Approval process report

University College London, Independent and Supplementary Prescribing, 2022-23

Executive Summary

This is a report of the process to approve a programme at University College London. This report captures the process we have undertaken to date to assess the institution and programme(s) against our standards, to ensure those who complete the proposed programme(s) are fit to practice.

health & care professions council

We have;

- Reviewed the institution against our institution level standards and found our standards are met in this area.
- Reviewed the programme against our programme level standards and found our standards are met in this area following exploration of key themes through quality activities and clarifications.
- Recommended all standards are met, and that the programme should be approved.

Through this assessment, we have noted:

• The programme meets all the relevant HCPC education standards and therefore should be approved.

	N/A The approval / consideration for approval was not referred from another process.					
Decision	The Education and Training Committee (Panel) is asked to decide:whether the programme is approved.					
Next steps	 Subject to the Panel's decision, we shall update the education provider on the status of the case and the panel's decision. Should the panel agree with the visitors recommendation for approval, the proposed programme will be approved and learners will commence on the programme in September 2024. 					

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Section 1: About this assessment

About us

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

This is a report on the approval process undertaken by the HCPC to ensure that the programme(s) detailed in this report meet our education standards. The report details the process itself, evidence considered, outcomes and recommendations made regarding the programme(s) approval / 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 <u>approved on an open-ended basis</u>, subject to ongoing monitoring. Programmes we have approved are listed <u>on our website</u>.

The approval process

Institutions and programmes must be approved by us before they can run. The approval process is formed of two stages:

• Stage 1 – we take assurance that institution level standards are met by the institution delivering the proposed programme(s)

• Stage 2 – we assess to be assured that programme level standards are met by each proposed programme

Through the approval process, we take assurance in a bespoke and flexible way, meaning that we will assess whether providers and programmes meet standards based on what we see, rather than by a one size fits all approach. Our standards are split along institution and programme level lines, and we take assurance at the provider level wherever possible.

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

How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint <u>partner visitors</u> 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 <u>on our website</u>.

The assessment panel for this review

Rosie Furner	Lead visitor, Independent Prescriber, practitioner
Gemma Howlett	Lead visitor, Paramedic, Educationalist
Alistair Ward-Boughton-Leigh	Education Quality Officer

We appointed the following panel members to support this review:

Section 2: Institution-level assessment

Executive-led assessment is appropriate for stage 1 in this case.

There do not appear to be any unusual features of the proposed apprenticeship programme, and this is not a new provider or a non-traditional provider.

Physiotherapy is not new provision at UCL. There is an existing BSc (Hons) Physiotherapy and the proposed apprenticeship builds on the structures and approaches of that programme.

The approval request form (ARF) supplied by the education provider suggests that the institution-level standards are likely to be met in a similar way on the new programme as they are on the existing programme, and on the HCPC-approved provision at UCL more broadly.

To judge by the information available, there are no plans to meet any institution-level standards in significantly different ways.

There is also no need to request further information to support stage 1. We have sufficient information to determine that the stage 1 standards are met.

The education provider context

The education provider currently delivers 13 HCPC-approved programmes across six professions. It is a Higher Education Institution and has been running HCPC approved programmes since 1993.

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 <u>Appendix 1</u> of this report.

	Practice area	Delivery level	Approved since	
	Chiropodist / podiatrist	⊠Undergraduate	□Postgraduate	1993
	Dietitian	□Undergraduate	⊠Postgraduate	2021
Hearing Aid Dispenser		⊠Undergraduate	⊠Postgraduate	2003
	Orthoptist □U		⊠Postgraduate	2021
	Practitioner psychologist	□Undergraduate	⊠Postgraduate	1995
	Speech and language therapist	⊠Undergraduate	⊠Postgraduate	2000

Institution performance data

Data is embedded into how we understand performance and risk. We capture data points in relation to provider performance, from a range of sources. We compare provider data points to benchmarks, and use this information to inform our risk-based decisions about the approval and ongoing approval of institutions and programmes.

This data is for existing provision at the institution, and does not include the proposed programme(s).

