

Performance review process report – Swansea University, College of Human and Health Sciences (CHHS), 2020-21

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Executive summary

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 programme(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.

Provider and programme institution context

The education provider currently delivers six HCPC-approved programmes across three professions. The provider's programmes are within the same institution and this report focuses on the College of Human and Health Science (CHHS). Institutions within education providers are a way of grouping together programmes which share approaches linked to our institution level standards.

In the institution's last quality summary report, we noted the following relevant risks in relation to the supplementary prescribing / independent prescribing programmes (major change June 2017):

- The visitors noted potential challenges regarding the number of student admissions to the modules. The education provider has specified the number of students per module; however, this may hamstring the education provider's capacity for additional recruitment. The programme team may wish to give this some further thought, whilst ensuring that allocated module resources are

commensurate with the recruitment strategy in order to ensure HCPC standards continue to be met.

Institution performance scoring information

| Data Point | Bench- mark | Value | Score | Executive Comments |
|---|------------------------|--------------|--------------|---|
| Total intended learner numbers compared to total enrolment numbers | 342 | 178 | -0.07 | This score is below the benchmark. Primarily this has been impacted by the HCPC approved learner / cohort numbers for the prescribing programmes vs the actual number of learners recruited. The number of learners recruited for these programmes was significantly lower than the HCPC approved totals. |
| Learners – Aggregation of percentage not continuing | 6.4 | 5.1 | 0.02 | This score is positive and demonstrates the provider is performing well in this area. |
| Graduates – Aggregation of percentage in employment / further study | 95 | 99.1 | 0.05 | This score is above benchmark and demonstrates the provider is performing well in this area. |
| Teaching Excellence Framework (TEF) award | N/A | Gold | 0.00 | This is the highest level and demonstrates the provider is performing well in this area. |
| National Student Survey (NSS) overall satisfaction score (Q27) | 83.1 | 88.59 | 0.08 | This score is above benchmark and demonstrates the provider is performing well in this area. |
| Overall score | | | 0.93 | This score demonstrates the provider is performing well overall. |

The programmes considered

| Programme name | Mode of delivery | Other information |
|--|-------------------------|---|
| PGCert Non-Medical Prescribing for Allied Health Professionals | Part time | Supplementary prescribing |
| PGCert Non-Medical Prescribing for Allied Health Professionals | Part time | Supplementary / independent prescribing |
| DipHE Paramedic Science | Full time | Last intake September 2020 |
| Diploma Higher Education Paramedic Science for Emergency Medical Technicians | Part time | Last intake April 2021 |
| BSc (Hons) Paramedic Science | Full time | |
| BSc (Hons) Healthcare Science (Audiology) | Full time | |

Quality assurance assessment

The education provider was asked to provide a self-reflective portfolio submission covering the following broad topics:

| Broad portfolio area | Specific area addressed |
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| Institution self-reflection | Partnership arrangements |
| | Resourcing, including financial stability |
| | Academic and placement quality |
| | Interprofessional education |
| | Equality and diversity |
| | Horizon scanning |
| Thematic reflection | Impact of COVID-19 |
| | Use of technology: Changing learning, teaching and assessment methods |
| Sector body assessment reflection | Assessments against the UK Quality Code for Higher Education (by the relevant body in each home country) |
| | External assessment of practice education providers (for relevant programmes only) |
| | National Student Survey (NSS) outcomes – how the provider use this metric to inform development |
| | Higher education funding council for Wales (HEFCW) assessment |
| | External quality assurance review (as part of the HEFCW requirements) |
| | Other professional regulators / professional bodies |
| Profession specific reflection – SPIP / HAD / PA | Curriculum development |
| | Development to reflect changes in professional body guidance |

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| | Capacity of practice-based learning (programme / profession level) |
| Stakeholder feedback and actions | Service users and carers |
| | Learners |
| | Practice placement educators |
| | External examiners |
| Programme performance data | Comments / self-reflection on data supplied through this portfolio |

The education provider's self-reflection was focused on developments / evaluation, successes, challenges / actions relating to each portfolio areas. In some instances, the portfolio also outlined future plans. They also supplied data, supporting evidence and information.

