

Approval process report – University of Brighton, BSc (Hons) Diagnostic Radiography, BSc (Hons) Diagnostic Radiography Degree Apprenticeship and MSc Diagnostic Radiography

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Who we are

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.

Our standards

We approve institutions 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 standards are divided into two levels based on their relevance to the institution and programme(s). The following considerations were made when splitting standards between institution and programme level:

- Where accountability best sits, with either the accountable person for the institution or programme
- How the standard is worded, with references to the education provider and processes often best sitting at the institution level, and references to the programme or profession often best sitting at the programme level
- We have preferred seeking assurance at the institution level, to fit with our intention to put the institution at the centre of our quality assurance model.

Our approach to quality assuring education

We are flexible, intelligent and data-led in our quality assurance of institution 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
- engage at the organisation, profession and programme levels to enhance our ability to assess the impact of risks and issues on HCPC standards

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

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

We take a staged approach to quality assurance, as we need to understand practices which will support delivery of all programmes within an institution, prior to assessing the programme level detail. The approval process is formed of two stages:

- Stage 1 – we assess to be assured 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 process we will initially review the proposal and then design our assessment based on the issues we find. As such the assessment methods will be different based on the issues which arise in each case.

Provider and programme institution context

The education provider is a Higher Education Institution (HEI) and currently delivers 12 HCPC-approved programmes across 5 professions. The provider's programmes are within the University's school of health sciences, this report focuses on the approval of Diagnostic Radiography programmes that would be within this school.

Programmes currently delivered by the provider cover the professions of: Chiropody/Podiatry, Occupational Therapy, Paramedic and Physiotherapy. A course is also in place delivering Independent and Supplementary prescribing qualification.

Previous monitoring outcomes:

- Last annual monitoring (during the legacy model) was conducted in 2020-21.
- The decision was on continued approval of programmes and the institution, this decision was reached on 27.04.2021.
- Approval was recommended with no conditions set.

Institution performance scoring information

Data Point	Bench- mark	Value	Score	Executive Comments
Total intended learner numbers compared to total enrolment numbers	190	70	-0.09	Data is only for this submission. Not for entire institution. Will impact the overall performance score. But the visitors did not raise any concerns regarding the performance score
Learners – Aggregation of percentage not continuing	7.6	9	-0.02	This is only slightly below the benchmark, within a normal range. Data is from 2018/19 year.
Graduates – Aggregation of percentage in employment / further study	94.6	92.6	-0.02	This is only slightly below the benchmark, within a normal range. Data is from 2016/18 therefore not entirely up to date
Teaching Excellence Framework (TEF) award	-	- Silver	-0.03	-Silver indicates room for improvement. Please bear in mind that this was awarded in 2017 and changes could have been made since then

National Student Survey (NSS) overall satisfaction score (Q27)	73.61	63	-0.16	This Data is from 2021 and is the most recent of our data. This also has the highest of the negative scores and something to possibly examine as part of stage 2
HCPC PR cycle length	n/a	n/a	n/a	Within new process. PR not yet conducted. Data not available
Overall score			0.67	Score is on the lower side, but it is worth bearing in mind that much of the data is not that recent. Please also consider that this is just to set a context and provide some background information. This is only to be considered as part of the overarching stage 2 submission and the variety of documents/clarification provided there. The visitors did not raise any concerns regarding this score. Concerns raised shown in the quality sections below.

The programmes considered

Programme name	BSC (HONS) Diagnostic Radiography
Mode of study	Full time
Profession	Radiographer
First intake	September 2022
Maximum learner cohort	28 (Total of 30 learners at BSc level when BSc Hons Diagnostic Radiography and BSc Hons Diagnostic Radiography Degree Apprentice learners are combined)
Intakes per year	1

Programme name	BSC (HONS) Diagnostic Radiography (Degree Apprenticeship)
Mode of study	Full time
Profession	Radiographer
First intake	September 2022
Maximum learner cohort	2 (Total of 30 learners at BSc level when BSc Hons Diagnostic Radiography and BSc Hons Diagnostic Radiography Degree Apprentice learners are combined)
Intakes per year	1

