

## Approval process report

York St John University, Paramedic 2020-21

### **Executive summary**

The visitors are recommending approval of the programme without conditions. There are no referrals to any other process and no issues that need to be explored through other processes. This report will be submitted to the meeting of the Education and Training Panel on 29 July 2022.

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## Section 1: About this assessment

### About us

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

This is a report on the approval process undertaken by the HCPC to ensure that the programmes detailed in this report meet our education standards. The report details the process itself, evidence considered, outcomes and recommendations made regarding the programme's approval / ongoing approval.

### Our standards

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

### Our regulatory approach

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

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

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

### The approval process

Institutions and programmes must be approved by us before they can run. The approval process is formed of two stages:

- Stage 1 – we take assurance that institution level standards are met by the institution delivering the proposed programme(s)
- Stage 2 – we assess to be assured that programme level standards are met by each proposed programme

Through the approval process, we take assurance in a bespoke and flexible way, meaning that we will assess whether providers and programmes meet standards based on what we see, rather than by a one size fits all approach. Our standards are split along institution and programme level lines, and we take assurance at the provider level wherever possible.

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

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

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

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

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

We appointed the following panel members to support this review:

Elspeth McCartney	Lead visitor, Speech and Language Therapist
Paul Bates	Lead visitor, Paramedic
Niall Gooch	Education Quality Officer

## **Section 2: Institution-level assessment**

### **The education provider context**

The education provider currently delivers 18 HCPC-approved programmes across 3 professions. It is an HEI and has been running HCPC-approved programmes since 1992.

### **Practice areas delivered by the education provider**

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

	Practice area	Delivery level		Approved since
<b>Pre-registration</b>	Occupational therapy	<input checked="" type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	1992
	Physiotherapist	<input checked="" type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	1999
	Practitioner psychologist	<input type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	2019

### Institution performance data

Data is embedded into how we understand performance and risk. We capture data points in relation to provider performance, from a range of sources. We compare provider data points to benchmarks, and use this information to inform our risk based decisions about the approval and ongoing approval of institutions and programmes.

This data is for existing provision at the institution, and does not include the proposed programme(s).

Data Point	Benchmark	Value	Date	Commentary
Total intended learner numbers compared to total enrolment numbers	188	188	2022	The fact that these two numbers are the same suggests that there are no issues to explore around the provider's sustainability.
Learners – Aggregation of percentage not continuing	3%	3%	2019-2020	The fact that the percentage of learners not continuing is at benchmark suggests good institutional stability and management of learners.
Graduates – Aggregation of percentage in employment / further study	93%	96%	2018-2019	This is a strong figure and suggests that the education provider does a good job of preparing graduates for future pathways.
Teaching Excellence Framework (TEF) award	Bronze		June 2017	This suggests overall room for improvement at the institution but does not necessarily give useful information about the teaching on the HCPC-approved provision.
National Student Survey (NSS) overall satisfaction score (Q27)	75.9%	79%	2022	This is an encouraging score suggesting that the provider is giving a strong learner experience.

HCPC performance review cycle length				N/A as the provider has not yet been through performance review.
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## The route through stage 1

Institutions which run HCPC-approved provision have previously demonstrated that they meet institution-level standards. When an existing institution proposes a new programme, we undertake an internal review of whether we need to undertake a full partner-led review against our institution level standards, or whether we can take assurance that the proposed programme(s) aligns with existing provision.

As part of the request to approve the proposed programme(s), the education provider supplied information to show alignment in the following areas.

