HCPC approval process report

Education provider	Birkbeck, University of London
Name of programme(s)	MRes Professional Practice Occupational Psychology, Full time
	MRes Professional Practice Occupational Psychology, Part time
Approval visit date	24-25 September 2020
Case reference	CAS-16034-X0T6Z7

Contents

Executive Summary

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

Section 1: Our regulatory approach

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

How we make our decisions
We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint partner visitors to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make 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 meets in public on a regular basis and their decisions are available to view on our website.

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

Stephen Fisher	Practitioner psychologist - Occupational psychologist
Keren Cohen	Practitioner psychologist - Counselling psychologist
John Archibald	HCPC executive

Other groups involved in the virtual approval visit
There were other groups involved with the approval process as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

| Pam Yeow | Independent chair (supplied by the education provider) | Birkbeck, University of London |
| Alyse Carney | Secretary (supplied by the education provider) | Birkbeck, University of London |

Section 2: Programme details

Programme name	MRes Professional Practice Occupational Psychology
Mode of study	FT (Full time)
Profession	Practitioner psychologist
Modality	Occupational psychologist
Proposed first intake	01 January 2021
Maximum learner cohort	Up to 20
Intakes per year	1
Assessment reference	APP02260

Programme name	MRes Professional Practice Occupational Psychology
Mode of study	PT (Part time)
Profession	Practitioner psychologist
Modality	Occupational psychologist
Proposed first intake	01 January 2021
Maximum learner cohort	Up to 20
Intakes per year	1
Assessment reference	APP02261

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meet our standards for the first time.

Section 3: Requirements to commence assessment

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

Type of evidence	Submitted
Completed education standards mapping document	Yes
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes
Descriptions of how the programme delivers and assesses learning	Yes
Proficiency standards mapping	Yes
Information provided to applicants and learners	Yes
Information for those involved with practice-based learning	Yes
Information that shows how staff resources are sufficient for the delivery of the programme	Yes
Internal quality monitoring documentation	Not required, as the programme has not yet run

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

Group	Met	Comments
Learners	No	The visitors did not have any issues they wanted to explore with learners, so we decided not to meet with them.
Service users and carers (and / or their representatives)	No	The visitors did not have any issues they wanted to explore with service users and carers, so we decided not to meet with them
Facilities and resources	Yes	
Senior staff	Yes	
Practice educators	Yes	
Programme team	Yes	

Section 4: Outcome from first review

Recommendation of the visitors
In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

Conditions
Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 06 November 2020.

3.5 There must be regular and effective collaboration between the education provider and practice education providers.

Condition: The education provider must demonstrate how they work in partnership with those who provide practice-based learning as a way of ensuring they provide ongoing quality and effectiveness.

Reason: To meet this standard, the visitors were informed in the mapping document that learners are required to be in employment which offers the opportunity for practice-based learning. Through the admissions process the education provider receives detailed information about practice-based learning site. However, the visitors were also informed that the education provider does not have direct access to the practice education provider, so they aim to connect with practice education providers through

later meetings. In the meeting with the practice education providers and from discussion with the programme team, the visitors were informed the plan is to have meetings between the programme team and practice educators to share experience and fine-tune approaches.

The visitors considered there was limited confirmed contact and collaboration between the education provider and the practice education providers, and that it did not reflect true partnership working between the two stakeholders. This partnership would provide information about the ongoing quality and effectiveness of the programme. The visitors therefore require further information about how the education provider works in partnership with those who provide practice-based learning, such as meetings, asking for feedback or other methods of communication, so it is effective for continuously improving the programme.

5.4 Practice-based learning must take place in an environment that is safe and supportive for learners and service users.

Condition: The education provider must ensure that the level of supervision which learners have provides for a safe environment.

Reason: To demonstrate how they meet this standard, the visitors were made aware learners are required to be in employment prior to joining the programme that offers the opportunity for practice-based learning. The visitors were also informed the education provider proposed for learners to have a form of communication with practice educators, once a month as a minimum. In the programme team meeting, the visitors were told this form of communication could be flexible, taking the form of a face to face meeting or an email, as examples. The visitors were informed learners would be able to contact the practice educators to request a meeting in the interim if they wished to do so.

The visitors considered supervision during practice-based learning to be an integral part of learning to ensure that practice-based learning did not cause a risk to service users. The visitors also considered the potential level of supervision of the learner in practice education to be of email once a month as a minimum to not provide an appropriate quality of supervision to ensure practice-based learning is safe and supportive. The visitors therefore require further information on how the programme will demonstrate how it ensures learners' supervision, will ensure a safe practice-based learning environment is provided on this programme.

Section 5: Visitors' recommendation

Considering the education provider's response to the conditions set out in section 4, the visitors are satisfied that the conditions are met and recommend that the programme(s) are approved.

This report, including the recommendation of the visitors, will be considered at the 03 December 2020 meeting of the ETC. Following this meeting, this report should be read alongside the ETC's decision notice, which are available on our website.

HCPC approval process report

Education provider	University of Gloucestershire
Name of programme(s)	BSc (Hons) Diagnostic Radiography, Full time
Approval visit date	16 September 2020
Case reference	CAS-15898-H3P8Z6

Contents

Executive Summary

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The ETC make 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 meets in public on a regular basis and their decisions are available to view on our website.

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

Linda Mutema	Radiographer - Diagnostic radiographer
Mark Widdowfield	Radiographer - Diagnostic radiographer
Rabie Sultan	HCPC executive

Other groups involved in the virtual approval visit
There were other groups involved with the approval process as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

Andrea Chalk	Independent chair (supplied by the education provider)	University of Gloucestershire
Anita Suarez	Secretary (supplied by the education provider)	University of Gloucestershire
Helen Best	Professional body representative	College of Radiographers
Jacquie Vallis	Professional body representative	College of Radiographers

Section 2: Programme details

Programme name	BSc (Hons) Diagnostic Radiography
Mode of study	FT (Full time)
Profession	Radiographer
Modality	Diagnostic radiographer
First intake	01 January 2021
Maximum learner cohort	Up to 30 (shared with Diagnostic Radiography Degree Apprenticeship)
Intakes per year	1
Assessment reference	APP02204

We undertook this assessment of new programmes proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meet our standards for the first time.