Data Point	Bench- mark	Value	Date	Commentary
Total intended learner numbers compared to total enrolment numbers.	192	467	2023	The benchmark figure is data we have captured from previous interactions with the education provider, such as through initial programme approval, and / or through previous performance review assessments. Resources available for the benchmark number of leaners was assessed and accepted through these processes. The value figure is the benchmark figure, plus the number of learners the provider is proposing through the new provision. The value is far higher than the benchmark. We are currently evaluating this through our focused review process. This process is ongoing, and we expect this to be concluded before the end of this academic year.
				aware for consideration as part of their review.

Learners – Aggregation of percentage not continuing.	3%	1%	2019-20	This data was sourced from a data delivery. This means the data is a bespoke HESA data return, filtered bases on HCPC-related subjects. The data point is below the benchmark, which suggests the provider is performing above sector norms. When compared to the previous year's data point, the education provider's performance has roughly been maintained but has dropped by 1%.
Graduates – Aggregation of percentage in employment / further study	94%	92%	2019-20	This data was sourced from a data delivery. This means the data is a bespoke HESA data return, filtered bases on HCPC-related subjects. The data point is below the benchmark, which suggests the provider is performing below sector norms. When compared to the previous year's data point, the education provider's performance has dropped by 3%. The visitors were made aware of this for consideration as part of their review.
National Student Survey (NSS) overall satisfaction score (Q27)	76.7%	77.6%	2022	This National Student Survey (NSS) positivity score data was sourced at the subject level This means the data is for HCPC-related subjects. The data point is broadly equal to the benchmark, which suggests the provider's performance in this area is in line with sector norms. When compared to the previous year's data point, the education provider's

				performance has roughly been maintained, improving by less than 1%. The visitors were made aware of this prior to their review.
HCPC performance review cycle length	N/A	N/A	03.11.20 23	The education provider recently engaged with our performance review process for the first time (in academic year 2022-23). The outcome of this review granted an ongoing monitoring period of 3 years. Therefore, they will next go through the performance review process in academic year 2025-26.

The route through stage 1

Institutions which run HCPC-approved provision have previously demonstrated that they meet institution-level standards. When an existing institution proposes a new programme, we undertake an internal review of whether we need to undertake a full partner-led review against our institution level standards, or whether we can take assurance that the proposed programme(s) aligns with existing provision.

As part of the request to approve the proposed programme(s), the education provider supplied information to show alignment in the following areas.

Admissions

Findings on alignment with existing provision:

• Information for applicants –

- The education provider has discussed the institution-wide policies they have in place for admissions. These are available on their website and accessible for prospective applicants.
- The education providers' academic manuals set out their policies on recruitment and admissions and are also available via their website. These policies state that all applicants must undertake an enhanced Data and Barring Service (DBS) check prior to enrolment.
- In addition to their application, applicants must also submit additional documents which are checked to ensure their eligibility for the programme. This requirement is also set out in their online policies.
- Assessing English language, character, and health
 - Applicants applying for this programme are already registrants and because of this, their English language will not need to be assessed.

Learners will not undertake practice-based learning as part of the programme and would be expected to be practising clinicians having also completed an occupational/health check with their employer.

- The education provider has institution-wide policies in place defined as the UCL English Language requirement. This is set out in their academic manual and details how learners from non-English speaking majority countries are required to provide evidence of English language proficiency.
- This aligns with our understanding of how the education provider performs based on their running of their existing programmes.
- Prior learning and experience (AP(E)L) -
 - The education provider has an institution-wide policy in place for recognition of prior learning, and this applies to their existing provision. Their Recognition of Prior Learning (RPL) policy is set out in the University College of London's (UCL) Academic Manual.
 - Recognition of prior learning will be considered where appropriate on a case-by-case basis.
 - This aligns with our understanding of how the education provider performs based on their running of their existing programmes.
- Equality, diversity and inclusion
 - The education provider has referred to the UCL Equal Opportunities Policy and the QAA Quality Code for higher education as being in place and being followed. This policy aims to ensure equality, diversity and inclusion across their provision and applies to all staff and learners. The Policy for this area is set at the institution level as part of UCL's guidance principles and is available on the education providers website.
 - This policy applies to the recruitment of learners on their programmes and aims to ensures applicants will not be discriminated based on protected characteristics. This includes gender, race, ethnicity, nationality (within current legislation), disability, sexual orientation, marital status, caring or parental responsibilities, age or beliefs on any matter such as religion or politics. The education provider ensures that its policy is implemented and monitored at an institutional and individual level. Each department has an Equality, Diversity and Inclusion team who distribute information and organise relevant training for staff.
 - The education provider stated that the recruitment of international students is undertaken with reference to the UK Council for International Student Affairs (UKCISA) Code of Practice.