### Admissions

#### **Findings on alignment with existing provision:**

- **Information for applicants –**
  - Individual programmes are required to follow university-level policies around clarity and transparency of information for applicants and to ensure that they have enough information to make an informed decision, and that the education provider can make an informed decision about selection of learners.
  - The documentation makes clear that the new programme will take this approach.
- **Assessing English language, character, and health –**
  - Individual programmes are required to follow university-level policies around clarity and transparency of information for applicants and to ensure that they have enough information to make an informed decision, and that the education provider can make an informed decision about selection of learners.
  - The new programme will be closely aligned with the arrangements in the existing provision.
- **Prior learning and experience (AP(E)L) –**
  - Individual programmes are required to follow university-level policies around clarity and transparency of information for applicants and to ensure that they have enough information to make an informed decision, and that the education provider can make an informed decision about selection of learners.
  - These processes will be followed on the new programme.
- **Equality, diversity and inclusion –**
  - Individual programmes are required to follow university-level policies around clarity and transparency of information for applicants. They must also ensure that applicants have enough information to make an informed decision, and that the education provider can make an informed decision about selection of applicants.

- The new programme will be aligned with these expectations.

**Non-alignment requiring further assessment:** None.

### Management and governance

#### **Findings on alignment with existing provision:**

- **Ability to deliver provision to expected threshold level of entry to the Register<sup>1</sup> –**
  - Internal quality processes at the education provider require new programmes to follow relevant regulations and standards of professional, statutory and regulatory bodies (PSRB).
  - This matches what we understood the education provider's approach to be.
- **Sustainability of provision –**
  - Programmes at the education provider cannot be internally approved until they have demonstrated that they are sustainable within the institutional business plan.
  - The new programme will follow this approach.
- **Effective programme delivery –**
  - New programmes must demonstrate that they will be able to deliver consistently and effectively within university regulations. The new programmes have demonstrated that they have met these requirements, via gaining internal approval.
  - We can therefore be confident that the new programme meets internal delivery requirements.
- **Effective staff management and development –**
  - Policies in this area are set at an institutional level and are equally applied to all programmes. The education provider states that their policies function to ensure the sustainability and quality of the programmes of the university as a whole and are part of the initial approval of all programmes.
  - Therefore, there are no further issues to explore concerning this particular area.
- **Partnerships, which are managed at the institution level –**
  - A centralised team is dedicated to managing partnerships at institutional level and the School Operations Manager oversees school-specific partnerships. These policies function to manage and organise practice education placements across a number of professions. This ensures a consistent approach to regularity and legal requirements as well as adequate resourcing.
  - This matches with our understanding of the education provider's approach.

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<sup>1</sup> This is focused on ensuring providers are able to deliver qualifications at or equivalent to the level(s) in SET 1, as required for the profession(s) proposed

**Non-alignment requiring further assessment:** None.

### Quality, monitoring, and evaluation

#### **Findings on alignment with existing provision:**

- **Academic quality –**
  - The provider's policies on ensuring academic quality provide a clear framework of internal and external assessment of the quality of approvals and changes to programmes. The assessment of quality is extended to aspects of staffing, sustainability and design, This indicates a robust process is in place.
  - In the light of the above it is clear that the new programme will be rigorously assessed through internal quality processes.
  
- **Practice quality, including the establishment of safe and supporting practice learning environments –**
  - The education provider submitted clear institutional policies showing their requirement that all programmes monitor practice quality and safety. Individual programmes are expected to meet these requirements, and if they do not the internal approval processes will not permit them to proceed.
  - The new programme will be closely aligned with the institutional approach noted above.
  
- **Learner involvement –**
  - The provider has policies in place which aim to ensure a standardised approach to including the student voice in both design and change process. The provider have demonstrated through their baselining exercise that ongoing feedback is embedded throughout the university's programmes.
  - It is clear that the new programme will use this standardised approach to begin and develop learner involvement.
  
- **Service user and carer involvement –**
  - Policy in this area originates at the school level and includes all health programmes. The Quality and Programme Design policies require input from stakeholders during the process. They also require compliance with professional body requirements for service user involvement in the design and programme. These policies functions to ensure that service user and carer involvement is embedded into programmes consistently by including it in the design and change processes. Where appropriate, shared resourcing ensures sustainability.
  - This matches our understanding of the education provider's approach.

