Performance review process report

University of Lincoln, 2018-22

Executive summary

This is a report of the process to review the performance of the University of Lincoln. This report captures the process we have undertaken to consider the performance of the institution in delivering HCPC-approved programmes. This enables us to make risk-based decisions about how to engage with this provider in the future, and to consider if there is any impact on our standards being met.

We have:
- Reviewed the institution's portfolio submission against our institution level standards and found our standards are met in this area following exploration of key themes through quality activities
- Undertook quality activities to arrive at our judgement on performance, including when the institution should next be reviewed
- Recommended when the institution should next be reviewed
- Decided when the institution should next be reviewed

Through this assessment, we have noted:
- a proposed increase in the number of learners on the paramedic provision had not been able to take place. East Midlands Ambulance Service (EMAS) had "little flexibility with their placements". Income from small learner numbers was not significant to ongoing financial stability. The education provider provided clear evidence of working with EMAS to increase the paramedic learner numbers.
- the development of formal partnerships. The education provider supplied clear evidence of the work they have undertaken to deliver practice education expansion relating to the fair share approach.
- the plans to enhance physiotherapy and occupational therapy learners' engagement with local communities to support the teaching to promote public health and prevent ill-health. The education provider had clear plans to cover public health and health determinants within one module in the paramedic programme.
- the Care Quality Commission (CQC) had raised concerns about two hospital trusts in the region. Partnership with local practice education providers occurred on many levels. The education provider provided clear evidence of their work to ensure practice learning was a safe and effective experience.
- bullying and harassment in practice-based learning concerns. The education provider provided clear evidence of how they ensured practice-based learning is a safe environment.

The provider should next engage with monitoring in five years, the 2027-28 academic year, because:

- the education provider is committed to effective quality assurance.
- the education provider responded positively to the challenges of Covid-19.
- the education provider responds to recommendations from external regulators and professional bodies.
- the education provider has identified areas which needed attention and they have reflected upon their plans to address them.
- programmes have policies and procedures to facilitate and respond to feedback from different stakeholders.

Previous consideration	Not applicable. This performance review process was not referred from another process.
Decision	The Education and Training Committee (Panel) is asked to decide: • when the education provider's next engagement with the performance review process should be • whether issues identified for referral through this review should be reviewed, and if so how
Next steps	Outline next steps / future case work with the provider: • Subject to the Panel's decision, the provider's next performance review will be in the 2027-28 academic year • the education provider is currently seeking approval for a diagnostic radiography programme. The proposed first cohort of the programme is to start in September 2024.

Included within this report

Section 1: About this assessment

About us

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

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

Once a programme institution is approved, we will take assurance it continues to meet standards through:
- regular assessment of key data points, supplied by the education provider and external organisations; and

- assessment of a self-reflective portfolio and evidence, supplied on a cyclical basis

Through monitoring, we take assurance in a bespoke and flexible way, meaning that we will assess how an education provider is performing based on what we see, rather than by a one size fits all approach. We take this assurance at the provider level wherever possible, and will delve into programme / profession level detail where we need to.

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

Thematic areas reviewed

We normally focus on the following areas:
- Institution self-reflection, including resourcing, partnerships, quality, the input of others, and equality and diversity
- Thematic reflection, focusing on timely developments within the education sector
- Provider reflection on the assessment of other sector bodies, including professional bodies and systems regulators
- Provider reflection on developments linked to specific professions
- Stakeholder feedback and actions

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 a review of this education provider:

Jason Comber	Lead visitor, Paramedic
Natalie Fowler	Lead visitor, Clinical Scientist
Ann Johnson	Service User Expert Advisor
John Archibald	Education Quality Officer
Tracey Samuel-Smith	Education Manager

We encourage reflections through portfolios to be made at the institution level wherever possible. The performance review process does not always require profession level scrutiny which requires all professionals to be represented in the assessment panel. Rather, the process considers how the education provider has performed at institution level, linked to the themes defined in section 1. Lead visitors have the option to appoint additional advisory partners where this will benefit the assessment, and / or where they are not able to make judgements based on their own professional knowledge.

In this assessment, we considered we professional expertise across all professional areas delivered by the education provider. We considered this because the lead visitors were satisfied they could assess performance and risk without needing to consider professional areas outside of their own.

Section 2: About the education provider

The education provider context

The education provider currently delivers six HCPC-approved programmes across four professions and including two Independent and Supplementary Prescribing programmes. It is a higher education provider and has been running HCPC approved programmes since 2005.

All HCPC-approved programmes are housed in the College of Social Science. Occupational therapy, paramedic, physiotherapy, and independent and supplementary prescribing programmes are in the School of Health and Social Care. The clinical psychology programme is in the School of Psychology.

