

Visitor guidance on the standards of education and training

The Standards of Education and Training (SETs) set out the general principles on which judgements about educational provision and with which providers must comply. They are deliberately not over prescriptive. The following guidance is designed to help visitors in his/her interpretation of the SETs. It will also be necessary to cross-reference to the detail contained within curriculum guidance.

There is no reference within the SETs to legislation (such as the Disability Discrimination Act) as providers must comply with the relevant legislation anyway.

Reference to other standards such as National Occupational Standards or standards of professional bodies is done so cautiously as the HPC do not own, control or have responsibility for any standards or guidance except its own. Other organisations can and do set requirements and standards for different (albeit similar) purposes and at different levels to ours.

Providers are asked to map their submission against the SETs. A template for this can be found in Appendix 1.

Each section of the Standards is presented followed by further guidance in italics. Suggestions of where to look for evidence that the section has been met are included. Appendix 2 provides an 'at a glance' summary table indicating where evidence might be found. This table is by no means prescriptive and evidence may be found elsewhere. Equally, it may not be necessary use all the evidence suggested as submissions may clearly show how the SETs are met.

1. Level of qualification for entry to the Register

1.1 The Council normally expects that the threshold entry routes to the Register will be the following:

1.1.1 Bachelor degree with honours for the following professions:

- chiropody/podiatry;
- dietetics;
- occupational therapy;
- orthoptics;
- physiotherapy;
- prosthetics and orthotics;
- radiography;
- speech and language therapy;
- biomedical science (with the Certificate of Competence awarded by the Institute of Biomedical Science, or equivalent);

1.1.2 Masters degree for the arts therapies.

1.1.3 Masters degree for the clinical sciences (with the award of the Association of Clinical Scientists' Certificate of Attainment, or equivalent).

1.1.4 Equivalent to Certificate of Higher Education for paramedics.

A blanket academic requirement is not set as each profession tailors its needs to an appropriate academic level. These are the threshold entry levels to the Register although some providers offer higher level qualifications.

2. Programme admissions

The admission procedures must:

2.1 give both the applicant and the education provider the information they require to make an informed choice about whether to make, or take up the offer of a place on a programme;

This may include the requirement to undertake workplace observation or experience in order to make an informed choice from both student and provider perspectives.

2.2 apply selection and entry criteria, including:

- 2.2.1 evidence of a good command of written and spoken English;
- 2.2.2 criminal convictions checks;
- 2.2.3 compliance with any health requirements;
- 2.2.4 appropriate academic and/or professional entry standards;
- 2.2.5 Accreditation of Prior Learning and other inclusive mechanisms.

Individual curriculum guidance will provide further detail of issues to be included into the submission documentation including English language competence, admissions assessment methods, criminal convictions and other conduct issues, health requirements, issues relating to disability, and academic or professional entry requirements including Accreditation of Prior Learning (APL).

It is appropriate for providers to consider Accreditation of Prior Experiential Learning (APEL) or Accreditation of Prior Certificated Learning (APCL) to allow advanced standing for individuals entering a programme. Each institution will have its own regulations concerning the amount of advanced standing which can be given.

2.3 ensure that the education provider has an equal opportunities and anti-discriminatory policy in relation to candidates and students, together with an indication of how this will be implemented and monitored.

3. Programme management and resources standards

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

Evidence may be a copy of the current Business plan, or an extract of the Business plan. Approvals events require a meeting with senior personnel of the provider with responsibility for resources for the programme. This meeting may also help to establish that the programme has a secure place in the business plan.

3.2 The programme must be managed effectively.

This may be evident from a range of internal and external quality mechanisms such as external examiner reports, a critical review of current provision, student/ placement provider/ tutor feedback and clear action plans.

3.3 There must be a named programme leader who has overall responsibility for the programme and should either be on the relevant part of the HPC Register or otherwise appropriately qualified and experienced.

