

Education annual report,  
2021-22 and 2022-23  
academic years

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# Contents

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<b>Executive summary</b>	<b>4</b>
Our regulatory approach to the quality of education and training	5
Key findings	6
Considering future challenges	8
<b>Background information and context</b>	<b>10</b>
Summary of our education function	10
Summary of how we changed our education quality assurance approach	10
Underpinning principles of the model	11
How we deliver our intentions and statutory function	12
Rollout and adoption of the model	12
Continuous improvement	13
<b>Findings on education provider engagement and alignment with our standards</b>	<b>15</b>
<b>Approving education providers and programmes</b>	<b>16</b>
Our approach to approval assessments	16
Programmes considered	17
Key findings	18
Quality activities, conditions and referrals	19
<b>Reviewing the performance of approved education providers and programmes</b>	<b>23</b>
Our approach to performance review assessments	23
Key findings	24
Quality activities and referrals	26
Assessment outcomes – review periods	28
<b>Concerns and issues</b>	<b>31</b>
Statistics on process application	32
Themes	33
<b>Data and intelligence</b>	<b>35</b>
Our approach to the use of education provider performance data	35
Education providers not included in external data supplies	36
Engagement with other bodies	36
Year in registration survey	37

Future areas of focus	39
Workforce expansion	39
Final year of performance review assessments	40
Implementation of our standards of conduct, performance and ethics	40
Review of our standards of education and training	40
Key statistics on education and training for HCPC professions	42
Number of approved pre-registration programmes	42
Nations and regions	46
Number of approved post-registration programmes	54
Glossary	55
Appendix 1 – Approval assessment findings, detailed analysis	56
Appendix 2 – Performance review assessment findings – detailed analysis	89

# Executive summary

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Welcome to the Education annual report of the Health and Care Professions Council (HCPC).

This report sets out a 'state of the nation' for education and training in the 15 professions we regulate. It is based on our assessments of education providers and programmes in the 2021-22 and 2022-23 academic years. Through this report we have focused on key areas linked to the quality of education for programmes leading to HCPC registration, and key challenges faced by the sector.

This report will be helpful for the education sector, and those with an interest in the education and training of the health and care workforce. The key findings and detailed thematic analysis can be used to inform thinking about challenges facing the education and broader health and care sector.

## Our key findings are

- > Quality assurance is central to the work of education providers.
- > Education providers actively seek to understand and respond to challenges.
- > Partnership working is integral to the delivery of high-quality programmes.
- > Education providers are enabling workforce expansion by developing new and existing programmes.
- > There were increases in overall programme capacity for most professions.
- > Education providers are responding to challenges with practice-based learning capacity.
- > Education providers routinely use data to inform decision making.
- > The COVID-19 pandemic had a significant and lasting impact on the delivery of education and training.
- > There are different approaches and challenges for Higher Education Institution (HEI) and non-HEI education providers.
- > Education providers have aligned their programmes with our revised standards of proficiency (SOPs).
- > Good forward planning by education providers is required to ensure intended programme start dates can be met.

## Our regulatory approach to the quality of education and training

We assess education providers and new education programmes to ensure they are 'properly organised' to deliver education, and train learners to be safe, effective and fit to practise when they join the HCPC Register.

We focus on whether education providers and programmes meet our standards of education and training (SET). The SETs are outcome focused, to ensure those who complete programmes meet our requirements for registration – namely our standards of proficiency and standards of conduct, performance and ethics. This means that we do not set specific 'inputs' such as the academic entry requirements for programmes, or the number of practice hours required. We instead ask education providers to explain how their programmes are set up, and how their approaches enable them to meet our education standards.

We are confident that we deliver flexible, intelligent and data-led education quality assurance activities. Compared to our previous education quality assurance model, our current model (introduced in September 2021) enables a more effective assessment of education providers and programmes to ensure they meet our standards. For example, ongoing assessment of education provider performance is now much more robust.

Our previous model focused on change and was concentrated at the programme level, which meant we could not easily understand the whole picture at each education provider.

This risked under-reporting of challenges and successes, and inconsistency in assessments, giving a partial view of quality. The current model requires reflection and information at the institution level linked to performance, and how our standards are maintained.

Relationships between the HCPC and approved education providers are functioning well in most cases. We see candour through our assessments, and a willingness to share problems and solutions, along with successes. This is a good indicator that quality assurance practices are working well within education providers, and that the HCPC is seen as a trusted partner to help improve the quality of education.

## Key findings

- > **Quality assurance is central to the work of education providers** – there is a strong quality assurance mindset at education providers, and a focus on the quality of new and existing education programmes was prevalent in all of our assessment activities.
- > **Education providers actively seek to understand and respond to challenges** – the sector is outward facing, with their eyes open to current challenges and initiatives from within and outside of the sector, such as the cost of living, industrial action, emerging technology, and an aging population. Challenges that directly or indirectly affect delivery of programmes were often well thought through, and flexibly considered in line with established standards and frameworks (such as our education standards).
- > **Partnership working is integral to the delivery of high-quality programmes** – strong partnerships are integral to the sustainability and quality of programmes. We found that good partnership working is underpinned by formal arrangements which clearly define objectives, expectations, and responsibilities, which are supported by well-defined engagement frameworks.
- > **Education providers are enabling workforce expansion by developing new and existing programmes** – The pipeline of future professionals has grown. Education providers recognised the key role they play in supplying the UK workforce with highly skilled individuals who focus on the needs of service users, and have overcome challenges presented, often in innovative ways which align with our flexible standards. However, there are recruitment challenges to some professions, so increasing programme capacity alone is not the only solution to developing a sustainable workforce.
- > **There were increases in overall programme capacity for most professions** – we worked with education providers to identify the challenges which needed more thought and attention to increase capacity across professions and nations / regions. Challenges included growing practice-based learning opportunities, education provider resources, and growing the pool of academic staff. Through our assessments, we were confident that education providers had grown programme capacity in a reasonable way, considering broader sector and external constraints.
- > **Education providers are responding to challenges with practice-based learning capacity** – we increasingly hear from sector stakeholders that practice-based learning capacity is being reached. Through our assessments, education providers were able to show us how they have secured capacity for additional learners, by driving forward innovations in practice-based learning, simulation in practice, and smart timetabling. Even considering innovations in practice-based learning, there is a finite pool of practice opportunities, which is a key challenge for the sector to consider moving forwards.

- > **Education providers routinely use data to inform decision making** – all education providers use data in some way to inform their operations, whether that be applicant and learner data to inform widening participation and learner support, financial data to plan, and / or other data sources and uses. However, there were problems with feedback fatigue, which impacted internal education provider feedback mechanisms (such as module feedback), and external mechanisms (such as the National Education and Training Survey).
- > **The COVID-19 pandemic had a significant and lasting impact on the delivery education and training** – the COVID-19 pandemic had a significant impact on education providers and learners, and responses to the pandemic were often used as a catalyst for positive and long-lasting change to approaches for education and practice-based learning. We saw good innovation in areas such as delivery of teaching, practice-learning environments, simulation, and learner support, which aligned with our standards.
- > **There are different approaches and challenges for higher education institutions (HEIs) and non-HEI education providers** – we approve programmes at HEIs and many other types of organisations. Due to the commonalities and supporting structures present for HEIs, non-HEIs often needed to work harder to meet our standards and show continued good performance.
- > **Education providers have aligned with our revised standards of proficiency (SOPs)** – our revised SOPs became effective in September 2023, and from this date education providers needed to deliver the revised SOPs to all new learners. The revised SOPs set out what is needed for safe and effective professional practice. All education providers assessed demonstrated alignment with the revised SOPs, and showed us how they reviewed their programmes to do this. This was pleasing to see, as it provides a tangible outcome of our review exercise, linked to our public protection duties.
- > **Good forward planning by education providers is required to ensure intended programme start dates can be met** – we found that education providers who do not run existing HCPC-approved programmes, and / or particularly innovative or complex programmes, led to longer assessments against our standards. Education providers should be aware of this, and ensure they plan regulatory engagement in good time to meet our standards by their intended start date.

## Considering future challenges

Further challenges lie ahead, particularly with:

- learner number expansions continuing at pace for many professions to meet the needs of the population; and
- diversification of education and training routes, including a marked increase in work-based routes.

We are playing our part in responding to challenges, ensuring we are working as far upstream as possible to understand what is happening in the health and care and education sectors. We will continue to share data and insights to help our stakeholders understand the current picture of education and training, and to help them understand our standards, to ensure public protection.

There is a lot of work that needs to be done by our stakeholders to meet future challenges, and we are confident that the education sector is well positioned to lead and enable developments, whilst maintaining high quality in education and training. We will continue to play our important regulatory role to ensure this is the case, take action to support education providers and others, and to prevent harm when our high regulatory standards are not met.





# Background information and context

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# Background information and context

## Summary of our education function

We set and maintain education standards and assess, approve, and monitor education providers and programmes against these standards. Our standards are outcome focused, to ensure those who complete programmes meet our requirements for registration – namely the profession specific standards of proficiency, and are able to meet our standards of conduct, performance and ethics.

We quality assure education providers and programmes which have the capacity to deliver 40,000 new registrants per year via our UK registration route. This role is a statutory function of the HCPC. We make decisions about the approval of education providers and programmes, then monitor them on an ongoing basis. All of this work is linked to our education standards.

We maintain a [list of approved programmes](#) which meet our standards. These programmes ensure those who complete programmes meet our requirements for registration.

## Summary of how we changed our education quality assurance approach

Prior to the launch of our current education quality assurance model, we approved and monitored education programmes in the same way for over 10 years. Our previous model was not explicitly risk based and adopted a one size fits all approach.

In 2020, we decided to pilot a new approach to education quality assurance. We reviewed the way we worked because much had changed since the adoption of our previous education quality assurance model, which was increasingly out of step with modern quality assurance practices. We intended to be a leader in this area, to deliver flexible, intelligent, data led, and risk-based quality assurance of education providers and programmes.

When piloting our new approach, we defined strategic objectives to be met before adoption. Following success through the pilot, we decided to fully implement our current model from September 2021, based on those strategic objectives being met<sup>1</sup>.

1. [This decision was made by our Education and Training Committee on 9 September 2021](#)

## Underpinning principles of the model

Our quality assurance model:

- achieves risk-based outcomes which are proportionate and consistent;
- operates efficient and flexible quality assurance processes; and
- uses a range of data and intelligence sources to inform decision making.

The following four principles underpin the way we work. We embedded these principles when we defined processes, and consider them when we undertake assessments through our work.

### **Institution / programme level**

**assessment** – We focus on the right areas at the right time, and avoid duplication and inconsistency. We do this by assessing at the institution where we can, which sets understanding and context for professional level assessments.

**Data and intelligence** – We are proactive, risk-based, and proportionate through our activities. We do this by embedding the use of data and intelligence from sector bodies, in our work, through key process points and to provide ‘triggers’ to act when needed.

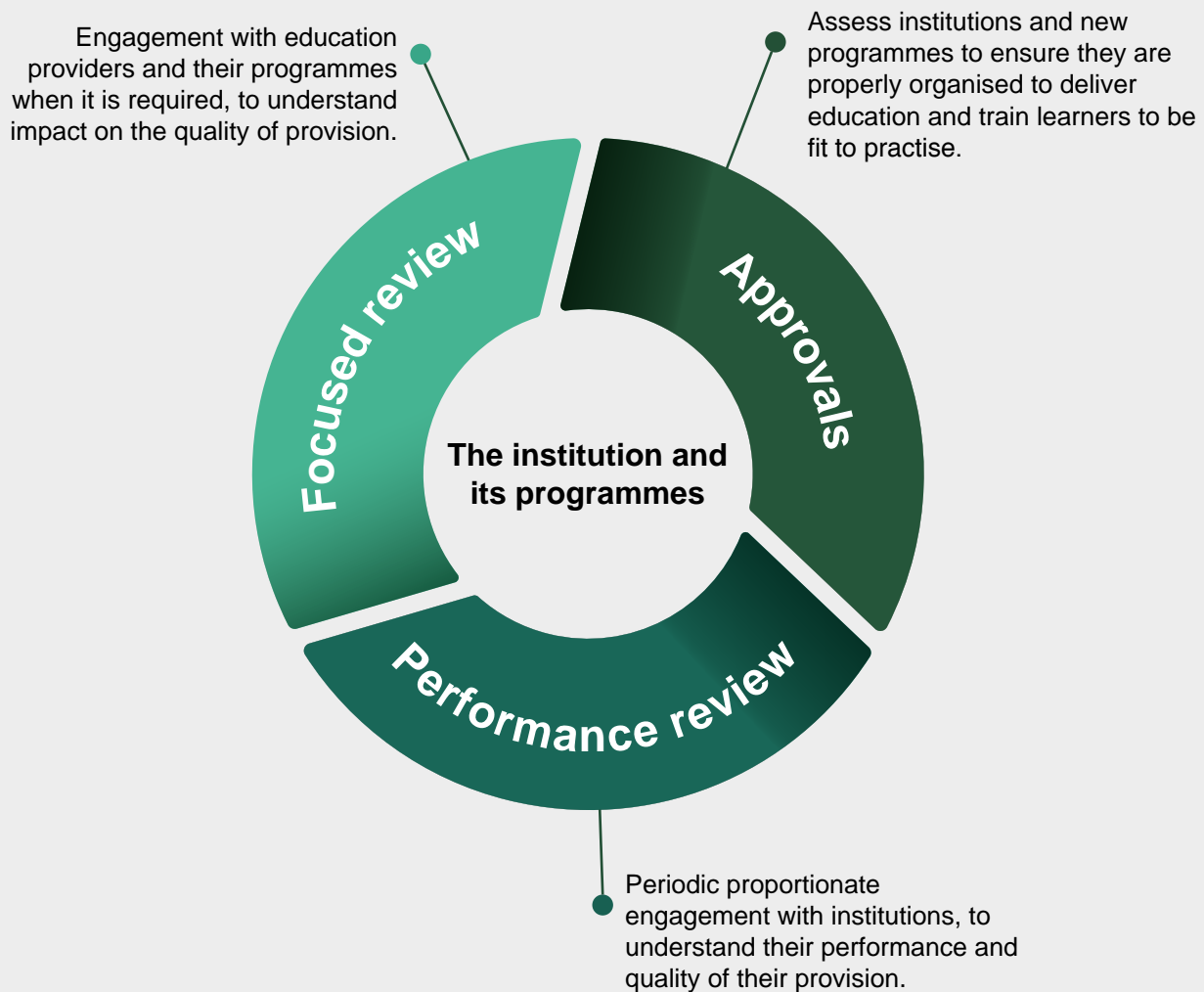
**Flexibility** – We apply ‘right touch regulation’ in the education quality assurance space, delivering flexibility in our activities, and focusing our attention on areas which require it. We do this by considering what we see, past interactions, and externally sourced data and intelligence to understand the ‘problem’ before jumping to the solution.

**Four nations / regional approach** – We inform our regulation and assessment with our understanding of national and regional context. We do this by building and sustaining positive working relationships with education providers and other national / regional stakeholders, understanding what is happening in the sector, and supporting others to understand our priorities.

We involve profession / modality specific partners in our assessments to make recommendations on outcomes to the Education and Training Committee (Panel), which has the final say on outcomes. We also involve a service user partner, to provide the service user view at appropriate points within assessments.

## How we deliver our intentions and statutory function

We have three main operational processes to quality assure education providers and programmes. Each of these processes enable us to consider alignment with our standards.



## Rollout and adoption of the model

From September 2021, the current model became affective for all approval assessments, and monitoring requirements changed for existing education providers. We undertook scale up activities from September to December 2021, with the model becoming fully operational from January 2022.

The model successfully scaled for full implementation in January 2022. Scale up included working with 141 education providers to establish key contacts across different levels, and planning when education providers would engage with our performance review monitoring activities across a three-year programme of assessment.

## Continuous improvement

The model does not stand still. Continuous improvement is embedded into the way we work, with internal structures in place to inform areas where we should improve. We have delivered larger scale reviews with our internal quality assurance team, which have resulted in recommendations for improvement, and we have acted on those recommendations. We also have mechanisms to capture stakeholder feedback, which has influenced many of the areas reported below.

Since rollout in September 2021, we have developed our model and the way we work in the following ways:

- ✓ developed existing and further guidance and templates to facilitate engagement and understanding;
- ✓ developed process report templates, and introduced clear guidance to deliver high quality reports;
- ✓ developed internal capability to identify 'exceptional' cases which are at risk of exceeding service levels;
- ✓ developed quality assurance measures including first line checks, to integrate monthly checks based on a series of clear metrics, to improve processes and the application of those processes;
- ✓ added a 'ceiling' of two years for first engagement with our performance review process, once education providers / programmes are approved through our approval process. This enables us to take a risk-based view on new education provider performance at an earlier stage than what was potentially possible (a five-year review period);
- ✓ refreshed our focused review process to ensure we are capturing granular concerns / triggers and making a documented decision whether to progress to a full investigation in all cases;
- ✓ updated our internal systems and introduced guidance to capture whether concerns raised to us are whistleblowing concerns;
- ✓ introduced a higher bar for accepting learner concerns, including a clear requirement that learners have exhausted internal concerns mechanisms before raising concerns to the regulator;
- ✓ documented our programme records change process through clear internal guidance, and added a governance step where there are records changes; and
- ✓ added a feedback mechanism on conclusion of assessments for education providers and partners, use feedback to improve processes, and report on feedback through governance structures so we have a clear measure of stakeholder experience.

# Findings on education provider engagement and alignment with our standards

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## Findings on education provider engagement and alignment with our standards

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Through the next three sections we present full analysis of our assessments undertaken in the last two academic years, to draw together common themes, approaches, and challenges. We are able to provide these insights based on the areas we ask education providers to demonstrate / reflect on through our work, and our detailed reporting of findings.

