Performance review process report

Glasgow Caledonian University, 2018-2022

Executive summary

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

We have undertaken quality activities to arrive at our judgement on performance, including when the institution should next be reviewed. This review should take place during the 2027-28 academic year.

Through this assessment, we have noted that the following areas needed to be explored through quality activity.

- The areas we explored focused on:
  - Use of data generated by equality and diversity monitoring. We explored with the education provider how they gathered specific data related to equality, diversity and inclusion (EDI), and how this data was used to drive improvements and develop the programmes.
  - Monitoring of interprofessional education. We explored with the education provider how they ensured that interprofessional education (IPE) was working effectively in the context of different programmes, and how they used the feedback gathered on IPE to ensure continuous improvement.

Previous consideration	Not applicable as this performance review did not arise from a previous process.
Decision	The Education and Training Committee (Panel) is asked to decide when the education provider's next engagement with the performance review process should be.
Next steps	Subject to the Panel's decision, the provider's next performance review will be in the 2027-28 academic year.

Included within this report

Section 1: About this assessment

About us

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

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

Our standards

We approve education providers and programmes that meet our education standards. Individuals who complete approved programmes will meet proficiency standards, which set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

Our regulatory approach

We are flexible, intelligent and data-led in our quality assurance of programme clusters and programmes. Through our processes, we:
- enable bespoke, proportionate and effective regulatory engagement with education providers;
- use data and intelligence to enable effective risk-based decision making; and
- engage at the organisation, profession and programme levels to enhance our ability to assess the impact of risks and issues on HCPC standards.

Providers and programmes are approved on an open-ended basis, subject to ongoing monitoring. Programmes we have approved are listed on our website.

The performance review process

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

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

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

Thematic areas reviewed

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

How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint partner visitors to design quality assurance assessments, and assess evidence and information relevant to the assessment. Visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make the decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee takes decisions through different levels depending on the routines and impact of the decision, and where appropriate meets in public. Their decisions are available to view on our website.

The assessment panel for this review

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

Jane Day	Lead visitor, radiographer
Paula Charlesworth	Lead visitor, dietitian
Jenny McKibben	Service User Expert Advisor
Niall Gooch	Education Quality Officer

We encourage reflections through portfolios to be made at the institution level wherever possible. The performance review process does not always require

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

In this assessment, we considered we did not require professional expertise across all professional areas delivered by the education provider. We considered this because the lead visitors were satisfied they could assess performance and risk without needing to consider professional areas outside of their own.

Section 2: About the education provider

The education provider context

The education provider currently delivers 26 HCPC-approved programmes across nine professions including four post registration programmes. It is a Higher Education Institution and has been running HCPC approved programmes since 1991. The earliest programmes are from the 1990s and cover dietitian, occupational therapist, and physiotherapist professions. In 2016 with the change to legislation and the introduction of exemptions for orthoptists they start to deliver an orthoptist programme. They currently deliver 13 post graduate programmes across dietitian, occupational therapist, physiotherapist, practitioner psychologist, and radiographer professions.

The last annual monitoring in the legacy model of quality assurance was in 2019-20.

The university has undergone eight major changes in the legacy model of quality assurance for the occupational therapist, physiotherapist, radiographer, and paramedic professions.

Glasgow Caledonian University engaged with the legacy approval process for radiographer profession in 2021. The visitors' report, including the recommendation of the visitors, was considered at a meeting of the Education and Training Committee (ETC). Following this meeting, the report was to be read alongside the ETC's decision notice. They also engaged with the programme closure process for prescribing programmes and a dietitian programme.

The education provider went through a focused review process in 2022-23, arising from a complaint about the orthoptics programme. We investigated this through an Executive-led process and recommended to the Education & Training Committee (Panel) (ETCP) that no further action was required. ETCP agreed this recommendation.

The HCPC-approved provision at the education provider sits within the School of Health and Life Sciences (SHLS). This is overseen by the School Management Group (SMG), led by the Dean of the School. The SMG members have designated areas of responsibility, aligned with aspects of the School portfolio.

Practice areas delivered by the education provider

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

	Practice area	Delivery level		Approved since
Pre-registration	Biomedical scientist	☒Undergraduate	☐Postgraduate	2010
	Chiropodist / podiatrist	☒Undergraduate	☐Postgraduate	2004
	Dietitian	☒Undergraduate	☒Postgraduate	1994
	Occupational therapy	☒Undergraduate	☒Postgraduate	1996
	Orthoptist	☒Undergraduate	☐Postgraduate	2016
	Paramedic	☒Undergraduate	☐Postgraduate	2017
	Physiotherapist	☒Undergraduate	☒Postgraduate	1997
	Practitioner psychologist	☐Undergraduate	☒Postgraduate	2012
	Radiographer	☒Undergraduate	☒Postgraduate	2009
Post-registration	Independent Prescribing / Supplementary prescribing			2020
	Orthoptist Exemptions			2018

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[1].