Programme name	MSC (HONS) Diagnostic Radiography
Mode of study	Full time
Profession	Radiographer
First intake	September 2023
Maximum learner cohort	5
Intakes per year	1

Quality assurance assessment

The education provider was asked to provide a self-reflective portfolio submission covering the following broad topics:

Broad portfolio area	Specific area addressed
Institution self-reflection	Partnership arrangements
	Resourcing, including financial stability
	Academic and placement quality
	Interprofessional education
	Equality and diversity
	Horizon scanning
Thematic reflection	Impact of COVID-19
	Apprenticeships in England (if applicable)
	Use of technology: Changing learning, teaching and assessment methods
Sector body assessment reflection	Reflection of how the IBMS uses the UK Quality Code for Higher Education
	External assessment of practice education providers (for relevant programmes only)
	National Student Survey (NSS) outcomes – how the provider use this metric to inform development
Profession specific reflection	Curriculum development
	Development to reflect changes in professional body guidance
Stakeholder feedback and actions	Service users and carers
	Learners (those engaging with an approved programme)
	Practice placement educators
	External examiners

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

We also considered intelligence from other bodies as follows:

- The Society and College of Radiographers (Professional Body)

We appointed the following panel to assess the above information:

Helen Best	Dean of Academic Strategy, Sheffield Hallam University
Shaaron Pratt	Head of Organisation and Wellbeing Cardiff University
Alistair Ward-Boughton-Leigh (Being mentored by Niall Gooch)	Education Officer

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 to take assurance that the education provider is performing well against our standards:

Initial review:

- The Approval case met the stage one standards and then proceeded to be assessed at stage two. The submission was received on 15.11.2022 and passed to the visitors for assessment.
- The visitors reviewed the evidence submitted and provided their feedback.
- The visitors were not satisfied with the evidence submitted as they felt not all standards could be shown to be met with the evidence submitted. We then proceeded to a Quality Activity to address the visitors outstanding concerns.

Quality activity

Further documentary evidence was deemed the most appropriate way to address the visitors outstanding concerns. The following standards were identified as not being met and the areas for concern were as follows:

Standards	Comments on documents or EP approach. Why do you consider the standard to be met or not?	Questions to submit to EP or other stakeholder
3.5 There must be regular and effective collaboration between the education provider and practice education providers.	<ul style="list-style-type: none"> • For all 3 programmes there is evidence that some conversations/ meetings have taken place, but the detail and frequency is not specified. The minutes of meetings held, date back to 2020. These are repeated in a 	Evidence of collaboration with practice education providers required. The latest evidence provided is over a year ago. The evidence needs to indicate how issues raised last year have been addressed in the submission to HCPC.

	<p>separate document, Employer engagement meeting minutes. No other evidence of meetings since then. The minutes raise issues with no clear evidence of resolution.</p> <ul style="list-style-type: none"> • UoB Placement provider Partnership Agreement (prior to 2021) – blank template • UoB_(2021 onwards) Placement Provider Partnership Agreement – blank template. 	<p>For each of the programmes, detail is required regarding the frequency of the previous and ongoing collaboration between the University and the practice-based education provider. The evidence that indicates how issues identified in the meetings are not presented. The visitors need to be assured that there is a process that will address concerns as a result of this collaborative process.</p>
<p>3.6 There must be an effective process in place to ensure the availability and capacity of practice-based learning for all learners.</p>	<ul style="list-style-type: none"> • UoB state that the process of securing clinical placement for this course is ongoing. There is no evidence of a journey towards availability. The CoR placement proforma has some information but I can't find anything to back these numbers up eg placement audit. • The Education provider has not presented sufficient detail regarding number and availability of placements for practice-based learning. • The EP has stated that placements are not formally agreed 	<ul style="list-style-type: none"> • Need evidence of the effectiveness of the process to ensure availability and capacity of placements. In assessing effectiveness we would need to see the processes being enacted. Only blank templates included. • Need evidence of collaboration with other HEIs who share the placements to further evidence an effective process has been put in place to ensure availability and capacity of placements.

