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## Approval process report

Keele University, Speech and language therapy, 2023-24

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### Executive Summary

This is a report of the process to approve a speech and language therapy programme at Keele University. 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 programme meets all the relevant HCPC education standards and therefore should be approved.

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Previous consideration	Not applicable. This assessment was not referred from another process.
Decision	The Education and Training Committee (Panel) is asked to decide: <ul style="list-style-type: none"><li>• the programme is approved.</li></ul>
Next steps	Outline next steps / future case work with the provider: <ul style="list-style-type: none"><li>• The provider's next performance review will be in the 2028-29 academic year.</li><li>• The education provider is currently seeking approval for an Occupational Therapy and Paramedic programme through the approval process. Both programmes are due to start in September 2025.</li></ul>

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## Section 1: About this assessment

### About us

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

This is a report on the approval process undertaken by the HCPC to ensure that the 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:

Lucy Myers	Lead visitor, Speech and language therapist
Gemma Howlett	Lead visitor, Paramedic
John Archibald	Education Quality Officer
Tracey Samuel-Smith	Education Manager
Saranjit Binning	Education Quality Officer

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

### **The education provider context**

The education provider currently delivers eleven HCPC-approved programmes across six professions. It is a Higher Education Institution and has been running HCPC approved programmes since 1996. This includes one post-registration programme for independent and supplementary prescribing annotations.

The School of Allied Health Professions is based in the Faculty of Medicine and Health Sciences. The proposed programme will also be based in this School alongside other HCPC approved programmes, which includes physiotherapy and radiography.

They engaged with the performance review process in 2023-24 and achieved a five year monitoring period.

### 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 2](#) of this report.

	Practice area	Delivery level		Approved since
<b>Pre-registration</b>	Biomedical scientist	<input checked="" type="checkbox"/> Undergraduate	<input type="checkbox"/> Postgraduate	2009
	Occupational therapist	<input checked="" type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	2024
	Paramedic	<input checked="" type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	2021
	Physiotherapist	<input checked="" type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	2018
	Prosthetist / Orthotist	<input type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	2022
	Radiographer	<input checked="" type="checkbox"/> Undergraduate	<input type="checkbox"/> Postgraduate	2017
<b>Post-registration</b>	Independent Prescribing / Supplementary prescribing		2014	

### Institution performance data

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

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

Data Point	Benchmark	Value	Date	Commentary
Total intended learner numbers compared to total	450	500	29/02/24	The benchmark figure is data we have captured from previous interactions with the education provider, such as through initial programme approval, and / or through

enrolment numbers				<p>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.</p> <p>We reviewed the education provider's documentation and assessed if there were sufficient resources to deliver the programme. The visitors were satisfied with the information provided.</p>
Learners – Aggregation of percentage not continuing	3%	2%	2020-21	<p>This data was sourced from a data delivery. This means the data is a bespoke HESA data return, filtered bases on HCPC-related subjects.</p> <p>The data point is below the benchmark, which suggests the provider is performing above sector norms.</p> <p>When compared to the previous year's data point, the education provider's performance has dropped by 1%.</p>
Graduates – Aggregation of percentage in employment / further study	93%	92%	2020-21	<p>This data was sourced from a data delivery. This means the data is a bespoke HESA data return, filtered bases on HCPC-related subjects.</p> <p>The data point is below the benchmark, which</p>

				<p>suggests the provider is performing below sector norms.</p> <p>When compared to the previous year's data point, the education provider's performance has dropped by 5%. Visitors may want to consider exploring the reasons for the drop in this area.</p>
Learner satisfaction	76.3%	80.0%	2023	<p>This National Student Survey (NSS) positivity score data was sourced at the subject level. This means the data is for HCPC-related subjects.</p> <p>The data point is above the benchmark, which suggests the provider is performing above sector norms.</p>

### The route through stage 1

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

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

#### Admissions

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

- **Information for applicants –**
  - The education provider's website provides information, including a breakdown of the entry requirements for all programmes, academic grade requirements, criminal records declaration, health check requirements, and the requirement to attend an interview.
  - Programme specification documents are available for all programmes. These provide full information about programmes for a specific year of entry. They include information about fees and additional costs such as membership of professional bodies. Copies of programme specifications are sent to applicants.