Section 3: Requirements to commence assessment

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

Type of evidence	Submitted
Completed education standards mapping document	Yes
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes
Descriptions of how the programme delivers and assesses learning	Yes
Proficiency standards mapping	Yes
Information provided to applicants and learners	Yes
Information for those involved with practice-based learning	Yes
Information that shows how staff resources are sufficient for the delivery of the programme	Yes
Internal quality monitoring documentation	Not Required, because the programme has not started yet

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

Group	Met	Comments

Learners	Yes	The panel met a learner from Nursing and Allied Health programme.
Service users and carers (and / or their representatives)	Not Required	As this was a virtual visit and, given the current situation around the Covid-19 pandemic, we decided that it was unnecessary to meet with this group
Facilities and resources	Not Required	As the visit was virtual and the visitors were able to determine through the programme documentation, that many of the standards had been met, they decided it was unnecessary to have a virtual tour of the facilities and resources
Senior staff	Yes	
Practice educators	Yes	
Programme team	Yes	

Section 4: Outcome from first review

Recommendation of the visitors
In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

Conditions
Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 09 November 2020.

4.11 The education provider must identify and communicate to learners the parts of the programme where attendance is mandatory, and must have associated monitoring processes in place.

Condition: The education provider must clarify the attendance monitoring processes in place for both the programmes and how these will be communicated to learners.

Reason: The education provider evidenced a weblink and relevant pages of 'Appendix O - BSc (Hons) Diagnostic Radiography student course handbook' for this standard. From their review, the visitors noted the minimum attendance requirement for the BSc

(Hons) Diagnostic Radiography programme was 100 percent for practice-based learning clinical hours and 80 percent for all taught lectures. The document stated that attendance requirements for the degree apprenticeship programme will be the same. There were clear university-wide policies regarding mitigating circumstances and fitness to practice procedures mentioned in the documentation. However the visitors could not see any information regarding how attendance for both proposed programmes for lectures conducted on campus or self-directed study online will be monitored, and who follows up with learners if poor attendance shows up on their record.

From the practice educators meeting, the visitors learnt that attendance during practice-based learning is noted by them manually via sign in sheets which are passed onto the education provider. From the learner, the visitors learnt that all learners swipe their card when entering the practice-based learning premises and that is how their attendance is electronically recorded. The visitors were therefore unclear as to the exact procedure e to monitor learners' attendance during practice-based learning.

Additionally, the documentation did not address what the consequences would be for learners who do not attend the minimum attendance requirement for the academic or practice-based learning elements of both the programmes. As such, the visitors could not determine that the attendance monitoring processes were clear in all essential parts of the programme and how will this be communicated to learners. Therefore, the education provider must provide evidence demonstrating:

- how attendance of lectures conducted on campus are recorded and monitored for both the programmes;
- how learners' attendance are recorded and monitored during practice-based learning on both the programmes, including information on how this record will be communicated to the education provider; and
- the consequences of not attending the mandatory parts of both the programmes and how will this get communicated to learners.

5.3 The education provider must maintain a thorough and effective system for approving and ensuring the quality of practice-based learning.

Condition: The education provider must demonstrate the system in place for approving and monitoring all practice-based learning for both the programmes.

Reason: For the BSc (Hons) Diagnostic Radiography programme, the education provider evidenced Supporting document 8 - UoG Placement audit process, which mentioned a placement team member and a placement lead for the relevant region who work collaboratively to approve a practice-based learning site. It also stated, that if the practice-based learning site has been previously approved by another education provider, then a local agreement allows for those audits to be shared between education providers. The visitors noted on page one: "The audit tool can be found in Appx 1", however they could not locate this document. Without any further information provided, the visitors could not determine what activities or steps were taken as part of the collaborative approach between the placement lead and member of the placement team to make a decision on whether to approve or not approve a practice-based learning site. Additionally, it was also not clear where the local agreements between practice education providers, existed and how the decision to approve a site will go ahead if such a local agreement did not exist. The visitors understood the information provided was a generic university-wide process of approving practice-based learning

settings and it was stated at the visit that this process is used for other existing HCPC approved programmes. However, with the lack of information provided regarding the steps that are taken to grant or not grant an approval, the visitors were not clear about the process in relation to this programme. Additionally, the visitors could not determine whether the same process will apply for the Diagnostic Radiography Degree Apprenticeship programme, when the practice education provider could possibly be an organisation that will be working with the education provider for the first time.

On page one of Supporting document 8 - UoG Placement audit process, it was stated "Audits will be completed as a minimum on a biannual basis". On page 78 of Appendix F -Programme Specification and page 10 of Appendix P - Diagnostic Radiography Placement Handbook, it was noted that audits of practice-based learning takes place annually and this was confirmed during the meeting with practice educators. Due to this discrepancy, it was not clear how regular the audit of practice-based learning will take place for both the proposed programmes.

The evidence submitted also mentioned regular meetings between the education provider and practice education providers. However, the visitors could not find any information suggesting how relevant feedback gathered during these meetings or from other feedback gathering mechanisms will be routinely shared and discussed. There was also no information to suggest what follow-on steps or mechanisms the education provider will use to analyse or act on the feedback gathered, as part of the practice-based learning audit. Based on this, the visitors could not determine if there was a robust and effective system in place to ensure the feedback is used for quality assurance across all practice-based learning sites. Therefore, the visitors could not determine if this standard has been met because they were unclear of the processes used by the education provider to approve the quality of practice-based learning and how feedback gathered was used to act upon as part of regular monitoring. As such the visitors require the education provider to demonstrate:

- what activities or steps are part of the collaborative approach between the placement lead and member of the placement team to make a decision on whether to approve or not approve a practice-based learning site;
- how approval of new practice education providers sponsoring learners for the degree apprenticeship programme will take place;
- confirmation if audits of practice-based learning will be held annually or bi-annually for both the proposed programmes; and
- how feedback in practice-based learning is gathered and how it will be used for quality assurance across all practice-based learning sites.

6.2 Assessment throughout the programme must ensure that learners demonstrate they are able to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics.

Condition: The education provider must demonstrate how they ensure that learners on both the programmes demonstrate that they are able to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics.

