

Approval process report

University of St Mark and St John, Physiotherapy, 2021

Executive summary

The visitors are recommending approval of the programme without conditions. There are no referrals to any other process and no issues need to be explored through other processes. This report will be submitted to the meeting of the Education and Training Panel on 31 August 2022.

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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 the programme(s) detailed in this report meet our education standards. The report details the process itself, evidence considered, outcomes and recommendations made regarding the programme(s) approval / ongoing approval.

Our standards

We approve education providers and programmes 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 institution level standards are met by the institution delivering the proposed programme(s)
- Stage 2 – we assess to be assured programme level standards are met by each proposed programme

Through the approval process, we take assurance in a bespoke and flexible way, meaning 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 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:

| | |
|----------------|---|
| Janet Lawrence | Lead visitor, Physiotherapist |
| Carol Rowe | Lead visitor, Physiotherapist |
| Niall Gooch | Education and Quality Officer |
| Rabie Sultan | Education and Quality Officer (up to visitor feedback of stage 2) |

Section 2: Institution-level assessment

The education provider context

The education provider currently delivers 4 HCPC-approved programmes across 1 profession. It is a university and has been running HCPC approved programmes since 2003.

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 | Physiotherapist | <input checked="" type="checkbox"/> Undergraduate | <input checked="" type="checkbox"/> Postgraduate | To start 2022 |
| | Speech and language therapist | <input checked="" type="checkbox"/> Undergraduate | <input type="checkbox"/> Postgraduate | 2003 |

Institution performance data

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

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

| Data Point | Benchmark | Value | Date | Commentary |
|---|-----------|-------|------------|--|
| Total intended learner numbers compared to total enrolment numbers | 130 | 220 | 01/07/2022 | There is a disparity here, this will be explored with the education provider through their next performance review and cycle and was used to focus the visitors' assessment. |
| Learners – Aggregation of percentage not continuing | 3% | 1% | 01/07/2022 | This is an positive figure, showing very few learners leave the programme prematurely. This data indicated this is an area of good performance. |
| Graduates – Aggregation of percentage in employment / further study | 93% | 94% | 01/07/2022 | This figure suggests there are not any serious issues to be considered around the institution's ability to deliver well-qualified graduates to the workplace. |
| Teaching Excellence Framework (TEF) award | Silver | | 01/07/2022 | Suggests a good level of teaching with room for improvement and development. |

| | | | | |
|--|-------|-------|------------|--|
| National Learner Survey (NSS) overall satisfaction score (Q27) | 76.5% | 81.6% | 01/07/2022 | A good score suggesting that learners feel engaged and happy with programmes at the institution. |
| HCPC performance review cycle length | | | | Not relevant as SMJ has not been through performance review. |

The route through stage 1

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

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

Admissions

Findings on alignment with existing provision:

- **Information for applicants –**
 - The education provider has an Admissions Policy and Procedure which applies to all programmes across the institution. There is also a dedicated area on its website for applicants, and guidance on applications is also available. The bespoke page links to funding information, and to information for new and international learners. There are also programme specific pages.
- **Assessing English language, character, and health –**
 - The requirement for assessing English language at an institutional level and which apply to all programmes as set out in the Admissions Policy & Procedures and Student Regulations Framework. The programme specific entry criteria are clearly defined within the admission criteria section of the programme specification.
 - These documents and the education provider's website include information for applicants whose English is not their first language. The level of applicants English language skills is reviewed during the interview process. All applicant I applicants will undertake an occupational health and DBS check and requirements regarding applicant's health and character are also explained in the documents.

This section outlines the academic and professional entry criteria.

- **Prior learning and experience (AP(E)L) –**
 - The education provider has a defined policy around this area which is explained in the Learner Regulations Framework. It requires a programme-level mapping exercise for applicants who may wish to have previous learning taken into account. Programmes have significant individual autonomy regarding their individual approaches.
 -
- **Equality, diversity and inclusion –**
 - The Admissions Policy and Procedures set out the how learners are admitted to the university and includes a commitment to treating all applicants fairly with respect and are given equal consideration. Programme teams are required to consider equality, diversity and inclusion when designing programmes, via the Equality Analysis Form and through annual monitoring. Equality, Diversity and Inclusion (EDI) is reviewed and monitored at an institutional level via the EDI Committee.

