
Focused review process report

Edge Hill University, Nurse Paramedic Investigation, September 2025

Executive summary

This is a report of the process for the focused review of the MSci Nurse Paramedic programme at Edge Hill University. This was a dual registration programme offering graduates the ability to register both as a paramedic with the HCPC and a nurse with the Nursing and Midwifery Council. We approved this programme in 2020. This report is on the second of two focused review assessments, which we undertook to consider whether the programme met our standards of education and training (SETs) and delivered learners who met the standards of proficiency (SOPs) for paramedics.

This report captures the process we have undertaken to assess the programme, which was triggered by the outcome of the previous focused review assessment.

We have:

- Reviewed the information from the source of the trigger, which was a referral from another process. Through the initial focused review process, we concluded that we needed to conduct an additional focused review process to determine whether the education provider had sufficiently addressed the outstanding issues from the initial focused review.
- Set a regulatory requirement that these issues had to be fully addressed, in order for the programme to remain approved.
- Decided there were concerns which impacted our institution level and our programme level standard standards, which required a response from the education provider through quality activity.
- Decided that partners were required to take part in this investigation, in an advisory role. This was because we needed profession-specific and educational expertise in our consideration of certain standards.
- Explored all the concerns raised through the review in quality activity and via discussions with stakeholders.
- Determined that specific SETs are not met by the programme, and that approval was withdrawn. This withdrawal of approval applies to future cohorts and all learners who were on years 1-3 of the programme. This is because the risk of learners not being appropriately prepared for safe and effective practice that we have identified through this report are present for those learners on the programme.

Through this assessment, we held virtual meetings with, and requested documentary submissions from, several key stakeholders, including:

- Senior and programme-level staff at Edge Hill University as the education provider;
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- Senior and operational staff at the North West Ambulance Service (NWAS), the key strategic partner for practice-based learning;
 - The Welsh Ambulance Service (WAS) and the East Midlands Ambulance Service (EMAS) as past practice education providers;
 - Current learners on the programme.

Through our quality activity with the education provider, we explored the following issues. The issues we explored were those set out by the Education and Training Committee in the decision notice from the first focused review process:

- Whether the programme was supported by practice partners
- Effective collaboration between Edge Hill University and North West Ambulance Service NHS Trust (NWAS)
- Learner experience
- Curriculum, practice-based learning, and integration of theory and practice
- Effectiveness and rigour of assessment

As part of our this focused review process, we held regular discussions with other stakeholders, to ensure effective partnership working and to limit the regulatory burden on the education provider. Parties to these discussions included:

- NHS England;
- the College of Paramedics (the professional body);
- the Nursing and Midwifery Council (NMC), the statutory regulator for nurses, who are also undertaking a review of the programme from a nursing perspective.

In March 2025, we established a 'Regulatory Action Group' formed of these stakeholders, to regularly and formally share information between the organisations.

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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 focussed 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 focused review process

Once an institution or programme 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

The focused review process enables us to work with providers to understand the ongoing quality of their provision. The process can be triggered by the receipt of intelligence or data which might impact on quality.

This report focuses on the assessment of a process 'trigger' along with any further assessment and conclusions.

How we make our decisions

We make independent evidence based decisions about institution and programme approval. In the focused review process, the executive makes a recommendation to the Education and Training Committee (ETC) about what action should be taken, if any. These recommendations are informed by profession specific input where it is required. In order to do this, we may appoint [partner visitors](#) to provide advice relevant to the assessment. Education providers have the right of reply to the executive 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.

The assessment panel for this review

We appointed the following panel members to support a review of this education provider:

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| Niall Gooch | Education Quality Officer |
| Matthew Catterall | Advisory visitor, Paramedic |
| Tim Hayes | Advisory visitor, Paramedic |

Section 2: About the education provider

The education provider context

The education provider currently delivers 8 HCPC-approved programmes across 2 professions and including 3 Postgraduate Prescribing programmes. It is a Higher Education provider and has been running HCPC approved programmes since 2006.

Practice areas delivered by the education provider

The provider is approved by the HCPC 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 | Operating Department Practitioner | <input checked="" type="checkbox"/> Undergraduate | <input type="checkbox"/> Postgraduate | 2010 |
| | Paramedic | <input checked="" type="checkbox"/> Undergraduate | <input type="checkbox"/> Postgraduate | 2018 |
| Post-registration | Independent Prescribing / Supplementary prescribing | | | 2016 |

The intended aim of the MSci Nurse Paramedic programme is to deliver individuals who are dual registered with both the HCPC and the Nursing and Midwifery Council (NMC). The programme is currently approved by both the HCPC and the NMC, meaning that those who successfully complete the programme are eligible to register with both regulators.

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 |
|--------------------------|-------------------|--------------|-------------|--|
| Learner number capacity | 419 | 419 | 2024 | <p>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 is the benchmark figure, plus the number of learners the provider is proposing through the new provision.</p> <p>We did not explore this specific data point because it was not relevant to this review.</p> |
| Learner non-continuation | 7% | 8% | 2021-22 | This data was sourced from a data delivery. This means the data is a bespoke HESA data |

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|--|-----|-----|---------|--|
| | | | | <p>return, filtered bases on HCPC-related subjects</p> <p>The data point is above the benchmark, which suggests the provider is performing below sector norms.</p> <p>When compared to the previous year's data point, the education provider's performance has been maintained</p> <p>We considered this data point, along with National Education and Training Survey (NETS) data, as part of our decision-making around learner experience. However, as we are confining this review to a single programme at the education provider, this data point is of relatively limited relevance.</p> |
| Outcomes for those who complete programmes | 92% | 89% | 2021-22 | <p>This data was sourced from a data delivery. This means the data is a bespoke HESA data return, filtered bases on HCPC-related subjects.</p> <p>The data point is below the benchmark, which suggests the provider is performing worse than sector norms</p> <p>When compared to the previous year's data point, the education provider's performance has worsened by 4%.</p> <p>We explored this in the context of our consideration of how well the education provider was preparing learners to practise with a dual registration and how well learners were being enabled to do so.</p> |

| | | | | |
|---|-------|---------|---------|---|
| Teaching Excellence Framework (TEF) award | N/A | Silver | 2023 | <p>The definition of a Silver TEF award is “Provision is of high quality, and significantly and consistently exceeds the baseline quality threshold expected of UK Higher Education.”</p> <p>We did not explore this data point specifically in this reviews through this assessment because it was not relevant to the issues at hand.</p> |
| Learner positivity score | 79.4% | 80.1% | 2024 | <p>This National Student Survey (NSS) positivity score data was sourced at the subject level. This means the data is for HCPC-related subjects.</p> <p>The data point is broadly equal to the benchmark, which suggests the provider’s performance in this area is in line with sector norms</p> <p>When compared to the previous year’s data point, the education provider’s performance has improved by 6%.</p> <p>We considered this data point as part of our decision-making around the fitness for purpose of the programme, learner experience, and the education provider’s support for learners.</p> |
| HCPC performance review cycle length | N/A | 5 years | 2022-23 | <p>During the review conducted in 2023-23, the visitors had a concern around learner satisfaction, which was two percentage points below the benchmark. We did not have sufficiently detailed information to discern whether the learner satisfaction concern was related to the nurse</p> |

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| | | | | paramedic programme, but we have kept these data point in mind during our reviews. |
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Section 3: Decision to formally assess information

The source of this trigger was a referral from another focused review process.

From the information we have, we have summarised the trigger as the need to undertake further investigation into the issues highlighted through a previous focused review relating to the following areas:

- assessment,
- programme design,
- programme management; and
- the sustainability of the programme.

Decision on engagement

The trigger related to an approved programme, the MSci Nurse Paramedic (full time) programme delivered by Edge Hill University. We completed a focused review assessment into this programme in January 2025, following concerns raised by the North West Ambulance Service (NWAS) and NHS England. The Executive recommended to the Education and Training Committee (Panel) (ETCP) that the programme should continue to be approved, subject to specific requirements being met. The Panel agreed the following:

- That by 30 June 2025 the education provider submits written confirmation from key paramedic practice-based learning partners, affirming their continued commitment programme for the next cohort of learners;
- If the North West Ambulance Service (NWAS) are no longer committed to the programme by 30 June 2025, the education provider demonstrates by that date that they have sufficient alternative practice partners to deliver the appropriate capacity and type of practice-based learning;
- That by 30 June 2025 the education provider should demonstrate clearly that all the issues identified through the last focused review process have been appropriately resolved with relevant stakeholders.