These policies and procedures apply at institution level and will apply to the proposed programme.

Non-alignment requiring further assessment: None.

Management and governance

Findings on alignment with existing provision:

- Ability to deliver provision to expected threshold level of entry to the Register¹ –
 - The education provider has referred to their existing accredited independent prescribing programme they currently deliver. This is the General Pharmaceutical Council (GPhC) accredited Clinically Enhanced Pharmacist Independent Prescribing (CEPIP). They stated that information and best practice will be shared between departments where appropriate for non-Pharmacist programmes.
 - The education provider has also stated that learners will undertake a range of appropriate assessments to test their competencies. This ensures upon successful completion of the programme, learners are qualified and considered as independent prescribers.
 - This aligns with our understanding of how the education provider delivers their existing provision and will apply to the proposed programme.
- Sustainability of provision
 - The education provider has appropriate processes in place to ensure the sustainability of their programmes. The Director of Education and Institute department are responsible of the management of programmes through an annual resource planning cycle which monitors learner numbers, staff rotations and resources. These processes ensure learners have appropriate support and supervision.
 - This aligns with our understanding of how the education provider runs their existing provision and will apply to the proposed programme.
- Effective programme delivery
 - The education provider has referred to their 'UCL Arena Centre' (the Arena) and its provision of programme and module design support to ensure thorough planning and effective delivery of modules and programme. The UCL Arena Centre is a facility within the education provider's management structure which supports the development of new programmes and modules. It is also by programme staff to redesign existing programmes and modules. The Arena supports programme staff to review the design of programmes, writing programme content and module learning outcomes and developing assessment strategies.
 - The education provider has also referred to their online prospectus in ensuring effective programme delivery. This is available and accessible? for learners and prospective learners.
 - The programme will be delivered wholly online, except for four days when a masterclass and workshop session will take place. This is something we shall highlight to the visitors and assess as part of stage 2 of this case. We shall highlight this so that the visitors can assess and ensure the appropriateness of running the programme this way.

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

• Effective staff management and development -

- The education provider has policies in place to manage the professional developments of their staff as part of their UCL Arena. This includes mandatory courses for new lecturers and supervisors.
- They have processes in place which enables new programmes to be supported by a dedicated Senior Teaching and Learning Administrator. They utilise an Annual Continuous Education Review (ACER) system to oversee staff management and development by monitoring programme performance across teaching, learning, assessment, student environment, engagement, and attainment domains.
- This aligns with our understanding of how the education provider runs their existing provision and will apply to the proposed programme.
- Partnerships, which are managed at the institution level -
 - The education provider has discussed their partnership with Moorfields Eye Hospital NHS Trust. They have agreements and a memorandum of understanding. Memorandums of understanding are also in place with University College London Hospitals NHS Trust and Great Ormand Street Hospital NHS Trust. The education provider has discussed these partnerships as being managed at the institutionallevel and may be utilised to support the introduction of the new programme.
 - The education provider clarified that the proposed program isn't explicitly outlined in the partnership agreements. Additionally, they may selectively use teaching space to create a more unique experience. The provider also has an existing 'Academic Partnerships Framework' in place that constitutes how partnerships are managed. This will remain in place and apply to the new programme.

Non-alignment requiring further assessment: We are referring one matter to stage 2 of this approval process. This refers to the online delivery of much of the programme. We are referring this to stage 2 so that the visitors on this case can assess the appropriateness and effectiveness of delivering the programme this way.

