

Approval process report

Liverpool Hope University, Physiotherapy, 2023-24

Executive Summary

This is a report of the process to approve the MSc (pre-registration) Physiotherapy and BSc (Hons) Physiotherapy (Degree Apprenticeship) programmes at Liverpool Hope University. This report captures the process we have undertaken to assess the institution and programmes against our standards, to ensure those who complete the proposed programmes 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 programmes 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 programmes should be approved

Through this assessment, we have noted:

- Through quality activity, we explored how the education provider collaborated with practice partners and how they were developing additional capacity.
- The provider should next engage with monitoring in 2 years, the 2027-28 academic year
- The provider and programmes meet all the relevant HCPC education standards and therefore should be approved.

Previous consideration	N/ A as this process did not arise from a previous process
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Decision	<p>The Education and Training Committee (Panel) is asked to decide:</p> <ul style="list-style-type: none"> • whether the institution and programmes are approved, and • when the provider's first engagement with the performance review process should be
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Next steps	<p>Outline next steps / future case work with the provider:</p> <ul style="list-style-type: none"> • Subject to the Panel's decision, we will add the approved programmes to the list of approved programmes and take forward performance review during the 2027-28 academic year.
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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 institution and programmes detailed in this report meet our education standards. The report details the process itself, evidence considered, outcomes and recommendations made regarding the institution and programme 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:

Yetunde Dairo	Lead visitor, Physiotherapist
Fleur Kitsell	Lead visitor, Physiotherapist
Niall Gooch	Education Quality Officer

Section 2: Institution-level assessment

The education provider context

The education provider does not deliver any HCPC-approved programmes. It is a Higher Education provider.

The route through stage 1

This institution is new to the HCPC, and therefore we needed to make a judgement that they met all institution-level standards by directly assessing them through a visitor-led review.

Stage 1 assessment – provider submission

The education provider was asked to demonstrate how they meet institution level standards. 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.

We did not consider that quality activity was required as the education provider had submitted a comprehensive and clear submission. We did seek to clarify some of the points mentioned in the submission, and the education provider was able to respond to our request for clarification.

Outcomes from stage 1

From their review of the documentary submission, the visitors were satisfied that institution-level standards are met, and that assessment should continue to stage 2 of the process.

Findings of the assessment panel:

- **SET 1: Level of qualification for entry to the Register –**
 - The proposed programmes were at Level 6 (the apprenticeship) and Level 7 (the MSc). The programmes are at or above the level that SET 1.1 states we would normally expect for an HCPC-approved physiotherapy programme. As the education provider is a Higher Education Institution with degree awarding powers, we are satisfied that they have the structures and mechanisms in place to deliver education and training to these academic levels.
- **SET 2: Programme admissions –**
 - With regard to the information provided for applicants (SET 2.1), the education provider stated that potential applicants could access information about programmes on the institutional website. Individual programme pages list the specific requirements for those programme, including the necessity for interviews, Disclosure & Barring Service (DBS) checks, and occupational health checks. A link was provided to the page that would carry the information about the programmes.
 - With regard to ‘assessing English language, character, and health’, the education provider stated that there was an overarching institutional policy for assessing applicants’ suitability in these areas, but that individual programme teams could amend this approach if necessary. For example, they noted that a specific declaration of good health and passing a DBS check will be essential before learners could move into practice-based learning.
 - Specifically for the degree apprenticeship, the education provider stated that the employer and the programme team would undertake joint interviews.

