
Approval process report

Leeds Trinity University – Forensic Psychology 2024-25

Executive Summary

This is a report of the process to approve a forensic psychology programme at Leeds Trinity 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 following exploration of key themes through quality activities. We further explored how eight standards that were outstanding from the institutional review, were met through the programme level assessment.
- 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 institution and programme should be approved.

Through this assessment, we have noted:

- The areas we explored in stage 1 focused on:
 - Ensuring admissions information made available to applicants allows them to make an informed choice about the programme, and clarity around English language requirements. Clarification was provided on admissions information and English language requirements.
 - How the education provider assesses the suitability of applicants, including criminal conviction checks and health requirements. Details of criminal conviction checks, and health requirements were provided which demonstrated clear process of assessing applicants' suitability.
 - Determining the appropriateness of the Recognition of Prior Learning (RPL) process. Further clarification was received about RPL process (following referral to stage 2) which demonstrated appropriate process.
 - The education provider's process to ensure equality, diversity and inclusion (EDI) data is used in admissions decisions. Evidence was provided demonstrating clear process for capturing and using EDI in admissions.
 - How the education provider ensures the institution, and its programmes are sustainable and fit for purpose. Further evidence was received demonstrating there is an appropriate process in place to ensure and evaluate sustainability and fitness for purpose.
 - Ensuring there is an effective programme management structure in place, including the process of appointing a suitable leader for the programme.
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- Evidence provided demonstrated there is a clear process to ensure programmes are effectively managed and more specifically that the new programme has an appropriate process and staff in place to manage it.
- How the education provider ensures practice educators undertake regular training that is appropriate to their role, learners' needs and the delivery of the programme learning outcomes. There is an institutional process in place. However, for the new programme, training materials are still being developed so this has been referred to a focused review.
 - Ensuring both learners and practice educators are prepared for practice-based learning. Further evidence received demonstrated both practice educators and learners are appropriately prepared for practice-based learning.
 - The involvement of service users, particularly at programme level. We received appropriate evidence (through stage 2 review) to demonstrate service users are involved in the programme and supported.
 - Ensuring there is appropriate process in place for learners to recognise situations where service users may be at risk and to be able to support them in raising concerns and making sure appropriate actions are taken. Subsequent information received reassured us that there is an effective process in place for this.
 - How the education provider supports the wellbeing and learning needs of learners. The information provided through quality activity demonstrated that there is appropriate support in place for the wellbeing and learning needs of the learners.
 - Ensuring the education provider has appropriate process in place to manage learners' conduct and performance in practice-based learning. Through further information received in stage 2, we were satisfied that this is in place.
 - How the education provider implements interprofessional learning for all learners. Through further information received in stage 2, we were satisfied that there is an effective process in place for ensuring interprofessional learning.
 - Ensuring there is an appropriate process in place for obtaining consent from service users and learners when they act as service users. Evidence received demonstrated that the consent form is sufficiently detailed and evidences the process for gaining and managing informed consent from both learners and service users.
 - Ensuring there is an appropriate process in place to monitor learners' attendance. Further information received satisfied us that there is a detailed process in place for measuring attendance.
 - The areas we explored in stage 2 focused on:
 - How the education provider ensures availability and capacity of practice-based learning for all learners. Sufficient information was provided demonstrating how learners on the different routes access appropriate and sufficient practice-based learning.
 - How the education provider ensures adequate number of appropriately qualified and experienced staff to deliver an effective programme. We were reassured through the quality activities that there will be sufficient staff in place to deliver the programme effectively to all learners.
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- o How the education provider ensures the suitability of practice educators to ensure learners are appropriately supported in practice-based learning. Through further information provided, we were reassured that there is a clear process in place to ensure all practice educators are suitable.
 - The following areas should be referred to another HCPC process for assessment:
 - o Training of practice educators - We understood the programme team has developed a training day for practice educators, which is aimed at supporting clinical supervisors new to Stage 2 training and materials were being adapted for online delivery. We understood the training materials are not yet available and will become available online from mid to end of December 2025 and the training will be conducted first week in January 2026. As the training is still being developed, we decided to refer this to focused review in the new year to ensure it is appropriate in preparing practice educators to support learning and assess learners effectively.
 - The provider should next engage with monitoring in two years, the 2027-28 academic year.
 - The provider and programme(s) meet all the relevant HCPC education standards and therefore should be approved.
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Previous consideration This is not applicable. This is a new education provider and has not engaged with any of our processes previously.

Decision The Education and Training Committee (Panel) is asked to decide:

- whether the institution and programme(s) are approved
- when the provider's first engagement with the performance review process should be
- whether issue(s) 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

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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 programme(s) 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(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:

Garrett Kennedy	Lead visitor, Practitioner Psychologist, Counselling Psychologist
Nicola Bowes	Lead visitor, Practitioner Psychologist, Forensic Psychologist
Mohammed Jeewa	Service User Expert Advisor
Temilolu Odunaike	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. This is the first time the education provider is engaging with any of our processes. The proposed programme will sit in the School of Social Sciences.

The route through stage 1

We decided that a partner led-stage 1 assessment was needed because:

- 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 partner-led review.

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 – admissions information available to applicants to make an informed choice about the programme, and clarity around the English language requirements

Area for further exploration: Within the submission, the recruitment and selection process was used to manage admissions at institution level. This was detailed in the education provider's Admissions Policy and referred to in the Taught Academic Regulations Policy. The education provider also submitted entry criteria for the new programme. The visitors noted the education provider offers a fee discount dependent on the undergraduate degree outcome (50% if applicants achieved a first class and 35% if they received a 2:1). The visitors requested to know if there was any parity for people with additional learning needs or any similar information that would help applicants to make an informed decision about the programme.

For English language requirements, the Admissions Policy stated that applicants who do not have English as their first language must have an International English Language Testing System (IELTS) score of Academic 6.0 overall and no component score below 5.5. But for the new programme, the visitors noted in the programme specification, the requirements are an overall score of 7 with no element less than 6.5. The visitors requested to know if there were any conditions where the IELTS component would be waived. For example, if there was a policy where an applicant with an MSc from a UK university would not be required to meet the IELTS standard. The visitors requested to know how the education provider will ensure the language standard is enforced.

Quality activities agreed to explore theme further: We decided to explore these areas through email clarification and additional evidence. We considered that alongside the clarification required, the education provider may also need to update their admission documentation to reflect any changes made. Therefore, we considered these the most appropriate ways for the education provider to address the issues raised by the visitors.

Outcomes of exploration: We received clarification on the fee discounts. The education provider confirmed the discounts were for individuals who had previously studied with them (alumni applicants). Applicants with a distinction will receive 50%

off and those with merit 35% off. We understood this will not apply to candidates who studied at other institutions. As an institution the education provider explained they currently do not offer fee discounts to those with additional needs, who were not alumni applicants, but such applicants / learners will receive extensive support both at application stage and all through their learning journey. The education provider emphasised that all applicants must have achieved at least a pass in an accredited MSc in Forensic Psychology and hold Graduate Basis for Chartership (GBC) (conferred through an accredited undergraduate degree in psychology or an accredited conversion programme). We understood this information will be clearly presented on the landing and applicant pages of their website.

Regarding the English language proficiency, the education provider requires all applicants whose first language is not English to meet the IELTS standard of 7, with no element below 6.5, and upload their certificate during the application process. They added that an MSc in Forensic Psychology from the UK does not exempt both UK or international applicants, and those without a certificate must undergo a new test arranged by the education provider, at the applicant's expense, if applicable.

The visitors were satisfied that the information provided to applicants, including the English language requirements, to help them make an informed choice is now clear and as such they were satisfied that the quality activity had adequately addressed their concerns. They therefore considered the standard met.

Quality theme 2 – assessing the suitability of applicants, including criminal conviction checks and health requirements

Area for further exploration: The documentation stated that the Disclosure and Barring Service (DBS) clearance is needed, and that the application is not forwarded to the programme leader for their consideration until it is received. The visitors recognised this as a good practice as it helps the education provider, and therefore us, to know how the programme suitability / DBS process is managed and that it involves the programme leader. However, further detail on the process was required. The visitors requested to know the education provider's policy on DBS checks. For example,

- how they will implement this and ensure they are consistent with legislation
- who will pay for these checks and at what point they will be undertaken,
- how DBS disclosures are managed and assessed prior to an applicant reaching the programme leader
- what a 'satisfactory' DBS check meant.

In relation to health requirements, we noted there was a check for this but no detail about how it will be implemented or what consequences there are if someone discloses a health concern. There was reference to an occupational health check, but no information was provided on who will conduct this and who will pay for it. Therefore, we requested to know:

- how health checks are implemented and the consequences of disclosed health concerns
- who will conduct and pay for the checks
- if learners are obliged to undertake health checks

- what a 'satisfactory' occupational health check meant and whether learners would be expected to undertake this more than once

Quality activities agreed to explore theme further: We decided to explore these areas further by requesting further documentation from the education provider. We considered this would be the most effective method to understand how the education provider would ensure the suitability of learners.

Outcomes of exploration: The education provider will assign a dedicated, trained admissions officer to manage all DBS checks for the programme, with the Programme Leader verifying documentation before interviews via a secure platform.

We identified the following information in response to the quality theme:

- A "satisfactory" DBS check must show no information that would make the applicant unsuitable for roles involving children or vulnerable adults, and an enhanced DBS check is required for forensic psychology roles and entry onto the programme.
- Applicants must upload any current DBS certificate from their employer during application. If unavailable, the education provider will fund an enhanced DBS check.
- They noted a budget for DBS checks has been allocated for the 2025/26 academic year by the Head of the School of Psychology.
- A university panel, including academic and support staff, reviews borderline cases, with the Programme Leader involved if the applicant is from their programme. They noted this follows established procedures used in similar programmes.

