Performance review process report

Bournemouth University, 2018 - 2021

Executive summary

Process stage – final visitor recommendation reached, covering:

The visitors reviewed the submission and explored six themes further via quality activity. Visitors completed their assessment and have not found a reason to refer themes or risk to another process but have made recommendations for the next Performance Review. The visitors are recommending an ongoing monitoring period of three years.

We found the provider to have completed this review but having not engaged fully with it with often brief reflections in various sections. These was expanded upon through the quality activities and no risks to quality were identified. The visitors have found that a review period of three years will allow the provider to develop areas ahead of their next review whilst remembering they have completed the review with no risks to their provision.

Two referrals have been made as detailed in section 5 of this report and are being referred to the Provider's next Performance Review. These are as follows:
- o The first concerns data being made available on BAME attainment, appropriate data exists but has not been presented clearly and plans going forward could be clearer and more detailed. We therefore note this as an area for development.
- o The second relations to the mechanisms for monitoring, identifying, and responding to practice placement-based issues. We note their use of the CQC in their monitoring of placement providers but could not see other mechanisms in place, we do not feel this constitutes a risk to the quality of their provision but note this as area for development going forward.

Previous consideration	N/A – This is the provider first engagement with the Performance Review process since the launch of the HCPC Education department's Quality Assurance Model
Decision	The Education and Training Committee (Panel) is asked to decide: • When the Education Provider's next engagement with the performance review process should be. • Whether issues identified for referral through this review should be reviewed, and if so how.
Next steps	• Subject to the Panel's decision, the Provider's next performance review will be in the 2024-25 academic year

Included within this report

Name	Mode of study	Profession	Modality	Annotation	First intake date
BSc (Hons) Occupational Therapy	FT (Full time)	Occupational therapist			01/09/2005
BSc (Hons) Operating Department Practice	FT (Full time)	Operating department practitioner			01/09/2019
BSc (Hons) Paramedic Science	FT (Full time)	Paramedic			01/09/2015
BSc (Hons) Physiotherapy	FT (Full time)	Physiotherapist			01/09/2005
Supplementary and Independent Prescribing for Allied Health Professionals	PT (Part time)			Supplementary prescribing; Independent prescribing	01/02/2019
Supplementary Prescribing for Allied Health Professionals (Non Medical Prescribing)	PT (Part time)			Supplementary prescribing	01/06/2006

Section 1: About this assessment

About us

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

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

Our standards

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

Our regulatory approach

We are flexible, intelligent and data-led in our quality assurance of programme clusters and programmes. Through our processes, we:
- enable bespoke, proportionate and effective regulatory engagement with education providers;
- use data and intelligence to enable effective risk-based decision making; and
- engage at the organisation, profession and programme levels to enhance our ability to assess the impact of risks and issues on HCPC standards.

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

The performance review process

Once a programme institution is approved, we will take assurance it continues to meet standards through:
- regular assessment of key data points, supplied by the education provider and external organisations; and
- assessment of a self-reflective portfolio and evidence, supplied on a cyclical basis

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

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

Thematic areas reviewed

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

How we make our decisions

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

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

The assessment panel for this review

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

Anthony Hoswell	Lead visitor, Paramedic
Alexander Harmer	Lead visitor, Operating Department Practitioner
Rachel O'Connell	Service User Expert Advisor
Alistair Ward-Boughton-Leigh	Education Quality Officer

Section 2: About the education provider

The education provider context

The education provider currently delivers six HCPC-approved programmes across four professions. It is a Higher Education Institution and has been running HCPC approved programmes since 2003.

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
Pre-registration	Occupational therapy	☒Undergraduate	☐Postgraduate	2005
	Operating Department Practitioner	☒Undergraduate	☐Postgraduate	2003
	Paramedic	☒Undergraduate	☐Postgraduate	2007
	Physiotherapist	☒Undergraduate	☐Postgraduate	2005
Post-registration	Independent Prescribing / Supplementary prescribing			2006

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.

Data Point	Bench-mark	Value	Date	Commentary
Total intended learner numbers compared to total enrolment numbers	620	683	06/07/2022	The value does indicate that since the programmes run by the provider were approved there has been a slight overall increase in learner numbers. However, in the submission (where the value factor was found) the provider discusses attrition rates, indicating that learner number

				may have been higher in the last few years. The submission also gives staffing numbers where visitors can see the staff student ratio. The visitors were made aware of this ahead of their assessment
Learners – Aggregation of percentage not continuing	3%	2%	06/07/20 22	The value score is lower than the benchmark which indicates that the Provider is performing well here.
Graduates – Aggregation of percentage in employment / further study	93%	93%	06/07/20 22	The value score matches the benchmark which indicates that the Provider is performing as expected here.
Teaching Excellence Framework (TEF) award	Silver		06/07/20 22	A Silver award does indicate that there is room for improvement with a 'Gold' score being the highest score TEF award. However, it is worth factoring when this was awarded as the TEF award has not been awarded in recent years and the replacement for TEF has not yet been rolled out and is still being consulted upon. The institution was granted this award in June 2017, at nearly 5 years old there can have been considerable changes since this time. This also means that based on the evidence available, the TEF Panel judged that the higher education provider delivers high quality teaching, learning and outcomes for its students. It consistently exceeds rigorous national quality requirements for UK higher education.
National Student Survey (NSS) overall satisfaction score (Q27)	72.9%	70.5%	06/07/20 22	The value score is slightly lower than the benchmark score. This is not alarming, but a negative score does

				indicate a potential slight decline in overall satisfaction. But still staying above 70% which is seen as a positive level of satisfaction. The Provider has reflected on this in their portfolio document and visitors were made aware of this score ahead of their review