In the decision notice for the previous focused review process, ETCP stated:

“The Panel was of the opinion, taking account of the visitors’ report, visitors’ recommendations and the observations received from NHS England, North West Ambulance Service NHS Trust and the College of Paramedics that the programme should be re-referred to the focused review process and subsequently that the areas summarised above should be referred to the education provider’s next performance review, for the reasons noted below:

- *as the education provider was in the process of implementing an improvement plan with key stakeholders, it was not considered appropriate to withdraw*

approval, initiate a new approval process or request a resubmission of key programme documentation at this time;

- *the areas referred to a further focused review were noted to impact on the following SETs:*
 - *effective collaboration between Edge Hill University and North West Ambulance Service NHS Trust: SET 3.1, SET 3.2, SET 3.5, SET 5.8;*
 - *learner experience: SET 3.8, SET 3.13, SET 3.15;*
 - *a review of the programme’s curriculum, practice-based learning, and integration of theory and practice: SET 4.1, SET 4.3, SET 4.5, and SET 5.2; and*
 - *effectiveness and rigour of assessment: SET 6.1, SET 6.2, SET 6.3, SET 6.4, SET 6.5.*
- *the approach outlined above will provide the education provider with additional time to work with NHS England and North West Ambulance Service NHS Trust to amend the programme and its documentation; and*
- *a further period of sustained support and development will enable stakeholders to make a clear decision about their ongoing support for the programme.”*

Section 4: Process and timelines

In line with the decision made by ETCP in January 2025, we asked the education provider to demonstrate that the standards noted above were met by June 2025.

The following table sets out the key stakeholders with whom we worked. While this review was in progress, we met regularly with NHS England, the College of Paramedics and the Nursing and Midwifery Council, who are key regulatory stakeholders. Through this group we sought to align our processes and investigations to minimise burden on the education provider, and to share intelligence and data about the programme.

We considered inputs from all these partner organisations into account when conducting our own investigations and drawing our conclusions.

| Stakeholder | Relevance to the review | How we worked with them |
|--|--|---|
| NHS England (Workforce, Training and Education Directorate) – North West regional team | NHS England has responsibility for effective and appropriate delivery of NHS services in England, including the quality of healthcare practice education . | We held regular meetings with colleagues from NHS England about Edge Hill from February 2024 onwards. These meetings continued during this review, in the main through the Regulatory |

| | | |
|--|--|--|
| | NHS England have been providing support to the programme via their Intensive Support Framework and associated quality processes since the start of 2024. This support was paused in early 2025 in response to our ETP decision in January and new HCPC focused review assessment. | Action Group with other identified stakeholders. |
| North West Ambulance Service | NWAS are the key practice partner for the programme, they provide the large majority of all paramedic practice-based learning. | We met with senior leaders and operational staff from NWAS and asked them for written updates so that we could consider their perspective. |
| Learners on the MSci Nurse Paramedic programme | Learners on the programme are well-placed to give us information about how well the programme is supporting learners and what the overall “atmosphere” and culture of the programme are like. | We held a meeting with learners in May 2025 and asked them about various aspects of their experience on the programme. |
| College of Paramedics | The COP are the professional body for paramedics and we wished to understand their perspective on the programme and consider any concerns they might have. | We held regular meetings with the COP to keep them informed of the process and gain their input as required, in the main through the Regulatory Action Group with other identified stakeholders. |
| Nursing and Midwifery Council | The NMC are the regulator for nurses and midwives, and we wished to understand their perspective on the programme and consider any concerns they might have. After our review had begun the NMC began their own review of the programme from the nursing perspective. This review had not yet been completed when this report was submitted to ETC in July 2025. | We held regular meetings with the NMC to keep them informed of the process and gain their input as required, in the main through the Regulatory Action Group with other identified stakeholders. |

| | | |
|---------------------------------|---|---|
| East Midlands Ambulance Service | EMAS had previously supplied some practice placements for the programme | We asked EMAS to elaborate on their involvement on the programme and ask if they had any relevant information about the operation of the programme. |
| Welsh Ambulance Service | WAS had also previously supplied some practice placements for the programme | We asked WAS to elaborate on their involvement on the programme and ask if they had any relevant information about the operation of the programme. |

Section 5: Analysis, quality themes and outcomes

We have split our analysis and outcomes into several key quality themes, which cover the requirements that needed to be addressed by the education provider through this focused review investigation, from [section 3](#) of this report.

Quality theme 1: The programme is supported by practice partners

Area for further exploration: The findings from the first focused review highlighted the risks to the sustainability of the programme if NWAS withdrew their support for the programme. This would negatively impact the education provider's ability to deliver programme as intended unless an alternative placement provider(s) was identified to replace the hours supplied by NWAS. We put the onus on the education provider to ensure there is capacity for practice-based learning for all learners, to support delivery of the programme's learning outcomes (and therefore the HCPC SOPs).

Quality activities agreed to explore theme further: We requested a documentary submission from the education provider addressing the concerns contained in the trigger document which we compiled to initiate the review. Following visitor review we requested some additional documentation to further explore certain areas. We also held meetings with NWAS and requested documentary evidence from them to support this virtual meeting.

Outcome of exploration: We are now aware that the education provider has recruited a smaller than usual cohort for the programme for the 2025-26 academic year. This suggests that the relative importance of the first two requirements set by the ETP has changed to some degree. However, we can still make a decision about them.

We have been able to see that:

- for existing learners on the programme, the education provider is able to source sufficient placement capacity to meet the needs of the programme
- NWAS remains committed to the programme – the submissions we have received from NWAS and the education provider indicate that both parties envisage working together on this programme for the foreseeable future.

We are therefore satisfied that the following requirements linked to this quality theme are met:

- That by 30 June 2025 the education provider submits written confirmation from key paramedic practice-based learning partners, affirming their continued commitment programme for the next cohort of learners; and
- If the North West Ambulance Service (NWAS) are no longer committed to the programme by 30 June 2025, the education provider demonstrates by that date that they have sufficient alternative practice partners to deliver the appropriate capacity and type of practice-based learning.

Quality theme 2: Effective collaboration between Edge Hill University and North West Ambulance Service NHS Trust (NWAS)

Area for further exploration: When concerns were initially raised to the HCPC, the nature of the relationship between the education provider and NWAS was one of the main concerns. NWAS have been, and continue to be, the key strategic partner for the programme, because they are by far the largest provider of paramedic practice-based learning. From June 2021 to October 2024, they provided over 42,000 hours of practice-based learning. This is more than double the number of the next largest, Liverpool University Hospitals NHS Trust. No other practice-based learning provider provided more than 10,000 hours in that period. Their ongoing support is essential, and it would be challenging for the programme to operate effectively without NWAS providing placement places for learners on the programme, unless the education provider were able to put in place formal arrangements with other practice education providers to cover these hours, to the quality and areas of practice required.

The risk of the standards in this section not being met had arisen from difficulties in the relationship between the education provider and NWAS. The decision we had to make, therefore, was whether the communications and the relationship had improved sufficiently to satisfy us that the standards were now met at threshold.

The findings from the last focused review showed that there were risks associated with the following standards being met:

- **3.1 The programme must be sustainable and fit for purpose** – We understood from the first review that there had been difficulties in the collaboration between the education provider and NWAS. As NWAS provided by far the largest amount of paramedic practice-based learning, difficulties in the relationship between the two posed a threat to the sustainability of the programme in its existing approved form. We needed to consider the question of whether the programme will be sustainable in the longer term given the uncertainty about the future of the nurse paramedic role, and the difficulties that have emerged in the education provider's relationship with key stakeholders such as NWAS. With regard to our requirement that

stakeholders demonstrate support for the programme, what we meant by this is that they must be able and willing to provide and maintain an appropriate level of paramedic practice-based learning to support the programme.

