Annual monitoring visitors' report

Contents

Section one: Programme details

Name of education provider	Association of Clinical Scientists
Programme title	Certificate of Attainment
Mode of delivery	Flexible
Relevant part of the HCPC register	Clinical scientist
Name and role of HCPC visitors	Ruth Ashbee (Clinical scientist) Geraldine Hartshorne (Clinical scientist)
HCPC executive	Mandy Hargood
Date of postal review	2 May 2017

Section two: Submission details

The following documents were provided as part of the audit submission:

- ☒ A completed HCPC audit form
- ☒ Internal quality report for one year ago
- ☒ Internal quality report for two years ago
- ☒ External examiner's report for one year ago
- ☒ External examiner's report for two years ago
- ☒ Response to external examiner's report one year ago
- ☒ Response to external examiner's report for two years ago
- Advertisement for lay member of the board
- Information document on "Which route to Clinical scientist HCPC Registration is best for me?"

Section three: Additional documentation

☐ The visitors agreed that no further documentation was required in order to make a recommendation.

☒ The visitors agreed that additional documentation was required in order to make a recommendation. The standards of education and training (SETs), for which additional documentation was requested, are listed below with reasons for the request.

3.3 The programme must have regular monitoring and evaluation systems in place.

Reason: The visitors received and reviewed as part of the audit the advertisement for the lay visitor to sit on the education provider board. The advertisement detailed that the lay person appointed would be encouraged to take part in "Observation at a few assessment sessions" and that feedback would besought on the process. The visitors noted that this appointment has now been made but the evidence provided does not clarify what the role involves with respect to evaluation and monitoring of the programme. Therefore the visitors would like to have further evidence on how this lay assessor member of the board will be involved in the monitoring and evaluation of the programme.

Suggested documentation: Evidence that clearly defines how the lay assessor will be involved in the monitoring and evaluation of the programme.

Section four: Recommendation of the visitors

To recommend a programme for ongoing approval, the visitors must be assured that the programme meets all of the standards of education and training (SETs) and that those who complete the programme have demonstrated an ability to meet our standards of proficiency (SOPs) for their part of the Register.

The visitors agreed to recommend to the Education and Training Committee that:

☒ There is sufficient evidence to show the programme continues to meet the standards of education and training and that those who complete the programme will continue to demonstrate an ability to meet the standards of proficiency.

☐ There is insufficient evidence to determine if or how the programme continues to meet the standards of education and training listed. Therefore, a visit is recommended to gather more evidence and if required place conditions on ongoing approval of the programme.

Section five: Visitors' comments

The visitors noted in the Company secretary's report for 2016 that there were incorrect percentages for the 2016 data provided as part of this audit. The percentages did not add up to 100. The visitors would like to remind the education provider that data should be correct at the time of the audit so that there is no risk of a misunderstanding of the information provided.

Having considered the additional evidence provided by the education provider, the visitors concluded that the standards are now met at threshold. The visitors would like to recommend that the role of the lay person is further strengthened by an expectation that they will be involved in participation in assessments of candidates on the programme.

Annual monitoring visitors' report

Contents

Section one: Programme details

Name of education provider	University of Birmingham
Programme title	Clinical Psychology Doctorate (ClinPsyD)
Mode of delivery	Full time
Relevant part of the HCPC register	Practitioner psychologist
Relevant modality	Clinical psychologist
Name and role of HCPC visitors	Stephen Davies (Clinical psychologist) Ruth Baker (Clinical psychologist)
HCPC executive	Mandy Hargood
Date of postal review	30 May 2017

Section two: Submission details

The following documents were provided as part of the audit submission:

☒ A completed HCPC audit form
☒ Internal quality report for one year ago
☒ Internal quality report for two years ago
☒ External examiner's report for one year ago
☒ External examiner's report for two years ago
☒ Response to external examiner's report one year ago
☒ Response to external examiner's report for two years ago

- Course handbook
- Course management committee minutes
- Curriculum and assessment committee minutes
- Teaching, including experience of experts' document
- Trainee logbook
- Staff curriculum vitae

Section three: Additional documentation

☒   The visitors agreed that no further documentation was required in order to make a recommendation.

☐   The visitors agreed that additional documentation was required in order to make a recommendation. The standards of education and training (SETs), for which additional documentation was requested, are listed below with reasons for the request.

