Approval process report

University of Exeter, Forensic Psychology, 2023-24

Executive Summary

This is a report of the process to approve the Forensic Psychology programme at the University of Exeter. This report captures the process we have undertaken to assess the institution and programme against our standards, to ensure those who complete the proposed programme are fit to practice.

We have
- Reviewed the institution against our institution level standards and found our standards are met in this area.
- Reviewed the programme against our programme level standards and found our standards are met in this area following exploration of key themes through quality activities.
- Recommended all standards are met, and that the programme should be approved.
- Decided that all standards are met, and that the programme is approved.

Through this assessment, we have noted:
- The following areas should be referred to another HCPC process for assessment:
  - Ensuring there are an adequate number of appropriately qualified and experienced staff to deliver the programme - Visitors have suggested the education providers progress on recruiting staff prior to the commencement of the proposed programme is reviewed. This would be to ensure there was an adequate number of appropriately qualified and experienced staff to deliver the proposed programme. Therefore, the visitors recommend that:
    - prior to the commencement of the programme, we keep in regular contact with the education provider and obtain updates. We will virtually meet with them over Spring 2025 to discuss the progress made in this area. If the recruitment is not progressing as planned, we will set up a focused review case to consider this prior to the commencement of the programme.
    - if recruitment progresses as planned, we will ask the education provider to reflect on their staffing levels in Spring 2026 through the focused review process.
    The purpose of this monitoring will be to ensure appropriately qualified and experienced staff are in place for the commencement of the programme.
- The programme meets all the relevant HCPC education standards and therefore should be approved.

Previous consideration	Not applicable. This is a new programme the education provider is seeking approval for.
Decision	The Education and Training Committee (Panel) is asked to decide: • the programme is approved • whether issues identified for referral through this review should be reviewed, and if so how
Next steps	Outline next steps / future case work with the provider: • The provider's next performance review will be in the 2027-28 academic year. • Subject to the Panel's decision, we will undertake further investigations as per section 5.

Included within this report

Section 1: About this assessment

About us

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

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

Our standards

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

Our regulatory approach

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

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

The approval process

Institutions and programmes must be approved by us before they can run. The approval process is formed of two stages:
- Stage 1 – we take assurance that institution level standards are met by the institution delivering the proposed programme(s)

- Stage 2 – we assess to be assured that programme level standards are met by each proposed programme

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

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

How we make our decisions

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

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

The assessment panel for this review

We appointed the following panel members to support this review:

Nicola Bowes	Lead visitor, Practitioner Psychologist, Forensic Psychologist
Garrett Kennedy	Lead visitor, Practitioner Psychologist, Counselling Psychologist
Louise Winterburn	Education Quality Officer
Saranjit Binning	Education Quality Officer

Section 2: Institution-level assessment

The education provider context

The education provider currently delivers seven HCPC-approved programmes across two professions and including one Independent and Supplementary

Prescribing programme. It is a Higher Education provider and has been running HCPC approved programmes since 2004.

The education provider is a well-established higher education institution with three faculties. All HCPC approved programmes are based in the Faculty of Health and Life Sciences, which includes 5 departments: biosciences, Health and Care Professions, Psychology and three departments forming the medical school. This includes the Clinical and Biomedical Sciences; Health and Community Sciences; and Public Health and Sports Sciences. The proposed programme is based in the Psychology Department.

Practice areas delivered by the education provider

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

	Practice area	Delivery level		Approved since
Pre-registration	Practitioner psychologist	☐Undergraduate	☒Postgraduate	2005
	Radiographer	☒Undergraduate	☒Postgraduate	2004
Post-registration	Independent Prescribing / Supplementary prescribing			2021

Institution performance data

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

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

Data Point	Bench-mark	Value	Date	Commentary
Total intended learner numbers compared to total enrolment numbers	219	252	2024	The benchmark figure is data we have captured from previous interactions with the education provider, such as through initial programme approval, and / or through previous performance review

				assessments. Resources available for the benchmark number of learners was assessed and accepted through these processes. The value figure is the benchmark figure, plus the number of learners the provider is proposing through the new provision. We reviewed the education provider's documentation and assessed if there were sufficient resources to deliver the programme through [Quality theme 1]().
Learners – Aggregation of percentage not continuing	3%	5%	2020-21	This data was sourced from a data delivery. This means the data is a bespoke Higher Education Statistics Agency (HESA) data return, filtered bases on HCPC-related subjects. The data point is above the benchmark, which suggests the provider is performing below sector norms. When compared to the previous year's data point, the education provider's performance has dropped by 2% We did not explore this data point through this assessment because there was no impact on SETs considered.
Graduates – Aggregation of percentage in employment / further study	93%	95%	2020-21	This data was sourced from a data delivery. This means the data is a bespoke HESA data return, filtered bases on HCPC-related subjects.