- **3.2 The programme must be effectively managed** – From the first review we were aware that there had been high staff turnover on the programme during 2021-23, and significant difficulties in communication with stakeholders such as NWAS and NHS England, as well as a perceived lack of responsiveness to programme improvement initiatives in the 2023-24 academic year. We needed to consider whether the issues with programme governance highlighted through the first focused review process (including difficulties with engaging with relevant stakeholders and uneven engagement with aspects of the NHS England improvement process) have been resolved by the education provider.
- **3.5 There must be regular and effective collaboration between the education provider and practice education providers** – One of the key concerns highlighted through the first focused review process was difficulties in the working relationship between the education provider and NWAS. We needed to be satisfied that the education provider and NWAS can work together consistently and effectively so that the clinical components of the programme can be delivered appropriately.
- **5.8 Learners and practice educators must have the information they need in a timely manner in order to be prepared for practice-based learning** – One of the problems highlighted by NWAS and NHS England during the first review was that practice educators and learners were not being given appropriate information or support by the education provider. This created a risk that learners would not be supported to meet the SOPs in practice-based learning. Learners and practice educators also expressed concerns that learners were being given incomplete and sometimes conflicting information. This confusion related to where and when they would be going into practice-based learning. Additionally, some stakeholders considered that the purpose of certain placements was unclear, i.e. it was not clear to learners what competencies they were expected to achieve. We needed to be satisfied that these issues have been resolved.

Quality activities agreed to explore theme further: We explored how the education provider has addressed this concern in the following ways:

- a documentary submission by the education provider
- meetings with NWAS senior leaders and operational staff;
- meetings with East Midlands Ambulance Service (EMAS) and the Welsh Ambulance Service (WAS)
- documentary review by visitors;
- virtual meetings with senior leaders and programme staff from EHU; and
- additional documentation requested by visitors.

Information and evidence considered:

Collaboration between Edge Hill and NWAS and programme management

The education provider submitted correspondence between themselves and NWAS, which they considered evidence of a supportive effective and improving relationship.

We broadly agreed with this view, and considered the evidence was useful in terms of demonstrating the pathways in use for the relationship. However, we considered that it was also relatively limited in effectively demonstrating how the specific concern about the provision of practice-based learning had been addressed. The evidence submitted did not show NWAS agreeing to the changes that were under discussion.

Through quality activity, we requested additional evidence from the education provider to address these gaps. The education provider submitted information relating to the work of the Nurse Paramedic Strategic Project Group. This included minutes and agendas, and correspondence evidence to confirm that NWAS had agreed the suggested changes made to the programme for the current and future academic years.

We also considered information from NWAS themselves related to these standards. We had a virtual meeting with senior leadership at NWAS on 11 April 2025, and requested a documentary submission to support the verbal evidence given at this meeting. This written evidence was submitted on 9 May 2025. The NWAS view was that there has been an improvement in communication and engagement had improved overall. In January 2025, their view was that “the relationship and communication has improved significantly with the change in EHU’s programme team.” This was in line with our findings in the initial focused review. However, NWAS did also note that there had been some communication problems in the early months of 2025.

Experience of the East Midlands Ambulance Service (EMAS) and the Welsh Ambulance Service (WAS)

During the first review we were aware that ambulance services other than NWAS had been involved in the programme. The Education and Training Committee (Panel) suggested to us that communicating directly with WAS and EMAS would enable us to gain a clearer understanding of the education provider’s interactions with their practice partners. EMAS informed us that their involvement with the programme had been limited to providing placements for fourth year learners during 2024. At the request of the education provider, EMAS provided placements for two learners on a one-off basis. EMAS informed us that they have not hosted other placements.

WAS informed us at a virtual meeting that they had provided placements for the programme during the period 2020-23 but that they had ceased to provide placements by 2024. They noted that they had experienced many of the same problems that led to the HCPC focused review being launched in 2024, notably poor communications from the education provider, poor preparation of learners for placement, and concerns about how appropriately learners were being assessed. We considered that we did not need to explore these concerns separately because they were already addressed through the existing review processes and overlapped with the issues identified through these reviews.

Preparation of stakeholders for practice-based learning

With regard to SET 5.8, the education provider submitted, in the first instance, Module Specifications and a guide to practice-based learning for learners. The visitors noted that the submission did not include evidence related to maintaining an appropriate level of preparation for placement for practice educators. We explored this through quality activity. In their response to quality activity, the education provider did not address this point specifically. However, in a virtual meeting, the education provider clarified that they held regular refresher meetings for practice educators and that their initial process for approving practice providers required those practice partners to demonstrate how they would ensure that practice educators are prepared for placement.

The discussions noted above regarding communications between EHU and NWAS are relevant to this point, because appropriate preparation for practice educators depends on good communication between the education provider and the practice partner.

Outcome of exploration:

In this section, we have drawn together findings from the above, and considered what this means for our standards being met at a threshold level, linked to the 'areas for further exploration' at the top of this quality theme.

- **3.1 The programme must be sustainable and fit for purpose.**

We consider that this standard is not met.

NWAS remain supportive of the programme overall. None of our communications with NWAS during this process have led us to conclude that they are likely to withdraw support from the programme.

However, the update provided to us on 9 May 2025 setting out the NWAS view of the programme sets out several outstanding areas of concern. Many learners are still requiring retrieval, for example, i.e. additional time to attain required competencies, and NWAS note also that the difficulties around appropriate assessment are yet to be fully resolved. They state that it is too early to make a judgement about several of the areas of concern.

Learners appeared to be confident that many improvements had been made, in the meeting explored in more depth in [quality theme 3](#) below. But this has to be considered in conjunction with the outstanding concerns about the programme discussed through the report. The fact that some standards are not met calls into question the sustainability and fitness for purposes of the programme.

- **3.2 The programme must be effectively managed.**

We consider that this standard is not met.

Evidence that programme improvements had been made came from our meeting with learners and from NWAS. The learners as a group believed that

programme staff were significantly more responsive than previously and that staff changes had meant a better overall experience, especially around communications and opportunities for feedback. NWAS noted improvements in communications and in collaboration also.

However, given the number of standards that are not met at this time, as outlined through the rest of this report, we are not confident that the programme is being appropriately managed. There has been a long period of staff stability during the last eighteen months, sufficient to ensure that the concerns raised by various stakeholders are addressed, but it appears that they have not yet been addressed, despite the intensive support¹ offered by NHS England beginning in early 2024 and the clear requirements set out in the report from the first review.

We note from our communications with NWAS that significant concerns remain around the assessment on the programme, and on the progress of planned changes to assessment policies. The visitors also expressed concern that changes to the curriculum had not yet been finalised and that it was still not clear how the strengthening of the paramedic aspects of the curriculum had taken place. All these issues taken together show that the programme is not being managed effectively.

- **3.5 There must be regular and effective collaboration between the education provider and practice education providers.**

We consider that this standard is not met.

We consider that the education provider have made good progress in this area. They submitted evidence demonstrating that they have met regularly with practice partners, in particular NWAS. As well as this, they have demonstrably made certain changes to the programme arising from their collaboration with NWAS, as explored elsewhere in this report.

However, given the outstanding issues highlighted through this report, and noted by NWAS, we are not satisfied that the collaboration between the education provider and NWAS is sufficiently effective to support the quality of the programme.

- **5.8 Learners and practice educators must have the information they need in a timely manner in order to be prepared for practice-based learning.**

We consider that this standard is met.

The education provider has appropriate materials in place that they will use to prepare practice educators for supervision and mentoring in clinical settings, and explained to us the mechanism by which they will liaise with practice

¹ NHS England have been providing support to the programme via their [Intensive Support Framework](#) and associated quality processes.

partners to identify staff members who will be supervising learners in clinical placements. This has been done through agreeing a process with practice providers and requiring them to ensure that practice educators are familiar with the programme and its aims.

Quality theme 3: Learner experience

Area for further exploration: The risk of the standards in this section not being met had arisen from learner feedback through the previous focused review. The decision we had to make, therefore, was whether learner experience had improved sufficiently to satisfy us that the standards were now met at threshold.

The findings from the last focused review showed that there were risks associated with the following standards being met:

- **3.8 Learners must be involved in the programme** – During the first review we became aware that many learners had strong concerns about their involvement with the programme. A College of Paramedics focus group, and reports from other stakeholders, suggested this. We did not engage with learners directly ourselves during that review but we determined that we needed to engage with them through this review to understand their involvement, and to consider the risk that they were not being appropriately involved.
- **3.13 There must be effective and accessible arrangements in place to support the wellbeing and learning needs of learners in all settings** – As noted above we understood from the first review that many learners on the programme were concerned about their ability to access relevant forms of support. We needed to address the risk that learners were not able to access support for their wellbeing and learning needs.
- **3.15 There must be a thorough and effective process in place for receiving and responding to learner complaints** – As above information received during the first review suggested that learners on the programme did not feel that the process for dealing with their complaints and concerns was thorough and effective. We saw evidence that learners did not feel they could use established pathways to raise concerns. The COP focus group, for example, suggested widespread dissatisfaction with how issues arising in practice-based learning had been handled. We needed to consider whether learners on the programme feel safe and supported, that they are able to raise concerns where necessary.