Section four: Recommendation of the visitors

To recommend a programme for ongoing approval, the visitors must be assured that the programme meets all of the standards of education and training (SETs) and that those who complete the programme have demonstrated an ability to meet our standards of proficiency (SOPs) for their part of the Register.

The visitors agreed to recommend to the Education and Training Committee that:

☒   There is sufficient evidence to show the programme continues to meet the standards of education and training and that those who complete the programme will continue to demonstrate an ability to meet the standards of proficiency.

☐   There is insufficient evidence to determine if or how the programme continues to meet the standards of education and training listed. Therefore, a visit is recommended to gather more evidence and if required place conditions on ongoing approval of the programme.

Annual monitoring visitors' report

Contents

Section one: Programme details

Name of education provider	University of Chester
Programme title	MA Art Therapy
Mode of delivery	Full time Part time
Relevant part of the HCPC register	Arts therapist
Relevant modality	Art therapist
Name and role of HCPC visitors	Julie Allan(Art therapist) Jonathan Isserrow (Art therapist)
HCPC executive	Mandy Hargood
Date of postal review	9 May 2017

Section two: Submission details

The following documents were provided as part of the audit submission:

☒ A completed HCPC audit form
☒ Internal quality report for one year ago
☒ Internal quality report for two years ago
☒ External examiner's report for one year ago
☒ External examiner's report for two years ago
☒ Response to external examiner's report one year ago
☒ Response to external examiner's report for two years ago
- Module Descriptor for NM7502 and NM7503

Section three: Additional documentation

☐   The visitors agreed that no further documentation was required in order to make a recommendation.

☒   The visitors agreed that additional documentation was required in order to make a recommendation. The standards of education and training (SETs), for which additional documentation was requested, are listed below with reasons for the request.

3.9   The resources to support student learning in all settings must effectively support the required learning and teaching activities of the programme.

Reason: The visitors noted in the annual monitoring report 2015 that the experiential studio space was restricted and inadequate for cohort sizes. However no evidence was provided that indicated what actions had been taken to address the lack of space. The visitors therefore are unclear if the issues associated with the experiential studio space has been resolved or not. As such the visitors would need to see further documentation that demonstrates how the education provider has addressed the space issue.

Suggested documentation: Evidence that demonstrates what action the education provider taken to resolve the space issue.

3.17 Service users and carers must be involved in the programme.

Reason: The visitors reviewed the evidence provided for this standard on service user involvement in the programme. However, the visitors could not see any evidence or rationale for how the service user's voice informs the training of the students. Furthermore, there was no evidence to demonstrate how service users are supported to engage with the training, nor any information on how they audit service user's experience and moderate their engagement with the programme. Therefore the visitors were unclear how the service users and carers were trained and supported to act as service users and carers on the programme. As such the visitors require further documentation that clearly defines the role of service users and carers and how they are trained and supported in their role

Suggested documentation: Evidence that clearly demonstrates the role of the service user and how they are they are trained and supported in their role.

Section four: Recommendation of the visitors

To recommend a programme for ongoing approval, the visitors must be assured that the programme meets all of the standards of education and training (SETs) and that those who complete the programme have demonstrated an ability to meet our standards of proficiency (SOPs) for their part of the Register.

The visitors agreed to recommend to the Education and Training Committee that:

☒   There is sufficient evidence to show the programme continues to meet the standards of education and training and that those who complete the programme will continue to demonstrate an ability to meet the standards of proficiency.

☐ There is insufficient evidence to determine if or how the programme continues to meet the standards of education and training listed. Therefore, a visit is recommended to gather more evidence and if required place conditions on ongoing approval of the programme.

Annual monitoring visitors' report

Contents

Section one: Programme details

Name of education provider	University of Cumbria
Programme title	BSc (Hons) Physiotherapy
Mode of delivery	Full time
Relevant part of the HCPC register	Physiotherapist
Name and role of HCPC visitors	Anthony Power (Physiotherapist) Simon Dykes (Paramedic)
HCPC executive	Niall Gooch
Date of assessment day	25 April 2017

Section two: Submission details

The following documents were provided as part of the audit submission:

☒ A completed HCPC audit form
☒ Internal quality report for one year ago
☒ Internal quality report for two years ago
☒ External examiner's report for one year ago
☒ External examiner's report for two years ago
☒ Response to external examiner's report one year ago
☒ Response to external examiner's report for two years ago
- Staff CVs
- Programme entry requirements
- PARE evaluation tool

Section three: Additional documentation

☐ The visitors agreed that no further documentation was required in order to make a recommendation.