Reason: The education provider mentioned in the mapping document which assessment activity, as part of academic modules, will assess the relevant competencies for both of the programmes. From their review, the visitors noted the under Section 2 of Appendix Q – Placement Assessment Documents a formal appraisal

as part of the examination will take place during practice-based learning. The visitors noted the appraisal section contained a list of competencies to be assessed during practice-based learning and once these competencies were completed, it was added to the learner's practice portfolio. No further explanation was provided within the logbooks of how these competencies will be assessed by the practice educators. Additionally, within the same document, the visitors noted specific activities that needed to be completed as part of learning during practice-based learning and how these linked to the relevant module and learning outcomes. For example: Activity 8 Communication is identified as part of module RG4003 (Practice Based Learning 1: Foundations of Essential skills) and links with learning outcome four. Learning outcome 4 was not outlined in the Appendix Q. From reviewing the RG4003 module descriptor, the visitors noted various different assessment methods stated but it was not clear which of these will be used to assess Activity 8 Communication. Without any information provided regarding which assessment method will be used to assess the specific activities, the visitors could not determine how learners will understand what they are required to demonstrate to the expectations of professional behaviour during practice-based learning. Therefore, the visitors were unable to determine this standard is met. As such, the education provider must demonstrate how learners are assessed to meet the expectations of professional behaviour, including the standards of conduct performance and ethics during practice based learning on both the programmes.

6.5 The assessment methods used must be appropriate to, and effective at, measuring the learning outcomes.

Condition: The education provider must demonstrate how the assessments methods on both the programmes are appropriate to, and effective at, measuring the learning outcomes.

Reason: For this standard, the visitors were directed to various supporting documents which demonstrated the assessment strategy, marking grid and learning outcomes mapped against each module. The visitors reviewed the portfolio element of the clinical modules, which required learners to undertake assessments in order to pass a module. Taking module RG4003 (Practice Based Learning 1: Foundations of Essential skills) as an example, the visitors noted the module descriptor mentioned three assessment methods with the clinical portfolio being one of them. From reviewing Appendix Q – Placement Assessment Documents, the visitors noted eight different activities which formed part of the clinical portfolio assessment for module RG4003. Each of these activities was a different assessment such as a reflective exercise or presentation. As part of these activities, the visitors noted that five learning outcomes were to be achieved more than once. For example:

- Activity 1 - Self Evaluation and Action Plan: will be used to ensure all the learning outcomes are met;
- Activity 2 - Case Study Presentation: will be used to ensure learning outcomes one, two, three and four are met;
- Activity 3- Radiographic critique of three images that had to be repeated: will be used to ensure learning outcome three is met;
- Activity 4 - Ward Reflection: will be assessing learners to ensure they meet learning outcomes four and five;
- Activity 6 - Infection Control: will be used to ensure learning outcome 5 is met and
- Activity 8 – Communication: will be assessing learners to ensure they meet learning outcome four.

The visitors noted this pattern was repeated across all of the clinical placement modules. The visitors noted that a learner could fail activity 8 but have passed activity 1. They were unclear whether, overall, this meant the learner had met the learning outcome. Therefore the visitors were unsure how using these different assessment activities to determine the same learning outcomes in the same practice-based learning setting, would effectively measure whether the learners met the learning outcomes for the programme. From querying this with the programme team, the visitors could not gather the rationale for multiplicity of assessment methods and how this will ensure the development of learner, to achieve the learning outcomes as they progress on the programme.

In addition the visitors noted that some assessment methods within the clinical portfolio would not demonstrate the associated learning outcome. For example with module RG4003:

- Activity 1 - Self Evaluation and Action Plan. This activity does not address all the learning outcomes for module RG4003, as this is an activity that allows learners to develop lifelong learning skills;
- Activity 3- Radiographic critique of three images that had to be repeated: The prescribed nature of this activity also involves elements of reflection and a future action plan, which means this will exceed the remit of learning outcome three;
- Activity 4 - Ward Reflection. It is not clear how appropriate or effective this is in allowing learners to meet learning outcome four or five, as this activity is dependent on the interpretation of patient care being used in this module;
- Activity 9 End of Placement Reflection. This is not mapped to all the learning outcomes does not map over to RG4003 all learning outcomes.

This meant the visitors were unclear how the assessment methods will ensure the learning outcomes, and therefore the standards of proficiency (SOPs), will be met for both the programmes. As such, the education provider must demonstrate and articulate that the assessment methods are appropriate to, and effective at, measuring the learning outcomes.

HCPC approval process report

Education provider	University of Gloucestershire
Name of programme(s)	Diagnostic Radiography Degree Apprenticeship, Work based learning
Approval visit date	16 September 2020
Case reference	CAS-16846-J6F5K7

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Linda Mutema	Radiographer - Diagnostic radiographer
Mark Widdowfield	Radiographer - Diagnostic radiographer
Rabie Sultan	HCPC executive

Other groups involved in the virtual approval visit
There were other groups involved with the approval process as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

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Anita Suarez	Secretary (supplied by the education provider)	University of Gloucestershire
Helen Best	Professional body representative	College of Radiographers
Jacquie Vallis	Professional body representative	College of Radiographers

Section 2: Programme details

Programme name	Diagnostic Radiography Degree Apprenticeship
Mode of study	WBL (Work based learning)
Profession	Radiographer
Modality	Diagnostic radiographer
First intake	01 January 2021
Maximum learner cohort	Up to 30 (shared with BSc (Hons) Diagnostic Radiography)
Intakes per year	1
Assessment reference	APP02205

We undertook this assessment of new programmes proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meet our standards for the first time.

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Type of evidence	Submitted
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Descriptions of how the programme delivers and assesses learning	Yes
Proficiency standards mapping	Yes
Information provided to applicants and learners	Yes
Information for those involved with practice-based learning	Yes
Information that shows how staff resources are sufficient for the delivery of the programme	Yes
Internal quality monitoring documentation	Not Required, because the programme has not started yet

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

Group	Met	Comments
Learners	Yes	The panel met a learner from Nursing and Allied Health programme.

Service users and carers (and / or their representatives)	Not Required	As this was a virtual visit and, given the current situation around the Covid-19 pandemic, we decided that it was unnecessary to meet with this group
Facilities and resources	Not Required	As the visit was virtual and the visitors were able to determine through the programme documentation, that many of the standards had been met, they decided it was unnecessary to have a virtual tour of the facilities and resources
Senior staff	Yes	
Practice educators	Yes	
Programme team	Yes	

Section 4: Outcome from first review

Recommendation of the visitors
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We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 09 November 2020.

