

Education and Training Committee – 5 March 2015

Review of the Health and Care Professions Council (HCPC) approval visits to approved mental health professional (AMHP) education and training programmes in the 2013–14 academic year

Executive summary and recommendations

Introduction

This paper details and analyses outcomes from the first year of the schedule of approval visits to approved mental health professional (AMHP) programmes, following the transfer of regulatory function for approving AMHP programmes from the General Social Care Council (GSCC). The report also makes comparisons to the approval visit outcomes for the 16 professions that the HCPC regulates.

Following the publication of this report on our website on 13 January 2015, we plan to publicise it via a blog piece and posts on social media. We have already featured it in the January issue of the Education Department's regular stakeholder newsletter, Education Update. We also sent the report directly to all AMHP programmes with a visit planned from January onwards.

Decision

This paper is for information only. No decision is required.

Background information

- Education and Training Committee paper, 12 June 2012 – Approved mental health professional programmes – approval and monitoring processes

Resource implications

None

Financial implications

None

Date of paper

18 February 2015

Review of the Health and Care Professions Council (HCPC) approval visits
 to approved mental health professional (AMHP) education and training
 programmes in the 2013–14 academic year

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About this document

This paper focuses on approval visits undertaken by the Health and Care Professions Council (HCPC) to approved mental health professional (AMHP) education and training programmes in the 2013–14 academic year. It details and analyses the outcomes from these approval visits. The data in this report is correct as of 4 December 2014.

The paper also provides:

- background to the transfer of regulatory function for AMHPs from the General Social Care Council (GSCC);
- details of the work that we undertook to review AMHP programme data following the transfer; and
- information about the development and implementation of the approval criteria for AMHP programmes.

Section one – Transfer of regulation

As part of its review of arm's length bodies, the government decided to abolish the General Social Care Council (GSCC) and transfer most of its regulatory functions to the HCPC. This change was contained within the Health and Social Care Act (2012), and became effective from 1 August 2012.

AMHPs exercise functions under the Mental Health Act 1983 (as amended by the Mental Health Act 2007). Those functions relate to decisions made about individuals with mental health disorders, including the decision to apply for compulsory admission to hospital.

Social workers, mental health and learning disabilities nurses, occupational therapists and practitioner psychologists, registered with their respective regulator, may train to become AMHPs. It is the responsibility of the employer to ensure that AMHPs are able to practice with the competencies as defined by the Mental Health (Approved Mental Health Professionals) (Approval) (England) Regulations 2008.

As part of the transfer, we became responsible for approving and monitoring AMHP programmes in England and publishing two lists of AMHP programmes, those currently open and those which are no longer delivered, but retain approval for set historic periods. The changes to legislation require us to set criteria for approving AMHP programmes. We were not given any legal powers to appoint individual AMHPs or to annotate our Register. The decision to appoint and use an individual as an AMHP remains with the Local Social Service Authority (LSSA). As the link between completing an AMHP programme and performing the functions of an AMHP is not absolute, there is no AMHP annotation on our Register.

Transitional approval

All AMHP programmes in England that were approved by the GSCC at the point of transfer were subsequently approved by us from 1 August 2012. This approval is transitional, which means programmes remain approved until approval is formally agreed or withdrawn, following an assessment against our criteria.

Prior to the transfer, we decided that we would undertake an approval visit for all transitionally approved AMHP programmes. We decided that this was the most effective mechanism to assess each transitionally approved programme against our criteria.

Approval criteria for approved mental health professional (AMHP) programmes

In line with our statutory responsibility, and following a public consultation which ran in early 2013, we developed the approval criteria for AMHP programmes¹. The criteria became effective from September 2013 and all AMHP programmes visited in this academic year were required to meet the criteria in order to be approved.

The criteria is split into two sections. Section 1 sets out criteria around how an education provider must design and deliver an AMHP programme. This section is drawn from our standards of education and training (SETs), to which we hold all pre-registration programmes from the 16 professions that we regulate. This ensures that AMHP programmes are considered consistently with the 16 professions under our multi-professional model of regulation. Due to the professional status of individuals who undertake AMHP training, several of the SETs do not have equivalent criterion. For example, we do not require AMHP programmes to apply health or character tests to prospective students, because, as all students must either be on our, or the NMC's Register, we can be satisfied that they are of good health and character as a condition of their professional registration.

