Implementation of the revised standards of proficiency (SOPs). The quality activity provided us with sufficient details on how the revised SOPs will be embedded into the curricula.
 - Impact and outcome of changes around practice-based learning capacity. We understood through the quality activity how the education provider is managing the impact that the changes made to practice-based learning has on its capacity. It was apparent some changes are still being implemented. As such, we will assess the outcomes from the implementation and evaluation of the changes through the next performance review.
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- The following are areas of best practice:
 - Proactive approaches to increase safety (before any issues arose) and the replacement of the old feedback system ‘Liftupp’ to a more effective one given the limitations of the old one.
 - Use and learning from the pupil evaluation toolkit on the Doctorate in Educational, Child and Adolescent Psychology (DECAP) programme.
 - Equality, diversity and inclusion group met every eight weeks to discuss diversity and inclusion issues that were pertinent to the school.
 - The education provider plans to share their experience of successful involvement of experts by experience in the selection process at the UK Group of Trainers in Clinical Psychology Conference for the DClinPsych programme.
 - The following areas should be referred to another HCPC process for assessment:
 - To the next performance review – reflection on the outcomes of service user and carer involvement. In particular, the outcomes of the involvement of experts by experienced on the DClinPsych programme, as noted through the quality activity section.
 - To the next performance review – reflection on the implementation and evaluation of changes to practice-based learning capacity. For example, changes to Year 2 placement schedule.
 - The provider should next engage with monitoring in five years, the 2027-28 academic year, because:
 - They have outlined a range of planned / new changes / developments. Some of these suggest strong and innovative promise / potential areas of best practice that we would encourage the education provider to pursue and share evaluation of at their next performance review. We considered this low risk. We expect that in the timeframe the education provider would have introduced, monitored, reviewed and evaluated the changes / developments.

Previous consideration This is the education provider’s first interaction with the performance review process.

Decision The Education and Training Committee (Panel) is asked to decide:

- when the education provider’s next engagement with the performance review process should be.
- whether issues identified for referral through this review should be reviewed, and if so how.

Next steps Outline next steps / future case work with the provider:

- Subject to the Panel’s decision, the provider’s next performance review will be in the 2027-28 academic year.
- Subject to the Panel’s decision, we will undertake further investigations as per section 5.

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Section 1: About this assessment

About us

We are the Health and Care Professions Council (HCPC), a regulator set up to protect the public. We set standards for education and training, professional knowledge and skills, conduct, performance and ethics; keep a register of professionals who meet those standards; approve programmes which professionals must complete before they can register with us; and take action when professionals on our Register do not meet our standards.

This is a report on the 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:

Lyn McLafferty	Lead visitor, Practitioner Psychologist, Educational Psychologist
John Crossfield	Lead visitor, Arts Therapist, Art Therapy
Sarah Hamilton	Service User Expert Advisor
Temilolu Odunaike	Education Quality Officer
Tracey Samuel-Smith	Education Manager

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 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 own.

Section 2: About the education provider

The education provider context

The education provider currently delivers two HCPC-approved programmes across two modalities of Psychology - Doctorate in Clinical Psychology (DClinPsych) and Doctorate in Educational, Child and Adolescent Psychology (DECAP). It is a Higher Education Institution (HEI) and has been running HCPC approved programmes since 1994.

The last annual monitoring process in the legacy model was in the academic year 2018-19. The education provider engaged in the legacy model to report two major changes to their programmes. The education provider has not been involved in any processes in the current quality assurance model for the period being reviewed.

The education provider completed the majority of their portfolio on a programme-by-programme basis. This was discussed with the executive prior to submission of the portfolio. The education provider chose this approach because they considered that there were sufficient differences between the programmes to merit separate responses. They noted the approach allowed them to capture the distinct approaches which have been taken by each programme team.

As this is a Northern Ireland education provider, some of the themes have been removed from the portfolio as they are not applicable to them. The themes removed are:

- Apprenticeships
- National Student Survey (NSS) outcomes
- Office for Students monitoring

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	1994

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.

Data Point	Benchmark	Value	Date of data point	Commentary
Numbers of learners	19	83	31/03/2023	<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.</p> <p>We explored this through the initial assessment and the quality activity 1. We were satisfied there was no significant risk to placement availability or curriculum delivery and there is expanded staffing to reflect numbers.</p>
Learner non continuation	3%	3%	2019-2020	This HESA data was sourced from a data delivery. This means the data is a bespoke HESA data return, filtered

				<p>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 1%.</p> <p>We did not explore this as the data showed performance is at benchmark level.</p>
Outcomes for those who complete programmes	94%	97%	2019-2020	<p>This HESA data was sourced 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 above the benchmark, which suggests the provider is performing above sector norms.</p> <p>When compared to the previous year's data point, the education provider's performance has improved by 7%.</p> <p>We did not explore this as the data showed performance was over the benchmark level.</p>
Teaching Excellence Framework (TEF) award	N/A	N/A	N/A	<p>The TEF is applicable to English Higher Education Institutions (HEIs). It is voluntary for HEIs in Scotland, Northern Ireland and Wales and the education provider had decided to not participate.</p>

Learner satisfaction	75.5%	75.4%	2022	<p>This NSS data was sourced the summary. This means the data is the provider-level public data.</p> <p>The data point is broadly 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%.</p> <p>We did not explore this as the data showed performance is comparable to benchmark level.</p>
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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.

