

## Visitors' report

<b>Name of education provider</b>	University of Brighton
<b>Programme name</b>	BSc (Hons) Paramedic Practice
<b>Mode of delivery</b>	Full time
<b>Relevant part of the HCPC Register</b>	Paramedic
<b>Date of visit</b>	19 – 20 November 2015

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## Executive summary

The Health and Care Professions Council (HCPC) approve educational programmes in the UK which health and care professionals must complete before they can apply to be registered with us. We are a statutory regulator and our main aim is to protect the public. We currently regulate 16 professions. All of these professions have at least one professional title which is protected by law. This means that anyone using the title 'paramedic' must be registered with us. The HCPC keep a register of health and care professionals who meet our standards for their training, professional skills, behaviour and health.

The visitors' report which follows outlines the recommended outcome made by the visitors on the approval of the programme. This recommended outcome was accepted by the Education and Training Committee (Committee) on 23 March 2016. At the Committee meeting on 23 March 2016, the programme was approved. This means that the education provider has met the conditions outlined in this report and that the programme meets our standards of education and training (SETs) and ensures that those who complete it meet our standards of proficiency (SOPs) for their part of the Register. The programme is now granted open ended approval, subject to satisfactory monitoring.

## Introduction

The HCPC visited the programme at the education provider to consider major changes proposed to the programme. The major change affected the following standards - programme management and resources and practice placements. The programme was already approved by the HCPC and this visit assessed whether the programme continued to meet the standards of education and training (SETs) and continued to ensure that those who complete the programme meet the standards of proficiency (SOPs) for their part of the Register.

## Visit details

Name and role of HCPC visitors	Mark Nevins (Paramedic) Mark Woolcock (Paramedic) Sid Jeewa (Lay visitor)
HCPC executive officer	Amal Hussein
HCPC observer	Richéal Carroll
Proposed student numbers	50 per cohort per year
First approved intake	September 2016
Effective date that programme approval reconfirmed from	September 2016
Chair	The education provider did not provide an independent chair
Secretary	Alice Collier (University of Brighton)

## Sources of evidence

Prior to the visit the HCPC reviewed the documentation detailed below, sent by the education provider:

	Yes	No	N/A
Programme specification	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Descriptions of the modules	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the education provider has met the SETs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the education provider has met the SOPs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Practice placement handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Curriculum vitae for relevant staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
External examiners' reports from the last two years	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

During the visit the HCPC saw the following groups or facilities:

	Yes	No	N/A
Senior managers of the education provider with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Programme team	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Placements providers and educators / mentors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Service users and carers	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Learning resources	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Specialist teaching accommodation (eg specialist laboratories and teaching rooms)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Recommended outcome

To recommend a programme for ongoing approval, the visitors must be satisfied that the programme meets all of the standards of education and training (SETs) and that those who complete the programme meet our standards of proficiency (SOPs) for the relevant part of the Register.

The visitors agreed to recommend to the Education and Training Committee that a number of conditions are set on the programme, all of which must be met before the ongoing approval of the programme is reconfirmed.

The visitors agreed that 27 of the SETs have been met and that conditions should be set on the remaining 31 SETs.

Conditions are requirements that the education provider must meet before the programme can have its ongoing approval reconfirmed. Conditions are set when certain standards of education and training have not been met or there is insufficient evidence of the standard being met.

The visitors have also made a recommendation for the programme.

Recommendations are observations on the programme or education provider which do not need to be met before the programme can have its ongoing approval reconfirmed. Recommendations are made to encourage further enhancements to the programme, normally when it is felt that the particular standard of education and training has been met at, or just above the threshold level.

## Conditions

### **2.7 The admissions procedures must ensure that the education provider has equality and diversity policies in relation to applicants and students, together with an indication of how these will be implemented and monitored.**

**Condition:** The education provider must provide evidence of how equality and diversity policies are implemented and monitored through the admissions procedures.

**Reason:** The visitors reviewed the documentation provided prior to the visit and noted a web link to the education provider's equality and diversity of policies. Upon reviewing the web link, the visitors were unable access the information that clearly articulated that the education provider has equality and diversity policies in relation to applicants and students, together with an indication of how these will be implemented and monitored. From discussions with the programme team, the visitors were satisfied that there was an equality and diversity policy in place in relation to applicants and students, but were not clear from the discussions how this policy works, or how it is implemented and monitored. The visitors therefore require further evidence of the equality and diversity policies in place, together with an indication of how they are implemented and monitored in order to determine whether this standard is met.