2.1 The admissions process must give both the applicant and the education provider the information they require to make an informed choice about whether to take up or make an offer of a place on a programme.

Condition: For the Diagnostic Radiography Degree Apprenticeship programme, the education provider must ensure applicants are given appropriate, clear and consistent information about the admissions process and the programme in order to make an informed choice about whether to take up a place on the programme.

Reason: For this standard, the education provider evidenced relevant pages of Appendix A – Programme spec document and a weblink outlining the admissions process for applicants wishing to apply for the BSc (Hons) Diagnostic Radiography programme. The visitors considered the information and noted that all the necessary relevant information provided was included for this proposed programme.

The education provider also evidenced Appendix V which was an example of a offer letter for applicants who were selected for the Diagnostic Radiography Degree Apprenticeship programme. From reviewing all the evidence provided, the visitors could not see any information regarding the admissions process for the Diagnostic Radiography Degree Apprenticeship programme.

Prior to the visit, the education provider provided additional information which stated the admissions information for both the programmes is similar in terms of entry and selection criteria, and will follow the same pathway. From reviewing the additional information and considering the discussions held at the visit, the visitors noted that applications on the degree apprenticeship programme can be made directly to the existing partnerships with NHS trusts and applicants will undergo an interview selection process held jointly by the education provider and their practice education partners. It was not clear from the documentation, nor discussions at the visit, if applications to the NHS trust were restricted to their own existing employees. For example, during the programme team meeting, the visitors learnt that an application had been received from an individual not currently working within one of the education providers existing partners. The visitors were therefore unsure about the admissions process and how this was communicated to potential applicants. Considering the lack of information provided regarding the admissions process, the visitors were unable to determine where potential applicants could find relevant admissions information and understand the process for applying to the programme.

The programme team also mentioned that learners on the degree apprenticeship programme will be attending lectures on campus for one day a week and spend the remaining four days in practice-based learning. The visitors noted that the number of days learners will spend on campus for the degree apprenticeship programme was different and this was not mentioned explicitly on the website or in the programme documentation. In additon, there was no mention regarding the End Point Assessment (EPA) anywhere in the documentation or on the website. Based on this, visitors were unsure how and where applicants will find information regarding the EPA and how this fits into the wider programme. As such, the visitors were unclear about how potential applicants had all the relevant information necessary to make an informed choice about whether to take up a place on the programme.

Therefore, the education provider must update the relevant documents and web links to ensure there is accurate and up-to-date information regarding the admissions process and information about the programme, including the EPA. In this way the visitors can determine whether applicants have all the information they require in order to be able to make an informed choice when deciding whether to take up a place on the Diagnostic Radiography Degree Apprenticeship programme.

2.4 The admissions process must assess the suitability of applicants, including criminal conviction checks.

Condition: For the Diagnostic Radiography Degree Apprenticeship programme, the education provider must clarify the decision making process associated with Disclosure and Barring Service (DBS) checks, including the actual cost and funding responsibility.

Reason: From their review of Appendix A - programme spec document submitted as evidence for this standard, the visitors noted applicants who are selected for the BSc

(Hons) Diagnostic Radiography programme need to undergo a DBS check prior to commencing the programme. It was also made clear in the document that applicants need to bear this cost, which is £54.40.

For the Diagnostic Radiography Degree Apprenticeship programme, the documentation provided demonstrated an example of an offer letter for applicants. The visitors noted this document stated: "There are a number of additional expenses that you may incur as part of the degree programme". It was not clear from this wording whether applicants are definitely required to bear this cost. Also, the cost of the DBS stated in the offer letter example was £40.00. Based on these observations, the visitors were not clear whether the cost was £40.00 or £54.40 for the applicants to undergo a DBS check for the degree apprenticeship programme. As noted in the additional documents submitted prior to the visit, applicants applying to the degree apprenticeship programme will be NHS employees sponsored by their employer. As the visitors were not clear regarding the admissions process, as noted under the condition for standard 2.1, the visitors were unclear whether paying for an applicants' DBS check was part of the sponsorship agreement where employers will bear the cost.

Additionally, it was mentioned in Appendix V that any criminal disclosures noted as part of the DBS check will be risk assessed by the strategic lead for placements and the outcome of the risk assessment may affect the applicants' ability to be accepted onto the programme. From this information, the visitors were unable to determine the policies in place to deal with any issues that may arise as a result of the check and who is involved in decisions about whether an applicant should be accepted. From discussions with the programme team and practice educators, the visitors understood the intention is to have a similar DBS process across both the proposed programmes. However, without clarity provided in the documentation, the visitors were unable to determine who makes the final decision about accepting an applicant if any DBS issue does arise.

As such, the visitors require further clarification on the decision-making processes, including responsibilities, the actual cost of DBS, and who is responsible to pay for it. Therefore, the visitors require further information about the DBS checks that are applied at the point of admissions on the degree apprenticeship programme.

3.1 The programme must be sustainable and fit for purpose.

Condition: For the Diagnostic Radiography Degree Apprenticeship programme, the education provider must demonstrate how it ensures the programme will be fit for purpose.

Reason: For this standard, the education provider evidenced the Validation document. The visitors noted on page 24 under section 2.1 that the proposed Diagnostic Radiography Degree Apprenticeship programme structure will involve learners being on practice-based learning for two days, with the remainder days being a mixture of on campus and self-directed study. The visitors also noted: "The exact delivery of the programme will be decided in conjunction with the employer". At the visit, the programme team mentioned that learners on this programme will spend four days a week at practice-based learning. Based on further discussions with the programme team and practice educators, the visitors understood that the intention is to deliver the programme in the same structure and format as evidenced in the documentation. However, due to the differences in how the programme could be delivered between the documentation and discussions, the visitors were unsure how learners would be

suitably prepared for practice and were able to meet the standards of proficiency (SOPs). In addition, they were unclear when these decisions would be reached.

The visitors also noted on page 24 of the Validation document that the EPA will be assessed by an independent assessor. At the visit, the programme team stated that they are yet to formally decide on whether to have an integrated or non-integrated EPA. The visitors were also unclear about when a decision about the EPA would be reached. Based on this, the visitors determined that the structure and programme delivery plans for the degree apprenticeship programme have not been formally finalised. In addition, the visitors did not receive information about any contingency planning should the decision about the EPA not be finalised before the start of the programme.