- Applicants are provided with admissions information during open day talks.
- This aligns with our understanding of how the education provider runs programmes.
- We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Assessing English language, character, and health –**
  - The education provider sets English language entry requirements at programme level. Applicants from non-English-speaking countries must have the required International English Language Testing System (IELTS) score. For undergraduate programmes, applicants must have a GCSE in English. For postgraduate programmes, applicants must have either an honours degree from a UK university or the required IELTS grade. The applicant interview policy is set at an institution level and applicants' English language skills are assessed as part of the interview process.
  - The criminal record declaration procedure is set at education provider level. Applicants are required to declare any criminal convictions. The education provider has a policy about the disclosure and barring service (DBS) which applicants need to satisfy.
  - Applicants are required to obtain occupational health clearance. This is set at a programme level and information is contained on the website and in programme specifications.
  - This aligns with our understanding of how the education provider runs programmes.
  - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Prior learning and experience (AP(E)L) –**
  - The education provider has a Recognition of Prior Learning and Experience (RPEL) process which applies to all programmes where RPEL is permitted. Each application is considered individually by the relevant programme director and school, using the policy to assess suitability of the prior learning.
  - This aligns with our understanding of how the education provider runs programmes.
  - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Equality, diversity and inclusion –**
  - The education provider informed us they are committed to ensuring equality for staff, learners, and applicants. They are a member of the Race Equality Charter, Athena Swan, Stonewall Diversity Champion, and a Disability Confident Employer.
  - All staff involved in interviewing are required to do equality, diversity, and inclusion training. Interviews are undertaken by a minimum of two people which the education provider aims to eliminate the potential for bias from one individual.
  - The education provider's admissions policy ensures interviewers ensure equal opportunities are maintained. This includes seeking further support from learner support resources and making reasonable adjustments if both are necessary.



- This aligns with our understanding of how the education provider runs programmes.
- We think this as the education provider has indicated there have not been any changes to how they meet this area.

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

### Management and governance

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

- **Ability to deliver provision to expected threshold level of entry to the Register<sup>1</sup> –**
  - There are academic standards at the education provider level which conform to the Quality Assurance Agency's Framework for Higher Education Qualifications levels and subject benchmark statements where applicable.
  - Programmes are validated through Standing Validation Panels. These confirm the modules and programme are at the correct level to achieve the award.
  - Annual programme reviews take place and external examiners comment on benchmark statements where applicable.
  - This aligns with our understanding of how the education provider runs programmes.
  - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Sustainability of provision –**
  - Each school within the education provider has a budget which is reviewed regularly by the Faculty Management Accountant.
  - All modules and programmes are reviewed regularly using education provider quality assurance processes to ensure they remain fit for purpose.
  - Stakeholders are involved in the development of new provision and are consulted during the revalidation process to ensure the programmes meet the needs of the future workforce for the professions.
  - This aligns with our understanding of how the education provider runs programmes.
  - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Effective programme delivery –**
  - Education provider governance structures are standard for all programmes. Programme level meetings report into the School Education Committee. This reports to the Faculty Education Committee and ultimately the University Education Committee.
  - Education provider regulations provide the framework for programme management.
  - This aligns with our understanding of how the education provider runs programmes.

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

- We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Effective staff management and development –**
  - The education provider has a probation procedure for all staff. There is a supportive and developmental probation process for newly appointed lecturers with less than three years' experience in an academic role as the education provider considers it vital to provide an appropriate level of support and training.
  - Staff Performance Review and Enhancement (SPRE) is mandatory for all staff. SPRE provides a framework for managers and staff to work together. This is to ensure expectations are realistic and relevant to the overall strategic direction of the education provider, and to career-planning and work needs of individual staff.
  - Lecturers are supported by their programme director and governance structures in the schools and education provider, and senior staff.
  - Academic staff can request study leave to support their development.
  - Organisational development offers training and support to all staff. Academic staff are encouraged and supported to become members of the Higher Education Authority. The Keele Institute for Innovation and Teaching Excellence (KIITE) supports staff development. It does this by offering expertise in areas such as academic development, technology, and employability.
  - This aligns with our understanding of how the education provider runs programmes.
  - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Partnerships, which are managed at the institution level –**
  - Partnerships are established with a host of NHS providers to support practice education provision for programmes. The education provider has agreements in place with these practice education providers to support learning and the provision of the future workforce.
  - This aligns with our understanding of how the education provider runs programmes.
  - We think this as the education provider has indicated there have not been any changes to how they meet this area.

