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## Performance review process report

### Oxford Health NHS Foundation Trust, Review Period 2021-2023

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#### **Executive summary**

This is a report of the process to review the performance of Oxford Health NHS Foundation Trust. This report captures the process we have undertaken to consider the performance of the institution in delivering HCPC-approved programmes. This enables us to make risk-based decisions about how to engage with this provider in the future, and to consider if there is any impact on our standards being met.

We have

- Reviewed the institution's portfolio submission against quality themes and found that we did not need to undertake further exploration of key themes through quality activities
- Recommended when the institution should next be reviewed
- Decided when the institution should next be reviewed

Through this assessment, we have noted:

- The quality of the education providers submission, which meant we did not need to explore areas through quality activities. We did explore some areas with the education provider for clarification, to inform our judgements against specific portfolio areas.
  - Some areas should be referred to another HCPC process for assessment. The information provided linked to these areas reflected on the recent changes made and the increase in learner numbers, which represented ongoing challenges. The visitors acknowledged there were plans in place to manage these changes, however recommended the following area should be referred to the next performance review for further review
    - Resourcing, including financial stability
    - Academic quality
    - Placement quality
    - Learner feedback
  - The provider must next engage with monitoring in two years, the 2025-26 academic year, because the education provider is performing well across most areas, but there:
    - Is a lack of established data points. We will work with the education provider to develop a data supply should this be what they intend. This data is intended to be available to be used at their next performance review (2025-26)
    - Are several areas that need picking up in two years, as noted in the bullet points above
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**Previous consideration** Not applicable. The performance review process was not referred from another process.

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

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

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

- Subject to the Panel's decision, the provider's next performance review will be in the 2025-26 academic year
- Subject to the Panel's decision, we will undertake further investigations as per section 5

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## Section 1: About this assessment

### About us

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

This is a report on the performance review process undertaken by the HCPC to ensure that the institution and practice areas(s) detailed in this report continue to meet our education standards. The report details the process itself, evidence considered, outcomes and recommendations made regarding the institution and programme(s) ongoing approval.

### Our standards

We approve education providers and programmes that meet our education standards. Individuals who complete approved programmes will meet proficiency standards, which set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

### Our regulatory approach

We are flexible, intelligent and data-led in our quality assurance of programme clusters and programmes. Through our processes, we:

- enable bespoke, proportionate and effective regulatory engagement with education providers;
- use data and intelligence to enable effective risk-based decision making; and
- engage at the organisation, profession and programme levels to enhance our ability to assess the impact of risks and issues on HCPC standards.

Providers and programmes are [approved on an open-ended basis](#), subject to ongoing monitoring. Programmes we have approved are listed [on our website](#).

### The performance review process

Once a programme institution is approved, we will take assurance it continues to meet standards through:

- regular assessment of key data points, supplied by the education provider and external organisations; and
- assessment of a self-reflective portfolio and evidence, supplied on a cyclical basis

Through monitoring, we take assurance in a bespoke and flexible way, meaning that we will assess how an education provider is performing based on what we see, rather than by a one size fits all approach. We take this assurance at the provider level wherever possible, and will delve into programme / profession level detail where we need to.

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

### **Thematic areas reviewed**

We normally focus on the following areas:

- Institution self-reflection, including resourcing, partnerships, quality, the input of others, and equality and diversity
- Thematic reflection, focusing on timely developments within the education sector
- Provider reflection on the assessment of other sector bodies, including professional bodies and systems regulators
- Provider reflection on developments linked to specific professions
- Stakeholder feedback and actions

### **How we make our decisions**

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint [partner visitors](#) to design quality assurance assessments, and assess evidence and information relevant to the assessment. Visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make the decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee takes decisions through different levels depending on the routines and impact of the decision, and where appropriate meets in public. Their decisions are available to view [on our website](#).

### **The assessment panel for this review**

We appointed the following panel members to support a review of this education provider:

Garrett Kennedy	Lead visitor, Practitioner Psychologist
Rosemary Schaeffer	Lead visitor, Practitioner Psychologist
Prisha Shah	Service User Expert Advisor
Laura Dean	Advisory visitor, Practitioner Psychologist
Saranjit Binning	Education Quality Officer

We encourage reflections through portfolios to be made at the institution level wherever possible. The performance review process does not always require profession level scrutiny which requires all professionals to be represented in the assessment panel. Rather, the process considers how the education provider has performed at institution level, linked to the themes defined in section 1. Lead visitors have the option to appoint additional advisory partners where this will benefit the assessment, and / or where they are not able to make judgements based on their own professional knowledge.