Practice areas delivered by the education provider

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

	Practice area	Delivery level		Approved since
Pre-registration	Occupational therapy	☒Undergraduate	☐Postgraduate	2019
	Paramedic	☒Undergraduate	☐Postgraduate	2018
	Physiotherapist	☒Undergraduate	☐Postgraduate	2018
	Practitioner psychologist	☐Undergraduate	☒Postgraduate	2005
Post-registration	Independent Prescribing / Supplementary prescribing			2021

Institution performance data

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

Data Point	Bench-mark	Value	Date	Commentary
Total intended learner numbers compared to total enrolment numbers	200	230	2022	The benchmark figure is data we have captured from previous interactions with the education provider, such as through initial programme approval, and / or through previous performance review assessments. Resources available for the benchmark number of learners was assessed and accepted through these processes. The value figure was presented by the education provider through this submission. The education provider is recruiting learners above the benchmark. We explored this by reviewing information related to resourcing of the

				education provider's provision. As detailed in [quality theme 1](#), we recognised the education provider works with practice partners to ensure there is sufficient practice education for all learners. We also understood the financial stability of the education provider was not dependent on the learner cohort on the one-year level 4 Cert HE programme.
Learners – Aggregation of percentage not continuing	3%	2%	2019 - 2020	This Higher Education Statistics Agency (HESA) data was sourced from a data delivery. This means the data is a bespoke HESA data return, filtered bases on HCPC-related subjects. The data point is below the benchmark, which suggests the provider is performing above sector norms. When compared to the previous year's data point, the education provider's performance has improved by 2%. We did not explore this as the education provider was performing better than the benchmark.
Graduates – Aggregation of percentage in employment / further study	94%	98%	2019 - 2020	This HESA data was sourced from a data delivery. This means the data is a bespoke HESA data return, filtered bases on HCPC-related subjects. The data point is above the benchmark, which suggests

				the provider is performing above sector norms. When compared to the previous year's data point, the education provider's performance has improved by 7%. We did not explore this as the education provider was performing better than the benchmark.
Teaching Excellence Framework (TEF) award	n/a	Gold	June 2017	The definition of a Gold TEF award is "Provision is consistently outstanding and of the highest quality found in the UK Higher Education sector." We did not explore this as the education provider was performing to the highest standard.
National Student Survey (NSS) overall satisfaction score (Q27)	76.2%	79%	2022	This NSS data was sourced at the summary. This means the data is the provider-level public data. The data point is above the benchmark, which suggests the provider is performing above sector norms. When compared to the previous year's data point, the education provider's performance has dropped by 16%. However, the previous year's data is based on the subject level. We did not explore this as the education provider was performing better than the benchmark.

Section 3: Performance analysis and quality themes

Portfolio submission

The education provider was asked to provide a self-reflective portfolio submission covering the broad topics referenced in the [thematic areas reviewed](#) section of this report.

The education provider's self-reflection was focused on challenges, developments, and successes related to each thematic area. They also supplied data, supporting evidence and information.

Performance data

We also considered intelligence from others (eg prof bodies, sector bodies that provided support) as follows:

- NHS England, formerly HEE (Health Education England) Midlands, informed us of pressures related to the availability of practice-based learning in the Midlands.

Quality themes identified for further exploration

We reviewed the information provided, and worked with the education provider on our understanding of their portfolio. 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 was performing well against our standards.

Quality theme 1 – partnership with EMAS

Area for further exploration: The visitors noted a proposed increase in the number of learners on the paramedic provision had not been able to take place. This was due to a restriction of practice-based learning within EMAS. EMAS are the education provider's main practice-based learning provider for the paramedic programme. They were also informed EMAS has "little flexibility with their placements so if there are problems there is often little room to manoeuvre with other solutions". The visitors considered this could impact on the sustainability of the provision. The visitors were unsure how the education provider had reflected on any potential impact regarding the financial stability of the programme. The visitors were also unclear what reflection the education provider had undertaken to mitigate against any potential impact on the programme. The visitors therefore sought further information about these areas.

Quality activities agreed to explore theme further: We decided to explore this by requesting an email response from the education provider. We thought this was the most effective way to explore the theme as we decided it was a query to which we needed to clarify our understanding.

Outcomes of exploration: The education provider informed the visitors the increase in paramedic science numbers in 2019 was to facilitate the start of the ambulance technician training requested by EMAS. The ambulance technician learners exited the programme after the first year with a Cert HE. Additional practice education was sourced for the undergraduate learners. The education provider stated in 2020 the Cert HE Ambulance Technician programme was validated as a stand-alone certificate, not an exit award from the undergraduate programme. They reflected the income from the small learner numbers for a one-year level 4 Cert HE programme, was not significant to the schools' ongoing financial stability. They also added the programme will discontinue from the academic year 2023-24.

The education provider stated they will work with EMAS to increase the paramedic learner numbers over the next two years on the undergraduate programme. We understood this will require additional practice-based learning across the 2nd and 3rd year. The education provider reflected how this may be challenging for EMAS, so they have committed to increase the learner numbers slowly. For example, EMAS have asked them to increase the September 2023 intake from 25 to 30.