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

Quality, monitoring, and evaluation

**Findings on alignment with existing provision:**

- **Academic quality –**
  - Academic Quality is maintained through a cycle of monitoring, review, and evaluation. This includes module evaluation by learners, review of performance on modules, annual programme review and internal quality audits. Programme teams meet to discuss any proposed changes to modules based on all feedback. This process is set at education provider level.
  - External examiners are appointed for all programmes. This is set at education provider level. Feedback from external examiners is received

and responded to following examination boards. Programme teams discuss external examiner feedback and how to respond.

- This aligns with our understanding of how the education provider runs programmes.
- We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Practice quality, including the establishment of safe and supporting practice learning environments –**
  - There are quality processes for ensuring the quality of practice-based learning. There is a practice-based learning team who carry out quality assurance checks on all practice education providers. They also provide training for new practice educators and refresher training courses for more established practice educators.
  - A staff member meets, face-to-face or online, the learner and their practice educators for all practice-based learning. During link tutor visits and in practice-based learning debriefs learners are asked about any safeguarding issues, serious untoward incidents, discrimination, and whistleblowing situations. These are documented in the link tutor visit form and practice-based learning debrief form.
  - Learners are provided with practice-based learning handbooks.
  - Non-medical prescribing learners are in their own workplaces during their time on the programme.
  - This aligns with our understanding of how the education provider runs programmes.
  - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Learner involvement –**
  - Learner representatives are chosen by the cohort. They attend Student Staff Voice Committee (SSVC) meetings to give the views of their cohort. SSVC feedback comes to programme meetings and onto the school education committee. Learner feedback is also used to inform any changes to modules / programmes.
  - Learner group feedback is requested when programmes are going through revalidation or new programmes are being developed.
  - Both the Students' Union and Postgraduate Association are the education provider's learner bodies organisations and have representation on internal committees.
  - This aligns with our understanding of how the education provider runs programmes.
  - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Service user and carer involvement –**
  - Service users and carers are involved in many areas of programmes. They contribute towards programme boards, teaching and learning and recruitment and selection.
  - Service users attend and contribute to programme meetings such as the annual undergraduate programme review.
  - This aligns with our understanding of how the education provider runs programmes.

- We think this as the education provider has indicated there have not been any changes to how they meet this area.

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

### Learners

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

- **Support –**
  - The education provider sets all learners rights and responsibilities through University Regulation B – Student Rights and Responsibilities. This is set at education provider level. This includes support such as exceptional circumstances.
  - The Support to Study Policy is set at education provider level. This applies when learners need additional support to continue their studies. A plan is put in place to help the learner move forward with their studies.
  - The Personal Tutoring / Academic Mentoring code of practice is set at education provider level. Learners are allocated a personal tutor (academic mentor from academic year 2022/23) who signposts to support services if appropriate. Learner Experience and Support Officers can also perform this function.
  - If a learner requires reasonable adjustments, they can contact learner services.
  - University Regulation B – Student Rights and Responsibilities determines the process by which all current and recent learners can make a complaint. This is set at education provider level. They should first attempt to resolve the issue locally. If this is not possible learners should speak with the Early Resolution Officer in the school. Learners may progress to making a formal complaint if they are not satisfied at this stage. If the outcome of the complaint does not satisfy the learner, they may submit a grievance. Following the grievance learners may contact the Office of the Independent Adjudicator if still not satisfied.
  - This aligns with our understanding of how the education provider runs programmes.
  - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Ongoing suitability –**
  - University Regulation B5 Fitness to Practice is set at education provider level. Schools with regulated programmes have a Health and Conduct Committee. If there is a concern around a learner's health and / or conduct, they will be referred to this committee. An investigation will take place and the report from this, along with the referral and any supporting evidence, will go to the panel. The learner is invited to attend a meeting to discuss the case. The committee can choose to allow the learner to return to the programme, return with conditions, or refer the case on to the Fitness to Practise Committee. This committee is chaired by the Dean of Faculty and has the power to withdraw learners from a programme.