In this assessment, we did not require professional expertise across all professional areas delivered by the education provider. We considered this because the lead visitors were satisfied, they could assess performance and risk. However, we did involve an additional advisory visitor to provide them with the opportunity to be involved with the performance review process to expand their knowledge of the process.

## Section 2: About the education provider

### The education provider context

The education provider currently delivers one HCPC-approved programme across one profession. It is a private education provider and has been running HCPC approved programmes since 2000.

Oxford Health NHS Foundation Trust provides social care services to people across Oxfordshire, Buckinghamshire, Swindon, Wiltshire, Bath and Northeast Somerset and deliver their services through hospitals, community bases and clinics. The Oxford Institute of Clinical Psychology Training and Research is part of the Oxford Health NHS Foundation Trust and hosts the Doctorate in Clinical Psychology. This programme is validated by the University of Oxford.

The British Association for Behavioural and Cognitive Psychotherapies (BABCP) and Association for Family Therapy and Systemic Practice (AFT) are involved with the delivery of the programme but are not part of the HCPC provision and HCPC registration does not apply.

Oxford Health NHS Foundation Trust previously engaged with the Performance Review process in 2021-22 and there were no concerns to be referred to another process at that time.

### Practice areas delivered by the education provider

The provider is approved to deliver training in the following professional areas. A detailed list of approved programme awards can be found in [Appendix 1](#) of this report.

	Practice area	Delivery level		Approved since
<b>Pre-registration</b>	Practitioner psychologist	<input type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> 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<sup>1</sup>.

Data Point	Benchmark	Value	Date	Commentary
Number of learners	15	44	2024	<p>The benchmark figure is data we have captured from previous interactions with the education provider, such as through initial programme approval, and / or through previous performance review assessments. Resources available for the benchmark number of learners was assessed and accepted through these processes. The value figure was presented by the education provider through this submission.</p> <p>The education provider is recruiting learners above the benchmark.</p> <p>We explored this further and noted the increase in learner numbers was due to the expansion of commissioned places from NHS England.</p>
Learner non continuation	3%	N/A	2020-21	There is no data available for this data point. We asked the education provider to consider if they wanted to establish ongoing data reporting for this and other data points through this performance review assessment.
Outcomes for those who complete programmes	93%	N/A	2020-21	There is no data available for this data point. We asked the education provider to consider if they wanted to establish ongoing data reporting for this and other data points through

<sup>1</sup> An explanation of the data we use, and how we use this data, is available [here](#)

				this performance review assessment.
Learner satisfaction	N/A	N/A	2023	There is no data available for this data point. We asked the education provider to consider if they wanted to establish ongoing data reporting for this and other data points through this performance review assessment.

## Section 3: Performance analysis and quality themes

### Portfolio submission

The education provider was asked to provide a self-reflective portfolio submission covering the broad topics referenced in the [thematic areas reviewed](#) section of this report.

The education provider's self-reflection was focused on challenges, developments, and successes related to each thematic area. They also supplied data, supporting evidence and information.

### Quality themes identified for further exploration

Visitors reviewed the portfolio and the supporting documentation. Through their review they acknowledged the level of detail and reflection in the submission was appropriate. They recognised the education provider had produced a high quality document with appropriate evidence to indicate good performance. Due to the quality of the submission visitors did not identify any quality themes that required further exploration.

## Section 4: Findings

This section provides information summarising the visitors' findings for each portfolio area, focusing on the approach or approaches taken, developments, what this means for performance, and why. The section also includes a summary of risks, further areas to be followed up, and areas of good practice.

### Overall findings on performance

#### Quality theme: Institution self-reflection

#### Findings of the assessment panel:

- **Resourcing, including financial stability –**
  - The education provider reflected on the challenge they experienced with the transition from the validated programme to a partnership in 2023, which impacted the previous two years of learners. It was noted the 2023 intake was under the new contractual arrangements, however



they recognised this change would continue to affect learners for the next two years.