We also considered data points as follows:

- The Higher Education Statistics Agency (HESA)
- Office for Students – Teaching Excellence Framework (TEF) outcomes / National Student Survey (NSS)

We appointed the following panel to assess the above information:

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| Nicholas Haddington | Independent prescriber |
| Gemma Howlett | Paramedic |
| Prisha Shah | Service User Expert Advisor |
| Tracey Samuel-Smith | Education Manager |
| Alistair Ward-Boughton-Leigh | Education Officer (observer) |

We reviewed a thematic and proportionate performance review of 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 to take assurance that the education provider is performing well against our standards:

- email response to questions;
- further documentary evidence; and
- the opportunity to hold a virtual meeting should it be required.

Email response to questions

This theme was related to gaining background knowledge of the funding structure; external quality assurance processes and response to COVID-19 across Wales. The visitors recognised these areas were specific to providers within Wales and required context information to ensure an appropriate review was undertaken.

Further documentary evidence

The themes were explored by visitors as part of this quality assurance activity in the following areas:

- Interprofessional learning (IPE) – within the initial portfolio the visitors had been unable to identify the provider’s reflection on IPE across the provision. However, the visitors noted the future plans for expanding IPE and the visitors further explored these comments to gain a deeper understanding in order to inform their recommendation for the next monitoring period.
- Service user and carers – how this stakeholder group was involved in the programmes, the support available to them and how their involvement had contributed to the overall quality and effectiveness of the programmes.

In addition, the service user expert advisor noted that the Strategy for Public and Patient Involvement was in line with nationally recognised key principles and included key objectives and indicators of success. However, they were unable to identify the provider’s reflection on how they were performing against this strategy.

- Practice educators – how this stakeholder group was involved in the programmes and how their involvement had contributed to the overall quality and effectiveness of the programmes. This included, how their involvement and feedback was monitored and reflected upon to demonstrate their impact on the quality.
- Learners - how this stakeholder group was involved in the programmes and how their involvement had contributed to the overall quality and effectiveness of the programmes. This included how their involvement and feedback was monitored and reflected upon to demonstrate their impact on the quality.

In addition, the visitors noted various aspects of learner feedback were not as the provider expected i.e. the level of completion of the 2021 NSS survey; decreased satisfaction rates in some areas; and learner and external examiners feedback contradicting each other.

- Decolonising the curriculum – the visitors explored the reference to this within the Equality and Diversity section of the portfolio. This was to determine whether this was a provider-wide initiative and whether they had concluded if any of the approved programmes required changes to their curriculum as a result.
- Changes to the supplementary / independent prescribing programmes – specifically around the provider’s reflections on the recent changes to the practice educator role from Designated Medical Practitioner (DMP) to Designated Prescribing Practitioner (DPP).
- Response to COVID-19 – generally, the provider’s reflections around what had worked well when adapting to the changing delivery and assessment of programmes during the pandemic and how they had decided what to keep and why. This covered academic learning and quality; assessment of learners; and the assessment and quality assurance of practice-based learning.

More specifically, this was around the workloads for the academic and professional services staff due to the adaptations of blended learning and learner support. The visitors further explored the provider's reflections on the support and continuing professional development opportunities available to support individuals during this time.

The visitors also recognised the positive reaction to COVID-19 and the speed of response to implementing the changes and explored possible areas of best practice. For example, they noted in the initial portfolio, the involvement of service user and carers as independent invigilators across the provision.

- Restructure / financial pressures – specifically, the visitors noted the Comprehensive Financial Review which provided information about the entire provider, not just the approved programmes. Within this they noted the financial pressures and changes occurring, and explored any possible impact on the approved programmes. For example, the imminent restructure and how this may impact on the approved programmes.

