

Visitors' report

Name of education provider	Scottish Ambulance Academy and Glasgow Caledonian University
Validating body	Glasgow Caledonia University
Programme name	DipHE Paramedic Practice
Mode of delivery	Full time
Relevant part of the HCPC Register	Paramedic
Date of visit	6 – 7 April 2016

Contents

Executive summary	2
Introduction.....	3
Visit details	3
Sources of evidence	4
Recommended outcome	5
Conditions.....	6

Executive summary

The Health and Care Professions Council (HCPC) approve educational programmes in the UK which health and care professionals must complete before they can apply to be registered with us. We are a statutory regulator and our main aim is to protect the public. We currently regulate 16 professions. All of these professions have at least one professional title which is protected by law. This means that anyone using the title 'paramedic' be registered with us. The HCPC keep a register of health and care professionals who meet our standards for their training, professional skills, behaviour and health.

The visitors' report which follows outlines the recommended outcome made by the visitors on the approval of the programme. The education provider has until 1 June 2016 to provide observations on this report. This is independent of meeting any conditions.

The report and any observations received will be considered by the Education and Training Committee (Committee) on 7 July 2016. At that meeting, the Committee may accept, reject or vary the visitors' recommended outcomes, including the recommended conditions or recommendations.

If the visitors' recommended outcomes are accepted by the Committee, the visitors have made a recommendation that a further visit is required to enable appropriate scrutiny of the response to the conditions to be undertaken. The visitors consider that the nature of the proposed conditions mean that a further visit would be the most appropriate method of scrutinising any further evidence provided, enabling further discussions to be conducted with key stakeholders of the programme. If the Committee makes the decision to require a further visit, the education provider will need to redraft and resubmit documentation at an appropriate time before the date of the visit. The visit, if required, will be considered the education provider's first attempt to meet any conditions imposed. If, after the further visit, there are any conditions, the education provider will be given a further opportunity to submit documentation in response to those outstanding conditions.

Introduction

The HCPC visited the programme at the education provider to consider major changes proposed to the programme. The major change affected the following standards - programme admissions, programme management and resources, curriculum and practice placements. The programme was already approved by the HCPC and this visit assessed whether the programme continued to meet the standards of education and training (SETs) and continued to ensure that those who complete the programme meet the standards of proficiency (SOPs) for their part of the Register.

This visit was part of a joint event. The education provider and awarding body reviewed the programme. The education provider and the HCPC formed a joint panel, with an independent chair and secretary, supplied by the education provider. Whilst the joint panel participated in collaborative scrutiny of the programme and dialogue throughout the visit; this report covers the HCPC's recommendations on the programme only. As an independent regulatory body, the HCPC's recommended outcome is independent and impartial and based solely on the HCPC's standards. A separate report, produced by the education provider outlines their decisions on the programme's status.

Visit details

Name and role of HCPC visitors	Paul Bates (Paramedic) Mark Nevins (Paramedic) Susanne Roff (Lay visitor)
HCPC executive officer (in attendance)	Amal Hussein
HCPC observer	Jo Mussen
Proposed student numbers	200 per year
Effective date that programme approval reconfirmed from	September 2016
Chair	Martin Cullen (Glasgow Caledonia University)
Secretary	Morven Gillies (Glasgow Caledonia University)
Members of the joint panel	Iain Muego (Internal Panel Member) Ken Street (External Panel Member) Paul Lewis (External Panel Member)

Sources of evidence

Prior to the visit the HCPC reviewed the documentation detailed below, sent by the education provider:

	Yes	No	N/A
Programme specification	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Descriptions of the modules	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the education provider has met the SETs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the education provider has met the SOPs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Practice placement handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Curriculum vitae for relevant staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
External examiners' reports from the last two years	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

During the visit the HCPC saw the following groups or facilities:

	Yes	No	N/A
Senior managers of the education provider with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Programme team	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Placements providers and educators / mentors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Service users and carers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learning resources	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Specialist teaching accommodation (eg specialist laboratories and teaching rooms)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Recommended outcome

To recommend a programme for approval, the visitors must be satisfied that the programme meets all of the standards of education and training (SETs) and that those who complete the programme meet our standards of proficiency (SOPs) for the relevant part of the Register.

The visitors agreed to recommend to the Education and Training Committee that:

1. a number of conditions are set on the programme, all of which must be met before the programme can be approved; and
2. that a further visit is required to make an appropriate assessment of the response to the conditions.

Due to the level of evidence required, the visitors also recommend that any further visit would need to focus on all of the SETs. This would include meetings with the programme team, the senior team, students, and practice placement providers and practice placement educators. The Committee is also asked to make a decision on the timescale for any further visit.

The visitors agreed that 23 of the SETs have been met and that conditions should be set on the remaining 35 SETs.

Conditions are requirements that the education provider must meet before the programme can be approved. Conditions are set when certain standards of education and training have not been met or there is insufficient evidence of the standard being met.

The visitors did not set any recommendations for the programme.

Recommendations are observations on the programme or education provider which do not need to be met before the programme can be approved. Recommendations are made to encourage further enhancements to the programme, normally when it is felt that the particular standard of education and training has been met at, or just above the threshold level.

Conditions

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

Condition: Further evidence must be provided to articulate how the education provider receives the information they need to make an informed choice about making offers to applicants who wish to take up a place on the programme.

Reason: From the evidence provided prior to the visit the visitors were made aware of the responsibilities of both Scottish Ambulance Academy (SAA) and Glasgow Caledonian University (GCU) in respect of the effective delivery of this programme. They were also made aware that SAA will design, deliver and assess the programme and that GCU will award and quality assure the programme. However, in discussions with the senior team at the visit, there was a lack of clarity over the roles of both parties. The visitors were provided with a number of varying statements during the visit which provided different interpretations of how the partner organisations would work together to operate the programme. For instance the visitors were informed at one point that SAA and GCU would jointly act as the education provide while at a later time they were told that SAA will be the sole party responsible for all aspect of the programme excluding quality assurance. As such the visitors were unclear as to who would act as education provider or how the partnership between the organisations would be managed. Because of this, and from the evidence provided, the visitors were unclear as to who maintains overall responsibility for the admissions procedure. As such the visitors could not determine how the process of assessing potential applicant's suitability for the programme would be managed and what would happen if there was disagreement about a potential applicants' suitability for the programme. The visitors therefore require further evidence of how the process for assessing applicants' suitability will be managed, what role each organisation has in this and how this information will communicated to applicants.

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

Condition: The education provider is required to provide further evidence of the information about the programme that is made available to potential applicants.

Reason: Prior to the visit, the visitors considered documentation which detailed a two year Diploma of Higher Education in Paramedic Science programme, which is delivered by SAA, who act as the education provider and GCU who accredit the programme. During discussions with the senior team, the visitors learnt that the programme duration will change from a two year programme to a one year programme. From these discussions, the visitors understood the intention is to move the educational content from the first year, as described in the documentation, and have this content delivered as a General National Vocational Qualification (GNVQ). This GNVQ would then be a requirement that applicant would need to achieve before they gain a place on this programme. The visitors were also made aware that the GNVQ will be delivered by the Scottish Ambulance Service at training centres around the country, not at GCU. As part of these changes the visitors were informed that the programme will mirror closely the

curriculum of the second year that was described in the documentation provided. However, as the programme described was not detailed in the documentation provided the visitors were unclear how the admissions procedures would operate. In particular, the visitors were unsure from the discussions at what point the admission procedures will begin as applicants will complete one year GNVQ training with the Scottish Ambulance Service before accessing this programme. This will then be credited by GCU (through the accreditation of prior learning (APL) process) allowing students to gain accreditation for this learning and access this programme. The visitors, therefore, require documentation detailing the admissions procedures for the Diploma of Higher Education in Paramedic Science and at what point an applicant would go through this process. This evidence should detail how the process ensures that the education provider and the applicant can have the necessary information to make an informed choice about whether to take up or make an offer of a place on a programme. This condition, and request for evidence is linked to other conditions.

2.2 The admissions procedures must apply selection and entry criteria, including evidence of a good command of reading, writing and spoken English.

Condition: The education provider must provide further information about the admissions procedure for this programme and how it ensures that successful applicants meet the education provider's requirements regarding any language requirements

Reason: In discussions at the visit the visitors heard contradictory statements as to which organisation would take responsibility for which parts of the programme and as such were unclear as to who is the education provider for this programme. However, as part of the information provided prior to the visit the visitors were presented with criteria that potential applicants had to successfully meet to become employed as student ambulance paramedics for Scottish Ambulance Service (SAS). From the documentation, it was clear that SAS will manage the selection and entry criteria for employment of these student paramedics. However, from the evidence provided it is unclear how these student paramedics will apply for this programme, and when they will be expected to do this, and what part the selection by SAS will play in the admissions process. As such the visitors could not determine how the education provider will retain overall responsibility for the admissions procedures. They were therefore unclear as to how the education provider will ensure that selection and entry criteria, including evidence of a good command of reading, writing and spoken English is applied to all applicants. Therefore the education provider must provide further evidence regarding the admissions processes and procedures for this programme to demonstrate how all successful applicants meet all of the requirements, including evidence of a good command of reading, writing and spoken English.

2.3 The admissions procedures must apply selection and entry criteria, including criminal convictions checks.

Condition: The education provider must provide further information about the admissions procedure to detail how it ensures that successful applicants meet the education provider's requirements regarding Disclosure and Barring Service checks.