☒ The visitors agreed that additional documentation was required in order to make a recommendation. The standards of education and training (SETs), for which additional documentation was requested, are listed below with reasons for the request.

3.17 Service users and carers must be involved in the programme.

Reason: The visitors reviewed the material concerning service user and carer involvement. They noted that in the Programme Annual Evaluatory Review (page 8), the education provider say that "involvement of users and carers in the programme is slowly developing. We are using patients and carers in selected teaching and learning sessions and we would like to develop from this position to use users and carers in other aspects of our programme." However, they are unclear about what involvement service users and carers had had in the programme during the last two years, including how service users and carers had been appropriately trained and how input from service user and carer input had been fed into the programme. They therefore require further evidence of this involvement so that they can be satisfied that the standard was met.

Suggested documentation: Evidence to clearly demonstrate how the education provider selects service users and carers for this programme, and how they ensure that service users and carers are appropriately prepared.

Section four: Recommendation of the visitors

To recommend a programme for ongoing approval, the visitors must be assured that the programme meets all of the standards of education and training (SETs) and that those who complete the programme have demonstrated an ability to meet our standards of proficiency (SOPs) for their part of the Register.

The visitors agreed to recommend to the Education and Training Committee that:

☒ There is sufficient evidence to show the programme continues to meet the standards of education and training and that those who complete the programme will continue to demonstrate an ability to meet the standards of proficiency.

☐ There is insufficient evidence to determine if or how the programme continues to meet the standards of education and training listed. Therefore, a visit is recommended to gather more evidence and if required place conditions on ongoing approval of the programme.

HCPC annual monitoring process report

Education provider	University of Exeter
Name of programme	BSc (Hons) Medical Imaging (Diagnostic Radiography)
Date submission received	03 May 2017
Case reference	CAS-11161-X4S8F2

Contents

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.

The following is a report on the annual monitoring process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards of education and training (referred to through this report as 'our standards'). The report details the process itself, the evidence considered, and recommendations made regarding programme approval.

Section 1: Our regulatory approach

Our standards
We approve programmes that meet our education standards, which ensure individuals that complete the programmes meet proficiency standards. The proficiency standards 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.

Programmes are normally approved on an open-ended basis, subject to satisfactory engagement with our monitoring processes. Programmes we have approved are listed on our website.

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 undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC).

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports. The Committee meets in public on a regular basis and their decisions are available to view on our website.

HCPC panel
We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

Shaaron Pratt	Radiographer - Diagnostic radiographer
Stephen Boynes	Radiographer - Diagnostic radiographer
Mandy Hargood	HCPC executive

Section 2: Programme details

Programme name	BSc (Hons) Medical Imaging (Diagnostic Radiography)
Mode of study	FT (Full time)
Profession	Radiographer
Modality	Diagnostic radiographer
First intake	01 September 2004
Maximum student cohort	60
Intakes per year	1
Assessment reference	AM05724

We undertook this assessment to consider whether the programme continued to meet our standards over the last two academic years. This assessment formed part of our regular monitoring required of programmes on a cyclical basis.

Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we require certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

Required documentation	Submitted
HCPC annual monitoring audit form, including completed standards mapping	Yes
Internal quality reports from the last two years	Yes
External examiner reports from the last two years	Yes
Responses to external examiner reports from the last two years	Yes

Section 4: Outcome from first review

In considering the evidence provided by the education provider as part of the initial submission, the visitors are not satisfied that there is sufficient evidence that our standards continued to be met at this time, and therefore require further evidence as noted below.

Further evidence required
In order to determine whether the standards continue to be met, the visitors require further evidence for the following standards for the reasons noted below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programme(s), and then provide any further evidence to demonstrate how they meet the standards.

5.4 The education provider must maintain a thorough and effective system for approving and monitoring all placements.

Reason: There appears to be a robust system for the audit of clinical placements with respect to approving and monitoring placements and the 'UEMS Annual Student Experience Review' clearly demonstrates that placement evaluation using the MACE system provided quantitative and qualitative data. However the visitors noted that the system for obtaining student feedback on clinical placement had changed from MACE to ACCELERATE. Unfortunately the link provided on the HCPC annual monitoring audit form did not allow the visitors to assess the appropriateness of the questions within the ACCELERATE system. The web link would suggest that ACCELERATE is used for in-

module and end-of-module feedback for evaluation of students experience on clinical placement.