In addition, they noted the Operational Improvement Plan (2019) and explored how this impacted the programmes and the provider's reflections on this.

Virtual meeting (if appropriate)

The main themes identified by the visitors and agreed with the provider, which were initially thought to be best suited to a virtual meeting were:

- Private, voluntary & independent (PVI) practice-based learning – specifically around the provider's references to greater interaction with the PVI sector. The visitors explored this to determine the level of impact this may have on the programmes to better their understanding. This was to assist in the recommendation about the next monitoring period.
- Increased use of simulation – specifically around the provider's references to increased use of new technology to roll out more simulation across the programmes. The visitors explored this to determine the level of impact this may have on the programmes to better their understanding and how this might link to the financial pressures faced by the wider provider. This was also to assist in the recommendation about the next monitoring period.

During the earlier quality activities, the provider submitted sufficient documentation to provide the visitors with the information they required about these areas. A virtual meeting was therefore not required.

Quality summary

| Portfolio area | How was this area met? |
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| Partnership arrangements | Information provided through the portfolio submission demonstrated the strong partnerships in place with key stakeholders – Health Education and Improvement Wales (HEIW), NHS Wales, Welsh Ambulance Service Trust |

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| | <p>(WAST), Health Inspectorate Wales and relevant health boards. This demonstrated the arrangements are productive and positive to ensure the strategic plans / measures are in place to ensure the programmes are fit for purpose.</p> |
| Resourcing, including financial stability | <p>The visitors received the Comprehensive Financial Review and the Operational Improvement Programme (2019) which outlined the imminent provider restructure which is occurring as a result of financial pressures. In clarifying that all learners for the approved programmes are commissioned by HEIW, the provider outlined how the funding streams for these programmes are protected. Therefore the pressures which may exist on other programmes outside of the CHHS, do not apply. The visitors appreciated, and were satisfied, with this clarity and took assurance this would mitigate any risks to the resourcing of the approved provision.</p> <p>However, the visitors felt there was a risk should there be impacts on the wider professional services staff who assist with the administrative running of the programmes. This is explored in more detail in the 'Risks' section of the report.</p> |
| Academic and placement quality | <p>The visitors explored learner, practice educator and service user and carer involvement as part of the quality activity to contribute to their consideration of the overall quality and effectiveness of the programmes. From this (outlined elsewhere in the Quality Summary), the visitors considered whether their involvement and contributions were appropriate to the delivery of the programmes.</p> <p>The visitors recognised the role that HEIW has undertaken in recommissioning the programmes. They also recognised the quality enhancement review undertaken in November 2020 by Quality Assurance Agency (Wales) which resulted in no recommendations for approval and a number of commendations.</p> <p>The provider also outlined the role that Health Inspectorate Wales (HIW) plays, as the independent inspectorate and regulator of healthcare in Wales. HIW conduct inspections of health boards / trusts and, if any issues are identified, the practice education providers share these through strategic and operational engagement with the provider.</p> <p>In addition, reflection provided throughout the submission, such as in the 'All Wales' response to COVID-19; range of learner feedback opportunities; external involvement; and review of academic and placement quality, provided the visitors with the assurance the education provider is performing well in this area.</p> |
| Interprofessional education | <p>Following their exploration of the provider's reflection on their performance relating to this area during the quality</p> |