Data Point	Bench-mark	Value	Date of data point	Commentary

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[1] An explanation of the data we use, and how we use this data, is available here

Numbers of learners	789	1741	31/03/2023	The benchmark figure is data we have captured from previous interactions with the education provider, such as through initial programme approval, and / or through previous performance review assessments. Resources available for the benchmark number of learners was assessed and accepted through these processes. The value figure was presented by the education provider through this submission. The education provider is recruiting learners well above the benchmark. We explored this by considering how well individual programmes were supported and staffed, and we considered that performance was good. The programme-level data supplied through the portfolio, when considered in conjunction with staff coverage and practice-based learning capacity, demonstrated that there were no issues around learner numbers.
Learner non continuation	3%	1%	2019-20	This Higher Education Statistics Agency (HESA) data was sourced from summary data. This means the data is the provider-level public data. The data point is below the benchmark, which suggests the provider is performing above sector norms When compared to the previous year's data point, the education provider's

				performance has been maintained. We explored this by considering how well learners were supported and given opportunities to feedback and contribute.
Outcomes for those who complete programmes	94%	95%	2019-20	This HESA data was sourced from summary data. This means the data is the provider-level public data The data point is above the benchmark, which suggests the provider is performing above sector norms When compared to the previous year's data point, the education provider's performance has improved by 1% We explored this by considering how well the education provider prepared learners for next steps through learning about professionalism.
Teaching Excellence Framework (TEF) award	N/A	N/A	N/A	There is no data available for this data point as many Scottish institutions do not participate in the TEF. We did however explore their mechanisms for maintaining teaching excellence through the process. We considered that their internal processes were appropriate and effective for doing so.
Learner satisfaction	74.2%	83.5%	2022	This NSS data was sourced from summary data. This means the data is the provider-level public data The data point is above the benchmark, which suggests

				the provider is performing above sector norms. When compared to the previous year's data point, the education provider's performance has been maintained. We explored this by looking at how well learners had been supported and the opportunities they had had to contribute to continuous improvement of the programmes.

Section 3: Performance analysis and quality themes

Portfolio submission

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

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

Quality themes identified for further exploration

We reviewed the information provided, and worked with the education provider on our understanding of their portfolio. Based on our understanding, we defined and undertook the following quality assurance activities linked to the quality themes referenced below. This allowed us to consider whether the education provider was performing well against our standards.

Quality theme 1 – Use of data generated by equality and diversity monitoring

Area for further exploration: The education provider submitted a detailed description of the policies governing their approach to equality, diversity and inclusion (EDI). They noted, for example, that there was a School of Health & Life Sciences EDI Committee, as well as a School-level Operational Plan for EDI. They provided data across many areas, showing that they were monitoring rates of participation in the HCPC provision among many different groups. It was clear that they aimed to be as open and diverse as possible.

However, they did not include reflection on how these processes, and the data gathered, were used to improve outcomes. Without this information, the visitors

could not fully understand how the education provider had ensured that necessary improvements had actually been made. They therefore explored with the education provider how EDI data had been fed back to the relevant people or groups, and how it had been turned into defined and measurable action.

Quality activities agreed to explore theme further: We explored this by an email exchange requesting additional evidence as we considered this the most appropriate and proportionate way to address the issue.

Outcomes of exploration: The education provider submitted additional reflection on how EDI data had been turned into action. They noted that they had used a School-level Athena Swan Self-Assessment team (SAT) to monitor and develop gender equality outcomes. At university level there was a Race Equality Charter (REC) working group which had similar responsibilities for ethnic diversity. During the review period, the School's Senior Management Group (SMG) oversaw the work of these groups and their delivery.

The education provider also reflected on their progress in this area through an EDI survey on learners and staff. Data from this reflection was incorporated into Athena Swan and REC action plans. EDI champions among staff and learners fed into these processes. The implementation of the plans developed by these groups was overseen by university-level standing committees.

The visitors considered that the education provider's response was thorough and useful. It enabled them to understand how the EDI feedback loops had been closed and how data had been used to drive improvement in a framework of accountability. They considered therefore that performance in this area was good.

Quality theme 2 – Monitoring of improvements in interprofessional education

Area for further exploration: The education provider submitted a detailed description of their approach to interprofessional education (IPE). This included an outline of the statutory and institutional framework, and of what forms IPE took on particular programmes. The portfolio also identified a number of areas where the education provider was seeking to upgrade and improve the IPE offer on the HCPC provision. For example, they are planning to embed more widely the learning gathered during the COVID-19 pandemic about the use of virtual learning environments (VLEs). Additionally, there is an IPE project looking at how to help different professions co-operate in End Of Life care.