Quality, monitoring, and evaluation

Findings on alignment with existing provision:

- Academic quality
 - The education provider has institution-wide policies in place for ensuring academic quality. These are set out in their academic manual's sections on Programme and Module Approval and Amendment Framework.
 - The education provider also explained how the proposed programme has been audited and approved internally by them. It has also been externally reviewed by an external examiner from another education provider.

- Ongoing academic quality is monitored through the departmental quality assurances processes.
- This aligns with our understanding of how the education provider runs their provision? based on the running of their existing programmes.
- Practice quality, including the establishment of safe and supporting practice learning environments –
 - The education provider has referred to their existing Equal Opportunities and Safeguarding policies that are in place and apply to their existing provision. This contains several measures and actions that fall into three categories:
 - Safeguarding children and adults at risk policy and procedure. The education provider is committed to safeguarding the safety and wellbeing of vulnerable groups involved in their activities. This policy provides guidance to all UCL staff and learners on the expected standard behaviour when working with children, young people and vulnerable adults. Learners on this programme will be practising clinicians who would have already completed mandatory safeguarding training with their employers to meet this requirement.
 - Prevent duty. This is a result of the 'Counter-Terrorism Act 2015' and creates a statutory duty for UCL to "have due regard to the need to prevent people from being drawn into terrorism". Their approach is to focus on ensuring the safety and wellbeing of learners and staff. They balance this duty against their commitment to freedom of speech and other key legislation. In addition, learners on the programme will be practising clinicians who have already completed Prevent mandatory training with their employers.
 - DBS check and criminal convictions policy. This outlines the use of DBS checks and recruitment of staff or volunteers with criminal convictions or those who are barred from working with vulnerable adults.
 - These policies are already in place across the providers existing provision. The described mechanisms will apply 'as is' to the proposed programme.

• Learner involvement –

- Learner involvement is legislated and managed through several existing mechanisms. This includes their "You Shape UCL" and "Continuous Module Dialogue (CMD)" procedures.
- The education provider has their which allows for learner representatives to be appointed for each programme. These representatives can feedback on the programme on a termly basis via the Staff-Student Consultative Committee meetings.
- The polices in place apply to existing provision and will apply to the proposed programme. The education provider has stated that these policies will be applied in its present condition.

- Service user and carer involvement
 - The education provider has stated that service users in the form of patients and carers participated in the development of the programme. They will also take part in the formative and summative assessment of the programme as 'expert patients' for simulations.
 - The education provider has also stated that the programme has an extensive work-based component and patients are integral in the dayto-day clinical practice of student prescribers. Patients' consent will be obtained in line with individual Trust policies for learner practitioners and all safeguarding policies adhered to.
 - This aligns with our understanding of how the education provider performs based on their running of their existing programmes. This is an area being assessed as part of their ongoing performance review case.

Non-alignment requiring further assessment: None

Learners

Findings on alignment with existing provision:

- Support
 - The education provider has discussed the various polices and support mechanisms that are in place and will be utilised to support learners. This includes support from staff in the form of personal tutoring. Learners will be supported by a wide team of staff across different disciplines, including administrators, academics, clinicians and their personal tutor
 - Student Support and Wellbeing services are also in place and provide support for learner's wellbeing. They are also in place to provide additional support for learners with a disability and can provide more support from the Summary of Reasonable Adjustments and Special Exam Arrangements procedures.
 - The education provider has an extenuating circumstances policy. This means learners can apply for mitigation for events which are deemed "sudden, unexpected, significantly disruptive and beyond your control and which may affect their performance at summative assessment".
 - This aligns with our understanding of how the education provider performs based on their existing provision and utilising existing mechanisms.
- Ongoing suitability -
 - The education provider has existing policies and procedures in place that will assess ongoing suitability. These are set out in their academic manual and are applied as part of their admissions on their programmes processes. Faculties are responsible for the application of these policies and ensuring ongoing suitability of learners. The education provider sets expectations at the institutional level that

Faculties or departments may publish local Fitness to Practise policies covering learners on professional placements on their programmes. The faculty is responsible for ensuring that these policies are communicated to the leaners which are affected.