We are presenting this information to share learning about important findings from our assessments. We hope those in the education sector, and other stakeholders, are able to use these insights to help them in their work, and to help education providers engage with our assessments in the future.

We have provided detailed findings linked to:

- **the approval process** – how education providers have met our standards, and the challenges experienced, in appendix 1;
- **the performance review process** – how education providers have performed linking to continued alignment to our standards, and the challenges experienced, in appendix 2.

# Approving education providers and programmes

## Our approach to approval assessments

We assess education providers and new programmes to ensure they are properly organised to deliver education, and train learners to be safe, effective and fit to practise.

We focus on whether education providers and programmes meet our standards of education and training (SET). The SETs are outcome focused, to ensure those who complete programmes meet our standards of proficiency and standards of conduct, performance and ethics on completion of programmes. This means that we do not set specific 'inputs' such as the academic entry requirements for programmes, or the number of practice hours required. We instead ask education providers to justify why their programmes are set up in the way they are, and how their approaches enable them to meet our education standards.

We undertake two-stage assessments, firstly assessing the institution, and then the programme(s). Our education standards are packaged to enable this approach, with 31 standards set at the institution level, and 21 at the programme level. Where an education provider's new programme proposal aligns to existing HCPC-approved programmes, we do not ask education providers to evidence institution level standards through the assessment. We make this judgement by reviewing 'baseline' information established by the education provider, against initial information provided through their approval request.

We designed our assessments in this way to reduce burden for education providers, ensuring we consider the context and history of an education provider when deciding how to assess. We ran 64 approval assessments across the two years, and for 59 of these assessments, we made the judgement based on risk that we did not need to re-assess institution level standards through stage 1. When compared to our previous quality assurance model, this reduces the burden for education providers by about 60% whilst enabling proportionate assessment against our standards, as 60% of the standards sit at the institution level.



## Programmes considered

In the key statistics section, we have included a breakdown of new programmes considered in the two years, with analysis of the types of programmes and number of learners.

Programmes were proposed across three of the four UK nations, and for all professions except biomedical scientists, clinical scientists, and prosthetists / orthotists.

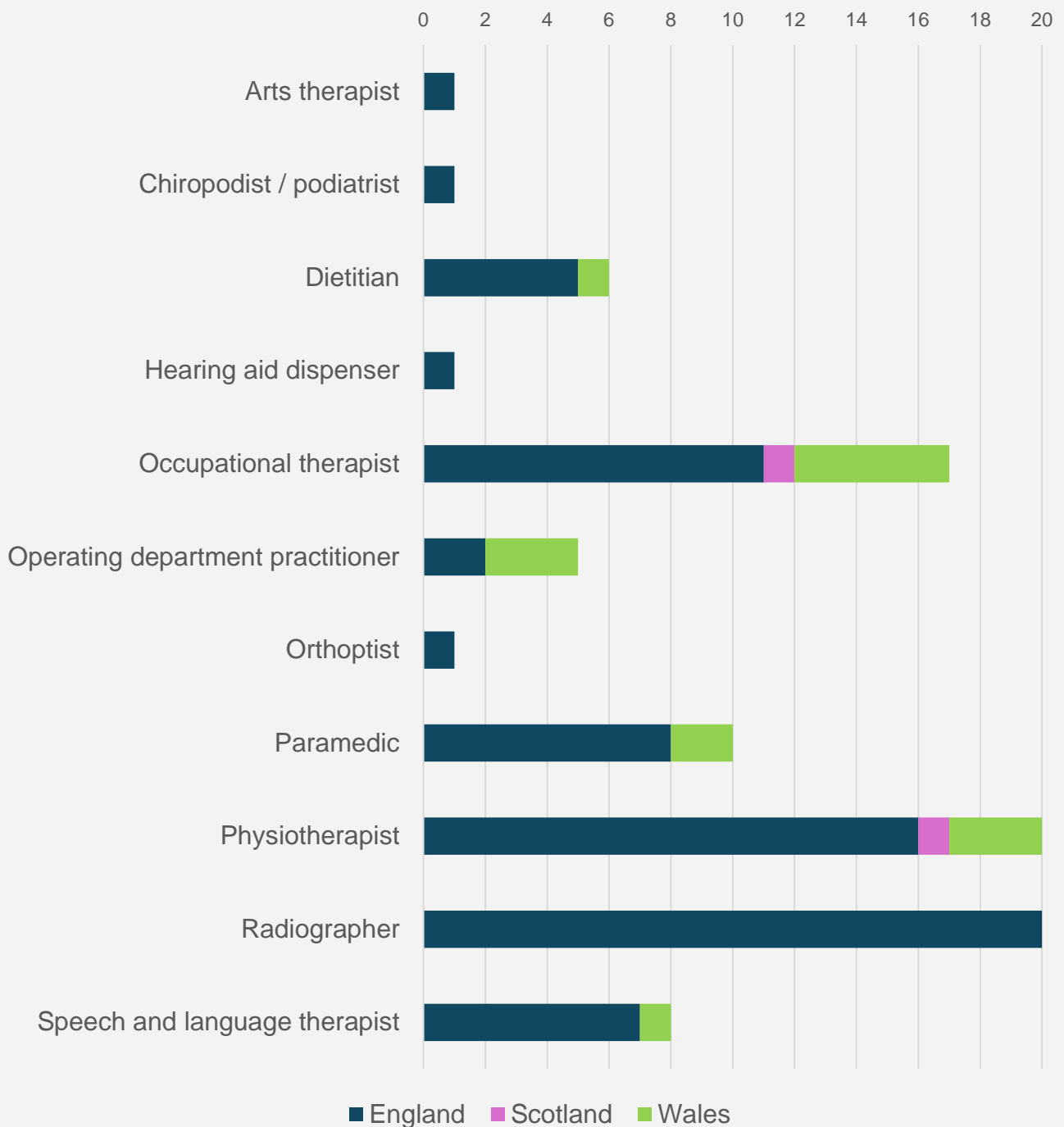


Figure 1 - Programmes considered in 2021-22 and 2022-23 academic years, by nation and profession

## Key findings

Broadly, the key challenge for the sector was growth in the total capacity of approved programmes, and the impact of this growth on practice-based learning, and education provider resources (including staffing). This was particularly prevalent in England, where most new programmes were developed. Even considering innovations in practice-based learning, there is a finite pool of practice opportunities. We increasingly hear from sector stakeholders, including NHS England's Workforce, Training and Education directorate, that capacity is being reached, but through our assessments, education providers were able to show us how they have secured capacity for additional learners.

Securing adequate staffing numbers can also be challenging. It takes time to grow and develop the academic staff workforce, and stakeholders have noted there are challenges with attracting potential staff into academia. Although there are efficiencies to be gained with developing staffing models, there is a tipping point where existing staff numbers are not able to support proposed learner numbers.

Through individual assessments, there were common themes where further development was required by education providers for us to take assurance that our standards were met. Education providers were able to address shortfalls in the following areas, through further development of proposals:

**Capacity of practice-based learning** – recognising challenges within the sector, we tested the intentions to ensure that all learners would be able to undertake practice-based learning to support delivery of learning outcomes.

**Collaboration with partner organisations to support delivery of programmes** – considering how education providers were actively collaborating with their partners, both at strategic and operational levels. Commonly, this area included ownership of policies and process (such as learner support), and formal arrangements to manage relationships.

**Education providers securing appropriate resources for proposed programmes** – this area included education provider resources (such as physical learning space, and resources to support learning) and staff resources (such as availability of teaching and support staff, and practice educators).

**Design and delivery of the curriculum** – this covered a wide range of areas from delivery of the standards of proficiency, to how curricula were designed to integrate theory and practice.

We have provided detailed findings linked to how education providers have met our standards, and the challenges experienced, in [appendix 1](#).

We aim to conclude assessments within a 6-9 month period of the initial application for approval. We found that more complex proposals led to a longer assessment period. Examples of more complex assessments were when:

- education providers did not already deliver HCPC-approved programmes (and therefore had a full submission and assessment through stage 1); or
- where proposals were particularly innovative or outside of established norms (such as non-alignment with the level of qualification for registration (SET 1)).

Education providers and others should be aware that complexity of assessment influences the time taken through the process, and that good forward planning is required to ensure intended start dates can be met.

## Quality activities, conditions and referrals

During approval assessments we sometimes need to explore in more detail whether or not a proposed programme meets our standards. These can be where there are gaps, or it can be to identify best practice that we can then share with the sector. We call these explorations ‘quality activities’. We can undertake a range of quality activities, from clarification via email and documentary submissions, to virtual or face to face meetings with various stakeholder groups.

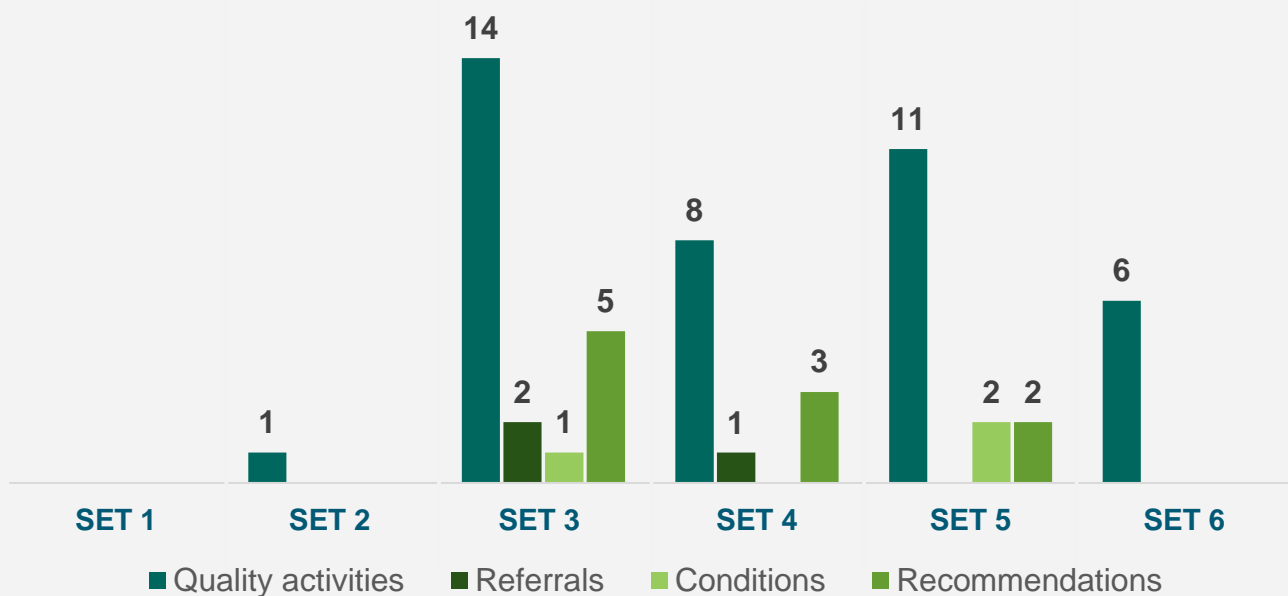


Figure 2 – Approval in 2021-22 and 2022-23 academic years - number of quality activities and referrals, by SET area

The main areas we explored through quality themes linked to the following areas of the standards of educations and training (SET):

**SET 3 – programme governance, management and leadership**

- collaboration with practice education partners
- availability and capacity of practice-based learning
- programme staffing and resources
- access to resources for staff and learners

**SET 4 – programme design and delivery**

- ongoing currency of the curriculum
- programme design, including alignment of the programme to our requirements for registration, and integration of theory and practice

**SET 5 – practice-based learning**

- availability and preparedness of practice educators
- structure, duration and range of practice-based learning, enabling support of delivering learning outcomes
- assessment of practice-based learning

**SET 6 – assessments**

- assessment design, to ensure learners meet the requirements for registration
- rules for progression through programmes

In most cases, we were confident with education provider approaches through exploration in quality activities. Where we were not, we set conditions (see below). In our previous education quality assurance model, we would often have set conditions on approval for these areas, especially when a further documentary submission was required. In the current model, we were able to work with providers further upstream to fix issues before needing to set formal requirements. This is a good demonstration of our ability to take regulatory action to ensure our standards are met through assessments.

## Conditions on approval

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

An explicit aim of our education quality assurance model is to identify and resolve issues as early in the process as possible, working with education providers to support their understanding of regulatory requirements and identify solutions. This engagement resulted in a significant drop in the number of conditions set through assessments, from 85% of assessments in the last year of running the previous education quality assurance model, to 2% across the two years of running the current model.

It is important to note that the same high regulatory standards are applied within our current model – this reduction was achieved by fixing problems further upstream, rather than setting formal requirements towards the end of the regulatory process.

The conditions set were case-specific and required to ensure education provider / programme alignment with our standards. Due to the small number of conditions set, there are no themes to note across conditions.

## Recommendations

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

Through future reviews, we refer to recommendations to consider if they have been addressed, although this is not mandatory due to the nature of recommendations.

We set 10 recommendations in the two-year period. Similarly to the conditions section, recommendations set were case specific. Due to the small number of recommendations set, there are no themes to note across recommendations.

## Referrals

In addition to conditions and recommendations, we can refer areas to other assessment processes where we consider there to be a risk that we need to pick up through future assessments. This might be a specific planned development of change, or us seeking reassurance that an education provider's approach works in practice.

Approval assessments consider whether education providers and programmes meet standards. Sometimes, there are areas which require follow up at a later time, such as a specific planned development or change, or us seeking reassurance that an education provider's approach has worked in practice. We capture information about these areas, and have tools which enable us to pick them up through future assessment processes.

We describe these as 'referrals'. When referring we are clear with what we will be looking for when we next review. This helps education providers to consider and plan continued alignment with our standards. When referring, we are confident that education providers meet our standards at this time, but we consider there is a specific area of risk that we need to consider through future assessment.

We referred three areas through the approval process to the next performance review process. As in the previous two sections, referrals were case specific. Due to the small number of referrals, there are no themes to note across referrals.

# Reviewing the performance of approved education providers and programmes

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## Our approach to performance review assessments

Through performance review assessments, we undertake periodic, proportionate engagement with education providers, to understand their performance, and quality of their provision. We seek to gain assurance about the education provider's continued alignment to our education standards. Through an assessment, we decide when we next need to engage with the education provider, and set a review period of between one and five years – this is based on risks and potential issues and when those might need exploring. We are also able to consider significant issues, and where education providers do not meet our standards, withdraw approval.

Education providers complete a portfolio covering a set of themes we consider are important to demonstrate ongoing quality of their education provision for the programmes we approve. These themes are linked to our standards, sector developments and initiatives which may affect the quality of education provision. Where available, we also ask education providers to reflect on performance data points linked to the numbers of learners, learner non-continuation, outcomes for those who complete programmes, and learner satisfaction. These data points give us metrics-based information about how education providers are performing linked to these areas (normally in comparison to a benchmark), and over time whether there are changes in that performance. We explore our use of data in assessments in more detail in later in this report.

The portfolio and data points enable us to form a risk-based view of education provider performance, and to identify and support education providers who may not be performing as they need to. Ultimately, we can trigger regulatory interventions if there are risks to learners not meeting our standards on programme completion. Education providers need to share challenges, how they have overcome them as well as successes, which enable us to fully inform our view on performance.

Compared to our previous education quality assurance model's monitoring processes, assessments through performance review are much more robust. Our previous education quality assurance model focused on change, therefore where education providers had not made changes, there was little for us to review. Assessments were also at programme level, which meant institution-wide changes were not always reported or picked up when undertaking modular programme level assessments at the same education provider. This risked under-reporting of challenges and successes, and inconsistency in assessments, giving a partial view of quality.

## Key findings

We assessed 93 of the 138 HCPC-approved education providers via performance review in the two years assessed, which gives us a good indication of how HCPC-approved education providers are performing across the board<sup>2</sup>. We identified common themes across assessments, linked to developments and how the sector has responded to challenges.

- > **Quality assurance focus** – education providers were transparent throughout the process, openly discussing the problems and challenges they had identified, and what they were doing to resolve such issues. This showed a strong quality assurance and continuous improvement mindset, which is integral to quality assurance and enhancement. Consideration of the quality of programmes was also seen as integral to change and innovation. Education providers with strong centrally managed policies, and common approaches across their provision, were more easily able to reflect as an institution against the thematic portfolio areas.
- > **Recognising and understanding challenges** – the sector is outward facing, and aware of challenges from within and outside of the sector, such as the cost of living, industrial action, emerging technology, and an aging population. Challenges that directly or indirectly affect delivery of programmes were often well thought through, and flexibly considered in line with established standards and frameworks (such as our education standards). Obligations to external organisations (such as other regulators and professional bodies) are also a key consideration for education providers.
- > **Types of education providers and UK nations** – there was a clear split between the approach of higher education institutions (HEIs) and non-HEI education providers. HEIs normally have clear, well utilised, structures (normally with a level of commonality across education providers), and non-HEIs lack similar structures, or have less ridged structures, with less commonality across education providers. HEIs also have external mechanisms, frameworks, and standards to adhere to, and non-HEIs may not as standard. This meant non-HEIs often needed to work harder to show good performance. There are also differences in influencers and approaches within the UK nations, with education, health and social care being devolved matters across the UK.
- > **Partnership working** – strong partnerships are integral to sustainability and quality of programmes. Good partnership working is best underpinned by formal arrangements which clearly defined objectives, expectations, and responsibilities, which are supported by formal engagement procedures.