- Financially, the new arrangements for course management and trainee employment were effective, although it was noted there would not be an increase with NHS England funding for the next three years. Any shortfall from this would then be managed through the education providers partnership with University of Oxford.
- The expansion of the intake to 52 learners, with a potential increase to 60, posed significant challenges, particularly in securing adequate teaching space. This issue was addressed by securing additional teaching space in a newly refurbished building. Through the financial planning the education provider were confident the staff-student ratio was sustainable. However, it was noted how NHS England had wanted to increase learner numbers to 60 but a decision was made to delay this to preserve the quality of practice-based learning. It was clear they were aware of the challenges and had made appropriate plans to manage the expansion of learner numbers and resources.
- Visitors noted the recent changes made and the increase in learner numbers, which both represented ongoing challenges. They acknowledged there were plans in place to manage these changes, however recommended this area should be referred to the next performance review for further review.
- Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.
- **Partnerships with other organisations –**
  - The new arrangements led to a hybrid setup, which resulted in the University of Oxford managing the 2023 intake of learners and the previous cohorts continuing to be managed under the previous arrangements. This transitional period required some governance adjustments and changes to regulations, which the University of Oxford and education provider worked on together. Both providers have worked in partnership to support these changes and also made a joint staffing appointment who will work across both providers.
  - The education provider reflected on the strong relationship they had with NHS England who they worked with closely. It was clear they mainly worked in partnership with the University and NHS England to deliver the programme.
  - Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.
- **Academic quality –**
  - Reflections were provided on the process of maintaining a high-quality taught programme within a limited timeframe. It was clear that adapting to new developments in the field and accommodating learners from diverse professions was important. Regular updates to the programme and assessments, in line with HCPC's updated SOPs, ensured that the training remained relevant and effective.
  - The education provider highlighted the clinical areas that would be taught in the curriculum and identified additional training opportunities

for those areas that would not be covered through this approach. The effectiveness of this approach was monitored and feedback was gathered and shared with staff. This enabled them to evaluate the quality of teaching and identify any improvements that could be made to further enhance the teaching.

- The importance of maintaining academic quality was recognised and this involved collaboration with stakeholders, which included practice educators and trainees. They noted how important it was to enhance the training within the taught hours they had been allocated and were mindful these hours should not increase.
  - Visitors noted the recent changes made and the increase in learner numbers, which both represented ongoing challenges. They acknowledged there were plans in place to manage these changes, however recommended this area should be referred to the next performance review for further review.
  - Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.
- **Placement quality –**
    - The education provider reflected on the challenges experienced with ensuring the quality and effectiveness of clinical training to meet the demands of a large cohort. There were also challenges with securing sufficient practice-based learning and having sufficient practice educators to support the learners. To address these challenges, the education provider made efforts to strengthen links with local placement providers, which would enhance the learner experience as these practice-based learning opportunities would reduce the commuting time for learners.
    - It was clear the education provider were committed to enhancing the quality and accessibility of practice-based learning. For example, they expanded commissioned places to the Midlands area, offered refresher training for practice educators and expanded practice-based learning to include opportunities with children and with specialised services such as clinical health settings. There were a number of other initiatives highlighted which demonstrated the education providers efforts to provide good quality and diverse placement experiences for learners.
    - The expansion of commissioned places from 17 in 2018 to 52 in 2023 was recognised as an achievement. They acknowledged there had been challenges involved with this, such as the need to increase the pool of practice educators to meet this demand. However, this achievement highlighted their commitment to growth and efforts to continue improving the learner experience.
    - Visitors noted the recent changes made and the increase in learner numbers, which both represented ongoing challenges. They acknowledged there were plans in place to manage these changes, however recommended this area should be referred to the next performance review for further review.
    - Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.