We have reported on how the provider is performing on all areas, including the areas below, through the [Summary of findings section](#).

Quality theme 1 – ensuring continuity of high quality placement for expanded programme numbers.

Area for further exploration:

The education provider reflected on the impact of the training given to practice supervisors on the DECAP programme to support the quality of practice-based learning. However, the visitors were unclear about the support made available to the supervisors / line managers of practice-based learning for the DClinPsych programme, that would ensure the quality of practice-based learning was not affected by the increase in learner numbers.

In addition, the visitors noted the increase in learner numbers was acknowledged to have placed pressure on the availability of practice-based learning and supervisor numbers across both programmes. We noted the DECAP team provided additional support and direction to assist learners to secure practice-based learning on the programme. However, there was lack of reflection around how the DClinPsych learners were supported to ensure quality of practice-based learning remained high despite the increased learner numbers.

Quality activities agreed to explore theme further: We explored this through email clarification and additional evidence as we considered these the most appropriate and proportionate ways to address the issue.

Outcomes of exploration: For the DClinPsych programme, the education provider noted suitably qualified supervisors were selected according to British Psychological Society (BPS) accreditation criteria. The education provider also described their approach to recruiting and assessing supervisors.

We understood a placement audit was used as quality assurance activity for the programme and this ensured that the education provider was able to closely monitor the quality of placement modules. The outcomes of placement audits were presented and reviewed at the Placement Panel, a programme committee comprised of staff within the education provider and external health service staff which reviewed all aspects of provision including the overall quality of placements. Learner feedback on the quality of their supervision experience was taken and issues raised were discussed and addressed through the work of the panel.

The education provider also reflected on how they ensured / will ensure availability of sufficient practice-based learning following the increase in learner numbers. We understood requests for placement offers had commenced in May 2023 and the education provider noted they already have excess in terms of the overall number of placements that have been offered for 2023/24. Work is underway via service managers and Trust liaison tutors to secure a small number of placements further required in specialist areas of Child and Intellectual Disability.

The visitors considered the detailed response has provided further reflection on how the education provider ensured and monitored the quality of practice-based learning to drive improvements. They were also reassured that any impact on the quality of practice-based learning as a result of the increased number of learners is being adequately managed. Therefore, they were satisfied the quality activity had adequately addressed their concerns.

Quality theme 2 – contributions from experts by experience (EbE)

Area for further exploration: For the DECAP programme, we noted an outline of the education provider's Service User Engagement Plan. The plan outlined the range of strategies, actions and involvements the education provider had undertaken over the past three years. We noted plans alongside forums were already in place but lacked detail as to strategies or actions that came out of service user and carer input.

Similarly, we noted the DClinPsych programme had a 'Participation Panel', but no details or reflection were provided on the outcome of their involvement. The visitors noted the education provider's plan to produce a forward facing EbE webpage on their DClinPsych website, however there were no timescales provided for this.

The visitors considered clearer reflections on the scope of the education provider's work around service user involvement and planned improvements were required. Therefore, the visitors requested that the education provider submit further reflection on the outcomes of service user involvement.

Quality activities agreed to explore theme further: We explored this through email clarification and additional evidence as we considered this the most appropriate and proportionate approach to address the issue.

Outcomes of exploration: We received further information outlining service user engagement plan during the review period for the DECAP programme. For example, we noted the education provider liaised with Children and Young People (CYP) on aspects of the curriculum as part of their programme / curricula development. We understood this led to the formation of a participant group who met on annual basis.

For their DClinPsych programme, the education provider noted the participation panel was formed by a group of enthusiastic and engaged service users / carers. They also noted a number of EbE based outside of Northern Ireland have been attending and contributing to the work of the panel over the past few years. The education provider stated the panel met formally twice per year and on an ad hoc basis as required throughout the year to work on specific projects. A list of their involvement was submitted. This include:

- Board of Studies membership
- Selection panel membership and
- Research panel membership and several others..

Regarding their EbE webpage, we understood work is ongoing with the education provider's Information Technology support within the School of Psychology. This will be operational by October 2023 when the portal will open for 2024 DClinPsych applications.

The visitors noted the developments, particularly the service user involvement in research, however, there was still lack of detail to indicate whether the outcome of their involvement had been evaluated. Therefore, the visitors recommend that the education provider submit further reflection on how these initiatives have developed

and how they have measured the outcome of service user or carer interaction, when next they engage with the performance review process.

Quality theme 3 – Embedding the revised SOPs - active implementation of the revised standards and Promoting public health and preventing ill-health.

Area for further exploration: We noted the education provider's record of competencies is currently being reviewed to include the revised HCPC SOPs. Actions plans are being developed but no further detail was shared to know whether these are manageable or achievable by the commencement of September 2023 for learners entering the first year of their programmes. It was also unclear what 'gaps' were perceived to be for year two and year three cohorts and how the updated SOPs will be integrated into their continuing learning and training.

Quality activities agreed to explore theme further: We explored this through email clarification and additional evidence as we considered this the most appropriate and proportionate approach to address the issue.

Outcomes of exploration: For both programmes, we understood work is under way ahead of the 2023/24 academic year to ensure that documentation is reviewed and updated so it reflects and enables the education provider to capture information relevant to the revised SOPs.