The visitors considered the education provider had provided clear reflection on any impact of increasing their paramedic numbers.

Quality theme 2 – fair share approach to practice-based learning

Area for further exploration: The visitors noted the development of formal partnerships such as Project Selbourne and the Erasmus Mundus Programme in Norway. They also recognised the education provider had developed memorandums of understanding locally. The visitors understood there are no formalised partnerships with the NHS Trusts who provide practice-based learning. The visitors noted the education provider stated, "a fair share approach with other HEIs [higher education institutions] would be welcomed". They were unsure what reflection the education provider had undertaken in this area. The visitors therefore sought further information about this area.

Quality activities agreed to explore theme further: We decided to explore this by requesting an email response from the education provider. We thought this was the most effective way to explore the theme as we decided it was a query to which we needed to clarify our understanding.

Outcomes of exploration: The education provider informed us they are working with systems in Lincolnshire, including key trusts, the Lincolnshire Training Hub and private, voluntary and independent providers, to deliver practice education expansion relating to the fair share approach. We were informed the aim of this group is to

develop an IT solution to understand practice education capacity and expansion in terms of geography and practice education models. The education provider added a key measure of success is for a formalised partnership to emerge and practice-based learning will be ringfenced. Unused practice capacity is be given to other education providers in the region once practice-based learning has been assured for the education provider's learners.

The visitors considered the education provider had provided clear reflection on the fair share approach to ensuring the availability of practice-based learning.

<u>Quality theme 3 – promoting public health and preventing ill-health in teaching</u>

Area for further exploration: The visitors noted the education provider planned to enhance physiotherapy and occupational therapy learners' engagement with local communities to support the teaching to promote public health and prevent ill-health. This was part of meeting the revised Standards of Proficiency (SOPs). They were unable to locate reflection on, or, information about the work the education provider intends to undertake to do so.

The visitors were also informed the visitors the paramedic science provision already has public health and health determinants within modules in the programme. The visitors noted there are plans to cover these topics in one module at level 5. The visitors were unsure of the work the education provider had undertaken to see a demand for this module. The visitors therefore sought further information about these areas.

Quality activities agreed to explore theme further: We decided to explore this by requesting an email response from the education provider. We thought this was the most effective way to explore the theme as we decided it was a query to which we needed to clarify our understanding.

Outcomes of exploration: The education provider informed the visitors the work to enhance physiotherapy and occupational therapy learners' engagement with local communities was through a shared module. They stated learners will visit and work across different communities in the county as part of the interprofessional module in year 1 of their studies. We understood this may be at organisations such as charities, the voluntary sector, and community groups. Learners travel to meet these communities to see their work, the challenges, and inequalities they experience, and the issues they find important. Through direct engagement with these communities, the theoretical aspect of public health will be more relevant and real to learners. The education provider reflected how members of these communities can provide clarity and reality to the challenges of preventing ill health. In addition, the learners understanding their perspective will make them a better professional.

The paramedic science provision, continues to expand into other areas of health and social care, including urgent care, general practice surgeries, and community paramedics. The education provider reflected learners needed exposure to a wider

range of public health issues and social factors. This was to ensure they would be a better practitioner within the communities they work. We understood previous delivery of the topic had been divided across multiple modules. The programme team had agreed studying a stand-alone module would give the option for more variety and depth of content. This greater knowledge can then be integrated into practical-based learning.

The visitors considered the education provider had provided clear reflection on how, and why, the revised SOPs would be delivered from September 2023.

Quality theme 4 – ensuring safety in practice education

Area for further exploration: The visitors noted the CQC had raised concerns about two hospital trusts in the region. They also noted programmes are also dependent on a small number of practice education providers. The CQC review of the Trusts, indicated improvements were needed. The visitors were unsure what work the education provider had undertaken with these practice education providers to ensure learning was a safe and effective experience. Therefore, the visitors sought more information about this.

Quality activities agreed to explore theme further: We decided to explore this by requesting an email response from the education provider. We thought this was the most effective way to explore the theme as we decided it was a query to which we needed to clarify our understanding.

Outcomes of exploration: The CQC visit in February 2022 reported improvement was required in Urgent Care and Emergency Services at Lincoln County Hospital and Pilgrim Hospital, Boston. The education provider stated the only programme impacted by this was paramedic science. They informed us they continued to place learners at these services as feedback from learners remained positive about their learning opportunities. No negative feedback had been seen in the post-practice education survey.

In addition, the education provider informed us that partnership with local practice education providers occurs on many levels. For example, at senior level, the Associate Professor for practice education is part of the Midlands Allied Health Professions (AHP) practice-based learning network. We were informed these forums ensure the quality experience for learners. At a programme level, for example, the occupational therapy team delivers L'Apple programme. This is a programme for individuals to be trained as practice educators.