- **Interprofessional education –**
  - The education provider delivered an annual one-day workshop in collaboration with final year General Practitioner (GP) trainees. This workshop covered a range of teaching methods, such as direct teaching, group work, problem-based learning and role-play. The purpose of the workshop was to enable learners to gain a better understanding of each profession's roles and integrate psychological issues into primary care. It was noted the feedback received from learners in relation to the workshop was positive.
  - A range of interprofessional education opportunities were offered through the placement contracts they had. These opportunities included co-working cases with other disciplines, supervision sessions and interprofessional education events.
  - Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.
- **Service users and carers –**
  - The programme had a dedicated service user and carer involvement group who they referred to as The People's Experience Group (PEG). The group contributed to the training programme by reviewing trainee research proposals, consulting on projects, representing the group on course committees, teaching, and participating in admissions. In addition to this they also held quarterly meetings with the staff team and learners.
  - Reflections were provided on the challenges experienced with the need to expand service user and carer involvement due to the increased learner numbers. As a result of this, the education provider recruited additional service users and carers and also established connections with a Young People's involvement group.
  - The education provider acknowledged the importance of service user and carer involvement and noted the positive feedback they had received from learners. To continue with this work good work, they will be developing a webpage and connecting with a wider range of service user groups, such as people with learning disabilities to encourage diversity.
  - Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.
- **Equality and diversity –**
  - The work undertaken by the Access and Outreach group was acknowledged, however due to limited resources this was temporarily on hold until next year. The work included them supporting individuals from disadvantaged backgrounds by engaging with learners in their career journeys. This included understanding perceptions of clinical training, identifying the barriers and providing career guidance.
  - There was a clear commitment to incorporating the Equality, Diversity and Inclusion (EDI) standards into various aspects of their work. This included incorporation into the assignments and university regulations. In particular there was an emphasis on well-being and reasonable adjustments and taking account of these and the requirements of the

profession. To explore this area further, the education provider appointed a disability lead and a working group to consider disabilities and reasonable adjustments.

- They recognised the increased focus on diversity among lecturers and practice educators, along with the incorporation of EDI considerations into teaching sessions. This demonstrated a commitment to creating an inclusive learning environment for learners. In addition to this it was noted a reflective practice group for learners from ethnic minority backgrounds had been developed. This initiative provided learners with a space for personal and professional identity exploration. Overall, these efforts reflected the education providers ongoing commitment to equality, diversity, and inclusion to ensure trainees were supported.
- Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.
- **Horizon scanning –**
  - The programme experienced some challenges due to the NHSE's expansion requirements, where the learner intake increased from 17 to 52. Despite pressure to further increase the intake to 60, the programme prioritised maintaining placement quality and appropriate staffing resources.
  - The recent developments and growth highlighted the need to increase teaching space, which was managed through leased spaces. The education provider also collaborated with the University on the development of a new hospital, which was in the early stages. The introduction of new joint posts between the University and the programme presented opportunities to enhance applied research without compromising the staff-student ratio. These efforts collectively ensured the course continued to provide good quality education.
  - Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.

**Risks identified which may impact on performance:** None.

**Outstanding issues for follow up:**

- **Resourcing, including financial stability**
- **Academic quality**
- **Placement quality**

The information provided in the sections above reflected on the recent changes made and the increase in learner numbers, which both represented ongoing challenges within the three areas. Visitors acknowledged there were plans in place to manage these changes, however recommended these areas should be referred to the next performance review for further review.

Quality theme: Thematic reflection

**Findings of the assessment panel:**

- **Embedding the revised Standards of Proficiency (SOPs) –**

- To ensure the revised SOPs were embedded, the education provider undertook a thorough review of the programme. Through this approach they were able to discuss the revised SOPs with NHS supervisors, learners and staff and consider their feedback. This led to changes in evaluating clinical competencies and teaching methods. Additionally, new SOPs focusing on wellness and fitness to practice were integrated into induction teaching and professional development reviews.
- Through clarification, we noted the revised SOPs had been embedded throughout the programme and some changes had been made. For example, they focused on active implementation and ensured this was introduced early and reinforced in the final year in the 'preparation for qualified practice' sessions. There was also an increased emphasis on the qualities and behaviours of leadership throughout the programme. Other examples included enhanced sessions to highlight the links between social, health and mental health inequalities. They also acknowledged the growing use of telehealth and therefore enhanced the teaching to cover confidentiality and accessibility issues.
- Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.
- **Use of technology: Changing learning, teaching and assessment methods –**
  - The education provider reflected on how they had adopted a blended approach to delivering the programme, which involved in-person and online platforms. They recognised how effective the online sessions had been for small seminars and skills classes. Recognising the benefits of both platforms the education provider made the decision to continue using both, as this approach increased the flexibility for both learners and staff.
  - To support staff with using the various online platforms, such as Padlet and Mentimeter they developed some training programmes. These programmes supported external presenters with using the platforms and ensured they had the same access to the same tools as internal staff did.
  - Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.
- **Apprenticeships in England –**
  - The education provider currently has no plans to develop apprenticeships in the HCPC regulated professions.
  - Visitors were satisfied with the information provided in this section.