Reason: In discussions at the visit the visitors heard contradictory statements as to which organisation would take responsibility for which parts of the programme and as such were unclear as to who is the education provider for this programme. However, from the information provided in the documentation, the visitors were clear that all

applicants must undergo a Disclosure and Barring Service (DBS) check as part of the admissions process to become employed with SAS and become a student paramedic. In discussions at the visit, it was clear that SAS will be responsible for administering DBS checks, and would share the outcome with the education provider. However, from the evidence provided it is unclear how these student paramedics will apply for this programme, when they will be expected to do this, and what part the selection by SAS will play in the admissions process. As such, the visitors could not determine how the procedures of SAS will work with those of the education provider, to ensure that any issues that may arise will be dealt with consistently. In particular the visitors could not determine who makes the final decision about accepting a student onto this programme if any issue does arise as the information provided at the visit articulated that applicants would have already been employed by SAS. Therefore the visitors require further information about the DBS checks that are applied at the point of admission for this programme. In particular the visitors require further evidence of how SAS's processes would work with the education provider's process, and clarification of who makes the final decision about accepting an applicant onto the programme if an issue arises.

2.4 The admissions procedures must apply selection and entry criteria, including compliance with any health requirements.

Condition: The education provider must provide further information about the admissions procedure to detail how it ensures that successful applicants meet the education provider's health requirements.

Reason: In discussions at the visit the visitors heard contradictory statements as to which organisation would take responsibility for which parts of the programme and as such were unclear as to who is the education provider for this programme. However, from the information provided in the documentation, the visitors were clear that all applicants must complete a health declaration as part of the admissions to become employed with SAS and become a student paramedic. From the discussions and the documentation, it was clear that SAS will be responsible for administering the health declaration, and would share the outcomes with the education provider. However, from the evidence provided it is unclear how these student paramedics will apply for this programme, when they will be expected to do this, and what part the selection by SAS will play in the admissions process. As such, the visitors could not determine how the education provider's own procedures to apply health checks, will work with SAS. Nor could the visitors determine how the education provider will identify what adjustments could or could not reasonably be made if health conditions were disclosed, and how any issues that may arise would be dealt with consistently. In particular the visitors could not determine who makes the final decision about accepting a student onto the programme if adjustments would be required. Therefore the visitors require further information about how the health declarations that are applied at the point of admission to this programme are used by the education provider to determine if a student can take up a place on this programme. In particular the visitors require further evidence of how SAS's processes work with the education provider's process and clarification of who makes the final decision about accepting an applicant onto the programme if adjustments are required.

2.5 The admissions procedures must apply selection and entry criteria, including appropriate academic and / or professional entry standards.

Condition: The education provider must provide further information about the admissions procedure for this programme and how it ensures that successful applicants meet appropriate academic and / or professional entry standards.

Reason: In discussions at the visit the visitors heard contradictory statements as to which organisation would take responsibility for which parts of the programme and as such were unclear as to who is the education provider for this programme. However, as part of the documentation provided prior to the visit, the visitors were presented with SAS selection criteria for employment with the trust and in discussion at the visit clarified that SAS will manage the academic and professional selection and entry criteria for employment. However, from the evidence provided it is unclear how these student paramedics will apply for this programme, when they will be expected to do this, and what part the selection by SAS will play in the admissions process. Therefore the visitors could not determine how the education provider will ensure that applicants meet all of the required academic and / or professional entry standards in order to offer a place on the programme. As such, the visitors were unsure how the education provider, working with the employer, could apply selection and entry criteria for the programme, including appropriate academic and / or professional entry standards. Therefore the education provider must provide further information about the admissions procedure for this programme and how it ensures that all successful applicants meet the necessary requirements, including appropriate academic and / or professional entry standards.

2.6 The admissions procedures must apply selection and entry criteria, including accreditation of prior (experiential) learning and other inclusion mechanisms.

Condition: The education provider must provide further evidence of how the admissions procedure for this programme applies selection and entry criteria including accreditation of prior (experiential) learning (AP(E)L) and other inclusion mechanisms.

Reason: In discussions at the visit the visitors heard contradictory statements as to which organisation would take responsibility for which parts of the programme and as such were unclear as to who is the education provider for this programme. However, as part of the documentation provided prior to the visit, the visitors were presented with GCU AP(E)L policy which would be used by GCU to accredit applicant prior learning before they gain entry to this programme. During discussions it was clear that potential applicants to this programme will be employed by SAS as student paramedics prior to applying to this programme and will be expected to undertake a GNVQ while acting in this role. However, from the evidence provided it is unclear how these student paramedics will apply for this programme, when they will be expected to do this, and what part the selection by SAS will play in the admissions process. The visitors were therefore unable to determine who was responsible for AP(E)L policy, and who ensures that AP(E)L and other inclusion mechanisms are being applied to ensure that relevant applicants are offered places in the programme. As such the education provider must provide further information about the admissions procedure for this programme and how it, as the education provider, ensures that AP(E)L and other inclusion mechanisms are applied consistently to all applicants.

2.6 The admissions procedures must apply selection and entry criteria, including accreditation of prior (experiential) learning and other inclusion mechanisms.

Condition: The education provider must provide further information about the admissions procedure for this programme and how it ensures that it applies selection

and entry criteria including accreditation of prior (experiential) learning (AP(E)L) and other inclusion mechanisms.

Reason: Prior to the visit, the documentation submitted indicated that the programme will consist of a two year structure, level 4 at year one and level 5 at year two. The visitors understood that students will be able to exit the programme at level 4 with certificate and re-enter the programme at level 5. From the documentation, the visitors noted that ambulance technicians who have undertaken an IHCD qualification can be admitted onto the programme in accordance with GCU's AP(E)L policy to study the second year of the programme. However, during discussions with the senior team, the visitors learnt that this programmes duration has changed from a two year programme to a one year programme, which will be delivered at level 5. From these discussions, the visitors understood the intention is to remove year 1 (level 4) of the programme that is currently being delivered at GCU and convert the level 4 into a GNVQ programme that will be delivered offsite at SAS training centres. The visitors understood that the level 5 of the programme will be kept as close as possible to the original programme proposed in the documentation. They also understood that in order for the GNVQ to count towards this programme the GNVQ programme needs to be accredited by the GCU. In further discussion it was clarified that to manage this all applicants would be individually assessed for AP(E)L onto the programme through a mapping exercise.

However, the visitors were not provided with any evidence of the mapping exercise, how it would fit with the current GCU AP(E)L policy and which organisation would be responsible for undertaking this assessment. As such, they were unable to get a clear understanding of how potential students' prior learning would be mapped against the necessary learning and achievement outcomes that would be needed to gain entry to the programme at level 5. In particular the visitors could not identify how this mapping could ensure that potential students would have undertaken and been assessed against the equivalent of the first year of an undergraduate degree programme.

From the evidence provided in the documentation and in discussions at the visit, the visitors were therefore unable to see how the AP(E)L process would be implemented to ensure that applicants who have undertaken the GNVQ would have undertaken training equivalent to that of a first year of learning at GCU. In particular the visitors could not identify how the education provider could ensure that anyone admitted to the programme through this process would have met the required learning outcomes. Therefore the visitors require further evidence of the AP(E)L process that will be implemented by the education provider. This evidence should demonstrate how the education provider will ensure that prospective students will be consistently judged to determine how they have met the required learning outcomes for successful application to this programme, equivalent to those of a first year undergraduate degree.

3.2 The programme must be effectively managed.

Condition: The education provider must provide further evidence of the programme management structure, highlighting the lines of responsibility of partner organisations in the management of the programme.

Reason: Prior to the visit, the visitors were provided with a contract between GCU and SAS. However, from the information provided, it was not clear which party is responsible for which aspects of the programme management and who would be delivering specific areas of the programme. In discussions at the visit with the senior

team, there was a lack of clarity over who the education provider was for this programme and as such, who had overall responsibility for the programme. This meant that the visitors could not be provided with a clear indication of who was responsible for what areas of the programme. The visitors therefore require further information regarding who the education provider is, the structure for management of the programme, the lines of responsibility of the teaching team, and how this is conveyed to students to ensure that they can refer to this information, and have a clear understanding regarding which members of the team will deliver each area of the programme. In this way the visitors can determine how the management of the programme will work in practice.

3.2 The programme must be effectively managed.

Condition: The education provider must provide further evidence as to the how the roles and responsibilities of the partner organisations will be governed to ensure that any issues with students progression and achievement are dealt with.

Reason: From the evidence provided prior to the visit the visitors were made aware of the responsibilities of both SAA and GCU in respect of the effective delivery of this programme. They were also made aware that SAA will design, deliver and assess the programme and that GCU will award and quality assurance the programme. However, during discussions with the senior team, the visitors noted that the arrangement described in the documentation did not mirror what was happening in reality as such, there was a lack of clarity over who the education provider was for this programme and who had overall responsibility for the programme. Due to the lack of clarity in the evidence provided the visitors were unclear how the management systems described will ensure that the partners organisations can effectively exchange information and ensure that all areas of responsibility are being fulfilled to effectively deliver the programme. In particular the visitors were unclear as to how the arrangements in place will allow any issues in either the academic or practice placement settings regarding resourcing or student' progression to be raised effectively and dealt with. They therefore were unclear how the education provider would be able to determine how student had progressed on the programme and determine if they could successfully graduate. As such the visitors were unclear, from the evidence provided, how the arrangements in place allow the education provider to manage the programme effectively and to deal with issues regarding resourcing or student progression. The visitors therefore require further evidence of the management structures that are in place to ensure that any issues that arise as the programme is delivered will be dealt with quickly and effectively.