2. Welsh Higher Education Institutions (HEIs) were not included in either of the two years reviewed, due to our decision to review all Welsh HEIs in the third year of our review programme (the 2023-24 academic year). We made this decision as all Welsh allied health professional training was recommissioned, and we reviewed provision in the 2021-22 academic year through the approval or focused review process.



- > **Programme capacity** – education providers considered growth in overall capacity of programmes, and the impact of this growth on practice-based learning, and education provider resources (including staffing). This links to the challenge noted in the approval section, and similar challenges were faced for existing education providers. Through performance review assessments, we were able to consider how education provider intentions worked in practice, and could identify where there were challenges which needed more thought and attention from education providers. From our assessments, we were confident that education providers were growing their capacity in a reasonable way, considering the broader sector and external constraints, such as the capacity of practice-based learning.
- > **Education provider use of data** – all education providers use data in some way to inform their operations, whether that be learner data to inform learner support, financial data to plan, or other data sources and uses. However, linked to this area, there were problems with feedback fatigue, which impacted internal education provider feedback mechanisms (such as module feedback), and external mechanisms (such as the National Education and Training Survey).
- > **COVID-19** – the COVID pandemic was both a challenge to manage, and a catalyst for change and innovation. This theme cut across many of the portfolio areas, and we saw innovation in areas such as delivery of teaching, practice-learning environments, simulation, and learner support.
- > **Alignment with our revised standards of proficiency** – all relevant education providers demonstrated alignment with the revised standards of proficiency (SOPs) through reflections on thematic changes to the standards, and showed us how they reviewed their programmes to align with them from September 2023. This only applied to education providers assessed in the 2022-23 academic year, when we added this requirement to portfolios. We will continue to monitor education provider adherence to the revised SOPs through future performance review assessments.
- > **Shortfalls in education provider approaches** – in some areas, such as interprofessional education and service user and carer involvement, some education providers were less developed than we would expect. We picked up specifics through assessments, and from these assessments are confident all education providers meet standards in these areas.

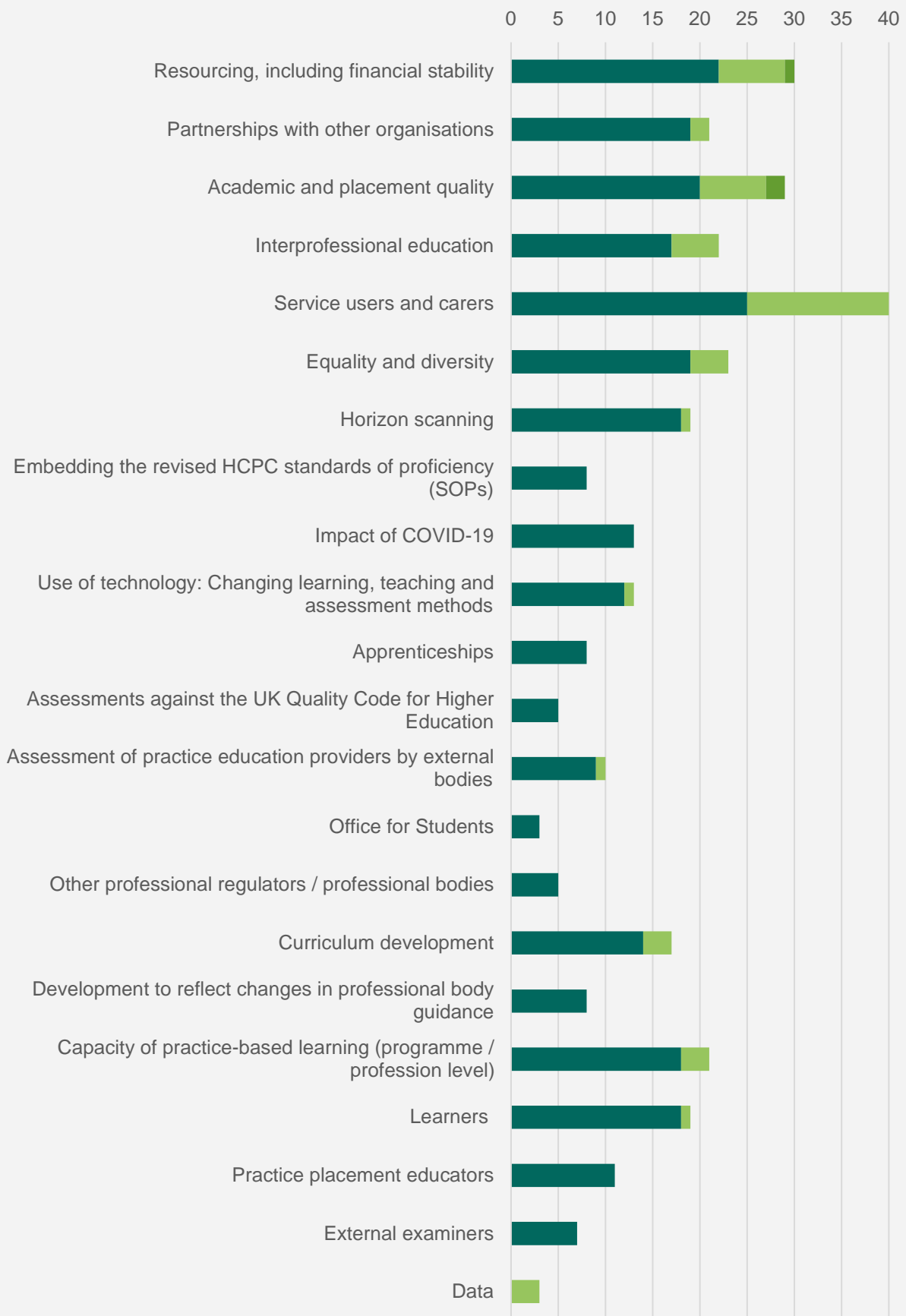
We have provided detailed findings linked to how education providers have performed linking to continued alignment to our standards, and the challenges experienced, in [appendix 2](#).

## Quality activities and referrals

During performance review assessments, we sometimes need to explore areas in more detail to consider education provider performance. These can be where there are gaps, or it can be to identify best practice that we can then share with the sector. We call these explorations 'quality activities'. We can undertake a range of quality activities, from clarification via email and documentary submissions, to virtual or face-to-face meetings with various stakeholder groups.

Performance reviews consider the performance of the education provider within a set review period. When concluding assessments, we make a judgement about when the next performance review assessment will take place (a one to five year period). Sometimes, there are areas which require follow up at a later time, such as a specific planned development or change, or us seeking reassurance that an education provider's approach works in practice. We capture information about these areas, and have tools which enable us to pick them up through future assessment processes. We describe these as 'referrals', and we are clear when referring with what we will be looking for when we next review. This helps education providers to consider and plan continued alignment with our standards. When referring, we are confident that education providers continue to align with our standards at this time, but we consider there is a specific area of risk that we need to consider through future assessment.

The following chart presents the number of quality themes and referrals linked to each portfolio area, and is provided to summarise the areas where there were the most areas that we needed to explore further with education providers through our assessments.



*Figure 3 - Performance review in 2021-22 and 2022-23 academic years - number of quality activities and referrals by portfolio area*

■ Quality activities  
■ Referrals to next performance review  
■ Referrals to focused review

The areas most often referred to other processes were:

- service user and carer involvement in education programmes (15 referrals) – we require that service users and carers are involved in programmes in some way, and usually referred this area when involvement was under development or changing;
- academic and placement quality (nine referrals) – we require that education providers have mechanisms to ensure the quality of academic and practice-based learning, and usually referred this area when there were concerns in these areas, or if changes were recently made;
- resourcing, including financial stability (eight referrals) – we require that programmes are sustainable and fit for purpose, to enable all learners on programmes to complete their education and training, and usually referred this area when there were changes in resource modelling or increases in learner numbers; and
- interprofessional education (five referrals) – we require that learners are able to learn with, and from, learners and professional in other relevant professions, and normally referred this area when approaches were under developed or changing.
- referrals in these cases usually enabled us to set requirements for education providers to ensure they developed as needed in specific areas, consider how successful changes have been, and how initiatives have worked in practice.

## Assessment outcomes – review periods

When defining the review period of between one and five years, we consider the following:

- stakeholder engagement – how the education provider engages with their stakeholders with quality assurance and enhancement in mind;
- external input into quality assurance and enhancement – how the education provider engages with professional bodies, and other relevant organisations, and how they consider sector and professional development in a structured way;
- data supply – whether data for the education provider is available through external sources, or if they have established a regular data supply;
- what data is telling us, and how the education provider considers data in their quality assurance processes;
- if there are any specific development(s) or risk(s) that will impact at a specific time.

In 2022-23, we set a two-year review period for a lower number of education providers when compared to 2021-22. This is likely linked to the prioritisation exercise that we undertook when implementing the current education quality assurance model.

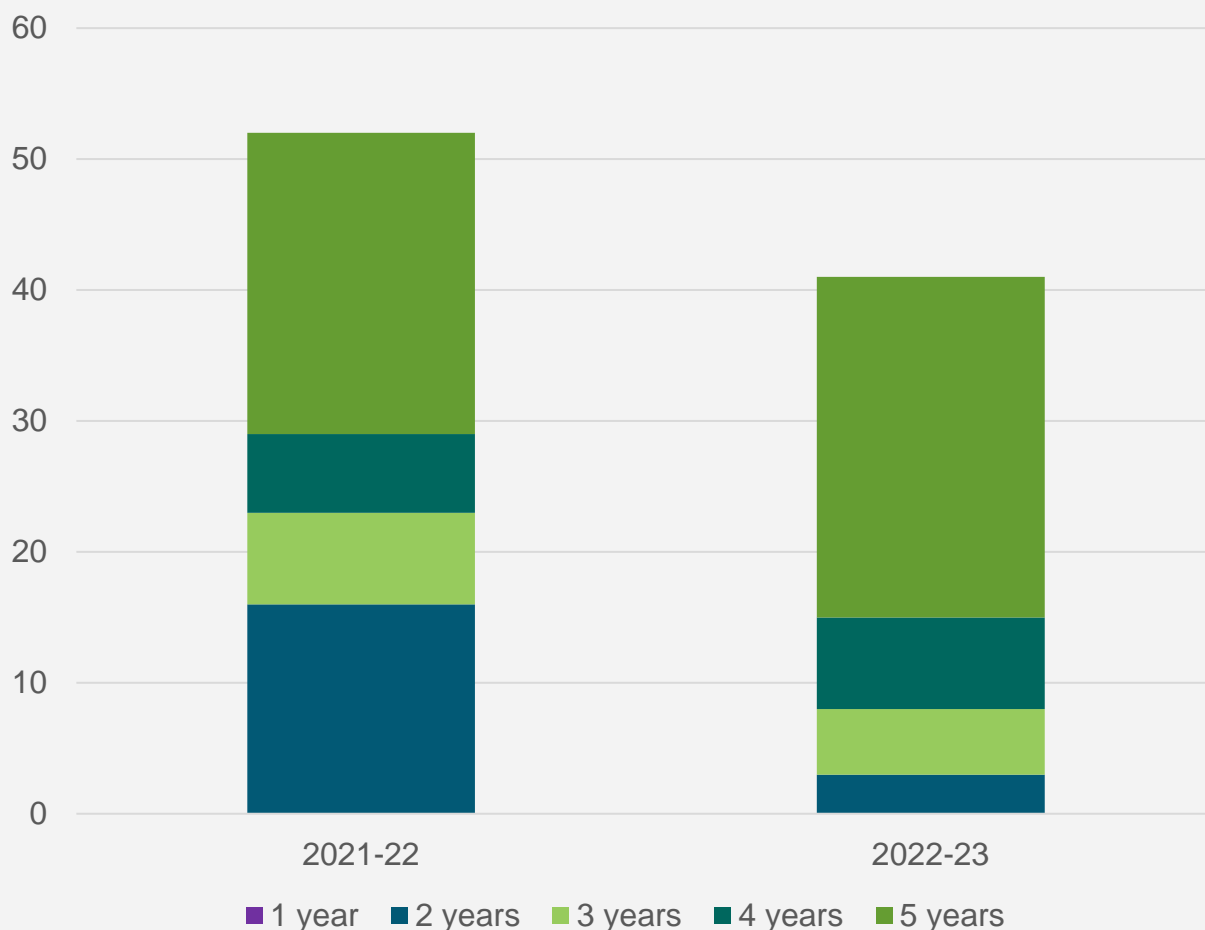


Figure 4 - Performance review assessment review period decisions - by academic year

When adopting the model, we decided to assess all education providers against our performance review requirements across a three-year programme of assessment. This period was chosen to balance relative risk (see below for an explainer of how we considered risk), and to deliver assessments within our team resources.

We prioritised education providers based on a number of factors, to consider where there could be higher risks to assessing education providers later in the programme. These factors were:

- The total number of learners;
- When the last HCPC annual monitoring audit was undertaken through our previous education quality assurance model;
- The number of available externally sourced data points<sup>3</sup>; and
- HCPC 'performance score'<sup>4</sup>.

3. We use several external data supplies to consider education provider performance. Further information about our approach to data, including the 'ceiling' for review periods when data is not available, is included in the data and intelligence section of this report.

4. We produce an overall performance score for each education provider, based on externally and internally available data metrics. We only use this score internally to inform high level resourcing decisions, as we decided that external use of this score was reductive, hiding nuances which could be drawn out through full data and education provider / programme assessment.

We included education providers who did not appear in externally sourced data returns in the first year of our reviews. Through assessments in 2021-22, the main reason for giving two-year review periods was that education providers were not included in external data returns, and that they did not establish direct data returns through assessments.

For education providers included in external data returns, review periods were set at 5 years for 60% of education providers. We set this review period when:

- The education provider was high performing, from a data, intelligence and based on the findings from our review;
- Any immediate issues raised through assessments were dealt with by the education provider; and
- Any remaining issues did not need to be addressed before a five-year review period.

Reasons for setting shorter review periods were normally due to:

- A significant change planned by the education provider which might impact on a range of our standards, which we considered needs reviewing along a shortened period to ensure any risks associated with changes were properly managed; and / or
- Low data scores, to ensure actions defined by education providers were progressed to manage risks.

## Concerns and issues

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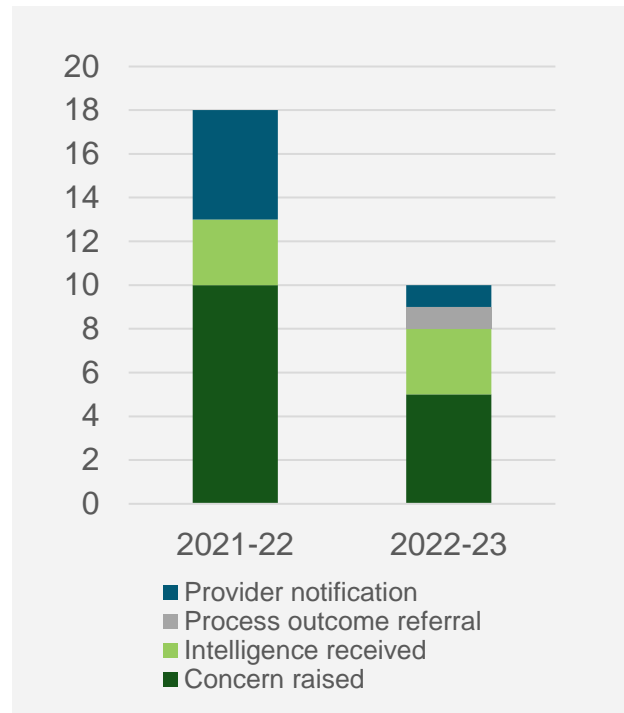
We listen to concerns and issues raised to us by external parties, and are able to identify potential issues and concerns ourselves from the data and intelligence we receive. We consider concerns that might impact how our standards of education and training (SETs) are met, which in turn may affect learners meeting our requirements for registration.

In these situations, we undertake 'focused review' assessments, which are focused on the specific concerns raised and whether they could impact on our standards. Through these assessments, we consider the concern itself, ask the education provider for a written response, and will follow up any areas required through quality activities. We will then come to a judgement about whether any further action is required, which can include us setting specific regulatory requirements, or in cases where our standards are no longer met by education providers or programmes, withdraw approval.

## Statistics on process application

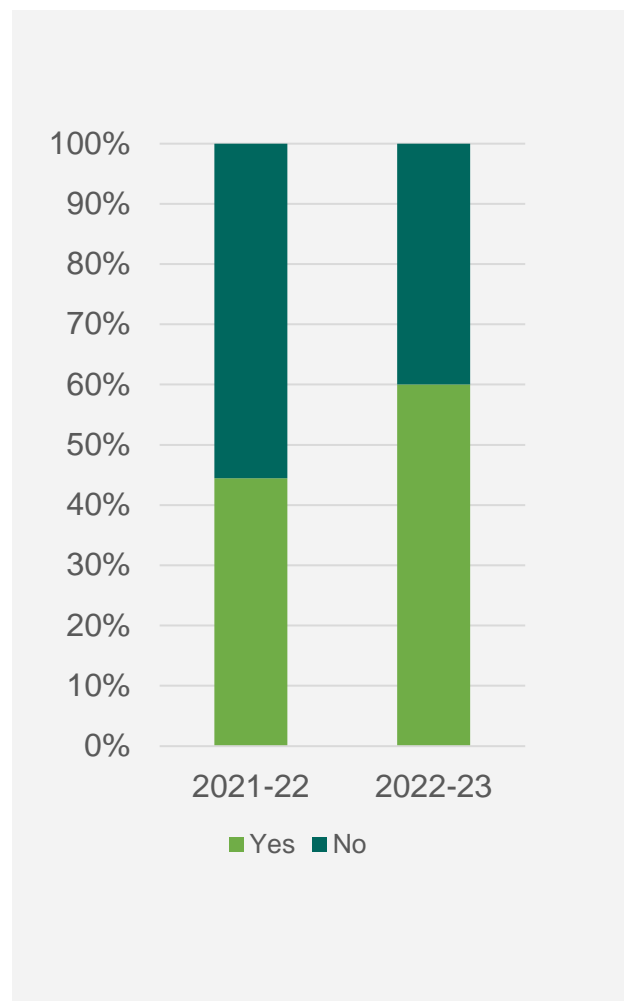
### Source of process trigger

- We trigger focused review assessments from a range of sources, including referrals from our own assessments.
- Most triggers were from concerns raised directly to us – normally these concerns were from learners.
- We require that learners have exhausted internal concerns processes before referring to us, but did not always apply this expectation in the two academic years reviewed.
- As noted in the continuous improvement section, we have established new acceptance criteria for learner concerns, which we have applied from September 2023.