When engaging with learners, we asked questions linked to the following areas:

- learners' experience of communications;
- learner involvement in the quality and effectiveness of the programme;
- experience of assessment; and
- atmosphere on the programme.

Quality activities agreed to explore theme further: We arranged a virtual meeting with learners on the programme to have a general discussion about their views of the programme and how well they were supported. We also raised the matter of learner support with NWAS and asked the education provider to address it through

their documentary submissions. We also considered data from the National Education Training Survey (NETS).

Information and evidence considered:

Engagement with learners

We spoke to a group of six learners who are currently on the programme:

- Three learners were in their fourth year of the programme (learners who have been on the programme since September 2021)
- One learner was in their third year of the programme (learners who started in September 2022)
- Two learners were in the second year of the programme (learners who started in September 2023)

These learners were selected for us by the education provider. We are confident from this meeting that the learners had genuinely been selected to give a full and honest account of their experiences. This was because the learners openly made certain criticisms of the programme, and generally gave us the impression of speaking freely and straightforwardly about their views.

- Communications
 - Learners broadly agreed that communications were very good. The third and fourth year learners considered that there had been improvements across the programme over the last two years, with initial problems “ironed out”. They suggested that many of the problems experienced by the programme in its early years had been eliminated.
 - All the learners agreed that they had a good idea of which staff members to go to with any issues or difficulties that arose. We heard that module leaders were “responsive” and the ability to contact the staff team had improved significantly. Learners felt the programme was “more stable” than it had been in 2021-22 and 2022-23, a period when there had been a high staff turnover. One learner described the change in communications as a “full 360” since those two years, which we took to mean that there had been a significant transformation.
- Learner involvement
 - The theme of significant improvement since the 2021-23 period recurred in the discussion of learner involvement. One learner relayed their impression that in those years programme staff had appeared to be focused primarily on the development of an innovative role, rather than on managing and delivering a programme that would appropriately prepare learners for safe and effective practice. This was associated with certain members of staff who were no longer involved in the programme.
 - Learners stated that they had “a lot of opportunity to give feedback”, at both the institutional and the programme level. All lecturers were willing to take feedback and constructive criticism. A concrete example of this was when the learners on the programme suggested changes to clinical simulation exercises, and the staff team agreed to do so after the learners had explained their reasoning. The learners agreed that if

the programme team chose not to make particular changes that had been suggested by the learners, reasons were given for the decisions.

- Experience of practice-based learning
 - We also asked learners about their views on practice-based learning, particularly whether they considered that the structure of practice-based learning was appropriate and helpful to their academic progression, and whether they found that practice educators were helpful and well-prepared.
 - Overall the learners were positive about the support received from practice educators. They noted that there was “always someone” available in their placements if they needed to raise issues or develop their understanding of what was expected of them.
 - They also stated that there were always ongoing discussions about practice-based learning, about how to gain the most appropriate experience and gain the right competencies. They did raise the issue of the difficulty of ensuring that they were able to access the right opportunities. What they mean by this is that paramedic placements by their very nature are unpredictable, and it cannot be guaranteed that any particular clinical situation will arise in a six week period.
 - We do note, however, that this is a perennial difficulty for learners on paramedic programmes, and does not necessarily reflect any problems with this specific programme.

There is more detailed discussion of learners’ views on assessment and progression in [quality theme 5](#) below.

National Education Training Survey (NETS) data

NETS is a national survey of undergraduate and postgraduate learners who are in practice-based learning for healthcare programmes. Data from NETS is relevant to our assessment in this review because it gives additional insight into how well learners on the programme are being supported in their practice-based learning, and what kind of experience they are having.

We considered 2024 NETS data, broken down with the NHS England reporting tool². Using this tool, responses can be broken down by subject and institution, which means that we were able to see that eight learners on the Edge Hill MSci Nurse Paramedic responded. Their responses concerned six separate placement providers:

- Liverpool University Hospitals NHS Foundation Trust
- Mersey and West Lancashire Teaching Hospitals NHS Trust
- NWAS
- Stockport NHS Foundation Trust
- Wirral Community Health and Care
- Wrightington, Wigan and Leigh NHS Foundation Trust

In several areas about which NETS respondents are asked, some of the learners did raise concerns. Notably more than one individual suggested that they had concerns

² <https://www.hee.nhs.uk/nets-2024>

about access to wellbeing resources, programme resources, and the appropriate pathways for raising concerns. Two had experienced or witnessed bullying or harassment or other inappropriate behaviour, and three considered that they lacked confidence in raising concerns about such matters.

These are clearly serious matters and need to be addressed by the education provider and their practice providers. However, we consider that on its own this data does not constitute evidence that the programme as a whole is not supporting learners appropriately.

Education provider response

The education provider submitted evidence relating to learner involvement and support. This included records of feedback received and actions taken in response to that feedback, alongside a Student Practice Guide. This was useful and appropriate evidence, and it showed that the education provider did have strong mechanisms in place for supporting learners appropriately.

Outcome of exploration:

In this section, we have drawn together findings from the above, and considered what this means for our standards being met at a threshold level, linked to the 'areas for further exploration' at the top of this quality theme.

- **3.8 Learners must be involved in the programme.**

We consider that this standard is met.

We have seen and heard clear evidence of learner involvement in the programme, to contribute to its quality and effectiveness. This involvement is consistent, organised and appropriate, and we have seen evidence that the education provider acts on feedback received in an appropriate way.

- **3.13 There must be effective and accessible arrangements in place to support the wellbeing and learning needs of learners in all settings.**

We consider this standard is met.

We saw evidence that learners have access to appropriate support for pastoral and academic matters. The education provider submission cited the relevant policies and procedures in this area, and included descriptions of actions taken to support wellbeing and learning needs. The NETS data and the testimony of learners supports the view that the programme maintains a generally high level of such support. The learners reported to us that the mood and atmosphere of the programme has improved since 2023 and that the attitude of practice educators has changed.

- **3.15 There must be a thorough and effective process in place for receiving and responding to learner complaints.**

We consider this standard is met.

The education provider has submitted copies of their policies and procedures, and learners who have given us clear examples of the education provider responding appropriately to complaints and concerns. Triangulating the evidence here, we are confident that the education provider is able to follow through in practice what they have set down in writing.

Quality theme 4: Curriculum, practice-based learning, and integration of theory and practice

Area for further exploration: The risk of the standards in this section not being met had arisen from changes to the curriculum that had not been finalised on conclusion of the previous focused review. The decision we had to make, therefore, was whether the curriculum had been finalised, and was set up in a way to ensure learners meet our requirements for registration on completion of the programme, to satisfy us that the standards were now met at threshold.

The findings from the last focused review showed that there were risks associated with the following standards being met:

- **4.1 The learning outcomes must ensure that learners meet the standards of proficiency for the relevant part of the Register** – During the first focused review process, stakeholders expressed concerns that the curriculum was not delivering appropriate content to paramedic learners. NHS England were only able to view full module descriptors in January 2025, and as of February 2025 they were reviewing the curriculum information provided by the education provider. We needed to be satisfied that the academic content being delivered enables those who complete the programme to practise safely and effectively as paramedics.
- **4.3 The programme must reflect the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance** – As noted above we understood from the first review that some stakeholders considered that the programme was not appropriately preparing learners for all aspects of paramedic practice. There was a risk that the curriculum was not appropriately detailed and structured so as to allow graduates from the programme to practise safely and effectively as a paramedic. Additionally, we were conscious that the nurse paramedic role was new and, for the moment, not clearly defined. Although making a decision about the future of the role is outside the remit of this investigation, we did explore through this process whether the lack of certainty and definition around the role was affecting the programme's ability to deliver the paramedic SOPs to the learners.
- **4.5 Integration of theory and practice must be central to the programme** – The initial issues raised about the programme included a concern from NHS England and NWAS that the structure of the programme was not enabling theory and practice to be appropriately integrated. Specifically, the order of paramedic practice-based learning did not align with the teaching and learning activities that gave the learners the knowledge they needed for those placements.
- **5.2 The structure, duration and range of practice-based learning must support the achievement of the learning outcomes and the standards of**

proficiency – Concerns were raised during the first focused review process about the lack of dedicated paramedic placement weeks for learner. Initially there were 20 paramedic practice-based learning weeks over the four years of the programme. This has now increased to 28 weeks, but the education provider is still working with stakeholders on ensuring that the duration of practice-based learning is sufficient to ensure that learners achieve the appropriate clinical skills. Both NHS England and NWS were unclear about which, if any, of the placements were intended to develop the nurse paramedic role. We needed to be satisfied that all practice-based learning appropriately supports the programme and is sufficient to enable learners to acquire appropriate paramedic competence, in its duration, range and structure.

