hcpc health & care professions council

Visitors' report

Name of education provider	St Georges University of London
Programme name	BSc (Hons) Paramedic Science
Mode of delivery	Full time
Relevant part of the HCPC Register	Paramedic
Date of visit	11 – 12 March 2015

Contents

Executive summary

The Health and Care Professions Council (HCPC) approve educational programmes in the UK which health and care professionals must complete before they can apply to be registered with us. We are a statutory regulator and our main aim is to protect the public. We currently regulate 16 professions. All of these professions have at least one professional title which is protected by law. This means that anyone using the title 'paramedic' must be registered with us. The HCPC keep a register of health and care professionals who meet our standards for their training, professional skills, behaviour and health.

The visitors' report which follows outlines the recommended outcome made by the visitors on the approval of the programme. This recommended outcome was accepted by the Education and Training Committee (Committee) on 27 August 2015. At the Committee meeting, the programme was approved. This means that the education provider has met the condition(s) outlined in this report and that the programme meets our standards of education and training (SETs) and ensures that those who complete it meet our standards of proficiency (SOPs) for their part of the Register. The programme is now granted open ended approval, subject to satisfactory monitoring.

Introduction

The HCPC visited the programme at the education provider as it was a new programme which was seeking HCPC approval for the first time. This visit assessed the programme against the standards of education and training (SETs) and considered whether those who complete the programme meet the standards of proficiency (SOPs) for their part of the Register.

This visit was part of a joint event. The education provider also reviewed the programme. The visit also considered a different programme, Undergraduate Diploma in Paramedic Science. The education provider and the HCPC formed a joint panel, with an independent chair and secretary, supplied by the education provider. Whilst the joint panel participated in collaborative scrutiny of all the programmes and dialogue throughout the visit; this report covers the HCPC's recommendations on this programme only. A separate report exists for the other programme. As an independent regulatory body, the HCPC's recommended outcome is independent and impartial and based solely on the HCPC's standards. A separate report, produced by the education provider outlines their decisions on the programmes' status.

Visit details

Name and role of HCPC visitors	Graham Harris (Paramedic) Anthony Hoswell (Paramedic) Dee Keane (Lay visitor)
HCPC executive officer (in attendance)	Hollie Latham
Proposed student numbers	140 per cohort, per year
Proposed start date of programme approval	1 September 2015
Chair	Deborah Bowman (St Georges University of London)
Secretary	Elaine Nutley (St Georges University of London)
Members of the joint panel	Felicity Andrews (Internal Panel Member) Jo Gregory (Internal Panel Member) Stuart Warner (External panel member)

Sources of evidence

Prior to the visit the HCPC reviewed the documentation detailed below, sent by the education provider:

	Yes	No	N/A
Programme specification	☒	☐	☐
Descriptions of the modules	☒	☐	☐
Mapping document providing evidence of how the education provider has met the SETs	☒	☐	☐
Mapping document providing evidence of how the education provider has met the SOPs	☒	☐	☐
Practice placement handbook	☒	☐	☐
Student handbook	☒	☐	☐
Curriculum vitae for relevant staff	☒	☐	☐
External examiners' reports from the last two years	☐	☐	☒

The HCPC did not review external examiners' reports prior to the visit as there is currently no external examiner as the programme is new.

During the visit the HCPC saw the following groups or facilities:

	Yes	No	N/A
Senior managers of the education provider with responsibility for resources for the programme	☒	☐	☐
Programme team	☒	☐	☐
Placements providers and educators / mentors	☒	☐	☐
Students	☒	☐	☐
Service users and carers	☒	☐	☐
Learning resources	☒	☐	☐
Specialist teaching accommodation (eg specialist laboratories and teaching rooms)	☒	☐	☐

The HCPC met with students from the Foundation Science Degree in Paramedic Science as the programme seeking approval currently does not have any students enrolled on it.

Recommended outcome

To recommend a programme for approval the visitors must be satisfied that the programme meets all of the standards of education and training (SETs) and that those who complete the programme meet our standards of proficiency (SOPs) for the relevant part of the Register.

The visitors agreed to recommend to the Education and Training Committee that a number of conditions are set on the programme, all of which must be met before the programme can be approved.

The visitors agreed that 24 of the SETs have been met and that conditions should be set on the remaining 34 SETs.

Conditions are requirements that the education provider must meet before the programme can be approved. Conditions are set when certain standards of education and training have not been met or there is insufficient evidence of the standard being met.

The visitors have also made a number of recommendations for the programme.

Recommendations are observations on the programme or education provider which do not need to be met before the programme can be approved. Recommendations are made to encourage further enhancements to the programme, normally when it is felt that the particular standard of education and training has been met at, or just above the threshold level.