After learners have completed practice-based learning they are asked to complete a survey of their experience. These are then reviewed by the school practice education team. Any concerns are passed to the Associate Professor for AHP and the programme lead.

The visitors considered the education provider had provided an in-depth response and clear reflection on how the work they had undertaken with these practice education providers ensured learning was a safe and effective experience.

<u>Quality theme 5 – responding to concerns of bullying and harassment</u>

Area for further exploration: The visitors were informed in the education provider's narrative, learner feedback was received in many forms, and all feedback had been listened to and responded to. For example, consideration was given to internal and externally received feedback. The visitors noted bullying and harassment in practice-based learning were raised as concerns by learners. They were unsure what work had taken place to ensure practice-based learning is a safe environment. The visitors sought further information about this area.

Quality activities agreed to explore theme further: We decided to explore this by requesting an email response from the education provider. We thought this was the most effective way to explore the theme as we decided it was a query to which we needed to clarify our understanding.

Outcomes of exploration: The education provider informed the visitors the National Education and Training Survey (NETS) raised concerns regarding bullying and harassment. However, they had not recognised this locally as there had been minimal reporting or feedback from learners about this. We were informed programme teams continue to ensure it is part of practice educator training and pre- and post-practice education debriefs with learners. The education provider stated their programmes have small cohorts. This made learners' relationship with the academic team more personal. Many learners were supported in practice education by their personal tutor. We recognised this familiarity supports learners' safety.

For example, the education provider informed us there was an occasion where a learner disclosed to their academic tutor, they considered a nurse had approached them too intimately a couple of times. The learner was supported by the academic team to report it to their practice educator. It was subsequently agreed to transfer the learner to another clinical area to complete the practice education. The practice educator raised the concern through the trust safeguarding champion and appropriate investigation procedures were instigated.

The visitors considered the education provider had provided clear evidence of how they ensure practice-based learning is a safe environment.

Section 4: Summary of findings

This section provides information summarising the visitors' findings for each portfolio area, focusing on the approach or approaches taken, developments, what this

means for performance, and why. The section also includes a summary of risks, further areas to be followed up, and areas of good practice.

Overall findings on performance

<u>Quality theme: Institution self-reflection</u>

Findings of the assessment panel:
- **Resourcing, including financial stability** –
  - We noted the education provider had grown each year and has a population of around 19,000 learners, 14,000 of whom are on undergraduate programmes. The education provider has a workforce of around 1,500 academic staff. They have a staff:student ratio of 1:20 which has been maintained throughout the review period.
  - The School of Health and Social Care has an annual income of circa £16m, while the School of Psychology has an income of over £9m. All AHP programmes are delivered in a purpose-built facility which had a major refurbishment in 2021 to increase the clinical skills space and build a virtual reality room.
  - HCPC pre-registration programmes have shown excellent numbers of applications over the review period.
  - We were satisfied how the education provider is performing relating to this area.
- **Partnerships with other organisations** –
  - The education provider has partnerships, for example a practice education provision contract with EMAS, the key provider for the paramedic provision.
  - They are also in the process of developing further partnerships. For instance, the education provider is looking into a memorandum of understanding with the University of Stavanger to cover learner and staff exchange to enhance the learner experience.
  - As detailed in [quality theme 1](#), we recognised the education provider works with practice partners to ensure there is sufficient practice education for all learners.
  - We noted there are no formal partnerships with key local NHS trusts, the Lincolnshire Training Hub or the Lincolnshire Talent Academy. However, the education provider works informally with these partners around issues such as practice education and apprenticeships.
  - We were satisfied how the education provider is performing relating to this area.
- **Academic and placement quality** –
  - Modules are reviewed regularly and may be redesigned at revalidation to ensure they reflect current needs and are fit for purpose. Reviews and revalidations include practice partners and service users.
  - Practice-based learning is overseen by the Associate Professor for Placement Learning and a team of professional services staff. Bespoke

training is provided across the different professions for practice educators, and regular meetings are held with partners. The education provider is part of the wider East Midlands practice education network. Practice providers are audited regularly.

- o Programmes are required to complete annual reporting. There are a range of methods to check whether learning outcomes and teaching is current and meets internal and external standards. These include module evaluations, and Continuous Improvement Plans.
- o Learner assessments in practice education are assessed as pass / fail and all practice learning must be passed.
- o As detailed in quality theme 4, while in practice education, learners had the opportunity to meet with their academic tutor to review objectives and discuss their experience. Practice educators meet with the education provider representatives to discuss learners' progress and achievement. Learners can feedback about their practice experience.
- o As detailed in quality theme 5, NETS raised concerns regarding bullying and harassment in practice. The education provider had not recognised this locally as there had been minimal reporting or feedback from learners about this. Learners have been supported by the programme team to report concerns to practice educators.
- o We were satisfied how the education provider is performing relating to this area.