### **3.1 The programme must have a secure place in the education provider's business plan.**

**Condition:** The education provider must demonstrate that the programme has a secure place in the education provider's business plan.

**Reason:** From documentation provided prior to the visit the visitors could not discern how the education provider will ensure that the programme has, and will continue to have, a secure place in the education provider's business plan. In scrutinising evidence, the visitors noted the statement that the Health Education England, Kent Surrey and Sussex (HEEKSS) have commissioned 50 places for 2015, however the business plan statement made no reference to the education provider's commitment to support this programme or the education provider commitment to providing enough resources to deliver the programme. At the visit, the visitors met with the senior team and learnt that the programme has a secure place in the education provider's business plan. Discussions covered financial security of the programme and security for students if the programme was deemed no longer viable. However, because this was not documented, the visitors require further evidence to be satisfied that the programme can meet this standard. The visitors therefore require further evidence which documents the education providers' commitment to this programme and model of study through its secure place in the business plan of the institution.

### **3.5 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.**

**Condition:** The education provider must provide further evidence to demonstrate that there is an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

**Reason:** From a review of the documentation, the visitors were unable to determine the number of appropriately qualified and experienced staff in place to deliver an effective

programme. The visitors noted inconsistent references of staff-to-student ratio throughout the documentation, although HCPC does not prescribe staff-to-student ratio the visitors were unable to determine from the evidence the overall staffing within the programme. In discussions with the senior management team at the visit, the visitors noted that plans to recruit an additional lecture-practitioner member of staff has been agreed. However, the visitors were unable to determine how, following the recruitment to this post, there will be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme. The visitors therefore require further evidence to demonstrate that there is an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

### **3.6 Subject areas must be taught by staff with relevant specialist expertise and knowledge.**

**Condition:** The education provider must demonstrate that staff with specialist expertise and knowledge are in place to deliver the programme.

**Reason:** From a review of the documentation, the visitors were unable to determine if subject areas are been taught by staff with relevant specialist expertise and knowledge. The documentation submitted prior to the visit included programme team staff CVs and descriptions of the modules. However, from a review of the documentation the visitors could not see which member of staff was responsible for each module. As a result, the visitors were therefore unable to determine what subject areas are being taught by staff with relevant specialist expertise and knowledge. In order to determine this standard is met, the visitors therefore require further information that demonstrates who the module leaders are for each module.

### **3.8 The resources to support student learning in all settings must be effectively used.**

**Condition:** The programme team must review the programme documentation to support student learning, to ensure it reflects the programme accurately and uses clear and up-to-date terminology.

**Reason:** The visitors noted that there were a number of instances of out-of-date terminology in use in the documentation submitted. For example, the 'Paramedic Practice Handbook' refers to the HCPC's former name "HPC". The visitors also noted in the same documentation (page 37) "The number of hours of attendance on courses leading to registration is laid down by the Health and Care Professions Council". This is incorrect as we do not stipulate attendance for education and training programmes, it is the education provider's responsibility to identify where attendance is mandatory and to have the necessary associated monitoring mechanisms in place. Furthermore, the visitors noted on page 41 "Health Care Professions Council (HCPC) for the protection of the public in The Standards of Conduct and Ethics (2012)". This should read as "the HCPC's standards of conduct, performance and ethics". It is important that students are equipped with accurate information, and the visitors considered it to be important the programme documentation accurately reflects the HCPC and HCPC's role in the regulation of the profession. The visitors therefore require the education provider to revise the programme documentation to correct all instances of inconsistent and incorrect terminology, to ensure that students are not unintentionally misinformed either about the HCPC or the current landscaper of regulation. In this way the visitors can determine how the resources to support student learning are being effectively used.

### **3.8 The resources to support student learning in all settings must be effectively used.**

**Condition:** The education provider must revise programme documentation to ensure it accurately reflects the current landscape of regulation for Paramedics.

**Reason:** The visitors noted that while the programme lead is not currently HCPC registered, they are NMC registered. The visitors were therefore satisfied with this arrangement. However, the visitors noted that the documentation and information given to students made several references to NMC requirements throughout the programme documentation. For example, the Paramedic Practice Handbook page 41, “the University of Brighton confers eligibility to apply for registration as a practitioner with the NMC or HCPC” and “The University also has to confirm to the NMC that graduates are fit to practise and are of good health and good character as defined by the NMC”. In addition, the visitors noted that the online audit form that students are required to complete made reference to the NMC student code of conduct as opposed to the HCPC’s standards of conduct, performance and ethics. It is important that students are equipped with accurate information, and the visitors considered it to be important the programme documentation accurately reflects the current landscape of regulation for Paramedics. Therefore, the visitors require the education provider to revise programme documentation to ensure it accurately reflects the current landscape of regulation for Paramedics.