Conditions

2.1 The admissions procedures must give both the applicant and the education provider the information they require to make an informed choice about whether to take up or make an offer of a place on a programme.

Condition: The education provider must revisit admissions documentation to ensure consistency and accuracy to give both the applicant and the education provider the information they require to make an informed choice about whether to take up or make an offer of a place on a programme.

Reason: Prior to the visit, the education provider provided the visitors with a set of documentation for the programme. The visitors noted a number of inaccuracies throughout the documentation, some of which include:
- several references to a programme title 'BSc (Hons) Paramedic Practice', which contrasts the information provided at the visit confirming the programme name is 'BSc (Hons) Paramedic Science';
- several inaccuracies in referencing of policies from Kingston University;
- contrasting statements regarding step off qualifications for the programme, and;
- a number of tracked changes, suggesting that the documentation was not final.

In addition to this, the visitors were presented with a new, full set of documentation on arrival for the visit supported by a statement that the documentation they had received was inaccurate and not reflective of the programme. The visitors noted to the programme team that they would not have time to review the new documentation provided. Therefore the visitors are unable to comment on the information provided to both applicants and the education provider to ensure they have the information needed to make an informed choice about whether to take up or make an offer of a place on the programme. The visitors therefore require the education provider to provide an accurate and up to date set of admissions documentation so that the visitors can identify all changes made. In this way the visitors can make a judgement about whether this standard is met.

2.4 The admissions procedures must apply selection and entry criteria, including compliance with any health requirements.

Condition: The education provider must provide further information on the formal policies in place to apply selection and entry criteria regarding health requirements.

Reason: To evidence this standard, the visitors were directed to section 6.3 of the definitive document which states that offers are conditional to "Undergoing medical assessment to ensure fitness to undertake the clinical component of the course.". In addition to this, in a meeting with the programme team it was stated that all applicants are subject to occupational health clearance. However, the visitors were unable to locate any further evidence regarding the criteria for health requirements and the processes used to assess these. Furthermore, the visitors were unable to locate, where in the documentation, this would be made clear to potential applicants for the programme. It is also noted that the visitors were presented with a new set of documentation at the visit to which visitors stated to the programme team that they would not have time to review. Therefore any updates made since the original submission have not been scrutinised by the visitors and so, further inaccuracies may

be present. The visitors therefore require further evidence of the specific health requirements for the programme, the processes used to apply them and how this is communicated to potential applicants.

2.5 The admissions procedures must apply selection and entry criteria, including appropriate academic and / or professional entry standards.

Condition: The education provider must submit appropriate and up to date programme documentation to clearly articulate the entry requirements relating to academic and / or professional entry standards.

Reason: To evidence this standard, the visitors were directed to section 6.3 of the definitive document. However, in a meeting with the programme team it was stated that the information provided here has since changed and has been updated in the new documentation. This documentation was provided at the visit, however, the visitors noted to the programme team that they would not have time to review the new documentation provided. Therefore the visitors are unable to comment on the appropriate academic and / or professional entry standards as stated in any admissions documentation. The visitors therefore require finalised documentation from the education provider to show how the admissions procedure applies selection and entry criteria, including appropriate and / or professional entry standards.

2.7 The admissions procedures must ensure that the education provider has equality and diversity policies in relation to applicants and students, together with an indication of how these will be implemented and monitored.

Condition: The education provider must submit appropriate programme documentation to clearly articulate the equality and diversity policies and how these will be implemented and monitored.

Reason: To evidence this standard, the visitors were directed to section 6.5 of the definitive document which states that "Admission procedures are designed to be consistent with SGUL equal opportunities policies…". Additionally the visitors located a link in the student handbook, page 57 which was intended to direct readers to the equality and diversity policy. However, the link was not accessible to those outside of St Georges University and the visitors were therefore unable to access the policy. In addition to this, the visitors were unable to see any formal processes in place to show how the policy would be implemented and monitored throughout the lifetime of the programme. It is also noted that the visitors were presented with a new set of documentation at the visit to which visitors stated to the programme team that they would not have time to review. Therefore any updates made since the original submission have not been scrutinised by the visitors and so, further inaccuracies may be present. The visitors therefore require an up to date and accurate copy of the equality and diversity policies and an indication of how these will be implemented and monitored.

3.3 The programme must have regular monitoring and evaluation systems in place.

Condition: The education provider must provider clarification of the monitoring and evaluation systems in place for practice placements.

Reason: To evidence this standard, the visitors were directed to section 12 of the definitive document which detailed information about the committee structures. It is stated that "The Course Committee has an important role to play in discussing matters concerning the administration, quality control, delivery, assessment and future development of the paramedic science programmes and evaluation." Page 51. However, the visitors were unable to locate any information on the monitoring and evaluation processes in place, specific to practice placements. The visitors noted that page 24 of the definitive document states some detail about the monitoring and evaluation systems for practice placements. However, it is unclear how these systems will be implemented and monitored to ensure they are consistently applied throughout the lifetime of the programme. The visitors therefore require further documentation on the clear monitoring ad evaluation systems in place for practice placements and how these will be applied to the programme.