Section 2 of the AMHP approval criteria defines the knowledge, understanding and skills that must be delivered by the programme. We based this section on Schedule 2 to the Mental Health (Approved Mental Health Professionals) (Approval) (England) Regulations 2008. In the sector, the competencies defined in this legislation are referred to as the "statutory instrument". Although the statutory instrument is not directly quoted, section 2 of the AMHP approval criteria is reflective of the competencies as defined by the legislation.

We have introduced a standard which requires service user and carer involvement in education and training programmes. This standard became effective from September 2014 for all approved pre-registration programmes. An equivalent criterion was introduced for AMHP programmes from September 2013. We decided to introduce this requirement a year earlier for AMHP programmes because we were confident that education providers would not need to make significant changes to ensure service users and carers were involved in programmes, as all transitionally approved AMHP programmes met a similar standard when they were approved by the GSCC.

We also decided to require service user and carer involvement a year earlier for AMHP programmes so we did not need to republish the AMHP approval criteria after one year to include an equivalent criterion, and then require programmes approved in the 2013-14 academic year to demonstrate how they met this criterion via a separate process following their approval.

¹ The approval criteria for approved mental health professional (AMHP) programmes is available on our website at [www.hcpc-uk.org/assets/documents/1000414DApprovalcriteriaforapprovedmentalhealthprofessional\(AMHP\)programmes.pdf](http://www.hcpc-uk.org/assets/documents/1000414DApprovalcriteriaforapprovedmentalhealthprofessional(AMHP)programmes.pdf)

Our decision to introduce this requirement a year earlier for AMHP programmes was justified as we did not apply any conditions for this criterion in this academic year, which means all AMHP programme met the criterion at the first time of asking.

Communications

Around the time of the transfer, we wrote to AMHP education providers outlining the approval process, and what their responsibilities would be following the transfer.

Once the criteria was finalised, we sent a copy to all education providers delivering AMHP programmes, along with a mapping of the AMHP criteria to the SETs.

We ensured that the publication of the AMHP criteria was widely publicised across several communication channels, including our website, our regular Education Update newsletter for education stakeholders, and social media.

As part of our normal procedures, we allocated an “education executive” to manage each approval visit from our perspective approximately six months prior to the visit. This provided education providers with a single point of contact when seeking advice regarding the AMHP approval criteria and the organisation of the approval visit. We also used the pre-visit scheduling process to clarify and update any data we held regarding programme records and contacts.

We ran seminars for education providers delivering social work and AMHP programmes at several locations around England in the autumn and winter of 2013–14. The seminars introduced the approval process and how regulation with us would impact on transitionally approved social work and AMHP programmes. The seminars were well received, especially by delegates from programmes that had not yet been through the approval process. Therefore, we decided to deliver an updated seminar for social work and AMHP education providers in autumn 2014, which included specific analysis from the first year of AMHP visits.

Overview of the approval process for AMHP programmes

We visit AMHP programmes to ensure that:

- the programme meets or continues to meet section 1 of the approval criteria for AMHP programmes;
- those who complete the programme are able to meet section 2 of the approval criteria for AMHP programmes; and
- all programmes and education providers are assessed fairly and consistently.

Prior to an approval visit, we ask education providers to submit standard documentation along with mapping documents which shows how the programme meets the AMHP approval criteria.

Throughout visits to AMHP programmes, we meet programme staff, students, senior managers, placement providers, and from September 2014 onwards, service users and carers. We relate all of our discussions and decisions on approval back to the AMHP approval criteria.

Section two – Visitors

Visitor recruitment and training

In all of our approval and monitoring work, we ensure that we have profession specific input so we can be confident that we are making well informed decisions about whether to approve programmes. As with the professions and entitlements that we regulate, we recruited AMHP visitors who have relevant knowledge, understanding and experience of the programmes that we were due to visit. We also ensured that the specific AMHP visitor criteria focused on AMHP skills and knowledge, rather than on ensuring HCPC registration. Therefore, we did not restrict ourselves to only appointing AMHPs who are also registrants. We were able to recruit a sufficient number of AMHP visitors based on the known workload of AMHP visits to programmes transferred from the GSCC.

We ran a mandatory training session for our AMHP visitors over a two day period. The training focused on understanding the legislation that underpins the HCPC and our functions, along with decision making, working collaboratively (including transparency and confidentiality), conflicts of interest, our standards and processes, and equality and diversity. We also focused on the particular nuances of regulating AMHP training, such as the AMHP criteria and the link to SETs, and that training does not directly lead to HCPC registration or annotation.