- With regard to AP(E)L, the education provider stated that “the university has a policy for accrediting prior learning through certified courses”, and that programme-specific information would be available on the websites for individual programmes. This includes a bespoke approach to AP(E)L for the apprenticeship. The education provider submitted a brochure for learners which asked them to contact the programme team if they considered themselves eligible for AP(E)L.
- Regarding EDI in applications, we were supplied with a Recruitment and Admissions Policy, which includes EDI considerations, and a separate Equality, Diversity & Inclusion Policy.
- Following their review, the visitors considered that these arrangements were generally appropriate. However, we did request additional information about the details of the occupational health screening. The education provider noted that learners “will be put through an initial Health Screening Process with the Universities Occupational Health provider, which is Occupational Health and Wellbeing NHS University Hospitals of Liverpool Group. They will provide the university with a decision on whether the student is fit to practice and fit to study.” Reasonable adjustments will be available where the need for them is identified. Gaps in the vaccination record will result in learners being required to update their vaccinations.
- **SET 3: Programme governance, management and leadership –**
 - The education provider submitted a document outlining how they intended to maintain the sustainability of their provision. In this document they note that they have “established a strong infrastructure in terms of staffing, specialised clinical teaching spaces, on-site Physiotherapy/Rehabilitation clinic [and] Strength & Conditioning Suite.” The new programmes will also have access to laboratories and biomechanics resources used by other health programmes.
 - The education provider also has in place an internal scrutiny process designed to ensure that new programmes are sustainable. This includes a School/Faculty Academic Committee, a Course Viability Group, which employs market research to test business plans, and a University Academic Committee. Programme design events are required to include internal and external academics, key stakeholders, and professional, statutory and regulatory body (PSRB) representatives. The education provider also has an annual reporting process for programmes and an Annual Risk Register process to identify programmes under threat of losing sustainability. process are in place to identify any risk related to the sustainability of programmes and to ensure necessary action plans are created in a timely manner. An institution-level policy for Seeking and Maintaining Professional Accreditations governs how programmes must interact with relevant organisations.
 - Regarding governance and management, the education provider submitted staff CVs, and several relevant documents: a Staff Development Plan for Learning and Teaching, a description of the Communities of Practice Network, a Learning & Teaching Day Itinerary, and a Performance Review and Development Policy.

- They also stated that they are part of the North West Placement Education Group (NWPEG), a partnership of providers across the region which ensures that practice-based learning is appropriately allocated. They stated also that they have completed an NHS Education Funding Agreement, intended to integrate them into the local mechanisms for funding practice-based learning. They supplied the Cheshire and Mersey Placement Development Toolkit and an example of a new placement set up form.
- They supplied several pieces of evidence relating to quality assurance on the programmes. These included the following policies and procedures:
 - Principles of Course Design & Approval;
 - Approval of new Programmes Process;
 - Review of Existing Courses;
 - Approval of Modifications to Existing Provision;
 - Undergraduate Regulations;
 - Postgraduate Taught Students Regulations;
 - External Examining Handbook 23-24

Between them these documents set out how new programmes were planned, designed and internally approved, how they were changed when necessary, and how they were monitored on an ongoing basis. It was clear from the learner-focused documents that there was a clear mechanism to enable learners to understand the quality arrangements.

- There are appropriate mechanisms in place for supporting learners to raise concerns where necessary. These are found in the University Whistleblowing Policy and the Practice placement handbook. Learner involvement in the programme has also been extensive, as set out in the institutional Guidance on Student Voice Committees. Learners were present at programme design events and will be involved in programmes in numerous ways, including formal and informal feedback, and course committees. General support for learners at the education provider was well-evidenced by the following:
 - Student Complaints Flowchart
 - Student Complaints Policy & Procedure
 - Student Engagement Policy

We were confident, based on this information, that the education provider was clearly able to support learners as required by the relevant standards. The education provider's mechanism for assessing ongoing suitability was the Fitness to Practice policy, and this clearly laid out how learners would be monitored, and what kind of issues would be regarded as impediments to good practice.

- We saw also that there was an appropriate EDI policy in place, which would enable the education provider to undertake a good level of monitoring of representation and access on the programme. It was also made very clear to learners in separate programme documents that only successful completion of an approved programme leads to eligibility for admission to the Register.
- Similarly, we saw substantial evidence of how the education provider involves service users in programmes and the mechanisms by which this is governed. The processes and policies cited as evidence

included a Departmental Strategy for service user involvement, information about an Age Concern Focus Group and Letters of support from local partner organisations from which service users would come.