**Risks identified which may impact on performance:** None.

**Outstanding issues for follow up:** None.

Quality theme: Sector body assessment reflection

**Findings of the assessment panel:**

- **Assessments against the UK Quality Code for Higher Education –**

- Due to the nature of their provision, the education provider was unable to provide a reflection in this area.
- Visitors were satisfied with the information provided in this section.
- **Office for Students (OfS) –**
  - Due to the nature of their provision, the education provider was unable to provide a reflection in this area.
  - Visitors were satisfied with the information provided in this section.
- **Other professional regulators / professional bodies –**
  - It was noted the programme had received secondary accreditation from several bodies, such as the British Association for Behavioural and Cognitive Psychotherapy (BABCP) and the Association for Family Therapy (AFT).
  - Through clarification we noted, in January 2024 the programme was approved by the BPS for six years and seven recommendations were made which they responded to, with the exception of one. This recommendation concerned placement failure procedures, which were reviewed by the programme team and deemed as fair and clear, so no changes were made. In addition to this, their commitment to best practice was demonstrated further through their involvement with the BPS Group of Trainers in Clinical Psychology who they will be hosting an annual conference for in December 2024.
  - Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.

**Risks identified which may impact on performance:** None.

**Outstanding issues for follow up:** None.

Quality theme: Profession specific reflection

**Findings of the assessment panel:**

- **Curriculum development –**
  - It was clear the education provider had been proactive in addressing the social demands and the NHSE priorities. By assigning a dedicated staff member to review the cultural suitability of the content within the taught sessions, they acknowledged the importance of the need to ensure the curriculum was inclusive and diverse. Additional sessions were included, which focused on mental health, homelessness, and health psychology. This enabled the education provider to provide learners with an inclusive learning environment where they could discuss lived experiences of mental health. These initiatives reflected the education providers commitment to creating a culturally sensitive educational experience.
  - It was noted how the majority of the revised SOPS were already embedded within the curriculum through induction sessions, taught components and clinical placements. However, they did focus on expanding some areas of the programme such as service user and carer involvement and areas of clinical need, such as homelessness.

- Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.
- **Development to reflect changes in professional body guidance –**
  - The education provider highlighted the minor changes they had made in response to the BABCP guidance. This demonstrated their ability to adapt to new standards while maintaining the quality of the programmes.
  - Through clarification we noted the education provider had considered guidance from the AFT and responded to the recommendations they had made. Further examples of how guidance had been considered to align with updated standards related to the BABCP, where they had removed group cognitive behavioural therapy (CBT) sessions from required clinical hours. This demonstrated their commitment to responding to feedback and continuous improvement.
  - Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.
- **Capacity of practice-based learning (programme / profession level) –**
  - The education provider reflected on how the increased learner numbers had created some challenges with securing practice-based learning and practice educators. To resolve this issue the education provider made changes to the practice-based learning model and moved away from traditional practice-based learning. This was replaced with a core competency model, which recognised the competencies gained through the duration of the programme and not just practice-based learning. The purpose of this approach was to reduce some of the pressure with identifying practice-based learning opportunities and practice educators.
  - It was noted the induction teaching had been updated to include comprehensive introductory sessions, which covered all placement options. In addition to this, learners also had access to previous teaching resources to support their learning. To further enhance the support offered to learners, it was noted the education provider collaborated with service leads and practice educators to develop introductory teaching modules. The importance of this support was recognised as it prepared learners appropriately for practice-based learning.
  - Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.