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| | <p>activity, the visitors received a detailed reflection on how IPE had been undertaken across the programmes. For the hearing aid dispensing and supplementary / independent prescribing programmes, it was clear that IPE was inherent to the programmes. This was due to the shared learning / generic modules across other professions or the range of learners undertaking the programme. These continued throughout COVID-19 and have allowed learning with, and from, other professions.</p> <p>For the paramedic programme, the provider continues to look for opportunities to develop IPE. For example, learners on year 1, were given the opportunity to participate in pilot IPE clinical Zoom meetings where an academic played the role of a patient. The provider is currently exploring how these sessions can be scaled up to ensure all learners experience this learning. This detailed narrative provided the visitors with the assurance that IPE is being delivered appropriately so learners can learn with, and from, other professions.</p> <p>In terms of future IPE, the visitors received a detailed narrative explaining how, contextually, IPE would be clearly developed from a strategic viewpoint. Specific examples were provided of strategic IPE requirements together with specific examples and operational pilots within particular programmes. The visitors believed these plans were realistic and sensible. The visitors considered it was encouraging to see the overall strategy outlining concepts and then, how this will be rolled out across programmes. The visitors recognised how this moved the development of IPE away from programme siloes to a more strategic approach. This demonstrated a good understanding of current and important clinical practice and how programmes should evolve.</p> <p>The visitors also recognised the positive feedback received from learners about the integrated IPE approach and consider this an example of best practice. This is explored in more detail in the 'Best practice' section below.</p> |
| Equality and diversity (EDI) | <p>The visitors received the provider's overall strategy and examples of how this is being taken forward by individual programmes (such as the paid internship for the paramedic programme). The visitors recognised that all programmes had "bought in" to this strategy and that it was linked to the overall vision of the provider. The visitors considered the providers is performing well in relation to EDI and ensuring the programmes reflect this appropriately.</p> |

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| | <p>The visitors also noted the explanation received through the quality activity about ‘decolonising the curriculum’ and considered that they did not need to explore this further as it has no impact on how the learners meet the standards of proficiency.</p> |
| Horizon scanning | <p>The visitors recognised the strategic backing relating to horizon scanning which all the programmes had clearly bought into. For example, this was demonstrated by the paid internship for the paramedic programme and other programmes which are being developed to replace the closing DipHE paramedic programmes. As part of exploring the restructure / financial pressures, the visitors had identified how the funding for the programmes were protected as they are commissioned by HEIW.</p> <p>They also noted that one of the requirements of the HEIW recommissioning bid was to increase the focus on IPE and the changes the provider is planning to make in response to this. Please see the earlier section for further information about this aspect.</p> <p>The visitors therefore considered the provider was performing well in this area.</p> |
| Impact of COVID-19 | <p>The visitors noted the ‘All Wales’ response to COVID-19. At part of this, the Welsh Government made arrangements with all the universities in Wales, health boards and WAST to ensure learners could support NHS Wales through the first wave of COVID-19. For example this meant that, where appropriate, final year learners could be paid as band 4 staff whilst continuing with their practice placement learning.</p> <p>As part of this, the visitors noted the speed of introducing new and appropriate methods of delivery and assessment. For example, recording the paramedic OSCE as part of a flipped classroom and recording sessions so learners can access them asynchronously for the hearing aid programme. The provider reflected upon the changes to determine which were effective, supportive and should be kept when programmes start to move back to ‘normal’ service. The provider also demonstrated how they had provided appropriate support to academic and professional services staff. The visitors were satisfied the provider responded to the challenges during the pandemic. They did this by appropriately developing their provision so that learners were able to gain the required learning, and be assessed appropriately, so they could continue to meet the standards of proficiency.</p> |
| Use of technology: changing learning, | <p>The visitors considered the provider’s changing use of technology in delivery, practice-based learning and assessment. Further details about changes the provider has</p> |