Based on these findings, the visitors were unclear about the design and delivery of the programme and when these decisions would be made to ensure the programme would be ready by the January 2021 start. The visitors were therefore unclear about how the programme ensures the needs of learners are met when they enter the profession and how the programme is fit for purpose. Therefore, the education provider must demonstrate how the degree apprenticeship programme will be delivered, including the EPA, to ensure the programme is fit for purpose.

3.1 The programme must be sustainable and fit for purpose.

Condition: For the Diagnostic Radiography Degree Apprenticeship programme, the education provider must demonstrate commitment from partners, to ensure the programme will be sustainable.

Reason: For this standard, the education provider evidenced the Validation document and Appendix S - Clinical Educators Placement Handbook. From reviewing these documents and, based on discussions held at the visit, the visitors were satisfied that the education provider has adequate resources to manage up to 30 learners across both the programmes. At the visit, the visitors understood that discussions have taken place between existing partners and the programme team in developing the degree apprenticeship programme. However, the visitors also learnt that existing partners had not committed to sponsoring a certain number of employees on the programme or to providing practice-based learning resources.

As noted in the condition for SET 2.1, the visitors were not clear if only existing partnerships with NHS Trusts will be responsible for sponsoring learners on the degree apprenticeship programme. During discussions with the programme team at the visit, the visitors learnt that an application had been received from an individual not currently employed by an existing partner. It was unclear to the visitors whether this individual would be accepted onto the programme. Therefore the visitors were unclear whether the education provider aims to develop further partnerships to help ensure the sustainability of the programme. The visitors recognise that formal, signed partnership agreements are not necessary to demonstrate appropriate commitment from partner organisations. However, due to the lack of certainty about the level of commitment from existing and possible non-existing partners to sponsor learners and provide the relevant resources, the visitors were unable to determine the security of the programme and therefore any possible risk or threat to its delivery. Therefore the education provider

must demonstrate how they ensure appropriate commitment from their partners (existing or new) to ensure sustainability of the programme.

3.2 The programme must be effectively managed.

Condition: For the Diagnostic Radiography Degree Apprenticeship programme, the education provider must clarify the roles and responsibilities within the partnership agreement who will be dealing with the End Point Assessment.

Reason: From reviewing the evidence submitted for this standard, the visitors noted there are clear management structures in place for the School of Health and Social Care for both the proposed programmes. However, the visitors could not see any information regarding who will manage and take responsibility for the EPA on the Diagnostic Radiography Degree Apprenticeship programme. As noted under the condition for standard 3.1, the education provider is yet to make a decision on whether to have an integrated or non-integrated EPA. Based on discussions with the programme team, it was stated that this area of responsibility will be looked at jointly by the education provider and practice education provider. However, without any further information provided, the visitors were unclear about the roles and responsibilities of either of the stakeholders in managing the EPA. The visitors could also not determine what process will be in place to respond to any problems should they arise with the EPA aspect of the programme. As an example, if a learner raises any issues regarding the EPA, then whom are they supposed to approach for this. The visitors noted that everyone involved should have a clear understanding of their responsibilities with clear processes in place to deal with concerns or issues. Therefore, the visitors could not determine if the degree apprenticeship programme will be effectively managed, as it was unclear how any issues arising with the EPA will be dealt with. As such, the visitors require further information outlining the lines of responsibility and which staff, as part of the partnership agreement, will be involved in managing the EPA on the Diagnostic Radiography Degree Apprenticeship programme.

4.5 Integration of theory and practice must be central to the programme.

Condition: For the Diagnostic Radiography Degree Apprenticeship programme, the education provider must articulate how integration of theory and practice remains central to the programme.

Reason: For this standard, the education provider evidenced the Validation document, module descriptors and assessment strategy information. From their review, the visitors noted the information regarding the programme structure, including ongoing links between theory and practice demonstrated in the learning outcomes and, how all the practice elements linked to the corresponding modules at levels four, five and six. Based on this, the visitors were satisfied that this standard was met for the BSc (Hons) Diagnostic Radiography programme.

However, it was not clear from the documentation if the same structure will be used for the Diagnostic Radiography Degree Apprenticeship programme. Based on their review of the documentation, and as mentioned under the condition for standard 3.1, the visitors were unclear regarding the programme structure for the degree apprenticeship programme, including the EPA. As clarity was needed regarding the number of days learners will spend on campus and in practice-based learning, the visitors could not determine how much time learners will spend at each level of the programme to

complete their theory and practice. Based on this and uncertainty regarding the timetabling, the visitors could not determine how the linking of the different parts of the programme will be relevant and meaningful to learners on the degree apprenticeship programme.

The rationale provided in the documentation regarding integration of theory and practice was applicable for the BSc (Hons) Diagnostic Radiography programme only. Based on this, and the education provider's considerations to possibly have apprentices spend more time at practice-based learning during the week, the visitors could not judge how the information provided will be relevant for the degree apprenticeship programme. Given the lack of clarity around timetabling, the visitors were unable to determine how this structure would allow learners to be able to practise what they have learnt in the theoretical element of the programme, or how practice-based learning would feed back into the theoretical aspect of the degree apprenticeship programme. Given these findings, the visitors are not clear regarding the structure and delivery of the apprenticeship programme and as such how will it enable the integration of theory and practice. The education provider must therefore articulate the structure of theory and practice for the Diagnostic Radiography Degree Apprenticeship programme and how the programme is designed to support it. From this the visitors will be able to determine whether the integration of theory and practice will remain central to the Diagnostic Radiography Degree Apprenticeship programme.

4.11 The education provider must identify and communicate to learners the parts of the programme where attendance is mandatory, and must have associated monitoring processes in place.

Condition: The education provider must clarify the attendance monitoring processes in place for both the programmes and how these will be communicated to learners.

Reason: The education provider evidenced a weblink and relevant pages of 'Appendix O - BSc (Hons) Diagnostic Radiography student course handbook' for this standard. From their review, the visitors noted the minimum attendance requirement for the BSc (Hons) Diagnostic Radiography programme was 100 percent for practice-based learning clinical hours and 80 percent for all taught lectures. The document stated that attendance requirements for the degree apprenticeship programme will be the same. There were clear university-wide policies regarding mitigating circumstances and fitness to practice procedures mentioned in the documentation. However the visitors could not see any information regarding how attendance for both proposed programmes for lectures conducted on campus or self-directed study online will be monitored, and who follows up with learners if poor attendance shows up on their record.