For this part of the institution-level assessment, it is clear that the new programme will be appropriately integrated into these mechanisms.

Non-alignment requiring further assessment: None.

Management and governance

Findings on alignment with existing provision:

- **Ability to deliver provision to expected threshold level of entry to the Register¹**
 - The education provider has full taught degree awarding powers and, is subject to the Office for Students (OFS) conditions of registration. The provider have noted that they continue to meet the OFS requirements around quality and standards. They have a robust programme approval process which ensures that programmes are designed to meet threshold standards and that they are set at the correct level.
 - The provider has established assessment processes including the use of External Examiners and a two-tier assessment board system which confirms that the University's provision is set at expected threshold levels. The External Examiners and assessment boards are a key part of the internal quality process.
- **Sustainability of provision –**
 - The education provider provided details of the document they utilise to ensure the continued sustainability of their programmes. These include a Marjon Growth plan and the Quality Assurance Framework.

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

- All programmes are considered by the Senior Management Team before commencing to the second stage of the programme approval process. This includes reviewing resources and the submission of a costing tool. The costing tool considers the programme over a minimum of three years, and this is discussed fully at the programme approval event. Annual business planning ensures that programmes are adequately resourced.
- **Effective programme delivery –**
 - External Examiner annual reports provide opportunity for good practice and areas for improvement to be identified. The programme team respond to the annual report identifying actions to both disseminate good practice and respond to any issues for improvement. All responses to External Examiner reports are approved by the relevant Director of School and progress against actions monitored through the university Board of Studies. External Examiner themes are reviewed by the Senate.
 - Learner outcomes identified through achievement, good degrees, retention, and employability data, are reported on annually through the usual annual monitoring and KPI monitoring processes and monthly at the Board of Studies. This allows updates to be provided within the university and to the Board of Governors.
 - Peer review of teaching takes place across all programmes to assist with improving the learning experience for learners. Monitoring of peer review occurs within Academic Schools and is discussed at the university Board of Studies. This ensures that the university has appropriately qualified and skilled staff to deliver a high-quality academic experience to all learners.
- **Effective staff management and development –**
 - The education provider's focus on continual enhancement is fully embedded within the Learning and Teaching Strategy and the Quality Assurance Framework. All new academic staff are required to complete the PG Certificate (PGCert) in Learning and Teaching in HE which is accredited by Advance HE, or complete another route to accreditation as appropriate to their experience and existing teaching qualifications.
 - Learners who complete the PGCert also receive Fellowship of the Higher Education Academy (HEA). Academic staff are encouraged to achieve further professional recognition (SFHEA and PFHEA) with this supported through the Academic Promotion and Career Development Procedure.
 - The provider have provided details of their approach to providing ongoing learning and development support to all their staff. Examples of these include, peer review of teaching, and providing training to all mentors and practice educators. Specific committee and boards have oversight and responsibility to ensure effective staff management and development.

- **Partnerships, which are managed at the institution level –**
 - The regulation the education provider has in place to manage partnerships apply at an institutional level. Educational audits are currently, undertaken with practice-based learning providers to monitor and evaluate the practice learning environment.

As regards this section, we can be satisfied that the new programme will be appropriately aligned with all of the relevant existing policies at the institution.

Non-alignment requiring further assessment: None.

Quality, monitoring, and evaluation

Findings on alignment with existing provision:

- **Academic quality –**
 - The education provider has established regulations, policies and processes that ensure the academic quality of its provision. All programmes are reviewed annually through a robust annual monitoring process, under the ultimate supervision of the Board of Studies.
 - The provider has a clearly defined policy on the appointment of external examiners, this requires all external examiners to have the required academic and professional qualifications, expertise, and registration.
- **Practice quality, including the establishment of safe and supporting practice learning environments –**
 - The education provider has established processes to manage and monitor the quality of placements for learners. This is outlined in the programme placement handbook. Education audits of practice providers are undertaken to monitor and evaluate the practice learning environment, as outlined in the work placement agreement.
 - There is an established procedure to support learners through their placements, including reporting concerns. Training is provided to all mentors and practice educators to ensure their ongoing professional development. They have access to the resources and information to develop and maintain their academic & professional skills relevant to the specific programme learning outcomes.
- **Learner involvement –**
 - Learners are represented at all levels of the university through learner membership of academic university committees and via the Student Union and can engage further through the membership of programme approval panels.
 - The provider has a variety of informal and formal feedback mechanisms to enable learners are involved in their programme development. Programme teams ensure that appropriate actions resulting from student feedback are implemented.