3.3 The programme must have regular monitoring and evaluation systems in place.

Condition: The education provider must provide further evidence of the regular monitoring and evaluation systems in place for this programme.

Reason: From the documentation provided prior to the visit, the visitors could not determine what regular monitoring and evaluation systems are in place for this programme. During the visit, the visitors discussed the monitoring and evaluation of several aspects of the programme with the programme team and how feedback will be managed between SAA and GCU. However from the evidence provided in the documentation and in the discussions the visitors were unclear about several aspects of the feedback systems. In particular, the visitors could not determine how student

feedback will be considered by the programme team, how any changes initiated by this feedback will be implemented, and how any changes to the programme following feedback will be communicated to students. As such, the visitors require further evidence to clearly articulate the regular monitoring and evaluation systems in place for this programme, how these systems will be implemented and how they will be used to quality assure the delivery of this programme to ensure that this standard is met

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

Condition: The education provider must provide further evidence to demonstrate that there is an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

Reason: From the documentation prior to the visit, the visitors noted the staff who are currently in place to deliver the approved programme. However, during discussions with the senior team, the visitors learnt that the programme duration has changed from a two year programme to a one year programme delivered at level 5. From these discussions, the visitors understood the intention is to remove year 1 (level 4) of the programme that is currently being delivered at GCU and convert the level 4 into a GNVQ programme that will be delivered at SAS training centres around the country. The visitors understood that the level 5 of the programme will be kept as close as possible to the original programme proposed in the documentation. However, the visitors were not provided with any evidence as to how these changes will affect the programme. In particular, how the change in the structure of the programme will be supported through ensuring that there are sufficient number of staff in place to deliver it effectively. The visitors therefore require further evidence to demonstrate that there is an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

3.6 Subject areas must be taught by staff with relevant specialist expertise and knowledge.

Condition: The education provider must demonstrate that staff with specialist expertise and knowledge are in place to deliver the programme.

Reason: From the documentation prior to the visit, the visitors noted the staff curriculum vitae and the module descriptors. However, during discussions with the senior team, the visitors learnt that the programme duration has changed from a two year programme to a one year programme delivered at level 5. From these discussions, the visitors understood the intention is to remove year 1 (level 4) of the programme that is currently being delivered at GCU and convert the level 4 into a GNVQ programme that will be delivered at SAS training centres around the country. The visitors understood that the level 5 of the programme will be kept as close as possible to the original programme proposed in the documentation. However, the visitors were not provided with any evidence as to how these changes will affect the programme. In particular, following the change in the structure of the programme, if subject areas will continue to be taught by staff with relevant specialist expertise and knowledge. As such, the visitors require information about staff resources that are, or will be, in place to support the delivery of this programme to detail how they ensure that staff have relevant specialist expertise and knowledge to deliver the programme effectively.

3.8 The resources to support student learning in all settings must be effectively used.

Condition: The education provider must provide updated documentation, following the proposal to change the duration of the programme from two years to one year.

Reason: From the evidence provided prior to the visit the visitors were made aware of the responsibilities of both SAA and GCU in respect of the effective delivery of this programme. They were also made aware that SAA will design, deliver and assess the programme and that GCU will award and quality assurance the programme. During discussions with the senior team, the visitors learnt that the programme duration has changed from a two year programme to a one year programme delivered at level 5. From these discussions, the visitors understood the intention is to remove year 1 (level 4) of the programme that is currently being delivered on site and convert the level 4 into a GNVQ programme that will be delivered offsite in training centres. The visitors understood that the level 5 of the programme will be kept as close as possible to the original programme proposed in the documentation. However, the visitors did not see documentation which describes the programme model as proposed at the visit. As such the visitors saw no programme documentation that supports the delivery of this programme as proposed as it still details the previous iteration of the programme. The visitors therefore, require the programme team to provide updated programme documentation following the change to the duration and pattern of the programme's delivery. In this way, the visitors can determine how the programme's documentation continues to be clear, accurate and appropriate to effectively support the delivery of the programme.

3.8 The resources to support student learning in all settings must be effectively used.

Condition: The education provider must provide further evidence demonstrating how resources to support student learning in all settings are effectively used.

Reason: From the evidence provided prior to the visit the visitors were made of the resources in place for the duration of the two year programme. However, during discussions with the senior team, the visitors learnt that the programme duration has changed from a two year programme to a one year programme delivered at level 5. From these discussions, the visitors understood the intention is to remove year 1 (level 4) of the programme that is currently being delivered at GCU and convert the level 4 into a GNVQ programme that will be delivered at SAS training centres around the country. The visitors understood that the level 5 of the programme will be kept as close as possible to the original programme proposed in the documentation. However, the visitors were not provided with any evidence as to how these changes will affect the programme, in particular how it will be resourced effectively. As such, the visitors were unable to determine how the resources in place will support student learning in all setting and how this will be effectively managed. From the proposed design of the programme, the visitors noted that a number of cohorts will be going through this programme per year, as such the visitors require further information on how the programme team will ensure that all students undertaking this programme have access to sufficient resources they require in order to successfully complete this programme. In this way, the visitors can determine how the programme can meet this standard.

3.9 The resources to support student learning in all settings must effectively support the required learning and teaching activities of the programme.

Condition: The education provider must submit further evidence to show that resources in place effectively support the required learning and teaching activities for this programme.

Reason: From the evidence provided prior to the visit the visitors were made of the resource in place for the duration of the two year programme. However, during discussions with the senior team, the visitors learnt that the programme duration has changed from a two year programme to a one year programme delivered at level 5. From these discussions, the visitors understood the intention is to remove year 1 (level 4) of the programme that is currently being delivered at GCU and convert the level 4 into a GNVQ programme that will be delivered at SAS training centres around the country. The visitors understood that the level 5 of the programme will be kept as close as possible to the original programme proposed in the documentation. However, the visitors were not provided with any evidence as to how these changes will affect the programme, in particular how it will be resourced effectively. As such, the visitors were unable to determine how resources in place effectively support the required learning and teaching activities for this programme following the change in the programme structure. In addition, from the design of the programme, the visitors noted that a number of cohorts will be going through this programme per year, as such the visitors require further information on how the programme team will ensure that the resources in place effectively support the required learning and teaching activities for this programme. In this way, the visitors can determine how this programme can meet this standard.

3.14 Where students participate as service users in practical and clinical teaching, appropriate protocols must be used to obtain their consent.

Condition: The programme team must provide evidence of the protocols to obtain informed consent from students when they participate as service users and for managing situations when students decline from participating as service users.

Reason: The visitors reviewed the mapping document provided prior to the visit and noted that there was a reference to a "Consent to Participate in Practical Procedures". However, the submission of documentation for this visit did not include a "Consent to Participate in Practical Procedures". Therefore, the visitors did not see any documentation which defined the protocols to obtain informed consent from students when they participate as service users and for managing situations when students decline from participating as service users, in practical sessions. As a result of this, the visitors require documentation to allow them to consider whether this programme meets this standard. The visitors therefore require evidence of the protocols to obtain informed consent from students when they participate as service users and for managing situations when students decline from participating as service users, in practical sessions.

3.17 Service users and carers must be involved in the programme.

Condition: The education provider must submit further evidence to demonstrate how service users and carers will continue to be involved in the programme.

Reason: From the documentation provided, the visitors could not determine the exact nature of service users and carer involvement in the programme. The programme documentation suggested service users and carers will be involved predominately in the level 4 (year 1) of the programme. However, during discussions with the senior team, the visitors learnt that the programme duration has changed from a two year programme to a one year programme delivered at level 5. From these discussions, the visitors understood the intention is to remove year 1 (level 4) of the programme that is currently being delivered at GCU and convert the level 4 into a GNVQ programme that will be delivered at SAS training centres around the country. The visitors understood that the level 5 of the programme will be kept as close as possible to the original programme proposed in the documentation. However, the visitors were not provided with any evidence as to how these changes will affect the programme, particularly how service users and carers will be involved. From the discussions with the programme team it was clear that formal future plans to involve service users throughout the programme have yet to be finalised. At the visit, the service users and carers indicated that there are plans for their further involvement in the programme, but the programme team were unable to provide much detail about how the involvement will work. As such the visitors were unable to determine, from the evidence provided, how service users and carers will continue to be involved in the programme. In order to determine that this standard is met the visitors require further evidence demonstrating how service user and carers will be involved in the programme in the future.

4.1 The learning outcomes must ensure that those who successfully complete the programme meet the standards of proficiency for their part of the Register.

Condition: The education provider must demonstrate how the learning outcomes ensure that those who successfully complete the programme meet the standards of proficiency (SOPs) for paramedics.