**Risks identified which may impact on performance:** None.

**Outstanding issues for follow up:** None.

Quality theme: Stakeholder feedback and actions

**Findings of the assessment panel:**

- **Learners –**

- The education provider confirmed they had not received any formal complaints, however they had received feedback where there were areas highlighted that required improvement. The two issues highlighted related to coursework marking turnaround time and research supervisor organisation.
- It was noted the surveys were used to collect learner feedback, however in addition to this they used various other methods. These included cohort meetings, committee meetings and the use of Padlet.
- Visitors acknowledged the information provided in this section outlined the process by which learner feedback was sought and actioned and confirmed they were satisfied with the quality arrangements. However, they commented there was no reflection on any improvements made to the service delivered. They therefore recommended this should be reviewed further in the next performance review.
- **Practice placement educators –**
  - CANVAS was an online platform used by practice educators to access webinars to provide them with support. Further training opportunities were identified through the feedback practice educators provided, such as Supervision of Supervision, which started in February 2024. In addition to this, the Charney Manor workshops were tailored to focus on Neurodiversity in Supervision. This highlighted the education providers commitment to providing practice educators with tailored training to develop their skills and support learners.
  - They reflected on the challenges they experienced with the increase in learner numbers and the expansion of the geographical area because of this. As a result of this expansion, they had to develop and maintain the relationships with the new services, which had been challenging and time consuming. The Practice and Placement Committee played a key role here for reviewing practice-based learning and addressing any arising issues, which ensured they were able to maintain strong relationships with both new and existing services.
  - Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.
- **External examiners –**
  - The education provider reflected on the positive feedback they had received from external examiners over the past two years. The real-life nature and applied content of the time limited assignments was particularly highlighted. As a result of this feedback, they also considered integrating diversity as a core clinical competency in the assessments. It was clear the education provider valued the external examiners feedback and made changes to the programme accordingly.
  - Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.

**Risks identified which may impact on performance:** None.

**Outstanding issues for follow up:**



**Learners** – The information provided in this section outlined the process by which learner feedback was sought and actioned, however visitors commented there was no reflection on any improvements made to the service delivered. They therefore recommended this should be reviewed further in the next performance review.

### Data and reflections

#### **Findings of the assessment panel:**

- **Learner non continuation:**
  - The education provider highlighted they had a 0% withdrawal rate for the programme, which was positive. They outlined how they maintained detailed local records of this data and regularly reported it to NHSE. They acknowledged the HCPC were unable to use this data as it was not externally verified. In order to address this, the education provider are working with the HCPC to establish a regular supply of data points that can be used to assess their performance going forward.
  - The visitors were satisfied with the education providers performance in this area and acknowledged they were engaging with the HCPC to develop a regular supply of data points.
- **Outcomes for those who complete programmes:**
  - All learners completed on time and registered with the HCPC, however there were a higher number of delayed submissions during this period, which was due to the pandemic. It was noted there were nine learners who had been delayed and all completed, except one who was delayed for personal reasons.
  - They reflected on their commitment to selecting learners who were committed to working in the NHS and confirmed the learners who completed entered health and social care roles. This was important to them due to the fact that the programme was completely funded by NHSE.
  - The visitors were satisfied with the education providers performance in this area and acknowledged they were engaging with the HCPC to develop a regular supply of data points.
- **Learner satisfaction:**
  - Reflections were provided on the difficulties experienced with maintaining learner satisfaction. This was due to the increased learner numbers and some of the constraints of the restrictions during the pandemic. These issues were addressed by moving the majority of teaching back to face to face delivery and only delivering a small number of sessions online. Practice-based learning opportunities were also impacted during this period, however it was noted this had stabilised and the education provider had increased the number of clinical placements available.
  - The education provider were able to provide an overall learner satisfaction score which was 56%. This was based on data they had extracted from the Annual Trainee Experience survey. They acknowledged the HCPC were unable to use this data as it was not externally verified. In order to address this, the education provider are

working with the HCPC to establish a regular supply of data points that can be used to assess their performance going forward.

- The visitors were satisfied with the education providers performance in this area and acknowledged they were engaging with the HCPC to develop a regular supply of data points.
- **Programme level data:**
  - It was clear the education provider held comprehensive records of learner registration and collected feedback annually on all elements of the programme, which included teaching and practice-based learning. They acknowledged this data did not align with HCPC reporting, however indicated that in future they would be able to obtain HESA data through the University, which would be linked to the 2023 intake of learners. In addition to this, the education provider are working with the HCPC to establish a regular supply of data points that can be used to assess their performance going forward.
  - The visitors were satisfied with the education providers performance in this area and acknowledged they were engaging with the HCPC to develop a regular supply of data points.

**Proposal for supplying data points to the HCPC:** The education provider has confirmed they will continue to work with the HCPC to develop a regular supply of data points. The new updated guidance for establishing data points will be used, as this guidance has been designed to support education providers in this position where data is not captured through the same sources as HEIs due to the nature of their provision.