Quality activities agreed to explore theme further: We requested a documentary submission from the education provider. Following review by the visitors, additional documentation was requested. We also had virtual meetings with the education provider to explore the curriculum further, and spoke to learners, NWS and NHS England to understand their perspectives on how the programme was delivering an appropriate paramedic curriculum.

Information and evidence considered:

We asked the education provider to submit the full details of their curriculum, and how the theoretical aspects were integrated both with each other and with practice-based learning. They supplied us with full module descriptors, as well as a mapping exercise to demonstrate how they considered the learning outcomes were aligned with the standards of proficiency (SOPs). We also received the Practice Assessment Record & Evaluation (PARE) document.

The visitors considered that this was useful as an introduction to the programme, but they had concerns around several areas:

1. Whether the curriculum was too unbalanced in the direction of nursing, and whether paramedic-specific competencies were being taught early enough in the programme for learners to be fully equipped to practise and develop those competencies in clinical placements.
2. Whether the paramedic learning outcomes were specific and detailed enough to deliver the paramedic SOPs appropriately.
3. How the specific details of the integration of theory and practice were managed in modules and in placement.
4. How the education provider had responded to concerns expressed by NWS concerning skills and competence deficiencies.
5. What is taught within the skills weeks introduced by the education provider

We explored these areas through quality activity, asking the education provider for an additional documentary submission and a virtual meeting.

In the additional documentation, the education provider provided additional detail about the modules, an updated programme specification, more information about the skills weeks, and information about how the education provider ensured clinical currency in the curriculum.

In the virtual meeting the visitors were able to explore all these areas in more depth. The programme team explained the detail of how the different parts of the curriculum related to each other and how, in their view, the learning outcomes were used to ensure that learners were appropriately prepared for safe and effective practice. Before the discussion, we viewed a presentation from the education provider which explained the structures of the programme, and how the clinical placements were intended to support the theoretical learning.

In the learners' meeting, we heard how well they considered the different parts of the programme supported each other, especially with regard to preparation for practice-based learning. In line with the general tenor of their comments on the programme, their view was there had been improvements in this area. For example, the current second years, i.e. those who started the programme in 2023, were now learning anatomy and physiology before their first non-observational paramedic placements – this was helpful to learners achieving their clinical competencies. They noted too that “split placements” now being used, i.e. placements divided between ambulance and hospital settings, were a more effective use of time because they allowed for a better skills mix.

We also asked the learners for their views on the lack of definition around the nurse paramedic concept. The consensus among the learners was they were “expected to make their own roles”, i.e. they were expected to put themselves forward to potential employers and promote the nurse paramedic role, rather than the education provider doing so. They suggested that the education provider had been honest about the extent to which they were pioneers of a possible new role and that it would be what they made it. There was no expectation among the learners that they would be able to “walk in” to a nurse paramedic role.

Several of the learners stated that for them the main benefit of undertaking the nurse paramedic programme, rather than a nursing or paramedic programme, was that it would add to their skillset and confidence for practice in the profession where they choose to practice, and their readiness to work in multi-disciplinary teams, rather than it necessarily being a pathway into any new role of a ‘nurse paramedic’. A specific example given by a learner intending to practise as a paramedic was that they understood more thoroughly how nurses approached lifting and moving of patients in hospital settings. Some learners did suggest that in their understanding a small number of NHS Trusts were tentatively looking into developing nurse paramedic roles.

Outcome of exploration:

In this section, we have drawn together findings from the above, and considered what this means for our standards being met at a threshold level, linked to the ‘areas for further exploration’ at the top of this quality theme.

- **4.1 The learning outcomes must ensure that learners meet the standards of proficiency for the relevant part of the Register.**
- **4.3 The programme must reflect the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance.**

- **4.5 Integration of theory and practice must be central to the programme.**

We consider these standards are not met.

From the various evidence submitted, and the conversations we have had with the education provider and other stakeholders, it is clear that the education provider has made significant progress towards resolving issues around curriculum, practice-based learning, and integration of theory and practice. However, the visitors did have some outstanding concerns about particular issues:

- Some of the learning outcomes remain overly broad, which means there is a possibility that not all the necessary specific paramedic and professional knowledge and competencies will be covered. For example, in Foundations In Emergency Care, in Year 2, there are only four learning outcomes, mapped to sections 4 and 10 of the paramedic SOPs. However, the visitors understood that this module bears a lot of the weight of paramedic-specific teaching within the structure of the programme, but does not align its learning outcomes to the more specific paramedic SOPs, e.g. those within sections 12.5 – 12.14. These are mentioned as being addressed with Year 2's Pathophysiology, but the visitors considered that the learning outcomes for that module are mostly generic and not closely related to paramedic practice;
- there is relatively limited teaching of paramedic-specific skills in Year 1, which creates a risk that learners would not be appropriately prepared for their first paramedic placements.
- The education provider is updating some of the modules in line with the improvements being made to the programme but we have not yet seen all the finalised versions of the modules that we have been told were updated to reflect those improvements. The visitors particularly wished to draw attention, in this context, to the Year 2 Foundations In Emergency Care module. We were given reassurances about the paramedic content of this module being strengthened but we have not yet seen the finalised version. This matters for our assessment because in the report from the first review we made it clear that the education provider was required to resolve all the areas raised through that process in a satisfactory way, not simply to continue the process of improvement, which has been ongoing for more than a year.

The visitors considered that there was a clear trajectory of improvement and development overall, and that there was strong support and intention for the continuation of the improvements and developments.

An operational update received from NWAS in April 2025 is also relevant to our decision-making here. This update concerned the learners who would be graduating from the programme in summer 2025, and we considered it was a useful snapshot in helping us to understand the extent to which the programme had developed its ability to deliver paramedic registrants who meet the SOPs and can practise safely and effectively.

This updated noted that of these learners, eight – 25% - were currently RAG rated as red, meaning there were significant concerns about their ability to successfully complete the programme. Action plans had been formed to try to help these learners complete the programme appropriately, and they would be required to complete

retrieval placements. Another seven learners were amber-rated, meaning that action plans but not retrieval would be required. The rest – 15, or 50% - were considered on track for successful completion.

21 learners from the programme have applied to NWS for employment. Eleven have been employed, four have been refused, and six other applications are in progress. According to NWS, the two graduates from the programme recruited in 2024 are both progressing well through their newly-qualified paramedic stage.

It is a serious concern for the HCPC that at this late stage, half the learners in this cohort are requiring substantial support in order to successfully complete the programme. This shows that there are still outstanding issues with the delivery and quality of the programme.

On the point about whether the uncertainty over the nurse paramedic concept is affecting the programme's ability to deliver the paramedic SOPs, we take the view that, as the visitors noted, the need to deliver dual registrants still creates certain problems for the programme which have not yet been resolved. Examples of this include the lack of clarity about where paramedic content is actually delivered, and the difficulties around assessment highlighted by NWS in their update of 9 May 2025.

5.2 The structure, duration and range of practice-based learning must support the achievement of the learning outcomes and the standards of proficiency.

We consider this standard is not met.

We considered that the education provider had made significant progress towards ensuring that this standard was met. Changes were made to the structure of practice-based learning in 2024, to increase the amount of paramedic clinical time, and additional changes have been agreed for the current and next academic years, in line with the issues raised in the last year around paramedic competencies.

However, as noted above, we have not seen the finalised detail of the modules that we have been verbally assured were updated to strengthen paramedic content on the programme. The visitors' concern about the broad learning outcomes is also relevant in this context, even though the visitors were overall content with the programme's improvement trajectory.

NWS stated to us in their 9 May 2025 update that the arrangements for practice-based learning on the programme are now in line with most of the BSc programmes for which they provide practice-based learning.

Nevertheless, we consider the standard is not met because we have not seen appropriately updated module descriptors which demonstrate in sufficient detail how practice-based learning will support, and be supported by, the theoretical learning components of the programme. This is related to the concern expressed by the visitors that the learning outcomes on the programme are insufficiently detailed to ensure that learners achieve all the paramedic SOPs.