- **SET 4: Programme design and delivery –**

- We were supplied with a sample of the Common Placement Assessment Form (CPAF) and the module specifications to demonstrate how the education provider would deliver appropriate interprofessional education. They showed how IPE would be integrated into the practice-based learning on the MSc and in the employer setting for the apprenticeship.
- Appropriate mechanisms for obtaining appropriate consent from service users and learners, and requirements for attendance, were set out clearly in the programme documents supplied to applicants and learners.

- **SET 5: Practice-based learning –**

- Quality assurance mechanisms, and overall safety and suitability monitoring, for practice-based learning were set out in the following documentation:
 - Cheshire and Mersey Placement Development Toolkit;
 - New placement set up form (sample);
 - Common Placement Assessment Form;
 - Data Processing Agreement between the education provider and their employer partners / practice-based learning providers
- This documentation, along with the Practice placement handbook, the Practice education module specification, and the University Whistleblowing policy, also sets out how the education provider will work with relevant partners to ensure that learners and practice educators are appropriately prepared for their practice-based learning, and to ensure that practice educators are, and remain, appropriately trained.

- **SET 6: Assessment –**

- The objectivity of assessment is governed and monitored at the education provider by the Internal Moderation Guidelines and the External Examining Handbook. In their mapping document the education provider note that “the university provides details of assessment descriptors when designing marking criteria and providing feedback for all levels of study.” The documents distinguish between different levels of programme which is relevant to this assessment because one of them is Level 6 and one is Level 7.
- Progression requirements are laid out in several places that are accessible to learners: the marketing brochure (also viewable online) and on the careers hub that learners can access to understand the details of their programme.
- There is an Academic Appeals Policy which sets out in detail the procedure by which learners can appeal assessment outcomes at various points in the programme. The institutional regulations for undergraduate programmes and graduate programmes set out the requirements for external examiners and there is also an External Examining Handbook.

In light of all of the above, we considered that the stage 1 standards were met.

Risks identified which may impact on performance: None.

Outstanding issues for follow up: None.

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

- Large on-campus library
- Virtual learning environment (VLE)
- Teaching and seminar rooms
- Simulation suite

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
MSc (pre-registration) Physiotherapy	FT (Full time)	Physiotherapist	25 learners, 1 cohort per year	22/09/2025
BSc (Hons) Physiotherapy (Degree Apprenticeship)	Work-based learning	Physiotherapist	25 learners, 1 cohort per year	22/09/2025

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 – Effective collaboration with practice partners and employers to maintain appropriate capacity.

Area for further exploration: In their stage 2 submission the education provider described their arrangements for working with practice partners to maintain effective relationships and appropriate capacity. This included a Regional Placement Schedule and an internally produced capacity and demand analysis. They also submitted two letters of support from practice partners and employers who would be involved with the programme.

The visitors considered that this was useful information, but it did not make fully clear two specific points:

1. What specific contacts would take place going forward between the education provider and the relevant partners – how frequent would meetings be, how would they be structured, and who would attend?
2. Was there additional spare capacity if required for any reason, and if so how would the education provider ensure they were aware of this capacity and able to access it?

The risk here was that the education provider would not maintain effective collaboration with partners, and that this would affect the working relationship and, in particular, threaten practice-based learning capacity. We therefore explored with the education provider their response to the two questions.

Quality activities agreed to explore theme further: We considered that requesting additional documentation was the most appropriate way to take forward this quality activity, as the matter could be explored through written communications.

Outcomes of exploration: The education provider responded with narratives supported by additional evidence. For example, they noted that a representative has been a constant presence at the North West Practice Education Group (NWPEG) for the last two years, and that she is planning to do so for the foreseeable future. This was supported by meeting minutes and agendas for forthcoming meetings. Included in these minutes was detailed discussion of the education provider's plans for collaboration with their practice-based learning providers and employers, demonstrating that close relationships exist and are being developed and maintained. We also saw minutes from a practice-based learning leads conference where the education provider's needs were discussed, and from meetings of the Cheshire and Mersey AHP Placement group. Minutes were also submitted of physiotherapy practice-based learning reform meetings between Liverpool Hope and the University of Liverpool. The purpose of these discussions was to work on practice-based learning allocation from 2026 onwards. The education provider stated that their practice-based learning co-ordinator will meet with all their private, independent and voluntary organisation (PIVO) practice-based learning providers individually during September 2025 – January 2026.