From the practice educators meeting, the visitors learnt that attendance during practice-based learning is noted by them manually via sign in sheets which are passed onto the education provider. From the learner, the visitors learnt that all learners swipe their card when entering the practice-based learning premises and that is how their attendance is electronically recorded. The visitors were therefore unclear as to the exact procedure e to monitor learners' attendance during practice-based learning.

Additionally, the documentation did not address what the consequences would be for learners who do not attend the minimum attendance requirement for the academic or practice-based learning elements of both the programmes. As such, the visitors could

not determine that the attendance monitoring processes were clear in all essential parts of the programme and how will this be communicated to learners. Therefore, the education provider must provide evidence demonstrating:

- how attendance of lectures conducted on campus are recorded and monitored for both the programmes;
- how learners' attendance are recorded and monitored during practice-based learning on both the programmes, including information on how this record will be communicated to the education provider; and
- the consequences of not attending the mandatory parts of both the programmes and how will this get communicated to learners.

5.3 The education provider must maintain a thorough and effective system for approving and ensuring the quality of practice-based learning.

Condition: The education provider must demonstrate the system in place for approving and monitoring all practice-based learning for both the programmes.

Reason: For the BSc (Hons) Diagnostic Radiography programme, the education provider evidenced Supporting document 8 - UoG Placement audit process, which mentioned a placement team member and a placement lead for the relevant region who work collaboratively to approve a practice-based learning site. It also stated, that if the practice-based learning site has been previously approved by another education provider, then a local agreement allows for those audits to be shared between education providers. The visitors noted on page one: "The audit tool can be found in Appx 1", however they could not locate this document. Without any further information provided, the visitors could not determine what activities or steps were taken as part of the collaborative approach between the placement lead and member of the placement team to make a decision on whether to approve or not approve a practice-based learning site. Additionally, it was also not clear where the local agreements between practice education providers, existed and how the decision to approve a site will go ahead if such a local agreement did not exist. The visitors understood the information provided was a generic university-wide process of approving practice-based learning settings and it was stated at the visit that this process is used for other existing HCPC approved programmes. However, with the lack of information provided regarding the steps that are taken to grant or not grant an approval, the visitors were not clear about the process in relation to this programme. Additionally, the visitors could not determine whether the same process will apply for the Diagnostic Radiography Degree Apprenticeship programme, when the practice education provider could possibly be an organisation that will be working with the education provider for the first time.

On page one of Supporting document 8 - UoG Placement audit process, it was stated "Audits will be completed as a minimum on a biannual basis". On page 78 of Appendix F -Programme Specification and page 10 of Appendix P - Diagnostic Radiography Placement Handbook, it was noted that audits of practice-based learning takes place annually and this was confirmed during the meeting with practice educators. Due to this discrepancy, it was not clear how regular the audit of practice-based learning will take place for both the proposed programmes.

The evidence submitted also mentioned regular meetings between the education provider and practice education providers. However, the visitors could not find any information suggesting how relevant feedback gathered during these meetings or from

other feedback gathering mechanisms will be routinely shared and discussed. There was also no information to suggest what follow-on steps or mechanisms the education provider will use to analyse or act on the feedback gathered, as part of the practice-based learning audit. Based on this, the visitors could not determine if there was a robust and effective system in place to ensure the feedback is used for quality assurance across all practice-based learning sites. Therefore, the visitors could not determine if this standard has been met because they were unclear of the processes used by the education provider to approve the quality of practice-based learning and how feedback gathered was used to act upon as part of regular monitoring. As such the visitors require the education provider to demonstrate:

- what activities or steps are part of the collaborative approach between the placement lead and member of the placement team to make a decision on whether to approve or not approve a practice-based learning site;
- how approval of new practice education providers sponsoring learners for the degree apprenticeship programme will take place;
- confirmation if audits of practice-based learning will be held annually or bi-annually for both the proposed programmes; and
- how feedback in practice-based learning is gathered and how it will be used for quality assurance across all practice-based learning sites.

6.2 Assessment throughout the programme must ensure that learners demonstrate they are able to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics.

Condition: The education provider must demonstrate how they ensure that learners on both the programmes demonstrate that they are able to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics.

Reason: The education provider mentioned in the mapping document which assessment activity, as part of academic modules, will assess the relevant competencies for both of the programmes. From their review, the visitors noted the under Section 2 of Appendix Q – Placement Assessment Documents a formal appraisal as part of the examination will take place during practice-based learning. The visitors noted the appraisal section contained a list of competencies to be assessed during practice-based learning and once these competencies were completed, it was added to the learner's practice portfolio. No further explanation was provided within the logbooks of how these competencies will be assessed by the practice educators. Additionally, within the same document, the visitors noted specific activities that needed to be completed as part of learning during practice-based learning and how these linked to the relevant module and learning outcomes. For example: Activity 8 Communication is identified as part of module RG4003 (Practice Based Learning 1: Foundations of Essential skills) and links with learning outcome four. Learning outcome 4 was not outlined in the Appendix Q. From reviewing the RG4003 module descriptor, the visitors noted various different assessment methods stated but it was not clear which of these will be used to assess Activity 8 Communication. Without any information provided regarding which assessment method will be used to assess the specific activities, the visitors could not determine how learners will understand what they are required to demonstrate to the expectations of professional behaviour during practice-based learning. Therefore, the visitors were unable to determine this standard is met. As such, the education provider must demonstrate how learners are assessed to meet the

expectations of professional behaviour, including the standards of conduct performance and ethics during practice based learning on both the programmes.

6.3 Assessments must provide an objective, fair and reliable measure of learners' progression and achievement.

Condition: For the Diagnostic Radiography Degree Apprenticeship programme, the education provider must demonstrate its plans regarding the EPA and how it will provide an objective, fair and reliable measure of learners' progression and achievement.