Section 3: Performance analysis and quality themes

Portfolio submission

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

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

Quality themes identified for further exploration

We reviewed the information provided and worked with the education provider on our understanding of their portfolio. Based on our understanding, we defined and undertook the following quality assurance activities linked to the quality themes referenced below. This allowed us to consider whether the education provider was performing well against our standards.

Quality theme 1 – Resourcing capacity

Area for further exploration: The Provider has stated they are financially secure and have flexibility available with regards to their staffing budgets. We have noted that the development and opening of their new gateway building as a key new resource of theirs. We note they did not reflect on whether their current resourcing was sufficient or how this affects their performance during the review period. The visitors explored if the provided had experienced any resource related issues during the review period and if so, how were they addressed. It is important to gain a further understanding of the Provider's approach to planning and managing resource to ensure the sustainability of their programmes. The visitors requested further details to understand how each programme has its workload measured and resourced.

In order for us to complete our assessment and make a clear judgement on the Provider's performance in this area we required additional information and requested the provider to submit this in the form of a quality activity.

Quality activities agreed to explore theme further: We requested for the provider to submit further information / clarifications to address these points. We considered this the most effective way to gain clarification on how this issue was managed.

Outcomes of exploration: The provider submitted further reflections and clarifications, detailing that they have a yearly 'workload planning model' where all staff identify their workload for the year ahead in conjunction with their head of department. This allows teaching gaps to be identified and ensure programmes are sufficiently resourced. They explained how the model also feeds into their bi-annual appraisal which forms part of their yearly business planning. We found this to address some of the questions we had regarding resourcing but gave little insight into how this will develop going forward. We found this has satisfied the quality theme and we had no concerns going forward and did not identify any quality risks.

Quality theme 2 – Interprofessional education / learning (IPE) improvement strategy

Area for further exploration: The Provider's submission of their reflections on this area are centred around the raising of learner awareness in regard to Interprofessional education. Furthermore, they have faced challenges to implementing IPE around securing and implementing Interprofessional education and also challenges connected to IPE interruption during the pandemic, this we note is a nationwide challenge HEI's face. We note also the provider has worked to raise learner awareness of Interprofessional education and note this as a positive first step and that they have a plan in place for ongoing Interprofessional education development. However, we did not consider the plan in place to be sufficiently detailed and queried whether they could provide us with more detail of their plans going forward. Additionally, we noted a specific challenge around recruiting and allocating pharmacists to support their provision and enquired if this had been resolved. We decided to explore this further to give the provider the opportunity to demonstrate further their approach to Interprofessional education and also to ensure they are fully engaging and supporting Interprofessional education going forward.

Quality activities agreed to explore theme further: We requested for the provider to submit further information / explanations via email and where necessary additional documents to allow the provider to elaborate of the existing information available.

Outcomes of exploration: The provider has expanded on the information previously provided with a narrative response. Their monthly IPE steering group meets to discuss unit management, progression and achievement rates and Provider's staff with the opportunity to raise issues and create action plans to resolve them. They also have unit monitoring records' where issues regarding specific units are explored at the end of the year with each unit being looked at in terms of achievement, attainment, learner feedback and future development. This has led to Interprofessional education being introduced as a 'pre-arrivals' activity and as part of induction sessions for learners in arrivals week with a refresher in IPE being introduced at the start of years 2 and 3 of programmes. The provider plans to evaluate this within the next academic year to see the results of these initiatives.

They have (also) stated they currently have enough pharmacists to support their provision and are working with local NHS Provider's regarding future requirements. We found the additional information gave us further clarity at the processes the provider has in place and that mechanisms are in place to continually examine, develop and address issues surrounding Interprofessional education. The introduction additional sessions has helped to raise the profile and importance of Interprofessional education with the learners further. Following the clarification provided here, the visitors are satisfied the provider has a robust approach to IPE and its development going forward.

Quality theme 3 – Lessons learnt from the pandemic

Area for further exploration: We note from the submission that the provider has reflected well on the section discussion the impact of covid-19, identifying challenges presented by the pandemic and the visitors note a robust response to the pandemic appears in place. However, it was not clear from their submission what lessons have been learnt from the pandemic and if any pandemic measures would be kept going forward. We explored whether the blended and flexible approach adopted during the pandemic to learning and assessment be maintained moving forwards. We asked if the provider's plans would be for all programmes to revert back to identical pre pandemic delivery methods. We looked to explore this further via a quality activity to give the provider an opportunity to expand on their initial submission.