Visitors' reports

We can make one of four decisions as a result of the approval process:

- approval of a programme without any conditions;
- approval of a programme subject to all conditions being met;
- non-approval of a new programme; and
- withdrawal of approval from a currently approved (or transitionally approved) programme.

The decision about each programme will be contained in a visitors' report².

Visitors' reports contain any conditions applied to the programme, which are requirements made of a programme that must be met before it can approved. For AMHP programmes, there are 50 specific criterion which visitors can apply conditions. Programmes have two opportunities to meet conditions prior to our final decision about the approval of the programme.

² For more information regarding the visitors' reports considered by this paper, please visit our website at www.hcpc-uk.org/education/programmes/approvalreports, where all visitors' reports are published. A list of all AMHP programmes visited over the period covered in this paper can be found in appendix 1.

Section three – Transfer of data

Process of data transfer

A joint requirements document was produced between us and the GSCC to facilitate the transfer of programme data between the two organisations. This document detailed the programme information that was to be transferred and set out the processes of liaison, preparation and delivery which were necessary to complete the transfer. The GSCC contacted each education provider prior to the transfer with a list of programmes they approved and the programme information that would be passed over to us. At the point of transfer, we received a list of 30 GSCC approved AMHP programmes at 23 education providers, which we approved on a transitional basis.

Amendments to the data post transfer

We saw several changes to programme records based on our requirements for AMHP programmes. When the data was transferred from the GSCC, we were aware that there was inconsistency with how education providers named their AMHP training. Often, individuals who completed AMHP training were not given a named qualification, but were provided with a transcript of specific modules that they had completed to demonstrate their competence as an AMHP.

To ensure that it is easily identifiable whether an individual has completed the relevant training to practise as an AMHP, we decided to require education providers to clearly name their AMHP training. This named award is the programme title we hold on our list of approved programmes. If required, we applied conditions to criteria E.7 (assessment regulations must clearly specify requirements for student progression and achievement within the programme) to ensure that this requirement was met.

As part of the pre-visit process, we also asked programmes to consider who the “education provider” was for the programme. We use the term “education provider” to describe the institution that maintains overall responsibility for the delivery of the programme. This includes responsibility for, and control over, admission procedures, management of programme resources (including physical resources, staff, student support), all aspects of the curriculum (including design and development), practice placements (including audit tools, placement allocation and quality assurance), and assessment (including assessment strategy and conferment of the final award).

We do not set requirements on who the education provider must be and they do not need to be a higher education institution (HEI). However, we expect all education providers to be able to demonstrate how all of our criteria are met.

Although the majority of programmes were HEI led, two programmes decided the “education provider” as stated in the transferred data did not maintain overall responsibility for some or all of these areas in relation to the programme. For these programmes, it was more appropriate to consider a training partnership / consortium as the education provider for the programme. This was the case where the partnership / consortium took responsibility for design and delivery of the programme and partnered with an HEI to ensure the academic components were of necessary standard to enable the conferment of the qualification. In these instances, we considered the employer to have a collaborative arrangement with an HEI acting as the validating body.

Section four – Approval visits

Visit scheduling for AMHPs

During 2011, the GSCC inspected all approved AMHP programmes to determine that they continued to meet their requirements. With this in mind, and as we had not yet developed the AMHP approval criteria, we made a risk based decision that we would not visit transitionally approved AMHP programmes in the 2012–13 academic year immediately following the transfer. We instead decided to undertake a two year programme of visits beginning in September 2013. In 2012–13, we were able to review AMHP programmes via our approval and monitoring processes when required to, if specific concerns were raised about an existing programme, or if a new programme was proposed. In this period, no circumstances arose where we needed to consider the approval of AMHP programmes, however, and the two year visit schedule commenced as expected.