	<p>and a process for doing so has not been presented.</p> <ul style="list-style-type: none"> • CoR placement proforma suggests that only one year of students are out at any one time. I don't know how that will work in practice with 3 programmes and 8 years of learners (once all years of all courses running). • Employer engagement meeting minutes. The dates of these meetings are 30th Sept 2020 and 16th Nov 2020. No other evidence of meetings since then. The minutes raise issues with no clear evidence of resolution. • UoB Radiography Placement Offer Form 22-23 – blank template • The UoB Placement provider Partnership Agreement (pre and post 2021) is a blank template with no information recorded. 	<ul style="list-style-type: none"> • How does the available capacity meet the planned recruitment numbers once all years of students are enrolled? Evidence that the process for securing practice-based learning for all students has been achieved. • Detail regarding availability and capacity is required. The templates provided need to be populated with the information. • The documentation states practice-based education would be shared with other Education Providers. The arrangements in place are required in order to confirm the number and availability of practice-based learning.
<p>3.9 There must be an adequate number of appropriately qualified and experienced staff</p>	<ul style="list-style-type: none"> • 0.8 WTE course leader – C Wallace. CV is very brief and does not indicate they are appropriately 	<ul style="list-style-type: none"> • The minimum qualification required of the MSc course leader should be MSc. Evidence how and

<p>in place to deliver an effective programme.</p>	<p>qualified as no teaching qualification; research experience; or Master's level qualification. The student handbook indicates that C Wallace will be CL for both BSc and MSc.</p> <ul style="list-style-type: none"> • C Wallace is also course leader for all 3 programmes which leaves little academic delivery capacity from the 0.8 WTE. • 0.2 WTE lecturer in post – P Dick. CV is very brief and does not indicate a teaching qualification; research experience; or a Masters level qualification. • The CV for V Ballard who appears to be on secondment is more appropriate, but there is no indication that they will be continuing as a permanent member of the course team. • Planned recruitment of a further 1 WTE lecturer/senior lecturer for Summer 2022 – this is late and doesn't give much time to induct the new member of staff or have them contribute to recruitment; teaching preparation etc. 	<p>when an individual with the appropriate qualifications has been recruited.</p> <ul style="list-style-type: none"> • The WTE allocation for the development and delivery of this course is light. How do you calculate the resource requirements for this new course? Is the £100k investment for development from HEE being used to support staffing? • Confirmation that sufficient WTE staff have been recruited with the appropriate qualifications to deliver and provide support for the 3 programmes. • How do you know that the new UoB staff are good academic administrators, lecturers, tutors, and supporters of student experience and needs? The CVs indicate very limited experience, especially in the context of there being BSc, MSc and App courses. • C Wallace is named as course leader for all 3 courses. How will their time be effectively managed
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	<ul style="list-style-type: none"> • Other academic professions within the school will support the delivery of non-profession specific content – unclear what elements are considered ‘non-profession specific’ or how much resource there is available to support or the experience of these people. • There is no information about those educating the Apps in the workplace, or framework of expectation of those undertaking this role. • The documentation states that a staff member has been on secondment (15 hours a week). It is unclear if this will continue. • 1 x WTE was due to be employed April 2021. Another Senior Lecturer August 2021 and a 0.5 WTE technical post. It is unclear if the above have been appointed. • The CVs of 3 staff have been provided but none of these have a MSc. One of these is the MSc course leader (C.Wallace). • There is no evidence that details where and how the non-profession specific 	<p>leaving adequate capacity to teach?</p> <ul style="list-style-type: none"> • What areas of the curriculum will be delivered by other academic professions from within the school? • How will you know that Apps are taught by appropriately qualified and experienced staff?
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	content will be delivered by other staff employed in the School.	
3.10 Subject areas must be delivered by educators with relevant specialist knowledge and expertise.	<ul style="list-style-type: none"> • As above • The staff identified have the relevant radiography related specialist knowledge to deliver radiography specific subjects but do not appear to possess relevant experience in education. • The educators currently employed are experienced subject specialists, but don't appear to be experienced educators in HE. Those employed will have to carry both the academic administrative burden as well as teaching delivery and placement visiting. • There is no information about those educating the Apps in the workplace, or framework of expectation of those undertaking this role. 	<p>As above</p> <p>Confirmation that sufficient WTE staff have been recruited with the appropriate qualifications to deliver and provide support for the 3 programmes.</p>
3.12 The resources to support learning in all settings must be effective and appropriate to the delivery of the programme, and must be accessible to all	<ul style="list-style-type: none"> • MyStudies VLE- fine. • There is no indication of the learning centre investment or the types of texts, journals and e-resources to deliver the course other 	<ul style="list-style-type: none"> • Details of the learning centre and the educational resources in place or planned to support student learning needs to be confirmed/evidenced.