Quality activities agreed to explore theme further: We requested the provider to submit further information / explanations via email to allow the provider to elaborate on the existing available information.

Outcomes of exploration: The provider has expanded on the reflections provided in their submission with a further narrative submission for this area. They discuss that they have encountered challenges throughout the pandemic and were able to address these and provide for their learners referencing their move to online ways of working. They are now reverting to their pre-pandemic ways of working to be compliant with CMA (Competition and Markets Authority) and OFS expectations. This reversion shall be fully implemented by the start of the 2021/22 academic year.

They state that pre-pandemic they had already delivered a blended learning approach which we note allows for a degree of flexibility. The Provider discusses that their policies indicate that all programmes evaluate their units and unit deliver. If they consider changes to this, this is to be discussed and agreed by their Faculty Quality Committee. This policy is however strict, and many changes will not be agreed until their programme revalidation event. The visitors found the extra explanations to this area made by the quality activity provided us with further clarity and understanding of the Provider's approach to the post-pandemic way of working. We found that largely they plan to return to their previous way of working and continue to monitor learner feedback. Following this quality activity, we had no further questions going forward.

Quality theme 4 – Assessments against the UK Quality Code for Higher Education

Area for further exploration: We note from the submission that the provider has reflected primarily on one area of the code this being the area that relates to partnership organisations. From this we could not determine if all areas of the code were being applied and if so how and how has this worked over the review period and if there were any developments that took place in relation to this. We therefore recommended that the provider refer to the code and provide further reflections for this section through a quality activity, ensuring all areas of the code are appropriately mapped or addressed.

Quality activities agreed to explore theme further: We asked the provider to submit further information / explanations via email and where necessary additional documents to allow the provider to elaborate on the existing information available and show how they are assessed against the code.

Outcomes of exploration: The provider explained via a narrative explanation that the quality code is a part of their validation processes for a programme and within their programme specifications and must be met in order to be validated. They also state that they have provided a link to validation expectation in their initial submission. Following this explanation, we had no further questions or concerns.

Quality theme 5 – National Student Survey (NSS) fall in learner satisfaction

Area for further exploration: We note from the submission, a sharp fall in learner satisfaction was recorded, coming from their Occupational Therapy (OT) and Paramedic learners. The provider did not reflect on how they planned to address this going forward. We decided to explore the possible reasons for the drop in NSS scores in relation to these two areas. It is important for the provider to reflect on and identify the reasons and explain their plans to address any issues identified and make improvement. We therefore looked to explore this further via a quality activity to allow the Provider the opportunity to expand on this and give us insight into how they plan to manage / address this

Quality activities agreed to explore theme further: We asked the provider to submit further information / explanations via email and where necessary additional documents to allow the provider to elaborate on the existing information available.

Outcomes of exploration: The provider has expanded on their initial submission with an additional narrative response. They discuss that the fall in learner satisfaction coincided and was due to the pandemic. They expand those necessary changes had to occur for placement learning but that the institution-based team put in place several mechanisms to mitigate against this. This did leave some learners dissatisfied or unhappy about changes to their learning, provider also states that the majority still entered the workforce in a timely manner.

They discuss that a possible lesson for them to learn or reflect on this could be that they were able to achieve this in comparison to other Providers who did not. They also reflect on the high levels of sickness and bereavement they faced within their team. This also led to them having to secure additional staffing and working to ensure their learners were taught by relevant professionals and not an academic from outside the profession (i.e. a non-OT background). They state they tried to keep

learners updated on staff changes but did so without breaching staff confidentiality. The state they engage in RCOT (Royal College of Occupational Therapy) reviews annually and are also now fully staffed. Furthermore, that department heads and deputy deans meet with learners and staff where they have the opportunity to raise concerns with none raised this academic year to date. Following the further reflections and information provided we had no further questions going forward.

Quality theme 6 – Relationships with professional bodies

Area for further exploration: We note from the submission that provider has made reference to enjoying a positive relationship with their regulatory bodies (HCPC and the NMC) but has not referred to their professional bodies such as the Royal College of Occupational Therapy (RCOT), College of Paramedics (CoP) etc. We decided to explore this because the programmes are approved by multiple professional bodies, and it is important to understand the provider's interactions with them. It would be beneficial to understand the roles and impact of these relationships throughout the monitoring.   We therefore raised this quality activity to give the provider an opportunity to provider reflections or data on any additional interactions / engagement they have had.

Quality activities agreed to explore theme further: We request the provider submits further information / explanations via email and where necessary additional documents to allow the provider to elaborate on the existing information available for this area.

Outcomes of exploration: The provider has expanded on their initial submission with an additional narrative response referring to the relationship they have with their professional bodies. This includes the Chartered Society of Physiotherapists, the Royal College of Occupational Therapy and the College of Operating Department Practitioners. They discuss that these relationships occur in a variety of ways and that these relationships remain key to the validation of their programmes by these bodies.