- The education provider sets expectations at an institutional level that learners registered on programmes leading to membership of a professional body should demonstrate appropriate behaviour and standards required for entry into that profession. Alleged misconduct which may be judged to fall short of the professional codes of conduct will be considered under the relevant Fitness to Practise Procedure.
- The education provider has also stated that designated prescribing practitioners or designated medical practitioners will be nominated by the learners. They will meet regularly and provide formative assessments which will inform learner ongoing suitability for the programme. The education provider also utilised the quality review framework to ensure ongoing suitability.
- Learning with and from other learners and professionals (IPL/E) -
 - The education provider has stated that the aim of this programme is to prepare suitably qualified registrants to become safe and competent non-medical prescribers.
 - Additionally, as part of the proposed 90 hours of supervised learning in practice, learners will be encouraged to use some of this time to learn from other members of the multi-disciplinary team. This could include pharmacists and medical doctors.
- Equality, diversity and inclusion -
 - The education provider has existing policies in place that apply to their existing provision to ensure equality, diversity and inclusion. This includes their equal opportunities policy and their student support and wellbeing services. The education provider has stated that the institution-wide policies will be applied.
 - This includes the commitment of UCL in fostering a positive culture. This is where all staff, learners and visitors can flourish without the fear of being stigmatised or feeling they need to conceal elements of their identity.
 - This aligns with our understanding of how the education provider performs as these policies are already in place and being used in their existing provision.

Non-alignment requiring further assessment: None

Assessment

Findings on alignment with existing provision:

• Objectivity –

- The education providers "Assessment Framework for Taught Programmes" as set out in their academic manual ensures the objectivity of assessments.
- This is a provider-wide policy and will apply as is. This will cover delivery, marking and assessment of all course assessments to ensure no bias or discrimination.
- This aligns with our understanding of how the education provider performs based on the running of their existing programmes.
- Progression and achievement
 - Progression and achievement are covered in their academic manuals' section titled "Progression & Award". This is a provider-wide policy. This policy will apply to the new programme and already applies to their existing provision.
 - This aligns with our understanding of how the education provider performs based on their baseline document and their reflections within their performance review.
- Appeals
 - The education providers policies in relation to appeals is set out in their academic manual and is already applied to their existing provision.
 - They have also stated that there are no exit awards as part of the programme.
 - This aligns with our understanding of how the education provider performs, as they are utilising existing policies with the programme level difference regarding the exit award policy.

Non-alignment requiring further assessment: We are referring one matter from stage one of the process to stage two. The relates to the effective delivery of the programme. The provider has stated that this programme will be delivered almost entirely online aside from a four-day period of masterclasses and workshops. Stage one relates to institution-level standards, this relates more to programme structure. We shall therefore look at this as part of stage two.

Outcomes from stage 1

We decided to progress to stage 2 of the process without further review through stage 1, due to the clear alignment of the new provision within existing institutional structures, as noted through the previous section.

We are referring one matter from stage one of the case to stage two. This relates to the effective delivery of the programme. The education provider has stated that this programme will be delivered almost entirely online aside from four days. We shall assess this as part of stage two as it relates to a programme-level analysis. Stage one is more concerned with programme-level standards.

Section 3: Programme-level assessment

Programmes considered through this assessment

Programme name	Mode of study	Profession (including modality) / entitlement	Proposed learner number, and frequency	Proposed start date
PCGert in Independent and Supplementary Non Medical Prescribing with Enhanced Clinical Assessment	PT (Part time)		15 learners, 1 cohort	25/09/2023

Stage 2 assessment – provider submission

The education provider was asked to demonstrate how they meet programme level standards for each programme. They supplied information about how each standard was met, including a rationale and links to supporting information via a mapping document.

Quality themes identified for further exploration

We reviewed the information provided and worked with the education provider on our understanding of their submission. Based on our understanding, we defined and undertook the following quality assurance activities linked to the quality themes referenced below. This allowed us to consider whether the education provider met our standards.