For example, the education provider shared their Action Plans for Equality Diversity and Inclusion (EDI) and Leadership for the DECAP programme. The document outlined the action plan area, details of the activity required, how, where and when it will be done and who is responsible. It was therefore clear how any gaps were being addressed. We understood the revised SOPs were discussed as a tutor team, in year group meetings with learners, and in placement supervisor meetings. The education provider also submitted a mapping document for the revised SOPs. They noted this will inform the update of their handbooks for the 2023/24 academic year.

For Promoting public health and preventing ill health, there is specific teaching within each year of the DECAP on how social, economic and environmental factors influence children's health, well-being and educational attainment. Similarly, a review of teaching within the DClinPsych's current academic curriculum has identified numerous teaching sessions which have content relevant to the revised SOP. The review process has also led to the identification of potential areas of additional teaching in the academic curriculum and plans are underway to introduce teaching for all three cohorts in 2023/24 in relation to Community Psychology, and enhanced health psychology input.

The visitors were satisfied that the education provider's response provided a clear reflection on how they have / will integrate the new SOPs into the curriculum for learners starting from September 2023 and how they will ensure those in other year groups have the knowledge of the revised SOPs. The visitors were therefore satisfied that the quality activity had adequately addressed their concern.

Quality theme 4 – impact and outcome of changes around the capacity of practice-based learning

Area for further exploration: We noted the education provider's reflection on changes they made to increase capacity of practice-based learning (the redesign to timing of placements) following recommendations from the BPS accreditation in 2018. The visitors also noted the major changes that were taken forward in 2019 but the reflection lacked any information about the impact or outcome achieved by the changes. The visitors therefore requested further information on these areas.

Quality activities agreed to explore theme further: We explored this through email clarification as we considered this the most appropriate and proportionate approach to address the issue.

Outcomes of exploration: The education provider referred to earlier points under ensuring [high quality placement](#) for expanded programme numbers. In addition, they reflected on how they managed placement capacity in line with the suggestions from the BPS. We understood that through a major change process, the education provider had moved an elective placement from Year 1 to 2 to ensure there was no gap of 1.5 years between Education Authority placements. In terms of 'longer and thinner' placements as suggested by the BPS, the education provider stated they have changed the second part of Year 1 placement 4 to two days a week placement over 6 weeks while the first placement in Year 3 is three days a week over 12 weeks. They noted both placements now support the capacity for intervention work.

We understood placements were reviewed on an ongoing basis with the consideration of BPS and external examiner suggestions, learner and supervisor feedback, and other factors. For example, we were informed the Year 2 placement schedule has been revised for next year, whereby Placement 1 will change from a block placement to a longer, thinner placement of three days per week. The education provider noted this provided the flexibility for learners to attend university for important teaching (such as Cognitive Behavioural Therapy (CBT) teaching and case consultation classes that inform the CBT intervention report assessment). They stated it will also allow more time for Year 2 learners to work on their research ethics application whilst ensuring they have one day study per week, as instructed in BPS standards for accreditation.

The visitors were satisfied that the reflections show the impact of the changes that have been made in practice-based learning. They considered the changes are still being implemented, for example, the revision made to Year 2 placement. Therefore, they requested the education provider submit evaluation of the change to placement modelling in the next performance review.

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 DECAP programme is fully funded by the Department of Education in Northern Ireland (DE). The education provider is the sole accredited trainer in Northern Ireland. Funding is approved through a three-year business case. The funding covers the learner fees, conference budget, and travel fund for research – related activities. Books and other materials as well as administrative staff salaries are covered through a block grant.
 - The DClinPsych is the only provider of clinical psychology training in Northern Ireland and is funded by the Department of Health in Northern Ireland (DoH). There is a service level agreement between the DoH and the education provider to provide the tuition and assessment of learners ensuring sufficient and suitable facilities, equipment and materials to ensure delivery of the course. The programme is a collaboration between the education provider and HSC partners who work closely together to select to the programme as well as well as providing practice-based learning and delivering the curriculum.
 - They noted staff team and other resources increased as learner numbers increased on both programmes. And there was reassurance that the provision was not going out to tender, therefore ensuring sustainability.
 - The detailed reflection showed the education provider is financially stable and sustainable. Therefore, the visitors were satisfied the education provider is performing well in this area.

- **Partnerships with other organisations –**
 - For the DECAP programme, there is a tripartite arrangement between the education provider, the funding body (DE), and the employer (the Education Authority (EA)). This forms the governance of the programme. Representatives from these three main partners come together three times a year for Steering Group meetings to:
 - ensure that the programme meets the standards of the approval and accrediting bodies;
 - approve the funding and contractual arrangements, thereby ensuring the effective governance of the programme;
 - apply workforce planning requirements; and,
 - assist with recruitment and staffing.
 - For the DClinPsych programme, the education provider noted that external stakeholders including the Department of Health, five NHS Trusts, the Business Services Organisation met formally.
 - The education provider reflected that the group allowed more in-depth discussion of the strategic direction of the programme. They noted one area of discussion that has been well served by the group was a constructive review of the line management model for learners and examining models across other similar programmes for comparison.