3.5 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

Condition: The education provider must provide up to date information regarding the number of staff members for the programme.

Reason: Prior to the visit the visitors were directed to Staff CVs to evidence this standard. From the information provided the visitors identified that there would be 9.7 full time equivalent (FTE) members of staff. However, in a meeting with the senior team it was highlighted that the documentation the visitors had received was inaccurate and not reflective of the programme. The senior team stated that the programme currently has 12.2 FTE and 4 FTE posts out for recruitment bringing the total intended FTE number to 16.2. However, confirmation of this was not highlighted in documentation that the visitors reviewed. It was noted to the senior team that the visitors would not have time to review the new documentation provided. Without this confirmation the visitors were unable to determine if the programme has an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme. Therefore the visitors require up to date and accurate information confirming the total number of appropriately qualified and experienced staff for the programme.

3.6 Subject areas must be taught by staff with relevant specialist expertise and knowledge.

Condition: The education provider must provide further clarity on the structure of teams for academic staff.

Reason: The resource document, page 4 states "Academic staff will be structured into two teams. One will deliver all lectures and academic taught content, facilitation and management while the second team will deliver, teach and manage all aspect of clinical simulation and skills…". However there was no information on which staff members would make up each team. In addition to this, the visitors were informed that new staff members for each team are in the process of being recruited. Without confirmation of which staff members will be teaching each aspect of the programme, the visitors were unable to make a judgement on the appropriate and relevant specialist expertise and knowledge. The visitors therefore require clarity on the structure of the proposed two teams and the relevant expertise and knowledge of staff relevant to their team.

3.6 Subject areas must be taught by staff with relevant specialist expertise and knowledge.

Condition: The education provider must provide further clarity on the module leaders for the programme.

Reason: The senior and programme teams noted that module leaders held overall responsibility for the content and evaluation of their modules. However, the visitors were unable to locate, in the evidence provided prior to the visit, which staff members would be responsible for each module. The module directory states the staff members contributing to each module, but does not state which of these members of staff will be the module leader. In addition to this, the visitors heard that new staff members are in the process of being recruited. Without confirmation of which staff members will responsible for each module, the visitors were unable to make a judgement on the appropriate and relevant specialist expertise and knowledge. The visitors therefore require clarity on the staff members responsible for each module and the relevant expertise and knowledge of staff relevant to their module.

3.7 A programme for staff development must be in place to ensure continuing professional and research development.

Condition: The education provider must provide documentation to evidence the online staff development system, Faculty Organisational and Staff Development Group (FOSDG).

Reason: To evidence this standard the education provider referenced the university's online staff development platform FOSDG. However, the visitors were not provided with a link to the website, nor were they provided with any information on the content of the website. The visitors were therefore unable to make a judgement on the content of the FOSDG, and, if this is appropriate for ensuring a programme for staff development is in place to ensure continuing professional and research development. In a meeting with the programme team it was stated that the FOSDG is a platform to review staff satisfaction and identify how staff can move forward. It was also stated that one, two or three members of staff were looking to undertake a PhD, however this was undefined at this stage. The visitors note that without confirmation of the staff research activities alongside having no access to the FOSDG they are unable to make a clear judgment on the platforms provided for staff development. The visitors therefore require documentation to clearly articulate the opportunities available to staff for continued professional development and confirmation of current and future research opportunities for the programme team. In this way the visitors can make a clear judgement on the programme for staff development that is in place and if this ensures continuing professional and research development.

3.8 The resources to support student learning in all settings must be effectively used.

Condition: The education provider must revisit all programme documentation to ensure consistency and accuracy.

Reason: Prior to the visit, the education provider provided the visitors with a set of documentation for the programme. The visitors noted a number of inaccuracies throughout the documentation, some of which include:

- several references to a programme title 'BSc (Hons) Paramedic Practice', which contrasts the information provided at the visit confirming the programme name is 'BSc (Hons) Paramedic Science';
- several inaccuracies in referencing of policies from Kingston University;
- contrasting statements regarding step off qualifications for the programme, and;
- a number of tracked changes, suggesting that the documentation was not final.

In addition to this, the visitors were presented with a new, full set of documentation on arrival for the visit supported by a statement that the documentation they had received was inaccurate and not reflective of the programme. The visitors noted to the programme team that they would not have time to review the new documentation provided. Therefore the visitors are unable to comment on the resources to support student learning being effectively used. Specifically, the visitors note that until the programme documentation is clearly finalised there could be confusion for students on the programme which could potentially lead students to using incorrect policies where needed. The visitors therefore require the education provider to provide an accurate and up to date set of programme documentation, mapped against the previous documentation, so that the visitors can identify all changes made.