- Declarations relating to the health and suitability of learners are required annually. Learners are also required to inform the education provider if there are any changes on their DBS clearance.
- This aligns with our understanding of how the education provider runs programmes.
- We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Learning with and from other learners and professionals (IPL/E) –**
  - Learners engage with IPE throughout their programme.
  - Learners learn with and from professionals from a variety of clinical backgrounds and areas of expertise in both academic and clinical settings.
  - Learners also learn alongside learners from other professions. They are both taught and produce work together.
  - This aligns with our understanding of how the education provider runs programmes.
  - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Equality, diversity and inclusion –**
  - The education provider informed us they are committed to ensuring equality for learners. They are a member of the Race Equality Charter, Athena Swan, Stonewall Diversity Champion, and a Disability Confident Employer.
  - The education provider runs equality, diversity, and inclusion (EDI) inductions for learners. They also have learner and staff working groups to implement action plans. The education provider has EDI statements on their webpages to highlight inclusive practise.
  - This aligns with our understanding of how the education provider runs programmes.
  - We think this as the education provider has indicated there have not been any changes to how they meet this area.

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

### Assessment

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

- **Objectivity –**
  - This regulation is set at education provider level and applies to all programmes. Assessments are designed to ensure they test learning outcomes. They are reviewed as part of module approval and revisions.
  - The education provider has exemptions from anonymous marking where it is not possible. For example, for presentations. Where this is the case, the module specification outlines this.
  - This aligns with our understanding of how the education provider runs programmes.
  - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Progression and achievement –**

- Regulations here are set at education provider level and apply to all programmes. Programme specifications explain protected titles and exit awards for learners.
- The University Academic Warning Policy makes learners aware of expectations about engagement.
- Programme attendance requirements are stated in programme handbooks and are communicated to learners.
- This aligns with our understanding of how the education provider runs programmes.
- We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Appeals –**
  - This regulation is set at education provider level and applies to all programmes. Learners have the right to appeal and may only do so on the basis of exceptional circumstances not known at the time or procedural irregularity.
  - This aligns with our understanding of how the education provider runs programmes.
  - We think this as the education provider has indicated there have not been any changes to how they meet this area.

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

### **Outcomes from stage 1**

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

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

- The staff team consists of four academics: a Programme Director who has educational, clinical and research experience and three other Speech and Language Therapist colleagues (equivalent to two full time - FTE). There are also plans to increase staffing further in the next academic year.
- The education provider offer a range of facilities that are accessible to learners. These include a library on-site, student services and clinical and simulation suites. The clinical and simulation suites have been developed on campus and also at University Hospital North Midlands Clinical Education Centre. The suites include adapted living spaces, phonetics spaces and a speech and language laboratory, which learners can use to enhance their learning experience.

## **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
MSci Speech and Language Therapy	FT (Full time)	Speech and language therapy	50 learners, one cohort per year	23/09/2024

## 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.

### Quality theme 1 – Effective process to ensure sufficient practice-based learning

**Area for further exploration:** It was clear from the documentation submitted, particularly the placement structure and faculty placement providers documents, that the programme team had considered placement capacity in the design of the programme. However, it was not clear to visitors what the process was to ensure the availability of practice-based learning. They were also unable to identify how the education provider worked with stakeholders and other higher education institutions (HEIs) in the region to manage placement capacity. Visitors therefore requested further information in the form of a process to ensure the availability of practice-based learning for learners, including how capacity would be managed across the region.