Reason: The documentation provided prior to the visit included module descriptors, together with a mapping document giving information about how students who successfully complete the programme meet the SOPs. The visitors were satisfied that the learning outcomes contained within all of the modules at level 4 and level 5 enable students who successfully complete all of the modules to meet SOPs for paramedics. However, considering the condition set for SET 2.6, the visitors could not determine the criteria or / and the process used to assess whether students entering via the AP(E)L route should be exempted from undertaking particular modules and / or learning outcomes. Therefore, they could not determine how the education provider can be satisfied these students will meet all of the learning outcomes, and therefore SOPs, on completing the programme. The visitors therefore require further evidence to show how students who are exempted from undertaking particular learning at the education provider, such as those who have entered via the AP(E)L route, are able to meet the SOPs for paramedics on completing the programme.

4.2 The programme must reflect the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance.

Condition: The education provider must demonstrate how the programme reflects the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance.

Reason: The documentation provided prior to the visit included curriculum mapping document for level 4 and level 5 against QAA benchmarking statements for paramedics and College of Paramedic (CoP). The visitors were satisfied that the programme presented prior to the visit, reflected the philosophy, core values, skills and knowledge base as articulated in the curriculum guidance. However, during discussions with the senior team, the visitors learnt that the programme duration has changed from a two year programme to a one year programme delivered at level 5. From these discussions, the visitors understood the intention is to remove year 1 (level 4) of the programme that is currently being delivered at GCU and convert the level 4 into a GNVQ programme that will be delivered at SAS training centres around the country. The visitors understood that the level 5 of the programme will be kept as close as possible to the original programme proposed in the documentation. However, the visitors were not provided with any evidence as to how these changes will affect the delivery of curriculum and how it will continue to reflect external reference frameworks that were highlighted by the . In addition, the visitors were not provided with sufficient understanding of what the curriculum will look like with the removal of one year of study at the university. As such, the visitors were unable to determine, from the evidence provided, how the education provider meets this standard, considering the changes described at the visit. The visitors therefore, require further evidence to demonstrate how the new programme reflects the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance.

4.5 The curriculum must make sure that students understand the implications of the HCPC's standards of conduct, performance and ethics.

Condition: The education provider must demonstrate how the curriculum ensures that students understand the implications of the HCPC's standards of conduct, performance and ethics.

Reason: The documentation provided prior to the visit included module descriptors, together with an indication of where in the curriculum students will understand the implications of the HCPC's standards of conduct, performance and ethics. From this information, the visitors understood that this information was to be contained in level 4 (year 1) of the curriculum. However, during discussions with the senior team, the visitors learnt that the programme duration has changed from a two year programme to a one year programme delivered at level 5. From these discussions, the visitors understood the intention is to remove year 1 (level 4) of the programme that is currently being delivered at GCU and convert the level 4 into a GNVQ programme that will be delivered at SAS training centres around the country. The visitors understood that the level 5 of the programme will be kept as close as possible to the original programme proposed in the documentation. However, the visitors were not provided with any evidence as to how these changes will affect the delivery of the curriculum. In addition, the visitors were not provided with sufficient understanding of what the curriculum will look like with the removal of one year of study at the university as this year was when the evidence provided highlighted that students would expect to learn and understand the implications of the HCPC's standards of conduct, performance and ethics. As such the visitors require further evidence to demonstrate how the curriculum of this programme ensures that students understand the implications of the HCPC's standards of conduct, performance and ethics.

4.6 The delivery of the programme must support and develop autonomous and reflective thinking.

Condition: The education provide must demonstrate how the delivery of the programme support and develops autonomous and reflective thinking.

Reason: The documentation provided prior to the visit included module descriptors, together with information on how the delivery of the programme supports support and develops autonomous and reflective thinking over the duration of the two year programme. However, during discussions with the senior team, the visitors learnt that the programme duration has changed from a two year programme to a one year programme delivered at level 5. From these discussions, the visitors understood the intention is to remove year 1 (level 4) of the programme that is currently being delivered on site and convert the level 4 into a GNVQ programme that will be delivered offsite in training centres. The visitors understood that the level 5 of the programme will be kept as close as possible to the original programme proposed in the documentation. However, the visitors did not see documentation to confirm this, or any new documentation that captures the change in the duration of the programme and any effect it may have on the programme, specifically, any changes made to the curriculum in light of this. In addition, the visitors were not provided additional evidence of what the curriculum will look like with the removal of the level 4 curriculum. As such, the visitors could not determine how the delivery of the programme with the removal of the level 4 supports and develops autonomous and reflective thinking. The visitors therefore require further evidence to demonstrate how the delivery of the programme support and develops autonomous and reflective thinking.

4.7 The delivery of the programme must encourage evidence based practice.

Condition: The education provider must demonstrate how the delivery of the programme encourages evidence based practice.

Reason: The documentation provided prior to the visit included module descriptors, together with information on how the delivery of the programme encourages evidence based practice over the duration of the two year programme. However, during discussions with the senior team, the visitors learnt that the programme duration has changed from a two year programme to a one year programme delivered at level 5. From these discussions, the visitors understood the intention is to remove year 1 (level 4) of the programme that is currently being delivered on site and convert the level 4 into a GNVQ programme that will be delivered offsite in training centres. The visitors understood that the level 5 of the programme will be kept as close as possible to the original programme proposed in the documentation. However, the visitors did not see sufficient documentation to confirm this, or any new documentation that captures the change in the duration of the programme and any effect it may have on the programme, specifically, any changes made to the curriculum in light of this. In addition, the visitors were not provided with sufficient understanding of what the curriculum will look like with the removal of the level 4 curriculum. As such, the visitors could not determine how the delivery of the programme with the removal of the level encourages evidence based practice. The visitors therefore require further evidence to demonstrate how the delivery of the programme encourages evidence based practice.

4.8 The range of learning and teaching approaches used must be appropriate to the effective delivery of the curriculum.

Condition: The education provider must demonstrate how the range of learning and teaching approaches used is appropriate to the effective delivery of the curriculum.

Reason: The documentation provided prior to the visit included information on the range of learning and teaching approaches used by the programme team across the duration of the two year programme. However, during discussions with the senior team, the visitors learnt that the programme duration has changed from a two year programme to a one year programme delivered at level 5. From these discussions, the visitors understood the intention is to remove year 1 (level 4) of the programme that is currently being delivered on site and convert the level 4 into a GNVQ programme that will be delivered offsite in training centres. The visitors understood that the level 5 of the programme will be kept as close as possible to the original programme proposed in the documentation. However, the visitors did not see sufficient documentation to confirm this, or any new documentation that captures the change in the duration of the programme and any effect it may have on the programme, specifically, any changes made to the curriculum in light of this. In addition, the visitors were not provided with sufficient understanding of what the curriculum will look like with the removal of the level 4 curriculum. As such, the visitors could not determine how the range of learning and teaching approaches used is appropriate to the effective delivery of the curriculum. The visitors therefore require further evidence to demonstrate how the range of learning and teaching approaches used is appropriate to the effective delivery of the curriculum.

5.2 The number, duration and range of practice placements must be appropriate to support the delivery of the programme and the achievement of the learning outcomes.

Condition: The programme team must provide further clarification of the formal processes used to allocate placements and ensure that all students get the experience they require to achieve the learning outcomes.

Reason: Prior to the visit, the visitors were provided with practice placement portfolio (year 1 and year 2) for the programme which linked the learning outcome associated with practice placements to relevant standards of proficiency. During discussions with the senior team, the visitors learnt that the programme duration will change from a two year programme to a one year programme delivered at level 5. From these discussions, the visitors understood the intention is to remove year 1 (level 4) of the programme that is currently being delivered on site and convert the level 4 into a GNVQ programme that will be delivered offsite in training centres. The visitors understood that the level 5 of the programme will be kept as close as possible to the original programme proposed in the documentation. However, the visitors did not see sufficient documentation to confirm this, or any new documentation that captures the change in the duration of the programme and any effect it may have on the programme. In particular, how the change in the structure of the programme affects placement and the achievement of the learning outcomes. From the discussions at the visit, the visitors could not determine how the programme team ensures that the placements undertaken by students at level 5 will be sufficient for them to meet the learning outcomes required for successful completion of the programme. From the initial documentation provided, the visitors could not determine how the programme team ensures that the allocation of placements provide students with sufficient placement experience to meet the required learning outcomes and subsequently the SOPs. The visitors therefore require further evidence of how the allocation of placements work in practice and how the programme team ensure that the number, duration and range of these placements ensure that students can meet

the required learning outcomes. In this way the visitors can determine how the programme may meet this standard.

5.2 The number, duration and range of practice placements must be appropriate to support the delivery of the programme and the achievement of the learning outcomes.

Condition: The education provider must provide further evidence of the range of placement settings that students will experience to support the delivery of the programme and the achievement of the learning outcomes

Reason: From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. However, the visitors could not identify how non-ambulance placements would be sourced and allocated to the large number of students for this programme. The visitors were unable to gain a clear understanding of the different placement settings, such as the non-ambulance setting, that were on offer to students, and which of these settings students would be required to attend. Therefore, the visitors require further evidence to show how the education provider ensures an appropriate range of placements to support the delivery of the programme, and the achievement of the learning outcomes.

5.3 The practice placement settings must provide a safe and supportive environment.

Condition: The education provider must provide evidence to demonstrate how they ensure a safe and supportive environment at alternative (non-ambulance) placement settings.