### Triage decision – full review required

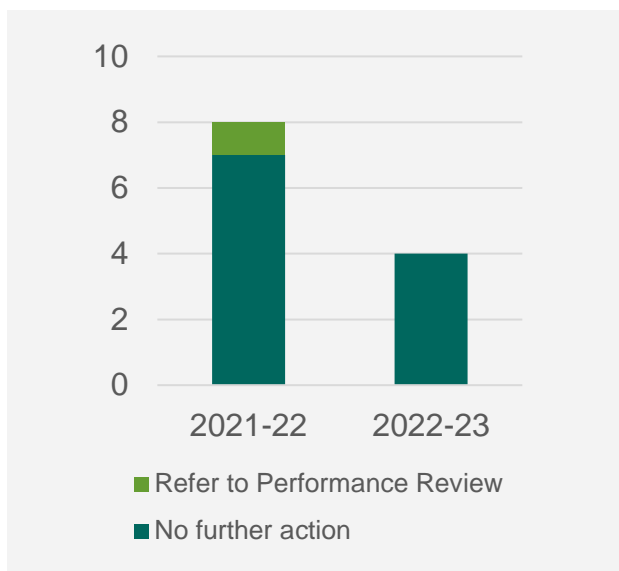
- When an assessment is triggered, we undertake a triage decision against our standards of acceptance.
- We aim to ensure that our resources are used well, to investigate areas that might impact on our standards being met by education providers and / or programmes.
- We fully investigated about half of the concerns raised to us. We referred the other half back to the person who raised the concern, so they could give the education provider the opportunity to take action locally, or because concerns were outside of our remit. We are confident that education providers have process in place to consider and address concerns, as they align with our standards.
- We investigated one third of referrals from education providers, meaning most referrals did not need to be addressed at the time they were raised. In these cases, we asked that education providers included reflection in their next performance review submission.





## Review outcomes

- We decided to take no further action for all but one full review, which was referred to the education provider's next performance review assessment.
- This did not mean there was nothing to investigate in most cases – rather, we took assurance from education provider responses through assessments that action already taken by the provider had addressed the issue / potential issue.



## Themes

Often concerns raised were highly specific to the individual who raised them (rather than a systemic concern). We have picked out four common themes from triggers in the two academic years considered:

- education provider not following (or perceived to not follow) their own policies or process in specific circumstances;
- allegations by individual learners of discrimination, bullying, and harassment;
- problems with programme delivery, including staff resourcing; or
- quality of practice-based learning, including poor supervision and lack of opportunities to gain competence.

We also considered referrals from the Fitness to Practise team, when an individual involved in an education and training programme was referred through fitness to practise. This enabled us to consider whether there might be impact on our standards of education and training being met, and to ask questions of education providers where required.

# Data and intelligence

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# Data and intelligence

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## Our approach to the use of education provider performance data

In our previous education quality assurance model, we did not routinely use structured data (internal / external) or intelligence from other organisations in our decision making. One of the pillars of our current quality assurance model is using data and intelligence to inform our regulatory decision making.

### Using data and intelligence allows us to be:

- proactive – where data and intelligence identifies risks, we can trigger some form of engagement with education providers;
- risk-based – have an evidence-based understand of risks for education providers; and
- proportionate – use risk profiling to undertake bespoke and right touch regulatory interventions.

### Our approach functions as follows:

- we proactively source a range of key data points, which cover most HCPC-approved education providers;
- where data points are not available, education providers can establish a regular supply of these data points (see the section below for further exploration of this area);
- we use data when assessing education providers or programmes through approvals, focused review, and performance review;
- within these assessments, data is not used as the final word, but as part of a quality picture – we ask education providers to consider and reflect on data points in their submissions;
- we supply this information to our professional expert partners, with contextual information such as benchmarks, to help inform their assessment, including any specific areas from data which we need to follow up through quality activities; and
- outside of assessments, when data points change, we can trigger interventions with education providers where we consider it necessary to inform our view of the quality of an education provider's provision.

We use the following data areas to consider education provider performance:

- Numbers of learners
- Learner non continuation
- Outcomes for those who complete programmes
- Learner satisfaction

The use of education provider performance data has added value to our assessments. We set up education providers to reflect on data points, and our partners to consider data through their assessment, including comparison to benchmarks and trend analysis for each data point. Data helps us to explore specific areas with education providers through our quality activities in our assessments, and to take assurance where performance data metrics are at or above benchmarks.

## Education providers not included in external data supplies

Where risk assessment allows, we will lengthen the period between performance review engagements up to a maximum of 5 years. To remain confident with education provider performance, we rely on a regular supply of data and intelligence to help us understand education provider performance outside of the periods where we directly engage with them.

We recognise that not all HCPC-approved education providers are included in external data returns the HCPC has established, linked to the normative areas noted above. Where a regular supply of data points has not been established, the maximum length of time we will allow between performance review engagements is two years. This is so we can continue to understand risks in an ongoing way when data is not available.

We discussed education providers developing regular data reporting to HCPC in the detailed findings in appendix 2.

## Engagement with other bodies

We have become a more active partner in the sector in the two-year period, with the aim to understand the sector to contextualise our assessments. We have established a professional body / HCPC education forum group to share information to support and assure high quality education and training in the HCPC-regulated professions. 21 professional bodies are members of this group, and we have good attendance at regular meetings, with a standard agenda that covers developments and challenges facing education provision for the professions we regulate.

We have shared and received information with professional bodies and commissioning organisations, which has informed our assessments. Normally, this enables us to contextualise assessments (for example, where a body provides information about shortages of practice-based learning in a nation or region), and ensure we are evidence informed to the situation when making judgements against our standards. We have

established formal information sharing arrangements with two professional bodies, and are working with several others, to enable more structured and consistent information sharing through our assessments.

## Year in registration survey

We run a yearly survey to seek the views of those who have been HCPC-registered for a year. This survey focuses on respondents' education and training programme, how this prepared them to practice, and their first year in employment. We integrate insight from results into our education quality assurance activities, and inform focus areas for our Policy and Standards, and Professionalism and Upstream Regulation teams. For example, we used findings linked to interprofessional education and service user involvement in the academic setting to inform the questions we asked of education providers through their performance review portfolio submissions.

We most recently undertook this exercise in the summer of 2023. Over 1,200 individuals responded to this survey, across all professions and nations / regions.

We ask a set of questions focused on:

- preparation for practice;
- the quality of the education and training undertaken, focused on interprofessional education, programme and staff interactions, academic learning, practice-based learning, and service users involvement in the delivery of education; and
- preceptorship and in-employment support, focused on availability, length, and quality.

In the most recent survey, 'agree' responses significantly outweighed 'disagree' responses for all questions, which is a positive finding. Results for education and training preparing learners for practice were particularly positive, with 8 per cent or less of respondents disagreeing with each statement.

Across the last three years, too many respondents noted they had no interprofessional education within their academic learning (which links to SET 4.9), and that service user involvement was not visible / embedded within their programmes (linking to SET 3.7). We have developed our ask through performance review portfolios in line with these responses, and this links to the problems reported in the performance review section of this report, meaning there is still work to be done on these two areas with education providers.

Respondents were overwhelmingly likely to recommend their programme to a friend or family member, and for all three years the words 'supportive' and 'challenging' were the most used words to describe programmes.

# Future areas of focus

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## Future areas of focus

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The following areas are influencing our work in the 2023-24 academic year and beyond. We have picked these areas out through this report as they are important areas that the sector are or will be considering, which will impact on programme design and delivery. We are embedding these areas into our requirements of education providers, and will be able to consider how the sector has performed linked to these areas in future reports.

### Workforce expansion

- NHS England has developed a Long-Term Workforce Plan<sup>5</sup>, which includes a key aim to increase learner numbers for allied health professional training programmes across the term of the plan (to 2031). This includes expansion of apprenticeship routes.
- the Scottish Government has agreed a series of recommendations<sup>6</sup> defined by their ‘Allied Health Professions – education and workforce policy review’ working group. This includes the introduction of ‘earn and learn’ routes.
- in Northern Ireland, there is an established Health and Social Care Workforce Strategy 2026, which is currently in the delivery phase<sup>7</sup>. Within the strategy, there is recognition of the role that AHPs play in health and social care, and commitments to expand numbers in the AHP workforce.
- Health Education Improvement Wales (HEIW) have delivered a Strategic Workforce Plan for Primary Care, which is due for launch in Spring 2024<sup>8</sup>. This plan includes consideration of the AHP workforce, which will impact on education provision in Wales.
- for these initiatives, we expect challenges with:
  - practice-based learning capacity, which will require education providers and practice partners to think innovatively about practice-based learning; and
  - education provider resources needing to increase, including the number of academic staff – there is not a simple fix to this challenge, as it takes time and effort to ‘grow’ the academic workforce.
- our standards should not be seen as a blocker to innovation – due to the outcome focused nature of the standards, innovative approaches can be developed which align to them.
- our regulatory role needs to be properly considered by the sector, both with approving

[5. NHS England » NHS Long Term Workforce Plan](#)

[6. Allied Health Professions - education and workforce policy review: recommendations - gov.scot \(www.gov.scot\)](#)

[7. Health and Social Care Workforce Strategy 2026 | Department of Health \(health-ni.gov.uk\)](#)

[8. Strategic Workforce Plan for Primary Care - HEIW \(nhs.wales\)](#)

new programmes and expanding existing provision. We are clear that quality needs to remain high – ultimately, we play a gate keeper role, and will continue to ensure education providers and programmes meet our standards – we will not approve programmes / withdraw programme approval where our standards are not met.

- We will ensure the sector recognises and understands our regulatory role, by producing guidance and information linked to this area, and engaging with the sector to ensure this information is understood.
- We will be a good data and insight partner– we hold unique data about learners and registrants which can be used by the sector to understand the current picture, when developing provision in line with workforce expansion plans.

## Final year of performance review assessments

- In the 2023-24 academic year, we will assess all remaining education providers against the requirements of our quality assurance model.
- This will enable us to have a full picture of education within the UK for our professions.
- It will also enable us and remaining education providers to understand what the next steps for engagement will be, which will help us and our stakeholders plan our work and interactions.

## Implementation of our standards of conduct, performance and ethics

- We have revised our standards of conduct, performance and ethics and accompanying guidance on social media.
- These standards set out how we expect our registrants to behave and let the public know what to expect from their health and care professional.
- Education providers need to deliver the revised standards from September 2024.
- We will review education provider approaches to integrating the revised standards through performance review assessments from the 2024-25 academic year.

## Review of our standards of education and training

- We have commenced planning for our review of the SETs, and will begin work to review these standards in the 2024-25 financial year.
- We will consider how the education sector has changed since the SETs were last reviewed, and will ensure these standards enable us to undertake our public protection remit with developments in the sector in this time.
- We will also ensure these standards are future-proofed so they are usable for quality assuring all education provision that might be proposed.



# Key statistics on education and training for HCPC professions

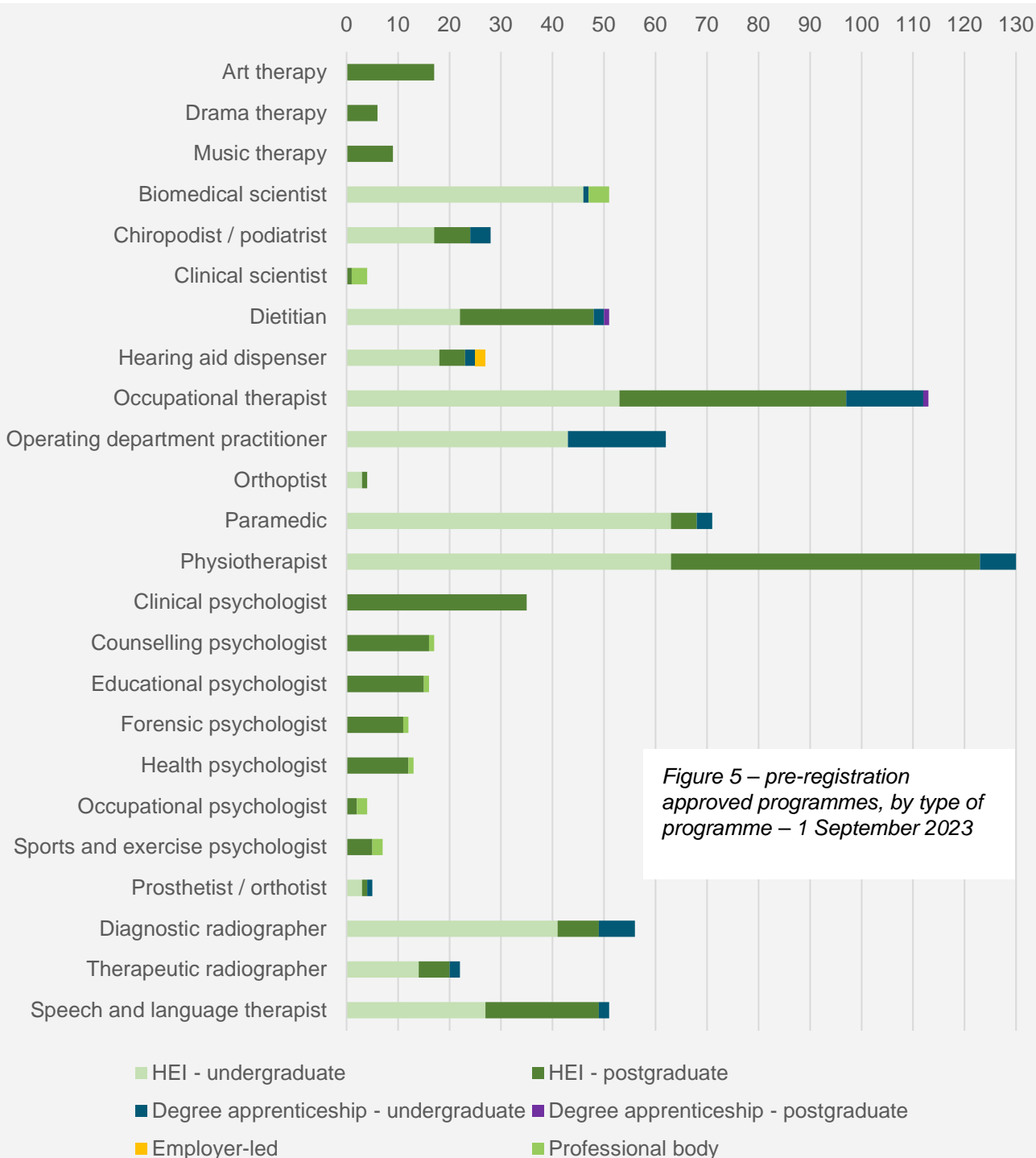
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# Key statistics on education and training for HCPC professions

We have provided key statistics as a summary of the picture of education and training for the professions we regulate, and how that picture is changing.

## Number of approved pre-registration programmes



We have seen growth in the overall number of programmes in the two-year period by a total of 88 programmes (11% growth overall). Some professions have grown more significantly:

- Diagnostic radiographer – 29% growth (16 additional programmes)
- Orthoptist – 25% growth (however due to small numbers this was only one additional programme)
- Therapeutic radiographer – 18% growth (four additional programmes)
- Speech and language therapist – 16% growth (eight additional programmes)
- Occupational therapist – 15% growth (17 additional programmes)
- Physiotherapist – 15% growth (20 additional programmes)
- Dietitian – 12% growth (six additional programmes)
- Paramedic – 11% growth (eight additional programmes)

There were smaller percentage increases for art therapist, chiropodist / podiatrist, hearing aid dispenser, and operating department practice programmes. Programme numbers for the remaining professions / modalities did not grow.

Growth in programme numbers often did not translate to the same percentage level of growth for the capacity of learner numbers. For all professions except art therapists, there was a lower level of growth for the capacity of programmes. This shows that newer programmes are developed at a smaller scale than existing programmes.

There is a shift in the profile of professions, with a higher percentage of degree apprenticeship programmes being developed than baseline percentages for the professions. This is linked with the apprenticeship initiative in England, and we expect to see the shift to more apprenticeship provision continue to be developed as part of the sector's response to the NHS long term workforce plan (in England).

We have presented a comparison of numbers of programmes and learner capacity for all professions / modalities in table below. This is to show how increases in the number of approved programmes links to increases in the overall learner capacity for each profession and modality, which can be used by stakeholders to understand how new provision being developed contributes to capacity.