**Quality activities agreed to explore theme further:** We agreed to explore this area further by requesting email and documentary evidence from the education provider. We considered this would be the most effective method to understand how the programme demonstrated this area.

**Outcomes of exploration:** The education provider outlined a process to demonstrate how they will ensure there is sufficient practice-based learning for learners. As part of their response, they submitted a document titled 'Placement Offer and Allocation Timeline'. Visitors noted this document outlined the process and timeframe to secure practice-based learning opportunities, which included a how they identified any placement shortfall in advance of the academic year starting.

In the narrative submitted, the education provider explained their intention to secure placements in the surrounding area, which included Staffordshire, Stoke-on-Trent, Derbyshire, Shropshire and the Black Country. Currently, Birmingham City University (BCU) are the only other provider in the region working with these areas to secure placement capacity. The education provider has therefore worked closely with BCU to plan and structure their placements. As a result of this collaboration, the education provider has arranged for their learners to attend placement when there are a reduced number of learners out on placement from BCU. This approach will help reduce pressure on placement capacity across the region and ensure there is sufficient capacity for all learners.

The visitors acknowledged the additional information supplied by the education provider and confirmed they were satisfied the education provider had an appropriate process in place to ensure there was sufficient practice-based learning for learners.

### Quality theme 2 – Appropriate number of suitably qualified and experienced practice educators to support practice-based learning

**Area for further exploration:** The information submitted in relation to this area related to the staff available within the University to support practice-based learning. Visitors were therefore unable to see how the education provider would consider and determine an adequate number of appropriately qualified and experienced practice educators. In addition to this, there was no evidence to demonstrate how they ensured practice educators were appropriately qualified and experienced. Further information was therefore sought from the education provider on how they would ensure there were an adequate number of appropriately qualified and experienced practice educators and if this number had been considered for the role emerging placements.

**Quality activities agreed to explore theme further:** We agreed to explore this area further by requesting email and documentary evidence from the education provider. We considered this would be the most effective method to understand how the programme demonstrated this area.

**Outcomes of exploration:** Visitors acknowledged the education provider used the Practice Assessment and Record Evaluation (PARE) tool to hold data relating to practice-based learning. They noted all new placements were audited and information relating to these audits were held on PARE, which included details of practice educator training and registration. This tool enabled the education provider to monitor those practice educators supervising learners and identify any additional capacity there maybe, which visitors considered was an appropriate process.

From the information provided, it was clear practice educators would be HCPC registered Speech and Language Therapists, however it was noted there may be other registered healthcare professionals involved with practice-based learning activities, such as the simulation experiences. We recognised this approach may also be used with the role emerging placements and where there is not a registered healthcare professional available in a placement, the long arm supervision model would be used.



Visitors noted, to ensure practice educators had appropriate experience, knowledge and skills the education provider offered practice educator training to all practice educators. Visitors recognised this area was being developed further in response to discussions that had taken place with stakeholders to standardise practice educator training across the region. There was clear evidence the education provider had responded to this request and they were in the process of developing a suite of Microsoft Sways, which would include interactive presentations and other training related content. The Practice Educator and Assessor Preparation session would also be included, which would prepare practice educators to work with learners and also inform them of the support the education provider offers. We noted this new training would be ready in September 2024 and all practice educators would be required to complete it. This was reassuring as this demonstrated practice educators were equipped appropriately to support learners during their placements.

The visitors acknowledged the additional information supplied by the education provider and confirmed they were satisfied the education provider had appropriate processes in place to ensure there were an adequate number of appropriately qualified and experienced practice educators.