In recent developments the Chartered Society of Physiotherapists gave an introductory talk to learners in September 2022 and the Provider has since encouraged learners to become Chartered Society of Physiotherapists members. The programme leader for their Occupational therapy provision submits an annual report to the Royal College of Occupational Therapy and their operating department practitioner programme engages with the Association for Perioperative Practice with two of their staff members authoring a section for the new Association for Perioperative Practice Standards and Recommendations for Safe Perioperative Practice. Furthermore, two of the Provider's staff members work with the Association for Perioperative Practice to conduct audits of NHS and independent hospitals Operating Theatre suites, another staff member is on Association for Perioperative Practice's nomination committee, and another has presented at their annual conference.

The programme leader for their operating department practitioner provision engages with the College of Operating Department Practitioners through their education forum to keep up to date with ODP education nationally and uses College of Operating

Department Practitioners presentations to introduce the body to learners. The Provider has also discussed how the run an annual operating department practitioner conference with placement Provider's, the external examiner, the Association for Perioperative Practice and HCPC all being invited. We found these additional reflections and clarifications clearly demonstrates that the Provider does engage with their professional bodies on a regular basis with the voice of these bodies playing an important role in their processes. Following this expansion on the initial submission and further clarifications we had no further questions or concerns finding the provider to have demonstrated their regular engagement with professional and regulatory bodies.

Section 4: Summary of findings

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

Overall findings on performance

Quality theme: Institution self-reflection

Findings of the assessment panel:
- **Resourcing, including financial stability** –
    - o The provider details how all programmes are subject to validations and reviews which ensure sufficient resources are in place to enable programmes success. They described how the head of departments work with representatives from human resources and finance to ensure actions are taken swiftly to recruit more staff when needed. We note the provider's flexible recruitment model is available to ensure staffing needs are met with options for fixed terms contracts and part time roles.
    - o The provider has discussed the investment in infrastructure they have made to support learning in their new Bournemouth gateway building (BGB). This contains specialist HCPC resources –
        - ▪ simulated community flat for Occupational Therapists.
        - ▪ A plinth room for Physiotherapy.
        - ▪ An ambulance simulation for Paramedic Science
        - ▪ And an operating room simulation for Operating Department Practitioner as well as other flexible/multi-use skills areas.
    - o We explored this section further in quality theme one, following this we did not identify any risks to ongoing security or quality of their provision.
- **Partnerships with other organisations** –
    - o The provider has explained the partnerships in place with other organisations, such as, the University Hospitals Dorset, Dorset University Foundation Trust, Southwest Ambulance service Trust and the South-Central Ambulance Service. They have processes in place to communicate and ensure sufficient placement capacity through a

memorandum of understanding. They reflect on how their 'Practice Learning Advisers' engage with the placement providers in placement areas. They offer advice and support to the provider and are involved in tripartite meetings, placement audits and the development of learning opportunities within the practice area.

- o They discuss the challenges they have faced such as the scheduling of meetings and ensuring good levels of attendance at these meetings over covid. Additionally, how virtual meetings helped facilitate this, as well as the differences that exist between placement areas and in the communications with learners. They produced a 'frequently asked questions' document to provide more information for learners and resolve this issue.
- o We found the provider to have explained the mechanisms in place for reviewing placement availability and quality. Their practice in this area is similar to that of other HEI's nationally. Similar challenges exist around perceived 'better' placements by students. The provider is performing well in this section and identified no risks or concerns going forward

- **Academic and placement quality** –
  - o The provider has discussed how they are a member of a regional group led by Health Education England (Southeast). This group designed a revised process using existing data sets to refine the educational audit process. Additionally, they have established links with 'Freedom to Speak Up Guardians' within placement providers to provide a further avenue for students to consider should they identify concerns when in placement.
  - o They have discussed their increase of personnel at placement sites which enables increased support for learners and increased employment opportunities post-graduation. New personnel have a role to monitor the quality of the learning environment alongside the Provider meaning that any challenges to the learning environment are identified and acted upon promptly.
  - o The provider has plans to refine their process for gaining feedback from clinically based educators to understand their support needs. They have an online placement evaluation completed by students includes an alert system to flag specific concerns. Immediate concerns can be contextualised and addressed by the EP in collaboration with placement provider.
  - o We found the Provider's reflections to mainly concern their placement quality with little to no reflection on academic quality. We requested further information for this area. Their response demonstrated how they were able to move sessions online with the aim of producing as little disruption to learners as possible. They were able to facilitate face-to-face skills session when pandemic regulations allowed, they discuss how assessments were able to continue and that they have returned to their ways of working pre-pandemic.

- **Interprofessional education (IPE)** –
  - o The provider has reflected on the differences in sizes of different professional groups which can lead smaller groups to feel isolated.

Benefit of IPE being missed or misunderstood in these situations and these situations are the reality. They also identified a potential risk of a national shortage of pharmacists, needed to teach on IPSP (independent prescribing and / or supplementary and prescribing) programmes.