				The data point is above the benchmark, which suggests the provider is performing above sector norms. When compared to the previous year's data point, the education provider's performance has dropped by 2%. We did not explore this data point through this assessment because there was no impact on SETs considered.
Learner positivity score	77.5%	75.7%	2023	This National Student Survey (NSS) positivity score data was sourced at the subject level. This means the data is for HCPC-related subjects. The data point is below the benchmark, which suggests the provider is performing below sector norms. We did not explore this data point through this assessment because there was no impact on SETs considered.
HCPC performance review cycle length	N/A	2027-28	Five years	The education provider was given the maximum review period of five years at their last performance review.

The route through stage 1

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

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

<u>Admissions</u>

Findings on alignment with existing provision:
- **Information for applicants** –
  - o Admissions information and requirements are published via the education provider's admissions pages on their website. This includes any pre-requisite qualifications that learners may be required to meet.
  - o A webpage has been set up with information for applicants about the new programme, entry requirements and selection process. Contact details of programme staff are also included so that applicants can make direct contact with appropriate staff. The webpages are updated regularly throughout the year by the department team. Information on admissions requirements is also available at open days.
  - o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.
- **Assessing English language, character, and health** –
  - o The education provider's online 'English Requirements Policy' lists the different qualifications and tests applicants need to pass before they can enrol. These include qualifications such as GCSE's (C), A-levels (D) and Baccalaureates (60-70%) need to have been passed within the last seven years.
  - o International students need to show they have the required level of English language to study this course. This is usually International English Language Testing System (IELTS) level 6.5 overall.
  - o The education provider has an 'Admissions Criminal and Convictions Policy' which also references their 'Fitness to Practice' policy. Applicants must undergo an Enhanced (Disclosure Barring Service) DBS check.
  - o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.
- **Prior learning and experience (AP(E)L)** –
  - o The 'University's Learning and Teaching Support Handbook' sets out the institutional policies for assessing applicants' prior learning and experience.
  - o Profession specific requirements are outlined on each relevant programme webpage and includes information on maximum credit and level. Appropriate assessments may be set so that applicants can demonstrate achievement of module learning outcomes prior to admission.

- o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.
- **Equality, diversity and inclusion** –
  - o The education provider has an 'Admissions Policy Group' which has over-arching responsibility for ensuring the admissions processes. Each programme delivered is not only compliant with the law but is also actively aims to increase diversity and promote equality.
  - o The 'Equality Diversity Inclusion (EDI) Vision' document outlines the institutions' strategic objectives to achieve compliance with its legal duties under the Equality Act 2010. This supports a positive inclusive culture and national best practice.
  - o The EDI vision documents are available to all applicants, learners and staff via the website.
  - o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.

Non-alignment requiring further assessment: None.

Management and governance

Findings on alignment with existing provision:
- **Ability to deliver provision to expected threshold level of entry to the Register[1]** –
  - o The education provider is a higher education institution, which is aligned to requirements set by the Office for Students and the Quality Assurance Agency. This enables the education provider to deliver higher education qualifications including those required within SET 1. For the proposed new programme, this would be Clinical and Forensic Psychologists to deliver at level 8 (PhD/ doctorate).
  - o Existing and developing programmes are reviewed by the College Scrutiny and Steering Groups. The proposed programme has been subject to this review to ensure threshold levels are met. Internal validation is also progressed in line with the Postgraduate Research Quality and Standards Team and the 'Teaching Quality Assurance Manual'. This is specifically for professional doctorate postgraduate research programmes. These policies apply to the proposed provision.
  - o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.
- **Sustainability of provision** –