## 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.
  - Applicants are required to hold 3 A 'levels in which they have achieved 1 A and 2 Bs.
  - 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 existing and new partners across the profession. They were involved with the development of the programme and will continue to be involved when the programme commences. It was noted there were already plans for future Allied Health Professions Stakeholder meetings and events to take place where stakeholders would have the opportunity to contribute to the ongoing development of the programme.
    - Through clarification, we noted outside of the wider stakeholder group, there were dedicated meetings planned for the individual professions, which included Speech and Language Therapy. For Speech and Language Therapy this included two days for practice educators and stakeholders to meet to specifically discuss this programme. They were also invited to the West Midlands Professional Leadership Forum for Speech and Language Therapists, which demonstrated they were collaborating effectively with stakeholders within the profession.
    - Visitors recognised that through the design and planning of the programme it was clear the education provider had considered the administrative support and funding required to support practice-based learning. Through [Quality theme 1](#), we learnt about what the process was to ensure the availability of practice-based learning.
    - It was noted an experienced Programme Director had been appointed who had extensive educational, clinical and research experience. In addition to this four full time equivalent (FTE) Speech and Language Therapists have been recruited to deliver and support the proposed programme. Visitors acknowledged there were additional staff available with relevant expertise across the education provider, who could be drawn upon to support the delivery of the programme.
    - It was clear from the Curriculum Vitae (CVs) supplied there were experienced practitioners within the existing staff team to deliver the programme who had specialist knowledge and expertise in Speech and Language Therapy.
    - Through clarification, we noted the education provider recognised they would require input from subject experts for some areas of the programme. Some of the areas identified where this would be the case included Voice and Augmentative and Alternative Communication (AAC).
    - Through clarification, we noted learners would have access to a range of teaching facilities, which included lecture theatres, specialist laboratories and a simulation centre that included mock hospital wards.

There was also a room which would be used as a dedicated space for speech and language therapy resources.

- 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.
  - Through clarification, we noted the education provider had updated the learning outcomes to further embed SOP 1:2 'recognise the need to manage their own workload and resources safely and effectively, including managing the emotional burden that comes with working in a pressured environment'. In the original documentation this appeared to only be achievable through practice-based learning. Updates were therefore made to module SLT-10009 to include stress management and working in pressurised environments and the impact on the health and wellbeing of themselves (as clinicians). It was clear from this clarification that the updates made had enabled the team to embed and develop SOP 1:2 throughout the programme.
  - Through clarification, the education provider demonstrated professional behaviours and the standards of conduct, performance and ethics were embedded throughout the programme. Some examples included module SLT10011 Professionalism and effective communication and module SLT20005 Development Speech and Language Disorders 1 where learners were required to demonstrate they could present complex interventions to service users, carers and teaching staff and communicate effectively.
  - Through clarification, we noted speech development was addressed in modules SLT10001 Language Acquisition, SLT10003 Linguistics and SLT20005 Development Speech and Language Disorder 1.
  - The proposed programme is comprehensive and addresses the philosophy, core values, skills and knowledge base of the profession as reflected in the Royal College of Speech and Language Therapists (RCSLT).
  - There were a range of processes to review and update the curriculum to ensure it remained up to date. This included the course team reviewing the course content regularly and applying the internal quality assurance and monitoring processes.
  - The structure of the programme ensured the integration of theory and practice. Visitors noted how clearly the design of the modules and the structure of practice-based learning were interlinked throughout the programme.
  - There was evidence of a variety of learning and teaching methods being used, which were evidenced in the programme specification. These included a combination of lectures, workshops, practical sessions, seminars and tutorials were used throughout the programme.
  - It was noted how the learning outcomes enabled learners to develop their autonomous and reflective thinking skills throughout the

programme. There was clear evidence of opportunities for learners to do this through teaching, practice-based learning and simulation activities.