- o To help combat this in their own provision, they have discussed their future plan to develop pharmacists in the local area which is being discussed between the provider and partners in a local steering group. The Provider's interprofessional education interprofessional education lead has also been working to highlight the benefit of IPE through increased information on their online platforms. Encouraging learners to feedback and using this feedback to develop future academic years. They discuss interprofessional education interprofessional education as being a key component of their teaching and chosen model of teaching delivery, enabling a structured approach to facilitate student engagement and participation in team working with a mix of a teaching staff from different professions.
- o We explored this section further in quality theme two and following the further information provided we can see there is a robust approach to interprofessional education in place and plans for its development going forward.
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- • **Service users and carers (SU&Cs)** –
  - o The provider has discussed their Public Involvement in Education and Research partnership members or PIER members as (SU&Cs) having valuable experience which is an integral part of their teaching. They identify the challenge such as the last-minute cancellation of sessions. Additionally, discussions with learners can be challenging as situations can be emotionally charged. They also discussed how health and wellbeing advice is made available for learners across their intranet and also how they ask learners to complete feedback forms following session with SU&Cs.
  - o The provider reflects on how they have over 100 SU&Cs in their SU&C strategy and has been commended by external bodies on their approach. They also work with local, regional and national health, social care and community organisations, research bodies and Higher Education Institutes (HEIs) as a part of their SU&C strategy.
  - o We found the information supplied to be limited in their reflections on SU&Cs, specifically how SU&Cs can feedback on the programme(s). However, our service user and carer expert who also worked on this case drew more positive conclusions reflecting positively on the policies in place for SU&C involvement.
- • **Equality and diversity** –
  - o The provider has discussed how inclusivity is a major part of their 'BU2025' strategy and all programmes leads complete an inclusivity health check as part of their annual monitoring and enhancement review. Heads of Departments, marketing, programme leads, and student services are all working to advertise programmes to lead to a more diverse / inclusive recruitment of learners. Total number of Black, Asian and Minority Ethnic (BAME) learners has risen over the past few

years, but in line with an increase in the total cohort size. Higher numbers of BAME learners have also been recorded leaving the Provider more than non-BAME learners. Their 2022-23 intake suggests increase in BAME learners and they will continue to explore data and strategies for reducing the attainment gap. They have also appointed an inclusivity lead whose aim is creating a faculty inclusivity working group.

- o In line with national demand the provider is increasing learner numbers across all provisions. This has led to a challenge of securing placements for these new learners. Their director of employer engagement and head of practise education are in dialogue with placement partners to review, secure and if possible, increase places. Additionally, placement providers have been requesting more independent prescribing / supplementary prescribing learners year on year.
- o We note from our assessment that the provider appears to be performing reasonably well in this area. We did note that the way they have presented their findings and data was confusing and explored this further by requesting they presented the information in another format. The provider did respond with additional information and reflections.
- o We found from this review that appropriate data has been collected and provider has looked at BAME attainment, but this was not made clear from this submission or latter submission. The visitors note that it was difficult to clearly judge the approach taken here in their review and toto determine what work provider has conducted and how they intend to develop going forward. We are therefore noting this as an area to be developed and reflected upon for their next Performance Review.
- **Horizon scanning** –
  - o The provider has discussed their need to increase post-grad education in their paramedic and operating department practitioner provisions as updates by these groups is too few. Furthermore, PhD paramedics are too few and enhancement is required. They also discuss that apprenticeship provision is being planned for their allied health profession (AHP) programmes.
  - o They have identified the challenge of managing the conflict of consistency between different regulatory bodies and practitioners such as the occupational therapist prescribing rights. They also have plans in place to continue to develop routes to practise via the practise partnership working groups and will also continue to explore the market for CPD (continuing professional development) opportunities.
  - o We determined following our review that we required some further information to conclude our assessment in this area. The provider supplied additional information in the form of a narrative expansion regarding the low uptake on the postgraduate provision. Here they detailed that this is an area requiring further development and their strategic work groups are instrumental to this. They are in the process of reviewing their workforce and developmental needs and have introduced extra sessions on employability, future education and the career advantages of these programmes.

Outstanding issues for follow up: We note the way the provider has collected, analysed and responded to data around equality, diversity and inclusion was not clear. We recommend this as an area they develop further and present during their next Performance review. We are therefore referring this area to their next Performance review and are recommending a three-year monitoring period until the next review.