Regarding capacity in particular, the education provider submitted evidence to demonstrate that they had appropriate capacity available with some surplus if required. The minutes already noted showed that they had appropriate capacity in place, and they also supplied evidence of work to expand and develop capacity.

They stated that the new capacity “will be audited and inputted into InPlace and will be included in the NW fair share”, and supported this with evidence of internal discussions confirming timelines.

They also submitted:

- Capacity and demand planner for practice-based learning for Liverpool Hope Pre-Reg MSc students and BSc (Hons) Degree Apprentices
- Contract for practice-based learning with a local GP and youth organisation
- Agreement with local public health agency to take learners on practice-based learning
- Minutes of a meeting with a local health academy to obtain further bespoke practice-based learning.
- Minutes of a meeting with Manchester Metropolitan University to develop virtual practice-based learning that learners from both institutions can attend together
- Correspondence with local Trusts aimed at identifying unused capacity
- A memorandum of understanding with a local school to provide practice-based learning working with pupils

In light of all this evidence, the visitors considered that the relevant standards were met, as the education provider had demonstrated that they had mechanisms and relationships in place to maintain collaboration with relevant partners and to consistently develop practice-based learning capacity.

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 2: Programme admissions –**
 - The education provider set out that the entry requirement for MSc (Pre-Reg) Physiotherapy were a BSc 2:1 or above “in a relevant subject such as Sports Rehab, Sports Therapy, Health and Social Care, Sports Science, Human Biology, Anatomy, Physiology”. Learners will be assessed in a competency-based interview, focused on professional standards and attitudes.
 - For the apprenticeship the education provider will require 112 UCAS points including an A-level with a biological component. Applicants will also need to demonstrate a sufficient understanding of English and Maths equivalent to a Level 2 qualification.
 - The visitors considered that SET 2.2 was met, because the education provider had demonstrated a rigorous and fair process for admitting learners to the programmes. The academic and professional standards for entry – and for the maintenance of ongoing suitability – were appropriately matched to the level of the programmes.
- **SET 3: Programme governance, management and leadership –**
 - The education provider submitted a detailed narrative describing how they would maintain relationships with key programme stakeholders. The evidence provided was mostly in the form of institutional policies and procedures. For example, we received a university-level policy on Approval of New Programmes and a Review of Existing Courses policy, which explained the institutional expectations around consultation with practice partners in programme development and ongoing effectiveness.
 - We also received a documents which illuminated the operational side of the collaboration, for example a Practice Placement development Toolkit, a document designed to help practice educators understand the programme, and a template for recording meetings between tutors, practice educators and learners. The education provider set out the meetings and the bodies by which they would maintain collaboration, and how such meetings would be recorded.
 - The education provider also supplied a Regional Placement Schedule. which evidenced how they would co-operate with local practice-based learning partners to maintain capacity, and an internally produced capacity and demand analysis. They submitted two letters of support from practice partners and employers who would be involved with the programme.
 - The visitors considered that this was good evidence around SETs 3.5 and 3.6. This was because it demonstrated that the engagement with relevant partners had been effectively planned. However, they did ask for some additional evidence from the education provider that the planned meetings had actually taken place and that the mechanisms described were being used in the intended way. This was explored through [quality activity 1](#). The education provider submitted some detailed information about the collaboration and capacity, and the visitors considered this was very useful information.
 - The visitors reviewed CVs for programme staff and job descriptions for key roles, such as programme director and practice-based learning lead. They also submitted workforce modelling and policies for visiting

staff. The visitors considered that this evidence met SETs 3.9 and 3.10 because it demonstrated that there was a strong programme team in place, with appropriate levels of experience, skill and qualification. The visitors again considered that this evidence was comprehensive, because it communicated a clear idea of who would be delivering the programme and who would be responsible for specific parts. The inclusion of evidence like the process for inducting new staff, and detailed information about how staff development would work, gave them strong confidence that the education provider had a clear understanding of the responsibilities in this area.