- **Interprofessional education (IPE)** –
  - o We noted interprofessional education is embedded throughout the programmes but to different extents. Professions undertake modules which include IPE. For example, physiotherapy and occupational therapy learners undertake module Essential Interprofessional Learning. This includes teaching and learning with nursing, social work and speech and language therapy from 2023.
  - o The education provider has also delivered mass IPE events across the School of Health and Social Care, the Medical School, and the School of Pharmacy. The events included lectures, service user experience, cases study work and key opportunities to learn with, from and about other professions.
  - o We were satisfied how the education provider is performing relating to this area.

- **Service users and carers** –
  - o The School of Health and Social Care involve services users in a range of activities, for example quality assurance and programme delivery. They are coordinated by the Together Group.
  - o The clinical psychology programme involves the Service User and Carer Advisory Panel (SUCAP). Three core staff convene SUCAP. All involvement activity is aimed to provide opportunities for panel members to learn and develop skills so that their work builds capacity, knowledge, and confidence across the group. They are involved in activities such as

producing digital teaching resources, planning teaching sessions, or training for selection panels.

- o Feedback from learners and service users about service user and carer involvement has been positive. Service users want to be engaged in a greater variety of activities and across a wider range of programmes. Learners find service user and carers engaging, stimulating and a positive learning experience.
- o SUCAP members were closely consulted about the recent curriculum review. SUCAP members added specific questions to teaching and module feedback as part of quality assurance updates. They were also involved in broader quality assurance, for example, the recent BPS accreditation.
- o The education provider reflected on the risk the service user role in recruitment is tokenistic. They said as cohort sizes grow and the number of interviews expands, this could lead to inconsistency of service user presence. This will be reviewed by the Senior Leadership team and the Associate Professor for recruitment.
- o We were satisfied how the education provider is performing relating to this area.

- **Equality and diversity** –
  - o The education provider has a variety of mechanisms to ensure equality and diversity. For example, there are underpinning policies which consider factors such as staff and learner recruitment. An equality, diversity, and inclusion (EDI) committee oversees compliance with these policies. There is a strategic lead for EDI.
  - o Joint EDI Partnership brings together experts in EDI across human resources, research, marketing, and the Students Union. It advises on future developments and reports to the University Inclusion Committee. There is a Lincoln Equality and Inclusion Advisory group who support the development of bespoke solutions internally and externally.
  - o The Eleanor Glanville Institute offers resources, bespoke lectures, blogs. An annual EDI conference is held which is open to all staff.
  - o We were satisfied how the education provider is performing relating to this area.

- **Horizon scanning** –
  - o The Lincolnshire Integrated Care Board has published its integrated care strategy. This will inform the workforce and training needs over the next five years.
  - o The education provider is investing in a learner-led clinic. This will be initially for physiotherapy learners but may expand. They are visiting other education providers with similar clinics to find the best business model for the clinic.
  - o We were satisfied how the education provider is performing relating to this area.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Quality theme: Thematic reflection

Findings of the assessment panel:
- **Embedding the revised Standards of Proficiency (SOPs) –**
    - o The education provider clearly demonstrated how the revised SOPs will be delivered from September 2023. The education provider has undertaken work to implement the revised SOPs. For example, leadership:
        - ▪ Physiotherapy and Occupational Therapy – they already deliver sessions around leadership as part of the service evaluation module. They are also working to source leadership placement opportunities.
        - ▪ Paramedic Science - There are elements of leadership taught in all practice-based modules, where the learners are expected to lead a team during a simulated scenario.
        - ▪ Clinical Psychology - Preparing learners for system leadership is embedded within the programme. Learners have the opportunity to build leadership skills as they negotiate leadership roles in practice-based learning tasks.
    - o As detailed in quality theme 3, the work to enhance physiotherapy and occupational therapy learners' engagement with local communities is through a shared module. Learners will visit and work across different communities in the county as part of the interprofessional module in year 1 of their studies.
    - o Paramedic learners have exposure to a wide range of public health issues and social factors. Previous delivery of the topic had been divided across multiple modules. The programme team had agreed studying a stand-alone module would give the option for more variety and depth of content.
    - o We were satisfied how the education provider is performing relating to this area.
- **Impact of COVID-19 –**
    - o No learners studying programmes within this review were delayed in graduating because of the impact of Covid-19.
    - o Programmes increased the use of Blackboard and MS Teams to facilitate group activities. Practical sessions were continued in person with the recommended personal protective equipment and socially distanced. Smaller groups used skills suites and sessions were repeated more frequently by academics.
    - o Practice education was discontinued in some services, particularly the private sector, the military, and many community-based services. Some open book exams were moved online. In person learner and educator practice education visits were moved to MS Teams. However, the frequency was the same as prior to Covid-19. The clinical psychology

provision developed workshops aimed at developing clinical skills in online delivery.