In relation to health requirements, we understood:

- all applicants must submit a Health Declaration Document at the time of application and annually during re-enrolment, which is reviewed as part of the education provider's pre-offer checks. The Health Declaration Document requires applicants to declare if they have any physical or psychological health conditions that might impact on their ability to complete supervised practice and complete the programme.
- applicants are required to inform the Programme Leader of any changes to their health status after enrolment.
- If a health issue is declared, the applicant may be referred to the education provider's occupational or mental health experts, who will assess and recommend any necessary adjustments. The assessments are funded by the education provider's central learner wellbeing budget, and only those who declare a need are referred for review.
- The education provider added that not all learners are obligated to go through the review process, however the declaration is mandatory. Refusal to go through the review process may limit available support and could lead to a fitness to practice review if concerns arise. Satisfactory occupational health check is undertaken by the education provider's health and wellbeing professionals. It indicates that, with any necessary reasonable adjustments in place, the learner's ability to study or perform in a professional environment is not adversely affected. In cases where the decision is borderline, the same

process outlined above for DBS checks, may be applied, whether the concern is academic or professional in nature.

Following the quality activity, the visitors were satisfied that there were processes in place. The team consider DBS issues in the admissions process and assess suitability and this matches standard DBS protocols for management of these issues. Similarly for health requirements, they found the information provided sufficient detail as it demonstrated the process is clear and outlines the potential for fitness to practice investigations to address any areas of concern. The visitors considered the quality activity had adequately addressed their concerns and the standards were met.

Quality theme 3 – recognition of prior learning (RPL)

Area for further exploration: The RPL process and policy exists at an institution level, but further details were required on how the policy works at the institution level and how it applies to the new programme. For example, if the policy changes at higher levels, we needed to know if there will be a procedural point of consultation with the programme team. The overall policy stated that it will usually be the programme leader that makes final decision which the visitors considered good practice.

The document stated there is no programme level policy. The visitors noted the institution level policy stated that the maximum credits were 240 credits (we noted this was more than the whole credits for the new programme) or 120 credits, or two thirds of the total award. However, the same RPL process and policy document also stated one third maximum and that it was not applicable to professional diplomas. As this policy statements differed it was unclear how RPL was considered at the institutional level.

The visitors were particularly concerned because there was no clear statement on how RPL will be applied and there were various points about how much RPL can be applied – without clarity of where this could be taken from. For example, as the programme is Level 7 – it was unclear if a learner could take credit for some Masters (not practitioner training) work that was from a university – unrelated to practitioner psychology training. It was also unclear if the qualification needed to be from another HCPC approved provider and from a practitioner psychology programme. The generic RPL approach for the education provider did not make it clear what the process was, nor what the maximum RPL was for each programme. We needed to understand if the policy was appropriate – and whether the education provider was delivering a standard, reasonable approach to RPL.

Therefore, for clarification purposes, we needed to understand:

- if the education provider will allow RPL from any higher education (HE) provider or only HCPC approved education providers
- how the education provider ensures that HCPC approved programmes maintain an appropriate amendment to this policy for HCPC approved programmes.
- what proportion of credits for the HCPC programme will be allowed

- how applicants with modules/credit from non-HCPC approved programmes will be considered
- what percentage of programme content would be acceptable to RPL

Quality activities agreed to explore theme further: We decided to explore this area further by requesting further clarification from the education provider. We considered this would be the most effective method to understand how the education provider would ensure RPL is appropriate and effective and that applicants clear about this.

Outcomes of exploration: The education provider explained they regularly review all policies, typically every two years or when legislation changes, involving relevant stakeholders to ensure full programme representation.

The education provider clarified, for the new programme, a maximum of 3 modules (45 credits) may be applied through RPL, slightly exceeding the standard one-third credit limit. Specific details were also provided on RPL considerations both for academic attainment and work-based professional experience. For example, the education provider noted a person with extensive evidential experience of consultancy in a forensic setting, may be considered for RPL from the 'Consultancy' module. Following this response, the visitors considered that a definitive statement in the policy was required to be clear on the amount of RPL or Work Based Professional Experience (WBPE) claim for the programme.

The education provider also confirmed that only modules completed on other HCPC approved programmes would be considered. The visitors considered the restriction of RPL to accept credits from HCPC approved programmes a positive move as this would mean that the RPL applies only to elements that were part of a HCPC approved programme demonstrating the relevant standards. However, the visitors queried the RPL for the consultancy component. They were aware it may be linked to widening participation but expect that prior experience would need to be assessed for equivalence to that expected of a forensic psychology learner. To explore these further, we decided to refer this to stage 2 to better understand how RPL will work at programme level in terms of the amount of RPL which can be claimed and if the consultancy component could be considered via RPL.

Quality theme 4 – evidence that data gathered via the equality and diversity policy /strategy is captured and used in the admissions process.

Area for further exploration: The institution level equality and diversity strategy, Equity, Social Justice and Belonging strategy 2022-2026 was in place, but we needed evidence of how it was implemented at the admissions level. While it was possible that applicant characteristics were captured as part of the process, we needed evidence that the data and admissions decisions were reflected upon to ensure the admissions process was open and impartial and did not discriminate unfairly against certain applicants.

Quality activities agreed to explore theme further: We decided to explore this area further by requesting further documentation from the education provider. We considered this would be the most effective method to address the visitors' concerns in this area.

Outcomes of exploration: The education provider explained that applicant characteristics are collected during both the application and enrolment stages.

All interviewers are trained in Equality, Diversity, and Inclusion (EDI) and Unconscious Bias techniques, and the interview questions have been approved by the admissions team to ensure fairness. Interviews will be conducted remotely via Microsoft Teams.

The education provider emphasised their position on this from a strategic point of view. As one of their strategic pillars is Social Justice, they noted some of their key aims around EDI include:

- Empower all learners, regardless of background, to reach their full potential and surpass their own academic and career expectations.
- Eliminate disparities in outcomes across all characteristics, including awarding and employability gaps, to ensure fairness for every learner.
- Deliver a transformative educational experience that nurtures motivated, independent individuals who contribute to a more just and equitable society, expressing their knowledge through their unique perspectives.

To ensure the policy is implemented and monitored, the education provider explained they make their admissions decisions in line with the Equality Act 2010 which protects individuals from discrimination based on characteristics such as age, disability, gender reassignment etc. They noted that applicants' 'characteristics' are captured at the point of application, and all applicants are interviewed. We understood interview decisions are made with emphasis on fairness, ensuring applicants are assessed solely on their suitability for the programme, not on protected characteristics. To capture their data, all applicants are required to complete a pre-arrival questionnaire which collects information about all protected characteristics. A report is generated from the data using Power BI. The report is filtered to highlight characteristics that the education provider is interested in. For example, to identify inequality and inform action; meet legal requirements; ensure fair policies and practices; and improve service and support, among other things. Interview questions are carefully designed and approved to promote equity, allowing diverse responses, and interviews are conducted via Microsoft Teams. Additionally, applicant data on engagement and performance is regularly reviewed using systems like Power BI and JISC, feeding into the Programme Annual Review, while EDI principles are embedded in curriculum design and staff training.

It was clear from the information provided that the education provider has a clear process on how EDI is used in their admissions decisions. Following the quality activity the visitors had no further concerns.

Quality theme 5 – ensuring the institution and its programme are sustainable and fit for purpose

Area for further exploration: From the documentation, the visitors noted the SETs mapping mentioned the programme will provide learners the opportunity to demonstrate the standards of proficiency (SOPs) for forensic psychologists. The visitors were referred to the Programme Specification, SOPs mapping and the

PGDip Forensic Psychology Practitioner Academic and Clinical Supervisor Handbook. However, no clear detail addressing how sustainability and fitness of purpose will be ensured was provided. Therefore, the visitors had the following specific queries:

Sustainability

There were no details provided around the commitment of the education provider or their partners to ensure there is sufficient resources to deliver the programme or how the education provider manages any possible risks or threats. Therefore, we did not understand how they ensure sustainability of the new programme. For example, how practice-based learning partnership agreements, market research, and programme resourcing via the business plan, work.

Fitness for Purpose

There was need for detail on the education provider's financial position, for example, the programme's place in the business plan. In addition, clarity was sought about the processes in place for reviewing the way the programme is delivered including, how teaching / training will inform competencies, and how staff assess competencies. The programme will be delivered online only. With an online-only teaching strategy, we requested to understand how the education provider will ensure staff assess learner needs over time and check competencies when using an online-only approach.

Quality activities agreed to explore theme further: We decided to explore this area further by requesting further evidence from the education provider. We considered this the most appropriate approach for the education provider to answer the questions asked by the visitors.

Outcomes of exploration: The education provider noted that as an institution they were not required to produce a document referred to as business plan. However, we understood the School of Psychology is required to produce a 5-year strategic plan which highlights the development and implementation of 'Stage 2' equivalent training in six of their seven programmes, including the new programme. Full details of the plan were submitted and covered areas such as programme approval, practice-based learning partnership agreements, how competencies were informed and the Clinical Supervisor/Academic Supervisor relationship. At the education provider's internal programme validation event, a list of documents and levels of approval required was provided which demonstrated a robust internal validation process. Evidence of the outcome of the university validation was received. To demonstrate commitment from partner organisations, we understand the education provider already has a number of signed memoranda of understanding (MOUs) in place with external agencies, including with forensic clinical settings.