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

- o The 'Teaching Quality Assurance Manual' sets out the structure and governance policies which ensure sustainability of provision at the education provider.
- o All proposals to expand provision are required to go through institution approval processes which also includes consideration of sustainability. Business planning process includes a budgeting plan for any additional staff to support the design and delivery of new programmes. These policies apply to the proposed provision.
- o The education provider uses a Quality Review method which includes annual module reviews and programme reviews to ensure they stay relevant, sustainable, and current. This incorporates external examiner reports, consultation with employers, learners, and staff evaluation.
- o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.
- **Effective programme delivery** –
  - o The education provider uses institution-wide policies and procedures to ensure they recruit appropriately qualified and experienced staff. These are the 'Teaching Quality Assurance Manual (TQA) – Learning and Teaching Support Handbook' and the 'College Management of Education: Code of Good Practice'. These policies apply to the proposed provision.
  - o For staffing of the proposed new programme, market forces allowances (matching NHS Consultant grade) have been added to posts to ensure that they are sustainable and recruited staff are retained in a competitive job market for forensic psychologists.
  - o Management of the proposed programme will be administered by the Senior Management Group which will involve the programme director, portfolio director and senior/leadership staff involved in running the programme.
  - o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.
- **Effective staff management and development** –
  - o The education provider has staff management and development processes in place, which are outlined in the Teaching Quality Assurance Manual. All academic staff are required to have, or to work towards, a nationally recognised teaching qualification. This includes either a Post Graduate Certificate in Teaching in Higher Education (PGCTHE), and/or fellowship of the Higher Education Academy (HEA). The is formally documented by Human Resources.
  - o There are policies and procedures for professional development and annual appraisal that all academic staff are required to engage. This supports professional development and offers a variety of support methods including mentors, faculty development fund, peer reviews and regular staff development reviews.

- o Staff who are new to academic environments are supported to undertake specific professional development (Postgraduate Certificate in Academic Practice). New employees are assigned a mentor and undergo annual performance reviews with their line managers.
  - o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.
- **Partnerships, which are managed at the institution level** –
  - o The education provider's 'Academic Partnerships Strategy and Governance Policy' sets out their continued plan to establish formal relationships with other institutions. Every partnership will be reviewed at the end of a specified period which is normally 5 years to determine whether it should be renewed.
  - o There are three stages to any formal partnership approval. The relevant Faculty Director or Dean first signs for approval, then the strategic approval committee determines whether the partnership aligns with current strategic aims. The last step is through the Academic Partnerships Quality Approval Group. This process aims to ensure the partnership links closely with the education provider's global plans and strategies. It also ensures and evidences the quality of the partner organisation, its potential learners, and its delivery and confirms ownership of the curriculum.
  - o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.

Non-alignment requiring further assessment: None.

Quality, monitoring, and evaluation

Findings on alignment with existing provision:
- **Academic quality** –
  - o The policies and procedures for quality, monitoring and evaluation are outlined in the education provider's 'Teaching Quality and Assurance Manual' and the 'Quality Review and Enhancement for Postgraduate Research Programmes'. These policies and procedures apply to all programmes.
  - o Module leaders use multiple data sets, including learner feedback, progression and achievement data and external examiner reports to carry out annual reviews of modules. These reviews are then scrutinised by the programme director to enable a summary review to be followed up at a higher level. This is used to highlight areas of best practice or addresses any areas of concern to ensure academic quality.
  - o External Examiners are involved with all programmes and are a key part of the quality assurance process and provide input into all aspects

of assessment. This includes their separate reports specifically for postgraduate professional programmes where they additionally examine pre-thesis and via modules.

- o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.

- **Practice quality, including the establishment of safe and supporting practice learning environments** –
  - o All practice-based learning sites are audited annually, and additional guidance and support is provided where needed. All learners are expected to adhere to the education provider's health and safety policies and procedures alongside the policies and procedures of the placement or workplace. There is a 'Raising Concerns Policy' which enables learners, staff, and stakeholders to raise concerns for further investigation through formal and informal procedures.
  - o All practice placement educators are provided with a 'Designated Prescribing Practitioner Handbook' and invited to attend an online induction session. This provides information on roles and responsibilities, the programme structure, and requirements for assessment. The handbook also contains the contact details of the module leaders, so that practice educators/supervisors can contact them directly should they have any concerns about learners or unsure about any aspect of the training.
  - o Learners and practice placement educators are provided with a copy of the 'Portfolio of Practice' at the start of the programme. This provides guidance on how competencies can be evidenced during practice placements. This ensures learners meet the required competencies by the end of the programme.
  - o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.

- **Learner involvement** –
  - o There are several forums where learner involvement is encouraged, including Student Staff Liaison Committee meetings, PGR Liaison Forums, Teaching Excellence Monitoring Meetings, and Quality Review processes (via action plans, thematic reports, meetings). The education provider stated that learner involvement is sought at all stages of programme development and reviews. Learners are actively encouraged to take part in discussions and to provide feedback at all relevant forums.
  - o Learner feedback is also gathered at the end of each module and learner representatives are invited to monthly informal feedback meetings with programme leaders.
  - o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.