We have reported on how the provider meets standards, including the areas below, through the <u>Findings section</u>.

Quality theme 1 – Process for ensuring the curriculum remains relevant to current practice.

Area for further exploration: We have found the information supplied by the education provider to be detailed, comprehensive to demonstrate a curriculum in place relevant to current practice. However, limited reference or examples of the processes they have in place to ensure this remains relevant going forward. It is important a system is in place to review and assess their curriculum to ensure it remains up to date and relevant to current practice. The risk identified is that the provision will not remain up to date to changes in the wider sector. It is important that a robust system is in place for HCPC-approved programmes curricula to remain relevant and up to date. We therefore asked the education provider to submit details of the process / system in place to review and monitor their curriculum and implement changes / updates where necessary.

Quality activities agreed to explore theme further: We determined the most appropriate way to explore this would be to allow the education provider to submit further information. This could come in the form of polices and internal documentation they have in place or in the form of a narrative explanation. We found this to be the best way to explore this as it gives the education provider the flexibility / freedom to demonstrate how they meet this standard and will continue to meet it going forward.

Outcomes of exploration: The education provider responded to our concerns with a further narrative response. They explained the system they have in place to ensure their curriculum remains up to date and relevant to current practise. This will follow their existing institution-wide system of institutional quality assurance and enhancement. This is regulated by their internal Quality Review Framework (QRF) which is set out in their academic manual they included in their response. This contains details of the regulations for Department and Faculty Education Plans, Internal Quality Review (IQR) and External Examining as well as Peer Observation of Teaching, Staff-Student Consultative Committees, learner Representation on Academic Standing Committees and Sub-Committees and Academic Committee Review Panels. This is the process they have in place across their existing HCPC-approved provision. The visitors reviewed this response and the supporting documentation and found this to satisfy their concerns. This has demonstrated there is an established and effective system in place to review the programme's content and ensure it remains relevant and up to date.

Section 4: Findings

This section details the visitors' findings from their review through stage 2, including any requirements set, and a summary of their overall findings.

Conditions

Conditions are requirements that must be met before providers or programmes can be approved. We set conditions when there is an issue with the education provider's approach to meeting a standard. This may mean that we have evidence that standards are not met at this time, or the education provider's planned approach is not suitable.

The visitors were satisfied that no conditions were required to satisfy them that all standards are met. The visitors' findings, including why no conditions were required, are presented below.

Overall findings on how standards are met

This section provides information summarising the visitors' findings against the programme-level standards. The section also includes a summary of risks, further areas to be followed up, and areas of good practice.

Findings of the assessment panel:

- SET 1: Level of qualification for entry to the Register this standard is not relevant for supplementary and independent prescribing programmes as participants on this programme will already be HCPC registered practitioners.
- A: Programme admissions
 - Standards related to this section are reviewed and discussed as part of the stage one review.
 - The education provider informed us of the requirements needed to be accepted onto the programme. This includes 2.1 or first-class degree and being an experienced and HCPC registered practitioner. They also explained how the professions eligible for independent prescribing studies who are HCPC registrants. These being; Physiotherapists, podiatrists, paramedics and therapeutic radiographers. Dieticians and diagnostic radiographers are eligible to become supplementary prescribers only.
 - The education provider requires that prospective applicants have at least three years of relevant post-qualification experience. They require applicants to be working at an advanced practitioner or equivalent level.
 - The visitors found the selection and entry criteria specified by the education provider to include appropriate academic and professional entry standards. The visitors were satisfied that the education provider has met the associated standards for this area.

• B: Programme governance, management and leadership -

- The education provider explained how they have a process in place for regular and effective collaboration with practice education providers. This is supported by their existing agreement template that is used for their existing programmes. This template sets expectations and responsibilities for both parties and is their template for collaboration.
- The education provider clearly explained the systems they have in place to ensure availability and capacity of practice-based learning. This includes requesting statements from the practice-based learning sites at the time of application to the programme. They ensure monitoring and deployment of action plans as needed through the Pan-London Practice Learning Audit process.
- This audit process is used by the Pan London Practice Learning Group (PLPLG) which is an established organisation that plays a crucial role in developing and enhancing education across London. It exists to develop, support, monitor, and evaluate a standardised London-wide approach to practice-based learning and assessment. The PLPLG works with 14 education providers across London including UCL.