- The visitors determined the education provider's reflection showed they continued to consistently work with relevant organisations and these partnerships have ensured communication required for important operational functioning, in a context with challenges.
 - Therefore, the visitors were satisfied with the education provider's performance in this area.
- **Academic and placement quality –**
 - The education provider described how they ensure high academic and placement quality on both programmes.
 - For example, in academic teaching, module coordinators regularly review teaching content and liaise with contributors to ensure that the content is adhering to the curriculum and incorporates any advances in the field and dovetails with prior and future teaching. The clinical director and programme directors ensure that practice-based learning continue to be safe, supportive and effective learning environments, by carefully selecting suitably qualified supervisors and placement environments.
 - As outlined in [quality theme 1](#), we were able to establish how the education provider ensured quality of practice-based learning remained high despite the increase in learner numbers.
 - The visitors were satisfied that the education provider's initial reflection as well as the quality activity had reassured them academic and placement quality is high and that it has assisted in driving improvements.
- **Interprofessional education –**
 - The education provider noted that learners on taught doctorates attended a number of training sessions together. DECAP learners attended research methods training alongside research learners and learners on taught MScs. The DClInPsy programme developed an interprofessional learning website and learners attended optional training with healthcare professionals.
 - DECAP learners worked with, and learnt from, other professions in their multi-agency practice-based learning. Practice-based learning in the Education Authority also afforded opportunities to work with relevant professionals within the educational context such as paediatricians, speech and language therapists, occupational therapists, clinical psychologists, HSC professionals and Child and Adolescent Mental Health Services (CAMHs) personnel. Representatives from several of these professions provided teaching sessions throughout the duration of the programme.
 - The DECAP programme has an elective multiagency placement (EMAP) where Year 2 learners had a 65-day placement in an organisation other than the Education Authority Northern Ireland (EANI) where they were able to learn from the professionals they were based with. The education provider noted that the elective placement enabled learners to apply a range of evidence based and holistic psychological and consultation practices and intervention within a community and multi-agency context.

- The education provider reflected on challenges of aligning timetables to allow for shared teaching between the two programmes. Through clarification, the education provider discussed possibilities of further shared teaching and gave examples. One of which is the new expert witness training that has been arranged by the DECAP programme. We understand it is facilitated by Consultant Clinical Psychologists, and DClinPsych learners will join next year (2024) if evaluated positively.
 - Therefore, they were satisfied the education provider is performing well in this area.
- **Service users and carers –**
 - The education provider noted that the Programme Director of the DECAP programme receives feedback from the EANI Education Psychology's through attendance at Senior Educational Psychologist/ Principal Educational Psychologist SEP/PEP meetings.
 - Parents, teachers, a school principal, multi-agency placement providers and representatives from voluntary agencies were invited to participate in the Programme Advisory Liaison Committee (PALC). They also assisted with feedback for selected assignments.
 - The education provider also noted that service user and carer involvement is embedded throughout the DClinPsych programme. We understood the "Participation Panel" met twice a year and on an ad hoc basis as necessary. Members of the panel contributed to research, teaching, and placement domains of training. Service users and carers were also involved in selection to the programme and sat on all panels and committees aligned to the quality assurance and governance of the programme.
 - As part of their successes, the education provider reflected on how they have established the involvement of Experts by Experience (EbE) at various stages of the selection process. We understood EbEs attended and contributed to related committee meetings. They were active members of interview panels and involved in co-producing video vignettes. The education provider plans to share their experience of successful involvement of EbE in the selection process at the UK Group of Trainers in Clinical Psychology conference.
 - The education provider reflected on the development of a pupil evaluation toolkit which can be completed by CYP after they have been involved with learners on placement. After assessment and/or intervention the pupil was asked to complete a survey which can be conducted anonymously and returned to the programme team electronically or by internal post via the school Special Education Needs Coordinator. The education provider noted the results have provided formative feedback for learners and valuable information for the programme team.
 - Through [quality theme 2](#), we noted further details of how service user and carer involvement has developed. However, we recommend the education provider includes their reflection on the outcomes from service user and carer involvement in their next performance review.

- **Equality and diversity –**

- The education provider noted that both programmes are committed to increasing the diversity of their professions and encouraged applications from suitably qualified applicants from all sections of the community. The education provider made reasonable adjustments for successful applicants who have a disability which may impact on their training. The education provider also noted they review applications and learner intake on a yearly basis.
- The education provider noted that records during the review period for both programmes showed age, experience, and ethnic background were comparable although there was a significant under-representation of males. The education provider is aware that their programmes draw from a restricted undergraduate pool (predominantly females with educational experience). They have identified the risk in this and have put actions in place to address it.
- For example, we noted that through publicity materials, website information and recorded interviews, the education provider encouraged a more diverse range of applicants in order to recruit learners from different socio-economic and cultural backgrounds, and to increase the proportion of males.
- The DClinPsych programme also noted several Equality Diversity and Inclusion action points for the year ahead. Some of these included further promotion of support services available to learners through the education provider. For example, supervisor training is being reviewed to include antiracism alongside existing content on diversity and inclusivity.
- The visitors were satisfied with the education provider's performance in this area.

- **Horizon scanning –**

- The education provider reflected on the historic underinvestment in Clinical Psychology training in Northern Ireland alongside high levels of reported mental ill health. We understood this has led to an increase in clinical psychology training commissions over the past two years. The education provider is aware that the expansion of DClinPsych training numbers will require a coordinated response. Practicalities such as accommodation, room space, administration staff support, clinical / academic / research staffing; staff:student ratio will all need to be considered. In addition, strategy for identifying and recruiting staff to work in training, and ensuring effective systems are in place for mentoring junior staff are all included in their considerations.
- We understood clinical psychology has played a lead role in promoting reflective practice within general hospital, and physical health care settings, and in so doing supporting patients and staff. Learners have also had the opportunity to contribute to such initiatives in placement settings. The education provider anticipates this new role will continue to evolve over the next few years. They are keen to equip learners with skills to contribute to staff wellbeing both directly (through therapeutic competencies) and indirectly (through

personal and professional development and associated competencies).