- **Service user and carer involvement –**
 - The provider has established practice of service user and carer involvement within the current approved provision. Examples of service users and carers involvement include pre-recording videos of their experiences and live QA sessions. These are used as part of the learner recruitment and selection process. They also contribute through consultation with the re-design and validation of existing programmes.

Non-alignment requiring further assessment: None.

Learners

Findings on alignment with existing provision:

- **Support –**
 - The education providers approach to providing support to learners is set out in the Programme Placement Handbook Student Regulations Framework: Section 17 - Complaints Procedure. The support provide to students is made available across all stages of their studies, including during practice-based learning. These documents also set out the procedures for dealing with complaints in a confidential manner; and escalating concerns about practice.
 - Each learner is allocated a Personal Development Tutor (PDT) who is expected to provide advice and support in relation to academic progress, professional development and pastoral care. The PDT where applicable will also sign post learners to the relevant professional services department.

- **Ongoing suitability –**
 - The education provider has procedures in place to ensure that all learners are competent, safe, effective and ethically appropriate for the profession. These procedures enable practice educators and academic staff to discuss and review concerns regarding the professionalism and ability of a learner to remain within the practice learning environment. Learners are supported through these procedures to develop a resolution, before escalating to a formal procedure.

- **Learning with and from other learners and professionals (IPL/E) –**
 - The education provider's Learning and Teaching Strategy Learners outlines the collaborative intent of the curricula to ensure an inclusive and support approach. It will apply to the new programme seeking approval.
 - Speech and Language Therapy students take part in inter-professional learning with dietetic, dentistry and teacher training student. Clinical placement provides a context for extensive interprofessional learning in medical, social and education settings as part of multi-disciplinary team working and learners reflect on

their own practice experiences and interactions within the multi-disciplinary teams.

- **Equality, diversity and inclusion –**
 - The education provider has an established approach to Equality, Diversity and Inclusion (EDI). This is reviewed and monitored at an institutional level via the ED&I Committee and reported upon annually. They have signed up as a Stonewall Diversity Champion and has Disability Confident Employer and Mindful Employer accreditations. Understanding equality and diversity training is mandatory for all staff as part of the new start induction process.

Non-alignment requiring further assessment: None

Assessment

Findings on alignment with existing provision:

- **Objectivity –**
 - The education provider has presented three specific frameworks and policies applied at institution. These are applied to ensure internal consistency and external confidence of standards. Assessments across all professional programmes are designed to give a clear idea of whether a learner is fit to practise by the end of a programme. Examples of how objectivity in assessments is managed include, double marking, and sampling by external examiner
 - Generic grade and level descriptors are provided to ensure a consistency within marking practices. A template is used for module descriptors and, once completed, uploaded to the Virtual Learning Environment so that learners are clear on how they are being assessed. Marking is anonymous, and moderated according to university procedures

- **Progression and achievement –**
 - The education provider's student regulation framework is an institution wide document which outlines the criteria required to pass module, stages and programmes. The documents also include the procedures in the event of academic and/or practice learning failures.
 - The University has a two-tier assessment system consisting of the Module Assessment Board (MAB) and Progression and Awards Board (PAB). The MAB, confirms marks and awards credit at module level subject to the achievement of the learning outcomes of those modules. The PAB, makes decisions relating to the progression of learners in programmes and the consequence of failure at any stage of a programme. They also make recommendations for the conferment and classification of awards to Senate. Senate delegates the responsibility for approving the PAB

outcomes to the university's Registrar and Company Secretary in his role as secretary to Senate.

- **Appeals** –
 - The student regulation framework also sets out the procedures used for handling complaints and appeals. A report and subsequent action plan on learner casework, inclusive of complaints and appeals, for the previous academic session are submitted annually to both Senate and the Board of Governors. Complaints and appeals are governed by the Student Regulations Framework.

Non-alignment requiring further assessment: None.