Suggested documentation: Evidence to demonstrate that the system for student evaluation of clinical placements is appropriate. This could include details, such as the questions, that the students respond to in the evaluation of their placement learning.

5.11 Students, practice placement providers and practice placement educators must be fully prepared for placement which will include information about an understanding of:
- **the learning outcomes to be achieved;**
- **the timings and the duration of any placement experience and associated records to be maintained;**
- **expectations of professional conduct;**
- **the assessment procedures including the implications of, and any action to be taken in the case of, failure to progress; and**
- **communication and lines of responsibility.**

Reason: The annual monitoring audit form indicted that the module leadership for practice placement 2 modules had changed and details of the updated practice placement 2 modules were provided. However it is not clear from this module descriptor how practice placement providers and practice placement educators and students are fully prepared for placement. The annual monitoring audit form also makes reference to a student peers assisted scheme and evidences this with the provision of a timetable. Unfortunately the visitors were not able interpret the timetable to assess if it contributes to assessment and if it contributes to achievement of this standard. As such the visitors were unclear if the students, placement providers and practice educators were clear on how preparation for placement happened. Therefore the visitors require further evidence to demonstrate how this standard continues to be met.

Suggested documentation: Evidence to demonstrate how students and placement providers are prepared for placement, which could include, placement handbooks, clinical supervisor's handbooks and details of peers assisted teaching with respect to preparing new students for placement.

Section 5: Visitors' recommendation

Considering the education provider's response to the request for further evidence set out in section 4, the visitors are satisfied that there is sufficient evidence that the standards continue to be met and recommend that the programme(s) remain approved.

This report, including the recommendation of the visitors, will be considered at the 06 July 2017 meeting of the ETC. Following this meeting, this report should be read alongside the ETC's decision notice, which are available on our website.

Annual monitoring visitors' report

Contents

Section one: Programme details

Name of education provider	University of Leicester
Programme title	Doctorate in Clinical Psychology (DClinPsy)
Mode of delivery	Full time
Relevant part of the HCPC register	Practitioner psychologist
Relevant modality	Clinical psychologist
Name and role of HCPC visitors	Lincoln Simmonds (Clinical psychologist) James McManus (Clinical psychologist)
HCPC executive	Mandy Hargood
Date of postal review	6 June 2017

Section two: Submission details

The following documents were provided as part of the audit submission:

☒ A completed HCPC audit form
☒ Internal quality report for one year ago
☒ Internal quality report for two years ago
☒ External examiner's report for one year ago
☒ External examiner's report for two years ago
☒ Response to external examiner's report one year ago
☒ Response to external examiner's report for two years ago
- Programme Handbook
- Document reviewing service user involvement on the course

Section three: Additional documentation

☒   The visitors agreed that no further documentation was required in order to make a recommendation.

☐   The visitors agreed that additional documentation was required in order to make a recommendation. The standards of education and training (SETs), for which additional documentation was requested, are listed below with reasons for the request.

Section four: Recommendation of the visitors

To recommend a programme for ongoing approval, the visitors must be assured that the programme meets all of the standards of education and training (SETs) and that those who complete the programme have demonstrated an ability to meet our standards of proficiency (SOPs) for their part of the Register.

The visitors agreed to recommend to the Education and Training Committee that:

☒   There is sufficient evidence to show the programme continues to meet the standards of education and training and that those who complete the programme will continue to demonstrate an ability to meet the standards of proficiency.

☐   There is insufficient evidence to determine if or how the programme continues to meet the standards of education and training listed. Therefore, a visit is recommended to gather more evidence and if required place conditions on ongoing approval of the programme.

Annual monitoring visitors' report

Contents

Section one: Programme details

Name of education provider	London Metropolitan University
Programme title	BSc (Hons) Dietetics and Nutrition
Mode of delivery	Full time
Relevant part of the HCPC register	Dietitian
Name and role of HCPC visitors	Sara Smith (Dietitian) Paul Bates (Paramedic)
HCPC executive	Tamara Wasylec
Date of assessment day	25 April 2017

Section two: Submission details

The following documents were provided as part of the audit submission:

☒ A completed HCPC audit form
☒ Internal quality report for one year ago
☒ Internal quality report for two years ago
☒ External examiner's report for one year ago
☒ External examiner's report for two years ago
☒ Response to external examiner's report one year ago
☒ Response to external examiner's report for two years ago

Section three: Additional documentation

☐ The visitors agreed that no further documentation was required in order to make a recommendation.