The visitors considered that this was strong reflection overall. The education provider had clearly been continuously looking at their IPE offer and thinking about ways in which it could be enhanced. However, the visitors did note that the portfolio did not include information about how and by whom the new innovations had been evaluated. Without this information the visitors could not make a definitive judgment about the education provider's performance. This was because they did not fully understand how the education provider ensured that enhancements generated by their reflections were carried out in the most effective way. They therefore explored through quality activity the education provider's arrangements for reflecting on the effectiveness of their innovation in IPE.

Quality activities agreed to explore theme further: We explored this by an email exchange requesting additional evidence as we considered this the most appropriate and proportionate way to address the issue.

Outcomes of exploration: The education provider's response noted that there was an IPE Framework Management Group (FMG) which had oversight over IPE across the HCPC-approved provision. They set out the terms of reference for this group, which were wide-ranging. The visitors considered that these terms of reference had enabled the education provider to engage in effective reflection on the success or failure of particular new initiatives in the IPE area. In particular they considered that the two following terms had enabled the FMG to make good decisions:

- "To monitor the delivery and facilitate the enhancement of the quality and standards of the modules within its remit"; and
- "To undertake an annual analysis of a range of performance indicators e.g. progression, student experience/ feedback within Module Evaluation Questionnaires and National Student Survey".

The visitors therefore considered that performance in this area was good. This was because the response to their exploration had made it clear that the education provider had been able to make an informed decision about which forms of IPE were most appropriate.

Section 4: Findings

This section provides information summarising the visitors' findings for each portfolio area, focusing on the approach or approaches taken, developments, what this means for performance, and why. The section also includes a summary of risks, further areas to be followed up, and areas of good practice.

Overall findings on performance

Quality theme: Institution self-reflection

Findings of the assessment panel:
- **Resourcing, including financial stability** –
    o The key area of reflection in this part of the portfolio was on the challenges that have arisen in recent years around recruitment numbers and rising costs. A "demographic dip" in the 19-29 year old Scottish population has resulted in fewer applicants in some areas. Disruption to secondary school assessment as a result of the COVID-19 pandemic has caused difficulties in choosing appropriate learners. Inflation and pension costs have also required careful attention to financial sustainability.
    o The education provider stated that they were strongly placed to manage these difficulties due to their institutional planning systems. They use three year financial plans to ensure ongoing sustainability.
    o The visitors considered that this was useful reflection. However, they did ask the education provider for some additional clarification so that they

could gain a full understanding of how the education provider had monitored and managed workload, recruitment, funding and staffing. The education provider submitted detailed additional reflection in these areas. The education provider also clarified how the budgetary and staffing aspects of programmes had been overseen. In light of the reflection and the quality activity, the visitors considered that performance in this area was good. This was because the education provider had strong defined mechanisms for ensuring sustainability across their HCPC-approved provision, and had reflected on the best ways to achieve this.

- **Partnerships with other organisations** –
  o The education provider reflected on how the partnerships had been used to maintain the quality and effectiveness of their programmes. They listed organisations such as NHS Greater Glasgow & Clyde and NHS Lanarkshire, NHS Education for Scotland (NES), employers, former learners and third sector organisations. They also included professional, statutory and regulatory bodies (PSRBs). They noted that all these stakeholders had been asked for their views and input on programme quality and development. The education provider then reflected on this information in their approaches to quality monitoring and programme development. The education provider listed some of the areas of the provision in which they co-operated with such organisations: "contribution of clinical specialists to our programmes and services, consultations for programme development and quality assurance and enhancement activities".
  o They education provider noted their attempts to expand relationships with new partners, although they did not name any specific partners. However the visitors considered there was insufficient reflection on what exactly was involved in the expansion and management of these new relationships. They asked for some clarification.
  o The clarification outlined the various groups who have responsibility for developing new relationships. These include the Strategic Partnership Board (SPB), which brings together the Dean of the School of Health and Life Sciences and the Chief Executive of NHS Lanarkshire. This Board has three sub-groups: Learning and Teaching, Research and Workforce, Capacity and Capability.
  o Specific examples were given of the education provider using the SPB to develop new partnerships. We therefore concluded the education provider is performing well in this area.

- **Academic and placement quality** –
  o The education provider reflected on some specific examples of how quality monitoring worked, and how information gained through quality monitoring was acted upon. For example, learners reported problems with some of the assessments and the relevant programme teams could then discuss whether the issues raised were genuine problems. A key mechanism here is the Practice Placement Agreements (PPAs) which are in place with Scottish health boards. This area is governed by the GCU Academic Quality Policy and Practice, which sets out requirements for how all programmes monitor and improve quality.