### **3.15 Throughout the course of the programme, the education provider must have identified where attendance is mandatory and must have associated monitoring mechanisms in place.**

**Condition:** The programme team must provide further evidence that the attendance policies are communicated clearly and accurately to students.

**Reason:** From a review of the documentation, the visitors noted the attendance policy on page 37 of the student handbook. In scrutinising the evidence, the visitors noted that 80% is the minimum requirement of attendance for this programme “if 80 per cent of timetabled sessions is not achieved, in order to complete the module students need to demonstrate to the module leader...that they have worked towards the learning achievement”. The visitors were therefore satisfied with the processes in place to monitor student attendance. However, the attendance policy states “The number of hours of attendance on course leading to registration is laid down by the Health and Care Professions Council”. This is incorrect, as the HCPC does not stipulate attendance requirements on education and training programmes. Furthermore, in discussions with the students there was some confusion of the process that would be followed should their attendance fall below expectation. As such, the visitors require further evidence that the process regarding attendance is clearly and accurately communicated to students.

### **3.16 There must be a process in place throughout the programme for dealing with concerns about students’ profession-related conduct.**

**Condition:** The education provider must provide further detail of the formal procedures in place to deal with any concerns about students’ profession related conduct and how it may be implemented throughout the programme.



**Reason:** From reviewing the documentation provided, and from discussions with the programme team, practice placement team and the students, the visitors were clear that there are mechanisms in place to deal with any student misconduct in the education setting. The visitors were unclear, however, how concerns about students' profession-related conduct whilst on placement are relayed to the programme team, or how any issues would be dealt with by the education provider. The visitors were also unclear how any non-academic conduct issues would be dealt with by the education provider, or whether the students are aware how any issues could impact on future HCPC registration. Furthermore, the visitors noted that the documentation makes reference to primarily the Nursing and Midwifery Council (NMC) fitness to practise procedures. As such, the visitors require evidence of the formal mechanisms by which the education provider manage any concerns with students' profession-related conduct on placement to ensure this standard is met.

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

**Condition:** The education provider must submit further evidence to demonstrate how service users and carers will continue to be involved in the programme.

**Reason:** From the documentation provided, the visitors could not determine the exact nature of service users and carer involvement in the programme. The programme documentation suggested service users and carers will be involved in many aspects of the programme, such as admissions and programme delivery. Also, during discussions at the visit, it was indicated service users and carers may be involved in the interview process. However, from the discussions with the programme team it was clear that formal future plans to involve service users throughout the programme have yet to be finalised. At the visit, the programme team indicated that there are plans for their further involvement in the programme, but provided limited details about how the involvement will work. The visitors were unable to determine from the discussions or from the documentation provided that a plan is in place for how service users and carers will continue to be involved in the programme. In order to determine that this standard is met the visitors require further evidence demonstrating the plans for future service user and carer involvement.

### **4.2 The programme must reflect the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance.**

**Condition:** Further evidence to demonstrate how students completing the programme are able to practise safely and effectively.

**Reason:** From the documentation submitted, the visitors noted that the programme reflected the philosophy, core values, skills and knowledge articulated in the College of Paramedic (CoP) 2008 (version 2) curriculum guidance. In discussions with the programme team, the visitors heard that the programme team were not aware that they did not map to the latest curriculum guidance produced by CoP 2014 (version 3). From the discussions the visitors were unable to determine how, without the reflection of the most current curriculum guidance, student completing this programme are able to practise safely and effectively. The visitors therefore, require further information determine how the programme team ensure students completing the programme are safe and effective in the absence of the programme not being mapped to the most latest curriculum guidance.

#### **4.4 The curriculum must remain relevant to current practice.**

**Condition:** The programme team must provide further evidence of the mechanisms that will be in place to ensure that the curriculum will remain current.