- The visitors considered that the education provider's reflection around long term challenges and opportunities has satisfactorily demonstrated they are performing well in this area.

Risks identified which may impact on performance: None

Outstanding issues for follow up:

- Contributions from experts by experience. Service user and carer involvement is at development stage. To allow the education provider to reflect further on their evaluation of the outcome of service user and carer involvement, we will review this at the education provider's next performance review.

Areas of good and best practice identified through this review:

- As part of effective partnerships with other organisations, particularly practice education providers, the visitors noted the education provider's proactive approaches to increase safety (before any issues arose).
- In relation to service user and carer involvement, we noted the education provider's plan to share their experience of successful involvement of experts by experience in the selection process at the UK Group of Trainers in Clinical Psychology Conference for the DClinPsych programme.
- Use and learning from pupil evaluation toolkit was also noted for the DECAP programme also as detailed Service user and carer section above.
- The visitors noted that for the DClinPsych programme, equality, diversity and inclusion group met every eight weeks. The group was composed of learners and staff, and they met to discuss diversity and inclusion issues that were pertinent to the School.

Quality theme: Thematic reflection

Findings of the assessment panel:

- **Embedding the revised Standards of Proficiency (SOPs) –**
 - The education provider submitted an outline of how the revised standards would be integrated into both programmes. As part of their general reflections, they noted developments, such as a greater focus on the topics of leadership and equality, diversity, and inclusion, are in alignment with existing programme developments.
 - Through [quality theme 3](#), we received a more detailed outline showing how the areas - Active implementation of the standards and Promoting public health and preventing ill-health would be integrated into the curriculum, particularly for learners starting in September 2023.
 - For the standard on Leadership, we understood that from 2020/21 the DECAP programme team had introduced new teaching and topics for reflection as resources in this area. Additionally, a tutor was

appointed with special interest in this area to work alongside the programme director to audit current training and develop a leadership action plan. The DClinPsych programme has leadership as a key strand of learning across all three years of the programme. This is in collaboration with the education provider's Health and Social Care (HSC) Leadership Centre who have written and delivered a new curriculum alongside a practicing clinical psychologist. Through year 3 placements learners are expected to evidence the development of leadership skills and competence in their placement logbook.

- The visitors were satisfied that the education provider's initial reflections as well as the quality activity demonstrated an intention to incorporate the revised standards. Therefore, they considered the education provider has performed well in this area.

- **Impact of COVID-19 –**

- The education provider reflected on some of the challenges as a result of the Covid – 19 pandemic. They reflected on how they supported learners' learning and development in relation to clinical practice, academic teaching, and research activities. The impact of the pandemic also meant they had to consider how best to support learners' personal and professional development, as well as monitoring and supporting their wellbeing.
- The education provider noted their academic and research modules switched to online delivery via Microsoft Teams rather than face-to-face and was reviewed in line with local government and university advice. They noted some clinical placement activity moved to using video / telephone methods including supervision, observation and client psychotherapeutic work. Where face-to-face contact continued on placement, the education provider noted this was done with appropriate safety measures and personal protective equipment as advised by the Northern Ireland Public Health Agency (PHA).
- The education provider reflected on initiatives, adaptations, and changes they were required to take during the pandemic period. While the return to face-to-face delivery of the taught curriculum and face-to-face clinical activity continues to happen gradually, the education provider noted they have sought to identify and retain efficiencies.
- As part of their successes, the education provider noted the launch of their "Supporting the Well-being Needs of our Health and Social Care Staff during COVID-19" in April 2020. A Framework for Leaders and Managers - Regionally Workforce Wellbeing strategy was also launched in March 2022. Interest in staff wellbeing increased during the pandemic with more support for frontline staff by their clinical psychology colleagues. Learners were also able to support this work while on clinical placement.
- The visitors considered the education provider has demonstrated resiliency and responsiveness in their approaches to managing the impact of Covid - 19. Therefore, the visitors are satisfied the education provider has performed well in this area.

- **Use of technology: Changing learning, teaching and assessment methods –**
 - As with several other programmes / education providers, many aspects of the DECAP programme have developed in line with innovations in IT brought about by the impact of Covid-19 in particular. We understood the team had to quickly consider the elements that could be employed to support the effective running of the programme in such difficult circumstances. Although this was challenging at the time, the education provider noted the results have been beneficial for the development of the programme.
 - An example is the familiarisation in the use of MS Teams, SharePoint and Canvas VLE for tutors as part of their everyday practice. The education provider noted other digital platforms that were employed for specialist teaching and practice. Examples included the AVIGuk digital site for the Video Interactive Guidance training course and the Real Training group learning platform for Dynamic Assessment Cognitive Abilities Profile training. The education provider also noted the Q-interactive (Pearson) training licence for classwork which is an iPad-based testing system that helps administer, score, and reports 20 different clinical assessments.
 - We understood that during the review period, the DClinPsych programme worked closely with the IT support staff in the School of Psychology to develop a new system to aid with the monitoring of the development of learner competence while on clinical placement. The education provider noted they had a greater use of technology to aid research endeavours in the last three years. They used online platforms such as Zoom and Microsoft teams to interview research participants. Other software, such as Qualtrics, was also embraced by learners who needed to administer large test batteries or questionnaires as part of their research experience.
 - As part of the advantages of their collaboration with practice providers and their IT colleagues, the education provider developed a new computer application. This replaced an old system 'Liftupp'. They noted Liftupp had limitations as it was not web-based and costly. We understood the new system was more effective in gathering feedback. The feedback provided learners, clinical supervisors, and the programme team with a clear picture of a learner's development of skills and competencies during individual placements and across all placements during their training.
 - The visitors were satisfied that the education provider's reflection clearly evidenced how they have used technology to improve learning, teaching and assessment methods. Therefore, the visitors are satisfied the education provider has performed well in this area.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Areas of good and best practice identified through this review:

- As part of changes to technology, the visitors noted the replacement of the old feedback system 'Liftupp' to a more effective one given the limitations of the old one.

Quality theme: Sector body assessment reflection

Findings of the assessment panel:

- **Assessments against the UK Quality Code for Higher Education –**
 - The education provider noted they were last reviewed against the UK Quality Code for Higher Education by QAA in November 2015 and was found to meet UK expectations around:
 - the maintenance and setting of the academic standards of awards;
 - the quality of learner learning opportunities;
 - the quality of the information about learning opportunities; and
 - the enhancement of learner learning opportunities.
 - We noted the recommendations made from the assessment were not specific to the DECAP or DClinPsych programmes.
 - The visitors noted the programmes were within the scope of an internal institutional Periodic Subject Review (PSR) audit which the School of Psychology successfully underwent in April 2022.
 - In addition, we are aware the programmes are covered by the annual Continuous Action for Programme Enhancement (CAPE) quality assurance process at the education provider. The education provider reflected that whilst there is no feedback from QAA assessments against the UK Quality Code for them to reflect on, they continue to use their processes which are themselves mandated by the UK quality code.
 - The visitors were satisfied with this reflection and considered the education provider is performing well in this area.
- **Assessment of practice education providers by external bodies –**
 - The education provider noted that the primary placement provider for the DECAP programme is the EANI Educational Psychology Service (EPS). The EANI is responsible for all education and youth services in Northern Ireland and learners work in schools throughout the country. The education provider reflected that some of their programmes rely on other means of ensuring quality in practice where there was an absence of a regulatory system of monitoring and evaluating practice education providers. As such, the education provider will continue to operate its own system for approving the placement experiences of learners, and ultimately service-users, while monitoring all internal and external quality appraisals the EPS NI undergoes.
 - The education provider noted the EPS is developing a robust set of self-evaluation measures, aligned with their action plans. Through data analysis, service records and consultation with their client base they will scrutinise outcomes for learners, quality provision and leadership and management to develop and improve the service. From September 2023 they intend to use the framework to monitor

many aspects of effective educational psychology (EP) practice including EP guidance and support, high quality individual learning, CYP outcomes, reflective practice and supervision of EPs and learners.

- For the DClinPsych, the education provider noted the Regulation and Quality Improvement Authority (RQIA) is the independent body. They are responsible for monitoring and inspecting the availability and quality of health and social care services in Northern Ireland and encouraging improvements in the quality of those services. The education provider noted the RQIA reports have not focused specifically on clinical psychology service provision but have been helpful in identifying gaps in service provision and securing funding for new posts.
 - Although it was clear there had not been any direct assessment of practice education providers by external bodies, the visitors were satisfied there are various approaches to monitor the quality of placement provided by the practice education providers. As such, they were satisfied with the education provider's performance in this area.
- **Other professional regulators / professional bodies –**
 - The education provider noted the BPS accreditation for the DECAP programme took place in 2019 and led to a series of developments on the programme. For example, the accreditation report recommended that all placement supervisors receive specific training in supervision skills incorporating the value of critical reflection on practice as a means of reviewing cases. We understood the programme has employed the services of an external specialist from University College London following the accreditation and has organised and funded training in quality assured reflective supervision.
 - Similarly, the DClinPsych programme received BPS accreditation in 2018 and has also had some developments on the programme, particularly in research. The education provider reflected on the programme's links with the Division of Clinical Psychology in Northern Ireland (DCPNI). For example we understood that the Department of Health in Northern Ireland launched a 10-year Mental Health Strategy in 2021. The education provider noted the DCPNI played an important role in the development of the strategy and how it will influence the nature and content of clinical psychology in the coming years.
 - The visitors considered the education provider's reflections showed how they have engaged and responded to previous engagement with regulatory and professional bodies.
 - Therefore, they 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: Profession specific reflection

Findings of the assessment panel:

- **Curriculum development –**

- For the DClinPsych programme, the education provider noted they had close liaison with their clinical colleagues through their programme curriculum and Board of Studies which meet twice per year to review all taught modules. Feedback from such meetings was used to ensure curriculum adapts to new legislation, standards of education, policies and evidenced-based treatments. We understood the mechanism was used to incorporate new teaching into the programme in a timely and efficient way.
- To maintain a relevant curriculum that reflects current competencies and can respond to future developments, the DECAP programme engages a continued process of evaluation, reflection, and review of its curriculum.
- Following the programme's last review, and in line with professional developments highlighted by BPS and HCPC, the education provider noted additional action plans were drawn up for several curricula and programme development areas. These included the service user engagement plan and the research development plan.
- The education provider also reflected on the outcome of their end of year responses and module reviews. As part of the outcomes, we understood learners in Year 2 have benefitted from the change from written assignments to in-vivo assessments. Learners valued the in-vivo tasks both as a learning opportunity and an assessment tool and this has helped them better to step into the role of an educational psychologist.
- The visitors noted the education provider has several activities towards curriculum development across both programmes. Additional information received also reassured the visitors that changes made to the curricula continue to drive its development.
- The visitors were therefore satisfied with the education provider's performance in this area.