Quality theme: Thematic reflection

Findings of the assessment panel:
- **Impact of COVID-19** –
  - The provider has identified several challenges they contended with as a result of the pandemic. This includes placement capacity being reduced, demands changing constantly, the move to on-line teaching led to change in delivery, increased workload and stress. They identified concerns around staff and learner wellbeing, issues with placements, equipment, home-schooling, vaccinations etc. Financial challenges also presented themselves including a lower income from CPD courses, accommodation, use of premises, new building use of and delayed opening all having an effect.
  - They discussed fluctuations in placement capacity and ability of learners to undertake placements leading to delays in graduations and financial implications for learners. They have worked with HEE to design alternative placements and models that have significantly reduced these delays. This includes virtual placements, bespoke simulations, split and simulated placements.
  - They discussed developments in their approach to technology and IT with equipment upgrades enabling online working with Teams and Zoom lectures and seminars. PEER assessments have been conducted on online working and increased IT equipment has been made available for learners. Deadline extensions to allow flexibility to learners have been made and communications have increased with learners to provide additional support.
  - We explored this section further in quality theme three.
- **Use of technology: Changing learning, teaching and assessment methods** –
  - The provider has described the height of the pandemic as a challenging time. They discussed how the use of technology increased during this time and that their systems were not prepared for this with only 500 Zoom licenses. They discuss there was stress on staff to move to online teaching and associated changes to work-life balance. Technological solutions were available to support and help learners achieve programme outcomes during height of pandemic. Provider is now reverting to face-to-face teaching; they do reflect on how learners have requested hybrid learning remains in place but that this will not be happening with the return to traditional learning.

- o We explored this further via a quality activity raised in the section on the approach / impact of covid-19. This was therefore explored in quality theme three.
- **Apprenticeships** –
  - o The Provider has discussed the challenges apprenticeships have presented to them. This includes the employers they engage with as providers requesting smaller cohorts for apprenticeships (around six). This presents a financial challenge as a smaller cohort will mean less fees for the programme and also that apprentices pay less fees to begin with. This means that currently the provider has not identified viable way to run pre-reg apprenticeships. They are currently running their 'Advanced clinical practise' programme which is proving popular.
  - o Their focus is on apprenticeships already in approval not planning for pre-reg programmes. They have no plans for further developments in this area.
  - o We explored this further in the section on horizon scanning, this is demonstrated in quality theme three.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Quality theme: Sector body assessment reflection

Findings of the assessment panel:
- **Assessments against the UK Quality Code for Higher Education** –
  - o The Provider has put in place measures to keep them informed of any activity or changes by their external bodies via the CQC alert systems, collaboration with other HEI's and HEE. Provider identified times where placement providers had not kept them informed which can lead to a risk to quality. They have included expectations and actions within their protocol for Raising and Managing Concerns in Practice Placements. Provider also identified the challenge of increasing HEI's accessing the same placement sites and how this has driven the need to share intelligence around quality issues.
  - o We explored this section further via a quality activity as demonstrated in quality theme four.
- **Assessment of practice education providers by external bodies** –
  - o The provider has discussed the mechanisms they have in place to act on feedback, assessments, or intelligence they receive from a body regarding one of their providers. Such as, if a placement area has a negative CQC result, the head of practise education is altered. They will then determine if learners are in placement at that provider, and if so, will move them to another practise area. Faculty Deans are also alerted, and the head will also add this too to admissions, progression and employment group report
  - o They discuss that having a close working partnership with practise providers enables collaborative working on developments and continuation of student placements if extra places required (see above as to how this could come about).

- o We found that the provider has clearly demonstrated the mechanisms they have in place for identifying and responding to issues raised by the CQC. It seems clear how they would respond to a problem highlighted by the CQC, but this is limited. We would expect to see other mechanisms for identifying and responding to practice placement-based issues which were able to be responsive in a timely manner. We do not believe that this constitutes as risk to quality but are highlighting it as an area for future development. To be reviewed as part of their next Performance Review.
- **National Student Survey (NSS) outcomes** –
  - o The Provider has discussed how Covid has had an effect on their NSS score. They note that their ODP provision is not meeting threshold and OT provision has seen a satisfaction drop too. Their scores have dropped across the board however they do note that their faculty of health and social sciences have scored higher than rest of the Provider. Factors that they believe have contributed to the lower score also include staff not being able to return feedback from coursework on time.
  - o They have discussed some of the mitigations that have put in place to address this lower score, such as introducing more student / staff voice forums to explore issues with the vice-chancellor chairing a monthly forum. Bi-weekly Leadership team meeting will visit developments and feedback from learners. Additionally, the 'student's union' office has been moved to more visible setting and faculty teams are made more visible with a move to the new gateway building. The four weeks turn around for assessments is now three weeks. Online learning has reverted to face-to-face with an early analysis suggesting a positive reception. Study skills room now open for use when not used for teaching. Thus far this has been received well and early NSS results indicate a higher level of engagement.
  - o We explored this further via a quality activity as discussed in quality theme five.
- **Office for Students monitoring** –
  - o The provider discusses that OFS have reported no issues, additionally they state that their programmes continued to run with covid measures in place. They describe clear guidance is in place from OFS and how to report to OFS with no issues to date.
  - o We note from their submission and the information available that there appear to be no issues and we did not explore this area further, finding the provider to be performing well with no risks to quality identified.
- **Other professional regulators / professional bodies** –
  - o The provider has states that they have a good level of communication with regulators and bodies. There is in place a clear reporting system and a lead within the faculty to manage this relationship. They have identified a challenge relating to the availability of regulators for curriculum development and the timeframe needed for the regulator and the Provider's processes. They list the continued validation of all their programmes as the success they have seen in this period.
  - o We explored this further via a quality activity as detail in the section on quality theme six.