- They explained their approach by sharing their Learning, Teaching, and Assessment Strategy. This strategy included information about timetabling, staff allocation, and program hours per week.
- The visitors were satisfied that the education provider has met the standards associated with this area. They noted the evidence for the planned collaboration meetings and how these are scheduled between December and May every academic year. They also noted how academic staff have a range of experiences with most being qualified prescribers already and some profession-specific members. This includes the programme leader being a qualified prescriber as well as the non-medical prescribing (NMP) lead. Following the additional information submitted by the education provider they are satisfied there are sufficient staff are in place to deliver the programme.

• C: Programme design and delivery –

- The education provider has explained their core learning outcomes as part of their submission. They discussed how these are covered in corresponding weekly units. For example, 'Meet the professional standards and competencies set by their professional body' is addressed as part of weekly units 13 on 'Developing Prescribing Practice', 20 on 'Reflective practice' and 23 titled 'Portfolio'.
- They also explain how both taught / theory-based elements work alongside practical-practice based elements. Taught content is presented at both a modular and weekly level with both in-person and e-learning avenues. These present the fundamental ideas and core information that are then expanded and built on as the programme progresses. This forms a pattern of 'overview', 'elaboration', 'summary', and 'synthesis', later being supported in a live session.
- The programme is focussed on workplace-based learning with much of the learning involving application of knowledge to real-life or simulated activities including interaction with patients. All applicants to the programme must be employed in an appropriate practice role that would allow them to gain the required experienced-based learning.
- Programme and module learning outcomes have been informed by the Royal Pharmaceutical Society (RPS) Framework for all Prescribers (2021) competencies. This is demonstrated through mapping of the Framework to the Module Learning Outcomes. RPS competencies are assessed in practice. All learning outcomes must be passed for learners to progress on the programme.
- The visitors agreed the education provider has demonstrated how they have aligned curriculum guidance with the programme and have appropriately mapped learning outcomes to the competency framework. They noted the seamless integration of theory and practice, as well as the program's support for autonomous and reflective thinking.
- The education provider did not make any reference to a review process to ensure how their curriculum remains relevant to current practice. It is important that a system is in place to continually review and if

necessary, update the content of the programme. We therefore explore this further via <u>Quality theme one</u>.

- Following this quality theme, the visitors are satisfied with the evidence they reviewed and agreed the thresholds of this standard have been met.
- D: Practice-based learning
 - The education provider stated how the programme has a strong focus on workplace-based learning with much of the learning involving application of knowledge to real-life or simulated activities including interaction with patients. All applicants to the programme must be currently employed in an appropriate practice role that would allow them to gain the required experiential learning.
 - They stipulate that learners must complete at least 90 of hours of supervised practice, supported by a Designated Prescribing Practitioner (DPP). This is to enable them to meet the training criteria set out by the General Pharmaceutical Council (GPhC). This is in line with nation-wide criteria.
 - The education provider submitted a document alongside their submission containing a matrix that aligns the RPS Competency Framework for all prescribers with core learning outcomes and corresponding weekly units. This is used to demonstrate how the structure, duration and range of practice-based learning supports the achievement of the learning outcomes.
 - The education provider also explained how each learner will have one named DPP to support them in their learning and take responsibility for their supervision and assessment. There are standards and rules in place to ensure the DPP's relevant experience and qualification. This includes them being a registered healthcare professional with prescribing rights in good standing with their regulator.
 - The visitors agreed the standards relating to this area have been met. They noted how learners' work-based study is organised with the current practitioner and that work-based learning is integral to the programme. They noted how practice-based learning meets the learning outcomes with some of the criteria set nationally. Learning outcomes, RPS competency framework and assessments are all cross-referenced. The education provider has satisfactorily demonstrated that an adequate number of appropriately qualified and experienced staff are involved in practice-based learning.