- **Service user and carer involvement** –
    - o The education provider has a Patient Involvement in Medical Education (PIME) group. PIME involvement is embedded within all programmes. There is continuous direct contact with service users and carers on placements and in the workplace. A representative from the PIME group attends initial programme development workshops and is involved in admissions and teaching on some modules. Presentations are also given to a wider PIME group, which also includes carer perspectives, and which includes a feedback, question and answer session.
    - o The 'Teaching Quality Assurance Manual – Quality Review' sets out the service user and carer involvement in the review of programmes. Other external colleagues such as external advisors, professionals from industry, and alumni, are also involved in the programme review process.
    - o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.

Non-alignment requiring further assessment: None.

Learners

Findings on alignment with existing provision:
- **Support** –
    - o The education provider provides a range of accessible services to support learners with pastoral and academic needs. The education provider also operates a Health, Wellbeing and Support for Study procedure. The purpose of this procedure is to provide learners with support if they are experiencing medical or personal problems and to put a plan in place to keep them on track with their studies. A Welfare Adviser is also available to provide learners with support and offers drop-in sessions.
    - o Learners are provided with an Academic Personal Tutor, throughout their programme of study, who provides support with academic, personal, and professional development. The 'Teaching Quality Assurance Manual' sets out the code of good practice for Academic Personal Tutoring and the role that the Personal Tutor provides in supporting learners.
    - o The complaints and whistleblowing policies and procedures are also accessible on the education provider's website alongside the health and safety policies.
    - o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.
- **Ongoing suitability** –

- o The 'Fitness to Practice Regulations' applies to all learners on regulated programmes. To ensure suitability, all learners are required to complete an annual declaration of fitness to practice and submit this to the programme team. This declaration enables the programme team to arrange support and make reasonable adjustments where required and, in some cases, arrange health screenings for practice-based training.
  - o The education provider has processes in place whereby any learner who declares an existing or emerging health condition that impacts their ability to study or limits their activities will be assessed via their employer's Occupational Health department. They will also be reviewed regularly through the Health and Conduct Committee with referral to appropriate services if required such as student study support, wellbeing services.
  - o The ongoing suitability of learners' conduct, character, and health is regularly assessed by academic tutorials, progression meetings with learners, and visiting tutors.
  - o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.
- **Learning with and from other learners and professionals (IPL/E)** –
  - o The education provider has a range of healthcare professionals, and the curriculum incorporates shared learning experiences with other healthcare programmes. There is an established Interprofessional Learning Committee, which is attended by representatives from all programmes and interprofessional activities are scheduled every year through the Committee.
  - o Programme Specifications are provided to learners which include details of staff and relevant professionals involved in the delivery of teaching and learning across the healthcare professions. Institutional level handbooks and website pages also include relevant information. Using this information enables learners to understand how interprofessional leaning is embedded within their programme.
  - o The delivery of all joint modules on the proposed new programme will be guided at the departmental level. There are several taught and research modules across programmes.
  - o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.
- **Equality, diversity and inclusion** –
  - o The 'Equality, Diversity and Inclusion (EDI) Vision' document outlines the strategic objectives and the education provider's commitment to equality and diversity. All equality, diversity and inclusion policies and procedures are accessible on the education provider's website and will apply to the proposed programme.

- o The education provider has a dedicated 'Exeter Speaks Out' webpage, which advises learners how to report export instances of harassment, bullying or inappropriate behaviour. Learners can access support from the Dignity and Respect Advisors, who are a team of trained staff providing a confidential service for those involved in cases of harassment or bullying. Incidents can be reported informally, through a formal complaint, or reported anonymously. The webpage also provides more information on this for learners.
  - o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.

Non-alignment requiring further assessment: None.

Assessment

Findings on alignment with existing provision:
- **Objectivity** –
  - o The 'Teaching Quality Assurance Manual' advises on the principles for setting assessments and ensures consistency and fairness across all programmes. External examiners are also involved with all assessments and provide independent input into the assessments in accordance with the education provider's procedures. These principles will apply to the assessments for the proposed programme.
  - o The 'External Examining Handbook' is used to outline the responsibilities and role of external examiners in greater detail. They are responsible for checking that assessment is conducted in accordance with procedures and that marking is consistent with sector-wide standards. External examiners must be satisfied that the assessment requirements enable learners to be fairly assessed in relation to programme intended learning outcomes. External examiners submit an annual report to the Discipline Assessment Progression and Awarding Committee (APAC). This report may include recommendations for improvements and highlight any good practice.
  - o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.
- **Progression and achievement** –
  - o All assessment processes comply with the education provider's 'Teaching Quality Assurance Manual' and the policies and procedures are on the education provider's website. This manual, and referenced policies and procedures, will apply to the proposed programme.
  - o Applicants and current learners are advised that only successful completion of an approved HCPC programme complies with eligibility for admission to the Register. This information is provided on the online

admission programme webpages. For current learners, this information is also provided in Programme Specifications.