- o Learners stated it was more difficult to contact staff during Covid-19. Learners struggled with isolation when undertaking their studies remotely, sometimes without access to family or staff. The education provider reflected, that most contact with staff was via email. Whilst staff continued to respond within the education provider expectation of five working days, learners preferred the opportunity to meet in person. However, learners recognised this was not possible.
- o The education provider reflected they were not well prepared for the move off campus. Many staff did not have access to laptop computers, with staff using desktop machines with a cloud-based system which was not accessible from off site. Staff were also not supplied with mobile phones unless in very specific roles. This resulted in staff using Teams for communication. Learners were not positive about communication from the practice education provider prior to starting.
- o From 2021 all full-time programmes returned to a minimum of 80% in-person teaching. The education provider will review learner attainment for the 20/21 and 21/22 cohorts due to graduate in the summer of 2023 and 2024 to identify any potential trends and devise an action plan if appropriate.
- o We were satisfied how the education provider is performing relating to this area.
- **Use of technology: Changing learning, teaching and assessment methods** –
  - o Prior to Covid-19, all programmes were delivered face to face, with tutor-directed activity between sessions and learner-led activities to enhance the learning.
  - o The education provider used Blackboard as its virtual learning environment, Blackboard Collaborate for online group activities, and Panopto to develop teaching materials. During Covid-19 the education provider moved to MS Teams for communications. The use of Blackboard Collaborate increased, and this has continued.
  - o We were satisfied how the education provider is performing relating to this area.
- **Apprenticeships** –
  - o We recognised the education provider does not run any apprenticeship programmes which are HCPC-approved.
  - o The education provider has been asked by the AHP Council if they would consider establishing postgraduate apprenticeship programmes in occupational therapy and physiotherapy. They education provider is considering this request.
  - o We were satisfied how the education provider is performing relating to this area.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Quality theme: Sector body assessment reflection

Findings of the assessment panel:
- **Assessments against the UK Quality Code for Higher Education** –
    - We understood the last institutional review by the Quality Assurance Agency for Higher Education (QAA) was in 2012, outside of the timeline of this process review.
    - We were satisfied how the education provider is performing relating to this area.
- **Assessment of practice education providers by external bodies** –
    - As detailed in quality theme 4, the CQC has reported concerns since 2018. This has predominantly focussed upon two hospitals trusts in the region, United Lincolnshire Hospitals NHS Trust, and Northern Lincolnshire and Goole Hospitals NHS Trust. These Trusts are now deemed to be in the Requires Improvement category.
    - The education provider has the mechanisms and processes to monitor and respond to feedback about practice education from external bodies.
    - We were satisfied how the education provider is performing relating to this area.
- **National Student Survey (NSS) outcomes** –
    - Only the BSc (Hons) Paramedic Science programme, was required to take part in the NSS survey. We noted the education provider reflection on their scores. They saw the result of overall satisfaction was good within the sector, but not as good as the education provider would have liked.
    - The education provider noted feedback was positive about the expertise of the academic team, the wide range of practice education, the approachability of the staff and the engaging material including online.
    - Negative feedback was received related to learners' experience during Covid-19 experience, including online learning.
    - The education provider has the means and processes to review the results and comments, and to react appropriately, with the view to improve the NSS score. For example, programme health checks mid-semester were instigated to address any learner concerns and the Student Union has supported the growth of an active paramedic learner society.
    - We were satisfied how the education provider is performing relating to this area.
- **Office for Students monitoring** –
    - We noted the education provider has not had any concerns raised by the Office for Students (OfS) which subsequently initiated any monitoring.
    - The education provider has begun to map the requirements of the revised conditions of registration against current approaches and monitoring processes.
    - A working group will undertake a full review of the quality assurance processes. Updates to quality assurance processes will be agreed and

submitted to the Academic Affairs Committee in June 2023. New processes will be introduced for the start of academic year 2023 / 24.
- o We were satisfied how the education provider is performing relating to this area.
- **Other professional regulators / professional bodies** –
  - o The education provider reports to other professional regulators or professional bodies. For instance, the prescribing provision was revised in 2021 to adhere to the Royal Pharmaceutical Society 2021 prescribing framework. Following modification, this programme was approved by the Nursing and Midwifery Council and HCPC without any conditions or actions required.
  - o The paramedic science provision has decided not to report to the College of Paramedics.
  - o We were satisfied how the education provider is performing relating to this area.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Quality theme: Profession specific reflection

Findings of the assessment panel:
- **Curriculum development** –
  - o The visitors noted the work each HCPC-approved programme had undertaken regarding developing their curriculum. They recognised most of the education provider's provision is working towards revalidation in 2023.
  - o For example, the physiotherapy programme team are planning to keep module content which was positively received, for instance around practice. They were also developing module content to meet new demands of the role from profession-specific SOPs.
  - o We were satisfied how the education provider is performing relating to this area.
- **Development to reflect changes in professional body guidance** –
  - o The education provider has the means for reviewing and implementing, if appropriate, any changes in professional body guidance.
  - o For example, the Royal College of Occupational Therapists and the Chartered Society of Physiotherapists recently produced, in collaboration, principles of practice-based learning. The education provider reviewed these. They considered their work with stakeholders such as AHP Council reinforced some of the work they had already started.
  - o We were satisfied how the education provider is performing relating to this area.