• E: Assessment –

- The visitors agreed the education provider has fully demonstrated the range of assessment methods employed in the provision. The education provider has explained how learners will be assessed on the programme.
- The assessments are appropriate to ensure that those who successfully complete the programme meet the standards set out in the Competency Framework for all Prescribers.

- Learners will be assessed via Multiple Choice Questions, a prescribing portfolio and objective structure clinical examination. Upon successful completion of the learners from several different professions in the medical field will be recorded as an independent / supplementary prescriber.
- The education provider submitted further information and clarification on their plans for assessment. They clarified how they have added learning outcomes specifically for professional standards. This will be featured in week 12 reflective practice of the programme and assessed as part of the prescribing plan.
- The education provider ensured that they have mapped the RPS competencies include competency 1.13 to the core learning outcome (number 4). The RPS competence framework sets out what good prescribing looks like. It describes the demonstrable knowledge, skills, characteristics, qualities and behaviours for a safe and effective prescribing role. The aim of this is to critically demonstrate application of advanced clinical assessment and evidence-based decision making in relation to prescribing practice within a learners own professional context. This is detailed where in the programme this will feature.
- Following this expansion, the visitors had no further concerns for this area. They now find the standards relating to this area to be met.

Risks identified which may impact on performance: None

Section 5: Referrals

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

There were no outstanding issues to be referred to another process.

Section 6: Decision on approval process outcomes

Assessment panel recommendation

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

• All standards are met, and therefore the programme should be approved.

Education and Training Committee decision

Education and Training Committee considered the assessment panel's recommendations and the findings which support these. The education provider was

also provided with the opportunity to submit any observation they had on the conclusions reached.

Based on all information presented to them, the Committee decided that:

• The programme is approved

Reason for this decision: Following their review of the report the panel determined that the programme should be approved. The Panel accepted the visitor's recommendation that the programme should receive approval.

Appendix 1 – summary report

If the education provider does not provide observations, only this summary report (rather than the whole report) will be provided to the Education and Training Committee (Panel) to enable their decision on approval. The lead visitors confirm this is an accurate summary of their recommendation, and the nature, quality and facilities of the provision.

Education provider	Case reference	Lead visitors	Quality of provision	Facilities provided
University College London	CAS-01327- Z8W0K7	Gemma Howlett Rosie Furner	 Through this assessment, we have noted how the programme meets all the relevant HCPC education standards and therefore should be approved. We progressed to stage 2 of the process without further review through stage 1, due to the clear alignment of the new provision within existing institutional structures, as noted through the previous section. We are referred one matter from stage one of the case to stage two. This relates to the effective delivery of the programme. The education provider has stated that this programme will be delivered almost entirely online aside from four days. We shall assess this as part of stage 	The facilities provided will have been assessed in their recent approval cases and also in their performance review (2022-23).

	Stage one concerned level stanc was asses standards in stage 2.	e-level analysis. is more with programme- lards. This area sed and shown to be met bing standards he stage 2		
Programmes				
Programme name		Mode of study	Nature of p	rovision
PCGert in Independent and Supplementary Non Medical Pre Enhanced Clinical Assessment	escribing with	Part time	•	Taught (HEI)

Appendix 2 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
MSc in Dietetics (Pre-registration)	FT (Full time)	Dietitian			01/10/2021
MSc Audiological Science with Clinical Practice	FT (Full time)	Hearing aid disp	enser		01/09/2014
Postgraduate Diploma Audiological Science with Clinical Practice	FT (Full time)	Hearing aid disp	enser		01/09/2014
MSc Orthoptics (pre-registration)	FTA (Full time accelerated)	Orthoptist		POM - Sale / Supply (OR)	01/09/2021
D.Ed.Psy Educational and Child Psychology	FT (Full time)	Practitioner psychologist	Educationa	I psychologist	01/01/2005

Doctorate in Clinical Psychology (DclinPsych)	FT (Full time)	Practitioner	Clinical psychologist	01/01/1995
		psychologist		
MSc Speech and Language Sciences	FT (Full time)	Speech and langu	age	01/09/2000
		therapist		