Risks identified which may impact on performance: None

Outstanding issues for follow up: As highlighted in 'Assessment of practice education providers by external bodies', the provider current system of using CQC assessments and review to inform their monitoring practises is useful and demonstrates a system in place for reviews. But is limited in scope, we do not believe this constitutes a risk to quality but can be diversified and developed ahead of their next performance Review. We are therefore referring this matter to their next performance review

Quality theme: Profession specific reflection

Findings of the assessment panel:
- **Curriculum development** –
    - The provider has described how they have an experienced team and that development is not an issue or an area they have encountered problems. They do reflect that placement capacity does limit the numbers of learners that can be accommodated, and that potential development of apprenticeship provision limited by this too. CPD provision is restricted due to staff workload. They continue to look for opportunities to expand provision. All current programmes are accommodated for with good staff availability.
    - We explored this area further via a quality activity, this case be seen in the section on quality theme
- **Development to reflect changes in professional body guidance** –
    - The provider has discussed how amendments were made to programmes and placements due to covid. Planned placements had to be altered and special arrangements made to allow learners to spend more time in practise to support health and social care services during pandemic. During this time increases were also made to simulated learning and the provider made advice available to learners regarding the temporary covid register. They worked with bodies to support learners understanding ongoing practise challenges and ensure they meet requirements to become registrants.
    - The provider acknowledges the need for up-to-date guidance for learners regarding placements and covid exposure. They have also reflected on things that went well, such as timely completion and registration and how they maintained their workforce, provided safe and effective care.
    - We explored this area further via a quality activity, as demonstrated in quality theme
- **Capacity of practice-based learning** –
    - The provider has described the annual meeting they hold with all their major placement providers, here they review, collaborate and agree learner placement capacity for next academic year. The provider shall also be taking part in the implementation of region wide placement capacity management system led by HEE. Objective of this is to provide clear placement requirements and capacity. The provider has a long-established process of engaging placement providers to

understand placement capacity and needs as demonstrated in their practise education strategy. This is complemented by HEE led activity that requires new Provider's to gain endorsement from placement providers.

- o As well as traditional placement providers, Provider is working with a range of non-NHS providers to support placement experience and preparation for registered practice in alternative settings. Additionally, using their existing relationships they have created pilot placements for paramedic learners within emergency department and cardiac services. They are also reviewing private hospital provision to provide increase placement experiences.
- o We found there to be is a clear forum present for the provider to engage with placement providers etc and ambition to explore new placement areas and third sector provision which is encouraging. We found the provider to be performing well in this area and have no concerns going forward

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Quality theme: Stakeholder feedback and actions

Findings of the assessment panel:
- **Learners** –
  - o The provider has discussed how annually programme leaders are expected to review NSS scoring and programme level feedback from learners and develop this into an action plan to be reviewed by the faculty level 'Academic and Enhancement Committee'. This includes objectives around BAME attainment, ensuring inclusion of a wider range of backgrounds and conduct a review of the learning materials to ensure representation. The provider has discussed that they ensure all assessments are marked fairly and consistently, audits conducted on all assessments and are creating marking templates that reflect generic marking guidelines. Working to provide clarity and consistency for staff and learners. They are committed to returning feedback in a timely manner and to include a range of feedback techniques quizzes, peer teaching, portfolio work and to ensure resources are more readily available and accessible.
  - o The provider is also working to engage further with learners and provide learners a greater opportunity to make the voice heard. They state that there are two opportunities a year to engage with learners and address their needs with the aim of improving their NSS scores. Provider wants to build upon recent good feedback they received to offer more support to learners, encourage participation in meetings, for staff to have open office days for learners to utilise and to provide clearer lines of communication between learners and staff.
  - o We did explore some of the themes raised here further via quality activities. These are demonstrated in quality themes two looking at

interprofessional learning and [five](#)looking at learner feedback and satisfaction scoring.

- **Practice placement educators** –
  - o The provider has discussed how they are gaining consistent feedback from educators to support personnel, identify opportunities for educators to feedback back them and plan routine contact and preparation sessions. They shall be resuming their annual conference for clinicians who support learners (paused due to pandemic) and that they have maintained ongoing alignment of processes to support clinicians who support learners.
  - o Additionally, they have made practise assessment documents available online. This has increased the opportunity to support collaboration between university staff and educators.
  - o We found the provider to have good mechanisms in place to support practice educators. Online placement documentation and remote support further supports clinical educators across a wide geographical area. We found there to be inadequate evidence of the use of practice educator feedback data to inform decision making at programme level. We do not feel that this constitutes a risk to the ongoing provision of the provider but is an area for further development for the provider and something we are referring to their next performance review.
- **External examiners** –
  - o The provider has discussed how External Examiners feedback at the end of the academic year and that their recent feedback has been about how the Provider feeds back toto learners. Specifically, they believe a consistent approach to assessment feedback would be the correct way to feedback on learners work with more annotations accurately detailing the feedback. Examiners also raised a question around module pass rates, where it seems learners can pass a module but fail one element of the module. The examiner asked to have they met all learning outcomes. The provider responded that this is being addressed and a more specific marking criteria rubric is being implemented.
  - o The Provider has also detailed some of the feedback the external examiners have presented on each of the programmes. In each of these, no risks or concerns were outlined. Instead, there is feedback indicating continued alignment with professional bodies guidance, evidence of learners supporting professions in the heigh of the pandemic and gaining useful experience during this. Additionally, feedback on teaching staff providing support to learners and learners continuing to meet learning out comes and develop the knowledge and skills
  - o We found the Provider to have demonstrated that they have an escalation mechanism for external examiner reports and associated actions in place. They provided adequate evidence of the use of external examiner feedback to inform decision making at programme levels. We identified no risks to quality and have no concerns going forward.