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| teaching and assessment methods | made to enhance their use of technology can be found elsewhere within this report against the following sessions – Impact of COVID-19; interprofessional learning; increased use of simulation; and service user and carer involvement. The visitors were satisfied the provider had appropriately assessed these changes to determine which should remain in place. |
| Assessments against the UK Quality Code for Higher Education (by the relevant body in each country) | The visitors noted the outcome of the Quality Assurance Agency (Wales) quality enhancement review in November 2020. This had been deferred from March 2020 as a result of COVID-19. The visitors noted the positive outcomes meaning the provider meet the requirements of the European Standards and Guidelines for internal quality assurance; and the relevant baseline regulatory requirements for QAA (Wales). There were no recommendations for approval and a number of commendations. The visitors considered the provider was performing well in this area. |
| External assessment of practice education providers | The visitors received clarification about the role of HIW within the submission. Further details about the assurance taken by the visitors about how HIW monitor practice-based learning can be found in the following sections of the quality summary – academic and placement quality; and horizon scanning. In addition, the visitors noted the reflection from the providers own monitoring processes, and were confident that the external assessment of practice education providers is appropriate. |
| National Student Survey (NSS) outcomes | Within the portfolio, the provider submitted a good overview of the course specific issues, concerns and an overview of how they plan to overcome these. This demonstrated to the visitors that the provider had undertaken a good account of the process; engaged with and assessed the outcomes (both positive and negative); and had an appropriate action plan in place. The visitors considered the provider was performing well in this area. |
| Higher Education funding Council for Wales (HEFCW) assessment and external quality review | <p>From the visitor’s assessment of the portfolio, they noted that no formal assessment by HEFCW had taken place over the timeframe under consideration. However, the provider had continued to submit the annual fee and Access Plan.</p> <p>Regarding the external quality review, the visitors noted the results of the quality enhancement review undertaken in November 2020 by Quality Assurance Agency (Wales). Please see the earlier section (assessments against the UK Quality Code for Higher Education) in the quality summary for further information.</p> <p>The visitors therefore considered the provider was engaging appropriately and effectively with HEFCW and QAA (Wales).</p> |

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| <p>Other professional regulators / professional bodies</p> | <p>From the submission, the visitors noted the hearing aid dispensing and supplementary / independent prescribing programmes were due to be reaccredited over the summer of 2021 by the relevant professional body / regulator. These processes were due to occur outside of the review period covered by this report.</p> <p>While no information was included in the portfolio regarding the paramedic programmes relating to the professional body accreditation, it is important to note the current situation regarding the approval of these programmes with the HCPC. The portfolio discussed the approval of the BSc (Hons) Paramedic Science programme by ourselves (first intake September 2020); that the DipHE paramedic programmes were shortly closing; and the approval of the new BSc (Hons) Paramedic Science for Emergency Medical Technicians programme. This latter programme has been assessed separately via the approval process and was considered at the 2 November 2021 Education and Training Committee and approved.</p> <p>From the visitors' assessment of the portfolio, they were satisfied the provider is engaging appropriately and effectively with the relevant professional bodies and regulators.</p> |
| <p>Curriculum development</p> | <p>Within the portfolio, the visitors recognised the status of the paramedic programmes (please see the above section for further information about this). This means that the BSc (Hons) Paramedic Science programme has only been open to new intakes for one year. In that time, there have been no significant changes to the curriculum, other than those needed to deliver / assess learning outcomes differently due to COVID-19.</p> <p>For the hearing aid dispensing and supplementary / independent prescribing programmes, the visitors noted that no significant professional body changes to curriculum guidance had occurred. However, they recognised that changes had been made to the curriculum to, for example, incorporate compassionate leadership to the hearing aid dispensing programme. This was as a result of a key theme introduced by HEIW. For the supplementary / independent prescribing programme, the programme introduced a remote consultation session.</p> <p>Through the provider's reflection on the impact of COVID-19 and wider portfolio, the visitors were satisfied that appropriate and effective curriculum developments had been implemented to ensure the continued delivery of programmes were fit for purpose.</p> |