<p>learners and educators.</p>	<p>than brief reading lists in each module descriptor. The text provided in the module descriptor reading lists need to be updated.</p> <ul style="list-style-type: none"> • There will be a clinical imaging suite but no estimated installation date. Virtual radiography software is mentioned. The documentation listed in the SETs mapping gives no further detail. Similarly, the specification of the suite is not detailed. • There is insufficient detail regarding the resources that are or will be made available to support learning of all students across all 3 programmes. • Resources available to Apps when learning in the workplace are not stated. 	<ul style="list-style-type: none"> • What educational resources have been put in place at UoB and in the workplace to support delivery of this programme and student learning? Eg library/learning centre resources; x-ray simulation suite; clinical simulation; software packages.
<p>5.5 There must be an adequate number of appropriately qualified and experienced staff involved in practice-based learning.</p>	<ul style="list-style-type: none"> • Nothing appears to be in place as yet. There is no detail provided here regarding numbers, location and qualifications of those involved in practice-based learning. • It is 'expected' that students will be allocated a specific 	<ul style="list-style-type: none"> • An audit of departments where practice-based learning is required. The audit should detail the numbers and qualifications of those involved in practice-based learning. The staff numbers should reflect the number of learners on placement / in

	<p>radiographer, but nothing confirmed.</p> <ul style="list-style-type: none"> • There are 3 programmes of study being approved here, all drawing on the same staff involved in practice learning. There are also students from other HEIs. 	<p>practice-based education.</p> <ul style="list-style-type: none"> • Provide evidence of the numbers of staff available at placement sites to support, supervise, assessed students?
<p>5.6 Practice educators must have relevant knowledge, skills and experience to support safe and effective learning and, unless other arrangements are appropriate, must be on the relevant part of the Register</p>	<ul style="list-style-type: none"> • UoB state not yet in place. 'Will be in place'. PE training is currently being created. No framework or plan provided. 	<ul style="list-style-type: none"> • Give an outline of the training that practice educators will receive in order to be considered to have relevant knowledge, skills and experience to support learners. • Provide evidence that practice educators are on the relevant part of the register.
<p>2.2 The selection and entry criteria must include appropriate academic and professional entry standards.</p>	<ul style="list-style-type: none"> • BSc – appropriate, standard entry with selection event/interview. Although no mention of observational experience required. • BSc – all shortlisted candidates are interviewed. • BSc is straightforward. Potential students are interviewed. • BSc – appropriate, standard entry with selection event/interview. Although no mention of observational experience required. 	<p>The admissions process across the 3 different courses differs.</p> <ul style="list-style-type: none"> • BSc, no observational experience necessary, whereas it is said to be an advantage for MSc. • BSc all short-listed candidates are interviewed, whereas MSc says an interview will be considered. • Apprenticeship – who is responsible for DBS and Occ Health, UoB or the employer?