☒ The visitors agreed that additional documentation was required in order to make a recommendation. The standards of education and training (SETs), for which additional documentation was requested, are listed below with reasons for the request.

3.17 Service users and carers must be involved in the programme.

Reason: From a review of the supporting information document, on page 37, the visitors read that ambassadors from the patients association are involved in a range of activities including a focus group which reviews course structure, curriculum and recruitment policy. Service users and carers are also involved in assessment of students and are consulted in relation to the delivery of the programme. However the visitors were unable to determine how the service users and carers that are involved with this programme are selected as the most appropriate individuals to be involved in the programme. From the evidence, the visitors could not determine the exact involvement the service user and carer would have in the programme. As such, the visitors were unclear what involvement service users and carers have in the programme and what preparation the team has done to ensure the success of this involvement, including the training and support of service users and carers. Therefore, the visitors require further evidence of the process the programme team follow to determine which service users are most appropriate to be involved in the programme, how they have determined the appropriateness of the involvement and how service users and carers are be trained and supported.

Suggested documentation: Evidence to clearly demonstrate how the education provider selects, trains and supports the involvement of service users and carers for this programme.

Section four: Recommendation of the visitors

To recommend a programme for ongoing approval, the visitors must be assured that the programme meets all of the standards of education and training (SETs) and that those who complete the programme have demonstrated an ability to meet our standards of proficiency (SOPs) for their part of the Register.

The visitors agreed to recommend to the Education and Training Committee that:

☒ There is sufficient evidence to show the programme continues to meet the standards of education and training and that those who complete the programme will continue to demonstrate an ability to meet the standards of proficiency.

☐ There is insufficient evidence to determine if or how the programme continues to meet the standards of education and training listed. Therefore, a visit is recommended to gather more evidence and if required place conditions on ongoing approval of the programme.

Annual monitoring visitors' report

Contents

Section one: Programme details

Name of education provider	NE London AMHP Training Consortium
Name of validating body	University of East London
Programme title	PG Diploma Approved Mental Health Practice
Mode of delivery	Work based learning
Programme type	Approved mental health professional
Name and role of HCPC visitors	Pauline Douglas (Dietitian) Lynda Kelly (Approved mental health professional)
HCPC executive	Jamie Hunt
Date of assessment day	10 May 2017

Section two: Submission details

The following documents were provided as part of the audit submission:

☒ A completed HCPC audit form
☒ Internal quality report for one year ago
☒ Internal quality report for two years ago
☒ External examiner's report for one year ago
☒ External examiner's report for two years ago
☒ Response to external examiner's report one year ago
☒ Response to external examiner's report for two years ago
- Application Pack
- Appeal process documents
- Course management meeting minutes
- Changes to programme handbook

Section three: Additional documentation

☐ The visitors agreed that no further documentation was required in order to make a recommendation.

☒ The visitors agreed that additional documentation was required in order to make a recommendation. The approval criteria for approved mental health professional (AMHP) programmes for which additional documentation was requested, are listed below with reasons for the request.

B.2 The programme must be effectively managed

Reason: In their mapping for criteria B.1, the education provider flagged that some teaching sessions will be shared with another provider of AMHP training. Specifically, they have noted that this applies "where the same content existed". From the supporting documentation provided, the visitors noted that there had been ongoing discussions about this collaborative approach with external partners, and that the action plan for 2014-15 noted that this action was completed 'but will continue'. From their action plan for 2015-16, it is not clear whether this action has continued, as it is absent. The visitors were not provided with formal arrangements regarding the sharing of these sessions, and were therefore unclear how the management and resourcing of these sessions would work. They were also unclear of the extent of the changes to the sessions themselves, and how the education provider would ensure that the changes would suit both programmes. The visitors considered this could impact on (as examples, but not limited to):
- what the lines of responsibility would be between the two providers, including how ongoing evaluation of these sessions would work;
- how external trainers would be prepared for teaching students on two different programmes;
- how students for the different programmes would be prepared for these sessions, considering they could be at different points in their learning; and
- the delivery of the curriculum.

Therefore, the visitors require further documentation that demonstrates how this shared approach will work in practice.

Suggested documentation: Formal agreements that demonstrates how this shared approach will work in practice, including details about preparedness for trainers and students, and formal lines of responsibilities.