- **Capacity of practice-based learning** –
    - The education provider works to expand practice education provision. For instance, they engage in multiple stakeholder meetings. As detailed in [quality theme 2](#), the education provider works with partners in Lincolnshire to deliver practice education expansion relating to the fair share approach.
    - The Practice Learning Hub works with programme teams to support learners in practice. The education provider works with NHS, Local Authority, and private / voluntary practice partners. They are represented on local and regional practice education expansion and quality groups, which report to local Integrated Care Boards.
    - The education provider is informed of cancelled or withdrawn practice education in good time. The organisation responsible for the cancellation / withdrawal also offers potential alternatives for the learner. The education provider works to ensure they have practice education in reserve in the event of late notice practice-based learning withdrawal.
    - Practice education provision is underpinned by a quality assurance process. This includes regular educational audits which are housed on a Placement Management System (PEMS). Learner outcomes and experience evaluations are monitored to understand the workplace in terms of safety and quality. The education provider shares these with partners during routine meetings and within the educational audit cycle.
    - We were satisfied how the education provider is performing relating to this area.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Quality theme: Stakeholder feedback and actions

Findings of the assessment panel:
- **Learners** –
    - Learner feedback is received in many forms, for example through learner representatives, and all feedback is listened to and responded to.
    - Programme committee meetings are held each semester and group representatives are invited to these formal meetings and minutes are shared with attendees after the event.
    - As detailed in [quality theme 5](#), bullying and harassment is of concern. A majority of learners said they would not report it. This is despite the mechanisms to do so. In response, programme leads will work with practice educators regarding reporting mechanisms for bullying. They will also review the content of the practice educator training.
    - We were satisfied how the education provider is performing relating to this area.

- **Practice placement educators** –
  - The education provider has the means to record practice educator feedback using PEMS. Although this is promoted to partners, uptake is poor. For example, in the period September 2018 to December 2022, 37 practice educator evaluations were returned for physiotherapy from a total practice education provision of 353 practice education experiences across the period.
  - The main source of feedback is through practice partner forums and educational audit engagement with partners. There are regular meetings between the education provider and clinical practice teams at all major partners. In these meetings, they discuss any arising issues. We noted the education provider is represented at the AHP council and faculty meetings.
  - The practice education team will be developing clear processes for the routine collection of educator feedback.
  - We were satisfied how the education provider is performing relating to this area.
- **External examiners** –
  - We noted feedback from external examiners was generally positive. Feedback from the external examiner for the BSc (Hons) Physiotherapy programme, identified the "service transformation module and learner projects are a distinctive feature of this programme. They clearly relate innovation and evidence-based practice to learner development as well as clearly linking this work to physiotherapy practice."
  - Where external examiners have made recommendations for further enhancements to a programme, programme leaders responded directly to each recommendation. For instance, the occupational therapy external examiner suggested the greater use of "bank staff" or Associate Lecturers. The programme now has Associate Lecturers employed to deliver across several modules.
  - We were satisfied how the education provider is performing relating to this area.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

<u>Data and reflections</u>

Findings of the assessment panel:
- **Learner non continuation:**
  - The education provider considered the increase in attrition rate to be due to Covid-19, and / or the move to a more blended delivery of programmes.
  - The increase in attrition for the prescribing programme in 2020 / 21 was seen to be impacted by NHS factors. These learners were likely to

have been in frontline NHS positions and facing more pressure during Covid-19.
- o We were satisfied how the education provider is performing relating to this area.
- **Outcomes for those who complete programmes:**
  - o The programmes who were eligible for a graduate outcome survey both had 100% employment and 100% highly skilled employment. None of the graduates reported as unemployed.
  - o There is a clear plan to ensure this engagement and positive results. This plan includes ensuring learners are career ready, particularly through employers being embedded in the programme.
  - o We were satisfied how the education provider is performing relating to this area.
- **Teaching quality:**
  - o As an indicator of success, the education provider has grown each year with a population of around 19,000 learners and around 1,500 staff members.
  - o The education provider benchmarks success by graduate outcomes. The education provider wants learners to leave and progress into graduate jobs which help them make a difference in their communities. They have a responsibility and ambition to provide their learners with the skills and attributes they need to engage successfully in a global society.
  - o We were satisfied how the education provider is performing relating to this area.
- **Learner satisfaction:**
  - o Overall satisfaction was good within the sector but not as good as the education provider would have liked. Student support, organisation and student union were the lowest scoring questions. They received positive comments about the expertise of the academic team, the range of placements, and the approachability of the staff.
  - o The education provider reflected the negative feedback was related to learners' experience during Covid-19 and online learning.
  - o We were satisfied how the education provider is performing relating to this area.
- **Programme level data:**
  - o The visitors considered the education provider has a sufficient number of staff in place to ensure programmes are run effectively. The visitors also noted some programmes have substantial enrolment numbers.
  - o We were satisfied how the education provider is performing relating to this area.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Section 5: Issues identified for further review

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

There were no outstanding issues to be referred to another process.