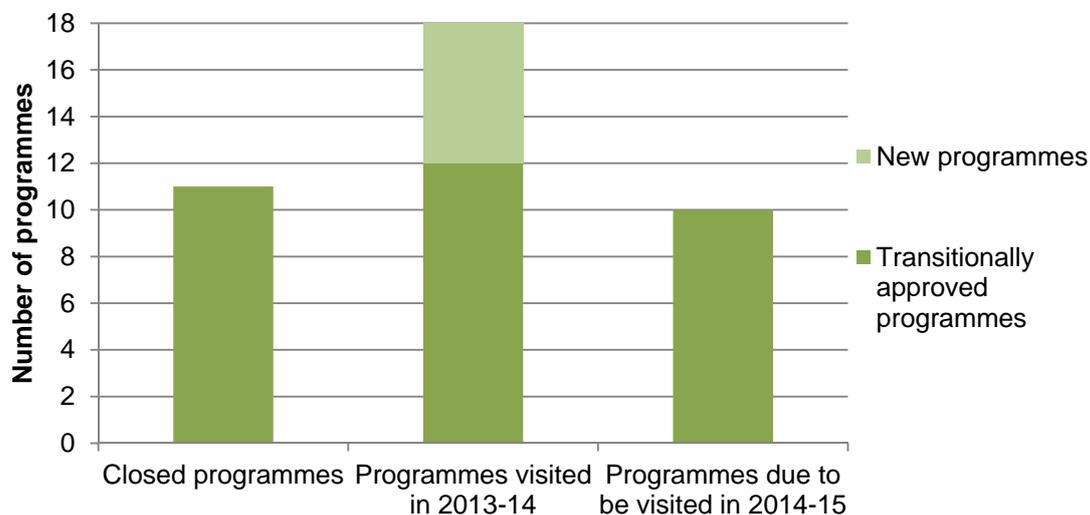
In 2012, we decided in which of the two academic years each AMHP programme would be visited, and asked education providers to request visit dates in the relevant academic year. We completed this exercise at this stage to enable ourselves and education providers to plan appropriately for approval visits. As several AMHP education providers also ran social work programmes, completing the AMHP visit scheduling at this stage gave them the opportunity to schedule a “multi-professional” visit where we would consider their whole AMHP and social work provision at one visit.

Programme closures

Of the 30 AMHP programmes that were transferred from the GSCC, amendments were made to four programme records, and an additional two programmes were identified that we considered as transitionally approved.

Eleven of transitionally approved programmes closed at seven education providers. Three of the closed programmes were replaced by new programmes, and were considered at the planned approval visit. In total, five education providers closed their AMHP provision entirely. One of these education providers closed their programme following the approval visit. In this case, the education provider requested that we visit new programmes later in the academic year.

Graph 1 – Number of programmes visited in 2013–14, compared to closed transitionally approved programmes and planned visits in 2014–15



We considered eighteen programmes at twelve education providers in the 2013–14 academic year. We are due to visit ten transitionally approved programmes at eight education providers in the 2014–15 academic year. Therefore, at the end of the 2013–14 academic year, we had completed 60 per cent of the AMHP visit schedule.

Approval visit outcomes

Table 1 – Summary of outcomes

| Decision | Number of outcomes | Percentage |
|--|---------------------------|-------------------|
| Approval of a programme without any conditions | 2 | 11 |
| Approval of a programme subject to conditions being met | 15 | 83 |
| Non-approval of a new programme | 0 | 0 |
| Withdrawal of approval from a transitionally approved programme | 0 | 0 |
| Requests for approval withdrawn by the education provider during or after the approval visit | 1 | 6 |

Table 1 summarises the outcomes from the visits that took place in the 2012–13 academic year. As stated, one education provider withdrew from the visit process after we visited their programme. The report from this visit was not considered by our Education and Training Committee, so was not made public. Therefore, the figures below are based on 11 approval visits considering 17 programmes.

We applied conditions on 15 of the 17 programmes that completed the visit process, which means that eleven per cent of programmes were approved without conditions. This is higher than the average across all programmes, where three per cent of programmes were approved without conditions. These programmes were able to demonstrate how they met the AMHP criteria at first attempt, but as our visitors’ reports are written to show areas where the AMHP criteria has not been met, we are unable to analyse how these programmes met the criteria. Due to the small sample size, this could be an anomalous result. When we have completed the second year of AMHP visits, we will revisit this area and pick out any trends across the whole schedule of AMHP visits.