A CV or staff profile within the documentation provided should indicate the appropriateness of the individual. Appropriate qualification and experience may include programme leadership skills and an ability to effectively organise the delivery of the programme. There may be occasions where the programme leader has very little if any teaching input into the programme, but acts as manager of the tutors delivering on the programme and the procedures associated with it. Visitors need to satisfy themselves that the programme leader is appropriately experienced and has the ability to effectively manage the programme.

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

The notion of student to staff ratio has been used previously to determine 'adequate numbers', however other indicators should also be used such as;

- *the critical mass of staff team (ie administrative roles can be spread more easily with a larger critical mass)*
- *the amount of input from external lecturers or lecturers from outside the programme team*
- *the experience of the team and how established they are within the institution*
- *the learning and teaching methodology adopted*

3.5 Subject areas must be taught by staff with relevant specialist expertise and knowledge.

Staff CVs or a staff profile will help elicit this information.

3.6 A programme for staff development must be in place to ensure continuing professional and research development.

The visitor needs to be reassured that individuals have the opportunity to continue to develop. The staff development strategy may be informed by the provider institutions, the programme teams and the individual's development needs. This might be evidenced through staff development strategies, CVs, appraisals, staff profiles, professional development portfolios.

3.7 The resources to support student learning in all settings must be used effectively.

Evaluation of the effectiveness of the deployment and use of resources should be in place through the provider's quality mechanisms and reports. Evidence may be provided through recent annual monitoring reports or in the critical review in the submission document.

3.8 The facilities needed to ensure the welfare and well-being of students must be both adequate and accessible.

Support mechanisms such as student services departments, counselling, financial advice etc. must be in place and accessible during both academic and practice attendance.

3.9 Where students participate as patients or clients in practical and clinical teaching, appropriate protocols must be used to obtain their consent.

Providers should make potential candidates aware of the expectations of the programme regarding the level of participation expected by the student and this should be articulated within the programme documentation and included in the programme recruitment and admissions procedures.

3.10 A system of academic and pastoral student support must be in place.

Support at programme level and on a wider provider level should be explicit within the submission documentation. It should include how students are supported academically and pastorally during both academic and practice attendance.

There should be mention of how part-time, in-service or mature students are supported in addition to 'standard' systems.

There should be particular provision for students with disabilities.

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

Students need a clear indication of attendance expectations. Mechanisms for monitoring need to be robust to ensure that students are not unfairly penalised for being recorded as absent when they have actually attended.

3.12 The resources provided, both on and off site, must adequately support the required learning and teaching activities of the programme.

A list of specialist and IT resources on and off site should be available and considered alongside the learning, teaching and assessment strategies. There should be an appropriate range of resources including communication and information technology and the use of e-learning as well as more standard classroom facilities. Rigorous quality assurance mechanisms are essential in monitoring this information.

3.13 The learning resources, including the stock of periodicals and subject books, and IT facilities, including internet access, must be appropriate to the curriculum and must be readily available to students and staff.

The level of availability, quantity, accessibility and the currency of resources should be considered when assessing appropriateness. Visitor access to the on-line library catalogue would be useful in assessing the written resources available (paper and electronic).

4. Curriculum standards

4.1 The learning outcomes must ensure that those who successfully complete the programme meet the standards of proficiency for their part of the Register.

Using a standard template submitted as part of the documentation (appendix), providers complete a mapping exercise indicating exactly where the learning outcomes match the Standards of Proficiency. The template ensures that this mapping exercise is familiar and consistent.

4.2 The programme must reflect the philosophy, values, skills and knowledge base as articulated in the curriculum guidance for the profession and takes other external reference frameworks into account.

4.3 Integration of theory and practice must be central to the curriculum to enable safe and effective practice.

Safe practice, of self and others, should be a key feature in curriculum and detailed within relevant curriculum guidance.

Some key areas to consider which may indicate the level of integration are;

- *patterns of attendance ie placement and provider based delivery.*
- *assessment strategy and modes.*
- *learning and teaching strategies ie problem or enquiry based learning; practice simulation.*

4.4 The curriculum must remain relevant to current practice.

Appropriate stakeholder involvement (eg professional body, employers, workforce development confederation representatives, users and carers) in updating the curriculum should be evidenced through the constitution of the programme development group and through a range of stakeholder feedback. The curriculum should also be informed by current policy and health and social care developments. Wherever possible and appropriate, there should be evidence that the curriculum is evidence-based.