Programme type	Approved programmes (1 September 2023)					Learner number capacity <sup>9</sup>	New programmes (approved in 2021-22 and 2022-23 academic years)						
	HEI	DA	% DA	Other	Total		HEI	DA	% DA	Other	Total	Growth %	Growth in learner number capacity
Arts therapist	32	0	0%	0	32	877	0	1	100%	0	1	3%	5%
<i>Art therapy</i>	17	0	0%	0	17	571	0	1	100%	0	1	6%	7%
<i>Drama therapy</i>	6	0	0%	0	6	134	0	0	NA	0	0	0%	0%
<i>Music therapy</i>	9	0	0%	0	9	172	0	0	NA	0	0	0%	0%
Biomedical scientist	46	1	2%	4	51	2772	0	0	NA	0	0	0%	0%
Chiropodist / podiatrist	24	4	14%	0	28	1139	1	0	0%	0	1	4%	3%
Clinical scientist	1	0	0%	3	4	970	0	0	NA	0	0	0%	0%
Dietitian	48	3	6%	0	51	1744	4	2	33%	0	6	12%	8%
Hearing aid dispenser	23	2	7%	2	27	982	1	0	0%	0	1	4%	2%
Occupational therapist	97	16	14%	0	113	6049	13	4	24%	0	17	15%	7%
Operating department practitioner	43	19	31%	0	62	2444	3	2	40%	0	5	8%	5%
Orthoptist	4	0	0%	0	4	256	1	0	0%	0	1	25%	8%
Paramedic	68	3	4%	0	71	6809	4	4	50%	0	8	11%	4%
Physiotherapist	123	7	5%	0	130	8097	15	5	25%	0	20	15%	9%

9. Learner number capacity is the maximum yearly capacity we have approved programmes to deliver. These figures were defined by education providers through our approval assessments, and we audit these numbers when education providers engage with us through performance review. They are not the number of learners that will admit to programmes each year, and this data should be read cautiously when understanding capacity.

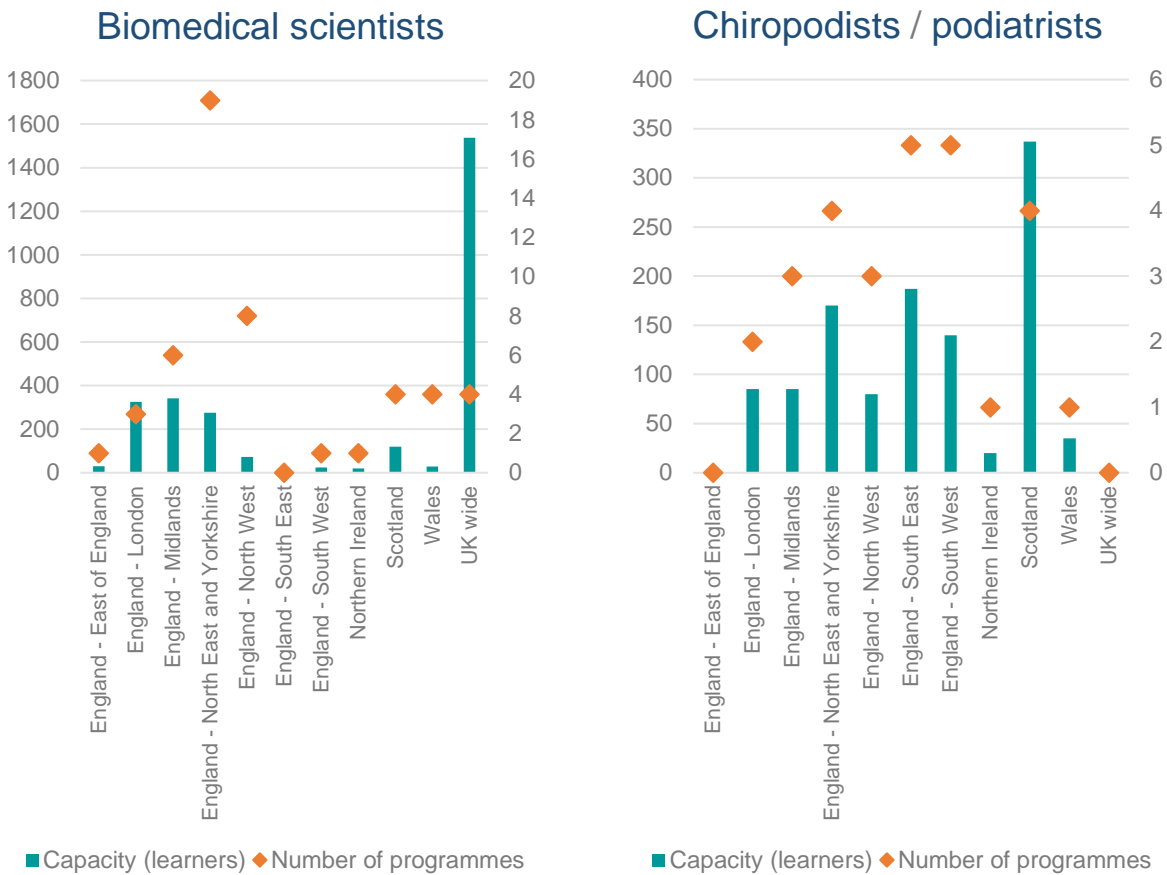
Programme type	Approved programmes (1 September 2023)					Learner number capacity <sup>9</sup>	New programmes (approved in 2021- 22 and 2022-23 academic years)						
	HEI	DA	% DA	Other	Total		HEI	DA	% DA	Other	Total	Growth %	Growth in learner number capacity
Practitioner psychologist	97	0	0%	8	105	3595	0	0	NA	0	0	0%	0%
<i>Clinical psychologist</i>	35	0	0%	0	35	1410	0	0	NA	0	0	0%	0%
<i>Counselling psychologist</i>	16	0	0%	1	17	611	0	0	NA	0	0	0%	0%
<i>Educational psychologist</i>	15	0	0%	1	16	397	0	0	NA	0	0	0%	0%
<i>Forensic psychologist</i>	11	0	0%	1	12	493	0	0	NA	0	0	0%	0%
<i>Health psychologist</i>	12	0	0%	1	13	219	0	0	NA	0	0	0%	0%
<i>Occupational psychologist</i>	2	0	0%	2	4	243	0	0	NA	0	0	0%	0%
<i>Sports and exercise psychologist</i>	5	0	0%	2	7	204	0	0	NA	0	0	0%	0%
Prosthetist / orthotist	4	1	20%	0	5	140	0	0	NA	0	0	0%	0%
Radiographer	69	9	12%	0	78	5000	14	6	30%	0	20	26%	9%
<i>Diagnostic radiographer</i>	49	7	13%	0	56	4108	12	4	25%	0	16	29%	9%
<i>Therapeutic radiographer</i>	20	2	9%	0	22	892	2	2	50%	0	4	18%	6%
Speech and language therapist	49	2	4%	0	51	2638	5	3	38%	0	8	16%	8%
<b>Total</b>	<b>728</b>	<b>67</b>	<b>8%</b>	<b>17</b>	<b>812</b>	<b>43512</b>	<b>61</b>	<b>27</b>	<b>31%</b>	<b>0</b>	<b>88</b>	<b>11%</b>	<b>6%</b>

## Nations and regions

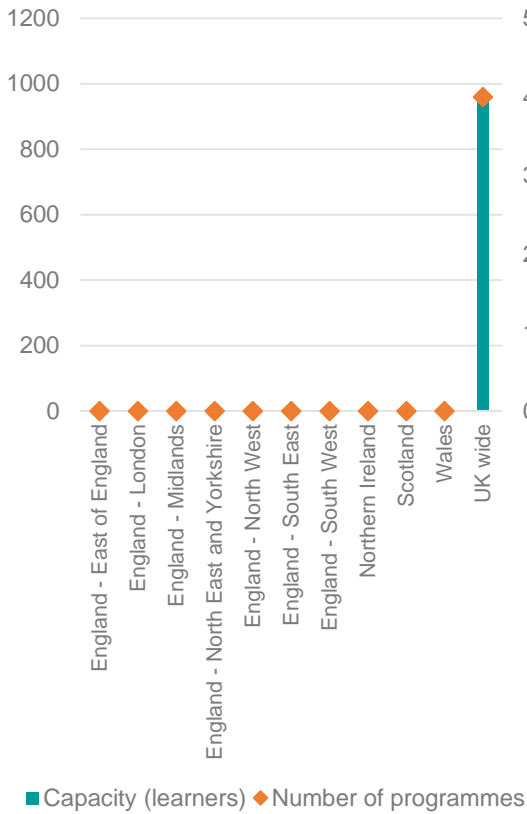
We have produced the following charts, which show learner number capacity (blue bars) and the number of approved programmes (orange diamonds) in each nation and English region. These charts are provided to give insight into the current national and regional picture within professions.

From the charts, the total capacity of programmes can be understood vs the number of programmes. There is variance in programme sizes – we can see similar programme numbers within nations / regions with a range of programme capacities. There will be a range of reasons for differences, but there may be opportunities to increase learner numbers for existing lower capacity programmes.