Reason: From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. The visitors were provided with approval and monitoring procedures, however, the visitors were unable to determine from the evidence how the education provider ensures that non-ambulance placements are a safe and supportive environment for students. In addition, the visitors did not see evidence to show there is a process to ensure a safe and supportive environment at placements in alternative (non-ambulance) settings. The programme team informed visitors that that there are similar processes in place for placements in alternative (non-ambulance) settings as the ones in place for placements at Scottish Ambulance Service (SAS), but the visitors did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the placement experience. Therefore, the visitors require evidence to demonstrate how the education provider ensures a safe and supportive environment at alternative (non-ambulance) settings.

5.4 The education provider must maintain a thorough and effective system for approving and monitoring all placements.

Condition: The education provider must submit evidence to demonstrate how they maintain a thorough and effective system of approving and monitoring all placements.

Reason: The visitors noted a number of different documents submitted by the education provider to demonstrate how the programme meets this standard. However, in considering the initial documentation submitted and discussions held at the visit, the visitors could not find any evidence of overarching policies, systems and procedures in place regarding the approval and monitoring of placements used by the programme. From discussions with the programme team, it was unclear how the education provider would maintain responsibility for the approval and monitoring of practice placements. The visitors could not determine the criteria used by the programme team to assess a placement and the overall process undertaken to approve it, as well as how activities such as the practice educator and student questionnaires feed into this. The visitors therefore require further evidence of the overarching policies, systems and procedures in place regarding the approval and monitoring of placements, and how they are put into practice, to ensure this standard is met. In particular, the visitors require further evidence of the criteria used to approve placement providers and settings, the overall process for the approval and ongoing monitoring of placements, and how information gathered from placement providers at approval, or during a placement experience is considered and acted upon. Any such evidence should articulate what the process in place is and how this supports the review of the quality of a placement.

5.4 The education provider must maintain a thorough and effective system for approving and monitoring all placements.

Condition: The education provider must provide evidence to demonstrate how they maintain a thorough and effective system of approving and monitoring placements in alternative (non-ambulance) settings.

Reason: From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. The visitors were provided with approval and monitoring procedures, however, from the evidence the visitors were unable to determine how the education provider maintains a thorough and effective system for approving and monitoring all placements at SAS. In addition, the visitors did not see evidence to show that the education provider maintains a thorough and effective system for approving and monitoring placements in alternative (non-ambulance) settings. The programme team informed visitors that there are similar processes in place for placements in alternative (non-ambulance) settings as the ones in place for placements at SAS, but the visitors did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the placement experience. Therefore, the visitors require evidence to demonstrate how the education provider maintains a thorough and effective system for approving and monitoring placements at alternative (non-ambulance) settings.

5.5 The placement providers must have equality and diversity policies in relation to students, together with an indication of how these will be implemented and monitored.

Condition: The education provider must provide evidence of how they ensure equality and diversity policies are in place within practice placements.

Reason: The documentation submitted prior to the visit included the procedures for approving and monitoring practice placement providers, as well as SAA's equality and diversity policies. The visitors reviewed this information but were unable to determine from this how the education provider ensures that practice placement providers have equality and diversity policies in place in relation to students. Discussions with the programme team indicated that there is a process in place to ensure practice placement providers have equality and diversity policies in place, but the visitors were unsure what these processes were and how this process formed part of the auditing and approving of all placements. In order to determine how the programme continues to meet this standard the visitors require the education provider to provide evidence to demonstrate how they ensure practice placement providers have equality and diversity policies in place.

5.5 The placement providers must have equality and diversity policies in relation to students, together with an indication of how these will be implemented and monitored.

Condition: The education provider must provide evidence to demonstrate how they ensure equality and diversity policies are in place at alternative (non-ambulance) placement settings.

Reason: From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. The visitors were provided with practice placement profile, however, from the evidence the visitors were unable to determine that equality and diversity policies are in place for practice placements at SAS. In addition, the visitors did not see evidence to show that there is a process to ensure there are equality and diversity policies at alternative (non-ambulance) settings. The programme team informed visitors that there are similar processes in place in alternative (non-ambulance) settings as the ones in place for placements at SAS, but the visitors did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the placement experience. Therefore, the visitors require evidence to demonstrate how the education provider ensures that equality and diversity policies are in place at alternative (non-ambulance) settings.

5.6 There must be an adequate number of appropriately qualified and experienced staff at the practice placement setting.

Condition: The education provider must provide further evidence to demonstrate how they ensure all placement settings have an adequate number of appropriately qualified, experienced and, where required, registered staff.

Reason: From the initial documentation provided and the information provided regarding the approval and monitoring of placements, the visitors could not determine how the education provider ensures that practice placements have an adequate number of appropriately qualified and experienced staff. In scrutinising evidence, in discussions with the programme team and the practice placement provider, the visitors learnt that the employer, SAA, hold a database of staff that can act as placement educators. In the same meeting, the visitors heard contradictory numbers of 600 and 650 of the number of practice educators available to supervise students. Due to the evidence provided and the lack of clarity around the number of appropriately qualified and experienced staff at practice placement, the visitors were unclear how much responsibility the education provider has and would continue to have for ensuring that the placement settings have an adequate number of appropriately qualified, experienced and, where required, registered staff in place. The visitors were therefore unable to make a judgment about whether this standard is met, and requires further evidence as to how the education provider ensures practice placements have an adequate number of appropriately qualified and experienced staff.

5.6 There must be an adequate number of appropriately qualified and experienced staff at the practice placement setting.

Condition: The education provider must provide evidence to demonstrate how they ensure placements in alternative (non-ambulance) settings have an adequate number of appropriately qualified and experienced staff.

Reason: From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. In discussions with the placement providers, the visitors learnt the audit process conducted by SAS to ensure that there are an adequate number of appropriately qualified and experienced staff in place in practice placements. However, the visitors did not see evidence to show there is a process in place to ensure an adequate number of staff in alternative (non-ambulance) settings placements, who are appropriately qualified and experienced. The programme team informed visitors that that there are similar processes in place for placements in alternative (non-ambulance) settings as the ones in place for placements at SAS, but the visitors did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the placement experience, and due to the background of the staff at these placements. Therefore, the visitors require evidence to demonstrate how the education provider ensures an adequate number of appropriately qualified and experienced staff are in place within placements at alternative (non-ambulance) settings.

5.7 Practice placement educators must have relevant knowledge, skills and experience.

Condition: The education provider must provide further evidence to demonstrate how they ensure all practice placement educators have the relevant experience to supervise students.

Reason: From a review of the documentation, the visitors noted that students who wish to become practice educators are able to take up an optional leadership module at level 5 as part of their study. In discussions at the visit, the visitors noted that student upon completion of the programme as well as the leadership module are able to become practice educators soon after graduation. From the discussions and the documentation, the visitors were unable to determine how students who have completed the optional leadership module have the necessary experience to supervise student soon after graduation. As such, the visitors require further evidence to demonstrate how they ensure all practice placement educators have the relevant experience to supervise students.

5.7 Practice placement educators must have relevant knowledge, skills and experience.

Condition: The education provider must provide evidence to demonstrate how they ensure practice placement educators in alternative (non-ambulance) settings have relevant knowledge, skills and experience.

Reason: From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. In discussions with the placement providers, the visitors learnt the audit process conducted by SAS to ensure that practice placement educators have the relevant knowledge, skills and experience in practice placements. However, the visitors did not see evidence to show there is a process to ensure staff at alternative (non-ambulance) settings have relevant skills, knowledge and experience. The programme team informed visitors that that there are similar processes in place in alternative (non-ambulance) settings as the one in place for placements at SAS, but the visitors did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the placement experience, and due to the background of the staff at these placements. Therefore, the visitors require evidence to demonstrate how the education provider ensures practice placement educators at alternative (non-ambulance) settings have relevant knowledge, skills and experience.

5.8 Practice placement educators must undertake appropriate practice placement educator training.

Condition: The programme team must provide further evidence to demonstrate how they ensure that practice placement educators have undertaken the appropriate placement educator training.

Reason: From the initial documentation provided, the visitors could not determine how the education provider ensures practice placement educators undertake appropriate practice placement educator training. During discussions with the programme team, the

visitors learnt that there are practice educators training options that are offered to practice educators including a leadership module. The visitors acknowledged that there are training opportunities and workshops provided by the education provider for practice placement educators but were unable to see how each individual placement educator's training is monitored, or how the requirements for training feeds into partnership agreements with the providers. In addition, the visitors noted that placement areas are required to confirm the training staff have received, however, the visitors were unclear about the steps taken by the education provider to ensure that suitably trained placement educators were in place for students if they rely on placement areas. To ensure this standard is met, the visitors require the education provider to clearly articulate the training requirements for placement educators and the processes in place for ensuring these requirements are met and monitored in practice placement setting.

5.8 Practice placement educators must undertake appropriate practice placement educator training.

Condition: The programme team must provide evidence to demonstrate how they ensure that practice placement educators in alternative (non-ambulance) settings have undertaken appropriate placement educator training.

Reason: From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. In discussions with the placement providers, the visitors learnt the audit process conducted by SAS to ensure that practice placement educators at SAA undertake appropriate practice placement educator training. However, the visitors did not see evidence to show a process to ensure that practice placement educators will undertake appropriate practice placement educator training in alternative (non-ambulance) settings. The programme team informed visitors that there are similar processes in place in alternative (non-ambulance) settings as the one in place for placements at SAS but the visitors did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the placement experience, and due to the background of the staff at these placements. Therefore, the visitors require evidence to demonstrate how the education provider ensures practice placement educators at alternative (non-ambulance) settings undertake appropriate practice placement educator training.