- o The education provider also reflected on how the PPAs had been able to be flexible during the COVID-19 pandemic when it had not been possible to undertake the normal quality assurance actions.
  - o We agreed the education provider is performing well in the area. This was because there were clear mechanisms in place to allow the education provider to maintain quality and to ensure that their procedures continue to be effective.
- **Interprofessional education** –
  - o The education provider reflected on what had been achieved through the different approaches to interprofessional education (IPE). They noted, for example, that across their provision individual programmes were required to tailor their approaches. These events were evaluated via learner feedback. The education provider referred to feedback on these activities which showed that they were seeking to understand its effectiveness.
  - o The education provider reflected on several plans for developing and improving IPE. For example, they were aiming to embed more opportunities for virtual IPE and to create an End Of Life IPE collaboration. The visitors considered that these were strong enhancements. However, they noted that it was not clear from the portfolio how the education provider ensured that the enhancements had contributed to programme improvement. They therefore explored through quality activity how the education provider had ensured appropriate reflection on IPE enhancements (see quality activity 2 above).
  - o The education provider's response to the quality activity demonstrated that they had clearly reflected on the best ways to deliver IPE. The visitors therefore considered that performance in this area was good, as reflection on IPE was embedded in the operational work of the programmes.
- **Service users and carers** –
  - o The education provider reflected on the ethos and detail of their service users and carer involvement. Learners on the BSc Hons Occupational Therapy programme are taught by people who live with spinal injuries. Learners on the BSc (Hons) Orthoptics programme practice clinical care skills on service users with disabilities. Across the provision, learners are required to show that they had sought input from service users on their attitude and interaction. The education provider demonstrated that they had clear and appropriate mechanisms for developing and improving these aspects. They had reflected, for example, on how best to use service users to develop learners' clinical communication skills.
  - o We recognised the education provider's effective use of the Professional, Statutory and Regulatory Bodies Oversight Panel, which ensures input from professional bodies into service user involvement.
  - o We agreed the education provider is performing well in the area. We noted that the education provider understood the varying requirements of service user involvement across their provision.
- **Equality and diversity** –
  - o The education provider reflected in detail on its mechanisms for monitoring equality and diversity on the HCPC programmes, and the issues identified. There are numerous policies and groups in place seeking to ensure that the education provider opens up participation to as many groups as possible.

- o The education provider included some of the statistics they have gathered around the demographic profile of their learner body. Their reflection indicates that they had been fully involved with, and committed to, relevant national and regional targets. These included Athena Swan and the Race Equality Charter.
  - o The visitors considered that this was evidence of good practice. However, the portfolio did not describe how the information gathered contributed to reflection on the education provider's continuous improvement. It was not clear what mechanisms were used or who had overall responsibility. They therefore explored through quality activity 1 how this would be done.
  - o The response to the quality activity was thorough and provided evidence of reflection on their delivery of improvements based on equality, diversity and inclusion (EDI) data. The visitors therefore considered that performance in this area was good, as the education provider had gathered appropriate information and had taken necessary action.
- **Horizon scanning** –
  - o The education provider reflected on how the School of Health & Life Science (SHLS) was considering future workforce and learner needs. They provided evidence of close co-operation with the Scottish government and local health boards. They noted that they had been involved in each of the five subgroups for the Scottish government's review of the allied health professional (AHP) Education and Workforce Policy.
  - o One of the outcomes of this project was renewed reflection on new models of educational provision, adapting to the needs of learners and the health workforce. The education provider submitted evidence of their work on developing these new models. These include apprenticeships, advanced practitioner programmes, and upskilling support workers.
  - o The education provider also continued to work with NHS Education Scotland (NES) on future plans, including helping to provide ambulance coverage across remote communities. This will be used as a pilot activity, so reflection will be a key part of the process.
  - o The visitors considered that performance in this area was good, because the education provider had demonstrated a breadth and depth of reflection on future challenges.

Risks identified which may impact on performance: None.

Outstanding issues for follow up: None.

Areas of good and best practice identified through this review: None.

Quality theme: Thematic reflection

Findings of the assessment panel:
- **Embedding the revised Standards of Proficiency (SOPs) –**
  - o The education provider had clearly engaged in very strong reflection on the best way to embed the revised standards of proficiency (SOPs). They submitted evidence showing that they asked all programme leaders to map the appropriate standards for their programmes, and to identify

modules where content or learning outcomes might need to be adjusted. They provided a comprehensive list of actions that would need to be taken going forward.
- o The education provider's reflection had identified particular modules where changes might need to be made because of the revised SOPs, or where they thought the revised SOPs were particularly well-addressed.
- o The visitors considered that this was a useful and appropriate reflection and they considered that the education provider was performing well in this area. This was because all programmes were ready to work within the new SOPs framework and the education provider had taken the opportunity to develop their provision.