Reason: For the Diagnostic Radiography Degree Apprenticeship programme, this condition is related to the conditions and reasoning set out under 2.1 and 3.1. As noted in those conditions, the programme team was unable to provide clarification about its plans regarding the EPA and who will be responsible for conducting it, on the Diagnostic Radiography Degree Apprenticeship programme. This meant that visitors could not make a judgement on the overall objectivity, fairness and reliability of assessment on the degree apprenticeship programme. This is because they could not determine how effective it will be at deciding whether a learner is fit to practise by the end of the programme. Considering the evidence submitted and discussions held with the programme team, the visitors considered that the standard has not been met. Therefore, the education provider must clarify the education provider's plans and provide details for EPA on Diagnostic Radiography Degree Apprenticeship programme, to demonstrate how this standard will be met.

6.4 Assessment policies must clearly specify requirements for progression and achievement within the programme.

Condition: For the Diagnostic Radiography Degree Apprenticeship programme, the education provider must clearly articulate the number of credits required to progress onto the End Point Assessment.

Reason: For this standard, the education provider evidenced relevant pages of the Validation document which stated learners on both programmes needed to complete a total of 360 credits to achieve the final award. The document also mentioned that learners need to achieve 340 credits before progressing onto the EPA on the Diagnostic Radiography Degree Apprenticeship programme. It was stated under section 10.2 on page 24 that "students will need to pass all their modules in the programme, apart from RG6002 Practice-Learning – Complex Skills". As module RG6002 was worth 30 credits, the visitors considered that if learners were not required to pass this module, this would leave learners with a total of 330 credits provided they have passed all the other modules. . The visitors were therefore unclear about how learners would know how many credits they needed to gain in order to progress onto the EPA.

Additionally, it was mentioned within the same document that learners will need to pass the practical assessment and 30 minute exam of module RG6002, which will be equivalent to 10 credits. The visitors were therefore unclear as to how these10 credits can be achieved when learners are not required to pass module RG6002. It was also not clear from the documentation how the two mentioned assessments of module RG6002 will constitute as 10 credits. This is because the module descriptors specifically state the module RG6002 is worth 30 credits.

The visitors also reviewed page 20 of Appendix O – Student Course Handbook, which stated: "Your end point assessment sits within module RG6002 – Practice-based learning 5 – Complex Skills." From this statement the visitors felt this contradicts what was mentioned in the Validation document and could cause confusion to learners as this gave the impression that RG6002 module is part of the EPA, but RG60002 did not need to be passed. In discussions with the programme team, the visitors learnt there are proposals to include more assessments and possibly increase the credits for one of the modules in line with university assessment regulations.

Based on this, the visitors could not determine how learners can progress towards the EPA with only 330 credits. As such the visitors were unclear how the standard was met, as it was not clear how a learner would gain a clear understanding of the requirements for their progression and achievement within the degree apprenticeship programme. Therefore, the visitors require further evidence demonstrating what information will be available to learners about how to achieve 340 credits, to be able to progress towards the EPA.

6.5 The assessment methods used must be appropriate to, and effective at, measuring the learning outcomes.

Condition: The education provider must demonstrate how the assessments methods on both the programmes are appropriate to, and effective at, measuring the learning outcomes.

Reason: For this standard, the visitors were directed to various supporting documents which demonstrated the assessment strategy, marking grid and learning outcomes mapped against each module. The visitors reviewed the portfolio element of the clinical modules, which required learners to undertake assessments in order to pass a module. Taking module RG4003 (Practice Based Learning 1: Foundations of Essential skills) as an example, the visitors noted the module descriptor mentioned three assessment methods with the clinical portfolio being one of them. From reviewing Appendix Q – Placement Assessment Documents, the visitors noted eight different activities which formed part of the clinical portfolio assessment for module RG4003. Each of these activities was a different assessment such as a reflective exercise or presentation. As part of these activities, the visitors noted that five learning outcomes were to be achieved more than once. For example:
- Activity 1 - Self Evaluation and Action Plan: will be used to ensure all the learning outcomes are met;
- Activity 2 - Case Study Presentation: will be used to ensure learning outcomes one, two, three and four are met;
- Activity 3- Radiographic critique of three images that had to be repeated: will be used to ensure learning outcome three is met;
- Activity 4 - Ward Reflection: will be assessing learners to ensure they meet learning outcomes four and five;
- Activity 6 - Infection Control: will be used to ensure learning outcome 5 is met and
- Activity 8 – Communication: will be assessing learners to ensure they meet learning outcome four.

The visitors noted this pattern was repeated across all of the clinical placement modules. The visitors noted that a learner could fail activity 8 but have passed activity 1. They were unclear whether, overall, this meant the learner had met the learning

outcome. Therefore the visitors were unsure how using these different assessment activities to determine the same learning outcomes in the same practice-based learning setting, would effectively measure whether the learners met the learning outcomes for the programme. From querying this with the programme team, the visitors could not gather the rationale for multiplicity of assessment methods and how this will ensure the development of learner, to achieve the learning outcomes as they progress on the programme.

In addition the visitors noted that some assessment methods within the clinical portfolio would not demonstrate the associated learning outcome. For example with module RG4003:

- Activity 1 - Self Evaluation and Action Plan. This activity does not address all the learning outcomes for module RG4003, as this is an activity that allows learners to develop lifelong learning skills;
- Activity 3- Radiographic critique of three images that had to be repeated: The prescribed nature of this activity also involves elements of reflection and a future action plan, which means this will exceed the remit of learning outcome three;
- Activity 4 - Ward Reflection. It is not clear how appropriate or effective this is in allowing learners to meet learning outcome four or five, as this activity is dependent on the interpretation of patient care being used in this module;
- Activity 9 End of Placement Reflection. This is not mapped to all the learning outcomes does not map over to RG4003 all learning outcomes.

This meant the visitors were unclear how the assessment methods will ensure the learning outcomes, and therefore the standards of proficiency (SOPs), will be met for both the programmes. As such, the education provider must demonstrate and articulate that the assessment methods are appropriate to, and effective at, measuring the learning outcomes.

HCPC approval process report

Education provider	University of Plymouth
Name of programme(s)	MSc Podiatry (Pre-registration), Full time
Approval visit date	16 September 2020
Case reference	CAS-15957-Y0Z2M1

Contents

Executive Summary

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

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

Through undertaking this process, we have noted areas that may need to be considered as part of future HCPC assessment processes in section 6 of this report.

Section 1: Our regulatory approach

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

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

How we make our decisions
We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint partner visitors to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make 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 meets in public on a regular basis and their decisions are available to view on our website.