3.10 The learning resources, including IT facilities, must be appropriate to the curriculum and must be readily available to students and staff.

Condition: The education provider must clarify how frequently students will need access to the clinical skills labs and proposed interactive platform.

Reason: To evidence this standard, the visitors were taken on a tour of the education provider's facilities and shown how they would be accessed and used by students on the programme. Whilst the visitors were satisfied that the content of the facilities were suitable to support student learning, they could not identify if these would be readily available for the proposed student numbers for the programme. Specifically, it was highlighted that there is potential for up to 630 students, across two proposed programmes, who will all need access to these facilities. The visitors could not see, from the information provided, how the time would be allocated to ensure that each student on the programme had an appropriate amount of access to the skills lab and proposed interactive platform. The visitors therefore require further information on the access requirements of skills labs across each year of the programme and the proposed interactive platform for students to ensure that these are accessible and readily available to all students and staff, when needed.

3.11 There must be adequate and accessible facilities to support the welfare and wellbeing of students in all settings.

Condition: The education provider must provide further evidence of the criteria used for placement audits to ensure the placement setting has adequate and accessible facilities to support the welfare and wellbeing of students in all settings.

Reason: To evidence this standard the visitors were directed to section 3 of the student handbook and section 5 of the resource document which both highlight the support arrangements for students on the programme. The visitors were therefore satisfied that there were adequate and accessible facilities to support the welfare and wellbeing of students in the academic setting. However, whilst section 3 of the student handbook makes reference to the support available on placement, the visitors were unable to

locate any information on the placement audit criteria to ensure that this would be in place at each of the placement settings. The visitors note that without confirmation of the audit criteria used for placements, they are unable to be confident that there are adequate and accessible facilities to support the welfare and wellbeing of students in the placements setting. The visitors therefore require documentation clearly stating the criteria for the placement audit with particular reference to students' welfare and wellbeing.

3.13 There must be a student complaints process in place.

Condition: The education provider must provide a hard copy or a working link to the student complaints procedure to evidence that a student complaints procedure is in place.

Reason: To evidence this standard the visitors were directed to Appendix 1 of the student handbook which highlights a link to the student complaints procedure. However, the link was not accessible to those outside of St Georges University and the visitors were therefore unable to access the policy. When this was mentioned to the programme team an up to date copy of the student complaints procedure was provided, however, the visitors noted to the programme team that they would not have time to review the new documentation provided in the time frames available. In addition to this, the visitors were unable to see any formal processes in place to show how the policy would be implemented and monitored throughout the lifetime of the programme. The visitors therefore require an up to date and accurate copy of the student complaints procedure and an indication of how this will be implemented and monitored to ensure that this standard is met.

3.15 Throughout the course of the programme, the education provider must have identified where attendance is mandatory and must have associated monitoring mechanisms in place.

Condition: The education provider must provide information on the monitoring mechanisms in place to monitor student's attendance whilst on placement.

Reason: To evidence this standard the visitors were directed to sections 2.7 and 6.2 of the student handbook, which both set out the requirements for attendance. The visitors were therefore satisfied with the attendance requirements for the programme. From a meeting with students and the programme team it was highlighted that registers are taken for each academic session and that these are stored and monitored on a central database. The visitors were therefore also satisfied that attendance was appropriately monitored in the academic setting. However, the visitors were unable to locate any information on how attendance would be monitored in the placement setting. Specifically, the visitors were not provided with an audit criteria for placements and were therefore unable to identify that each placement setting would be monitoring attendance effectively. The visitors therefore require further information on the monitoring mechanisms in place for attendance in the placement setting to ensure that attendance is monitored throughout the course of the programme.

3.16 There must be a process in place throughout the programme for dealing with concerns about students' profession-related conduct.

Condition: The education provider must provider further evidence of the process in place to deal with concerns about student' profession related conduct whilst on placement.

Reason: Prior to the visit, the visitors were directed to section 2.8 of the student handbook to evidence this standard. The visitors were unable to find any information within this document on the processes in place to deal with students' profession related conduct, specific to practice placements. Practice educators were able to confirm at the visit that they were aware of the requirement to report any concerns about student's profession related conduct and were confident in the channels used to do so. However, the visitors were unable to find a clear process which stated this. The visitors note that without seeing a clear process within the programme documentation it is unclear how this process will be implemented and monitored to ensure it is consistently applied throughout the lifetime of the programme. The visitors therefore require further documentation to show the processes in place for practice educators to raise concerns about student's professions related conduct, and, how this is made available to all practice educators.

4.2 The programme must reflect the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance.

Condition: Further evidence must be provided to show how the programme reflects the relevant curriculum guidance and external reference frameworks.