	<ul style="list-style-type: none"> • BSc – all shortlisted candidates are interviewed. • MSc – states 2:2 or above but not in what sort of degree. Level 3 qualifications are stated rather than the requirements of the degree. Need clarity as usually fast track Masters routes assume a degree of knowledge and understanding pre-entry eg anatomy. • MSc – states that observation in a radiography setting would be an advantage. Unsure what is meant, and why they need it is required, but not for the BSc. • MSc – an interview ‘will be considered’ which is different to BSc. • Apprentices – documentation is contradictory re: DBS and Occ Health so the responsibility preadmissions are not clear. 	<ul style="list-style-type: none"> • What sort of first degrees are relevant to MSc application? What knowledge and experience are applicants expected to have for this shortened route to registration? • Clarity required regarding the qualifications necessary to apply for the MSc • Detail of the input required by the University and the employer when an apprentice is appointed. • Detail regarding the inoculations required and the implications if students refuse or are unable to have specified inoculations.
<p>4.5 Integration of theory and practice must be central to the programme.</p>	<ul style="list-style-type: none"> • For the apprenticeship programme several descriptors are used to describe the arrangements for practice-based learning such as students are supernumerary; 	<ul style="list-style-type: none"> • What are the arrangements for academic based and practice-based learning that will demonstrate that integration of theory and practice takes place?

	<p>work-based learning; workplace; practice placement. It is stated that at times learners spend 3 days in an academic environment. As a consequence of the above, the arrangements in place for integration of theory and practice is unclear.</p> <ul style="list-style-type: none"> • Academic hours and clinical hours are stated but with no explanation. Different hours for BSc, MSc and Apprenticeship (Prog specs) and different to the SETS mapping data p19. • App programme specs say 2400 academic hours for the course and elsewhere 405 academic hours per year (p6 and p13) • The App validation doc talks about block delivery with 3 days a week for each block. There is no similar explanation for the BSc or MSc. • 	<ul style="list-style-type: none"> • Identify the number of hours (or alternative descriptor) spent in practice based and academic settings. • Consistency in the terms used to describe practice-based learning is required or the differences in the terms used explained. • What is the structure of course delivery for each of the 3 courses. What is the academic and placement attendance pattern? How do the 3 courses inter-relate in their structure and attendance pattern? • Clarify the hours expected for academic and clinical for each course. How do these relate to academic and placement patterns? Where they differ, what is the justification? • Clarify the different types of learning for apprentices.
<p>4.6 The learning and teaching methods used must be appropriate to the effective delivery</p>	<ul style="list-style-type: none"> • There appears to be no specific strategy to integrate BSc, MSc and App learners within the learning and teaching 	<ul style="list-style-type: none"> • Explain how having all 3 course cohorts together for the academic component of the course is effective

<p>of the learning outcomes.</p>	<p>approaches. The App validation document (p2/3) talks about maximising resources and facilitating shared learning. Just because it works for podiatry doesn't mean it will for radiography. The App course handbook does not mention that students will learn alongside BSc and MSc students.</p> <ul style="list-style-type: none"> NSS overall satisfaction is 63%, which is based on existing provision with existing staff and resources. Not a solid foundation to set up a new course. 	<p>in delivering the learning outcomes.</p> <ul style="list-style-type: none"> What feedback is there to evidence the success of integrated delivery in the podiatry course? How has the school performed in the NSS over the last 3 years (as an indicator of effective delivery)?
<p>5.2 The structure, duration and range of practice-based learning must support the achievement of the learning outcomes and the standards of proficiency.</p>	<ul style="list-style-type: none"> There is no evidence provided that indicates the structure, duration and range of practice-based learning will support the achievement of learning outcomes and the Standards of Proficiency. 	<ul style="list-style-type: none"> Detail of the structure, duration and range of practice-based learning opportunities and how this support achievement of the learning outcomes and Standards of Proficiency.
<p>6.1 The assessment strategy and design must ensure that those who successfully complete the programme meet the standards of</p>	<ul style="list-style-type: none"> The difference between compulsory and mandatory modules is unclear. The programme specification for the 3 programmes state that compulsory modules must be 	<ul style="list-style-type: none"> What is the difference between compulsory and mandatory modules and how are the learning outcomes met if a module does not have to take and passed?