- Evidence based practice was demonstrated through a range of modules delivered across the four year programme. These included Research Methods, Statistics and Planning Research and the Research Project.
  - The visitors therefore considered the relevant standards within this SET area met.
- **SET 5: Practice-based learning –**
    - Practice-based learning was integrated throughout the programme across all four years. The evidence demonstrated the programme had been structured to ensure learners could gain knowledge and skills through practice-based learning, which they could then apply to their academic modules.
    - Through [Quality theme 2](#), visitors received evidence about how the education provider ensured there were a sufficient number of appropriately qualified and experienced practice educators with relevant knowledge, skills and experience to support learners during placement.
    - There was evidence to demonstrate the structure, duration and range of practice-based learning was appropriate to enable learners to meet the SOPs and achieve the learning outcomes. Due to the structure of the programme, we recognised learners would have access to more than the required number of placement hours.
    - We acknowledged there were plans to use a range of placements, which included role emerging non-clinical placements. Through clarification, we noted the role emerging placement was embedded in the fourth year and all learners would engage with this type of placement. The purpose of this placement was to enable learners to diversify their practice and encourage them to also consider opportunities outside of the traditional clinical roles.
    - The visitors therefore considered the relevant standards within this SET area met.
  - **SET 6: Assessment –**
    - The module descriptors outline the content, learning outcomes and appropriate assessment methods to demonstrate professional behaviour, including the standards of conduct, performance and ethics. It was clear the expectations were fully incorporated in the programme and supported by the Fitness to Practice processes.
    - Assessment methods are clear and appropriate and are outlined in the module specifications and the SOPs mapping document. It was noted the assessments were varied and offered a range of assessment types where the tasks were authentic and linked to the learning outcomes.
    - The programme was mapped against the HCPC standards of proficiency and the assessment strategy ensured learners met these. The evidence clearly demonstrated the assessments linked to the learning outcomes.

- Through clarification, we noted there were appropriate assessment regulations in place, which were applied to resits, progression and compensations.
- The visitors therefore considered the relevant standards within this SET area met.

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

**Areas of good and best practice identified through this review:** None.

## Section 5: Referrals

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

There were no outstanding issues to be referred to another process

## Section 6: Decision on approval process outcomes

### **Assessment panel recommendation**

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

- All standards are met, and therefore the programme should be approved.

### **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 observation 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 2028-29 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
Keele University	CAS-01420-Y2T6Q5	Gemma Howlett & Lucy Myers	<p>Through this assessment, we have noted:</p> <ul style="list-style-type: none"> <li>The programme meets all the relevant HCPC education standards and therefore should be approved.</li> </ul>	<p>Education and training delivered by this institution is underpinned by the provision of the following key facilities:</p> <ul style="list-style-type: none"> <li>The staff team consists of four academics: a Programme Director who has educational, clinical and research experience and three other Speech and Language Therapist colleagues (equivalent to two full time - FTE). There are also plans to increase staffing further in the next academic year.</li> <li>The education provider offer a range of facilities that are accessible to learners. These include a library on-site, student services and clinical and simulation suites. The clinical and</li> </ul>

				simulation suites have been developed on campus and also at University Hospital North Midlands Clinical Education Centre. The suites include adapted living spaces, phonetics spaces and a speech and language laboratory, which learners can use to enhance their learning experience.
Programmes				
Programme name			Mode of study	Nature of provision
MSci Speech and Language Therapy			Full time	Taught (HEI)

Appendix 2 – list of open programmes at this institution

<b>Name</b>	<b>Mode of study</b>	<b>Profession</b>	<b>Modality</b>	<b>Annotation</b>	<b>First intake date</b>
BSc (Hons) Applied Biomedical Science	FT (Full time)	Biomedical scientist			01/09/2009
MSc Occupational Therapy	FT (Full time)	Occupational therapist			20/01/2024
MSci Paramedic Science	FT (Full time)	Paramedic			01/09/2021
BSc (Hons) Physiotherapy (with international year)	FT (Full time)	Physiotherapist			01/08/2018
MSci Physiotherapy	FT (Full time)	Physiotherapist			01/09/2019
MSci Physiotherapy (with International year)	FT (Full time)	Physiotherapist			01/09/2019
MSc Physiotherapy	FTA (Full time accelerated)	Physiotherapist			01/01/2020
MSc Prosthetics and Orthotics	FT (Full time)	Prosthetist / orthotist			01/01/2022
BSc (Hons) Radiography (Diagnostic Imaging)	FT (Full time)	Radiographer	Diagnostic radiographer		01/09/2017
BSc (Hons) Radiography (Diagnostic Imaging)	FLX (Flexible)	Radiographer	Diagnostic radiographer		26/09/2022
Independent and Supplementary Prescribing for Allied Health Professionals	PT (Part time)			Supplementary prescribing; Independent prescribing	01/01/2014