**Reason:** From a review of the initial documentation, the visitors were unable to determine how the programme team ensures that the curriculum remain relevant to current practice. The visitors noted in the SETs mapping document, the evidence outlined were “student will evaluating each module and the course board meetings will receive feedback from practice placement facilitator”. However, the visitors noted that the curriculum makes reference to out of date guidance such as College of Paramedic (CoP) 2008 (version 2) curriculum guidance. In addition to this, the programme leader is not a HCPC registered Paramedic. In the discussions with the programme team, the visitors heard that the programme leader despite not being a paramedic is heavily involved in the Paramedic profession as well as being a part of a number of steering groups for the profession. However, the visitors were not presented with any evidence to support this and therefore were unable to determine how the programme team will ensure that the curriculum will remain relevant to current practice. As such, the visitors require further evidence of the mechanisms that the programme team will have in place, such as ongoing research or professional practice activity, to keep the curriculum up-to-date with the current practice for the profession. This way, the visitors will be able to determine the mechanisms that will be in place to ensure that the curriculum will remain current.

#### **4.5 The curriculum must make sure that students understand the implications of the HCPC’s standards of conduct, performance and ethics.**

**Condition:** The education provider must demonstrate how the curriculum ensures that students understand the implications of the HCPC’s standards of conduct, performance and ethics.

**Reason:** From a review of the programme documentation the visitors were unable to find evidence to outline where HCPC’s standards of conduct, performance and ethics were referred to in the programme curriculum and how the education provider ensures that students understand these standards, including how and where they apply. The visitors therefore require additional evidence to identify how the programme team ensure that students on the programme understand the implications of the HCPC’s standards of conduct, performance and ethics.

#### **5.2 The number, duration and range of practice placements must be appropriate to support the delivery of the programme and the achievement of the learning outcomes.**

**Condition:** The education provider must provide further evidence of the range of placement settings that students will experience to support the delivery of the programme and the achievement of the learning outcomes

**Reason:** From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department

of a hospital. However, the visitors could not identify how placements would be sourced and allocated to the large number of students for this programme. The visitors were unable to gain a clear understanding of the different placement settings, such as the non-ambulance setting, that were on offer to students, and which of these settings students would be required to attend. Therefore, the visitors require further evidence to show how the education provider ensures a range of placements to support the delivery of the programme, and the achievement of the learning outcomes.

### **5.3 The practice placement settings must provide a safe and supportive environment.**

**Condition:** The education provider must provide evidence to demonstrate how they ensure a safe and supportive environment at alternative (non-ambulance) placement settings.

**Reason:** From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. The visitors were provided with an audit process which demonstrated that placements provided by SECAMB provide a safe and supportive environment for students. However, the visitors did not see evidence to show there is a process to ensure a safe and supportive environment at placements in alternative (non-ambulance) settings. The programme team informed visitors that there are similar processes in place for placements in alternative (non-ambulance) settings as the ones in place for placements at SECAMB, but did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the placement experience. Therefore, the visitors require evidence to show how the education provider ensures a safe and supportive environment at alternative (non-ambulance) settings.

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

**Condition:** The education provider must submit evidence to demonstrate how they maintain a thorough and effective system of approving and monitoring all placements.

**Reason:** The visitors noted a number of different documents submitted by the education provider to demonstrate how the programme meets this standard. However, in considering the initial documentation submitted and discussions held at the visit, the visitors could not find any evidence of overarching policies, systems and procedures in place regarding the approval and monitoring of placements used by the programme. From discussions with the programme team, it was unclear how the education provider would maintain responsibility for the approval and monitoring of practice placements. The visitors could not determine the criteria used by the programme team to assess a placement and the overall process undertaken to approve it, as well as how activities such as the practice educator and student questionnaires feed into this. The visitors therefore require further evidence of the overarching policies, systems and procedures in place regarding the approval and monitoring of placements, and how they are put into practice, to ensure this standard is met. In particular, the visitors require further

evidence of the criteria used to approve placement providers and settings, the overall process for the approval and ongoing monitoring of placements, and how information gathered from placement providers at approval, or during a placement experience is considered and acted upon. Any such evidence should articulate what the process in place is and how this supports the review of the quality of a placement.

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

**Condition:** The education provider must provide evidence to demonstrate how they maintain a thorough and effective system of approving and monitoring placements in alternative (non-ambulance) settings.

**Reason:** From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. The visitors were provided with an audit process intended to demonstrate that the education provider maintains a thorough and effective system for approving and monitoring all placements at SECamb. However, the visitors did not see evidence to show that the education provider maintains a thorough and effective system for approving and monitoring placements in alternative (non-ambulance) settings. The programme team informed visitors that there are similar processes in place for placements in alternative (non-ambulance) settings as the ones in place for placements at SECamb, but did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the placement experience. Therefore, the visitors require evidence to show how the education provider maintains a thorough and effective system for approving and monitoring placements at alternative (non-ambulance) settings.