<p>proficiency for the relevant part of the Register.</p>	<p>taken while mandatory must be taken and passed. If a module does not have to be passed, then it cannot be confirmed that the standards of proficiency have been met.</p> <ul style="list-style-type: none"> • P12 of the BSc prog spec identifies Compulsory (C) and Mandatory (M) modules. C = must be taken <p>M = must be taken and passed. Does this mean the C modules do not have to be passed. If so, then the SOPs are not met.</p> <ul style="list-style-type: none"> • BSc students are allowed to take a formative mock exam, but it doesn't seem to be the same for Apprentices. 	<ul style="list-style-type: none"> • For the 'C' modules (Professional Practice - RA 404; 406;503;603;) how do you know students have met the SOPs if you are not requiring them to pass the assessment? • BSc students can take mock exams as formative assessment. Why do Apps not have the same opportunity?
<p>6.5 The assessment methods used must be appropriate to, and effective at, measuring the learning outcomes.</p>	<ul style="list-style-type: none"> • Assessment schedules and mode of assessment provided. A range of assessments are used all of which are standard. Students can choose from 2 different assessments in one module per year of study. No detailed briefs and related assessment criteria not provided. • The assessment methods are detailed for each module. Assessment schedules are also included. 	

The visitors also reserved the right to request a follow-up quality activity, preferably a virtual meeting if they required clarification or further information on any outstanding matters.

Outcome of the Quality Activity:

The visitors provided their feedback to the quality activity on 02.02.2022 and have expressed that they feel there are still gaps in the information they have received and that some standards are not yet met. This has been summarised below:

HCPC Standard 3.9. There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

Q2:	Comments/Response
<p>Evidence to show how Course leader will be able to run all three programmes. Concern that there is not the capacity for CL to run and deliver on all three courses</p> <ul style="list-style-type: none"> Response but not sure threshold met. P Dick’s CV remains weak. 	<ul style="list-style-type: none"> It is anticipated that at the beginning of the course the Course Leader will have capacity to run all three programmes due to the small number of students in the initial cohort. As the cohort’s numbers increase and subsequent cohorts commence, it is the intention that the MSc and Apprentice programme will have different Course Leaders. Current Course Leader has a buddy Course Leader support and is further supported by the subject lead and the Associate Dean for Education and Student Experience.
<p>Clearer comprehensive workforce plan is required including information about seconded staff becoming permanent members of the staffing establishment. And information regarding non-profession specific staff members and their capacity to support</p> <ul style="list-style-type: none"> Partial response. No information on non-profession specific staff members and their capacity to support 	<ul style="list-style-type: none"> The workforce plan would be to add additional WTE staff every year as the intake of students grow. Recruitment of 1.0 WTE will be in place when the course commences in 2022, recruitment will start in spring to ensure that the new staff are inducted and supported. Further recruitment will continue at the ratio of 1.0 WTE per year until 3 BSc cohorts are in place.

	<ul style="list-style-type: none"> • It is planned that current seconded and part time staff will also increase their hours at the start of the programme to make a 2.5 WTE at the commencement of the first cohort (1.0 WTE recruitment and current staff making up 1.5 WTE permanent staff). • Funding is secured for this growth in staffing.
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HCPC Standard 3.10 Subject areas must be delivered by educators with relevant specialist knowledge and expertise.

No further response for 3.10

No information on non-profession specific staff members and their capacity to support

HCPC Standard 3.12 The resources to support learning in all settings must be effective and appropriate to the delivery of the programme and must be accessible to all learners and educators.

Q1:	Comments/Response
<p>More detail required on the learning centre, the texts, journals, virtual radiography resources in place, radiography suite etc.</p> <ul style="list-style-type: none"> • No detail provided. Detail of resources required; Book lists, Journal lists etc 	<p>The University library and online catalogue holds a number of Radiography resources such as:</p> <ul style="list-style-type: none"> • books • ebooks • journals • ejournals <p>There will also be a wide range of articles available on the topic via our health database subscriptions.</p> <p>Library staff on the Falmer campus will also look at additional resources which may be required, this will be done by looking through reading lists produced academics and/or discussions with the course team</p> <ul style="list-style-type: none"> • There will also be a Radiography suite installed ready for September. • A VR package will be used in teaching as well as an online image database.
Q5:	
<p>Resource plan (similar to workforce plan issues) required on what physical and digital resource is available</p>	<p>The new fully refurbished radiography suite will be completed by September 2022 and will contain a decommissioned X-ray machine, table for practicing patient positioning and the taking of X-rays and a</p>