In terms of informing competencies, the education provider explained that the programme consists of 20% taught sessions and 80% placement-based learning, where learners engage in active, participatory experiences that highlight the value of their educational journey. Further details were also provided on how the assessments ensure competencies are met. Sufficient details were provided around how the Clinical Supervisor / Academic Supervisor relationship work to ensure sustainability and fitness for purpose.

The visitors were satisfied that the education provider's response demonstrates there is a process in place to evaluate sustainability and fitness for purpose. While they may not use the term 'business plan' we were reassured they have effectively done the same and provided evidence of the process that considers these aspects. In relation to the online delivery of the programme, we considered this is a programme specific query and therefore was referred to stage 2 to determine whether this delivery method was fit for purpose. Otherwise, the visitors had no further concerns.

Quality theme 6 – evidence of effective programme management, including the process for appointing a suitable leader for the programme

Area for further exploration: The education provider noted the strategic leadership arrangement in place at the faculty level. This includes a Faculty Dean and a Deputy Deans for example. They also noted their requirements for programme leaders, to ensure programmes are effectively managed. For the new programme, we noted evidence of one HCPC qualified staff member. It was not clear how this individual would be able to manage the programme effectively by themselves. There was also no programme management structure in place to demonstrate that the programme will be appropriately managed. Therefore, we requested details of the management plan, to demonstrate how the programme will be effectively managed.

We also noted there was a designated programme leader in place, who was appropriately qualified and experienced and a HCPC registrant, in the relevant profession / modality. However, there was no clear process for appointing an individual to lead the programme or appoint a replacement if required. We therefore requested to know the education provider's process of appointing a suitable person to lead the programme, for example if there was need for a replacement.

Quality activities agreed to explore theme further: We decided to explore this area further by requesting further evidence / narrative from the education provider. We considered this the most appropriate approach for the education provider to answer the questions asked by the visitors.

Outcomes of exploration: The education provider submitted a structure of how the programme will be managed starting from the Strategic Direction and Management to individual module leaders. The education provider noted the individual responsible for the strategic management is not HCPC registered, however, they are a chartered psychologist with a PhD in Forensic Psychology and have experience in management. Further details were provided around the programme leadership and the delivery team, including module leaders. This detailed clear responsibilities of each role and experience they bring to the team.

The education provider also noted how they will draw on the expertise of other appropriately qualified academic staff to manage different aspects of the programme. This reassured the visitors that the programme will be effectively managed.

In addition, further information was provided on how the suitability of the programme lead is determined. We understood they need to meet the education provider's

criteria including being HCPC registered and having at least 2 years of experience in programme leadership. The current programme leader leads their non-HCPC approved MSc Forensic Psychology Programme. There is also a clear process for replacement, should this be required.

The visitors were reassured that the education provider has a clear process to ensure programmes are effectively managed and more specifically that the new programme has an appropriate process and staff in place to manage it. Following the quality activity, the visitors had no further concerns.

Quality theme 7 – ensuring practice educators undertake regular training appropriate to their role, learners’ needs and the delivery of the learning outcomes of the programme.

Area for further exploration: As a new provider to the HCPC, the education provider noted their intention to ensure both their academic and clinical supervisors undertake supervisor training prior to engaging in the programme. They noted this will include both mandatory and optional continuing professional development (CPD). The visitors considered this to be a work in progress and needed further detail on what the training provision for practice educators will be. For example, they noted the details of the proposed plan were present but no detail on what the roles will look like or what training will be offered and how was provided. It was also not clear whether practice educators will be involved in the assessment of competencies in practice-based learning, what procedures they needed to follow, and how they contributed to the assessment of learner competence.

Quality activities agreed to explore theme further: We decided to explore this area by requesting further clarification from the education provider. We considered this the most appropriate approach for the education provider to answer the questions asked by the visitors.

Outcomes of exploration: The programme team noted they have developed a comprehensive training programme for Clinical Supervisors (practice educators), set to launch in late August or early September 2025, pending on HCPC approval. Clinical Supervisors will be eligibility-checked by the Programme Leader and receive similar training as Academic Supervisors, delivered online three times a year, with additional support available as needed. An example of training specific to academic staff is around how they grade a learners’ academic submission.

The training will cover module content, learning outcomes, assessment methods, and expectations for monitoring learner progression in line with HCPC SOPs and supported by detailed handbooks and resources.

In relation to practice educators’ contribution to assessments, we were informed Clinical Supervisors are not expected to grade learners’ academic submission however, they can grade the clinical element but must be HCPC registered to do this. We understood practice educators receive relevant training covering areas such as supervision models, practice-based learning management, ethical guidance, diversity, feedback, and lifelong learning support. Quarterly Supervisor Meetings bring together the Programme Leader, Academic Supervisor, and Clinical Supervisor

to evaluate learner progress from both theoretical and applied perspectives, agree on competency ratings, and provide feedback. These meetings are followed by Tripartite Meetings with the learner to clarify expectations for supervision and tuition sessions, address any concerns, and review academic and competency development.

The visitors were satisfied with the institutional process in place. However, as the training itself was not yet finalised, they requested to see further detail at programme level, therefore they referred this area to stage 2.

Quality theme 8 – preparing learners and practice educators for practice-based learning

Area for further exploration: We noted the education provider had some programmes that were offered to other regulated professions (e.g. social work) and that documents for learners on those programmes could be amended for the HCPC programme. These were not provided as part of the documentation so it was unclear how the education provider would ensure practice educators have the information they need in a timely manner to prepare them for practice-based learning. We therefore requested a clearer outline of how this was going to be managed i.e how learning materials and information will be communicated to both learners and practice educators, so they know what is expected and required for practice-based learning to be safe and effective.

Quality activities agreed to explore theme further: We decided to explore this area further by requesting further information / narrative from the education provider. We considered this the most appropriate approach for the education provider to address the issues raised by the visitors.

Outcomes of exploration: A detailed list of the pre-enrolment documents and learning materials, including information around practice-based readiness and how materials will be communicated before, during and after practice-based learning at institution level, was submitted. The visitors found the information helpful but considered that programme level information was necessary to understand how the new programme will meet the relevant standard. Therefore, this was referred to stage 2.

Quality theme 9 – service user and carer involvement

Area for further exploration: The education provider's Service User and Carer Involvement Strategy defines the service user role and purpose. We also noted a draft of their Terms of Reference which were at an institution level. However, there was no information about how service users and carers would be involved in various aspects of the new programme. For example, training, content, quality, admissions, experiential involvement, and practice-based learning. We therefore requested for the education provider's plan for service user involvement specifically at programme level.

Quality activities agreed to explore theme further: We decided to explore this area further by requesting further information / narrative from the education provider.

We considered this the most appropriate approach for the education provider to answer the questions asked by the visitors.

Outcomes of exploration: We understood the education provider will be following a similar approach to how they involve service users in their MSc Forensic Psychology (Stage 1) programme. Service users are involved in:

- Programme development – service users were contacted in the process of designing the programme
- Experiential involvement in content delivery – before commencing any activity, service users were briefed on the content of the session, their involvement, and their consent was sought.
- Practice-based learning - service user involvement in practice-based learning enhances education by integrating real-world feedback, leading to more effective and personalised interventions and improved offender outcomes. It also fosters empathy and a deeper understanding among learners, encouraging a shared sense of responsibility for the outcomes of those they support.

The visitors noted how service users were being involved in the new programme, however, there was no information on how their wellbeing will be managed in the process such as the support being offered should it be needed. Therefore, this was referred to stage 2.

Quality theme 10 – enabling learners to raise concerns about the safety and wellbeing of service users

Area for further exploration: The education provider has a policy for raising concerns which outlines the process and procedures that learners would follow when they have safety and wellbeing concerns in practice-based learning. The visitors found the detail of the overall process at institution level helpful, but it did not specifically focus on concerns related to service users. The visitors therefore requested further detail such as a copy of the instructions given to learners on how to do this professionally when in practice-based learning. This would reassure us that learners are able to recognise situations where service users may be at risk and can support them in raising concerns and making sure appropriate action is taken in response to the concerns.

Quality activities agreed to explore theme further: We decided to explore this area further by requesting further information / narrative from the education provider. We considered this the most appropriate approach for the education provider to address the issues raised by the visitors.

Outcomes of exploration: The education provider detailed how the new programme is designed to develop autonomous professionals capable of making informed decisions that align with professional practice standards, particularly around safeguarding and lawful, effective practice. These principles are embedded in one of the modules, but the importance of safeguarding and raising concerns will be emphasised from the outset of the programme.

The education provider submitted their formal “Raising and Escalating Concerns” policy, which outlines the procedures for reporting issues both during and outside of working hours and includes a dedicated reporting template. They added that the policy was originally written for Nursing, AHP, and Social Work programmes and it is currently under review to explicitly include Practitioner Psychologists. The policy ensures that learners understand their professional and moral obligations to protect service users from day one. We understood this guidance will be included in both the learner and clinical supervisor handbooks and will be introduced during the learner induction and supervisor training.

The visitors were satisfied that there is a process in place, supported by learner-facing documentation. They also determined that the process for raising concerns about service users is sufficiently detailed, and training is provided. The visitors therefore concluded that the quality activity had fully addressed their concerns.