**Non-alignment requiring further assessment:** None.

### Learners

#### **Findings on alignment with existing provision:**

- **Support –**



- The education provider's learner policies are set at the institutional level and applied equally to all provision. These policies function to ensure the appropriate support is available to all students. They ensure compliance with relevant regulation, consumer protection legislation and partnerships with student representative bodies.
  - We can be confident that the new programme will be required to follow this approach.
- **Ongoing suitability –**
    - These policies function by ensuring ongoing suitability is part of the design and change process of programmes and is included in decisions about progression. They provide a means to support learners to understand the requirements of their chosen career and challenge emergent poor behaviour in a fair, well developed system.
    - This approach will be applied to the new programme and so we can be confident about their alignment to the education provider's standards.
- **Learning with and from other learners and professionals (IPL/E) –**
    - The education provider state that Quality & Programme Design policies require adherence to professional body and QAA Benchmark Standards. Those standards require the inclusion of interprofessional working. This is evidenced in individual programme specifications and Design Narratives as per the Quality & Programme Design policies. At school level, the inter-professional learning (IPL) strategy describes the guiding principles of IPL, which can be incorporated into individual programmes as required.
    - The new programme's alignment with this approach means we can have confidence in the way they intend to include IPL.
- **Equality, diversity and inclusion –**
    - Several policies govern this area including the Equity and Diversity Policy, the Exceptional Circumstances Policy, and the Access & Participation Plan. These policies are set at the institutional level and applied equally to all provision. They ensure equity and diversity and ensure compliance with appropriate law and regulation.
    - The new programme will be following these policies so we can be confident in the alignment with the overall education provider approach.

**Non-alignment requiring further assessment:** None.

### Assessment

#### **Findings on alignment with existing provision:**

- **Objectivity –**
  - The education provider's Assessment Policies and External Examiners policies show a clear commitment to making assessment objective and properly designed and must be followed by all programmes at the provider.

- Given these policies we can be confident in the new programme's objectivity of assessment.
- **Progression and achievement –**
  - The Academic Regulations set out in detail how learners are expected to progress through the programmes and what they need to achieve. These are made accessible and available to learners as required.
  - The new programme is closely aligned with institutional approaches so there are no concerns in this area.
- **Appeals –**
  - The Appeals and Complaints Policy is intended to provide a clear, fair and appropriate pathway for appeals. Ensuring fairness and objectivity is embedded into the process. The policy ensures compliance with regulation and law governing the business of the institution.
  - The new programme will follow this policy in line with requirements at the provider, so there are no further concerns in this area.

**Non-alignment requiring further assessment:** None.

### **Outcomes from stage 1**

We decided to progress to stage 2 of the process without further review through stage 1, due to the clear alignment of the new provision within existing institutional structures, as noted through the previous section

## **Section 3: Programme-level assessment**

### **Programmes considered through this assessment**

Programme name	Mode of study	Profession (including modality) / entitlement	Proposed learner number, and frequency	Proposed start date
MSc Paramedic (Pre-Registration)	Full time	Paramedic		September 2022

### **Stage 2 assessment – provider submission**

The education provider was asked to demonstrate how they meet programme level standards. They provided information about how each standard was met, including a rationale and links to supporting information via a mapping document.

### **Quality themes identified for further exploration**

We reviewed the information provided and worked with the education provider on our understanding of their submission.

The visitors did not consider that they needed to explore any further areas of the submission.

## Section 4: Findings

This section details the visitors' findings from their review through stage 2, including any requirements set, and a summary of their overall findings.

### Conditions

Conditions are requirements that must be met before providers or programmes can be approved. We set conditions when there is an issue with the education provider's approach to meeting a standard. This may mean that we have evidence that standards are not met at this time, or the education provider's planned approach is not suitable.

The visitors were satisfied that no conditions were required to satisfy them that all standards are met. The visitors' findings, including why no conditions were required, are presented below.

### Overall findings on how standards are met

This section provides information summarising the visitors' findings against the programme-level standards. The section also includes a summary of risks, further areas to be followed up, and areas of good practice.