- **Impact of COVID-19** –
  - o The education provider had undertaken detailed reflection on their response to the pandemic, including a consideration of which mitigations could continue to be adopted. For example, they noted that improvements in communication, and a much greater use of various virtual learning tools, would be part of their provision in the future. They also stated that assessment regulations and tools had been adapted to ensure that learners were not unfairly disadvantaged.
  - o A detailed list was provided of mitigations introduced during the pandemic, including reflection on whether these should be continued afterwards. For example, the pandemic had accelerated their adoption of virtual learning tools.
  - o We considered that performance in this area was good, since impacts of COVID-19 had been appropriately handled. We considered that a range of appropriate strategies had been implemented. We noted too the education provider's ability to use learners in service delivery where appropriate and clinically necessary.

- **Use of technology: Changing learning, teaching and assessment methods** –
  - o The key theme of reflection in this area was the education provider's use of technology to overcome the challenges of the COVID-19 pandemic. As well as the increased use of virtual learning noted above, the education provider also outlined their strategies for maintaining cohort identity and maintaining learner's morale, at a time when some learners were physically isolated. There was also some reflection on how confidence in using technology had been developed among both staff and learners. The portfolio noted also that the education provider was engaged in continuous review of technology use and was aware of the need to balance in-person and virtual learning.
  - o The education provider also had some reflection on how to prepare learners for professional practice in a world where virtual interactions were becoming more and more common in healthcare.
  - o We considered that performance in this area was good. The education provider had a proactive attitude to developments in this area and had reflected transparently.

- **Apprenticeships** –
  - o The education provider does not run apprenticeships in HCPC-approved professions and does not have any plans to start any. They did not therefore provide any reflection in this area.

Risks identified which may impact on performance: None.

Outstanding issues for follow up: None.

Areas of good and best practice identified through this review: None.

Quality theme: Sector body assessment reflection

Findings of the assessment panel:
- **Assessments against the UK Quality Code for Higher Education** –
  - The education provider reflected in depth on their recent internal quality assessments. In 2020 they went through the QAA's Enhancement-Led Institutional Review (ELIR) process. They noted that they had received commendations for good practice in a large number of areas and had reflected on how to build on this success.
  - They also reflected on the Enhancement-led Internal Subject Review (ELISR), which is part of the QAA Quality Enhancement Framework. They note that all programmes within the HCPC provision have been though ELISR during the review period and that all were found to be performing well.
  - There are other pathways for quality monitoring, which enable reflection on performance. The education provider uses Annual Programme Monitoring to monitor quality on an ongoing basis throughout the academic year. Real-time data, for example, admission statistics, exam results and NSS feedback, is used to drive continuous improvement. This process is the responsibility of the Strategy, Planning and Business Intelligence (SPBI) group. The education provider state that all their internal monitoring is shaped by the QAA Quality Code for Higher Education.
  - In light of these considerations, the education provider considered that performance in this area was good. They had seen strong evidence that the QAA Quality Code for Higher Education played an integral part in the education provider's internal processes.
- **Assessment of practice education providers by external bodies** –
  - The education provider reflected on how external bodies had been involved in auditing their practice partners. They mentioned the examples of the Care Inspectorate (Scotland) and Healthcare Improvement Scotland (HIS), both of which have responsibilities for inspecting and auditing healthcare settings. The education provider works with the Care Inspectorates to ensure that physiotherapy learners are having practice-based learning in safe and appropriate settings. With HIS, the education provider uses their findings about the safety of clinical placements to reflect on the appropriateness of using particular settings. NHS Education Scotland (NES) also have input into this reflection. The education provider note that they work with all relevant stakeholders to ensure that intelligence on practice-based learning is used appropriately.
  - We considered that performance in this area was good, as there was clear evidence of engagement with relevant and appropriate bodies, and of action taken in response to their findings. This constitutes strong reflection on the relevant issues.