Reason: From the documentation provided the visitors noted that page 17 of the definitive document states "Careful consideration has been given to the various Standards and Competencies of multiple external agencies including; Health Care Professions Council (HCPC, 2014), College of Paramedics (2014), Quality Assurance Agency (QAA, 2004)…". However, the visitors were unable to locate a clear mapping document which highlighted where in the curriculum QAA benchmarking was present. Therefore the visitors could not determine from the documentation how the QAA competencies are reflected in the programme curriculum. The visitors require further evidence to demonstrate how the curriculum reflects the philosophy, core values, skills and knowledge of the paramedic profession and qualification.

4.4 The curriculum must remain relevant to current practice.

Condition: The education provider must provide further evidence of the opportunities for staff to engage in continuing professional development (CPD) which will inform the curriculum.

Reason: To evidence this standard the visitors were directed to the module outlines which contained the curriculum content to be delivered under each module. The visitors were therefore satisfied that the current curriculum is relevant to current practice. However, the visitors were unable to see a clear process for staff development which enabled them to engage in continuing professional development (CPD), as referenced under the condition for standard 3.7 in this report. The visitors note that without being confident that staff are engaging in CPD activities they are unable to see how the curriculum will remain relevant to current practice throughout the lifetime of the

programme. The visitors therefore require further evidence of the CPD activities made available to staff which will enable them to appropriately inform the curriculum. In this way the visitors can make a reasonable judgement on how the curriculum will continue to remain relevant to current practice throughout the lifetime of the programme.

5.2 The number, duration and range of practice placements must be appropriate to support the delivery of the programme and the achievement of the learning outcomes.

Condition: The education provider must provide further clarity for the breakdown of placement hours and where these will be located.

Reason: The definitive document currently states that students will achieve a total of 2250 placement hours across the three years of the programme (750 per year). However, in a meeting with the senior team it was highlighted that the placements provided by London Ambulance Service (LAS) have been capped to 375 hours per year. Students will then complete an additional 225 external hours in an alternative setting bringing their total placement hours to 600 per year. The visitors were satisfied with the reviewed number of placement hours attended by students, however, they were unable to locate any further information about the 225 external hours to be completed. The definitive document, page 22-23 states "…students are expected to undertake a variety of placements, in a range of settings during the course, (e.g., operating theatres, MAU, MIU, UCC etc)" but no further details of which placements have been secured and how these will be allocated to students is included. The visitors therefore require further information on the location and allocation of placements under the 225 hours outside of LAS placements to ensure that the range of placements is appropriate to support the delivery of the programme and the achievement of the learning outcomes.

5.3 The practice placement settings must provide a safe and supportive environment.

Condition: The education provider must submit appropriate programme documentation to clearly articulate the mechanisms which are in place to ensure a safe and supportive environment at placement settings.

Reason: To evidence this standard the visitors were directed to section 8.3.6 of the definitive document which shows a flow chart of the process for approving and monitoring placements. Step two of this process states "Faculty Practice Learning introductory Audit carried out.", the visitors were therefore satisfied that there is a clear place in the process for an audit to be carried out. However, the visitors were not able to locate any information on the criteria against which a placement would be audited. The visitors note that without this evidence they are unable to make an informed judgement on the placement audit process. The visitors therefore require information on the criteria for placement audits to ensure that practice placement settings provide a safe and supportive environment.

5.4 The education provider must maintain a thorough and effective system for approving and monitoring all placements.

Condition: The education provider must submit appropriate programme documentation to clearly articulate the mechanisms which are in place to ensure a thorough and effective system for approving and monitoring all placements is in place.

Reason: To evidence this standard the visitors were directed to section 8.3.6 of the definitive document which shows a flow chart of the process for approving and monitoring placements. Step two of this process states "Faculty Practice Learning introductory Audit carried out.", the visitors were therefore satisfied that there is a clear place in the process for an audit to be carried out. However, the visitors were not able to locate any information on the criteria against which a placement would be audited. The visitors note that without this evidence they are unable to make an informed judgement on the placement audit process. The visitors therefore require information on the criteria for placement audits to ensure that to ensure a thorough and effective system for approving and monitoring all placements is in place.

5.5 The placement providers must have equality and diversity policies in relation to students, together with an indication of how these will be implemented and monitored.

Condition: The education provider must submit appropriate programme documentation to clearly articulate the mechanisms which are in place to ensure equality and diversity policies in relation to students are in place.

Reason: To evidence this standard the visitors were directed to section 8.3.6 of the definitive document which shows a flow chart of the process for approving and monitoring placements. Step two of this process states "Faculty Practice Learning introductory Audit carried out.", the visitors were therefore satisfied that there is a clear place in the process for an audit to be carried out. However, the visitors were not able to locate any information on the criteria against which a placement would be audited. The visitors note that without this evidence they are unable to make an informed judgement on the placement audit process. The visitors therefore require information on the criteria for placement audits to ensure that equality and diversity policies in relation to students are in place.