- Around SET 3.12, regarding resources for learners and educators, the education provider submitted the policies and procedures that would govern how learners and educators were given effective and appropriate access to the necessary resources. This included programme handbooks. The visitors did request clarification around when exactly the repurposing of a particular teaching space would be completed, and how it would be shared with other programmes, so that they could understand when it would be available to the new provision. This was clarified by the education provider – they noted that the renovation was now complete and they also supplied the booking app that would be used by all the programmes who used the new simulation spaces. This would ensure that all programmes had reasonable access as required.
- In light of this evidence, and following the quality activity, the visitors considered that SET 3.12 was met, because the education provider had demonstrated how they would support learners and staff at all levels of the programmes, and in various different contexts.
- **SET 4: Programme design and delivery –**
 - The education provider submitted evidence showing how the programmes were structured and how they would be delivered. This included module descriptors for both programmes, and separate SOPs mapping exercises for each programme. Also included was an academic quality policy, and a formal internally produced guidance document that set out to staff how to map their programmes appropriately. In the mapping documents, the education provider had referenced both the standards of proficiency (SOPs) and the standards of conduct, performance and ethics (SCPEs). The visitors were therefore satisfied that SETs 4.1 and 4.2 were met, because it was clear to them how the education was integrating the SOPs and the SCPEs with the programmes.
 - Other extensive documentation relating to the programmes' content and structure was also supplied by the education provider. These documents set out why the programmes had been designed in the way they had. A policy on how to use the simulation suite on the programmes was also included. The programme descriptors set out the teaching and learning methods that would be used on the programme. There was a specific mapping document for the apprenticeship to demonstrate its compliance with Chartered Society of Physiotherapy (CSP) guidelines. The education provider described in detail where in the programmes they would deliver aspects such as evidence-based

practice, autonomous working, maintaining clinical currency, and professional expectations.

- In light of all this evidence, the visitors considered that all the other standards in SET 4 were met. This was because the education provider had clearly articulated their approach in all relevant areas, and where necessary had supplied an evidence base. They had described the stakeholders who had been consulted, and had adopted a wide range of teaching and learning methods. They had a clear mechanism for updating and reviewing the programmes to ensure they reflected professional expectations and current practice. The staff had a range of clinical experience which would help the learners understand contemporary approaches. Every module included at least some requirement for evidence-based practice and autonomous working.

- **SET 5: Practice-based learning –**

- The education provider submitted the following evidence:

- Simulation Suite Handbook
- Practice placement module specification
- Physiotherapy Skills Scan
- Regional Placement Schedule
- Placement capacity and demand analysis

These described the overall structure of the programme and explained how practice-based learning was integrated. Assessment guidance for practice-based learning was also described, which enabled the visitors to understand how the competencies acquired in the classroom would help learners to progress in practice-based learning, and vice versa. Draft partnership agreements and a practice-based learning strategy were also supplied.

- The visitors sought to clarify one point related to SET 5.2. Specifically, they wanted to clarify how the education provider would be assured that “each learner has had practice-based learning experiences in a sufficient range of areas, pillars and levels as stated in Principle 2 of the Principles of practice-based learning document”. The education provider submitted additional evidence in the form of highlighting in the practice-based learning handbooks the explanation of how practice-based learning is integrated into each programme, and the assessment points that would follow those practice-based learning blocks.
- In light of this clarification, we considered that SETs 5.1 and 5.2 were met by this evidence. This was because the education provider had shown that practice-based learning was appropriately integrated into the programmes, and that the structure, duration and range were sufficient to deliver all the relevant learning outcomes and SOPs.
- The education provider also stated that they were part of the North West Practice Education group, which would enable them to be allocated an appropriate share of practice-based learning capacity. This mechanism allows practice-based learning to be scheduled to fit within the overall strategic requirements of the region. For the apprenticeship specifically, the education provider stated that practice-based learning will be blended into the normal apprentice training hours. Where additional clinical skills are needed, and cannot be

acquired in the employer setting, the education provider will ensure such experience can be obtained.