### Findings of the assessment panel:

- **SET 1: Level of qualification for entry to the Register** – this standard is covered through institution-level assessment.
- **SET 2: Programme admissions** – The visitors considered that selection and entry criteria were appropriately tailored to the programme and to the institutional policies, and those policies would deliver individuals who could work well on the programme and meet the standards of proficiency to become safe and effective practitioners.
- **SET 3: Programme governance, management and leadership** – The visitors viewed details of the programme team, including CVs. They considered that these details showed that the staffing was appropriate (3.9, 3.10). They saw good record-keeping of collaboration with practice partners (3.5, 3.6), as well as contingency planning for difficulties in practice-based learning. and the submission also contained a good deal of evidence around resource planning and co-ordination (3.12).
- **SET 4: Programme design and delivery** – The provider submitted good clear evidence concerning the organisation, delivery and teaching approaches on the programme. This reassured them that the programme content, its structure and the pedagogical approaches are appropriate (4.3, 4.5, 4.6, 4.7), and will enable learners to meet the standards of proficiency (4.1, 4.2). A transparent and well-designed procedure was available for updating the programme when appropriate (4.4, 4.8).

- **SET 5: Practice-based learning** – From the submission the visitors were satisfied that practice-based learning on the programme was well designed and planned and was clearly integrated with the rest of the programme. There were appropriate policies and procedures in place to ensure a useful and safe learner experience.
- **SET 6: Assessment** – From the documentation it was clear to the visitors that assessment was closely aligned with the aims of the programme and would give learners the opportunity to show their command of the standards of proficiency and the standards of conduct, performance and ethics (6.1, 6.2). Assessment guides and policies meant that they were sure of how this would be achieved. Similarly, the visitors were confident that the diverse range of methods used would be suitable for proper and effective measurement of learners' alignment with learning outcomes.

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

**Areas of good and best practice identified through this review:**

- Excellent engagement with HCPC requirements and processes
- Strong design of modules and integration of practice-based learning with learning outcomes.

## Section 5: Referrals

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

There were no outstanding issues to be referred to another process.

## Section 6: Decision on approval process outcomes

### **Assessment panel recommendation**

Based on the findings detailed in section 4, the visitors recommend to the Education and Training Committee that all standards are met, and therefore the programme should be approved

Appendix 1 – list of open programmes at this institution

<b>Name</b>	<b>Mode of study</b>	<b>Profession</b>	<b>Modality</b>	<b>Annotation</b>	<b>First intake date</b>
BHSc (Hons) Occupational Therapy	FT (Full time)	Occupational therapist			01/09/2006
BHSc (Hons) Occupational Therapy	FTA (Full time accelerated)	Occupational therapist			01/09/2002
BHSc (Hons) Occupational Therapy	PT (Part time)	Occupational therapist			01/09/1992
BHSc (Hons) Occupational Therapy	PT (Part time)	Occupational therapist			01/02/2008
BHSc (Hons) Occupational Therapy	FT (Full time)	Occupational therapist			01/09/2006
BHSc (Hons) Physiotherapy	FT (Full time)	Physiotherapist			01/09/2006
BHSc (Hons) Physiotherapy	PT (Part time)	Physiotherapist			01/09/1999
BHSc (Hons) Physiotherapy	FT (Full time)	Physiotherapist			01/09/2006
BHSc (Hons) Physiotherapy In Service	PT (Part time)	Physiotherapist			01/02/2008
BSc (Hons) Occupational Therapy	FT (Full time)	Occupational therapist			01/08/2018
BSc (Hons) Physiotherapy	FT (Full time)	Physiotherapist			01/09/2019

BSc (Hons) Physiotherapy	PT (Part time)	Physiotherapist			01/08/2019
Doctorate of Counselling Psychology (DCounsPsy)	FT (Full time)	Practitioner psychologist	Counselling psychologist		01/08/2019
MSc Occupational Therapy (Pre-registration)	FTA (Full time accelerated)	Occupational therapist			01/03/2017
MSc Paramedic (Pre-Registration)	FT (Full time)	Paramedic			19/09/2022
MSc Physiotherapy (Pre registration)	FT (Full time)	Physiotherapist			01/01/2013
MSc Physiotherapy (Pre registration)	PT (Part time)	Physiotherapist			01/01/2021