5.9 Practice placement educators must be appropriately registered, unless other arrangements are agreed.

Condition: The programme team must provide evidence to demonstrate how they ensure that practice placement educators are appropriately registered, or agree other arrangements with the HCPC.

Reason: During discussions at the visit, the visitors heard that a register of all practice placement educators will be held by the employer SAS and that this register will record the practice placement educators' registration status. However, the visitors were unclear as to how the education provider would maintain responsibility for ensuring

placement educators are appropriately registered if the registration of practice educators are held by the Trust. They were also unclear as to the role of the education provider in agreeing other arrangements should appropriately registered practice placement educators not be available at certain placement sites, particularly those in a non-ambulance setting. To ensure that this standard is met, the visitors require further evidence of the process in place in ensuring placement educators are appropriately registered and what arrangements will be put in place should registered placement educators not be available.

5.9 Practice placement educators must be appropriately registered, unless other arrangements are agreed.

Condition: The programme team must provide evidence to demonstrate how they ensure that practice placement educators in alternative (non-ambulance) settings are appropriately registered, unless other arrangements are agreed with the HCPC.

Reason: From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. In discussions with the placement providers, the visitors learnt the audit process conducted by SAS to ensure practice placement educators at SAS are appropriately registered. However, the visitors did not see evidence to show that the education provider has a process in place to ensure that practice placement educators are appropriately registered in alternative (non-ambulance) settings. The programme team informed visitors that there are similar processes in place in alternative (non-ambulance) settings as the one in place for placements at SAS, but the visitors did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the placement experience, and due to the background of the staff at these placements. Therefore, the visitors require evidence to show how the education provider ensures that practice placement educators are appropriately registered, unless other arrangements are agreed.

5.11 Students, practice placement providers and practice placement educators must be fully prepared for placement which will include information about an understanding of:

- **the learning outcomes to be achieved;**
- **the timings and the duration of any placement experience and associated records to be maintained;**
- **expectations of professional conduct;**
- **the assessment procedures including the implications of, and any action to be taken in the case of, failure to progress; and**
- **communication and lines of responsibility.**

Condition: The programme team must provide further evidence which demonstrates how the learning outcomes, methods of assessment and alignment of modules for non-

ambulance placements are effectively communicated and understood by students and practice educators.

Reason: The visitors noted from discussions with the programme team that there will be placements in non-ambulance service settings. From the documentation it was clear that SAA will be providing the core placements for this programme but students will also experience working as a paramedic in an urban and rural areas. The visitors noted the importance of ensuring students have sufficient exposure to a variety of situations such as within hospital settings and other non NHS placements. However, the visitors could not find further detail in the documentation to support these placement experiences, specifically regarding how these placements will be integrated with the programme, or information of the learning outcomes and associated assessments. The visitors therefore require further evidence that the students and placement educators in non-ambulance placement settings are given sufficient information to understand the learning outcomes to be achieved, and are therefore fully prepared for placement in non-ambulance settings.

5.12 Learning, teaching and supervision must encourage safe and effective practice, independent learning and professional conduct.

Condition: The education provider demonstrate how the learning, teaching and supervision encourages safe and effective practice, independent learning and professional conduct.

Reason: The documentation provided prior to the visit included information on the learning, teaching and supervision and how it encourages safe and effective practice, independent learning and professional conduct over the duration of the two year programme. However, during discussions with the senior team, the visitors learnt that the programme duration has changed from a two year programme to a one year programme delivered at level 5. From these discussions, the visitors understood the intention is to remove year 1 (level 4) of the programme that is currently being delivered on site and convert the level 4 into a GNVQ programme that will be delivered offsite in training centres. The visitors understood that the level 5 of the programme will be kept as close as possible to the original programme proposed in the documentation. However, the visitors did not see sufficient documentation to confirm this, or any new documentation that captures the change in the duration of the programme and any effect it may have on the programme, specifically, any changes made to curriculum and placement in light of this. The visitors therefore require further evidence to demonstrate how the learning, teaching and supervision encourages safe and effective practice, independent learning and professional conduct.

6.1 The assessment strategy and design must ensure that the student who successfully completes the programme has met the standards of proficiency for their part of the Register.

Condition: The education provider must demonstrate how the assessment strategy and design ensures those who successfully complete the programme meet the standards of proficiency (SOPs) for paramedics.

Reason: The documentation provided prior to the visit included module descriptors, together with a mapping document giving information about how students who successfully complete the programme meet the SOPs. The visitors were satisfied that

the learning outcomes contained within all of the modules at level 4 and level 5 enable students who successfully complete all of the modules to meet SOPs for paramedics. However, considering the condition set for SET 2.6, the visitors could not determine the criteria or / and the process used to assess whether students entering via the AP(E)L route should be exempted from undertaking particular modules and / or learning outcomes. Therefore, they could not determine how the education provider can be satisfied these students will meet all of the learning outcomes, and therefore SOPs, on completing the programme. The visitors therefore require further evidence to show how students who are exempted from undertaking particular learning at the education provider, such as those who have entered via the AP(E)L route, are assessed as able to meet the SOPs for paramedics on completing the programme. This condition is linked to the condition for SET 2.6 and SET 4.1.

6.4 Assessment methods must be employed that measure the learning outcomes.

Condition: The education provider must ensure that the assessment methods employed measure the learning outcomes.

Reason: The documentation provided prior to the visit included module booklets, module specifications and standards of proficiency mapping document. However, the documentation submitted for this standard did not clearly specify the assessment methods. During discussions with the senior team, the visitors learnt that the programme duration has changed from a two year programme to a one year programme delivered at level 5. From these discussions, the visitors understood the intention is to remove year 1 (level 4) of the programme that is currently being delivered on site and convert the level 4 into a GNVQ programme that will be delivered offsite in training centres. The visitors understood that the level 5 of the programme will be kept as close as possible to the original programme proposed in the documentation. However, the visitors did not see sufficient documentation to confirm this, or any new documentation that captures the change in the duration of the programme and any effect it may have on the programme, specifically, any changes made to the curriculum in light of this. In addition, the visitors were not provided with sufficient understanding of what the curriculum will look like with the removal of the level 4 curriculum and the assessment methods for this programme. The visitors noted that without clarity of the assessment methods used for each module on the new programme, they could not determine if the chosen methods are in line with the learning outcomes of each module. For this reason, the visitors were unable to determine how this SET will be met. The visitors therefore, require the programme team to clearly state which assessment methods will be employed and how the chosen assessment methods are in line with the learning outcomes of each module. This way the visitors can be sure that the assessment methods employed will appropriately measure all the learning outcomes to ensure that those students who successfully complete the programme can practice safely and effectively.

6.7 Assessment regulations must clearly specify requirements for student progression and achievement within the programme.

Condition: The education provider must provide further clarity on student progression and achievement within the programme.

Reason: The documentation provided prior to the visit included assessment regulations and how they apply to this programme across the duration of the programme. During

discussions with the senior team, the visitors learnt that the programme duration has changed from a two year programme to a one year programme delivered at level 5. From these discussions, the visitors understood the intention is to remove year 1 (level 4) of the programme that is currently being delivered on site and convert the level 4 into a GNVQ programme that will be delivered offsite in training centres. The visitors understood that the level 5 of the programme will be kept as close as possible to the original programme proposed in the documentation. However, the visitors did not see sufficient documentation to confirm this, or any new documentation that captures the change in the duration of the programme and any effect it may have on the programme, specifically, any change made to student progression and achievement within the programme. In addition, the visitors were not provided with sufficient understanding of how student will be assessed and how these assessment are made clear to students so that know what to expect of the programme. The visitors therefore require further clarity on student progression and achievement within the new proposed level 5 programme and how the management systems in place will ensure they the partners can exchange information and work together to ensure that students' progress through the programme

6.9 Assessment regulations must clearly specify requirements for an aegrotat award not to provide eligibility for admission to the Register.

Condition: The education provider must revisit the programme documentation to clearly state that aegrotat awards do not confer eligibility to apply to the Register.

Reason: From the documentation provided the visitors could not identify where it is clearly stated that aegrotat awards do not provide eligibility to apply to the Register. The visitors were also unclear as to how this information is clearly communicated to students. The visitors therefore require further evidence to demonstrate where in the programme documentation it is clearly stated that aegrotat awards do not provide eligibility to apply to the Register.

Paul Bates
Mark Nevins
Sue Roff

Scottish Ambulance Service and Glasgow Caledonian University

DipHE Paramedic Practice

HCPC Visitors Report April 2016

Formal Observations

The programme team would like to thank the HCPC for their visit of 6th and 7th April 2016, and the subsequent draft report to enable us to make our observations. We were pleased to receive confirmation that 23 of the SET's had been met, although understandably there was also some disappointment and concern that there were conditions attached to the remaining 35 SET's which based on our ongoing and significant experience of HCPC approvals, we perceive to be an unusually high number of conditions. On further consideration of both the report and each of the conditions being recommended, we have identified that that these broadly fall into 4 distinct thematic areas. For ease of consideration we have commented on each of these themes below and where relevant identified the specific SET/condition number as outlined within the report.