<ul style="list-style-type: none"> • Is the X-ray machine de-commissioned or able to produce X-rays? Not clear. • Purchasing phantoms in 12 months is too late for the first intake. 	<p>teaching area/workstation for image viewing.</p> <p>We are purchasing Medspace VR software: https://www.medspacevr.com/modules/radiography-suite/xr/</p> <p>There will be an online image database to support learning and teaching.</p> <p>There is an intention to purchase a portable X-Ray machine and a phantom for imaging in the next 12 months</p> <p>We are purchasing two Anatomage tables for the education of anatomy, arriving in March 2022.</p> <p>We have a number of manikins used for simulation. These will be used by Radiography for the management of the deteriorating patient, and anaphylaxis.</p>
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HCP Standard 6.1 The assessment strategy and design must ensure that those who successfully complete the programme meet the standards of proficiency for the relevant part of the Register.

Q1:	Comments/Response
<p>Difference between compulsory/mandatory modules</p> <ul style="list-style-type: none"> • Is it right that a student can fail a module and still have the knowledge and understanding to practice safely with radiation? 	<p>Mandatory modules must be completed, and the assessment passed. Compulsory modules must be completed but in the case of a borderline 'fail', compensation may be awarded at the discretion of the examination board in line with GEAR. SQSC advised that we should have one compulsory module per year.</p>
Q2:	
<p>For RA404/406/503/603 how do you know the students have met the SOPs if not required to pass assessment?</p> <ul style="list-style-type: none"> • Clarification: Can these modules be compensated? • Or is this not possible because it's pass/fail? 	<p>The Professional Practice modules were compulsory rather than mandatory as all the learning outcomes will be evidenced by the PAD in clinical practice.</p>

Outstanding Questions:

3.9 – the response partially fulfils the SET:

- The CVs provided do not illustrate the strength and depth of educational experience required to deliver BSc and MSc level courses. Clarification/additional information required to show that staff in place are sufficiently qualified and experienced

- Q4 was not fully answered. We would need to see how the non-profession specific staff members are supporting delivery of the programme and supporting the radiography lecturers who are new to HE, along with evidence that they have capacity to do this. Clarification/additional information required to show that staff in place have sufficient capacity to run programmes

3.10 – as 3.9.

3.12:

- We wish to see details of radiography specific books and journals ordered or already in the library, lists of books/journals etc.

Quality Activity 2:

A second quality activity was arranged. This included a range of additional documents to be submitted prior to a virtual meeting between the visitors and the provider.

In this meeting the outstanding standards of 3.9,3.10,3.12 and 6.1 were discussed relating to staffing, resources, and the structure of the program. The breakdown of the discussion and whether the standards were met following the meeting can be seen below:

APP BRI DRAD 2020-21. Quality Activity 2. Meeting held between visitors and Brighton University 24.02.2022

Standard being addresses	Question to Provider	Met after meeting	Reflection from Meeting
3.9/3.10 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme. Subject areas must be delivered by educators with relevant specialist knowledge and expertise.	3.9 – The response partially fulfils the SET. The CV's provided do not illustrate the strength and depth of educational experience required to deliver BSc and MSc level courses. Q4 was not fully answered. It needs to be demonstrated how the non-profession specific staff members are supporting delivery of the programme and supporting the radiography lecturers who are new to HE, along with evidence that they have capacity to do this. 3.10 – as 3.9	Y	3.9/3.10 which relate to staffing. Additional CV's had been by the EP prior to the meeting, the visitors were able to discuss staffing with the EP. Further documentation was provided in the meeting which detailed the expertise of those teaching on the programme from professions other than radiography and which modules they would contribute to. EP mentioned recruitment is underway for an additional lecturer from an RA background. A further 1 x WTE with a diagnostic radiography