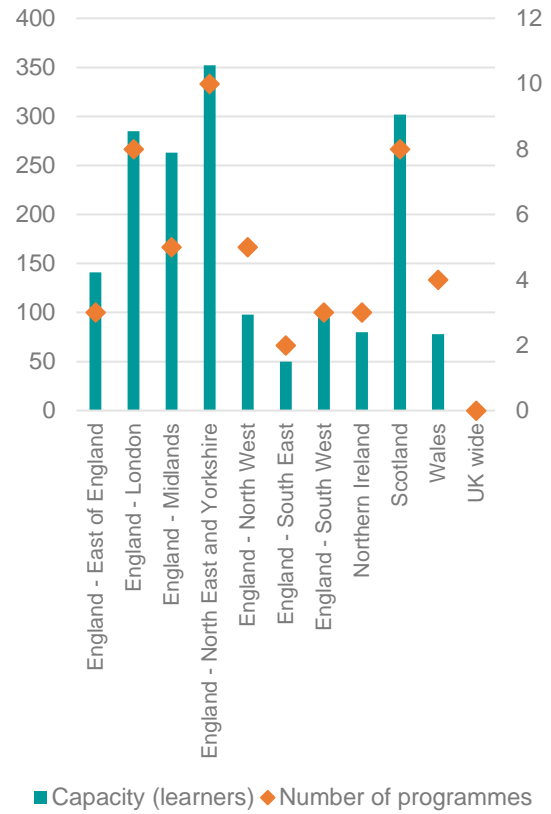
### Professions without modalities



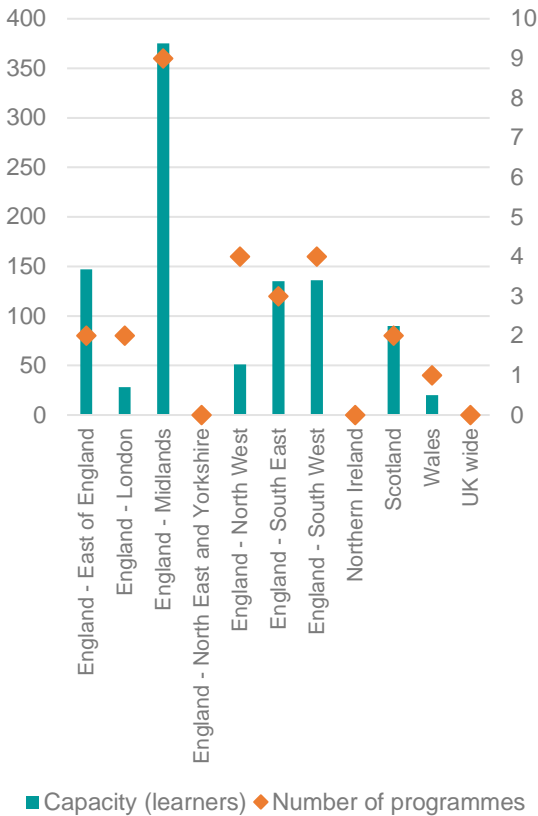
### Clinical scientists



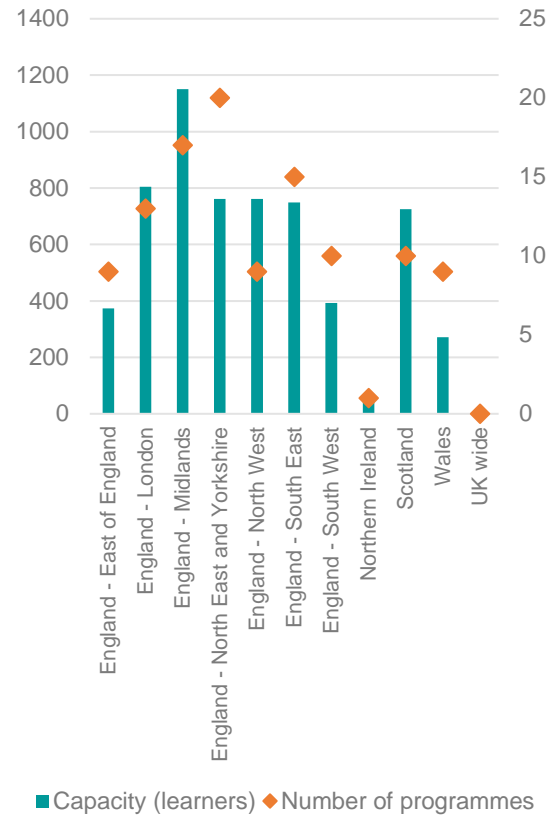
### Dietitians



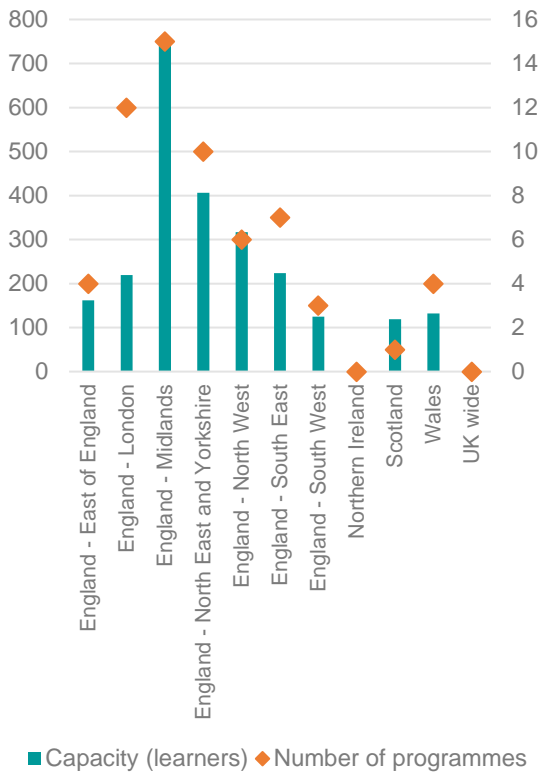
### Hearing aid dispensers



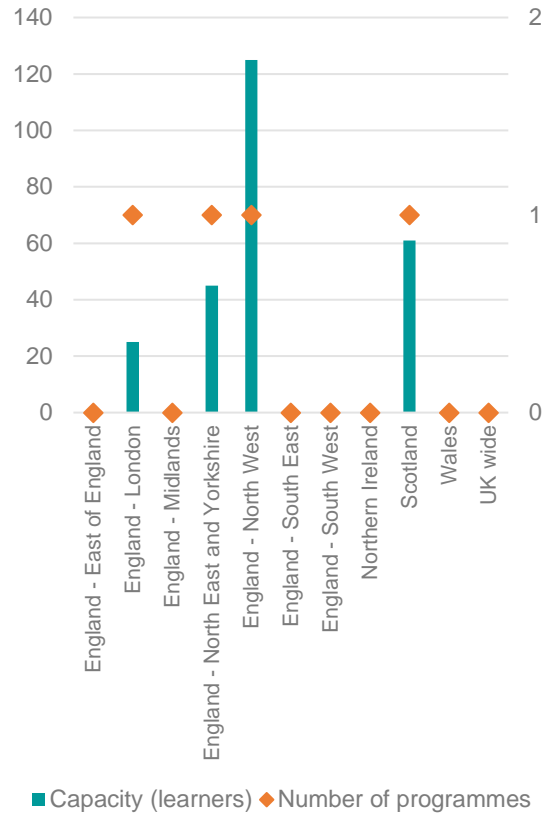
### Occupational therapists



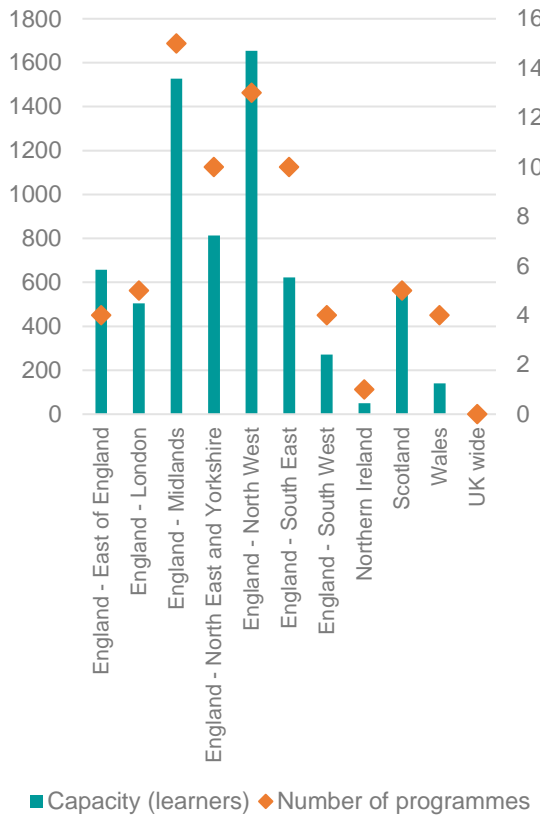
### Operating department practitioners



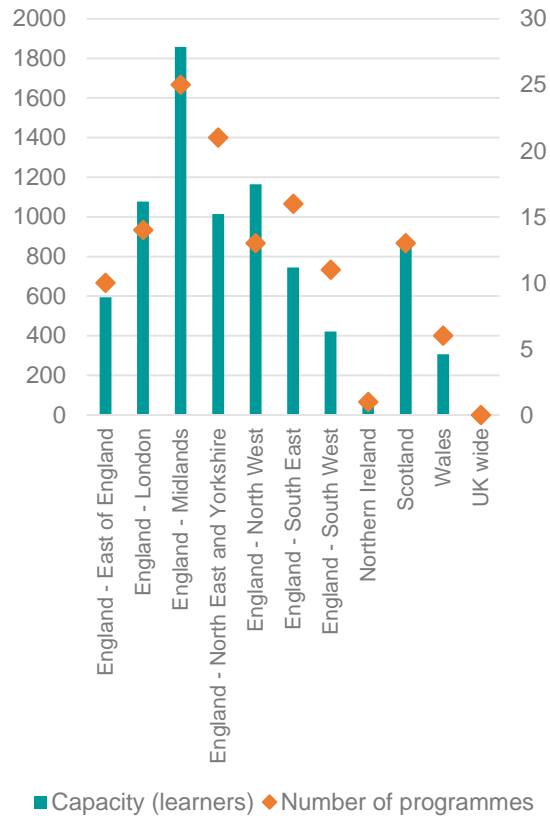
### Orthoptists



### Paramedics

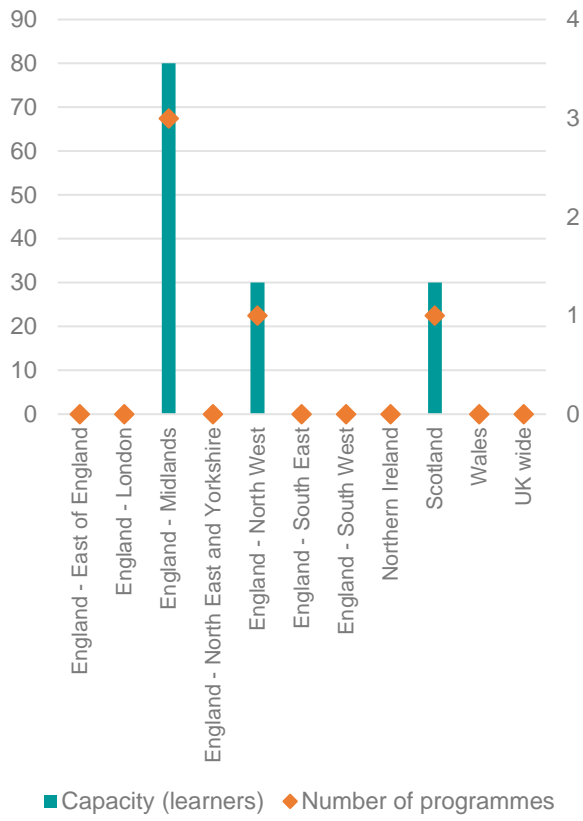


### Physiotherapists

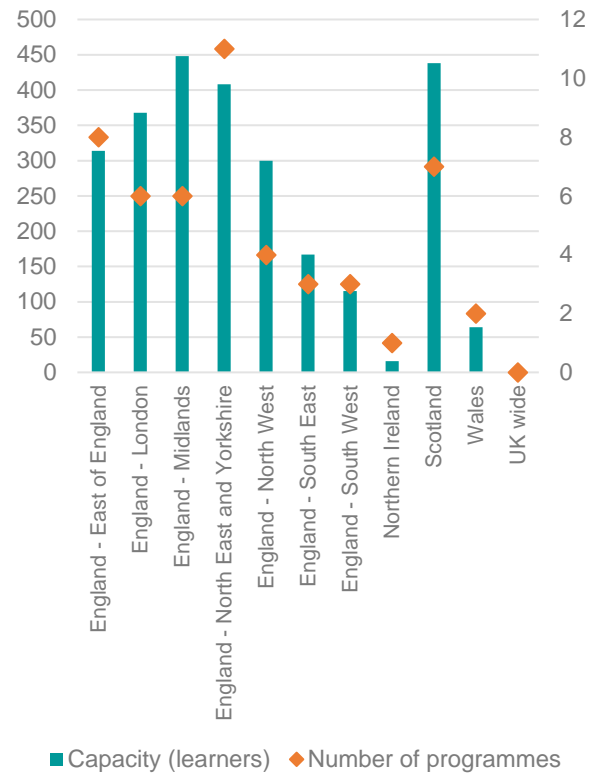




### Prosthetists / orthotists

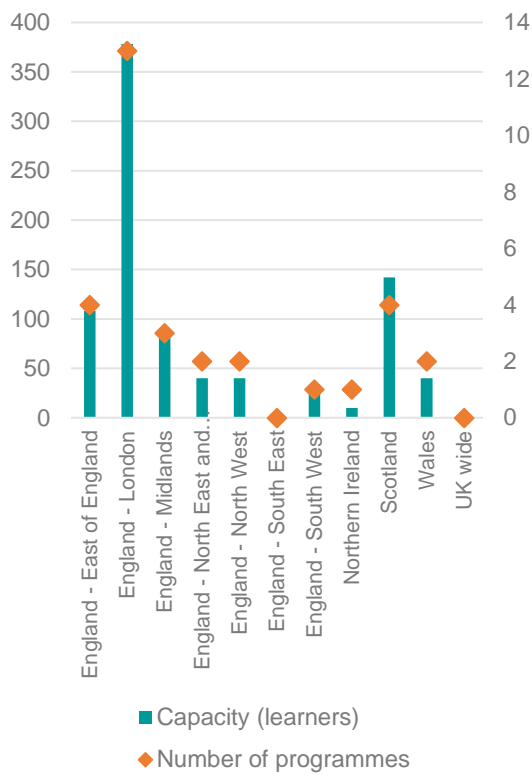


### Speech and language therapists

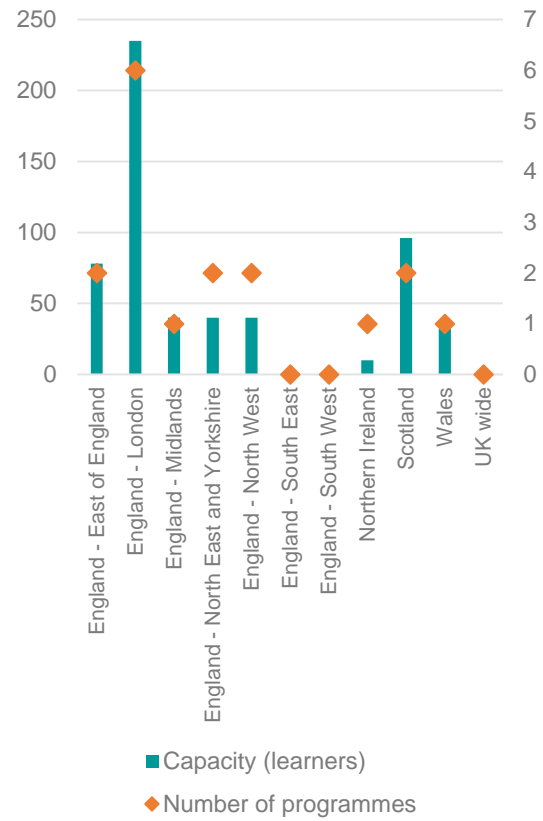


## Professions with modalities

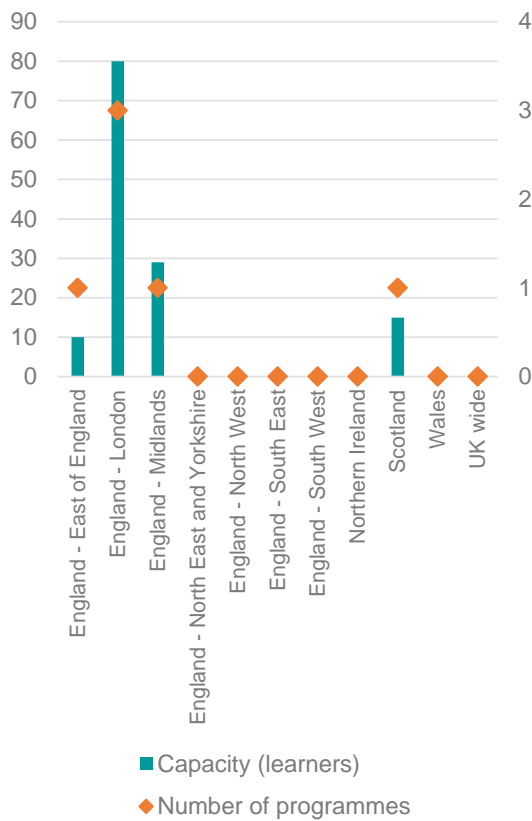
### Arts therapists (whole profession)



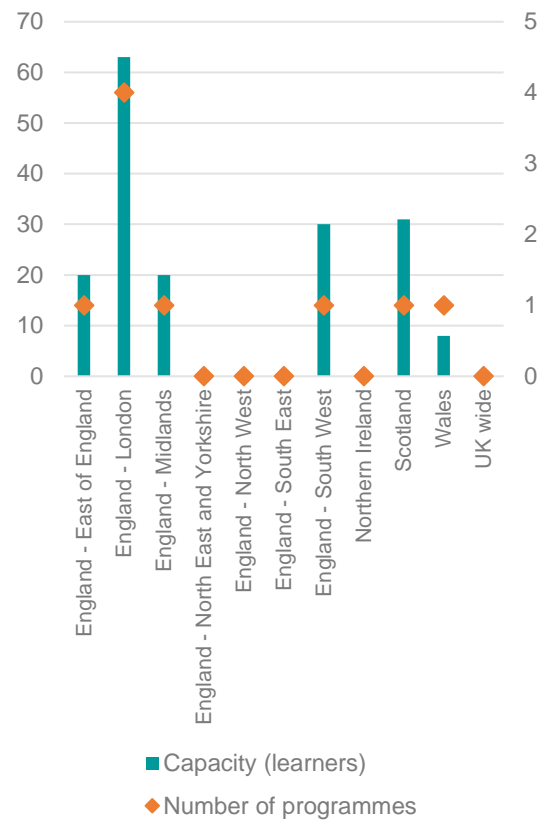
### Art therapists



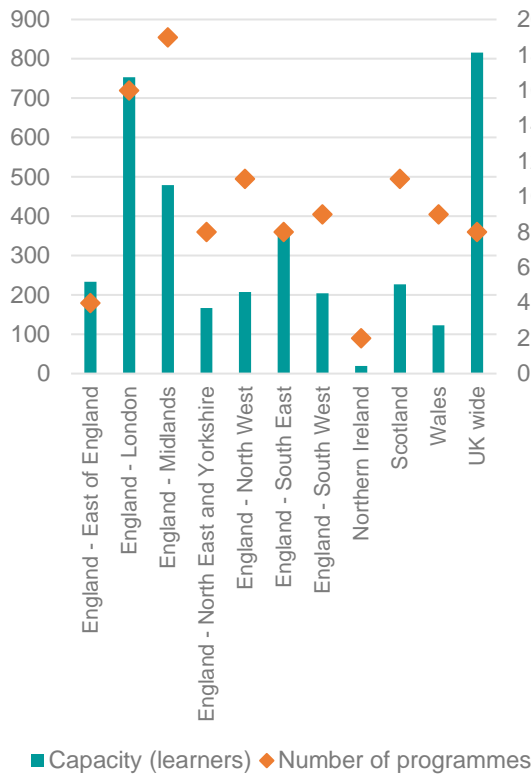
### Drama therapists



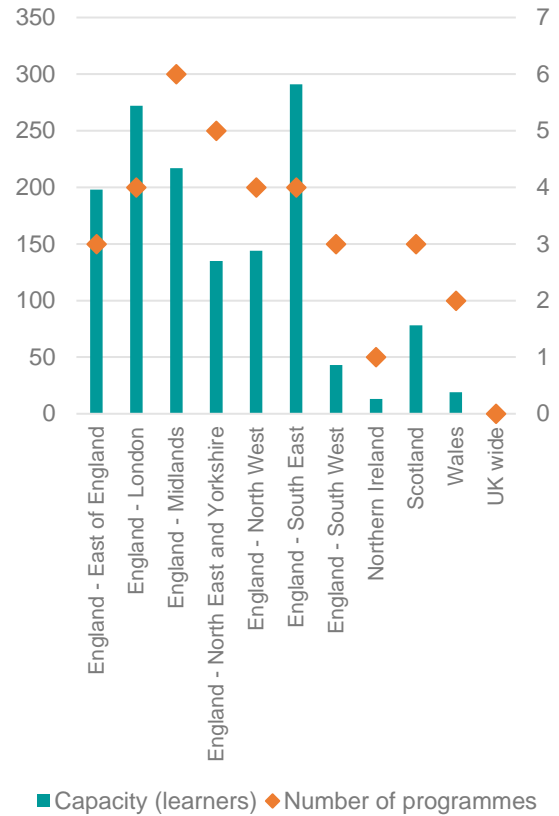
### Music therapists



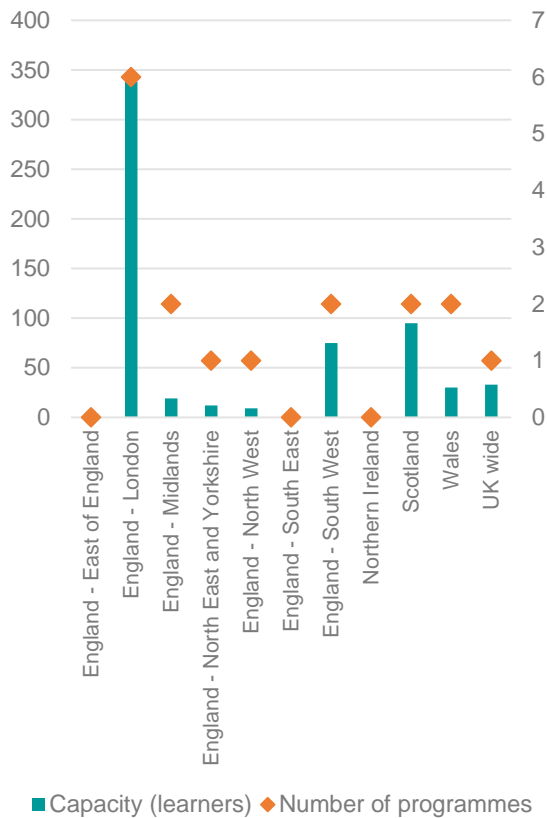
### Practitioner psychologists (whole profession)