- **National Student Survey (NSS) outcomes** –
  - The education provider identified a decline in 2021 in the average NSS score for programmes in the School of Health & Life Sciences, down to around 78% from around 81% in the previous survey. Their reflection suggested that this may be the result of disruption related to the COVID-19 pandemic, which affected learners during this review period.
  - They did reflect in detail on the programme-level NSS scores. Five HCPC-regulated programmes increased their overall satisfaction scores, and five HCPC-regulated programmes achieved scores of over 90%.
  - The education provider reflected on the particular areas of NSS outcomes where learners were giving low scores. They set out the actions that they intended to take to resolve the issues in these areas. For example, they are trying to be more responsive to real-time feedback from learners through their virtual learning tools, and to be clearer about changes that have been made, on a "You said, we did" basis.
  - The visitors considered that performance in this area was good, as the education provider were clearly committed to acting on lowered NSS scores and using close data analysis to determine what responses are required. However, they did ask for some additional clarification around whether any individual HCPC-approved programmes had recorded declining scores, and if so what had been done about this. The education provider noted that the BSc (Hons) Paramedic Science had seen a significant reduction its overall score. Their reflection suggested that this was mostly due to the COVID-19 pandemic and its disruption of learner experience. They noted that programme teams were required to analyse learner satisfaction in detail, and to address any concerns or issues. The visitors were confident that mechanisms were in place to ensure this could happen.
- **Office for Students monitoring** –
  - This education provider is not within the remit of OFS as it is a Scottish provider.
- **Other professional regulators / professional bodies** –
  - The education provider reflected on how they had worked with the Nursing & Midwifery Council (NMC) and the General Optical Council (GOC) to ensure that the relevant programmes remained fit for purpose.
  - The NMC had revised some of their requirements around the structure of practice-based learning and its integration with academic learning, which the education provider said they had taken into account in programme design. Similarly the GOC had updated their requirements for those on programmes that would make them eligible for GOC registration and the education provider had reflected on how to bring their programmes in line with these requirements.
  - The visitors considered that this was good reflection. They considered that performance in this area was good, because evidence had been submitted of close adherence to changing expectations from professional bodies.

Risks identified which may impact on performance: None.

Outstanding issues for follow up: None.

Areas of good and best practice identified through this review: None.

Quality theme: Profession specific reflection

Findings of the assessment panel:
- **Curriculum development** –
  - For this area, the education provider gave many examples of how they had reflected on the best ways to respond to changing professional or pedagogical requirements. For instance, the biomedical science programme had been amended in various ways in response to various changes: the COVID-19 pandemic, changes to QAA requirements, and the requirement to combine smaller subject areas into a Blood Sciences module. Similarly the education provider had considered how to integrate Sustainable Development Goals (SDGs) into the dietetics provision, and had also implemented the British Dietetics Association Curriculum Framework 2020.
  - The occupational therapy programmes had experienced difficulties with transitioning back to normality after the COVID-19 pandemic. They had also found it hard to get learners to engage with feedback mechanisms, but had reflected on the best way to encourage learner engagement, for example, making it easier for them to respond to surveys. The paramedic provision underwent a full review in 2020 due to ensure professional currency, because other Scottish institutions had begun to deliver paramedic science programmes.
  - These examples were clear evidence that the education provider was able to respond appropriately when changes became necessary. The visitors considered that performance in this area was good, as the education provider had demonstrated a willingness to engage with changing educational and professional contexts in their programme design.
- **Development to reflect changes in professional body guidance** –
  - The education provider reflected on several challenges that had arisen from changes in professional body guidance. For example, they noted that the British Dietetics Association (BDA) requirements around learners' progression through the programme had caused some difficulties, which they had managed to overcome. They also noted that the amended guidance around use of simulation for podiatry learners had been difficult to follow because of the COVID-19 pandemic. Across several professions the education provider had also had to reflect on the best way to implement more detailed guidance on maintaining learners' mental health.
  - Additionally the education provider noted that the Royal College of Occupational Therapists (RCOT) had published two sets of new guidance during the review period. In 2019 RCOT issued new learning and development standards for pre-registration education. In 2021 RCOT had release new standards for practice, conduct and ethics. The education provider included information about how they had sought to incorporate these new standards into their occupational therapy provision.
  - The visitors considered that the reflection provided was detailed and wide-ranging. They considered that performance in this area was good,

because the education provider had clearly shown that they were willing and able to make changes to reflect professional guidance.

- **Capacity of practice-based learning** –
  - o A key area of reflection in the portfolio for this area was the education provider's response to the way in which the COVID-19 pandemic had disrupted practice-based learning. This was the case across almost the entire HCPC-approved provision, although some professions – such as occupational therapy – had existing pressure on capacity, even before the pandemic. Generally the education provider used increased virtual placements and other technological solutions to maintain as much access to clinical education as possible.
  - o The education provider did also reflect on how they met non-COVID-19 related challenges, such as a lack of funding for orthoptics placements and a shrinking availability of placements for paramedic learners because of competition from other providers.
  - o There were separate issues in other professional area. For example, a restructure of occupational therapy placements had created difficulties for some learners with childcare responsibilities.
  - o More positively, the education provider submitted their reflection on their successful expansion of the placement capacity available to the radiographer programmes. This was done by diversifying the kind of settings considered appropriate. They also used existing capacity in more effective ways, by reviewing their use of clinical suites and making it possible for learners to review each other's clinical practice.
  - o In light of this evidence, the visitors considered that performance in this area was good. The education provider had proved that they were able to respond effectively to capacity challenges, and to respond creatively as necessary.