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| <p>Development to reflect changes in professional body guidance</p> | <p>The paramedic programme was approved in 2020 and the visitors recognised there have been no changes to the professional body guidance since then. The visitors also recognised the provider’s reasonable assessment of the current situation for the hearing aid dispensing programme. This demonstrated to the visitors, that the provider was performing appropriately in this area.</p> <p>The education provider demonstrated their understanding of relevant issues relating to the new requirements for supplementary / independent prescribing programmes i.e. the new criteria for practice educators. They also outlined the steps to manage the transition of the process. The visitors felt there was limited reflection within the portfolio of how well this had happened but considered the provider had appropriately mitigated for any potential problems which may arise.</p> |
| <p>Capacity of practice-based learning (programme / profession level)</p> | <p>Information provided through the portfolio submission demonstrated the strong partnerships in place to determine the capacity of practice-based learning and funding of learners. For example, HEIW, NHS Wales, WAST and relevant health boards. This provided the visitors with the assurance that practice-based learning capacity would ensure all learners gained appropriate experience in a safe and supportive environment.</p> <p>Across the professions, the visitors noted the good working practices in place to ensure sufficient and relevant practice-based learning is delivered in an appropriate and effective manner. The visitors also noted, for the supplementary / independent prescribing programmes, how practice-based learning was considered as part of the admissions process. The visitors therefore considered the provider was performing well in this area.</p> |
| <p>Service users and carers</p> | <p>The visitors received the “CHHS PPI involvement annual report” which provided a clear and strategic understanding of what is required, and happening, across the institution. The visitors recognised this helps to ensure the key elements of service user and carer involvement is included across the institution. The report also provided examples of how service users and carers were involved and included specific feedback from the individuals involved.</p> <p>In addition, the visitors noted the strengthened involvement of service users and carers during COVID-19. The visitors also recognised the support provided to ensure service users and carers could continue to be involved. Further information about this can be found below in the ‘Best practice’ section below.</p> |

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| | This demonstrated the provider is performing well in this area. |
| Learners | <p>The provider reflected on the low numbers of learners feeding back via the NSS. The provider reflected on the anecdotal feedback that learners were focussing on adapting to remote working rather than considering being engaged in the survey. The visitors appreciate this may be due to the influence of COVID-19 over the last 18 months. They also appreciated why the hearing aid dispensing programme may not have received a score as there were only 8 learners on the programme. If feedback is below a certain level, the NSS will not process the data to ensure learner anonymity.</p> <p>However the visitors recognised that the overall score provided by the NSS, demonstrated the provider had scored above the benchmark in terms of overall learner satisfaction. In addition, the visitors recognised the variety of other opportunities to gain learner feedback to ensure triangulation of feedback and the range of actions undertaken as a result. This demonstrated to the visitors that learner involvement in the programmes is appropriate, considered appropriately and acted upon.</p> <p>The visitors noted the risk associated with the contradictions between the learner and external examiner feedback around the level of assignment feedback. More information about this can be found below in the 'Risk' section.</p> |
| Practice placement educators | Based on their exploration of how practice educators contributed to the ongoing quality and effectiveness of the programmes, the visitors appreciated and noted the additional explanation provided. This demonstrated how practice educators were involved across the programmes and how their involvement has been reflected upon to show what has been effective and important to note going forward. The education provider outlined how, for each of the professions, there is a key relationship between practice placement providers / educators to ensure delivery and appropriate placements. This demonstrated practice educator involvement in the programmes is appropriate, considered effectively and acted upon. |
| External examiners | The visitors recognised the involvement of external examiners across the programmes and the positive feedback provided, especially in response to the transition of blended learning and continued support during COVID-19. |
| Comments / self-reflection on data supplied through this portfolio | The provider recognised the impact of COVID-19 on the running of the programmes and the provider's reflection on how this had not negatively impacted learner recruitment, achievement, progression or completion. They also recognised the commitment of the staff, strong relationship |

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| | working and speed of the changes made to ensure the delivery of teaching and assessment continued to be effective and appropriate. This ensured the programmes continue to deliver the relevant standards of proficiency to ensure graduates are fit to practice. |
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Risks

Learner feedback

The visitors noted that learner involvement in the programmes is appropriate, considered appropriately and acted upon. Within the portfolio, the visitors recognised the provider’s explanation about how they do not rely solely on one method of feedback, rather they use a range of opportunities and triangulate feedback. They also demonstrated a range of actions taken as a result of the learner feedback.