Quality theme 11 – supporting the wellbeing and learning needs of learners

Area for further exploration: The education provider referenced institution level policies such as their Raising and Escalating Concerns Policy which outlines when and how all learners should escalate concerns they have about the safety and wellbeing of service users. However, it was not clear how they ensure programme level resources are in place to support the wellbeing of learners. For example, there was no information on the arrangements in place to support learners’ wellbeing while in practice-based learning and how the education provider responds to and manages this. The visitors requested evidence to demonstrate this.

Quality activities agreed to explore theme further: We decided to explore this area further by requesting further information / narrative from the education provider. We considered this the most appropriate approach for the education provider to answer the questions asked by the visitors.

Outcomes of exploration: The education provider described how they embed institutional policies and systems across all programmes, with an emphasis on learner wellbeing and academic support. All applicants are required to submit a Health Declaration upon application and annually. Any declared health issues are referred to the Programme Leader, who can connect learners with relevant institution wellbeing experts. Recommendations from these experts are implemented by the programme team at no cost to the learner. Sensitive subject matter is monitored through regular bi-weekly check-ins with academic staff, who can refer learners to wellbeing support as needed. Similarly, in practice-based learning, practice educators can also raise concerns, ensuring a comprehensive, free support system is in place for all learners. Learners are signposted to appropriate channels or individuals to access support.

The visitors were satisfied that the information provided evidenced that there was appropriate support in place for the wellbeing and learning needs of the learners. The visitors were therefore satisfied that the quality activity had addressed their concerns.

Quality theme 12– process for managing conduct and performance in practice-based learning

Area for further exploration: We noted the institution-level policy and procedure. The visitors recognised the fitness to practice (FTP) and study procedures at the education provider focused on behaviours within the academic setting. It was therefore not clear what the education provider's specific approach was for managing conduct and performance in practice-based learning. This was important for us to be able to determine that learners are able to conduct themselves appropriately in academic setting as well as practice-based learning. In addition, the visitors requested to know how early practice / competency issues are monitored and addressed before they reach a FTP threshold.

Quality activities agreed to explore theme further: We decided to explore this area further by requesting further information / narrative from the education provider. We considered this the most appropriate approach for the education provider to address the gap identified by the visitors.

Outcomes of exploration: The education provider described how their institution-level policy provides a foundational framework for managing learner conduct, character, and health within their existing forensic psychology programme. They noted that many of their policies predate their strategic focus on practitioner psychology and require updates to reflect PSRB -specific guidance, and that this was actively being addressed by their Academic Quality Office. Despite this, they noted they were still ensuring core principles remain applicable, and the management of conduct and performance in practice-based learning was effective.

In practice-based learning, learners were continuously monitored through observation, feedback from Clinical and Academic Supervisors, and structured reviews to ensure professional boundaries are maintained. Concerns raised by external examiners or others are addressed through the education provider's Fitness to Practice process, which includes a fair appeals procedure to ensure the learner's voice is heard.

The visitors noted the outline of the planned process but considered that more information will be required when this had been finalised. Therefore, we referred this to be further reviewed in stage 2.

Quality theme 13 – process for ensuring interprofessional learning is undertaken

Area for further exploration: We noted the process for learners to be able to learn with, and from other professionals and learners was not yet in place. We needed to see evidence of how interprofessional learning was going to be implemented in order to determine if this standard was met. This was important to understand how learners are prepared to work with other professionals and across professions for the benefit of service users and carers.

Quality activities agreed to explore theme further: We decided to explore this area further by requesting further documentation from the education provider. We

considered this the most appropriate approach for the education provider to address the issue identified by the visitors.

Outcomes of exploration: The education provider explained that their School of Psychology is integrating Interprofessional Learning (IPL) into its curriculum starting from September 2025. Learners will be taught alongside other learners from different professions, such as those on their programme for Prison Officers and the MSc in Police Leadership, by engaging in shared modules. The approach emphasises active learning through practice-based learning, role play, and real-world simulations. The education provider noted that their MSc Forensic Psychology learners participate in IPL activities alongside peers from various fields, enhancing collaboration and practical skills. Additionally, guest lecturers from diverse forensic backgrounds contribute to sessions and events like Psychology Week and Wellbeing Week, enriching learners' understanding of professional roles.

The visitors were satisfied with the plans but considered that this theme could only be considered when the formal plans on how this is implemented become available. Therefore, the visitors have referred this to stage 2.

Quality theme 14 – the process for obtaining appropriate consent from service users and learners

Area for further exploration: The education provider noted the process of obtaining consent was covered within the Professional Ethical Standards module and the institutional ethical approval process which also applies to the new programme. They added that this will be overseen on a day-to-day basis by the Clinical Supervisor. In general, we noted a lack of detail about the process and therefore requested for it to be expanded. For example, we noted the involvement of service users or how consent was obtained from them was not made clear in the documentation so we needed further detail about how consent issues are managed.

We also requested to understand the education provider's process of obtaining appropriate consent from learners in situations where they take part as service users themselves in practical and clinical teaching, as this was not provided.

Quality activities agreed to explore theme further: We decided to explore this area further by requesting further information from the education provider. We considered this the most appropriate approach for the education provider to address the gap identified by the visitors.

Outcomes of exploration: An updated consent form for service users was submitted, which was an adapted version of the one used by those in the education provider's healthcare department. We were informed the same consent form will be used by learners when providing consent to take part in practical and clinical teaching. The visitors were satisfied that the updated form was appropriate in obtaining consent from learners and service users.

In terms of obtaining consent from learners, we understood activities, will be summarised and posted on a discussion board. Padlet will be used with anonymised usernames to protect learner identity. Role play recordings will be voluntary,

requiring prior consent, and will primarily capture audio unless video is essential for assessment. These recordings will be securely stored, accessible only to authorised staff and external examiners, and deleted after moderation in line with institutional policy. If a learner opts out of recording, alternative assessments will be provided, potentially in person depending on location.

The visitors were satisfied that the consent form was sufficiently detailed and evidenced the process for gaining and managing informed consent from both learners and service users. Therefore, they considered that the quality activity had adequately addressed their concerns.

Quality theme 15 – measuring a lack of attendance

Area for further exploration: There was a process in place to monitor attendance, with steps to follow. We noted the education provider uses their Student Liaison and Engagement Officers and Digital Registers (myLTU digital register) to monitor learner attendance. PowerBI was also used to manage information on attendance and engagement. We were also referred to the Practitioner Programme and Assessment Handbook and the PGDip Forensic Psychology Practitioner Academic and Clinical Supervisor Handbook. However, there was a lack of information on areas where attendance was mandatory (if any) or how decisions relating to a lack of attendance were measured. For example, it was unclear if there was a threshold attendance requirement and how the programme team would deal with learners who fall below it. This was important so that follow-up actions could be taken to make sure that such learners gain the required level of knowledge before they are able to complete the programme.

Quality activities agreed to explore theme further: We decided to explore this area further by requesting further information / narrative from the education provider. We considered this the most appropriate approach for the education provider to provide the clarification required.

Outcomes of exploration: The response showed that attendance at all lectures, seminars, and tutorials is mandatory and clearly communicated through various channels such as handbooks, inductions, and Moodle. A dedicated team of Student Liaison and Engagement Officers, along with Personal Tutors, provides weekly support and follow-up for learners with low attendance to help ensure their academic success. For example, if a learner misses three or more timetabled sessions without engagement or explanation. A detailed process of monitoring attendance was also submitted, demonstrating the steps that the education provider will take in cases of issues of low attendance. The education provider stated that the process also helps them to identify trends that may indicate broader issues requiring further investigation and appropriate measures

The visitors were satisfied that the detailed process had assured them that attendance was being monitored. Therefore, they determined that the quality activity had sufficiently addressed their concerns.

Outcomes from stage 1

From their review of the documentary submission, and on exploring themes through quality activity, the visitors were satisfied that most institution-level standards are met, and that assessment should continue to stage 2 of the process. Standards which are still outstanding from stage 1 will be considered in stage 2.

Findings of the assessment panel:

- **SET 1: Level of qualification for entry to the Register –**
 - The programme qualification is at Level 7 MSc, which is appropriate for HCPC threshold. We are also satisfied that the education provider has Masters degree awarding powers as they already run several Masters programmes.
 - The visitors noted that the education provider does not have doctoral degree awarding powers. However, the proposed programme is a Pg Dip which is also a Level 7 qualification. Whilst this would meet HCPC requirements, the visitors consider that as this is a new education provider and has not been assessed by the HCPC previously, we needed to consider the level of qualification alongside the programme specific standards. This was so we could be assured the learning outcomes and assessment are appropriate for the Level 7 qualification.
 - We decided to refer this to stage 2 to assess whether the learning outcomes and assessments are such that would allow this standard to be met.
- **SET 2: Programme admissions –**
 - The Admissions Policy provides institution-wide information around admissions and is applicable to foundation, undergraduate and postgraduate taught programmes. The policy helps to ensure that admissions practices are fair, transparent and deliver admissions in the interest of applicants. Programme specific requirements are provided in individual programme specifications. As noted through [quality theme 1](#), clear information was provided on the programme level information that would be provided to applicants to help them to make an informed choice about the programme.
 - The Admissions Policy and the Taught Academic Regulation Policy show that all applicants are expected to demonstrate their ability to communicate effectively in English. As noted in [quality theme 1](#), it was clear how the education provider enforces the language standard. Having an MSc in Forensic Psychology from the UK does not exempt both UK or international applicants, and those without a certificate must undergo a new test arranged by the education provider, at the applicant's expense, if applicable.
 - The Admissions Policy as well as individual Programme Specifications provide information on how suitability of applicants is assessed. For example, the education provider noted a satisfactory enhanced DBS check is required.
 - Similarly for health requirements, the process was provided. We understood the admissions process requires applicants to inform the education provider of any health conditions they have. The education provider will then consider what reasonable adjustments should be made.