5.6 There must be an adequate number of appropriately qualified and experienced staff at the practice placement setting.

Condition: The education provider must submit appropriate programme documentation to clearly articulate the mechanisms which are in place to ensure that there are an adequate number of appropriately qualified and experienced staff at the practice placement setting.

Reason: To evidence this standard the visitors were directed to section 8.3.6 of the definitive document which shows a flow chart of the process for approving and monitoring placements. Step two of this process states "Faculty Practice Learning introductory Audit carried out.", the visitors were therefore satisfied that there is a clear place in the process for an audit to be carried out. However, the visitors were not able to locate any information on the criteria against which a placement would be audited. The visitors note that without this evidence they are unable to make an informed judgement

on the placement audit process. The visitors therefore require information on the criteria for placement audits to ensure that there are an adequate number of appropriately qualified and experienced staff at the practice placement setting.

5.7 Practice placement educators must have relevant knowledge, skills and experience.

Condition: The education provider must submit appropriate programme documentation to clearly articulate the mechanisms which are in place to ensure that Practice placement educators must have relevant knowledge, skills and experience.

Reason: To evidence this standard the visitors were directed to section 8.3.6 of the definitive document which shows a flow chart of the process for approving and monitoring placements. Step two of this process states "Faculty Practice Learning introductory Audit carried out.", the visitors were therefore satisfied that there is a clear place in the process for an audit to be carried out. However, the visitors were not able to locate any information on the criteria against which a placement would be audited. The visitors note that without this evidence they are unable to make an informed judgement on the placement audit process. The visitors therefore require information on the criteria for placement audits to ensure that Practice placement educators must have relevant knowledge, skills and experience.

5.8 Practice placement educators must undertake appropriate practice placement educator training.

Condition: The education provider must submit appropriate programme documentation to clearly articulate the mechanisms which are in place to ensure that practice placement educators have undertaken appropriate practice placement educator training.

Reason: To evidence this standard the visitors were directed to section 8.3.6 of the definitive document which shows a flow chart of the process for approving and monitoring placements. Step two of this process states "Faculty Practice Learning introductory Audit carried out.", the visitors were therefore satisfied that there is a clear place in the process for an audit to be carried out. However, the visitors were not able to locate any information on the criteria against which a placement would be audited. The visitors note that without this evidence they are unable to make an informed judgement on the placement audit process. The visitors therefore require information on the criteria for placement audits to ensure that practice placement educators have undertaken appropriate practice placement educator training.

5.9 Practice placement educators must be appropriately registered, unless other arrangements are agreed.

Condition: The education provider must submit appropriate programme documentation to clearly articulate the mechanisms which are in place to ensure that practice placement educators are appropriately registered, unless other arrangements are agreed.

Reason: To evidence this standard the visitors were directed to section 8.3.6 of the definitive document which shows a flow chart of the process for approving and monitoring placements. Step two of this process states "Faculty Practice Learning

introductory Audit carried out.", the visitors were therefore satisfied that there is a clear place in the process for an audit to be carried out. However, the visitors were not able to locate any information on the criteria against which a placement would be audited. The visitors note that without this evidence they are unable to make an informed judgement on the placement audit process. The visitors therefore require information on the criteria for placement audits to ensure that practice placement educators are appropriately registered, unless other arrangements are agreed.

5.11 Students, practice placement providers and practice placement educators must be fully prepared for placement which will include information about an understanding of:
- **the learning outcomes to be achieved;**
- **the timings and the duration of any placement experience and associated records to be maintained;**
- **expectations of professional conduct;**
- **the assessment procedures including the implications of, and any action to be taken in the case of, failure to progress; and**
- **communication and lines of responsibility.**

Condition: The education provider must clarify the platform that will be used to deliver the Practice Assessment Document (PAD) to ensure that students and practice educators are fully prepared for placement.

Reason: Prior to the visit, it was stated that the PAD would be accessed electronically via a tablet that would be issued to each student on the programme. The visitors were provided the content and structure of the electronic PAD and it was stated that they would have the opportunity to view a demonstration of how this works at the visit. However, at the visit, the visitors were informed that the electronic PAD had encountered technical errors and the programme team would therefore no longer be using this platform. The programme team stated that students would now use a paper based PAD. Due to the last minute change the visitors were unable to view the final PAD that would be used for students and were therefore unable to make a judgement on how students and practice educators would be appropriately prepared to use the PAD. The visitors note that without clarity on how students and practice educators will be prepared to use the PAD they are unable to state, with confidence, that students and practice educators will be fully prepared for placement. The visitors therefore require clarity on the final PAD document that will be used for placements and how students and practice educators will be trained to use this effectively.