- **Development to reflect changes in professional body guidance**

- For their DECAP programme, we understood some developments have resulted from changes in professional body guidance. Some of these include:
 - Adding 'fitness to practice' documentation to the placement handbooks over the review period.
 - Proactive planning of staffing ratios for tutors and administrative staff.
 - Changes related to ongoing revision of BPS 'Standards for the Accreditation of Doctoral Programmes in Educational Psychology' to bring these in line with new HCPC SOPs.
- The DClinPsych programme has representation on some committees including the regional Division of Clinical Psychology committee (DCPNI), and the national Association of Clinical Psychologists committee (ACP-UK).

- In addition, the programme teams are utilising a range of communication systems to implement new guidance. For instance, in enabling greater involvement with practice placement providers and service users and carers facilitating. This will help in understanding of equality, diversity and inclusion issues and in helping learners in managing uncertainty.
- The visitors were satisfied that the education provider's reflections showed they have continued to make changes to their provision in line with changes from relevant professional bodies.
- **Capacity of practice-based learning –**
 - The education provider reflected on how the funding from the Department of Education has allowed for the increase in DECAP learner intake over the review period. We noted learner numbers increased year on year beginning in 2018/19 with enrolment of 18 learners to the current complement in 2022/23 of 34. We understood the EPS is committed to providing practice-based learning when seeking an increase in the number of learners and is funded for supervisory time.
 - For the DClinPsch programme, the education provider noted how they moved from a baseline of around 13 training commissions to 21 training places each year in response to the rapid expansion of training places over the past three years.
 - The education noted they have utilised a Liaison Tutor to secure the required number of placements each year. They also noted their eagerness to seek alternative ways of increasing the number of training places and as such, they have now implemented a new system to ensure this.
 - We understood the Placement Panel is responsible for undertaking and coordinating regular reviews of placement requirements; reviewing guidelines for specialist placements; reviewing clinical supervision guidelines; as well as several other functions.
 - Through [quality theme 4](#), we further understood how the changes in practice-based learning have contributed to capacity across both programmes.
 - The visitors were reassured the education provider is managing the availability of practice-based learning effectively. However, they have requested that the education provider reflect on the evaluation of the change to placement modelling at their next performance review.
 - Therefore, they were satisfied with the education provider's performance in this area.

Risks identified which may impact on performance: None

Outstanding issues for follow up:

- The visitors noted the changes to placement modelling. In particular, changes to practice-based learning in Year 2 which will impact on their provision from the 2023 – 24 academic year. The visitors request that the education provider submit further reflection on this at their next

performance review when they would have had the opportunity to evaluate the impact of the changes.

Quality theme: Stakeholder feedback and actions

Findings of the assessment panel:

- **Learners –**
 - The DECAP programme has several means of accessing the learner voice, both individually and collectively. Year groups can raise concerns about aspects of curriculum and practice at programme meetings. Group concerns were raised via the Programme Advisory and Liaison committee (PALC), the Student Voice Committee (SVC) and through the yearly external examiner visit. Individually, learners can raise concerns with their professional and academic tutor and the programme director.
 - We noted a feedback loop has been introduced and will be a part of the raising concerns system, particularly for matters that will take some time to resolve.
 - For the DClinPsych programme, the education provider reflected on changes that were made following consultations with the BPS at the programme's accreditation in 2019. We understood a wide range of key stakeholders were consulted on the plans to reduce the number of formal pieces of coursework learners were required to submit over the three years, with an increased emphasis on quality of submissions over quantity.
 - The education provider noted individual training cohorts were also consulted separately as any proposed changes were likely to impact on each cohort differently. From listening to learners and responding to their requests, changes were made to the structure of the academic module.
 - Another development from learner feedback was the learner hub for raising concerns and their new teaching evaluation system.
 - The visitors were satisfied the education provider's reflection outlined how they have collected and actioned feedback from learners. We also noted how those feedback has been used to improve the programme.
 - The visitors are satisfied the education provider is performing well in this area.

- **Practice placement educators –**
 - For the DECAP programme, the education provider reflected on the restructuring of the placement components in Year 3 following feedback from practice educators. We understood the module coordinator, placement tutor and programme director introduced activities to allow for increased focus on casework and intervention and increased learner autonomy. The activities provided opportunities for the learners to gain experience in a range of applied educational psychological practices. These included practices that are typical of an educational psychologist's workload during the first term of an

academic year including attending and completing at least one consultation meeting with school staff.