4.5 The delivery of the programme must assist autonomous and reflective thinking, and evidence based practice.

Learning, teaching and assessment strategies should be designed to be student centred. Aspects such as self appraisal and action planning will enable students to become reflective. Individual and group tasks, discussion groups, workshops, practice simulation and debriefing, practice placement review will all assist in developing reflective, autonomous practitioners.

4.6 The range of learning and teaching approaches used must be appropriate to the subjects in the curriculum.

4.7 Where there is inter-professional learning the profession specific skills and knowledge of each professional group must be adequately addressed.

Mapping the learning outcomes of the programme against the Standards of Proficiency will help to provide evidence of an appropriate balance and cross-check that all profession specific skills are addressed.

5. Practice placements standards

5.1 Practice placements must be integral to the programme.

5.2 There must be an adequate number of appropriately qualified and experienced staff at the placement.

Appropriately qualified can be interpreted in different ways depending on the student's learning objectives for the placement. If profession specific skill

development predominates then it is appropriate to ensure that a practitioner registered in that area is the practice educator/supervisor.

Different professions practice different models of practice placement, including the relationship with the practice educator/supervisor. For instance a one to one relationship may be the ideal for many professions whereas there may be four or five students to one supervisor in others. It is up to the provider to justify what they consider to be adequate numbers and ratios. Ratios may vary according to the level of support needed by the student, for example students in the 3rd year of a programme are going to need less 'direct' supervision than those in the 1st year.

There should be some evidence within the curriculum documentation of how these ratios are monitored and controlled.

5.3 The practice placement settings must provide:

- 5.3.1 a safe environment; and
- 5.3.2 safe and effective practice.

Providers need to ensure that the student and others working alongside them and in his or her care, are safe. The assessment strategy for placement should indicate that students are assessed on safety issues. Placement induction processes should clearly articulate how risks and safety issues are brought to the student's attention.

5.4 Learning, teaching and supervision must be designed to encourage safe and effective practice, independent learning and professional conduct.

5.5 The number, duration and range of placements must be appropriate to the achievement of the learning outcomes.

Programmes should also consider how a student can redeem a referred/failed placement within an appropriate timeframe which will allow progression to the next stage of the programme.

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

Examples of these systems can be provided in the documentation or discussed when the visitor meets placement providers and educators.

5.7 Students and practice placement educators must be fully prepared for placement which will include information about and understanding of the following:

- 5.7.1 the learning outcomes to be achieved;
- 5.7.2 timings and the duration of any placement experience and associated records to be maintained;
- 5.7.3 expectations of professional conduct;
- 5.7.4 the assessment procedures including the implications of, and any action to be taken in the case of failure; and
- 5.7.5 communication and lines of responsibility.

Handbooks, evidence of meetings with placement educators should all include this sort of information. Meetings with students, educators and placement providers may illicit further information.

5.8 Unless other arrangements are agreed, practice placement educators:

- 5.8.1 must have relevant qualification and experience;
- 5.8.2 must be appropriately registered; and
- 5.8.3 must undertake appropriate practice placement educator training.

Practice placement educators will have predominantly a profession specific qualification, experience within that profession and be registered in that professional area. However, it is reasonable to assume that there are other practice placement educators who do not have a profession specific background which matches that of the student and who are entirely appropriate. Arrangements need to be in place to support these educators. This support may or may not be the same as profession specific educators.

Practice placement educator training requirements will vary across the professions and also between providers. Those providers who use the same placements regularly and recurrently and who have relatively low staff turnover may need less ongoing training for practice educators/supervisors. Where placements are used less regularly or where staff turnover is high training may be more regular.

Educator training may comprise of a variety of formats eg. attendance at the provider institution for training; training in the workplace; on-line support; written support; peer support through workshops and meetings. Some training may be accredited, others not. The provider has to satisfy itself that the practice educators are appropriately trained to carry out the role.