- Through [quality theme 2](#), details of the process for checking applicant's suitability (DBS) and health requirements was provided.
- We noted the Recognition of Prior Learning (RPL) process. Applicants are informed about this during the admissions process, with the final decision on whether RPL is granted resting with the Programme Leader. As noted in [quality theme 3](#), further details of the RPL process for the new programme was provided. However, this did not fully address the visitors' concerns. Therefore, this will be further reviewed in stage 2 of the assessment.
- Equality and diversity is managed through the education provider's Equity, Social Justice, and Belonging Strategy 2022 -2026. The strategy aims to ensure:
 - equitable access, experience and outcome for learners
 - a Social Justice framework that embeds social justice across all areas of their work
 - belonging and an environment which reflects a thriving community
 - improved race equity literacy and an understanding of all protected characteristic groups so as to provide the conditions for staff and learner success.
- Through [quality theme 4](#), we understood how data from the equality and diversity strategy is captured and used in the admissions process.
- Based on the information provided through the initial submission and quality activities, the visitors were satisfied the standards within this SET area are met with the exception of the standard around RPL, SET 2.6 which was further reviewed through Stage 2 at programme level.
- **SET 3: Programme governance, management and leadership –**
 - There are institutional guidelines to follow when designing a new programme to ensure it is sustainable and fit for purpose. These are detailed in the Programme Design and Approval Handbook 2024/25. It considers factors such as programme aims, target audience size, projected demand, and post-completion employability to ensure it is both fit for purpose and sustainable. The approval process involves several stages, including review by the Programme Committee, which assesses the initial concept and supporting documentation, and the Scrutiny Panel, which critically evaluates the paperwork. The final stage is the Validation Event, where external peers, stakeholders, employers, and PSRBs assess the programme's overall quality and relevance. Further information on how teaching / training informs competencies, and how staff assess competencies was received through [quality theme 5](#).
 - The education provider listed how faculties are managed, starting with the Faculty Dean down to Academic Staff. There is also administrative support in place and technical staff to ensure programmes run smoothly. We understood all programme are recruited in line with PSRB requirements for the post. Through [quality theme 6](#) further details around management structure and profession-specific staff were provided which reassured us that programmes are being effectively managed.

- We understood that overall professional responsibility of programmes sits with the Deputy Dean, the Head of School and or the programme lead. Through [quality theme 6](#), further information was received on how the education provider ensures the person responsible for leading the programme is appropriately qualified and experienced and on the HCPC Register.
- Quality assurance is maintained through Module Evaluation Questionnaires (MEQs), five Programme Study Boards, and five Faculty Boards, which include staff, learners, and external representatives to address immediate concerns.
- Programmes undergo annual self-evaluation via Module Annual Reviews (MARs), Programme Annual Reviews (PARs), and are further reviewed at subject, School, Faculty, and University levels using both qualitative and quantitative data. Every programme is also subject to a four-yearly periodic review, although this process is currently under review.
- The education provider plans to adopt a similar approach to their Nursing and Allied Health Professions in relation to service user and carer involvement for their HCPC provision. For example, we understand anonymised service user videos and stories are integrated into teaching and assessment, and service user input is included in the learner recruitment process. When direct interaction with service users is not appropriate, learners engage through local charities that support these individuals. (Ex) service users also contribute to the ongoing development and delivery of the programme in a consultative capacity.
- Further details on how service users will be involved at programme level was received through [quality theme 9](#). However, this did not provide information around the support offered to service users should they need it. Therefore, we referred this to stage 2.
- Each programme includes learner representation, supported by the Students' Union, with learners actively contributing to programme design and modification through the Curriculum Consultancy process. Learners participate in five annual Programme Study Boards and five Faculty Boards, where immediate issues can be raised and addressed.
- Student voice is further captured through monthly committee meetings and regular surveys like the Student Engagement Survey (SES), which informs improvements to the learner experience across all levels of study.
- We noted the education provider offers a robust staff development programme, with dedicated time in annual workload plans for training and personal development. Staff are allocated hours for research and CPD and have access to a wide range of mandatory and optional training, including the PGCert in Education for all teaching staff. This is supported by the education provider's performance and review process, with training opportunities listed on their intranet.
- From seeking further clarification, details were received on how the education provider ensures CPD provision specific to the new programme to enable both academic staff and practice educators to deliver the programme effectively. For example, we understood all staff have dedicated CPD hours in their workload plans, with allocations

such as 300 hours for research and 120 for scholarship, which can include CPD. CPD for practice educators covers supervision models, practice-based learning management, ethical guidance, diversity, feedback, and lifelong learning support.

- The education provider stated that learners will have access to the education provider's student wellbeing services, as well as support from their Programme Director, Module Leaders, Personal Tutor, Clinical Supervisor, and Academic Supervisor. They will also receive support within their practice-based learning setting and have the opportunity to attend various workshops. As noted through [quality theme 11](#), further information was received on the arrangements in place to support learners' wellbeing while in practice-based learning and how the education provider responds to and manages this.
- The education provider submitted their Equity, Social justice and Belonging Strategy 2022-2026 which describes their strategic goals to ensure equality, diversity and inclusion for all learners and staff at institution level., further clarification was received on how the policy / principles will be implemented at programme level.
- The education provider has a Students Complaints Policy which is accessible to all learners as needed. The complaints procedure is designed to ensure that all valid learner complaints are heard and responded to in a manner that is fair, transparent, timely and based on the consideration of relevant evidence. It also provides step-by-step guide for learners who wish to make a complaint.
- The education provider explained their Fitness to Practice Policy and Procedure applies to the new programme, ensuring professional standards are upheld. Learners are required to make an annual declaration of good health, conduct, and character. This includes providing an enhanced DBS check, and a satisfactory occupational health assessment. International learners will need to provide a certificate of good character as an alternative to an enhanced DBS check, Through [quality theme 12](#), further information was received on the education provider's specific approach for managing conduct and performance in practice-based learning. However, as this was still in the planning stage, we decided to refer this to stage 2.
- Programmes involving practice practice-based learning must have a safe and effective system for reporting concerns about service user safety and wellbeing. While learners are expected to follow the procedures of their placement provider, programme teams must also establish a clear policy aligned with professional standards. As outlined in [quality theme 10](#), additional information was provided that reassured us that that learners are able to recognise situations where service users may be at risk and can support them in raising concerns and making sure appropriate action is taken in response to the concerns.
- The education provider does not currently run any HCPC approved provision. However, an appropriate statement is included in the programme information that clearly demonstrate that only successful completion of an approved programme leads to eligibility for admission to the Register.

- The visitors were satisfied that several standards within this set area are met. They determined that two outstanding standards (3.7 and 3.16) should be referred to stage 2.
- **SET 4: Programme design and delivery –**
 - The education provider has an established Interprofessional Education (IPE) Group to develop and implement a cross-disciplinary learning strategy. IPE events involved learners from nursing, education, social work, law, policing, and criminology. All learners participate in supervised practice, supported by both Clinical and Academic Supervisors, and will gain experience working within multi-disciplinary teams. Through [quality theme 13](#), we noted the education provider's plans for implementing IPL from September 2025. As such, this was referred to stage 2 when the plans for implementation are ready.
 - The education provider noted that the process of consent is addressed through the Professional Ethical Standards module and, where applicable, the education provider's ethical approval process. Daily oversight of this process is managed by the Clinical Supervisor. Through [quality theme 14](#), a detailed description of the process for obtaining consent from service users and learners was provided, including the consent form.
 - The education provider noted that the level of mandatory attendance varies from programme to programme and is covered in their Taught Regulations Policy. As outlined in [quality theme 15](#), a clear process for monitoring attendance and dealing with attendance issues is in place.
 - The visitors were satisfied that standards relating to consent and attendance monitoring have been fully met. For the standard around IPL - SET 4.9, this will be referred to stage 2.
- **SET 5: Practice-based learning –**
 - The education provider noted a number of checks they undertake to ensure the quality of practice-based learning, prior to enrolling learners. These include:
 - Placement Provider Agreement
 - Placement Risk Assessment
 - Audit of Practice Placement Document
 - Health and Safety Induction Checklist
 - We recognised that having these documents as one single document would help with accessibility for both the learners and practice educators. From seeking further clarification, we noted the education provider has now developed a new Quality Framework for Approving and Ensuring the Quality of Practice-Based Learning which is subject to signoff from their Quality Office. The visitors considered that is still work in progress and therefore referred to stage 2 assessment when the Quality Framework has been approved.
 - The education provider noted the Programme Director, the Academic Supervisor, and the Clinical Supervisor are responsible for completing the above documents prior to learners' enrolment on the programme. They noted this would help ensure that the practice-based learning environment is safe and supportive for learners and service users. Additionally, from seeking further clarification, we understood after

each visit, a report is completed, actions are agreed upon with deadlines, and additional visits are arranged if necessary, including checks like health and safety and risk assessments. Mid-placement reviews are also conducted, incorporating feedback from the learner, Clinical Supervisor, and Academic Supervisor to monitor progress and ensure quality. We are satisfied that the on-site review by a member of the programme team, with appropriate documentation, and a process of monitoring and review meets the requirement for this standard.