- The education provider noted the changes were welcomed by practice educators who appreciated that learners were more confident in their skills and more familiar with EANI policies, procedures, and personnel, particularly for their final placement. Additionally, EPS reports indicated that learners were more prepared for their roles as newly qualified educational psychologists as they began work in the Education Authority.
 - In response to placement supervisors' feedback over the past few years, the education provider reflected on the success they have had in delivering refresher supervision workshops and advanced supervision workshops for longstanding practice placement educators. For example, we noted an away day was organised for trust service managers and representatives from practice placement educators. Issues arising from the expansion in learner numbers were discussed on the day. The education provider noted it was also an opportunity to consult with key stakeholders in relation to issues relating to all aspects of training (research, placement, academic).
 - The visitors were satisfied the education provider continues to collect feedback from and take actions in response to practice educators.
- **External examiners –**
 - The education provider uses external examiner feedback as a mechanism for upholding academic standards and a means of ensuring that programmes are working towards meeting the requirements of any relevant approval and accrediting bodies.
 - The education provider reflected on several feedback and action points from external examiners on both of their programmes. For example, for the DClinPsych programme, feedback was received from two external examiners regarding two thesis papers suggesting they should be on the same topic / subject matter, even though one paper was an empirical study and the other a systematic review. The education provider noted initial difficulty in implementing this change given they had already undertaken some systematic reviews. However, following further reflection on the issue, they developed their thesis to include an extended literature review or a systematic review as part of their overall programme changes. This allowed greater scope for the two papers in the same area.
 - The visitors were satisfied that the example showed the education provider continues to take actions in response to external examiners to improve their provision.
 - Therefore, 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

Data and reflections

Findings of the assessment panel: Learner non continuation:

- **Outcomes for those who complete programmes:**
 - The education provider noted the 2018-19 data of 89% against a benchmark of 93%. They recognised there is a high level of demand for both clinical and educational psychology services and a high level of vacancy in terms of unfilled clinical psychology posts regionally. This has resulted in a higher data score with the 2019-20 data showing a score of 97% against a benchmark of 94%. The education provider noted that all graduates of the DECAP programmes over the last eight years, have taken up employment within the EA.
 - They also stated that both programmes will continue to evolve and put in place the necessary systems to support learner learning and development, thus ensuring continued high completion rate.
 - Considering the significant increase in the data scores across the years and the education provider's reflection on ensuring continued high completion outcomes, the visitors are satisfied the education provider has performance well in this area.
- **Teaching quality:**
 - The education provider noted they have not participated in the Teaching Excellence Framework (TEF) since its instigation and so did not submit any reflection around teaching quality. As an education provider in Northern Ireland, the TEF is a voluntary scheme.
 - The visitors considered the education provider's performance satisfactory in this area.
- **Learner satisfaction:**
 - As both programmes are at doctoral level, learners are not invited to participate in the National Student Survey (NSS).
 - The visitors considered the education provider's performance satisfactory in this area.
- **Programme level data:**
 - The education provider reflected on how they had managed the growth in learner numbers; the impact of this on staff workload and how they have recruited additional staff and shared responsibilities among staff members to ensure learners are adequately supported.
 - The visitors were satisfied the education provider had identified key issues related to the increasing learner numbers and had managed this through recruitment to replace or expand staff team alongside developing new roles to support the growing demands in placement. Continuity was provided in the appointment of the new Programme Director and a new Senior Programme Team has been formed.
 - Although the visitors noted the learner numbers had increased significantly in recent years, they were reassured there were no significant risks to placement availability or curriculum delivery.
 - Well or satisfactory?

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).

The following areas were referred to the next performance review process:

Outcome of the involvement of experts by experience (EbE) on the DClinPsych programme

Summary of issue: The education provider had outlined a number of areas where service users and carers (EbE) have been involved. For example, in research. We noted these are new developments and as such requested that the education provider submits further reflection on the outcome of their involvement in these areas, at their next performance review.

Implementation and evaluation of changes to practice-based learning capacity

Summary of issue: As noted above in [quality theme 4](#), the education provider is required to reflect on the implementation and evaluation of the changes made to placement modelling. For example, changes to Year 2 placement schedule. Implementation and evaluation of changes in practice-based learning

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 2027-28 academic year
- The issues identified for referral through this review should be carried out in accordance with the details contained in section 5 of this report.

Reason for next engagement recommendation

- Internal stakeholder engagement
 - The education provider engaged with a range of stakeholders with quality assurance and enhancement in mind. Specific groups engaged by the education provider were the Education Authority (EA), Department of health and several NHS Trusts.
- External input into quality assurance and enhancement
 - The education provider engaged with the British Psychological Society and other relevant professional bodies. They considered professional body findings in improving their provision.
 - The education provider engaged with Division of Clinical Psychology in Northern Ireland and The Regulation and Quality Improvement Authority. They considered their 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.
- The education provider noted changes to practice-based learning in Year 2 which will impact on their provision from the 2023 – 24 academic year as noted throughout the report, in particular [quality theme 4](#). We will need to review the impact of this when the provider can reflect on implementation.
- In summary, the reason for the recommendation of a five - year monitoring period is that there were no significant risks identified and as such the maximum review period can be given. In the timeframe, the education provider should have reflected and evaluated the contributions from service users. And any impact from the changes to practice–based learning to support capacity should have been adequately analysed and reflected upon.

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 2027-28 academic year.
- The issues identified for referral through this review should be carried out as outlined in Section 5.

Reason for this decision: The Panel agreed with the visitors’ recommended monitoring period, for the reasons noted through the report.

Appendix 1 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
Doctorate in Clinical Psychology (DclinPsych)	FT (Full time)	Practitioner psychologist	Clinical psychologist		01/01/1994
Doctorate in Educational, Child and Adolescent Psychology (DECAP)	FT (Full time)	Practitioner psychologist	Educational psychologist		01/01/2005