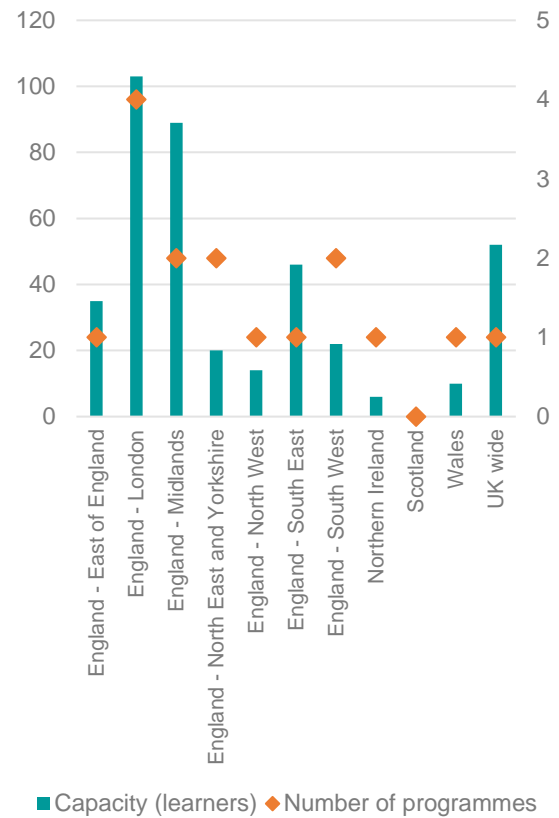
### Clinical psychologists



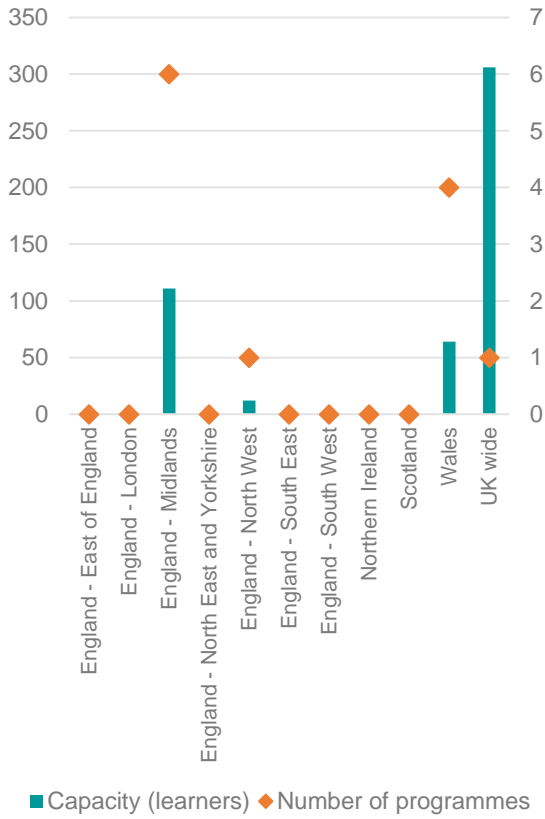
### Counselling psychologists



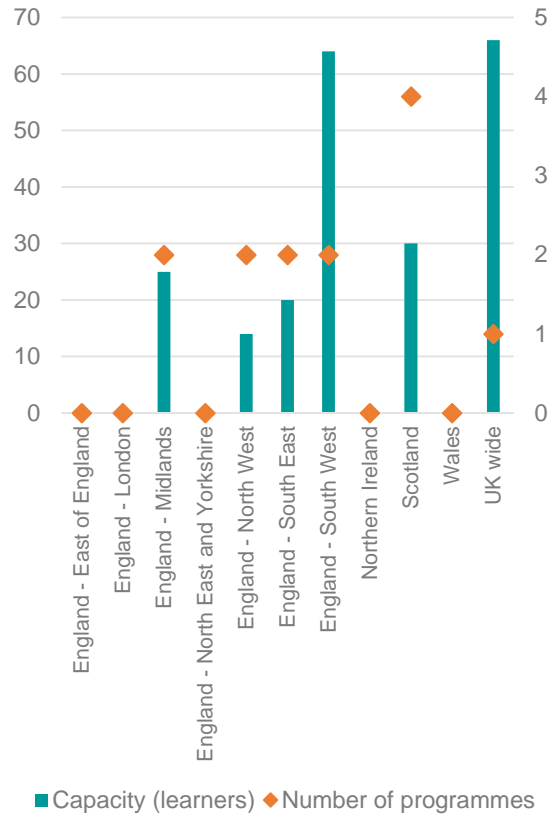
### Educational psychologists



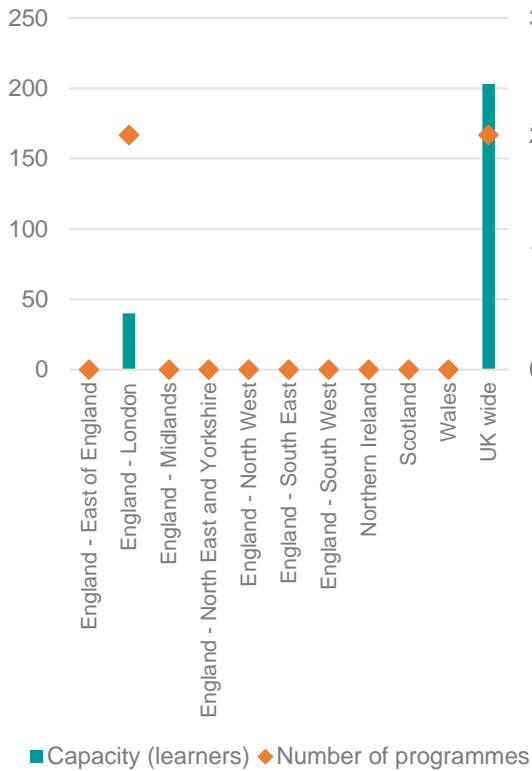
### Forensic psychologists



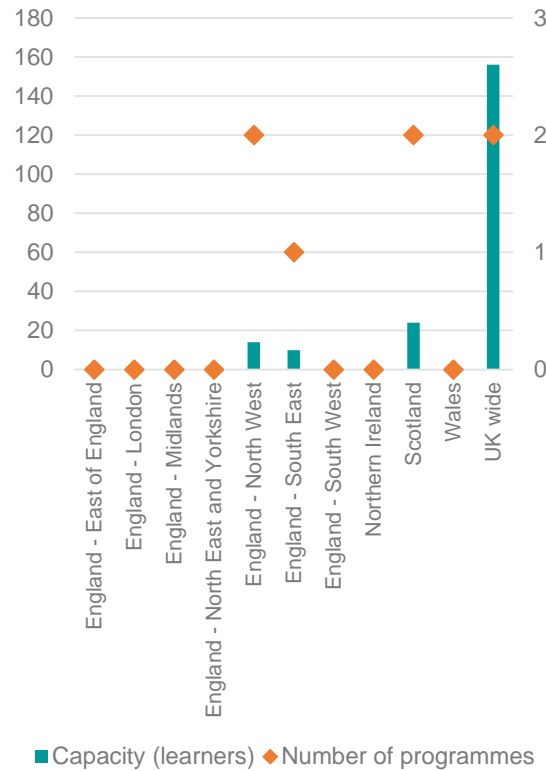
### Health psychologists



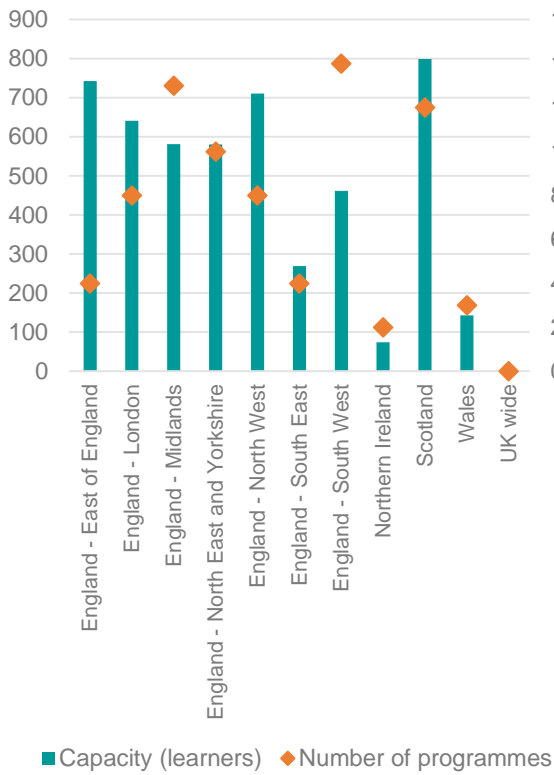
### Occupational psychologists



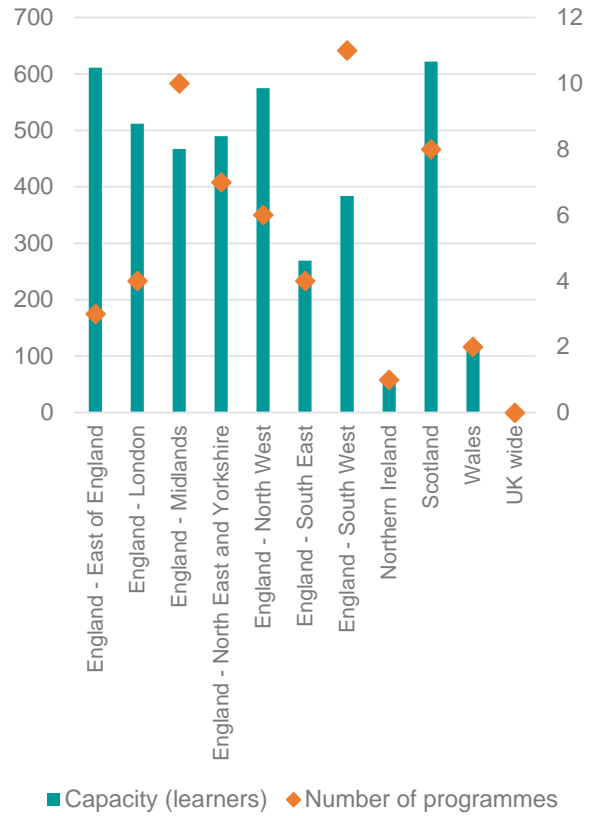
### Sports and exercise psychologists



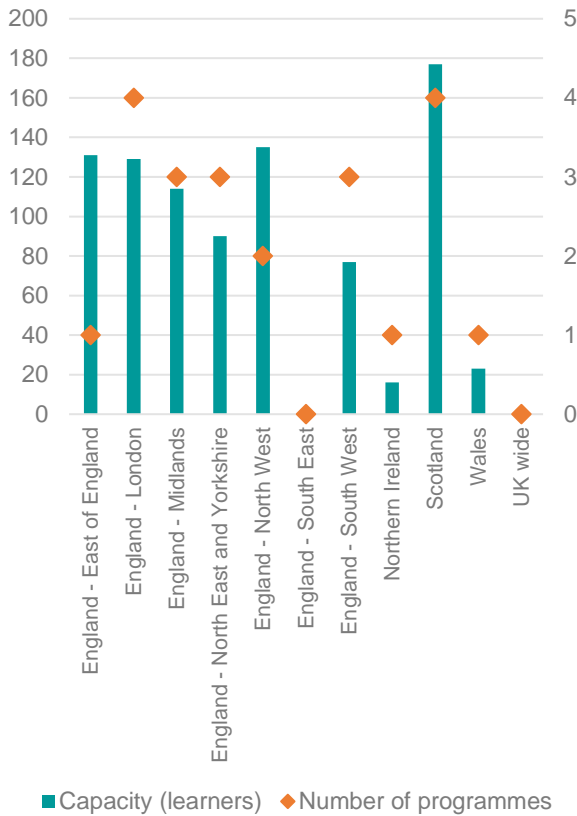
### Radiographers (whole profession)



### Diagnostic radiographers



### Therapeutic radiographers



## Number of approved post-registration programmes

We also approve post registration programmes, which lead to an ‘annotation’ on our Register. We are required to do this by legislation where a registrant has undertaken additional training around medicines and has obtained entitlements to sell, supply, administer or prescribe these medicines. We also annotate for podiatrists practising podiatric surgery, as this is a high level of specialism within the chiropodist / podiatrist profession, and we took the decision that annotating individuals who are able to practice in this specialist area was essential to protect the public<sup>10</sup>.

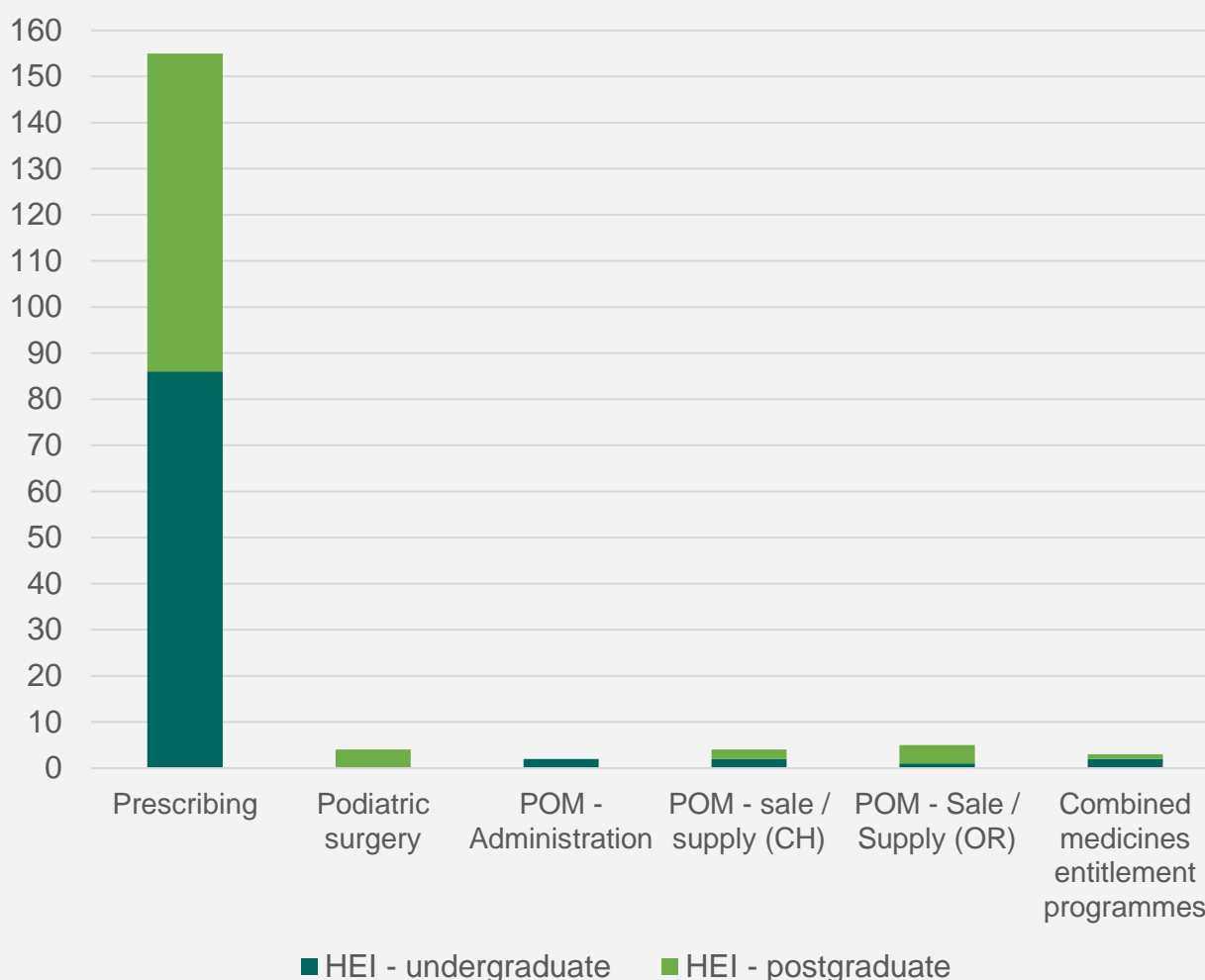


Figure 7 - Number of post-registration approved programmes, by type of programme - 1 September 2023

10. Our Council made the decision to add the annotation for podiatrists practising podiatric surgery in May 2012

# Glossary

<b>Allied Health Professional (AHPs)</b>	A grouping of health and care professionals, most of which the HCPC regulates.
<b>Carer</b>	Anyone who looks after or provides support to a family member, partner or friend
<b>Direct entry programme</b>	A programme that is open to entry for any applicant, normally delivered by a higher education institution (and different to any apprenticeship route)
<b>Education provider</b>	The institution (for example, a college, university, company or private higher education provider) which maintains overall responsibility for delivering a programme
<b>Higher Education Institution</b>	Independent, self-governing bodies active in teaching, research and scholarship and established by Royal Charter or legislation
<b>Learner</b>	Anyone studying or training on a programme which leads to them being eligible to join the HCPC Register. The term includes students, trainees, apprentices and practitioners in training or work-based learning.
<b>Practice-based learning</b>	The clinical or practical experience that forms an essential part of an approved programme. It may take place throughout a programme or during separate periods of time.
<b>Practice educator</b>	A person who has received appropriate training to be responsible for a learner's education during their practice-based learning.
<b>Practice education provider</b>	The organisation that provides practice-based learning for a programme. In many cases this is a separate organisation from the education provider. This includes, for example, health and care providers, local authorities, schools, community organisations and charities across the public, private and voluntary sectors.
<b>Programme</b>	Provided by an education provider, it is the academic teaching, practice-based learning, assessment, qualification and other services, which together lead to an award to allow a person to be eligible to apply for HCPC registration.
<b>Provision</b>	Collective name for programme(s) delivered by an education provider.
<b>Register</b>	The list (or any part of it) that we keep of the professionals who meet our standards for their training, professional skills, behaviour and health.
<b>Requirements for registration</b>	At the point of registration, new registrants must meet all of our standards of proficiency for the relevant profession and / or modality, and be able to meet our standards of conduct, performance and ethics.
<b>Service user</b>	Anyone who uses, or is affected by, the services of registrants or learners.
<b>Standards of conduct, performance and ethics</b>	The ethical framework within which our registrants must work
<b>Standards of education and training (SETs)</b>	What education and training programmes must do to prepare their learners for professional practice
<b>Standards of proficiency (SOPs)</b>	The professional standards all registrants must meet in order to become registered, and remain on the Register

# Appendix 1

## Approval assessment findings, detailed analysis



# Appendix 1

## Approval assessment findings – detailed analysis

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We assess education providers and new programmes to ensure they are properly organised to deliver education, and train learners to be safe, effective and fit to practice.

We focus on whether education providers and programmes meet our standards of education and training (SET). These standards are outcome focused, to ensure those who complete programmes meet our standards of proficiency and standards of conduct, performance and ethics. This means that we do not set specific ‘inputs’ such as the academic entry requirements for programmes, or the number of practice hours required. We instead ask education providers to justify why their programmes are set up in the way they are, and how their approaches enable them to meet our education standards.

We undertake two-stage assessments, firstly assessing the institution, and then the programme(s). Our education standards are packaged to enable this approach, with 31 standards set at the institution level, and 21 at the programme level. Where an education provider’s new programme proposal aligns to existing HCPC-approved programmes, we do not ask education providers to evidence institution level standards through approval assessments. We make this judgement by reviewing ‘baseline’ information established by the education provider, against initial information provided through their approval request.

We designed our assessments in this way to reduce burden for education providers, ensuring we consider the context and history of an education provider when deciding how to assess.

Through this appendix, we have summarised:

- our threshold requirements which education providers must demonstrate are in place, as set out in our standards;
- education provider approaches to meeting standards; and
- key findings for each area.

# Appendix 1 contents

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<b>SET 1 – Level of qualification for entry to the Register</b>	<b>59</b>
<b>SET 2 – Programme admissions</b>	<b>61</b>
Institution level standards	61
Programme level standards	63
Academic and professional entry requirements	63
<b>SET 3 – Programme governance, management and leadership</b>	<b>65</b>
Institution level standards	65
Programme level standards	70
Collaboration with practice education providers	70
Capacity of practice-based learning	71
Staffing	72
Resourcing	73
<b>SET 4 – Programme design and delivery</b>	<b>75</b>
Institution level standards	75
Programme level standards	76
Overall programme design	76
Considering the expectations of professional bodies and other organisations	78
Currency of curricula	79
<b>SET 5 – Practice-based learning</b>	<b>81</b>
Institution level standards	81
Programme level standards	82
Centralising practice-based learning in programmes	82
Structure, duration and range	83
Staffing	84
<b>SET 6 – Assessment</b>	<b>86</b>
Institution level standards	86
Programme level standards	87
Assessment design and application	87

# SET 1 – Level of qualification for entry to the Register

## Our threshold requirements

SET 1 sets out the level of qualification we would normally expect for approved programmes leading to registration in each of the regulated professions.