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

Angela Duxbury	Radiographer - Therapeutic radiographer
Emma Supple	Chiropodist / podiatrist (Prescription only medicines – sale / supply)
Niall Gooch	HCPC executive

Other groups involved in the virtual approval visit
There were other groups involved with the approval process as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

Sheela Agarwal	Independent chair (supplied by the education provider)	University of Plymouth
Phil Gee	Secretary (supplied by the education provider)	University of Plymouth
Summer Ashbury	Student representative	University of Plymouth

Lynn Harvey	Internal panel member	University of Plymouth
Kahila Smith	Internal panel member	University of Plymouth

Section 2: Programme details

Programme name	MSc Podiatry (Pre-registration)
Mode of study	FT (Full time)
Profession	Chiropodist / podiatrist
Entitlement	Prescription only medicines – administration Prescription only medicines – sale / supply
Proposed first intake	01 January 2021
Maximum learner cohort	Up to 20
Intakes per year	1
Assessment reference	APP02242

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meet our standards for the first time.

Section 3: Requirements to commence assessment

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

Type of evidence	Submitted
Completed education standards mapping document	Yes
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes
Descriptions of how the programme delivers and assesses learning	Yes
Proficiency standards mapping	Yes
Information provided to applicants and learners	Yes
Information for those involved with practice-based learning	Yes
Information that shows how staff resources are sufficient for the delivery of the programme	Yes

Internal quality monitoring documentation	This was a new programme so this documentation was not available.

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

Group	Met	Comments
Learners	Not Required	Remote visit – the visitors did not have any outstanding concerns that could not be addressed through other meetings.
Service users and carers (and / or their representatives)	Not Required	Remote visit – the visitors did not have any outstanding concerns that could not be addressed through other meetings.
Facilities and resources	Yes	This was done virtually
Senior staff	Yes	
Practice educators	Yes	
Programme team	Yes	

Section 4: Outcome from first review

Recommendation of the visitors
In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

Conditions
Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 06 November 2020.

3.18 The education provider must ensure learners, educators and others are aware that only successful completion of an approved programme leads to eligibility for admission to the Register.

Condition: The education provider must demonstrate how they will ensure that learners are aware that the step-off awards do not provide eligibility to apply for registration with the HCPC.

Reason: The visitors noted from the documentation that there were certain exit awards available for learners, who accumulated certain amounts of credit on the programme.

However, the visitors were not clear how it would be clearly communicated to learners which awards did not confer eligibility to apply to the Register. The visitors therefore require that the education provider provide further evidence of how all learners will be enabled to understand that only successful completion of an approved programme leads to eligibility to apply for admission to the HCPC Register.

5.8 Learners and practice educators must have the information they need in a timely manner in order to be prepared for practice-based learning.

Condition: The education provider must clarify how they will ensure that learners who have any concerns about the use of their sensitive data in the practice-based learning context will have a means of raising them.

Reason: The visitors were aware from the documentation provided and from discussions during the visit that there was certain sensitive information pertaining to learners that might sometimes be shared between the education provider and the learners' employer.

However, it was not clear to the visitors how a learner who had a concern about the use of sensitive data in practice-based learning would be enabled to do so. The guidance for this standard states that learners must be "aware of what to do if…they have a concern about their practice-based learning experience". While it would not be proportionate or reasonable to expect a specific policy for this situation, the visitors considered that the education provider could, for example, flag the issue as a possible concern in materials supplied to learners. They therefore require additional evidence showing how learners will be informed of what to do if they have a concern about their personal data that arises from practice-based learning.

6.4 Assessment policies must clearly specify requirements for progression and achievement within the programme.

Condition: The education provider must ensure that assessment methods will be clearly communicated to learners.

Reason: The visitors were aware from the review of programme documentation and from discussions with the programme team that a variety of assessment methods would be used – for example, both written essays, tests and more practical methods involving learner interaction. They were satisfied that these methods were appropriate but they did note that in the information provided to learners, it was not always clear which learning outcomes were to be assessed by which methods. The visitors therefore considered that it was not clearly specified to learners how they could achieve and progress within the programme, and as such they require the education provider to submit further evidence of how they will meet the standard.

6.7 The education provider must ensure that at least one external examiner for the programme is appropriately qualified and experienced and, unless other arrangements are appropriate, on the relevant part of the Register.

Condition: The education provider must submit further evidence relating to the process of appointing an external examiner.

Reason: The education provider had not yet completed the appointment of an external examiner. From discussions at the visit, the visitors were aware that an appointment was planned and that suitable candidates had been discussed. However, they did not see formal evidence relating to how this appointment would be made, or when it was intended to be made, or what criteria would be used in the decision, for example what qualifications and experience would be required. The visitors were therefore unable to determine whether an appropriately qualified and experienced external examiner would be appointed, and require additional evidence that clarifies what criteria and process will be used in the selection of this person.

Recommendations

We include recommendations when standards are met at or just above threshold level, and where there is a risk to that standard being met in the future. Recommendations do not need to be met before programmes can be approved, but they should be considered by education providers when developing their programmes.

2.5 The admissions process must ensure that applicants are aware of and comply with any health requirements.

Recommendation: The education provider should consider how they ensure that learners are aware there are arrangements in place to inform applicants with a disability of how they can be supported on the programme.

Reason: The visitors were aware from the programme documentation that the education provider had plans to place to make the admissions process accessible to potential applicants with disabilities, and so considered that the standard was met at threshold. However, they were not sure of how the education provider would make applicants aware of these arrangements, and therefore suggest that the education provider review how they make applicants aware of how they would be included on the programme and how reasonable adjustments would be made.

Section 5: Visitors' recommendation

Considering the education provider's response to the conditions set out in section 4, the visitors are satisfied that the conditions are met and recommend that the programme(s) are approved.

This report, including the recommendation of the visitors, will be considered at the 04 December 2020 meeting of the ETC. Following this meeting, this report should be read alongside the ETC's decision notice, which are available on our website.

Section 6: Future considerations for the programme(s)

We include this section to note areas that may need to be considered as part of future HCPC assessment processes. Education providers do not need to respond to this section at this time, but should consider whether to engage with the HCPC around these areas in the future.

The visitors considered that all the standards were met at threshold. They did note, however, that with regard to SET 6.4, concerning learners being fully informed about how to progress and achieve within the programme, there were some minor errors within the documentation. They therefore suggest that documentation available to learners be reviewed to ensure that all information is correct and complete.