#### **5.5 The placement providers must have equality and diversity policies in relation to students, together with an indication of how these will be implemented and monitored.**

**Condition:** The education provider must provide evidence to demonstrate how they ensure equality and diversity policies are in place at alternative (non-ambulance) placement settings.

**Reason:** From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. The visitors were provided with an audit process which demonstrated that equality and diversity policies are in place for practice placements at SECamb. However, the visitors did not see evidence to show that there is a process to ensure there are equality and diversity policies at alternative (non-ambulance) settings. The programme team informed visitors that there are similar processes in place in alternative (non-ambulance) settings as the ones in place for placements at SECamb,

but did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the placement experience. Therefore, the visitors require evidence to show how the education provider ensures that equality and diversity policies are in place at alternative (non-ambulance) settings.

#### **5.6 There must be an adequate number of appropriately qualified and experienced staff at the practice placement setting.**

**Condition:** The education provider must provide further evidence to demonstrate how they ensure all placement settings have an adequate number of appropriately qualified, experienced and, where required, registered staff.

**Reason:** From the initial documentation provided, the visitors could not determine how the education provider ensures that practice placements have an adequate number of appropriately qualified and experienced staff. For this standard, the education provider referenced the “Database maintained by SECAMB Practice Placement Facilitator” in their SETs mapping document, but the visitors were unclear how this statement ensured this standard was met. From discussions with the programme team and the practice placement provider, the visitors learnt that the SECAMB hold a database of staff. From the documentation and discussions it was unclear how the education provider would maintain responsibility for ensuring all placement settings have an adequate number of appropriately qualified, experienced and, where required, registered staff. The visitors were therefore unable to make a judgment about whether this standard is met, and require information which demonstrates how the education provider ensures practice placements have an adequate number of appropriately qualified and experienced staff.

#### **5.6 There must be an adequate number of appropriately qualified and experienced staff at the practice placement setting.**

**Condition:** The education provider must provide evidence to demonstrate how they ensure placements in alternative (non-ambulance) settings have an adequate number of appropriately qualified and experienced staff.

**Reason:** From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. In discussions with the placement providers, the visitors learnt the audit process conducted by SECAMB to ensure that there are an adequate number of appropriately qualified and experienced staff in place in practice placements. However, the visitors did not see evidence to show there is a process in place to ensure an adequate number of staff in alternative (non-ambulance) settings placements, who are appropriately qualified and experienced. The programme team informed visitors that that there are similar processes in place for placements in alternative (non-ambulance) settings as the ones in place for placements at SECAMB, but did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the

placement experience, and due to the background of the staff at these placements. Therefore, the visitors require evidence to show how the education provider ensures an adequate number of appropriately qualified and experienced staff are in place within placements at alternative (non-ambulance) settings.

### **5.7 Practice placement educators must have relevant knowledge, skills and experience.**

**Condition:** The education provider must provide further evidence to demonstrate how they ensure all practice placement educators have the relevant knowledge, skills and experience.

**Reason:** From the documentation provided, the visitors could not determine how the education provider ensures that practice placement educators have the relevant knowledge, skills and experience. For this standard, the education provider referenced the “All clinical learning is supervised by HCPC registered paramedics or by Nursing and Midwifery Council [NMC] registered practitioners” in their SETs mapping document, but the visitors were unclear how this statement ensured this standard was met. From the discussions and initial documentation, it was unclear how the education provider would maintain responsibility for ensuring practice placement educators have the relevant knowledge, skills and experience. The visitors were therefore unable to make a judgment about whether this standard is met, and require further evidence to demonstrate how they ensure all practice placement educators have the relevant knowledge, skills and experience.

### **5.7 Practice placement educators must have relevant knowledge, skills and experience.**

**Condition:** The education provider must provide evidence to demonstrate how they ensure practice placement educators in alternative (non-ambulance) settings have relevant knowledge, skills and experience.

**Reason:** From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. In discussions with the placement providers, the visitors learnt the audit process conducted by SECamb to ensure that practice placement educators have the relevant knowledge, skills and experience in practice placements. However, the visitors did not see evidence to show there is a process to ensure staff at alternative (non-ambulance) settings have relevant skills, knowledge and experience. The programme team informed visitors that there are similar processes in place in alternative (non-ambulance) settings as the one in place for placements at SECamb, but did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the placement experience, and due to the background of the staff at these placements. Therefore, the visitors require evidence to show how the education provider ensures practice placement educators at alternative (non-ambulance) settings have the relevant knowledge, skills and experience.