Quality theme 5: Effectiveness and rigour of assessment

Area for further exploration: The risk of the standards in this section not being met had arisen from issues with assessment from the previous focused review. The decision we had to make, therefore, was whether the assessments ensured that learners meet our requirements for registration on completion of the programme, to satisfy us that the standards were now met at threshold.

The findings from the last focused review showed that there were risks associated with the following standards being met:

- **6.1 The assessment strategy and design must ensure that those who successfully complete the programme meet the standards of proficiency for the relevant part of the Register** – One of the key issues investigated through the first review was whether learners were being appropriately assessed. Specifically, NWS and NHS England had suggested that there was a lack of clarity about who exactly was signing off which competencies in practice-based learning. It had been suggested, for example, that some paramedic competencies were being signed off by practice educators who were appropriately qualified and experienced to sign off those competencies, and that programme staff were letting learners progress through the programme when they had not achieved the necessary competencies.
- **6.2 Assessment throughout the programme must ensure that learners demonstrate they are able to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics** – As noted above, we had become aware of serious concerns about whether the assessment approach on the programme was able to deliver paramedics who could practise safely and effectively. The risk was that it would be possible to complete the programme without having demonstrated understanding of the standards of conduct, performance and ethics.
- **6.3 Assessments must provide an objective, fair and reliable measure of learners' progression and achievement** – From the first review we were aware that several stakeholders had outstanding concerns about whether the approach to assessment being taken on the programme was accurately measuring whether learners had acquired the relevant competencies and knowledge. The risk here was that learners were moving through the programme and perhaps graduating without having actually demonstrated appropriate skills. NWS and NHS England had been particularly concerned that learners were arriving in practice-based learning without the skills knowledge and competencies required for those placements.
- **6.4 Assessment policies must clearly specify requirements for progression and achievement within the programme** – As noted above, we were concerned, based on the information reviewed in the first review, that the assessment approach on the programme did not make it clear what learners actually needed to achieve to move through the programme.
- **6.5 The assessment methods used must be appropriate to, and effective at, measuring the learning outcomes** – During the first review we became aware of concerns that the assessment methods being used were not reliable in measuring whether learners actually understood the competencies that they needed to understand. The risk, as with other standards, was that

learners were being signed off as having achieved competencies that they had not in fact acquired.

As a general point, we were aware of the issue of learners failing clinical assessments, being asked to retake those parts of the programme, and being signed off by practice educators who may not have been appropriately qualified to sign off competencies. We needed to be satisfied that:

- the assessment strategy on the programme is appropriately designed by qualified individual(s) to cover all the paramedic standards of proficiency (SOPs) and the standards of conduct, performance and ethics (SCPEs);
- assessment is reliable, fair and objective, and measures appropriate outcomes;
- practice educators are appropriately supported and enabled to make reliable and appropriate assessment of learners' clinical paramedic competence;
- relevant policies make it clear under what circumstances competencies may and may not be signed off, and that such signing off is done by an appropriately qualified person.

Quality activities agreed to explore theme further: We requested a documentary submission from the education provider. Following review by the visitors, additional documentation was requested for another review. We also had virtual meetings with the education provider to explore the curriculum further, and spoke to learners, NWS and NHS England to understand their perspectives on how assessment on the programme was working.

Information and evidence considered:

In their submission the education provider included several documents relevant to these areas:

- an "Early Intervention Model" which set out the circumstances in which struggling learners would be identified and supported;
- the overall Assessment and Feedback policy;
- some positive feedback from practice-based learning partners about performance by learners on the programme;
- the Potential Areas for Practice Support (PAPS), a document designed to clarify and explain the reasonable adjustments that would be made for learners in assessment.

The visitors had some specific concerns about gaps in this submission. In particular it was not clear to them how the education provider had adjusted the assessment strategy in response to the concerns identified by NWS, or what meetings and discussions had taken place around the concerns. The visitors were also uncertain about whether the issue with competencies being signed off by individuals who were not qualified to do so had been resolved. Specifically they noted that it appeared that missing competency sign-offs could be resolved through simulation or professional discussion, and it was not clear from the PAPS document that these would have to be done by practice educators who were appropriately qualified and experienced to sign off paramedic competencies.

The education provider's response to the quality activity included additional evidence around these issues. For example, they submitted documents showing that NWS

had agreed with their amendments to the programme structure, including assessment, for the years 2024-26. They provided additional policies around assessment for learners, and evidence of updates to the practice assessment document (PAD) and the PARE document.

The visitors also explored the question of assessment in a virtual meeting. Specifically, the visitors wished to understand whether the ongoing issue that had been raised around sign-offs had actually been appropriately resolved. They raised the question with the programme team of how they would ensure that only those who were sufficiently qualified to do so would sign off competencies. The education provider explained that sign-offs would not be accepted unless the person identified in the sign-off was someone who had previously been identified as an appropriate person to sign off paramedic competencies.

We also sought input from learners around assessment. We asked them whether they considered that assessments were useful and appropriate and whether they felt that the structure of the programme enabled them to perform well in assessments. The overall view was that this aspect of the programme had improved significantly during 2023-24 and 2024-25, as with other problematic areas. For example, the learners felt that the “split placements” that were now being used, i.e. placements that included both hospital and ambulance-based learning, had helped them keep skills current and enabled them to perform to their best in assessments. The learners’ collective view was that they were comfortable with assessment on the programme.

Also relevant in this area is the [April 2025 NWAS operational update referenced in quality theme 4 above](#). This update found that 25% of the final year cohort were currently RAG rated as red, indicating significant concerns about their ability to complete the programme. Another 25% were amber-rated, indicating that they were requiring sustained support to complete successfully.

21 learners from the programme have applied to NWAS for employment. Eleven have been employed, four have been refused, and six other applications are in progress. According to NWAS, the two graduates from the programme recruited in 2024 are both progressing well through their newly qualified paramedic stage.

Outcome of exploration:

In this section, we have drawn together findings from the above, and considered what this means for our standards being met at a threshold level, linked to the ‘areas for further exploration’ at the top of this quality theme.

- **6.1 The assessment strategy and design must ensure that those who successfully complete the programme meet the standards of proficiency for the relevant part of the Register.**
- **6.2 Assessment throughout the programme must ensure that learners demonstrate they are able to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics.**

We consider these standards are not met.

As with many areas of the programme, we note that the education provider has made clear improvements. However, the visitors were unclear from the evidence provided, and from the quality activity to explore that evidence further, whether NWAS's concerns about appropriate sign-off of competencies had actually been addressed. In conversations with the education provider, we were informed that they were still developing ways of ensuring that sign-off of competencies could only be done by appropriate people, but this was not yet complete. NWAS themselves said that it was "currently too early" to say whether the issues with assessment had been sufficiently addressed. NWAS also stated that they have evidence of programme staff "providing a summative sign off despite the competency not being achieved in placement".

In light of this, we consider there remains a risk that the assessment strategy is not ensuring learners meet the SOPs and the SCPEs.

- **6.3 Assessments must provide an objective, fair and reliable measure of learners' progression and achievement.**
- **6.4 Assessment policies must clearly specify requirements for progression and achievement within the programme.**
- **6.5 The assessment methods used must be appropriate to, and effective at, measuring the learning outcomes.**

We consider these standards are not met.

As noted above, the visitors were concerned about gaps in the curriculum and a lack of clarity around how the strengthening of the paramedic components had been formally embedded. With regard to assessment, in their initial review they considered that they had not seen sufficient evidence to demonstrate "that university assessment has been changed following original validation of programme". They were also concerned by the suggestion that learners who had not achieved certain competencies could have those signed off via simulation or by professional discussion rather than by clear demonstration of their abilities through the defined assessment strategy. They were not clear that such activities would have to be agreed or reviewed by an appropriately experienced and qualified individual, which raised a risk that learners were being signed off without being able to carry out the competency in question. This was considered through quality activity and at a virtual meeting with the education provider, but the visitors did not see evidence that all relevant documentation had been updated to ensure that no competencies were signed off without relevant professional expertise.

Also relevant are the visitor concerns already discussed about the unfinalised changes to modules and the learning outcomes, that they considered overly broad. We cannot be assured that assessment is appropriate if there is ambiguity about what is being assessed through each module.