1. The Education Provider

The relationship between Glasgow Caledonian University (GCU) and the Scottish Ambulance Academy (SAA) (SET conditions: 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 3.2, 3.3, 4.1)

We would like to thank the visitors for their acknowledgement that the evidence provided prior to the approval visit detailed the specific roles of the Scottish Ambulance Service and Glasgow Caledonian University in relation to the joint provision of the programme.

However, we also note that as a result of discussion the HCPC panel were both unclear and unsure of how this relationship worked in practice. It is disappointing that we were unable to articulate and elaborate on the existing collaborative arrangement which had been in place for the preceding 5 years and indeed at the point of HCPC approval at that time. The programme team would obviously wished to have reassured the HCPC that the Quality Assurance and Enhancement processes to which this programme is subject have in fact strengthened since its initial approval in 2011.

Moreover, we recognise that an opportunity was missed to expand on the unique collaborative relationship that underpins the programme delivery, and which was recognised in the Paramedic Education Evaluation Project commissioned by the professional body, as an example of excellence in the employer/educator relationship.

It is further recognised that this lack of clarity has then significantly influenced the visitors view on the programme's compliance in relation to admissions, programme

management, evaluation, resources, qualifications and the monitoring and provision of practice placement. It is again disappointing that we were unable to articulate the relationship between the Scottish Ambulance Service and Glasgow Caledonian University within the Scottish health and social care context, in part due to the focus and tone of the meeting.

We would welcome an opportunity to provide further clarification on the relationship as provided in the pre-visit submission to reassure the HCPC that the programme is fully compliant in respect of those SETS relating to the education provider.

2. The Introduction of a General National Vocational Qualification to the education portfolio of Scottish Ambulance Service.

(SET conditions 2.1, 2.6, 3.5, 3.6, 3.8, 3.9, 3.17, 4.1 4.2, 4.5, 4.6, 4.7, 4.8, 5.2, 5.12, 6.1, 6.4, 6.7)

The programme team note that a significant number of conditions make reference to the introduction of a GNVQ programme by the Scottish Ambulance Service in response to their strategic workforce plan for the development of technician grade staff. We also note that the panel appear to have interpreted this development as meaning that the two year DipHE programme that was being submitted for approval had in fact now become a one year programme with the first year being replaced by the vocational award. We would wish to stress that this misinterpretation is factually incorrect. The introduction of the vocational programme is a parallel development being developed by the Scottish Ambulance Service to meet their workforce needs.

The format of this visit meant that the visitors met with students in advance of the senior team and programme team meetings. It is important to note that these students are not only students, but are also full time employees of the Scottish Ambulance Service. Consequently the information they provided to the panel in relation to vocational awards related to the wider strategic development of career pathways within the Scottish Ambulance Service, and not the structure or format of the 2 year Diploma of Higher Education in Paramedic Practice which was presented for approval. It is disappointing that as a programme team we were then unable to articulate the distinction between these programmes sufficiently so that any confusion that had been created could subsequently be clarified.

We would like to thank the visitors for their recognition that the pre-approval submission not only identified the appropriate resources, qualification of staff and programme design for the 2 year programme, but that they were also satisfied that all of the modules at level 4 and level 5 (Scottish Credit and Qualifications Framework level 7 and 8) would enable students who successfully completed them to meet the SOP's for paramedics. Furthermore, we would like to also thank the visitors for their recognition that the 2 year programme also reflected the curriculum guidance, that the teaching and learning strategy would enable the effective delivery

of the curriculum and that the programme would develop autonomous and evidence based practice.

The programme team would welcome the opportunity to discuss this and clarify the delivery of the 2 year Diploma of Higher Education programme, and the strategic context in which it will be delivered.

3. Practice Placement

(SET Conditions; 3.14, 5.2, 5.3, 5.4, 5.5, 5.7, 5.9, 5.11)

The programme team note a significant number of conditions that relate to elements of practice placement. Furthermore, these conditions can also be categorised in relation to those conditions that have arisen due to the lack of clarity over the education provider, and consequently the responsibility for placement. Also those that have arisen due to the factually incorrect perception that the programme was going to be a 1 year programme rather than the 2 year programme presented, and finally the role of the Scottish Ambulance Service procedures in the provision of practice placement. The first 2 areas have been explored above and we are again disappointed that the visit did not enable us to sufficiently articulate this to aid the understanding of the visitors.

In relation to the third area, namely the process and procedures for practice placement, it is evident from the conditions that there was again confusion on relation to the responsibility of the Scottish Ambulance Service in the approval of practice placement areas, and the associated policies and procedures that applied to these (both ambulance and non-ambulance). Again, it is disappointing that in the practice placement meeting we were unable to sufficiently clarify the unique position of the Scottish Ambulance Service as a Special Health Board within NHS Scotland and the overarching practice placement agreement with NHS Education Scotland which underpins all undergraduate practice placements in Scottish Health Boards.

The programme team would again welcome the opportunity to clarify the practice placement arrangements and the underpinning policies and procedures within the context of health and social care in Scotland.

4. The Relationship between SAS and SAA

(SET conditions 5.6, 5.8, 5.9)

Finally the programme team have identified a number of conditions in which there appears to also have been some confusion about the relationship between the Scottish Ambulance Service and the Scottish Ambulance Academy. This is in particular reference to policy and procedures for practice placement, equality and diversity, and monitoring and audit. It is disappointing that this confusion was not evident at the visit, and therefore the programme team were unable to aid the understanding of the visitors that the Scottish Ambulance Academy is an integral

part of the Scottish Ambulance Service and therefore these procedures apply across all areas.

In conclusion, we would like to re-iterate our thanks to the visitors for the visit, comprehensive report, and acknowledgment that the 2 year programme as presented in the pre-approval submission met many of the standards that were subsequently subject to conditions. We acknowledge that there have clearly been a number of factors which have led to confusion over the 2 day visit in relation to the misperception of both content and length of programme. We are disappointed that this confusion influenced the tone and focus of the visit, and that we were unable to articulate our responses sufficiently to aid the visitors comprehension of the context in which the programme sits both in terms of education provision and NHS Scotland within which the Scottish Ambulance Service sits a special health board and the sole public paramedic service for Scotland. We would therefore welcome a subsequent visit to explore these areas in more depth and provide the assurance required by the HCPC should you deem this necessary.

John Burnham

Head of Education and Professional Development
Professional Lead (Paramedic Practice)
Scottish Ambulance Service

Vincent J. McKay

Dean, School of Health and Life Sciences
Glasgow Caledonian University

Visitors' report

Name of education provider	University of Wolverhampton
Programme name	BSc (Hons) Physiotherapy
Mode of delivery	Full time
Relevant part of the HCPC Register	Physiotherapist
Date of visit	3 – 4 May 2016

Contents

Executive summary	2
Introduction.....	3
Visit details	3
Sources of evidence	4
Recommended outcome	5
Conditions.....	6
Recommendations.....	8

Executive summary

The Health and Care Professions Council (HCPC) approve educational programmes in the UK which health and care professionals must complete before they can apply to be registered with us. We are a statutory regulator and our main aim is to protect the public. We currently regulate 16 professions. All of these professions have at least one professional title which is protected by law. This means that anyone using the title 'physiotherapist' must be registered with us. The HCPC keep a register of health and care professionals who meet our standards for their training, professional skills, behaviour and health.

The visitors' report which follows outlines the recommended outcome made by the visitors on the approval of the programme. The education provider has until 23 June 2016 to provide observations on this report. This is independent of meeting any conditions. The report and any observations received will be considered by the Education and Training Committee (Committee) on 7 July 2016. At this meeting, the Committee will accept, reject or vary the visitors' recommended outcome. If necessary, the Committee may decide to vary the conditions.

The education provider is due to redraft and resubmit documentary evidence in response to the conditions outlined in this report by 7 July 2016. The visitors will consider this response and make a separate recommendation to the Committee on the approval of the programme. It is anticipated that this recommendation will be made to the Committee on 25 August 2016.

Introduction

The HCPC visited the programme at the education provider as it was a new programme which was seeking HCPC approval for the first time. This visit assessed the programme against the standards of education and training (SETs) and considered whether those who complete the programme meet the standards of proficiency (SOPs) for their part of the Register.

This visit was part of a joint event. The education provider reviewed the programme and the professional body considered their accreditation of the programme. The education provider, the professional body and the HCPC formed a joint panel, with an independent chair and secretary, supplied by the education provider. Whilst the joint panel participated in collaborative scrutiny of the programme and dialogue throughout the visit; this report covers the HCPC's recommendations on the programme only. As an independent regulatory body, the HCPC's recommended outcome is independent and impartial and based solely on the HCPC's standards. A separate report, produced by the education provider and the professional body, outlines their decisions on the programme's status.

Visit details

Name and role of HCPC visitors	Pamela Bagley (Physiotherapist) Kathryn Heathcote (Physiotherapist) Nicholas Drey (Lay visitor)
HCPC executive officer (in attendance)	Hollie Latham
Proposed student numbers	30 per cohort, 1 cohort per year
Proposed start date of programme approval	1 September 2017
Chair	Alan Hindle (University of Wolverhampton)
Secretary	Rebecca Bates (University of Wolverhampton)
Members of the joint panel	Will Varnam (Internal panel member) Cathy Shaw (Internal panel member) Nina Patterson (Chartered Society of Physiotherapy) Fiona Roberts (Chartered Society of Physiotherapy)

Sources of evidence

Prior to the visit the HCPC reviewed the documentation detailed below, sent by the education provider:

	Yes	No	N/A
Programme specification	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Descriptions of the modules	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the education provider has met the SETs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the education provider has met the SOPs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Practice placement handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Curriculum vitae for relevant staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
External examiners' reports from the last two years	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

The HCPC did not review external examiners' reports from the last two years prior to the visit as there is currently no external examiner as the programme is new.