6.2 All assessments must provide a rigorous and effective process by which compliance with external-reference frameworks can be measured.

Condition: Further evidence must be provided to show how the programme reflects external reference frameworks in the assessment methods.

Reason: From the documentation provided the visitors noted that page 17 of the definitive document states "Careful consideration has been given to the various Standards and Competencies of multiple external agencies including; Health Care Professions Council (HCPC, 2014), College of Paramedics (2014), Quality Assurance Agency (QAA, 2004)…". However, the visitors were unable to locate a clear mapping document which highlighted where in the assessment methods QAA benchmarking was

present. Therefore the visitors could not determine from the documentation how the QAA competencies are reflected in the programme assessments. The visitors require further evidence to demonstrate how all assessments provide a rigorous and effective process by which compliance with external-reference frameworks can be measured.

6.5 The measurement of student performance must be objective and ensure fitness to practise.

Condition: The education provider must clarify the platform that will be used to deliver the Practice Assessment Document (PAD) to demonstrate how student performance is measured and ensures fitness to practice.

Reason: Prior to the visit, it was stated that the PAD would be accessed electronically via a tablet that would be issued to each student on the programme. . The visitors were provided the content and structure of the electronic PAD and it was stated that they would have the opportunity to view a demonstration of how this works at the visit. However, at the visit, the visitors were informed that the electronic PAD had encountered technical errors and the programme team would therefore no longer be using this platform. The programme team stated that students would now use a paper based PAD. Due to the last minute change the visitors were unable to view the final PAD that would be used for students and were therefore unable to make a judgement on how this would be used to monitor student performance. The visitors note that without clarity on how the PAD is used to record student performance they are unable to state, with confidence, that student performance is measured and ensures fitness to practice. The visitors therefore require clarity on the final PAD document that will be used for placements and how it will be used to monitor student performance whilst in the placement setting.

6.6 There must be effective monitoring and evaluation mechanisms in place to ensure appropriate standards in the assessment.

Condition: The education provider must clarify the platform that will be used to deliver the Practice Assessment Document (PAD) to demonstrate how student assessment is monitored in the practice placement setting.

Reason: Prior to the visit, it was stated that the PAD would be accessed electronically via a tablet that would be issued to each student on the programme. The visitors were provided the content and structure of the electronic PAD and it was stated that the visitors would have the opportunity to view a demonstration of how this works at the visit. However, at the visit, the visitors were informed that the electronic PAD had encountered technical errors and the programme team would therefore no longer be using this platform. The programme team stated that students would now use a paper based PAD. Due to the last minute change the visitors were unable to view the final PAD that would be used for students and were therefore unable to make a judgement on how this would be used to monitor the assessment of students on placement. The visitors note that without clarity on how students and practice educators will be prepared to use the PAD they are unable to state, with confidence, that there are effective monitoring and evaluation mechanisms in place to ensure appropriate standards in the assessment. The visitors therefore require clarity on the final PAD document that will be used for placements and how it will be used to monitor the assessment of students in the practice placement setting.

6.7 Assessment regulations must clearly specify requirements for student progression and achievement within the programme.

Condition: The education provider must provide further evidence of the processes in place to support students who have failed their placement module but have continued to progress on the programme.

Reason: Prior to the visit the visitors were directed to section 9 of the definitive document which states "Under exceptional circumstance, and with agreement of the Board of Examiners, a candidate may provisionally register for year 2 and 3 of the programme where he or she has failed to complete no more than one module, because he or she has been unable to take or complete a prescribed assessment on the first, second or discretionary third attempt within the academic year.". The visitors noted that it was not clear in this wording if this applied to all modules, including the practice placement module. The programme team agreed that, as the statement is currently worded, this could apply to the practice placement module, however, they have never encountered this in the past. Therefore, as the wording currently stands, it could be possible for a student to fail three attempts at placement and still provisionally register for years two and three of the programme. The visitors note that should a student fail three attempts at the practice placement module there would be concerns about their fitness to practice and therefore their ability to continue on the programme. The visitors therefore require further information on the requirements for student progression and achievement within the programme, should a student register for years two and three of the programme having failed the practice placement module.

6.8 Assessment regulations, or other relevant policies, must clearly specify requirements for approved programmes being the only programmes which contain any reference to an HCPC protected title or part of the Register in their named award.

Condition: The education provider must clarify all exit routes to the programmes, their confirmed names and which will confer eligibility to apply for registration.

Reason: To evidence this standard the visitors were directed to section 9 of the definitive document which, alongside the BSc (Hons) in Paramedic Science, mentions a number of possible step off awards including:
- Dip HE Paramedic Science (page 32)
- BSc (ordinary) (page 32)
- Undergraduate Certificate – Pre Hospital Care (page 39), and;
- Undergraduate Diploma – Pre Hospital Care (page 39).