In support of the visitor conclusions, NWAS – a key stakeholder for the programme who have long experience of working with the education provider – stated to us that they are not yet satisfied that the assessments on the programme are being carried out in a fair, objective, and reliable way. They highlighted a concern with programme

staff signing off summative assessment even when individual competencies had not yet been achieved. They also stated to us that they are still not confident in the appropriateness of the pathway by which learners who fail parts of NWAS placements are enabled to retrieve those parts in other settings.

This concern also impacts SETs 6.4 and 6.5, because it entails that the education provider's assessment policies are not appropriately robust to ensure that learners progress and achieve appropriately within the programme. It also raises a clear potential problem with the assessment methods being used and whether they are actually effective in measuring the learning outcomes.

Taking together the visitors' and NWAS's outstanding concerns, they can be summarised as follows:

- A significant number of learners were still requiring retrieval, i.e. requiring extra attempts to pass key paramedic competencies.
- There remains uncertainty about the arrangements for ensuring that competencies are only signed off by those who are properly equipped to do so. The programme has a single PARE (Practice Assessment Record & Evaluation) document for both nursing and paramedic practice-based learning. We are concerned that paramedic competencies may be signed off by nursing practice educators who may not possess the skills or knowledge to make these judgements.
- There are remaining concerns about whether learners who fail practice placements at NWAS are being signed off on their competencies in other locations, without appropriate oversight to ensure that such sign-off is being carried out by appropriate persons.
- NWAS also stated that during the current academic year (2024-25) programme staff have been signing off summative assessments even though competencies have not been achieved in placement.

NWAS do say that they have continuing discussions about these issues with the education provider, and it should be noted that the communications and co-operation between the two parties have improved significantly.

The operational update from NWAS concerning the status of current final year learners also suggests that there remain significant problems in assessment and progression. It is a serious concern for the HCPC that towards the end of their final year, such a high proportion of learners are requiring sustained support. We consider that this raises serious questions about the effectiveness of assessment on the programme.

Section 6: Issues identified for further review

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

There were no outstanding issues to be referred to another process, because we are recommending that the programme does not meet several standards, and that therefore approval should be withdrawn.

Section 7: Decision on focused review outcomes

Assessment panel recommendation

Based on the findings detailed in [section 5](#), the executive recommends to the Education and Training Committee that we should withdraw approval from the MSci Nurse Paramedic (full time) programme, for future learners and all current learners (including learners due to graduate in the summer of 2025). This recommendation applies to this programme only, and not the other HCPC-approved programmes delivered by the education provider.

If the Education and Training Committee agrees that approval should be withdrawn for current learners, we will work with:

- the education provider on transitioning affected learners to an approved paramedic programme, to ensure they can meet HCPC requirements on entry to our Register; and
- the NMC should learners wish to transfer to an approved nursing programme.

Reason for this recommendation: In [section 5](#) above we set out how we investigated each of the outstanding concerns from the first review, and the outcome reached by that investigation.

We have been investigating this programme for over a year, since March 2024. The education provider received the report of the first review in January 2025. This report set out a clear deadline of June 2025 by which they needed to demonstrate that all the standards were met, as a condition of continuing approval. This deadline was set because we needed to make a final decision about the programme's approval. It would not be reasonable or proportionate to have a prolonged process of monitoring or ongoing reviews.

When making the decision through the previous focused review assessment, we set out clear regulatory requirements that the education provider needed to meet to ensure that all the standards highlighted through the initial report were met, as a condition of ongoing approval. There is a risk to public safety if individuals who are not fit to practise are able to enter the paramedic workforce.

We have noted through the report that the education provider has made significant progress towards meeting the standards. However, we consider that the education provider has had sufficient time to consider and address the concerns highlighted by the HCPC through the first focused review, but has not been able to do so for all requirements set.

It is our understanding that the education provider has been aware of stakeholder concerns about the programme since late 2023. At the time the HCPC initiated our first focused review with the education provider in April 2024, we were aware from

communications with NNAS and NHS England that they had already been working with the education provider around curriculum content, assessment, communication, and governance.

Appropriate support has been available to the education provider. For example, as outlined in [the table of stakeholders in section 4](#), NHS England have been providing support to the programme via their [Intensive Support Framework](#) and associated quality processes, for almost all of 2024, at Intensive Support Framework Category 2 (ISF2). ISF2 is defined by NHS England as “Significant Concerns: there are a significant number of areas where the provider does not meet HEE [now NHS England] standards and / or plans in place are not delivering sustainable improvement at the pace required”³.

There have been appropriate opportunities for the education provider to address our regulatory requirements set by our Education and Training Committee (Panel) in January 2025. The documentation reviewed by the HCPC Executive and advisory visitors was submitted in early April 2025. The education provider subsequently provided additional written evidence and had two virtual meetings with the HCPC team in May 2025.

The above reasoning is summarised as follows:

- The education provider has been aware of issues since late 2023
- Since then, until early 2025, they have had intensive support from NHS England’s regional Workforce, Training and Education team, to assist them to address issues
- We have been investigating since March 2024
- We set clear regulatory requirements that issues linked to our standards of education and training (SETs) must be addressed, for a final decision to be made on continued approval in June 2025
- The education provider has been given adequate opportunities to address these issues, through our current investigation
- There is clear evidence that the programme is not meeting several of our SETs
- There is a public risk should current learners enter our Register, because the education provider has not been able to satisfy us that all learners who complete the programme will meet our requirements for registration.

Our conclusion from this review is that the following standards are not met at this time, and that therefore we should withdraw approval from the programme.

- 3.1 The programme must be sustainable and fit for purpose
- 3.2 The programme must be effectively managed
- 3.5 There must be regular and effective collaboration between the education provider and practice education providers.
- 4.1 The learning outcomes must ensure that learners meet the standards of proficiency for the relevant part of the Register.
- 4.3 The programme must reflect the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance.

³ [A guide to the HEE Intensive Support Framework](#)

- 4.5 Integration of theory and practice must be central to the programme.
- 5.2 The structure, duration and range of practice-based learning must support the achievement of the learning outcomes and the standards of proficiency.
- 6.1 The assessment strategy and design must ensure that those who successfully complete the programme meet the standards of proficiency for the relevant part of the Register
- 6.2 Assessment throughout the programme must ensure that learners demonstrate they are able to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics
- 6.3 Assessments must provide an objective, fair and reliable measure of learners' progression and achievement
- 6.4 Assessment policies must clearly specify requirements for progression and achievement within the programme
- 6.5 The assessment methods used must be appropriate to, and effective at, measuring the learning outcomes

These standards not being met means that the education does not have the mechanisms in place to ensure their current learners will meet our requirements for registration (ie the paramedic SOPs and the standards of conduct, performance and ethics) on completion of the programme. Therefore, we are recommending that approval should be withdrawn for all current and future learners.

Education and Training Committee decision

The Education and Training Committee decided to withdraw approval from this decision in their meeting on 10 September 2025, following a 'minded to' withdraw approval decision on 31 July 2025. The decision notices are included as appendix 2 (July decision) and appendix 3 (September decision).

Appendix 1 – list of open programmes at this institution⁴

| Name | Mode of study | Profession | Modality | Annotation | First intake date |
|---|----------------------|-----------------------------------|-----------------|---|--------------------------|
| BSc (Hons) Operating Department Practice | FT (Full time) | Operating department practitioner | | | 01/09/2010 |
| BSc (Hons) Operating Department Practice - Apprenticeship | FT (Full time) | Operating department practitioner | | | 19/09/2022 |
| BSc (Hons) Paramedic Practice | FT (Full time) | Paramedic | | | 01/09/2018 |
| MSci Nurse Paramedic | FT (Full time) | Paramedic | | | 01/09/2020 |
| Non-Medical Prescribing | PT (Part time) | | | Supplementary prescribing | 01/07/2006 |
| Non-Medical Prescribing (Level 6) | PT (Part time) | | | Supplementary prescribing; Independent prescribing | 01/01/2014 |
| Non-Medical Prescribing (Level 7) | PT (Part time) | | | Supplementary prescribing; Independent prescribing | 01/01/2014 |

⁴ This list was current at the time of the recommendation to withdraw approval (10 June 2025)

Appendix 2 – July Education and Training Committee decision notice

Education and Training Committee

Withdrawal of approval – minded to withdraw approval decision

| | |
|---------------------------|----------------------|
| Education provider | Edge Hill University |
| Programme name | MSci Nurse Paramedic |
| Mode of study | Full time |
| Date of decision | 31 July 2025 |