Risks identified which may impact on performance: None.

Outstanding issues for follow up: None.

Areas of good and best practice identified through this review: None.

Quality theme: Stakeholder feedback and actions

Findings of the assessment panel:
- **Learners** –
  - o The education provider reflected on some of the challenges they had met in this area. A key theme across the entire provision was the need to use learner feedback effectively to drive improvement on the programme. Many examples were given of the education provider's ability to identify issues and to act upon them. For example, on the counselling psychology programmes and the occupational therapy programmes, learner engagement with feedback was noted as a problem. For orthoptist learners costs associated with placement had emerged as an issue for learners.
  - o On other HCPC-approved programmes, the education provider had reflected on learner feedback about programme structure, assessment

approach and levels of preparation for practice-based learning. They had clear pathways for responding appropriately to such feedback and to ensuring that learner complaints, concerns and feedback were appropriately dealt with.

- o The visitors considered that performance in this area was good, because they had seen considerable evidence of the use of defined pathways to make specific improvements to learner feedback.

- **Practice placement educators** –
  - o The education provider reflected on some of the input they had had from practice placement educators, and the ways they had adapted to it. For example, one theme they emerged on multiple programmes was that learners needed more help to write reflectively. It was also suggested by some practice educators that learners needed to be better prepared for private practice as well as NHS practice. Other issues highlighted by practice educators included COVID-19-related disruption, lack of learner preparation for placement, and learners having difficulty securing accommodation.
  - o The reflection here was matched by the education provider setting out how they had taken action on the feedback received from the practice educators. For example, on the issue of learners' ability to write reflectively, they had introduced more support for this skill. They had also changed the academic curriculum to hep learners be more prepared for practice-based learning.
  - o The visitors considered that performance in this area was good, because they had seen evidence of the education provider's ability to gather and act upon information from practice educators, and drive programme improvement.

- **External examiners** –
  - o The education provider set out some of the key areas in which they had reflected on external examiner feedback during the review period. This was strongly positive, except for a common concern that GCU Learn, the virtual learning environment (VLE) was unreliable. The positive feedback included commendations from external examiners for the education provider's assessment strategies, their moderation, and their flexible approach to COVID-19. The education provider noted for each of these how they had responded by further embedding the good practice in their operational approach. For the concern about GCU Learn, the education provider noted that they are working with their IT support team and with the wider institution to ensure more reliable access.
  - o The visitors considered that this was good performance, as the education provider had demonstrated that they could take on board the feedback from external examiners and use it for programme and process improvement.

Risks identified which may impact on performance: None.

Outstanding issues for follow up: None.

Areas of good and best practice identified through this review: None.

<u>Data and reflections</u>

Findings of the assessment panel: The visitors review the data provided as part of their consideration of the portfolio. Their review did not highlight any issues needing further exploration.

- **Learner non continuation:**
    - The learner non-continuation rate is above the benchmark level. Our review found that this learners on the HCPC provision were being well-supported to continue the programme.
- **Outcomes for those who complete programmes:**
    - The education provider was performing significantly above average in programme completion rates. Alongside this data point our review found that learners were being well-prepared for professional practice and that the education provider was willing and able to reflect closely on their approach. We therefore considered that performance was good.
- **Teaching quality:**
    - The education provider does not participate in TEF but based on the information we saw in the portfolio, we considered that they were performing well in terms of the staff expertise and knowledge available to the HCPC-approved provision.
- **Learner satisfaction:**
    - The education provider's National Student Survey (NSS) score in this area was significantly above benchmark. Coupled with their detailed reflection on learner feedback and learner involvement, we considered that they were performing well in this area.
- **Programme level data:**
    - We did not consider that there were any specific issues around this area. There was a large disparity in the learner numbers data held by HCPC and those supplied by the education provider. However, our review suggested that learner numbers were being appropriately managed and monitored, and that staffing and resource levels were appropriate. We therefore considered that performance was good.

Risks identified which may impact on performance: None.

Outstanding issues for follow up: None.

Areas of good and best practice identified through this review: None.

Section 5: Issues identified for further review

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

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

Section 6: Decision on performance review outcomes

Assessment panel recommendation

Based on the findings detailed in section 4, the visitors recommend to the Education and Training Committee that the education provider's next engagement with the performance review process should be in the 2027-28 academic year.