- As noted through [quality theme 7](#), there are plans in place for practice educators to attend training prior to engaging in the programme. As these were still plans, it was referred to stage 2.
- Similarly, as the education provider does not currently run any HCPC approved programme, there are institution-wide plans in place to ensure both learners and practice educators receive the information they need in time for practice-based learning as noted through [quality theme 8](#). Therefore, this was also referred to stage 2.
- The visitors noted that the standards here were met at institution level but needed to know how the new programme will also meet the standards. Therefore, three of the standards (5.3, 5.7, and 5.8) were assessed at programme level.

● **SET 6: Assessment –**

- There is an assessment strategy in place, and this includes Level 7 qualifications and there are appropriate quality checks for the assessment strategy.
- All grades undergo formal ratification through assessment boards and are quality assured via internal and external moderation, with feedback delivered using a standardised Feed Forward approach to support learner development. Academic and practice-based learning staff receive full training in assessment procedures, and ongoing monitoring is conducted through module, programme, and institutional reviews using both qualitative and quantitative data.
- Progression and achievement requirements follow the education provider's assessment regulations to ensure fair, objective evaluation of all learners. Additional support and mitigation procedures are available for learners who believe their performance does not reflect their true ability.
- Information about making academic appeals is explained in the academic regulations. The Programme Lead and Personal Tutor can also signpost. Information is also available on myLTU and this is made available to learners following their enrolment. If a learner believes their performance does not accurately reflect their true ability, they have the option to pursue either the Academic Appeals procedure or the Mitigating Circumstances process. There is also a process for external and internal monitoring of this.
- The process for appointment of suitably qualified external examiners is in place at institution level. There is an External Examiner Roles and Responsibilities Policy which helps to ensure relevant professional input in the external review of the assessment process.
- The visitors were satisfied that all standards within this SET area are met.

Risks identified which may impact on performance: None.

Outstanding issues for follow up:

We took forward the following issues through Stage 2 of the process:

1. Level of qualification for entry to the Register – we needed to consider the programme learning outcomes and assessments (which are covered in stage 2) to be able to decide if they met the threshold level that would lead to a qualification for entry to the Register.
2. The programme must be sustainable and fit for purpose –we explored the online method of delivery of the programme to ensure it was fit for purpose. As further information was required on the appropriateness of this delivery method for the new programme, we decided to refer this to stage 2. This would help us to understand how the education provider will ensure that staff assess learner needs over time and check competencies when using an online-only approach.
3. Recognition of prior learning (RPL) – Following exploration through quality activity, we remained unclear about the amount of RPL or Work Based Professional Experience (WBPE) applicants could claim for the programme and the consultancy component of RPL. The visitors needed to explore this further in stage 2 to understand how RPL would work at programme level in terms of the amount of RPL which can be claimed and if the consultancy component could be considered via RPL
4. Service user and carer involvement - the quality activity response did not provide sufficient information around the support offered to service users on the new programme should they need it. Therefore, we referred this to stage 2.
5. Process for managing conduct and performance in practice-based learning - further information was received through the quality activity. However, as this was still in the planning stage, we decided to refer this to stage 2 to review when the process had been finalised.
6. Process for interprofessional learning – through the quality activity, we noted the education provider's plans for implementing IPL from September 2025, however, it had not yet been finalised. We needed to review the process when it had been finalised to understand how it would be implemented.
7. Ensuring there is a thorough and effective system for approving and ensuring the quality of practice-based learning - from seeking further clarification, we noted the education provider had developed a new Quality Framework for Approving and Ensuring the Quality of Practice-Based Learning which is subject to signoff from their Quality Office. The visitors considered that it remained work in progress and was therefore referred to stage 2.
8. Ensuring practice educators undertake regular training appropriate to their role, learners' needs and the delivery of the learning outcomes of the

programme - there were plans in place for practice educators to attend training prior to engaging in the programme. As these were still plans, following the quality activity, it was referred to stage 2.

9. Preparing learners and practice educators for practice-based learning - there were institution-wide plans in place to ensure both learners and practice educators receive the information they need in time for practice-based learning. As these were still in the planning stage following the quality activity, it was also referred to stage 2.

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

- Staffing resources will include-
 - HCPC registered (practitioners) programme leader
 - Academic Staff (HEA qualified)
 - Academic staff with practice experience
 - Named clinical and academic tutors
 - Named personal tutor
 - Visiting lecturers from practice
 - Appropriately qualified consultants
 - Support staff (e.g., wellbeing, library etc) to support the learner's development and journey
- Currently there is one member of staff who is appropriately qualified and experienced and on the HCPC Register as a forensic psychologist. Through stage 2 assessment, we considered how the education provider ensures there is an adequate number of appropriately qualified and experienced staff. We also considered that they have the relevant expertise to deliver aspects of the programme.
- In terms of physical resources, the education provider noted their School of Psychology occupies a dedicated floor on the main campus, with well-equipped labs, a 20-seat computer lab, small group spaces, and independent testing rooms to support learner-led learning. Shared IT resources are also available in open learning areas and the University Library. Two dedicated technicians support learner research by offering equipment loans, training, custom builds, and repairs. Learners can remotely access education provider's software—including Microsoft Office, Adobe CC, and some other specialised software. Office 365 ensures learners can access their documents and core applications from anywhere.

Outstanding issues: None.

Section 3: Programme-level assessment

Programmes considered through this assessment

Programme name	Mode of study	Profession (including modality) / entitlement	Proposed learner number,	Proposed start date

			and frequency	
PGDip Forensic Psychology Practitioner	DL (Distance Learning)	Practitioner Psychologist, Forensic Psychologist	30 learners, 1 cohort per year	01/01/2026

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.

Data / intelligence considered

We also considered intelligence from the professional body as follows:

- We contacted the British Psychological Society (BPS). The intelligence received related to how the education provider gets chartered status with the BPS and did not relate to our standards.

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 availability and capacity of appropriate practice-based learning for all learners

Area for further exploration: We noted an agreement form existed, but this lacked the necessary detail to assure us that there was availability and capacity of appropriate practice-based learning for all learners. Therefore, we needed further detail around how appropriate practice-based learning are approved and monitored. We also needed to understand how relationships with practice education providers were maintained, and capacity built. We noted there is a process for the academic year 2025, which creates capacity through the Ministry of Justice (MoJ) funding route, but in 2026 it is open to a wider audience. The statement showed learners will be supported to find practice-based learning, but we needed more detail on the strategic processes that are intended to build capacity.

Quality activities agreed to explore theme further: We explored this area through email clarification / narrative. We considered this approach appropriate to address the issue raised by the visitors.

Outcomes of exploration: The education provider explained their expectations around the two types of learners i.e the first cohort through the MoJ contract and they are employed within Her Majesty's Prison and Probation Service (HMPPS). The second cohort will be independently funded, and they anticipate ten learners per year via this route from 2026.

We understood self-funded learners are expected to include details of their practice-based learning site in a forensic setting and their practice-based supervisor, along with their name and address on their application.

We also noted that the MoJ funded learners will always be guaranteed practice-based learning as they are all employed by HMPPS and as such will all have been allocated a Clinical Supervisor and will work in a suitable Forensic Settings, as agreed within the contract.

The education provider also explained their process of approving and monitoring practice-based learning for both MoJ and non-MoJ learners. We noted the programme director is responsible for ensuring the suitability of practice-based learning. A clear outline of the role of the practice educator and the university educator were provided including general responsibilities. The education provider also added details of the health and safety requirements they have in place to ensure safety in practice-based learning.

The visitors were satisfied that the information provided adequately addressed their concerns and therefore considered the standard met.

Quality theme 2 – ensuring there is adequate number of appropriately qualified and experienced staff in place to deliver the programme effectively

Area for further exploration: Three staff curriculum vitae were provided. One of them was HCPC registered and the programme lead for the existing non-HCPC approved MSc programme. Therefore, it was unclear what full time equivalent (FTE) they will contribute to the proposed programme. To illustrate, we were unclear how the programme lead would split their time between the non-HCPC approved MSc programme and the new programme.

We noted another staff member who was also HCPC registered will contribute 0.2 Full Time Equivalent (FTE). The visitors did not find the third staff member on the HCPC Register. The visitors considered that there were not enough HCPC registered forensic psychologist teaching staff for us to be confident that learners will have enough forensic-specific support to understand and demonstrate the competencies and culture of their intended profession. For staff who were not HCPC registered, we needed to know how the education provider ensures their qualifications and experience (whether practical or academic) are appropriate to the programme.

The visitors considered that the inclusion of a staffing plan in the documentation was helpful, as we could see the intention to recruit appropriate staff over the growth of the programme. However, they needed to understand the education provider's plan

for learner intake to be able to determine whether staff numbers were appropriate. Further clarification was also sought around the numbers of cohorts and learners per intake.

Quality activities agreed to explore theme further: We explored this area through email clarification / narrative. We considered this approach appropriate to address the issue raised by the visitors.

Outcomes of exploration: The education provider clarified the numbers of learners. We understood they are planning to recruit a maximum of 27 learners across three intakes in the first year and 33 learners across three intakes in the second year, including the non-MoJ learners. They noted they do not expect all modules to be taught by HCPC registered staff, for example, the Research Methods module. We understood an HCPC registered staff member will have to assess all the work from the MoJ learners as this was a stipulation in the contract. A breakdown of staff allocation was provided against each module in consideration of staff FTE. Details of academic and clinical supervision, programme leadership and higher-level management were also provided. However, the visitors considered that the information provided did not demonstrate there will be sufficient HCPC registered forensic psychologists to deliver an effective programme as there was no evidence to support this.