			background will be recruited each of the following two years of the programme. EP also shared an additional spreadsheet document showing staffing levels and how workload would be covered. Visitors were satisfied that these standards were now met.
<p>3.12 The resources to support learning in all settings must be effective and appropriate to the delivery of the programme and must be accessible to all learners and educators.</p>	<p>3.12 – Demonstration of details of radiography specific books and journals ordered or already in the library. The explanation talks about a de-commissioned X-ray machine and also that it is able to produce X-rays. De-commissioned usually means that it is not able to produce X-rays. Clarity please because this indicates what can and can't be done to support student learning. They have stated that they are not purchasing X-ray phantoms for 12 months. These are core accessories to go with the X-ray machine (assuming it can produce X-rays) and without, simulated learning is very limited.</p> <p>3.12 could be partially covered in a meeting but would need further documentary evidence in the form of book lists and evidence of purchase for the library. The module outlines had some dated texts in so they want to be assured that some proper thought has gone into learning resources.</p>	Y	<p>3.12 was also discussed in relation to resources. EP explained that they had purchased a decommissioned x-ray machine to allow simulated radiographic positioning lessons, with a focus on health and safety and patient positioning. They have also ordered a mobile x-ray machine that does produce x-rays and imaging of phantoms will be undertaken. Additionally, they are planning to order VR technology to assist in the e-learning around radiography. A List of library resources was also sent prior to the meeting. The EP stated further library resources were planned to meet the requirements of Years 2 and 3 of the programmes. With this in mind, as well as the discussions in the meeting the visitors felt that this standard is now met.</p>

<p>6.1</p> <p>The assessment strategy and design must ensure that those who successfully complete the programme meet the standards of proficiency for the relevant part of the Register.</p>	<p>6.1 – further clarification needed. Is 404 mandatory or compulsory? Module descriptor states mandatory. Programme Specification states compulsory. Is it possible to meet the SOPs where a ‘compensated fail’ is allowed in a module e.g., if the module includes knowledge and understanding to practice safely with radiation? For RA404/406/503/603 how do you know the students have met the SOPs if not required to achieve a pass mark? Can these modules be compensated? Or is this not possible because it’s pass/fail?</p>	<p>Y</p>	<p>6.1 Was also discussed around the difference between compulsory/mandatory modules and how this would work in practise and what the level/percentage that would need to be gained around a ‘compensated fail’ at course level. Advised for MSc that in order to compensate a mark of 40% had to be achieved and BSc is 30%. However EP stated in practise it is rare to compensate at course level and would only be done if the learning outcomes of the failed module had been passed in another module. Any potential cases would be looked at on an individual basis and in practice they would only look at cases which were borderline eg. 38% Visitors were satisfied that this standard is now met - previously the situation was not clear about particular modules being compulsory or mandatory.</p>
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Quality summary: Following the second quality activity the visitors now feel that the standards have been met at the threshold level. The meeting allowed the visitors to ask questions to the provider directly and explore many of the areas they previously felt were not addressed. Before and during the meeting the provider also provided additional documentation that was reviewed by the visitors and taken into consideration as part of their assessment. Following this meeting they were now confident that the standards were met.

Quality summary:

Portfolio area	How was this area met?
Partnership arrangements	Information provided through the portfolio showed the IBMS has effective partnerships with all education providers delivering IBMS accredited programmes. These partnership arrangements are crucial to the effective management of quality across the provider’s accreditation portfolio, so the visitors are satisfied that the provider is able to ensure the quality of provision linked to this portfolio area.
Resourcing, including financial stability	It was noted within the portfolio that IBMS’ regular monitoring and reporting to relevant committees and councils demonstrated sustainability of HCPC approved programmes, which was appropriate and rigorous. Therefore, we were satisfied that the provider is appropriately resourced and is financially stable to deliver / accredit HCPC-approved education provision.

Recommendation:

The visitors made the following recommendations to the Education and Training Committee:

- The institution and its programmes should be approved with no conditions.

Decision

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](#).

Decision on approval

- We will record the decision of the Education and Training Committee here following their meeting on 29 April 2022.
- Following a documentary review the ETC have agreed to the visitors approval recommendation.