There should be systems in place that monitor the ongoing needs of the placement educator.

5.9 There must be collaboration between the education provider and practice placement providers.

There should be evidence that this is an ongoing relationship and not one that simply peaks around times of programme planning and approval.

5.10 The education provider must ensure necessary information is supplied to practice placement providers.

This might include documentation/handbooks expressing the expectations for learning from the placement; induction programme; student names and year of study; any information relating to learner needs ie disability; details of practice placement assessment.

5.11 Practice placement providers must ensure necessary information is available at the appropriate time for both the education provider and students.

This might include a record of student attendance; progress or placement reports; student feedback; completed placement audits; health and safety information; completed placement assessments.

5.12 A range of learning and teaching methods that respect the rights and needs of patients/clients and colleagues must be in place throughout practice placements.

Providers should have a system in place which ensures that, wherever possible, patients/clients are aware that students are involved in their care. This might be communicated verbally, in writing or through information such as posters or leaflets.

5.13 The placement providers must have an equal opportunities and anti-discriminatory policy in relation to candidates and students, together with an indication of how this will be implemented and monitored.

6. Assessment standards

6.1 The assessment design and procedures must assure that the student can demonstrate fitness to practise.

A clear overarching assessment strategy is useful in describing the programme's approach to assessment. In addition, assessment strategies are generally articulated within the programme specifications and in the module outlines. Programme specifications will have sections directly referring to subject/professional/practice learning outcomes and associated assessment strategies thus providing a direct link to fitness to practise.

6.2 Assessment methods must be employed that measure the learning outcomes and skills that are required to practise safely and effectively.

Pass level assessment criteria should clearly define the threshold of safe and effective practice.

6.3 All assessments must provide a rigorous and effective process by which compliance with external reference frameworks can be measured.

Examples of external reference frameworks are;

- *National Occupational Standards*
- *Ionising Radiation Regulations 1999*
- *Ionising Radiation (Medical Exposure) Regulations 2000*
- *Disability Discrimination Act*
- *Human Rights Act*

Curriculum guidance provide further detail.

6.4 The measurement of student performance and progression must be an integral part of the wider process of monitoring and evaluation, and use objective criteria.

6.5 There must be effective mechanisms in place to assure appropriate standards in the assessment.

Internal moderation, external moderation and second marking are carried out in line with the provider's institutional requirements.

CVs and staff profiles will indicate where educators from the programme team act as external examiners at other provider institutions. The internal moderation systems will then have additional comparisons to external standards.

6.6 Professional aspects of practice must be integral to the assessment procedures in both the education setting and practice placement.

Where practice educators carry out assessment of students they should be adequately trained and supported. All relevant information which informs judgement should be supplied to the educator by the provider and the student.

- 6.7 Assessment regulations must clearly specify requirements:
- 6.7.1 for student progression and achievement within the programme;
 - 6.7.2 for awards which do not provide eligibility for inclusion onto the Register not to contain any reference to an HPC protected title in their title;
 - 6.7.3 for an aegrotat award not to provide eligibility for admission to the Register;
 - 6.7.4 for a procedure for the right of appeal for students; and
 - 6.7.5 for at least one external examiner to be appointed.

Assessment regulations are extensive and will include many more aspects than those listed above. 6.7.1 and 6.7.4 are large elements and will need cross referencing to the full set of regulations whereas 6.7.2 and 6.7.3 are key points expressed in these brief statements.