During the visit the HCPC saw the following groups or facilities:

	Yes	No	N/A
Senior managers of the education provider with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Programme team	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Placements providers and educators / mentors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Service users and carers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learning resources	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Specialist teaching accommodation (eg specialist laboratories and teaching rooms)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The HCPC met with students from the BNurs (Hons) Adult Nursing, BSc (Hons) Sport and Exercise Science and the Extended / Supplementary Non-Medical Prescribing (V300) as the programme seeking approval currently does not have any students enrolled on it.

Recommended outcome

To recommend a programme for approval, the visitors must be satisfied that the programme meets all of the standards of education and training (SETs) and that those who complete the programme meet our standards of proficiency (SOPs) for the relevant part of the Register.

The visitors agreed to recommend to the Education and Training Committee that a number of conditions are set on the programme, all of which must be met before the programme can be approved.

The visitors agreed that 54 of the SETs have been met and that conditions should be set on the remaining four SETs.

Conditions are requirements that the education provider must meet before the programme can be approved. Conditions are set when certain standards of education and training have not been met or there is insufficient evidence of the standard being met.

The visitors have also made a recommendation for the programme.

Recommendations are observations on the programme or education provider which do not need to be met before the programme can be approved. Recommendations are made to encourage further enhancements to the programme, normally when it is felt that the particular standard of education and training has been met at, or just above the threshold level.

Conditions

5.2 The number, duration and range of practice placements must be appropriate to support the delivery of the programme and the achievement of the learning outcomes.

Condition: The education provider must demonstrate that an appropriate number and range of placements will be secured ready for the start date of this programme.

Reason: The programme team stated that they have not yet confirmed all placement settings due to the start date being so far in the future. The visitors understood, with the time frames involved, it would be difficult for the programme team to gain commitment from practice placement providers at this stage. However, the visitors were unable to see a clear plan of action for securing appropriate practice placements in time for the anticipated start date of this programme. For example, the visitors were not able to see how the education provider had considered the practice placements available against their intended student numbers. In addition to this, the visitors could not see which practice placement settings the education provider has or intends to work with to provide placements for this programme, and the timelines associated with this. From discussions at the visit, the visitors were satisfied that there is scope within the local area to provide an appropriate number and range of placements. However, without a clear action plan that outlines which placement settings the education provider intends to work with and the timelines associated with this, the visitors cannot be certain that this standard is met. The visitors therefore require documentation which outlines a clear and appropriate plan of action to ensure that there is an appropriate number and range of practice placements secured ready for the start date of this programme.

6.1 The assessment strategy and design must ensure that the student who successfully completes the programme has met the standards of proficiency for their part of the Register.

Condition: The education provider must provide assessment criteria for the different modes of assessment, specific to this programme, which demonstrate how the assessment strategy and design ensures that those who successfully complete the programme meet the standards of proficiency (SOPs) for physiotherapists.

Reason: The programme team stated that they have not yet completed the assessment criteria specific to this programme due to the start date being so far in the future. The visitors understood this, however, for them to be able to make a judgement on the assessment strategy and design being appropriate to ensure that those who successfully complete the programme have met the SOPs for physiotherapists, they need to see the assessment criteria that will be used to assess students work, specific to this programme. The visitors therefore require the education provide to provide assessment criteria, specific to this programme, which demonstrates how the assessment strategy and design ensures that those who successfully complete the programme meet the standards of proficiency (SOPs) for physiotherapists.

6.4 Assessment methods must be employed that measure the learning outcomes.

Condition: The education provider must provide assessment criteria and clarity on assessment methods, specific to this programme, which demonstrate how assessment methods are employed that measure the learning outcomes.

Reason: The programme team stated that they have not yet completed the assessment criteria specific to this programme due to the start date being so far in the future. The visitors understood this, however, for them to be able to make a judgement on how assessment methods are employed that measure the learning outcomes, they need to see the assessment criteria that will be used to assess students work, specific to this programme. Specifically, the visitors were unable to see detail on the assessment methods that would be used for each module and how these are mapped to the learning outcomes. The visitors therefore require the education provider to provide assessment criteria, specific to this programme, which demonstrate how assessment methods are employed that measure the learning outcomes.

6.5 The measurement of student performance must be objective and ensure fitness to practise.

Condition: The education provider must provide assessment criteria and performance descriptors, specific to this programme, which demonstrate how the measurement of student performance is objective and ensures fitness to practise.

Reason: The programme team stated that they have not yet completed the assessment criteria or performance descriptors specific to this programme due to the start date being so far in the future. The visitors understood this, however, for them to be able to make a judgement on how the measurement of student performance is objective and ensures fitness to practise, they need to see the assessment criteria and performance descriptors that will be used to assess students work, specific to this programme. The visitors therefore require the education provider to provide assessment criteria and performance descriptors, specific to this programme, which demonstrate how assessment methods are employed that measure the learning outcomes.

Recommendations

3.2 The programme must be effectively managed.

Recommendation: The visitors recommend that the programme team closely monitors any changes to the programme ahead of the intended start date so that they can inform the HCPC of any changes.

Reason: The visitors are satisfied with the current proposals for module content and staff recruitment and so are satisfied this SET is met. However, the visitors note that, as the start date for this programme is so far in the future, it is possible that there will be changes made to the programme before the intended start date of September 2017. Specifically, changes to module content and the staff recruitment strategy for the programme. The visitors therefore, wish to recommend to the programme team that areas such as module content and staff recruitment are monitored closely so that the education provider can advise the HCPC of any changes where necessary.

Pamela Bagley
Kathryn Heathcote
Nicholas Drey

HCPC Condition/s

It is a condition of approval that :

SET	Condition	Observations
5.2 The number, duration and range of practice placements must be appropriate to support the delivery of the programme and the achievement of the learning outcomes.	The education provider must demonstrate that an appropriate number and range of placements will be secured ready for the start date of this programme.	We are able to provide a plan for how this will be undertaken leading up to the first placements in January 2019 but it is not in our control to secure placements at this stage for 2019. Placement providers will not confirm numbers to any university until approximately 12 months before. The NHS confirmed their commitment to support the programme at approval. I trust it will be acceptable to provide a plan detailing how will secure placements to meet this condition.
6.1 The assessment strategy and design must ensure that the student who successfully completes the programme has met the standards of proficiency for their part of the Register.	The education provider must provide assessment criteria for the different modes of assessment, specific to this programme, which demonstrate how the assessment strategy and design ensures that those who successfully complete the programme meet the standards of proficiency (SOPs) for physiotherapists.	<p>The assessment criteria provided for the validation event is the university assessment criteria that apply to all assessment modes within the course - see page 100 of 263 in the University and Faculty Policy and Procedures Document for the performance descriptors.</p> <p>The performance (assessment) criteria clearly indicate the level of knowledge, understanding and application required in relation to the learning outcomes of the module for each grade, at each level (as detailed in each module specification template). The learning outcomes have been constructively aligned to the assessment modes. Therefore, in order that the student can pass an assessment they must achieve the learning outcomes, which are appropriate for the assessment mode, and must meet 40% + university performance criteria. As modules are mapped to the standards of proficiency, successful completion of the course is dependent on meeting all standards of proficiency.</p> <p>Within the assessment brief for students, guidance will be given which will indicate how they can meet the learning outcomes in accordance with the performance criteria but this will not change the current assessment criteria.</p> <p>If this is insufficient it would be useful if the HCPC could provide more information about what is required and give some examples to demonstrate how the assessment of the learning outcomes using the university performance criteria does not enable the student to meet the standards of proficiency (SOPs) for physiotherapists so that we clearly understand what response is needed to meet this condition.</p>

		The same performance criteria is used across all HCPC approved courses, which are applied to test module learning outcomes, no problems have been identified previously.
6.4 Assessment methods must be employed that measure the learning outcomes.	The education provider must provide assessment criteria and clarity on assessment methods, specific to this programme, which demonstrate how assessment methods are employed that measure the learning outcomes.	The assessment methods employed are clearly detailed within each module specification template (MST) submitted for the validation and have been constructively aligned to the module learning outcomes. The modes of assessment will not change. Students will be provided with an assignment brief as part of the module guide and any examinations will be approved by the external examiner. For example examination questions will be sent for approval, with an outline of expected content. If the information contained in the MSTs is not sufficient to meet your needs, it would be helpful if you could provide more detail about the level of detail required and which modules this applies to. See information above related to the assessment criteria.
6.5 The measurement of student performance must be objective and ensure fitness to practise.	The education provider must provide assessment criteria and performance descriptors, specific to this programme, which demonstrate how the measurement of student performance is objective and ensures fitness to practise.	See information above related to the assessment criteria.

HCPC Recommendation/s

SET	Recommendations	Observations
3.2 The programme must be effectively managed.	The visitors recommend that the programme team closely monitors any changes to the programme ahead of the intended start date so that they can inform the HCPC of any changes.	None