However, the visitors also recognised the provider’s comments about the contradictions regarding the level of assessment feedback. For example, between the learners’ poor rating and good practice identified by the external examiners. The visitors recognised this could be a result of COVID-19. However, they remained unclear whether the provider had specifically considered or, addressed the difference in, the feedback to determine possible underlying causes and actions.

To mitigate for this risk, we can ask for more specific reflections from the programme team through the next monitoring cycle to understand how they have considered the underlying reason for the difference, any actions taken and how these have performed over the period.

With these mitigations in place and, due to the wide range of feedback methods in place, the visitors considered this to be a low risk. They did not consider this was one which presented a reason to consider the standards of education and training would not continue to be met or, that graduates could not meet the standards of proficiency.

Financial security – restructure

The visitors noted the imminent provider wide restructure due to financial pressures and reviewed the profession specific reflections and confirmation of security about the approved programmes. The visitors appreciated this confirmation, though considered there may be risks to the wider administrative structures within the provider (i.e. admissions) which support the approved programmes and which may be impacted by the restructure / financial pressures.

To mitigate for this risk, we can ask for more specific reflections from the programme teams through the next monitoring cycle to understand any impacts on the wider administrative functions and if they have impacted upon the approved programmes.

The visitors considered that while this may have a low impact on a small number of standards of education and training, there would be no risk to graduates being able

to meet the standards of proficiency.

Private, Voluntary and Independent (PVI) practice-based learning

The education provider confirmed that, from September 2022, they plan to incrementally develop the involvement of PVI practice-based learning across the approved programmes. The visitors recognised the established quality assurance and management process in place to monitor and assess practice-based learning which they considered would mitigate the risks associated with moving into these new areas.

The visitors recognised that the provider had not yet fully developed their plans for increasing the level of involvement and therefore the visitors were unclear of the speed of introduction or any potential impacts this may have on the programmes. The visitors therefore considered the provider monitors this and, if necessary, discusses any significant impacts on the programmes with the HCPC prior to the next monitoring period.

The visitors do not consider this risk presents a reason to require any further regulatory intervention at present.

Teaching methods - simulation

The education provider confirmed they plan to increase the use of simulation across the programmes. The visitors recognised the established quality assurance processes in place to monitor and assess teaching methods.

The visitors recognised that the provider had not yet fully developed their plans for increasing the use of simulation. Therefore the visitors were unclear of the speed of introduction or how the provider would scale up activities in this area across the large learner numbers. If necessary, the visitors therefore considered the provider monitors this and discusses any significant impacts on the programmes with the HCPC prior to the next monitoring period.

The visitors do not consider this risk presents a reason to require any further regulatory intervention at present.

Best practice

The visitors identified the following areas of good practice:

- The provider's positive reaction to COVID-19. This includes the speed of implementing their changes and how they have considered those adaptations which have been particularly effective and supportive and can be taken forward.
- The visitors wished to highlight the strengthened involvement of service users and carers during COVID-19. For example, service users and carers being involved as independent invigilators. The visitors also recognised the support

provided to ensure that service users and carers could continue to be involved. For example, the provider arranged formal role play training via a role play theatre company. Overall, feedback from service users and carers has been positive and they have been able to work more flexibly.

- The visitors recognised the integrated approach to IPE which resulted in very positive feedback from learners regarding the supplementary / independent prescribing programmes. The visitors also recognised the plans of the provider to develop IPE across the curriculums as part of the HEIW recommissioning process.
- The visitors noted how the practice educators had been involved and how their involvement had been reflected upon to show what had been effective and important to note for the provider to take forward in the future. These had led to demonstrable improvements and developments. The visitors wished to highlight the development of the paramedic secondment through whole scale strategic backing and the level extent of relationship building.

Recommendation:

The visitors made the following recommendations to the Education and Training Committee:

- The institution and its programmes should remain approved
- The education provider's next engagement with the performance review process should be in 5 years (the 2025-2026 academic year)

Decision

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](#).

Decision on approval

- We will record the decision of the Education and Training Committee here following their meeting on 7 December 2021.