Conditions

Table 2 – Number of conditions applied for AMHP programmes compared to programmes from the 16 professions – by reason for visit

| SET / criteria | AMHP programmes | | New programmes from the 16 professions | | New programmes from the 16 professions (with conditions for SETs without equivalent criteria removed) | |
|--------------------|----------------------------|--|--|--|---|--|
| | Total number of conditions | Average number of conditions per programme | Total number of conditions | Average number of conditions per programme | Total number of conditions | Average number of conditions per programme |
| SET 1 ³ | N/A | N/A | 0 | 0.0 | 0 | 0.0 |
| SET 2 / criteria A | 14 | 0.8 | 25 | 1.3 | 17 | 0.9 |
| SET 3 / criteria B | 21 | 1.2 | 39 | 2.1 | 34 | 1.7 |
| SET 4 / criteria C | 9 | 0.5 | 18 | 0.9 | 15 | 0.8 |
| SET 5 / criteria D | 37 | 2.2 | 39 | 2.1 | 39 | 2.0 |
| SET 6 / criteria E | 25 | 1.5 | 38 | 2.0 | 32 | 1.6 |
| Total | 106 | 6.2 | 159 | 8.0 | 137 | 6.9 |

Table 2 compares the average number of conditions applied on AMHP programmes and new programmes from the 16 professions in the 2013–14 academic year. On average we applied approximately two fewer conditions per AMHP programme when compared to new programmes from the 16 professions.

However, as previously mentioned, there are several of the SETs without equivalent AMHP criterion. When we take conditions that were applied to these SETs out of the data for conditions applied to new programmes from the 16 professions, we applied only slightly fewer conditions for AMHP programmes overall. Broadly, the figures are also comparable across the broad criteria / SET areas.

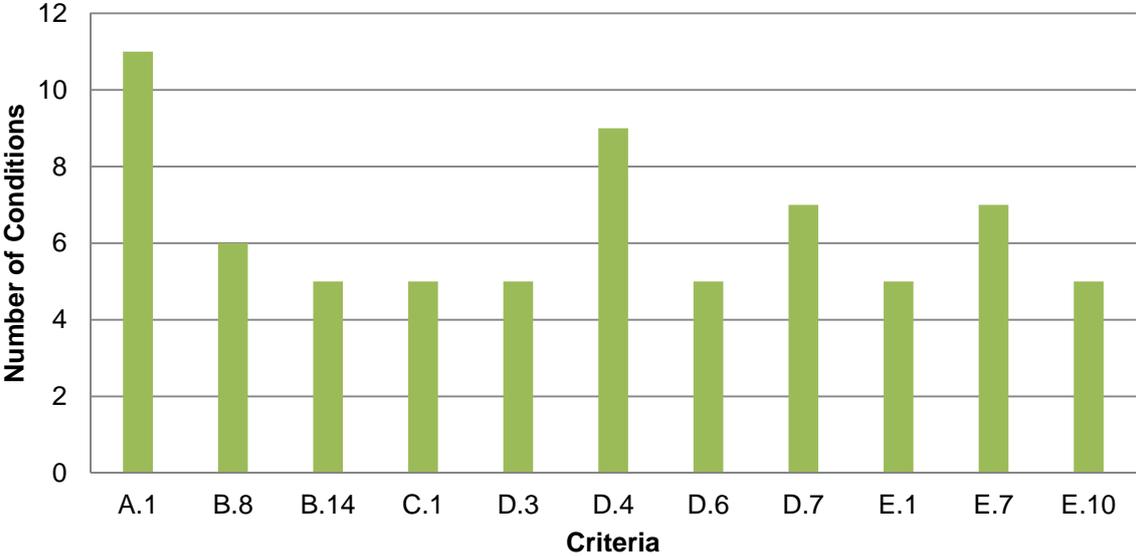
The pattern continues to support previous analysis in our annual reports⁴, which shows that new programmes, and programmes new to our regulatory model, routinely attract a higher number of conditions in the broad areas of practice placements, assessment, and programme management and resources, than in the other broad areas.

³ There is no equivalent criteria for SET 1: Level of qualification for entry to the Register

⁴ The Education annual report 2013 is available on our website at www.hcpc-uk.org/Assets/documents/100045FFEducationannualreport2013.PDF

There was a wide range in overall number of conditions applied to AMHP programmes, ranging from one condition to seventeen conditions per programme. Programmes with higher numbers of conditions often had a significant percentage of their conditions applied to the criterion covering practice placements.

Graph 2 – The eleven criteria where most conditions were applied in 2013–14



In graph 2, we have shown the criterion where conditions were applied to at least a third of programmes. Throughout the analysis below, we will compare conditions applied to the AMHP criteria to trends for conditions applied to the equivalent SET⁵.