Appendix 1

Template for mapping submission documentation against Standards of Proficiency

Template for mapping submission documentation against Standards of Proficiency

	Where in document Standard is matched	Sections, modules, learning outcomes	page number
Standard of proficiency			
Expectations of a health care professional			
1a: Professional autonomy and accountability			
Registrants must:			
1a.1	be able to practise within the legal and ethical boundaries of their profession		
1a.2	be able to practise in a non-discriminatory manner		
1a.3	be able to maintain confidentiality and obtain informed consent		
1a.4	be able to exercise a professional duty of care		
1a.5	know the limits of their practice and when to seek advice		
1a.6	recognise the need for effective self-management of workload and be able to practise accordingly		
1a.7	understand the obligation to maintain fitness to practise		
1a.8	understand the need for career-long self-directed learning		
1b: Professional relationships			
Registrants must:			
1b.1	know the professional and personal scope of their practice and be able to make referrals		
1b.2	be able to work, where appropriate, in partnership with other professionals, support staff, patients, clients and users, and their relatives and carers		
1b.3	be able to contribute effectively to work undertaken as part of a multi-disciplinary		
1b.4	be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, patients, clients, their relatives and carers		
1b.5	understand the need for effective communication throughout the care of the patient, client or user		
2a: Identification and assessment of health and social care needs			
Registrants must:			
2a.1	be able to gather appropriate information		
2a.2	be able to use appropriate assessment techniques		
2a.3	be able to undertake or arrange clinical investigations as appropriate		
2a.4	be able to analyse and evaluate the information collected		
2b: Formulation and delivery of plans and strategies for meeting health and social care needs			

Registrants must:	
2b.1 be able to use research, reasoning and problem solving skills (and, in the case of clinical scientists, conduct fundamental research)	
2b.2 be able to draw on appropriate knowledge and skills in order to make professional judgements	
2b.3 be able to formulate specific and appropriate management plans including the setting of timescales	
2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully	
2b.5 be able to maintain records appropriately	
2c: Critical evaluation of the impact of, or response to, the registrant's actions	
Registrants must:	
2c.1 be able to monitor and review the ongoing effectiveness of planned activity and modify it accordingly	
2c.2 be able to audit, reflect on and review practice	
3a:	
Registrants must:	
3a.1 know the key concepts of the biological, physical, social, psychological and clinical sciences which are relevant to their profession-specific practice	
3a.2 know how professional principles are expressed and translated into action through a number of different approaches to practice, and how to select or modify approaches to meet the needs of an individual	
3a.3 understand the need to establish and maintain a safe practice environment	

Appendix 2

Visitor guidance on the standards of education and training

Grid to cross-check where evidence of each SET *might* be found.

Visitor guidance on the standards of education and training

Grid to cross-check where evidence of each SET *might* be found.

SET	submission document	curriculum guidance	meeting with senior personnel	meeting: programme planning team	meeting: students	meeting: placement providers and educators	tour of library/ learning centre	tour of IT facilities	tour of specialist teaching facilities	course/practice handbook	staff CVs	staff profile	practice placement documentation	Practice placement audit/ QA
1. Level of qualification for entry to the Register														
1.1 Threshold entry routes to the Register	•													
2. Programme admissions	•													
The admission procedures														
3. Programme management and resources standards	•		•											
3.1 The programme has a secure place in the education provider's business plan.														
3.2 The programme is managed effectively.	•				•									
3.3 There must be a named and appropriate programme leader who has overall responsibility for the programme.	•										•			
3.4 There is an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.			•	•		•					•			
3.5 Subject areas are taught by staff with relevant specialist expertise and knowledge.											•			
3.6 A programme for staff development is in place to ensure continuing professional and research development.			•											
3.7 The resources to support student learning in all settings are used effectively.	•			•	•	•								•
3.8 The facilities needed to ensure the welfare and well-being of students are both adequate and accessible.	•		•	•	•	•								
3.9 Where students participate as patients or clients in practical and clinical teaching, appropriate protocols are used to obtain their consent.	•				•					•			•	
3.10 A system of academic and pastoral student support is in place.	•				•									
3.11 Throughout the course of the programme, the education provider has identified where attendance is mandatory and associated monitoring mechanisms are in place.	•			•	•	•				•			•	
3.12 The resources provided adequately support the required learning and teaching activities of the programme.	•		•	•	•	•								
3.13 The learning resources, including the stock of periodicals and subject books, and IT facilities, including internet access, are appropriate to the curriculum and are readily available to students and staff.	•				•		•	•	•					
4. Curriculum standards	•													
4.1 The learning outcomes ensure that those who successfully complete the programme meet the standards of proficiency for their part of the Register.														