The visitors considered that the number of staff and their FTE was not sufficient resource for 27 learners in year 1 plus an additional 27 learners in year 2. The visitors noted the education provider planned to recruit an additional 2.2 FTE HCPC registered staff but there was no timeline for recruiting those. The visitors considered that the new staff would need to be in place before learners start the programme in January 2026. This was important because the HCPC registered staff will have to assess all the work from the MoJ learners as this is a stipulation in the contract. Therefore, the visitors requested further evidence to demonstrate that there was a plan in place to ensure adequate staff would be recruited to deliver the programme to all learners.

Quality activity 2 – evidence of a recruitment plan to demonstrate adequate staffing

Quality activities agreed to explore theme further: We explored this area through a meeting with the education provider, followed by the submission of a narrative. We needed to clearly outline for the education provider what we required and we considered this approach appropriate to adequately address the issue raised by the visitors. It also would allow the education provider to ask any questions they may have.

Outcomes of exploration: At the meeting, the education provider explained their learner recruitment plan and how they will ensure adequate staff. They noted recent changes around the number of learners. We understood there will be no more than 23 learners allocated by the MoJ each year, for example 8 in September and January and 7 in May. They noted cohort 1 will now be in January 2026 which means they will have a 'soft start'. They also noted that the senior management has signed off the recruitment of a new full-time staff who will start in November 2025.

The education provider also submitted a breakdown of their staff recruitment plan alongside a detailed breakdown of the proposed number of learners they will be recruiting to the programme over a 3-year period. We noted their year on year calculated staffing requirements. Mapping this to their current staffing, approved and planned recruitment demonstrated how they will ensure the programme will be adequately staffed. In addition, a copy of the email from the education provider's recruitment team confirming that the request to approve a senior lecturer in Forensic Psychology has been approved, provided us with further reassurance of the recruitment plan. Following the second quality activity, we were reassured that the response had adequately addressed our concerns, and we had no further concerns.

Quality theme 3 – ensuring the suitability of practice educators

Area for further exploration: There was an audit process in place to recruit appropriate supervisors who have sufficient practice experience, but there was no information provided around how they are selected, trained, and monitored. Therefore, we were unable to determine how the education provider ensures the suitability of their practice educators. We requested to know how the education provider ensures practice educators have the relevant knowledge, skills and experience to support safe and effective learning.

Quality activities agreed to explore theme further: We explored this through further email clarification / narrative. We considered this approach appropriate to adequately address the issue raised by the visitors.

Outcomes of exploration: The education provider explained that the HMPPS will be responsible for appointing a suitable practice educator (Clinical Supervisor) for each learner. The programme director is responsible for checking that the Clinical Supervisor is HCPC registered and will liaise directly with them to ensure their suitability. The education provider explained further that all Clinical Supervisors are invited to attend a training day and learner induction events to understand their roles and the education provider's expectations of the workplace setting. They are also expected to participate in bi-annual Continuing Professional Development (CPD) training days to support ongoing development.

To ensure compliance and support learner progress, Clinical Supervisors meet at least four times a year with the Academic Supervisor and the learner, allowing for monitoring of both learner development and supervisor engagement with their responsibilities. The visitors considered that the detail provided was helpful, but the documents referenced did not specify that the supervisor needs to be HCPC registered. While it would be unusual for a practice education provider to allocate a supervisor from a non-HCPC profession, the visitors considered the education provider agreement needed to include criteria, or advice on how a supervisor is selected, so they can adhere to the standard (e.g. HCPC registration) rather than just assume it to be the case. Therefore, we requested another quality activity.

Quality activity 2 – the process, including the criteria for determining the suitability of practice educators

Quality activities agreed to explore theme further: We explored this area through a meeting with the education provider, followed by the submission of a narrative. We needed to clearly outline for the education provider what we required and we considered this approach appropriate to adequately address the issue raised by the visitors. It also would allow the education provider to ask any questions they may have.

Outcomes of exploration: At the meeting, the education provider explained their requirement for their practice educators. For example, they explained that practice educators will need to have a minimum two years' experience of working in a forensic setting. The education provider also submitted a decision tree to demonstrate how they determine the suitability of a practice educator. The visitors noted this, however, they considered the decision tree requirements to have HCPC forensic psychologists, but the explicit criteria were missing from the document. Therefore, the visitors requested an updated document showing the criteria practice educators need to meet.

The education provider submitted an updated decision tree which clearly showed the path they will take if the practice educator has at least two years practice experience working in a forensic setting directly with offenders as an HCPC registered forensic psychologist. We also saw the path if the practice educator has at least two years practice experience working in a non-forensic setting as a HCPC registered psychologist with links to a forensic field and / or offenders (for example, as a clinical psychologist). In addition, the education provider listed the criteria that practice educators will need to meet to be able to supervise learners.

Similar to the MoJ practice educators, the practice educators for non-funded learners would also be contacted and checked to ensure their suitability. Self-funded learners will need to have provided the name and address of their practice educator on their application form. All triage meetings will be conducted in the same way as the MoJ learners to ensure the suitability of the practice educators for self-funded learners.

The visitors were satisfied that the updated decision tree, as well as the criteria, clearly demonstrated how the education provider will ensure practice educators are suitable to support learners in practice-based learning. After this quality activity, the visitors were satisfied that the response provided had adequately addressed their concerns.

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 –**
 - The programme qualification is at Level 7 MSc, which is appropriate for HCPC threshold. In relation to the referral from stage 1, we were satisfied, following the stage 2 review, that both the learning outcomes and the assessments would allow learners to meet the standards of proficiency for forensic psychologists.
- **SET 2: Programme admissions –**
 - Entry criteria are clearly stated in the programme specification. For academic requirements, applicants are required to have at least a pass in a BPS accredited MSc in Forensic Psychology and hold Graduate Basis for Chartered Membership (GBC). This is conferred through a BPS accredited undergraduate degree in psychology or an accredited conversion course. Non-academic requirements include a health declaration, and a Supplementary Information Form amongst others.
 - In relation to Recognition of Prior Learning (RPL) as referred from stage 1, the education provider submitted an RPL decision tree that demonstrated how decisions are made depending on the type of RPL route an applicant applies for. We noted two types of RPL – Experiential learning i.e Work Based Professional Experience and Certified learning. The visitors considered the updated decision tree was helpful in determining how RPL is going to be managed. The information submitted included sufficient detail to be confident of the criteria being applied to experiential learning.
 - The visitors were satisfied that the entry criteria are clear and appropriate to the level and content of the programme. Therefore, they considered the standard met.
- **SET 3: Programme governance, management and leadership –**
 - The education provider offers a high level of flexibility and can tailor the programme delivery to meet the needs of HMPPS and the learner. In relation to their online-only teaching strategy, as referred from stage 1, we understood there will be online interactive exercises which will be monitored by the tutor. We noted some of these will take the form of short formative assessments, ensuring all competencies are met.
 - The education provider stated that they adopt a 'horizontal relationship' with their practice education providers. This means both parties are considered equal. They noted this helps to ensure equality, co-

operation and a balanced investment in the programme. Through the Placement Provider agreement, we understood the education provider agrees a Shared Vision which clearly details the responsibility of each party to ensure collaboration is effective.

- For the academic year 2025/26, all learners are required to come through the Ministry of Justice (MoJ) funded routes which means they will already be employed in forensic setting. In 2026/27 academic year, the programme will be open to 'self-funded' applicants who would also be expected to have their practice-based learning arrangements in place before joining the programme. As noted through [quality theme 1](#), further information was received demonstrating how the education provider will ensure the suitability of practice-based learning for both groups of learners and how this will be monitored.
- In relation to how service users and carers are supported, as referred from stage 1, we understood:
 - Service users and carers will attend an induction and complete mandatory training, including equality, diversity, and inclusion. Support will be provided as needed to ensure accessibility.
 - Service users and carers will receive appropriate reimbursement in line with the education provider's principles and be assigned a mentor from the relevant team to support their engagement. This partnership will be equal, with jointly agreed ground rules.
 - The purpose of each engagement will be clearly communicated to service users and carers, outlining their roles and responsibilities. Meetings will use plain English, avoiding jargon and medical terminology, and individual needs will be accommodated.
 - Regular meetings with service users and carers and the lead academic will be held to gather feedback, evaluate participation, and encourage open discussion. These meetings will be properly chaired and minutes will be taken.
- The education provider submitted details, including curriculum vitae (CVs) of several practitioners who would be involved in delivering the programme. Two of the individuals are HCPC registered forensic psychologists and there were others within allied health who would also contribute to the programme. As noted through [quality theme 2](#), further information was received which reassured us that there will be an appropriate number of staff who are able and equipped to deliver the programme effectively.
- A list of each of the modules mapped to appropriate staff demonstrated that all subject areas will be delivered by appropriate educators. The staff CVs also showed they have the necessary knowledge and expertise to deliver their parts of the programme effectively.
- The education provider uses an Online Delivery Framework which includes 'live' online lectures, interactive online resources, and 'live' Learner / Tutor discussion boards. They noted the framework also provides educator guidelines on the development of interactive 'live' online sessions, quality resources, and an engaging experience. Additional resources include a Subject Librarian who provides advice on subject resources accessed through the library. The library has

14,000 eBooks relating to psychology. Learners can download certain software packages and there is access to IT support via the intranet.