Reason for next engagement recommendation
- Internal stakeholder engagement
  - The education provider engages with a range of stakeholders with quality assurance and enhancement in mind. Specific groups engaged by the education provider were learners, practice educators and programme staff. All of these groups had opportunities to give their views and experiences of the programme, through various pathways.
- External input into quality assurance and enhancement
  - The education provider engaged with professional bodies. They considered professional body findings in improving their provision.
  - The education provider engaged with regulatory bodies such as the Nursing & Midwifery Council, the Office for Students and NHS Education Scotland. They considered the findings of all these bodies in improving their provision.
  - The education provider considers sector and professional development in a structured way.
- Data supply
  - Data for the education provider is available through key external sources. Regular supply of this data will enable us to actively monitor changes to key performance areas within the review period
- What the data is telling us:
  - From data points considered and reflections through the process, the education provider considers data in their quality assurance and enhancement processes and acts on data to inform positive change.

Appendix 1 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
BSc (Hons) Applied Biomedical Science	FT (Full time)	Biomedical scientist			01/09/2010
BSc (Hons) Podiatry	FT (Full time)	Chiropodist / podiatrist		POM - Administration; POM - sale / supply (CH)	01/01/2004
BSc (Hons) Human Nutrition and Dietetics	FT (Full time)	Dietitian			01/01/1994
MSc Dietetics	FT (Full time)	Dietitian			01/12/2002
MSc Dietetics	PT (Part time)	Dietitian			01/12/2002
BSc (Hons) Occupational Therapy	FT (Full time)	Occupational therapist			01/09/1996
MSc Occupational Therapy (Pre-registration)	FT (Full time)	Occupational therapist			01/08/2004
BSc (Hons) Orthoptics	FT (Full time)	Orthoptist		POM - Sale / Supply (OR)	01/09/2016
BSc Paramedic Science	FT (Full time)	Paramedic			01/09/2017
BSc (Hons) Physiotherapy	FT (Full time)	Physiotherapist			01/08/1997
Doctorate in Physiotherapy (Pre-registration)	FT (Full time)	Physiotherapist			01/01/2018
MSc Physiotherapy (Pre-registration)	FT (Full time)	Physiotherapist			01/09/2009
D.Psych in Counselling Psychology	FT (Full time)	Practitioner psychologist	Counselling psychologist		01/09/2012
D.Psych in Counselling Psychology	PT (Part time)	Practitioner psychologist	Counselling psychologist		01/09/2012
Doctorate in Health Psychology	FT (Full time)	Practitioner psychologist	Health psychologist		01/09/2017

Doctorate in Health Psychology	PT (Part time)	Practitioner psychologist	Health psychologist		01/09/2017
Doctorate in Sport and Exercise Psychology	FT (Full time)	Practitioner psychologist	Sports and exercise psychologist		01/09/2017
Doctorate in Sport and Exercise Psychology	PT (Part time)	Practitioner psychologist	Sports and exercise psychologist		01/09/2017
BSc (Hons) Diagnostic Imaging	FT (Full time)	Radiographer	Diagnostic radiographer		01/09/2009
BSc (Hons) Radiotherapy and Oncology	FT (Full time)	Radiographer	Therapeutic radiographer		01/09/2009
MSc (Pre-registration) Diagnostic Radiography	FT (Full time)	Radiographer	Diagnostic radiographer		01/01/2022
MSc (Pre-registration) Diagnostic Radiography	PT (Part time)	Radiographer	Diagnostic radiographer		01/01/2022
CPD Cert Admin & Use of Orthoptic Exemptions	PT (Part time)			POM - Sale / Supply (OR)	01/08/2018
Prescribing for Healthcare Practitioners SCQF Level 10	PT (Part time)			Supplementary prescribing; Independent prescribing	01/09/2020
Prescribing for Healthcare Practitioners SCQF Level 11	PT (Part time)			Supplementary prescribing; Independent prescribing	01/09/2020
Prescribing for Healthcare Practitioners SCQF Level 9	PT (Part time)			Supplementary prescribing; Independent prescribing	01/09/2020

Appendix 2 – summary report

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

Education provider	Case reference	Lead visitors	Review period recommendation	Reason for recommendation	Referrals
Glasgow Caledonian University	CAS-01232-F8J2P3	Jane Day Paula Charlesworth	Five years	We have undertaken quality activities to arrive at our judgement on performance. The next review should take place during the 2027-28 academic year. This is because: • The education provider engages with a range of stakeholders with quality assurance and enhancement in mind. Specific groups engaged by the education provider were learners, practice educators and programme staff. All of these groups had opportunities to give their views and experiences of the	None

				programme, through various pathways.	
				• The education provider engaged with professional bodies. They considered professional body findings in improving their provision.	
				• The education provider works with regulatory bodies such as the Nursing & Midwifery Council, the Office for Students and NHS Education Scotland. They considered the findings of all these bodies in improving their provision.	
				• The education provider considers sector and professional development in a structured way.	
				• From data points considered and reflections through the process, we know the education provider considers data in their quality assurance and	

				enhancement processes and acts on data to inform positive change.	