- o The education provider has a system called 'ExLibris One Time Code' for engagement monitoring. It allows those running teaching sessions to check whether learners are attending. Repeated non- attendance or failure to submit work is reported to the Personal Tutor and to the Director of Education for appropriate action.
- o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.

- **Appeals** –
  - o The education provider has a 'Student Academic Appeals Procedure' and all learners have a right of appeal against:
    - o Academic decisions and recommendations made by Boards of Examiners and Faculty Boards (or Deans of Faculty acting on their behalf) that affect their academic progress.
    - o Post-graduate research students only: decisions about Covid-19 funded extensions or fees scholarship.
  - o The appeals process is overseen by the University Cases Office and will apply to the proposed programme.
  - o This aligns with our understanding of how the education provider operates. The approach is institution-wide and will apply to the proposed new programme.

Non-alignment requiring further assessment: None.

Outcomes from stage 1

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

Education and training delivered by this institution is underpinned by the provision of the following key facilities:

- Currently the staff team consists of a Portfolio director 0.5 FTE, Project coordinator 0.4 FTE and two Programme directors who are also forensic psychologists 0.2 FTE. There are plans to recruit further staff for which they have received approval from the Finance department. This will include an academic director 0.2 FTE, research director 0.2 FTE and tutors 0.4 FTE.
- The education provider offers a range of facilities to support the programme. These include library and wellbeing support services and access to specialist areas for Psychology learners such as Washington Singer and the Mood Disorders Centre where there are specialist learning spaces.

Section 3: Programme-level assessment

Programmes considered through this assessment

Programme name	Mode of study	Profession (including modality) / entitlement	Proposed learner number, and frequency	Proposed start date
Doctor of Forensic Psychology	FT (Full time)	Practitioner psychologist, Forensic psychologist	33 learners, 1 cohort per year	01/09/2025

Stage 2 assessment – provider submission

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

Quality themes identified for further exploration

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

We have reported on how the provider meets standards, including the areas below, through the Findings section.

Quality theme 1 – ensuring there are an adequate number of appropriately qualified and experienced staff to deliver the programme

Quality activity 1
Area for further exploration: The education provider submitted staff CVs, which provided an overview of the teams qualifications and experience to deliver the programme. They noted there were only two forensic psychologists and one researcher to deliver the programme at this stage, which equated to 0.9 FTE, which they considered would be insufficient to deliver effective learning for the proposed number of learners. Visitors acknowledged this, however it was not clear to them what plans the education provider had to ensure there were an adequate number of staff to deliver the proposed programme. Additionally, it was not clear to them if the

two forensic psychologists were dedicated to the proposed programme on a full-time basis.

Visitors therefore requested further information to understand what plans the education provider had to recruit additional staff and a timeframe for this to ensure there were sufficient staff to deliver the proposed programme. In addition to this, clarification was sought on the intake numbers and how staffing levels would be managed as learner numbers increase.

Quality activities agreed to explore theme further: We agreed to explore this area further by requesting email clarification from the education provider. We considered the email clarification would be the most effective method to understand how the education provider would ensure there would be an adequate number of experienced staff to deliver all areas of the proposed programme.

Outcomes of exploration: In their response, the education provider explained the current staffing they had in place was for the purposes of the development of the programme. This, however, would be increasing from August 2025 from 0.4FTE to 0.6FTE for both forensic psychologists. The DClinPGR Portfolio Director would remain at 0.2FTE for Leadership and Research Quality support. Alongside this they would also be recruiting to the following posts:

- Clinical Director 0.2 to 0.6FTE (Forensic Psychology Qualified Required)
- Research Director 0.2 to 0.6FTE (Research experience in a forensic or related area)
- Academic Director 0.2 to 0.6FTE (Forensic Psychology Qualified Required)
- Research Tutor(s) 0.3 to 2.3FTE (Research experience in a forensic or related area)
- Academic/Clinical Tutor Year one 0.3FTE (Forensic Psychology Qualified Required)
- Academic Tutor Year 2: 0.5; year three 1.5FTE (Forensic Psychology Qualified Required)
- Clinical Tutors Year 2: 0.5; year three 2.1FTE (Forensic Psychology Qualified Required)

The education provider outlined how the proposed staffing levels were based on the British Psychological Society (BPS) staff: student ratio requirement, which was 10:1, with a current design to recruit staffing to provide a 9:1 ratio. In addition to the staffing above, the education provider would also be involving external speakers to assist with the delivery of the programme. These speakers would be experienced in forensic psychology and seen as experts and would therefore contribute to the teaching of the programme. Other external involvement with delivering the programme would come from the expert by experience group. Individuals from this group would be involved with the delivery of some elements of the programme, where they would share real life experiences.