Referrals to next scheduled performance review

Programme(s) applicable to:
- MSc Occupational Therapy (Pre-registration), full time
- BSc (Hons) Paramedic Science, full time
- MSc Physiotherapy (pre-registration), full time
- MSc Speech and Language Therapy, full time accelerated
- Independent/Supplementary Prescriber Preparation Post Graduate Certificate, part time
- Independent/Supplementary Prescriber Preparation Practice Certificate, part time

The visitors noted the education provider works with practice partners on the shared understanding that the education provider is informed of cancelled or withdrawn practice education in good time. Also, wherever possible, the organisation responsible for the cancellation / withdrawal offers potential alternatives for the learner. We noted this may not be always possible for smaller providers, but Trusts and the training hub support this. The education provider work to ensure they have practice education in reserve in the event of late notice practice-based learning withdrawal. They also engage in regular open communication with partners to secure practice education.

The visitors considered there was the potential for practice education to be withdrawn or cancelled at any time. They considered this to be an area for the education provider to reflect upon in the next performance review.

Section 6: Decision on performance review outcomes

Assessment panel recommendation

Based on the findings detailed in section 4, the visitors recommend to the Education and Training Committee that:
- 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
- Internal stakeholder engagement
  - The education provider engages with a range of stakeholders with quality assurance and enhancement in mind. Specific groups engaged by the education provider were learners, external examiners, practice educators, other education providers, key local NHS trusts, the Lincolnshire Training Hub and the Lincolnshire Talent Academy.
- External input into quality assurance and enhancement
  - The education provider engaged with professional bodies. They considered professional body findings in improving their provision.
  - The education provider engaged with RPS. They considered the findings of NMC in improving their provision.
  - The education provider considers sector and professional development in a structured way.
- Data supply
  - Data for the education provider is available through key external sources. Regular supply of this data will enable us to actively monitor changes to key performance areas within the review period
- What the data is telling us:
  - From data points considered and reflections through the process, the education provider considers data in their quality assurance and enhancement processes and acts on data to inform positive change

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

Reason for this decision: As above.

Appendix 1 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
MSc Occupational Therapy (Pre-registration)	FT (Full time)	Occupational therapist			01/01/2019
BSc (Hons) Paramedic Science	FT (Full time)	Paramedic			01/09/2018
MSc Physiotherapy (pre-registration)	FT (Full time)	Physiotherapist			01/01/2018
Doctorate in Clinical Psychology (DclinPsy)	FT (Full time)	Practitioner psychologist	Clinical psychologist		01/01/2005
MSc Speech and Language Therapy	FTA (Full time accelerated)	Speech and language therapist			30/01/2023
Independent/Supplementary Prescriber Preparation Post Graduate Certificate	PT (Part time)			Supplementary prescribing; Independent prescribing	01/10/2021
Independent/Supplementary Prescriber Preparation Practice Certificate	PT (Part time)			Supplementary prescribing; Independent prescribing	01/10/2021

Appendix 2 – summary report

If the education provider does not provide observations, only this summary report (rather than the whole report) will be provided to the Education and Training Committee (Panel) to enable their decision on the next steps for the provider. The lead visitors confirm this is an accurate summary of their recommendation (including their reasons) and any referrals.

Education provider	Case reference	Lead visitors	Review period recommendation	Reason for recommendation	Referrals
University of Lincoln	CAS-01265-P8W9L1	Jason Comber and Natalie Fowler	Five years	Internal stakeholder engagement • The education provider engages with a range of stakeholders with quality assurance and enhancement in mind. Specific groups engaged by the education provider were learners, external examiners, practice educators, other education providers, key local NHS trusts, the Lincolnshire Training Hub and the Lincolnshire Talent Academy. • External input into quality assurance and enhancement o The education provider engaged with professional bodies. They	Withdrawn or cancelled practice education – referred to next scheduled performance review

				considered professional body findings in improving their provision. ○ The education provider engaged with RPS. They considered the findings of NMC in improving their provision. ○ The education provider considers sector and professional development in a structured way. • Data supply ○ Data for the education provider is available through key external sources. Regular supply of this data will enable us to actively monitor changes to key performance areas within the review period • What the data is telling us:	

| | | | | ○ From data points considered and reflections through the process, the education provider considers data in their quality assurance and enhancement processes and acts on data to inform positive change | |