- The education provider submitted several pieces of evidence to enable us to understand how they would ensure that practice educators and those supervising apprentices were appropriately experienced, skilled and qualified. These included:
 - PIVO Practice Placement development Toolkit (PIVO stands for private, independent, and voluntary organisations, an umbrella term for non-NHS healthcare settings)
 - A guide to how visiting tutor meetings would be recorded through the Practice Assessment Record and Evaluation (PARE) tool
 - Practice-based learning module specifications
 - Placement handbook for both programmes
 - Recruitment pack for “skills coaches” (in this context registered professionals who would be available to help learners with their clinical competencies)
- Practice educators will be required to undergo initial training, as well as ongoing training, and must be specifically prepared for individual practice-based learning. The education provider described agreements with practice-based learning providers, which included detail on which parties had responsibility for different aspects of learner supervision. They stated they would be following CSP guidance on mentoring and supervision.
- The visitors considered that this evidence met SETs 5.5 and 5.6. This was because the education provider had clearly set out their approach to securing practice educators with appropriate skills, qualifications and experience. They had also demonstrated their process for ensuring that practice-based learning providers would supply sufficient numbers of practice educators, and how those practice educators would be prepared and trained for effective supervision.
- **SET 6: Assessment –**
 - The education provider supplied a SOPs mapping exercise, which set out which SOPs which would be assessed in which parts of the programmes, as well as individual programme specifications. They also produced additional information about the overall assessment strategy:
 - Health and Sport Science Assessment Strategy
 - A specific assessment strategy for each programme
 - Post Graduate Taught Awards Continuation and Completion policy
 - Undergraduate Awards Continuation and Completion.pdf
 - In the submission, there was information on retake policy, academic integrity, and a learner guide to assessment.
 - In light of all this evidence, the visitors considered that SETs 6.1, 6.2 and 6.5 were all met. This was because the education provider had demonstrated that their assessment strategy and design would require that all learners were assessed on both SOPs and SCPEs at appropriate points of the programme, and that learners who did not meet the SOPs would not be able to complete the programme. The education provider had also demonstrated, via a document produced for the purpose, that they had an appropriate range of assessment

methods, which would give learners opportunities to demonstrate their knowledge and skills in appropriately varied ways.

Risks identified which may impact on performance: 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.

Recommendations

We include recommendations when standards are met at or just above threshold level, and where there is a risk to that standard being met in the future. They do not need to be met before programmes can be approved, but they should be considered by education providers when developing their programmes.

The visitors did not set any recommendations.

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 institution and programmes should be approved.

- The education provider's next engagement with the performance review process should be in the 2027-28 academic year

Reason for next engagement recommendation: Where risk assessment allows, we will lengthen the period between performance review engagements from two years (which is the historical norm for the HCPC), up to a maximum of 5 years. However, two years is the standard period for education providers who are new to the HCPC.

To remain confident with provider performance, we rely on regular supply of data and intelligence to help us understand provider performance outside of the periods where we directly engage with them. The provider is new to delivering HCPC-approved programmes, and is included in external data returns to the HCPC. Although the provider is included in these supplies, there will be a period where data directly related to the programmes approved will not be available.

As HCPC programmes will not be included in data supplies, we have recommended that the provider should next engage in the performance review process in two

years. This is so we can directly assess the quality of the provision before HCPC-approved programme level / programme influenced data points are available.

Appendix 1 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
MSc (pre-registration) Physiotherapy	FT (Full time)	Physiotherapist			22/09/2025
BSc (Hons) Physiotherapy (Degree Apprenticeship)	WBL (Work based learning)	Physiotherapist			22/09/2025