Further to this, elsewhere in the documentation, there are references to step off awards under a different name. Undergraduate diploma in Paramedic Science (Programme regulations, page 9). The visitors note that without clarification on the confirmed step off awards for the programme they are unable to confirm that assessment regulations, or other relevant policies, clearly specify requirements for approved programmes being the only programmes which contain any reference to an HCPC protected title or part of the Register in their named award. Therefore the visitors require clarification on the title, and eligibility to apply for registration for all step off awards for the programme, and, where this will be clearly and consistently stated in all programme documentation.

6.9 Assessment regulations must clearly specify requirements for an aegrotat award not to provide eligibility for admission to the Register.

Condition: The education provider must provide further evidence that the assessment regulations clearly specify the requirements for an aegrotat award not to provide eligibility for admission to the Register.

Reason: From the documentation provided the visitors could not identify where it is clearly stated that aegrotat awards do not provide eligibility to apply to the Register. The visitors were also unclear as to how this information is clearly communicated to students. The visitors therefore require further evidence to demonstrate where in the programme documentation it is clearly stated that aegrotat awards do not provide eligibility to apply to the Register. In this way the visitors can be sure that this information is available to students and that this standard is met.

6.10 Assessment regulations must clearly specify requirements for a procedure for the right of appeal for students.

Condition: The education provider must provide evidence of where it is clearly articulated within the programme documentation the requirements for a procedure for the right of appeal for students.

Reason: Prior to the visit, the visitors were directed to section 6.4 of the definitive document which references the student complaints procedure, not the appeals procedure. The visitors were able to locate a reference to student appeals on page 44 of the definitive document, however, the link provided directed them to a Kingston University document. When mentioned to the programme team it was highlighted that the programme did not use the policy from Kingston University and that this was referenced in error. The visitors therefore require further documentation to evidence the correct appeals procedure, and, where this information is available to students.

6.11 Assessment regulations must clearly specify requirements for the appointment of at least one external examiner who must be appropriately experienced and qualified and, unless other arrangements are agreed, be from the relevant part of the Register.

Condition: The education provider must provide evidence of where it is clearly articulated within the programme documentation that at least one of the external examiners appointed to the programme must be from the relevant part of the HCPC Register, unless alternative arrangements have previously been agreed with the HCPC.

Reason: Prior to the visit, the visitors were directed to section 5.9 of the student handbook. However, the visitors were unable to locate where in this information it was clearly stated that at least one external examiner must be appropriately experienced and qualified and, unless other arrangements are agreed, be from the relevant part of the Register. In addition to this, section 5.9 of the definitive document also references two links to the university of Kingston policies for student complaints and student appeals. These links directed the visitors to a web page which also provided an assessment regulation document for Kingston University. When mentioned to the programme team it was highlighted that the programme did not use the policy from Kingston University and that this was referenced in error. The visitors therefore require further documentation to evidence the correct assessment regulations for the

programme, and, where it is clearly articulated that at least one external examiner must be appropriately experienced and qualified and, unless other arrangements are agreed, be from the relevant part of the Register

Recommendations

4.4 The curriculum must remain relevant to current practice.

Recommendation: The visitors recommend that the programme team reviews the reading lists currently stated to ensure currency.

Reason: The visitors noted that there were some references to out of date books and publications throughout the programme documentation. For example page 5 of the module directory advises students to read the Standards of Proficiency (SOPs) 2007 which has now been replaced by the SOPs published in 2014. Whilst the visitors are satisfied that the curriculum and learning outcomes are being delivered in line with the most current SOPs, the visitors note that there is a risk that students may benchmark their own learning against the out of date SOPs document. The visitors also noted other instances of out of date books and publications being referenced and some subject areas not being reflected in bibliographies. The visitors therefore recommend that the programme team revisits all programme documentation to ensure currency in reading lists.

4.6 The delivery of the programme must support and develop autonomous and reflective thinking.

Recommendation: The visitors recommend that the programme team revisit programme documentation to clearly state when students are learning to develop autonomous and reflective thinking.

Reason: The visitors noted several areas within the documentation where students learning covered autonomous and reflective thinking and are therefore satisfied that this standard is met. However, this visitors noted that 'autonomous and reflective thinking' as a statement is never referenced to students in recognition of them covering this particular skill. The visitors commented that without clearly stating where autonomous and reflective thinking was being delivered to students there was a risk that students may not understand that they are developing this skill. The visitors therefore recommend that the programme team revisits programme documentation to clearly articulate at which points students will be learning to develop autonomous and reflective thinking.

Dee Keane
Graham Harris
Anthony Hoswell