Risks identified which may impact on performance: None

Outstanding issues for follow up: We are referring the Provider's processes around the engagement and involvement of practise placement educators in their processes to their next Performance Review. Specifically, we would like to see how / if practise educator feedback is used in programme level decision making and for this to be further embedded into their processes. To be reviewed at their next Performance Review in three years.

Data and reflections

Findings of the assessment panel:

- o The visitors found this sections self-reflection to be generally unstructured and the narrative difficult to follow. It was difficult to draw reasonable conclusions on their performance. Completion data and classification of award appear are in-line with the sector and we note positively that historic grade inflation has reduced in the past year. Attrition rates are as expected for the sector and there is evidence of activity to increase applications from certain groups.
- o We explored the themes surrounding data and its presentation further via quality activity as detailed in. Following the expansion on this and in reflection of this section, we did not identify any areas the provider is failing or risks to standards being met, but instead that this has been reflected upon at a threshold level and data is in place for monitoring. We believe that the provider can reflect on this and develop their reflections for their next performance review. Furthermore, that the ongoing monitoring period should be set to three years.

Risks identified which may impact on performance: We identified no risks that will impact on the provider performance or quality that we need an immediate focused review. We instead are recommending a shorter review period of three years to allow the provider sufficient time to develop this area.

Outstanding issues for follow up: No areas to refer to another process, this is an area for development that the provider can work on before their next performance review. We acknowledge that that data is present and can be used for ongoing monitoring, but that the provider has not reflected deeply on this or engaged full in this process. Three years is sufficient to recognise that the data is present and for the provider to reflect upon this and further develop this area.

Section 5: Issues identified for further review

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

Referrals to next scheduled performance review

Equality Diversity and Inclusion data on BAME attainment

Summary of issue: We found from this review that appropriate data has been collected and provider had considered at BAME attainment, but this was not made

clear from this submission or further updates. Specifically, we can see data was collected and the provider has looked at this data, but they have not presented what they are planning going forward. We are therefore noting this as an area to be developed and reflected upon for their next Performance Review.

<u>Mechanisms for monitoring, identifying and responding to practice placement-based issues</u>

Summary of issue: We note from the Provider's reflections that they utilise information and feedback from the CQC in their monitoring processes of their placement providers. This demonstrates that a process is in place to conduct this monitoring, but we would expect the provider to have other mechanisms in place for this aside from CQC. We have not found this to constitute a risk to the quality of the Provider's programmes. We therefore recommend that the provider consider this and develop this area ahead of their next review

Section 6: Decision on performance review outcomes

Assessment panel recommendation

Based on the findings detailed in section 4, the visitors recommend to the Education and Training Committee that:
- The education provider's next engagement with the performance review process should be in the 2024-25 academic year
- The issues identified for referral through this review should be carried out in accordance with the details contained in section 5 of this report and will be reviewed in their next Performance Review.

Reason for this recommendation: We have found the provider to have completed this review and provide insight into how they are performing in the various areas of the thematic review. We also note that they have the required data points present to allow for continued monitoring through data. We have found the provider to have not engaged fully in this process, providing limited levels of information and reflections. We have explored various sections further using quality activities and through seeking further clarifications.

Following this and considering the initial evidence present in their submission, we have not found anything that would constitute an immediate risk to the quality of their provision or requiring referral to another process. We are therefore recommending an ongoing monitoring period of three years as this would allow the provider the necessary time to work on our feedback, develop their processes further and reflect more thoroughly as part of their next Performance Review.

Appendix 1 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
BSc (Hons) Occupational Therapy	FT (Full time)	Occupational therapist			01/09/2005
BSc (Hons) Operating Department Practice	FT (Full time)	Operating department practitioner			01/09/2019
BSc (Hons) Paramedic Science	FT (Full time)	Paramedic			01/09/2015
BSc (Hons) Physiotherapy	FT (Full time)	Physiotherapist			01/09/2005
Supplementary and Independent Prescribing for Allied Health Professionals	PT (Part time)			Supplementary prescribing; Independent prescribing	01/02/2019
Supplementary Prescribing for Allied Health Professionals (Non Medical Prescribing)	PT (Part time)			Supplementary prescribing	01/06/2006