- The visitors are satisfied that there is broad evidence of resources available to support learning in all settings.
- In relation to the planned process for managing conduct and performance in practice-based learning referred from stage 1, we noted the programme team has reviewed the university's Fitness to Practise (FTP) policy and found it aligns well with HCPC standards. We noted the process clearly outlines the types of concerns that can be raised regarding learner conduct, competence, and capability. The education provider stated the policy mirrors HCPC's procedural stages and includes a duty to inform relevant PSRBs about the nature and outcomes of any FTP cases. In addition, this is also covered in a specific module - Module PSY7115: Professional Standards, Critical Thinking, and Self Reflection. Therefore, the education provider determined there was no need to develop a new process. The visitors were satisfied with this response and considered the standard met.
- Following the initial review and the quality activities, we were satisfied that all standards within this SET area are met.
- **SET 4: Programme design and delivery –**
 - The programme learning outcomes and module learning outcomes are detailed in the programme and module specification documents respectively and are profession specific. The standards of proficiency (SOPs) mapping demonstrated how the learning outcomes, mapped to the SOPs, show how learners will be able to meet the competencies and skills required by the SOPs.
 - The education provider noted the programme is designed in a way that aligns with the most recent HCPC Standards of Conduct, Performance, and Ethics (SCPE's) and the SOPs. From seeking further clarification, we understood how learners will meet standards related to professional behaviour. For example, further clarity was provided on how PSY7115 (Professional Standards, Critical Thinking, & Self-Reflection) will deliver SOP 2.1: maintain high standards of personal and professional conduct; and SOP 2.2: promote and protect the service user's interests at all times and other SOPs related to professionalism. The further clarity included updated module learning outcomes which adequately covered SOPs 2.1 and 2.2.
 - Evidence of the underlying programme philosophy is clear and coherent and appears across the modules. The programme aligns with the education provider's Learning, Teaching, and Academic Experience Strategy by integrating theory and practice to foster advanced knowledge and independent thinking in the learners.
 - The curriculum is underpinned by a research-informed approach to pedagogy and curriculum design, fostering a culture of inquiry and innovation. This is supported by the education provider's established partnerships with key stakeholders including the police, court system, prisons, probation services, the NHS and private sector hospitals. This ensures the programme reflects the philosophy, core values, skills and knowledge of the profession.

- Module descriptors outline an appropriate range of content that is relevant to current practice as a psychologist. To further maintain the programme's relevance to current practice, the team conducts an annual Programme Review (PAR), allowing for minor changes to be implemented in line with university procedures. If major changes are needed - such as those prompted by PSRB standards or adjustments to practice-based learning - a periodic review may be initiated. This follows the education provider's formal review process.
- The programme embeds the integration of theory and practice through a structured 'pre-live-post' teaching model, supported by Clinical Supervisor engagement and quarterly planning meetings. These help to align theoretical learning with practical application. Learners must evidence their competency through reflective and developmental logs, with final sign-off provided jointly by supervisors and the Deputy Dean of Psychology.
- A variety of learning and teaching methods were provided which the visitors considered suitable for the programme. Further clarification was sought around the specific contact hours that learners will have to allow them to achieve the learning outcomes. For example, we understood each week, learners will undertake four hours of live face-to-face engagement (delivered interactively online) and another four hours of pre- or post-lecture activities. This helps to ensure learners can achieve the learning outcomes.
- Learning outcomes and programme content indicate learners develop greater autonomy through self-reflection throughout the programme. For example, modules PSY7115, PSY7000 & 7200 (Professional Practice, Practice Diary, and Portfolio Preparation I & II) assess the learner's ability to self-reflect in a meaningful way. Reflection will also be embedded within supervision meetings, offering a supportive environment where collaboration with experienced colleagues enables exploration of complex issues and development of effective strategies.
- Module descriptors indicate there is sufficient focus on the development of evidence-based practice competencies in learners. Specifically in modules PSY7125 (Forensic Case Formulation & Risk Assessment) and PSY7135 (Rehabilitative Interventions), learners are taught to integrate research-supported theory, clinical expertise, and case-specific factors to inform decision-making. This would usually start with theoretical exercises like case studies and progressing to real-world practice. A structured approach is used which involves assessing needs, formulating questions, gathering and applying evidence, and evaluating outcomes. The teaching staff enhance their delivery through CPD, practitioner input, and ongoing research that informs and improves practice.
- In relation to the plan for implementing interprofessional learning from September 2025, as referred from stage 1, the education provider explained how they established an Interprofessional Education (IPE) Group to design and implement a cross-disciplinary learning strategy in 2023. The first event held in February 2025 involved learners from various fields including nursing, law, and psychology. We understood the next event has been scheduled for September 2026 and learners

on the new programme will be able to participate. The visitors were reassured that IPE was being implemented.

- There was clear and sufficient evidence provided to satisfy the visitors that all the standards in this SET area are met.

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

- There is clear evidence of the necessity of practice-based learning, with placements forming a core part of the learning experience. Practice-based learning will generally be in the forensic setting where a learner is employed. Self-funded learners who would start the programme from 2026/27 are expected to include details of their practice-based learning site in a forensic setting and their practice-based supervisor, along with their name and address on their application as outlined in [quality theme 1](#) above.
- The overall structure, duration and content of practice-based learning provide sufficient support to learners to develop competencies needed by the learning outcomes. The programme content and practices are well designed to foster independent thinking and grow learner autonomy over time. Clarity was sought around the nature of the practice-based learning to ensure their appropriateness. For example, forensic environments where exposure to harm is more likely (or unavoidable).
- We received an approved copy of the Quality Framework for Approving and Ensuring the Quality of Practice-Based Learning which satisfied us that there is an effective system in place for ensuring the quality of practice-based learning.
- The practice education provider is responsible for providing a practice educator who is HCPC registered and with a minimum of two years' experience. The visitors are satisfied that there is a requirement for learners to be supervised by HCPC registered forensic psychologists in practice.
- The visitors considered that there is a process in place to recruit appropriate supervisors who have sufficient practice experience - but there is room to provide further detail as to how they are selected, trained, and monitored. As outlined in [quality theme 3](#), there was sufficient evidence to reassure us that the education provider has an appropriate process in place to ensure the suitability of practice educators.
- As referred from stage 1, the education provider submitted further information on their process of preparing practice educators and learners for practice-based learning. We received the process for both enrolment and the management of an ongoing relationship with practice educators on the new programme which had now been completed and agreed. The process includes pre-enrolment checks which covers:
 - Qualification checks
 - DBS
 - Fitness to practise
 - Establishing where learners will train and the name of their supervisor

- In relation to training available to practice educators, as referred from stage 1, we understood the programme team has developed a training day for practice educators, specifically aimed at supporting clinical supervisors new to Stage 2 training. Materials were being adapted for online delivery. We were informed that the first session would take place in September 2025. The training covers key areas such as communication, leadership, conflict resolution, and industry-specific knowledge to help supervisors effectively support Forensic Psychology Practitioner Trainees. From receiving further information, we understood the training materials are not yet available and will be available in December 2025 and the training will be conducted in the first week of January 2026. As the training is still being developed, we will refer this to focused review in the new year to ensure it is appropriate.
- During enrolment and prior to induction, both learners and their practice educators will be provided with access to Moodle Workspace. Here, they can see and download the Programme Specification, Module Specifications, Programme and Assessment Handbook, and Portfolio Submission and Assessment Guidance. During the Induction week, both learners and practice educators are guided through the education provider's systems. Documents used for tracking learners' progress will be securely stored and only accessible to the learner, their academic and clinical supervisor and the Head of School.
- Following the initial review and quality activities, the visitors were satisfied that all standards within this SET area have been met.
- **SET 6: Assessment –**
 - The assessment strategy is clear and detailed, with mapping of content to learning outcomes and competencies. Module descriptors provide a clear outline of the assessment strategy put into practice. The programme content is aligned with competencies and standards required by HCPC.
 - The assessment strategy outlines compulsory and optional module assessments. We understood each module has an assessment that is compulsory and there are no optional assessments. The strategy also outlines individual module pass marks, number of resits learners are allowed (and within what period of time), and the maximum number of resits allowed in a year for specific modules. We noted that compensation and condonement is not allowed as all modules must be passed and the maximum a learner can take to complete the programme is four years.
 - The visitors were satisfied that the evidence submitted demonstrates that the assessments are designed in a way that would ensure learners meet the standards of proficiency and the standards of conduct, performance and ethics.
 - There is a variety of assessment types, requiring learners to produce profession-relevant outputs. Module descriptors indicate assessment methods which are appropriate for a programme at this level and the learning outcomes being assessed.
 - Therefore, the visitors determined that all standards within this SET area are met.

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).

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.

Referrals to the focused review process

Training for practice educators

Summary of issue: We understood the programme team has developed a training day for practice educators, which is aimed at supporting clinical supervisors new to Stage 2 training and materials were being adapted for online delivery. We understood the training materials are not yet available and would become available online in December 2025 and the training will be conducted in the first week of January 2026. As the training is still being developed, we decided to refer this to focused review in the new year to ensure it is appropriate in preparing practice educators to support learning and assess learners effectively.

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
- The issues identified for referral through this review should be carried out in accordance with the details contained in section 5 of this report

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.

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 programme approved will not be available.

As the HCPC programme 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 influenced data points are available.

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 institution and programme are approved
- The education provider's next engagement with the performance review process should be in the 2027-28 academic year
- The issues identified for referral through this review should be carried out as a referral to focused review in January 2026: training for practice educators

Reason for this decision: The Panel accepted the visitor's recommendation that the new education provider and the programmes should be approved. They also agreed with the visitor's recommendation of a two-year monitoring period.