B.3 The programme must have regular monitoring and evaluation systems in place

Reason: On reading the documentation, the visitors noticed several changes that had been made to the programme that were not reflected in the internal quality monitoring documentation. The visitors considered that changes such as the ones flagged under criteria B.2 and C.8 should be contained in internal quality monitoring documentation so they can be properly discussed, reasoned and evaluated over time. Therefore, the visitors were unclear how the programme's monitoring and evaluation processes were effectively applied to ensure changes are properly evaluated.

Suggested documentation: The visitors note that internal quality monitoring documentation has been finalised for the last two academic years. However, so they can be satisfied this criterion continues to be met, the education provider should present

information about how it will ensure changes discussed and made outside of the internal setting will be contained within its quality monitoring processes in the future.

C.8 The range of learning and teaching approaches used must be appropriate to the effective delivery of the curriculum

Reason: From the AMHP course collaboration meeting minutes (8 March 2016), the visitors noted that the education provider was considering how to replace legislation training, following the previous trainer stepping down. However, they were unclear from the documentation what changes had been agreed in this area, and therefore whether the range of learning and teaching approaches continue to be appropriate to support the effective delivery of the curriculum.

Suggested documentation: Information that shows any changes to this training, along with reasoning that demonstrates how this standard continues to be met with the changes.

Section four: Recommendation of the visitors

To recommend a programme for ongoing approval, the visitors must be assured that the programme meets all of the approval criteria for approved mental health professional programmes and that those who complete the programme have demonstrated an ability to meet our criteria for approved mental health professionals.

The visitors agreed to recommend to the Education and Training Committee that:

☒ There is sufficient evidence to show the programme continues to meet the approval criteria for approved mental health professional programmes and that those who complete the programme will continue to demonstrate an ability to meet the criteria for approved mental health professionals.

☐ There is insufficient evidence to determine if or how the programme continues to meet the approval criteria for approved mental health professional programmes listed. Therefore, a visit is recommended to gather more evidence and if required place conditions on ongoing approval of the programme.

Annual monitoring visitors' report

Contents

Section one: Programme details

Name of education provider	Regent's University London
Name of validating	The Open University
Programme title	DPsych Counselling Psychology
Mode of delivery	Full time
Relevant part of the HCPC register	Practitioner psychologist
Relevant modality	Counselling psychologist
Name and role of HCPC visitors	Jai Shree Adhyaru (Counselling psychologist) Antony Ward (Counselling psychologist)
HCPC executive	Mandy Hargood
Date of postal review	31 May 2017

Section two: Submission details

The following documents were provided as part of the audit submission:

☒ A completed HCPC audit form
☒ Internal quality report for one year ago
☒ Internal quality report for two years ago
☒ External examiner's report for one year ago
☒ External examiner's report for two years ago
☒ Response to external examiner's report one year ago
☒ Response to external examiner's report for two years ago
- Revalidation Programme Handbook
- Assessment Handbook 2016-2017 V6
- Revalidation Research Handbook
- Revalidation Placement Handbook
- Standards of Proficiency

- DPsych OU Programme Approval Specification 2016
- Staff curriculum vitae

Section three: Additional documentation

☒   The visitors agreed that no further documentation was required in order to make a recommendation.

☐   The visitors agreed that additional documentation was required in order to make a recommendation. The standards of education and training (SETs), for which additional documentation was requested, are listed below with reasons for the request.

Section four: Recommendation of the visitors

To recommend a programme for ongoing approval, the visitors must be assured that the programme meets all of the standards of education and training (SETs) and that those who complete the programme have demonstrated an ability to meet our standards of proficiency (SOPs) for their part of the Register.

The visitors agreed to recommend to the Education and Training Committee that:

☒   There is sufficient evidence to show the programme continues to meet the standards of education and training and that those who complete the programme will continue to demonstrate an ability to meet the standards of proficiency.

☐   There is insufficient evidence to determine if or how the programme continues to meet the standards of education and training listed. Therefore, a visit is recommended to gather more evidence and if required place conditions on ongoing approval of the programme.

Section five: Visitors' comments

The visitors were content that the standards were all met at threshold. The visitors considered that the use of trainees as service users and how they work with the programme meets the standard at threshold. However the visitors would like to recommend that the programme team consider other service user and carer groups so as not to limit themselves on the groups they include as part of the programme.