Clarification was also received in relation to the intake numbers. The education provider confirmed they would have one cohort of 25 learners each academic year, which would mean 75 learners over a three-year period.

Visitors acknowledged the additional information provided by the education provider, however remained concerned about the staffing levels and the education provider recruiting appropriate staff in time for the commencement of the programme. Further information was therefore sought from the education provider to outline their contingency plan if they were unable to recruit the required number of staff.

Quality activity 2
Area for further exploration: The information provided through quality activity 1 assured visitors there were plans in place to recruit staff for the proposed programme. However, the plan did not provide details of what the education provider would do if they were unsuccessful in recruiting staff before the commencement of the programme. Visitors therefore requested further information from the education provider outlining what their contingency plan would be if they were unable to recruit the required number of staff.

Outcomes of exploration: The education provider submitted a contingency plan, which outlined the actions the education provider would take if they were unsuccessful in recruiting staff. One of the actions included reducing the number of learners they would accept on the programme to ensure they stayed within the required staff: student ratio of 10:1 (BPS guidance). We were also informed they had received authorisation for funding for some of the posts to be released earlier than originally planned. This meant they could therefore be advertised from January 2025. This was a positive outcome as the original agreement was for the funding for these posts to be released when the programme had gained approval from HCPC.

Based on the projected number of learners and the current staffing levels it was clear there was an adequate number of staff in place to develop the proposed programme. Visitors also acknowledged the education provider's plans, including contingency plans, to ensure they had sufficient staff in place by September 2025 to deliver the programme. Based on these plans, the visitors were satisfied that this quality theme had been met at threshold. However, visitors were concerned that, if due to some unforeseen circumstances, the plans were not followed, how there would be an adequate number of appropriately qualified staff recruited in time for the start of the programme.

The visitors have therefore suggested the education providers progress on recruiting staff prior to the commencement of the proposed programme is reviewed. This would be to ensure there was an adequate number of appropriately qualified and experienced staff to deliver the proposed programme. Therefore, the visitors recommend that:

- prior to the commencement of the programme, we keep in regular contact with the education provider and obtain updates. We will virtually meet with

them over Spring 2025 to discuss the progress made in this area. If the recruitment is not progressing as planned, we will set up a focused review case to consider this prior to the commencement of the programme.

- if recruitment progresses as planned, we will ask the education provider to reflect on their staffing levels in Spring 2026 through the focused review process.

The purpose of this monitoring will be to ensure appropriately qualified and experienced staff are in place for the commencement of the programme.

Section 4: Findings

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

Conditions

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

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

Overall findings on how standards are met

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

Findings of the assessment panel:
- **SET 1: Level of qualification for entry to the Register** – this standard is covered through institution-level assessment.
- **SET 2: Programme admissions** –
  - The selection and entry criteria are clearly articulated and set at an appropriate level for the proposed programme. The entry criteria is available on the education provider's website and is accessible to applicants. The information available includes academic grade requirements and criminal and health check requirements. In addition to this, the webpage also provides applicants with contact details for the programme staff for queries.
  - The visitors therefore considered the relevant standard within this SET area met.

- **SET 3: Programme governance, management and leadership** –
  - There was evidence of collaboration with a wide range of stakeholders across the profession. They were involved with the development of the programme and will continue to be involved when the programme commences. It was also noted the education provider were collaborating with some stakeholders on an individual basis to cover a wider area of services, which would provide learners with a wider range of opportunities.
  - Through clarification, we noted the education provider was considering developing practice-based learning opportunities within prison settings. These opportunities would enable learners to access a range of settings and provide them with diverse experiences.
  - Evidence of a clear process was provided to ensure the availability and capacity of practice-based learning. Visitors considered there were appropriate mechanisms to source and manage practice-based learning and acknowledged the outreach activities that were being undertaken.
  - The education provider outlined the range of resources that included handbooks, teaching spaces, Microsoft Teams and ELE, which was an online learning environment that both learners and practice educators could access. Visitors noted the process to monitor, review and update these resources annually.
  - The staff CVs demonstrated there were an appropriate number of staff who had relevant knowledge and experience to develop the proposed programme.
  - Alongside this there was also a clear plan, including contingency plans, that outlined how the delivery team would expand prior to the commencement of the programme. Through Quality theme 1, visitors received assurances of how the education provider would ensure there were an adequate number of experienced staff with relevant skills and knowledge to deliver the proposed programme.
  - The visitors therefore considered the relevant standards within this SET area met.
- **SET 4: Programme design and delivery** –
  - The learning outcomes were mapped against the Standards of Proficiency (SOPs) mapping document and outlined in the module descriptors. The structure of the modules ensured learners met the SOPs.
  - Professional behaviours and the Standards of conduct, performance and ethics were embedded throughout the programme to ensure learners understand the expectations. This has been considered in the programme development, course documentation and module descriptors.
  - The philosophy, core values, skills and knowledge base were clearly articulated in the structure and delivery of the programme. This was evidenced through the module descriptors and programme