**Risks identified which may impact on performance:** None.

**Outstanding issues for follow up:** None.

## Section 5: Issues identified for further review

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

### **Referrals to next scheduled performance review**

#### Resourcing, including financial stability

**Summary of issue:** The information provided in the sections above reflected on the recent changes made and the increase in learner numbers, which both represented ongoing challenges in this area. Visitors acknowledged there were plans in place to manage these changes, however recommended this area should be referred to the next performance review for further review.

#### Academic quality

**Summary of issue:** The information provided in the sections above reflected on the recent changes made and the increase in learner numbers, which both represented ongoing challenges in this area. Visitors acknowledged there were plans in place to

manage these changes, however recommended this area should be referred to the next performance review for further review.

### Placement quality

**Summary of issue:** The information provided in the sections above reflected on the recent changes made and the increase in learner numbers, which both represented ongoing challenges in this area. Visitors acknowledged there were plans in place to manage these changes, however recommended this area should be referred to the next performance review for further review.

### Learners

**Summary of issue:** The information provided in this section outlined the process by which learner feedback was sought and actioned, however visitors commented there was no reflection on any improvements made to the service delivered. They therefore recommended this should be reviewed further in the next performance review.

## Section 6: Decision on performance review outcomes

### **Assessment panel recommendation**

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

- The education provider's next engagement with the performance review process should be in the 2025-26 academic year
- The issues identified for referral through this review should be carried out in accordance with the details contained in section 5 of this report

### **Reason for next engagement recommendation**

- Internal stakeholder engagement
  - The education provider engages with a range of stakeholders with quality assurance and enhancement in mind. Specific groups engaged by the education provider were learners, service users, practice educators, partner organisations, external examiners.
- External input into quality assurance and enhancement
  - The education provider engaged with three professional bodies / groups. They considered professional body findings in improving their provision
  - The education provider engaged with HCPC. They considered the findings of HCPC in improving their provision
  - The education provider considers sector and professional development in a structured way
- Data supply
  - We will work with the education provider to develop a data supply should this be what they intend. This data is intended to be available to be used at their next performance review (2025-26)

- In summary, the reason for the recommendation of a two year monitoring period is:
  - Due to the lack of established data points. As detailed above we shall work with the education provider to develop the required data. This data will then be available to be used at their next performance review (2025-26).

### **Education and Training Committee decision**

Education and Training Committee considered the assessment panel's recommendations and the findings which support these. The education provider was also provided with the opportunity to submit any observation they had on the conclusions reached.

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

- The education provider's next engagement with the performance review process should be in the 2025-26 academic year
- The issues identified for referral through this review should be carried out through the next performance review process.

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

## 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 the next steps for the provider. The lead visitors confirm this is an accurate summary of their recommendation (including their reasons) and any referrals.

Education provider	Case reference	Lead visitors	Review period recommendation	Reason for recommendation	Referrals
Oxford Health NHS Foundation Trust	CAS-01386-M1N7V2	Garrett Kennedy  Rosemary Schaeffer	Two years	<p>In summary, the reason for the recommendation of a two year monitoring period is:</p> <ul style="list-style-type: none"> <li>• Due to the lack of established data points. As detailed above we shall work with the education provider to develop the required data. This data will then be available to be used at their next performance review (2025-26)</li> <li>• Several areas that need picking up in two years, as noted in the referrals column</li> </ul>	<p>Some areas should be referred to the next performance review assessment. The information provided linked to these areas reflected on the recent changes made and the increase in learner numbers, which represented ongoing challenges. The visitors acknowledged there were plans in place to manage these changes, however recommended the following area should be referred to the next performance review for further review</p> <ul style="list-style-type: none"> <li>• Resourcing, including financial stability</li> <li>• Academic quality</li> <li>• Placement quality</li> <li>• Learner feedback</li> </ul>

Appendix 2 – list of open programmes at this institution

<b>Name</b>	<b>Mode of study</b>	<b>Profession</b>	<b>Modality</b>	<b>Annotation</b>	<b>First intake date</b>
Doctorate in Clinical Psychology (D.Clin Psych)	FT (Full time)	Practitioner psychologist	Clinical psychologist		01/01/2000