Outcomes from stage 1

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

Section 3: Programme-level assessment

Programmes considered through this assessment

| Programme name | Mode of study | Profession (including modality) / entitlement | Proposed learner number, and frequency | Proposed start date |
|-------------------------------------|----------------|---|---|---------------------|
| Integrated Masters in Physiotherapy | FT (Full time) | Physiotherapist | 40 learners, 1 cohort per academic year | 12/09/2022 |

Stage 2 assessment – provider submission

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

Quality themes identified for further exploration

We reviewed the information provided, and engaged 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 – Practice-based learning capacity

Area for further exploration: The Visitors sought clarification of whether the education provider was in regular contact with all the organisations that would be providing practice-based learning.

Quality activities agreed to explore theme further: We agreed a conversation with the education provider was the most straightforward way to resolve this issue.

Outcomes of exploration: The education provider explained how they collaborate and communicate with practice partners. They re-assured the visitors that they were in regular touch with all the organisations that would be taking learners during the lifetime of the programme. The visitors are satisfied that there is effective communication processed in place to meet the practice-based learning requirements in the SET.

Quality theme 2 – Equipment

Area for further exploration: The Visitors sought clarification with regards to the types of plans for investing in equipment. This was to ensure that learners are able to obtain appropriate experience with relevant equipment.

Quality activities agreed to explore theme further: We agreed a conversation with the education provider was the most straightforward way to resolve this issue.

Outcomes of exploration: The education provider provided a clear explanation of what equipment had been obtained and what it would be used for. They also told us about their future plans for obtaining additional equipment. The visitors considered that this was an appropriate outcome.

Section 4: Findings

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

Conditions

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

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

Overall findings on how standards are met

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

Findings of the assessment panel:

- **SET 1: Level of qualification for entry to the Register** – this standard is covered through institution-level assessment
- **SET 2: Programme admissions** – the visitors considered that SET 2.2 was met, as the selection and entry criteria were appropriately tailored to the programme and to the institutional policies, and those policies would deliver individuals who could work effectively as professionals.
- **SET 3: Programme governance, management and leadership** – the visitors viewed details of the programme team, including curriculum vitae, and were satisfied that they were appropriate for the delivery of an effective programme (3.9, 3.10).
- They reviewed records of ongoing relationships with practice-based learning providers (3.5, 3.6), and of planning for providing appropriate resources (3.12). The quality activity noted above was intended to explore some of these issues and the visitors were satisfied that the standards were met.
- **SET 4: Programme design and delivery** – the visitors reviewed detailed evidence relating to the structure, content and pedagogical approaches on the programme.
- They are satisfied that the material taught on the programme, and the learning and teaching methods that will be used, are appropriate (4.3, 4.5, 4.6, 4.7) and will enable learners to meet the standards of proficiency (4.1, 4.2). A clear mechanism was laid out by which the programme will be updated as necessary (4.4, 4.8).
- **SET 5: Practice-based learning** – Following the quality activity recorded above, the visitors considered that practice-based learning would support the activities of the programme appropriately. They reviewed timetables and sample audits, and had a clear understanding from the programme team of how monitoring and updating mechanisms would work.
- **SET 6: Assessment** – The visitors agreed that assessment was carefully adjusted to ensure that learners were able to show their understanding of the standards of proficiency and the standards of conduct, performance and ethics (6.1, 6.2).
- Marking schemes and sample assessment guides enabled them to be confident about this. The documents provided the visitors assurances the assessment methods, in their variety, would lead to the learning outcomes being properly measured (6.5).

Risks identified which may impact on performance: None.

Areas of good and best practice identified through this review: The visitors did not note any specific areas of best practice.

Section 5: Referrals

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

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

Recommendations

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

The visitors did not set any recommendations.

Section 6: Decision on approval process outcomes

Assessment panel recommendation

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

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

Appendix 1 – list of open programmes at this institution

| Name | Mode of study | Profession | Modality | Annotation | First intake date |
|--|----------------------|-------------------------------|-----------------|-------------------|--------------------------|
| BSc (Hons) Speech and Language Therapy | PT (Part time) | Speech and language therapist | | | 01/09/2003 |
| BSc (Hons) Speech and Language Therapy | FT (Full time) | Speech and language therapist | | | 01/09/2003 |
| BSc (Hons) Speech and Language Therapy | FT (Full time) | Speech and language therapist | | | 01/09/2008 |
| BSc (Hons) Speech and Language Therapy | PT (Part time) | Speech and language therapist | | | 01/09/2008 |
| Integrated Masters in Physiotherapy | FT (Full time) | Physiotherapist | | | 12/09/2022 |