specification. It was noted how the BPS core roles and standards for practice were also considered when this programme was being developed.

- o There were a range of processes to review and update the curriculum to ensure it remained up to date. This included the programme team reviewing the programme content regularly and applying the internal quality assurance and monitoring processes. It was noted in addition to this, the education provider regularly receives feedback from stakeholders and involves forensic psychologists with teaching, which assists with ensuring the programme is up to date.
- o The structure of the programme ensured the integration of theory and practice. Visitors noted how clearly this was covered across the programme and how it was embedded into the delivery model and modules.
- o In the programme specification there was evidence of a range of learning and teaching methods being used, which were suitable for professional learning. These included a combination of face to face and online teaching, workshops, supervision and problem based learning.
- o Visitors noted how the design of the programme enabled learners to meet learning outcomes and develop their autonomous and reflective thinking skills throughout the programme. This was evidenced through the programme specification and handbook.
- o The structure of the curriculum ensures evidence-based practice is embedded throughout the programme across all three years. This was demonstrated through the clinical practice paperwork, reflective logs and research based training and evidenced in the modules descriptors.
- o The visitors therefore considered the relevant standard within this SET area met.
- **SET 5: Practice-based learning** –
  - o Through clarification, we noted the education provider worked closely with stakeholders to secure a range of practice-based learning opportunities. This included regular meetings to discuss the development of the programme regarding placement provision and the structure of practice-based learning for learners. In addition to this, the education provider engaged individually with some stakeholders to review and sign agreements to confirm the number of placements they were able to offer. This approach ensured there was appropriate input from stakeholders to provide learners with sufficient opportunities to meet the learning outcomes.
  - o There was evidence of practice-based learning being integrated throughout the programme. The programme design, structure, duration and range enabled learners to engage with practice through block weeks, weekly teaching and undertaking three long placements, which would provide them with a range of experience. This demonstrated the programme had been structured to enable learners to maximise the opportunities they had access to and to gain knowledge and skills through practice-based learning.

- o It was noted there were appropriate processes to ensure there were an adequate number of practice educators involved with practice-based learning. Part of this process was to ensure practice educators were registered and had experience of working in a forensic setting.
  - o The process to ensure practice educators had relevant knowledge, skills and experience was clear. Alongside the requirement for them to be registered and have experience of forensic psychology, the education provider offered them training to prepare them to support learners. This training was delivered annually and prepared practice educators to supervise learners and was also used as an opportunity to enhance their understanding of the programme requirements and processes.
  - o The visitors therefore considered the relevant standard within this SET area met.
- **SET 6: Assessment** –
  - o The programme was clearly mapped against the HCPC standards of proficiency and the assessment strategy ensured learners met these. The evidence clearly demonstrated the assessments enabled learners to meet the standards of proficiency.
  - o All assessments are linked directly to clinical practice, which enables learners to demonstrate they meet the expectations of professional behaviour, including the standards of conduct, performance and ethics.
  - o Assessment methods are clear and appropriate and are outlined in the module descriptors. It was noted the assessments were varied and linked directly to areas of professional practice, which enabled learners to meet the learning outcomes.