### **5.8 Practice placement educators must undertake appropriate practice placement educator training.**

**Condition:** The programme team must provide evidence to demonstrate how they ensure that practice placement educators in alternative (non-ambulance) settings have undertaken appropriate placement educator training.

**Reason:** From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. In discussions with the placement providers, the visitors learnt the audit process conducted by SECamb to ensure that practice placement educators at SECamb undertake appropriate practice placement educator training. However, the visitors did not see evidence to show a process to ensure that practice placement educators will undertake appropriate practice placement educator training in alternative (non-ambulance) settings. The programme team informed visitors that there are similar processes in place in alternative (non-ambulance) settings as the one in place for placements at SECamb but did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the placement experience, and due to the background of the staff at these placements. Therefore, the visitors require evidence to show how the education provider ensures practice placement educators at alternative (non-ambulance) settings undertake appropriate practice placement educator training.

### **5.9 Practice placement educators must be appropriately registered, unless other arrangements are agreed.**

**Condition:** The programme team must provide evidence to demonstrate how they ensure that practice placement educators in alternative (non-ambulance) settings are appropriately registered, or agree other arrangements with the HCPC.

**Reason:** From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. In discussions with the placement providers, the visitors learnt the audit process conducted by SECamb to ensure practice placement educators at SECamb are appropriately registered. However, the visitors did not see evidence to show that the education provider has a process in place to ensure that practice placement educators are appropriately registered in alternative (non-ambulance) settings. The programme team informed visitors that there are similar processes in place in alternative (non-ambulance) settings as the one in place for placements at SECamb, but did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the placement experience, and due to the background of the staff at these placements. Therefore, the visitors require evidence to show how the education

provider ensures all practice placement educators at alternative (non-ambulance) settings are appropriately registered, or to agree other arrangements with the HCPC.

**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.

**Condition:** The programme team must provide further information on the learning outcomes for non-ambulance service placements, including methods of assessment, and any alignment to academic modules.

**Reason:** The visitors noted from discussions with the programme team that there will be placements in non-ambulance service settings. From the course handbook it was clear that the SECamb will be providing the core placements for this programme but students will also experience working as a paramedic in an urban area. The visitors noted the importance of ensuring students have sufficient exposure to a variety of situations such as within hospital settings and other non NHS placements. However, the visitors could not find further detail in the documentation to support these placement experiences, specifically regarding how these placements will be integrated with the programme, or information of the learning outcomes and associated assessments. The visitors therefore require further evidence that the students and placement educators in non-ambulance placement settings are given sufficient information to understand the learning outcomes to be achieved, and are therefore fully prepared for placement in non-ambulance settings.

**6.9 Assessment regulations must clearly specify requirements for an aegrotat award not to provide eligibility for admission to the Register.**

**Condition:** The education provider must clearly articulate that any aegrotat award conferred on a graduate of this programme will not lead to eligibility to apply for HCPC registration.

**Reason:** The visitors reviewed the documentation provided prior to the visit and noted a web link to the education provider's regulation and procedures. Upon reviewing the web link, the visitors were unable to locate the information that clearly articulates an aegrotat award will not lead to eligibility to apply for HCPC registration. As such the visitors could not determine how the programme team ensured that students understood that aegrotat awards conferred by the education provider would not enable those students to be eligible to apply to the Register. The visitors therefore require further evidence of the assessment regulation around this standard and that there is a clear statement included in the programme documentation regarding aegrotat awards and that this is accessible to students.



## Recommendations

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

**Recommendation:** The visitors recommend that the programme team continue to monitor and develop the learning resources available to students on the programme, to ensure that they continue to effectively support the required learning and teaching activities of the programme.

**Reason:** From the tour of resources at the visit, the visitors were made aware of the variety and volume of resources available to support the required learning and teaching activities of the programme. They were therefore satisfied that this standard is met at a threshold. However, in discussion at the visit a number of students highlighted that the resources available to them is limited particularly in relation to profession specific resources, however the programme team are very always on hand to ensure that resource is available to them. In discussion with the senior team, the visitors were made aware that further resources will be purchased ahead of the increase in student numbers which should ease demand on resources. The visitors would therefore like to recommend that the education provider continue to monitor and develop the learning resources available to students on the programme, to ensure that they continue to effectively support the required learning and teaching activities of the programme.

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