Annual monitoring visitors' report

Contents

Section one: Programme details

Name of education provider	St George's, University of London
Programme title	BSc (Hons) Physiotherapy
Mode of delivery	Full time
Relevant part of the HCPC register	Physiotherapist
Name and role of HCPC visitors	Anthony Power (Physiotherapist) Simon Dykes (Paramedic)
HCPC executive	Niall Gooch
Date of assessment day	25 April 2017

Section two: Submission details

The following documents were provided as part of the audit submission:

☒ A completed HCPC audit form
☒ Internal quality report for one year ago
☒ Internal quality report for two years ago
☒ External examiner's report for one year ago
☒ External examiner's report for two years ago
☒ Response to external examiner's report one year ago
☒ Response to external examiner's report for two years ago
- Programme specification 2016

Section three: Additional documentation

☐ The visitors agreed that no further documentation was required in order to make a recommendation.

☒ The visitors agreed that additional documentation was required in order to make a recommendation. The standards of education and training (SETs), for which additional documentation was requested, are listed below with reasons for the request.

3.17 Service users and carers must be involved in the programme.

Reason: The education provider stated on the audit form that information about service user and carer involvement could be found in the documentation. There were mentions of service user involvement in the programme. Section nine of the programme annual monitoring form for 2015-16 stated that service users and carers were involved in a course committee, and the programme specification stated that service users and carers were involved in admissions, and received appropriate training. However, the visitors could not see where this evidence was in the submission. They were unclear, for example, as to how service users and carers were selected for involvement and what exactly was involved in their training. They considered that more evidence of this involvement was required in order for them to be confident that the standard was met.

Suggested documentation: Evidence showing what training service users and carers receive for their involvement in admissions, or records relating to service users and carers' involvement in the Course Committee.

Section four: Recommendation of the visitors

To recommend a programme for ongoing approval, the visitors must be assured that the programme meets all of the standards of education and training (SETs) and that those who complete the programme have demonstrated an ability to meet our standards of proficiency (SOPs) for their part of the Register.

The visitors agreed to recommend to the Education and Training Committee that:

☒ There is sufficient evidence to show the programme continues to meet the standards of education and training and that those who complete the programme will continue to demonstrate an ability to meet the standards of proficiency.

☐ There is insufficient evidence to determine if or how the programme continues to meet the standards of education and training listed. Therefore, a visit is recommended to gather more evidence and if required place conditions on ongoing approval of the programme.

Annual monitoring visitors' report

Contents

Section one: Programme details

Name of education provider	Swansea University
Programme title	DipHE Paramedic Science
Mode of delivery	Full time
Relevant part of the HCPC register	Paramedic
Name and role of HCPC visitors	Paul Bates (Paramedic) Sara Smith (Dietitian)
HCPC executive	Tamara Wasylec
Date of assessment day	25 April 2017

Section two: Submission details

The following documents were provided as part of the audit submission:

- ☒ A completed HCPC audit form
- ☒ Internal quality report for one year ago
- ☒ Internal quality report for two years ago
- ☒ External examiner's report for one year ago
- ☐ External examiner's report for two years ago
- ☒ Response to external examiner's report one year ago
- ☐ Response to external examiner's report for two years ago

Section three: Additional documentation

☐ The visitors agreed that no further documentation was required in order to make a recommendation.

☒ The visitors agreed that additional documentation was required in order to make a recommendation. The standards of education and training (SETs), for which additional documentation was requested, are listed below with reasons for the request.

3.3 The programme must have regular monitoring and evaluation systems in place.

Reason: From a review of the documentation the visitors noted that the external examiner's report for 2015-2016 and the response to this report were not submitted. As such, the visitors were not presented with the evidence required to determine whether regular monitoring and evaluation systems are in place.

Suggested documentation: The external examiner's report for 2015-2016 and the education provider's response to that report.

Section four: Recommendation of the visitors

To recommend a programme for ongoing approval, the visitors must be assured that the programme meets all of the standards of education and training (SETs) and that those who complete the programme have demonstrated an ability to meet our standards of proficiency (SOPs) for their part of the Register.

The visitors agreed to recommend to the Education and Training Committee that:

☒ There is sufficient evidence to show the programme continues to meet the standards of education and training and that those who complete the programme will continue to demonstrate an ability to meet the standards of proficiency.

☐ There is insufficient evidence to determine if or how the programme continues to meet the standards of education and training listed. Therefore, a visit is recommended to gather more evidence and if required place conditions on ongoing approval of the programme.