Risks identified which may impact on performance: Visitors received assurances of how the education provider would ensure there were an adequate number of experienced staff with relevant skills and knowledge to deliver the proposed programme. However, visitors were concerned that, if due to some unforeseen circumstances, the plans were not followed, how there would be an adequate number of appropriately qualified staff recruited in time for the start of the programme. This was explored further through Quality theme 1

Section 5: Referrals

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

Referrals to the focused review process

Ensuring there are an adequate number of appropriately qualified and experienced staff to deliver the programme

Summary of issue: Visitors have suggested the education providers progress on recruiting staff prior to the commencement of the proposed programme is reviewed. This would be to ensure there was an adequate number of appropriately qualified and experienced staff to deliver the proposed programme. Therefore, the visitors recommend that:

- prior to the commencement of the programme, we keep in regular contact with the education provider and obtain updates. We will virtually meet with them over Spring 2025 to discuss the progress made in this area. If the recruitment is not progressing as planned, we will set up a focused review case to consider this prior to the commencement of the programme.
- if recruitment progresses as planned, we will ask the education provider to reflect on their staffing levels in Spring 2026 through the focused review process.

The purpose of this monitoring will be to ensure appropriately qualified and experienced staff are in place for the commencement of the programme.

Section 6: Decision on approval process outcomes

Assessment panel recommendation

Based on the findings detailed in section 4, the visitors recommend to the Education and Training Committee that:

- All standards are met, and therefore the programme should be approved
- The issues identified for referral through this review should be carried out in accordance with the details contained in section 5 of this report

Education and Training Committee decision

Education and Training Committee considered the assessment panel's recommendations and the findings which support these. The education provider was also provided with the opportunity to submit any observations they had on the conclusions reached.

Based on all information presented to them, the Committee decided that:
- The programme is approved.
- The education provider's next engagement with the performance review process should be in the 2027-28 academic year.

Reason for this decision: The Education and Training Committee Panel agreed with the findings of the visitors and were satisfied with the recommendation to approve the programme.

Appendix 1 – summary report

If the education provider does not provide observations, only this summary report (rather than the whole report) will be provided to the Education and Training Committee (Panel) to enable their decision on approval. The lead visitors confirm this is an accurate summary of their recommendation, and the nature, quality and facilities of the provision.

Education provider	Case reference	Lead visitors	Quality of provision	Facilities provided
University of Exeter	CAS-01538-W3C7C9	Garrett Kennedy & Nicola Bowes	Through this assessment, we have noted: • The following areas should be referred to another HCPC process for assessment: o Ensuring there are an adequate number of appropriately qualified and experienced staff to deliver the programme - Visitors have suggested the education providers progress on recruiting staff prior to the commencement of the proposed programme is reviewed. This would be to ensure there was an adequate	Education and training delivered by this institution is underpinned by the provision of the following key facilities: • Currently the staff team consists of a Portfolio director 0.5 FTE, Project coordinator 0.4 FTE and two Programme directors who are also forensic psychologists 0.2 FTE. There are plans to recruit further staff for which they have received approval from the Finance department. This will include an academic director 0.2 FTE, research director 0.2 FTE and tutors 0.4 FTE. • The education provider offers a range of facilities to support the programme.

				number of appropriately qualified and experienced staff to deliver the proposed programme. Therefore, the visitors recommend that: • prior to the commencement of the programme, we keep in regular contact with the education provider and obtain updates. We will virtually meet with them over Spring 2025 to discuss the progress made in this area. If the recruitment is not progressing as planned,	These include library and wellbeing support services and access to specialist areas for Psychology learners such as Washington Singer and the Mood Disorders Centre where there are specialist learning spaces.

				we will set up a focused review case to consider this prior to the commencement of the programme. ▪ if recruitment progresses as planned, we will ask the education provider to reflect on their staffing levels in Spring 2026 through the focused review process. The purpose of this monitoring will be to ensure appropriately qualified and experienced staff are in place for the commencement of the programme.	

Programmes

Programme name	Mode of study	Nature of provision

Doctor of Forensic Psychology		• Taught (HEI)

Appendix 2 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
BSc (Hons) Diagnostic Radiography and Imaging	WBL (Work based learning)	Radiographer	Diagnostic radiographer		01/03/2020
BSc (Hons) Medical Imaging (Diagnostic Radiography)	FT (Full time)	Radiographer	Diagnostic radiographer		01/09/2004
Doctorate in Clinical Psychology	FT (Full time)	Practitioner psychologist	Clinical psychologist		01/10/2010
Educational, Child and Community Psychology (D.Ed.Psy)	FT (Full time)	Practitioner psychologist	Educational psychologist		01/01/2005
MSc Diagnostic Radiography & Imaging (Pre-Registration)	WBL (Work based learning)	Radiographer	Diagnostic radiographer		01/11/2021
MSci Medical Imaging (Diagnostic Radiography)	FT (Full time)	Radiographer	Diagnostic radiographer		19/09/2022
Practice Certificate in Independent and Supplementary Prescribing	PT (Part time)			Supplementary prescribing; Independent prescribing	01/10/2021