Committee: Katie Thirlaway (Chair)
Rebekah Eglinton
Helen Gough
Carl Stychin
Helen White

| |
|--|
| Decision |
| <p>That the programme, which was previously approved in 2020, has not met all of the regulatory requirements set by the Education and Training Panel in January 2025 by the deadline of 30 June 2025 and therefore the Committee was minded to withdraw approval from the programme.</p> <p>That the withdrawal of approval would apply from 10 September 2025, subject to the Education and Training Committee's final decision on that date. The Committee was minded that withdrawal of approval should apply to all current learners in years 1-3 of the programme. All learners currently on the final year of the programme would be entitled to join the HCPC Register, subject to normal application requirements, including the small number of final year learners who have delays to their studies.</p> <p>That considerations and decisions on whether options for contingency planning for current learners align with the HCPC's regulatory standards would be delegated to partner visitors, with support from the Executive, and an update would be provided to the Education and Training Committee as part of its final decision making at its meeting on 10 September 2025.</p> <p>That the education provider has one calendar month, from the date of this decision being sent to it, to make observations on the matters raised, so that these can be considered by the Education and Training Committee on 10 September 2025.</p> |
| Reasons |
| <p>The Committee was of the unanimous opinion, taking account of the focused review process report, the Executive's recommendations and the observations received from the education provider, the College of Paramedics, NHS England and North West Ambulance Service NHS Trust (NWAS), that the standards of education and training (SETs) had not been met by the deadline of 30 June 2025 set by the Education and Training Panel.</p> |

The Committee agreed with the Executive's findings that the education provider had not demonstrated that the following SETs had been met by the deadline of 30 June 2025:

- SET 3.1 The programme must be sustainable and fit for purpose
- SET 3.2 The programme must be effectively managed.
- SET 3.5 There must be regular and effective collaboration between the education provider and practice education providers.
- SET 5.2 The structure, duration and range of practice-based learning must support the achievement of the learning outcomes and the standards of proficiency.
- SET 6.1 The assessment strategy and design must ensure that those who successfully complete the programme meet the standards of proficiency for the relevant part of the Register.
- SET 6.2 Assessment throughout the programme must ensure that learners demonstrate they are able to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics.
- SET 6.3 Assessments must provide an objective, fair and reliable measure of learners' progression and achievement.
- SET 6.4 Assessment policies must clearly specify requirements for progression and achievement within the programme.
- SET 6.5 The assessment methods used must be appropriate to, and effective at, measuring the learning outcomes.

The Committee was not confident that learners would meet the HCPC's requirements for registration on completion of the programme in view of the outstanding concerns regarding the programme's curriculum and assessment, collaboration with practice partners, and the effectiveness of practice-based learning in supporting learning and assessment against the standards of proficiency.

The Committee acknowledged that there had been a trajectory of improvement, but agreed that despite the education provider having had sufficient time and opportunity to demonstrate how they had fully addressed the issues that had been identified in the previous focused review, they had failed to do so in line with the deadline of 30 June 2025. This deadline had been set by the Education and Training Panel in view of the potential risk to public safety if the programme were to continue indefinitely whilst concerns about regulatory standards were present.

The Committee noted that through their observations, the education provider had reported that they had not always been clear as to what actions were required to address the requirements set out in the previous focused review. The Committee considered that it was the education provider's responsibility to demonstrate how the HCPC's standards were met and that an appropriate level of detail had been provided to the education provider in relation to the HCPC's concerns in the previous focused review report and subsequent communications.

The Committee was therefore minded to withdraw approval for all current learners, except any learners currently in their final year. The Committee agreed that the decision would not apply to current final year learners because programmes remain approved until such time as they are not, and most final year learners would have completed the programme by the next Committee decision on 10 September 2025. The Committee agreed that the small number of current final year learners who have not completed the programme should be able to apply for HCPC registration as a matter of fairness.

In order to support the education provider developing contingency plans in a timely way to support current learners, the Committee agreed to delegate decisions on whether options for contingency planning align with our regulatory standards to partner visitors. The partner visitors would be supported by the Executive as required and an update would be provided to the Education and Training Committee as part of its final decision making at its meeting on 10 September 2025.



Signed:.....**Committee Chair**

Appendix 3 –September Education and Training Committee decision notice

Education and Training Committee

Withdrawal of approval decision

| | |
|---------------------------|----------------------|
| Education provider | Edge Hill University |
| Programme name | MSci Nurse Paramedic |
| Mode of study | Full time |
| Date of decision | 10 September 2025 |

Committee: Katie Thirlaway (Chair)
Rebekah Eglinton
Helen Gough
Carl Stychin
Helen White

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|--|
| Decision |
| <p>That the programme, which was previously approved, does not meet all of our standards of education and training (SETs) and therefore approval is withdrawn. That the withdrawal of approval applies from 10 September 2025.</p> <p>That the withdrawal of approval applies to future learners and all current learners who were in years 1-3 of the programme in the 2024-25 academic year. All learners who had undertaken the final year of the programme during the academic year 2024-25 are entitled to join the HCPC Register, subject to normal application requirements, including the small number of final year learners who have delays to their studies.</p> |
| Reasons |
| <p>On reviewing the papers from their previous consideration of this matter, the contingency planning learner transfer review, and the education provider's observations supplied in September 2025, the Committee concluded that the repeated and additional information provided by the education provider within their observations did not constitute evidence that the regulatory requirements previously set (and therefore all of the SETs) were met by the programme.</p> <p>The Committee noted that their reasoning that underpinned the previous 'minded to' withdraw approval decision had not changed based on the education provider's observations, namely:</p> <ul style="list-style-type: none">• Despite the education provider having had sufficient time and opportunity to demonstrate how they had fully addressed the issues that had been identified in the previous focused review, they had failed to do so in line with the deadline of 30 June 2025. |

- This deadline had been set by the Education and Training Panel in view of the potential risk to public safety if the programme were to continue indefinitely whilst concerns about regulatory standards were present.
- It was the education provider's responsibility to demonstrate how the HCPC's standards were met and that an appropriate level of detail had been provided to the education provider in relation to the HCPC's concerns in the previous focused review report and subsequent communications.

In reviewing the education provider's observations, the Committee understood their request that a 'proportionate teach out' of the programme for learners currently enrolled on the programme was allowed. The underpinning premise for this was that, in the education provider's view, the HCPC's assessment of their contingency plans for transferring learners (should approval be withdrawn) 'recognised equivalence' of the curriculum for the MSci Nurse Paramedic programme, and the HCPC-approved BSc (Hons) Paramedic Practice programme.

The Committee noted that the contingency planning assessment did not constitute recognition of equivalence between the two programmes. The contingency plan assessment was expressly to review whether the education provider's proposed approach to transferring learners was an effective approach to risk management, to ensure learners can transfer from one programme to another, and on gaining the BSc (Hons) award would meet our regulatory requirements. They also noted that the transfer plans relied on additional teaching and learning delivered through the BSc (Hons) programme for any transferring learners.

The Committee also noted that the education provider's proposal did not address the Committee's other concerns about the programme, such as integration of theory and practice, how practice-based learning would be supported by other organisations, or the collaborative arrangements between the education provider and the programme's key practice education provider.

The Committee did not consider some specifics within the observations to inform their decision making, as these areas were not relevant to meeting the SETs, namely:

- the 2025 graduating cohort being allowed to register (which the Committee noted was due to the previous approval status of the programme and the legislative requirements for these graduates being admitted to the Register, rather than allowing this group to register being an endorsement that there were no issues with the programme);
- NHS need for a flexible and multi skilled workforce; and
- learners spending additional time to gain the BSc (Hons) Paramedic Practice award.

The Committee recognised that the education provider has placed the best interests of their learners at the centre of their decision making and their proposal to teach out the programme. Although the Committee recognised and was sympathetic to the implications of the withdrawal of approval decision for learners, the proposal to teach out the programme could not be supported in view of the issues that remained with the programme, which had resulted in regulatory standards not being met. In their decision making, the Committee centred the HCPC's public protection remit, formed through adherence with our regulatory standards.

The Committee maintained its view that standards 3.1, 3.2, 3.5, 4.1, 4.3, 4.5, 5.2, 6.1, 6.2, 6.3, 6.4, and 6.5 of the standards of education and training (SETs) had not been met and therefore approval of the programme should be withdrawn.



Signed:.....**Committee Chair**