The criterion with the highest number of conditions applied was A.1, which requires admissions procedures to give both the applicant and the education provider the information they require to make an informed choice to take up or make an offer of a place on the programme. We also applied six conditions to B.8, which requires that resources to support student learning in all settings are effectively used. Conditions for the equivalent SETs (2.1 and 3.8) often focus on the accuracy of the programme documentation, and many of the conditions that we applied to AMHP programmes in this area focused on this issue. For programmes transferred from other regulators, conditions in this area often pick up instances out of date terminology considering the change in regulation, and on information that could be misleading for applicants or students.

Issues with documentation is important for us to pick out for two reasons. Firstly, if the documentation is of a poor standard, we are unable to make a well informed judgement about whether particular criterion are met. When we are unable to fully assess and reach a decision on whether a programme meets a criterion, we need to apply a condition to ensure that the criterion is met. Secondly, and more fundamentally, documentation underpins how the programme runs in every area. We require the documentation to communicate expectations about how the programme will interact with its stakeholders (such as students, practice placement educators, and service

⁵ Mapping of the approval criteria for approved mental health professional (AMHP) programmes to the standards of education and training (SETs) can be found on our website www.hcpc-uk.org/Assets/documents/10004152MappingofAMHPCriteriatoSETs.pdf

users and carers), and that it clearly defines the roles and responsibilities of all parties in the running of the programme.

We applied more conditions to the criterion relating to practice placements (criteria D) for AMHP programmes than in any other area. We usually expect to see a high number of conditions in this area because practice placements are where education providers need to engage with the broadest range of stakeholders. As previously noted, there were sometimes questions prior to the visits as to who the “education provider” was for AMHP programmes, either the HEI, local training partnership or the employer. As employers often commission places on a programme, and deliver the practice placement elements for the programme, there were often questions about ownership of practice placements.

We are clear that the education provider must own and manage the practice placements, including policies and procedures around approval and monitoring of placements (criterion D.4), the staff in place for the practice placements (including criteria D.6 and D.7), and to ensure that practice placement settings provide a safe and supportive environment (criterion D.3). When setting conditions in these areas, we often found that education providers would not own the policies around practice placements, or would make assumptions that the placements were supporting students as they needed to, and were well-resourced in terms of staff, due to them being in statutory settings. There were also some assumptions by education providers that placements were providing a safe and supportive environment for students due to the students being employees of the placement provider. When we applied conditions in this area, education providers had not considered that these employees / students need to be supported differently when undertaking AMHP training in their place of work, when compared to how they need to be supported when carrying out their day to day role.

These concerns are not unique for AMHP programmes, as we also approve many pre-registration “work based learning” programmes. For these programmes, education providers and employers need to manage the balance between considering an individual a student on the one hand, and an employee on the other. The work based learning mode of study accounts for four per cent of all pre-registration programmes, but accounts for 50 per cent of the AMHP programmes visited this year. Therefore, these issues were more prevalent when considering AMHP programmes, and this is why this particular issue has been picked out in the analysis.

There was also a link to practice placements for conditions applied for criterion B.14, which requires the education provider to have identified where attendance is mandatory and must have associated monitoring mechanisms in place. Three of the five conditions applied in this area related to clarity around attendance at practice placements.

As stated earlier in this report, we planned to capture our requirements around named awards for AMHP programmes in conditions for criteria E.7. We applied seven conditions in this area, which included five that specifically required education providers to clearly name the award that demonstrated that an individual had completed approved AMHP training.

For programmes new to HCPC, we often apply a high number of conditions to the SETs which link to how the standards of proficiency for the profession are delivered. AMHP programmes were no exception, as we applied several conditions to the link to where the competencies defined by section 2 of the AMHP criteria are delivered in the learning

outcomes (criteria C.1) and where and how the learning outcomes are assessed (criteria E.1) to ensure fitness to practise. We often applied conditions from both a curriculum and assessment perspective, because if we are unable to see where a competency is delivered, it will be unlikely that we will be able to see where it is assessed.

An area where we often apply a high number of conditions for all programmes is around the appointment of external examiners (criteria E.10). For this standard, we require that assessment regulations must clearly specify requirements for the appointment of at least one external examiner who must be appropriately experienced and qualified and, unless other arrangements are agreed, be from the relevant part of the Register. We often apply conditions in this area if there is not an explicit statement in the education provider's assessment regulations.

Section five – Conclusions

AMHP programmes that engaged with the approval process have adapted well to the newly developed AMHP criteria. We needed to apply conditions on approving the majority of programmes, but all programmes visited were able to demonstrate how they met these conditions, and are now approved.

Following the on-boarding of a new profession, we always review how programmes from the profession have adapted to our approval process. Considering the data produced for professions new to the HCPC against the data in this report, there are no significant issues for AMHP programmes that we would not expect to see from professions new to our model of regulation. Specific issues have been drawn out, for example, we have applied a significant number of conditions on approving AMHP programmes in the area of practice placements. However, these programmes have been able to demonstrate how they meet our requirements through our normal approval process.

We can draw several conclusions from this. Firstly, AMHP training providers have engaged well with our process, and have been able to interpret and incorporate our advice about areas where programmes new to our model of regulation traditionally struggle. We will continue to write reports such as this, to enable us to pick out learning points to feed into future "new profession" work undertaken by the HCPC, but also to continue to provide relevant advice to education providers who are engaging with our processes for the first time.

Secondly, the findings of this report demonstrate that our multi-professional model of regulation is proportionate and fit for purpose. With input from relevant stakeholders, including our AMHP visitors, we were able to apply our normal processes, along with slightly adapted education standards, to training for a unique area of post-registration practice that often functions differently to the pre-registration programmes that we approve. This is the first time that we have approved programmes where there is no specific link between completing the programme and HCPC registration or annotation, and we have not identified any significant issues with our regulatory model being applied to AMHP training programmes.

Appendix 1 – List of AMHP programmes visited and outcomes

All HCPC reports on programme approval are published on our website. If you would like more information regarding one of the approval visits listed below, please see our website at www.hcpc-uk.org

| Education provider | Programme name | Mode | Visit date | Status at 4 December 2014 |
|--|--|---------------------|-------------------|--|
| Birmingham City University | MSc Mental Health | Full Time | 07 November 2013 | Education provider withdrew their request for approval following the visit |
| University of Birmingham | Postgraduate Certificate in Higher Specialist Work in Mental Health Services (Approved Mental Health Professional) | Work Based Learning | 07 January 2014 | Approved |
| University of Birmingham | Postgraduate Diploma in Higher Specialist Work in Mental Health Services (Approved Mental Health Professional) | Work Based Learning | 07 January 2014 | Approved |
| Bournemouth University | Postgraduate Diploma Advanced Mental Health Practice (AMHP) | Work Based Learning | 11 February 2014 | Approved |
| Bournemouth University | MA Advanced Mental Health Practice (AMHP) | Part Time | 11 February 2014 | Approved |
| Leeds Metropolitan University | Postgraduate Certificate Mental Health Practice | Part Time | 04 March 2014 | Approved |
| University of Brighton | Post Graduate Diploma Approved Mental Health Practice | Part Time | 11 March 2014 | Approved |
| North East London Mental Health Training Partnership | PG Diploma Approved Mental Health Practice (Higher Specialist Award) | Work Based Learning | 02 April 2014 | Approved |
| University of Bradford | Post Graduate Diploma Mental Health Practice | Full Time | 15 April 2014 | Approved |
| University of Hertfordshire | Postgraduate Certificate Applied Mental Health Practice | Full Time | 06 May 2014 | Approved |
| University of Hertfordshire | Postgraduate Certificate Applied Mental Health Practice | Part Time | 06 May 2014 | Approved |

| | | | | |
|--|---|---------------------|--------------|----------|
| University of Chester | MA Applied Mental Health Practice | Work Based Learning | 13 May 2014 | Approved |
| University of Chester | PG Cert Applied Mental Health Practice | Work Based Learning | 13 May 2014 | Approved |
| University of Chester | PG Dip Applied Mental Health Practice | Work Based Learning | 13 May 2014 | Approved |
| University of Manchester | Post Graduate Certificate in Applied Mental Health | Work Based Learning | 14 May 2014 | Approved |
| East London Mental Health Training Partnership | Approved Mental Health Practitioner | Work Based Learning | 10 June 2014 | Approved |
| Birmingham City University | MSc Mental Health | Full Time | 26 June 2014 | Approved |
| Birmingham City University | Post Graduate Diploma Approved Mental Health Practitioner | Full Time | 26 June 2014 | Approved |