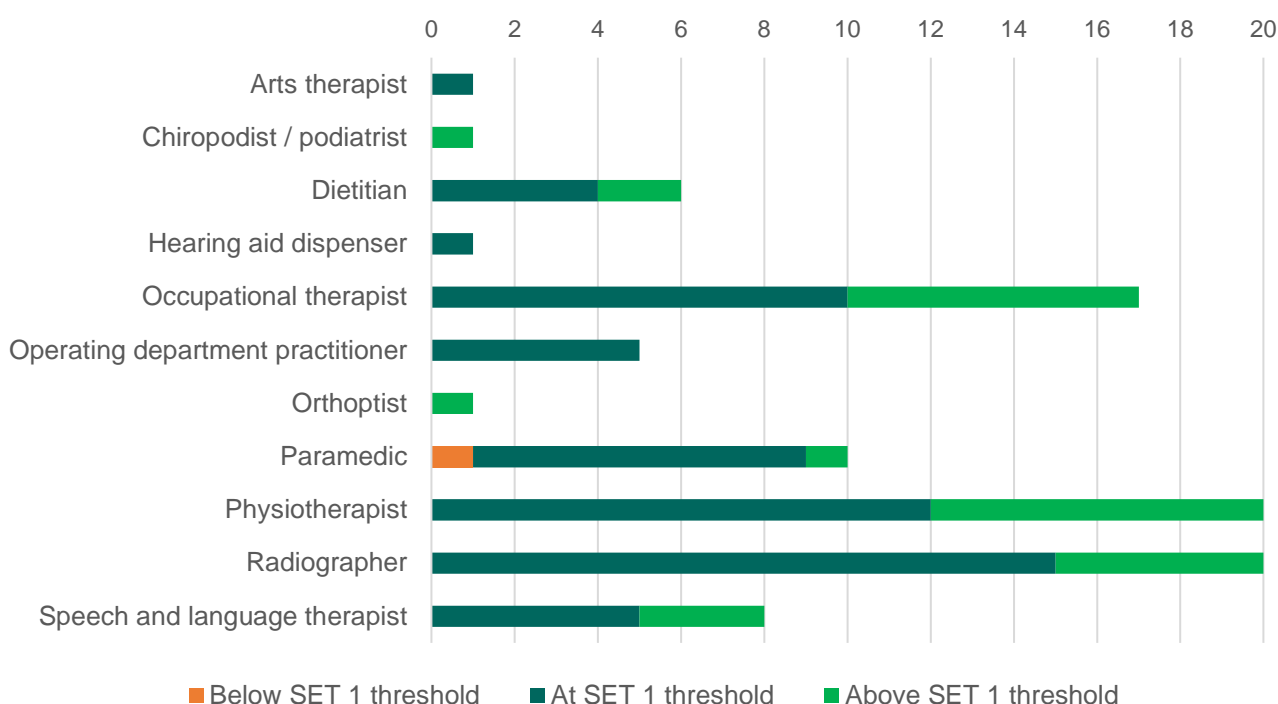
We have set the level for each profession based on what is needed for programmes to deliver the standards of proficiency (SOPs). We expect that most approved programmes will be at, or above, the standard we have outlined, but we realise there may be some exceptions.

This standard contains the word ‘normally’ and some of the profession-specific levels include the word ‘equivalent’. This is to show that education providers may be able to design a programme which leads to a different qualification, but meets the rest of the SETs and delivers the SOPs, and so can still be approved by us.

## Approaches

Within the two year period, all but one of the programmes assessed were proposed at or above the threshold required for SET 1, with 31% of programmes proposed above the threshold level.

*Programme proposals considered in the 2021-22 and 2022-23 academic years, by alignment with SET 1 threshold for the profession*



- all but one programme was proposed at or above the SET 1 level set out in our standards
- about a third of programmes were proposed above SET 1 level, which is above the percentage of all programmes delivered above SET 1 (24%<sup>1</sup>) – this shows that education providers are continuing to diversify professional provision, to enable individuals with undergraduate degrees to access professional training along shorter timeframes than undergraduate programmes (two years vs three years, full time).
- this was particularly prevalent in occupational therapist and physiotherapist training, but there were also masters level programmes proposed in other professions.
- all programmes proposed at or above the threshold level for the profession were proposed by higher education institutions, which are able to deliver qualifications which meet the UK Quality Code.

For the programme proposed below the academic level set out in SET 1, we started assessment in the 2022-23 academic year, however at the time of writing, this assessment has not concluded. This education provider is not a higher education institution (HEI) and is using a different qualifications framework than the UK Quality Code. We required this education provider to demonstrate how their proposed programme was equivalent to the required academic level set out in SET 1, and are still reviewing whether this is the case.

### Key findings

All but one of the programmes proposed were at HEIs, which meant they were able to deliver programmes which meet the UK Quality Code. As programmes proposed by HEIs were at or above SET 1 level, we were able to take assurance that SET 1 was met due to HEI alignment with the Code.

<sup>1</sup> This figure takes into account that the SET 1 level for operating department practitioners will raise to BSc (hons) level from September 2024

## SET 2 – Programme admissions

### Institution level standards

HCPC-approved education providers proposing new programmes relied on cross-programme policies and processes for the admissions standards set at the education provider level. These institution level standards have already been met through previous process interactions, and we made judgements that new provision aligned with existing provision based on what education providers told us through their approval request. This is in line with the two-stage approach to approval assessments.

These areas were as follows:

- **Programme advertising and admissions processes** – Our standards require that all parties have the information required to make an informed choice about whether to take up or make an offer of a place on a programme (SET 2.1).
  - programmes were advertised in a range of places, primarily on education provider websites and through central services like the University and College Admissions Service (UCAS) and Discover Uni.
  - there were differences in advertising and methods of application between direct entry and apprenticeship programmes. Apprenticeship programmes were also centrally advertised through the [‘find an apprenticeship’](#) web page.
  - we also normally found that education providers were clear about admissions requirements in a range of materials required to ensure both applicants understood requirements (such as advertising materials, and information provided at open days), and staff could apply those requirements consistently and fairly.
  - we explored inconsistencies with the information provided to prospective learners and for the expectations to be applied by the education provider, and education providers were able to define their expectations and correct inconsistencies through assessments.
  - selection methods were different depending on the programme. Entry to direct entry programmes were managed solely by the education provider, and apprenticeship programmes involved the employer, with the education providers making the final decision about whether to admit.
  - there was a range of recruitment techniques, often with values-based recruitment at the centre of decision making, with face-to-face or virtual interviews normally preferred.

- some education providers noted how they regularly review admissions requirements and processes to ensure they remain current and fair.
- **Language requirements** – Our standards require that applicants to programmes have a good command of English (SET 2.3). What we mean by ‘good command’ may differ depending on the programme – we make sure that learners are able to use the English language at the level necessary to communicate effectively with service users and carers, educators and others, and to complete the programme successfully.
  - education providers often set a threshold requirement for UK applicants to hold a GCSE in English.
  - for international applicants, they often set a requirement that learners hold an International English Language Testing System (IELTS) score of 7, with no element below 6.5, which is the requirement in the SOPs<sup>2</sup>. They then used this entry requirement as demonstration of how they ensure those who complete the programme were able to communicate in English to the level required by the SOPs.
  - although not a requirement of our standards, education providers in Wales normally assessed Welsh language skills as part of entry.
  - this links to a requirement of Health Education and Improvement Wales (HEIW) (who commission many HCPC-regulated professions in Wales) that Welsh proficiency is tested as part of entry requirements.
- **Suitability of applicants** – Our standards require that education providers assess the suitability of applicants, including criminal conviction checks (SET 2.4). By ‘suitability’ we mean that an applicant is of appropriate character to train to become a health and care professional and to interact safely with service users and carers.
  - all education providers required a criminal conviction check to be carried out by the relevant national body (for UK applicants), or by an equivalent body for international applicants.
  - education providers were clear that admissions to programmes were subject to The Rehabilitation of Offenders Act (Exceptions) Order, which enables education providers to ask questions “about spent convictions and cautions in order to assess a person’s suitability for admission to certain occupations.”
- **Compliance with health requirements** – Our standards require that the admissions process ensures applicants are aware of and comply with any health requirements (SET 2.5). This is to make sure learners will be able to take part in a programme safely and effectively, and meet our standards for registration once they complete the programme.
  - education providers set health requirements for entry to programmes, including:
    - occupational health assessments, where judgements were made about

<sup>2</sup> This is the case for all HCPC professions, except speech and language therapists, where the requirement is equivalent to level 8, with no element below 7.5

whether individuals are able to practice a profession (ie meet all of our standards) considering any health conditions.

- mandatory immunisations, often linked to requirements for practice in specific professions.
- **Equality, diversity and inclusion in recruitment** – Our standards require that there are equality and diversity policies in relation to applicants (SET 2.7). This ensures that the admissions process is open and impartial and does not discriminate unfairly against certain applicants. We also require that there is an appropriate and effective process for assessing applicants' prior learning and experience (SET 2.6).
  - education providers have active aims to recruit learners from a diverse range of backgrounds.
  - they consider alternative arrangements for admissions, to widen access to a diverse range of potential learners. For example, education providers have policies in place to recognise prior learning and experience in the place of academic qualifications through recognition / accreditation of prior learning processes.
  - education providers also capture diversity data in admissions, to consider where groups are under-represented in applications, and to consider differential outcomes. This data is then used to consider which groups should be focused on in future recruitment activities.

## Programme level standards

### Academic and professional entry requirements

#### Our threshold requirements

Our standards require that education providers ensure those who enter programmes have the prior skills and knowledge to be able to undertake the programme's curriculum (SET 2.2).

#### Approaches

When setting their academic entry requirements, education providers considered:

- professional body expectations (where they had been set), which we also referenced when making judgements. We did not hold programmes to these expectations, or apply them as a standard ourselves, but used them as a reference point. We made our own judgements about whether the level proposed would enable applicants to undertake the proposed curriculum.
- apprenticeship programmes aligning to the Institute for Apprenticeships and Technical Education's (IfATE) profession-specific standards, including their English and Maths requirements.
- education and Skills Funding Agency (ESFA) requirements.

Education providers sometimes involved stakeholder groups, with membership including employers and service users and carers, to help define entry requirements.

For new apprenticeship programmes where education providers already ran programmes within the profession, there was usually alignment to academic entry requirements for the existing programme.

For masters level programmes, education providers often noted a first degree in a 'related subject area' was required, but it was not always clear how they made judgements about what 'related areas' were. When this was not clear through submissions, we explored this further, and ensured this was more clearly written into requirements for applicants and staff applying requirements.

In addition to qualifications, education providers often required:

- relevant work experience in a health / care related area, to ensure those applying understood the health / care sector and the profession being applied for;
- a personal statement, which sometimes focused on NHS values as outlined in the NHS Constitution; and
- for apprenticeship programmes, a reference from the applicant's employer.

There were sometimes different pathways through programmes based on the prior skills / knowledge / experience and qualifications of applicants. This was normally when a particular group of learners were identified as being exempt from elements of the programme, due to them already meeting competencies through prior work experience. In these cases, education providers set up clear structures to ensure individuals had the experience required to progress through a different pathway.

### Key findings

Through our assessments we judged that all education providers set their academic entry requirements at a level appropriate to the delivery of the programme. Requirements were different for different programmes based on a range of factors, including the academic level of the programme, the model of learning, and expectations of other organisations.



# SET 3 – Programme governance, management and leadership

---

## Institution level standards

HCPC-approved education providers proposing new programmes relied on cross-programme policies and processes for the governance, management and leadership standards set at the education provider level. These institution level standards have already been met through previous process interactions, and we made judgements that new provision aligned with existing provision based on what education providers told us through their approval request. This is in line with the two-stage approach to approval assessments.

These areas were as follows:

- **Sustainability of programmes** – Our standards require that programmes must be sustainable and fit for purpose (SET 3.1). This is to make sure that there is a future for the programmes, that they are currently secure and are supported by all stakeholders involved.
  - education providers integrated newly proposed programmes into existing business plans, which demonstrate the ongoing financial stability of the institution.
  - programmes aligned with existing sustainability arrangements, through the involvement of relevant stakeholders who provide resources and commitment to deliver programmes.
  - for the programme level, we explore sustainability in more detail in the section below.
- **Programme management** – Our standards require that programmes must be effectively managed (SET 3.2). This is to ensure that there is effective management and clear responsibility for programmes.
  - policies and processes were in place to ensure programmes are effectively managed, such as management structures and clear articulation of the roles and responsibilities of all involved.
- **Overall professional responsibility for programmes** – Our standards require that there is a person in place holding overall professional responsibility for each programme, who is appropriately qualified and experienced and, unless other arrangements are appropriate, on the relevant part of the Register (SET 3.3). This is to ensure there is an appropriate person in place, and that the education provider has a mechanism for ensuring this role is filled on an ongoing basis.

- education providers aligned new provision with existing policies and processes which ensure that the person with overall responsibility for the programmes is appropriately qualified and experienced, and that the role is filled on an ongoing basis.
- education providers recognised that this was not just about the person in place at the time of assessment, but also how they would ensure an appropriate person would be in place in the future, with any personnel changes.
- normally, this was delivered through a clear job description, and management structures which ensure the role is essential and would be recruited to with changes in personnel.
- **Quality and effectiveness of programmes** – Our standards require that there are regular and effective monitoring and evaluation systems in place (SET 3.4). This is to ensure that programmes are of good quality and are effectively delivered on an ongoing basis.
  - education providers aligned proposed programmes with internal and external quality assurance assessments, including the quality assurance of practice-based learning.
  - there was a split in education providers, with some running a ‘continuous improvement’ approach to quality, and some running a cyclical review model. Continuous improvement is a responsive approach to quality improvement, enabling data, information, and feedback to be acted upon quickly (often with stripping out unnecessary bureaucracy) to have timely impact for stakeholders. Cyclical reviews tend to have specific windows within which data, information and feedback are considered and acted upon for implementation in the next periodic cycle.
  - within both models, the following mechanisms were often used by education providers:
    - set, and review provision against, internal quality standards;
    - ongoing or regular reviews of provision, including learner feedback and module-level reviews;
    - internal governance arrangements to interrogate and sign off developments and change;
    - review of provision by external examiners, resulting in feedback and actions; and
    - defined quality arrangements for practice-based learning – such as initial and ongoing review and sign off of practice learning providers, and embedding of these arrangements into contracts (as referenced in the collaboration with practice education providers section).

- **Service user and carer involvement** – Our standards require that service users and carers are involved in programmes (SET 3.7). This ensures that service users and carers contribute to the overall quality and effectiveness of programmes.
  - we involve ‘service user expert advisor’ partners in institution level assessments. We ask service user expert advisors to consider:
    - underpinning service user engagement policies;
    - how service user involvement will be monitored;
    - potential risks; and
    - good practice and innovation.
  - service user expert advisors were crucial to our reviews, providing important insight from the service user perspective. This feedback and insight was used by lead visitors to inform their judgement about the service user standard.
  - education providers aligned proposed programmes with existing policies and processes to ensure that services and carers are involved in the programmes.
  - we often saw established central groups drawn upon by programmes to provide specific involvement within education provider frameworks, with service users and carers involved in:
    - a wide range of learner-facing areas (such as in admissions, delivery of content, assessments and fitness to practise panels);
    - governance (ranging from advisory groups to integration of service users and carers within a wide range of groups with differing functions); and
    - quality improvement (such as with design and development of programmes, and the production of policies – again involvement was wide ranging from single point consultation through to co-production).
  - less frequently, service users and carers were involved in research.
- **Learner involvement** – Our standards require that learners are involved in programmes (SET 3.8). This ensures that the experience of learners is central to the quality and effectiveness of programmes.
  - education providers aligned proposed programmes to existing policies and processes to ensure learners contribute to the programme in some way.
  - primarily, education providers sought structured feedback from learners, and many education providers also directly involved learners in review activities such as curriculum development and approving new programmes.
  - education providers had a range of ways to gather learner feedback and take

actions forward. For example:

- module or end of year feedback forms – electronic or paper to allow analysis and close the feedback loop, such as through “You said, we did” mechanisms;
  - representation at meetings – such as learner forums, representation at quality assurance proceedings, and ‘Town Hall’ meetings;
  - review of external feedback data – analysis of National Student Survey (NSS) results, the National Education and Training Survey (NETs), and the Postgraduate Taught Experience Survey (PTES); and
  - complaints considered by the Office for the Independent Adjudicator (OIA).
- **Equality, diversity and inclusion (EDI)** – Our standards require that there must be equality and diversity policies in place in relation to learners, and that those policies must be monitored (SET 3.14). This ensures that programmes provide an impartial, fair and supportive environment to allow people to learn.
    - equality and diversity policies are in place throughout programmes, including within practice-based learning.
    - education providers are aware of their legal responsibilities in this area, and have institution-level strategies / high level commitments in place related to EDI. Strategies are aimed to ensure education providers are inclusive and fair in their activities, focused on areas such as learner recruitment and admissions, experience, progression, attainment, and employability.
  - **Learner complaints** – Our standards require that there is a thorough and effective process in place for receiving and responding to learner complaints (SET 3.15). This ensures education providers consider and settle complaints from learners, and that complaints contribute to the overall way in which the programme is governed.
    - education providers aligned proposed programmes to existing policies and processes which ensure a fair, transparent and supportive response to learner complaints.
    - these apply throughout the duration of the programmes including practice-based learning.
  - **Ongoing learner suitability** – Our standards require that there is a thorough and effective processes in place for ensuring the ongoing suitability of learners’ conduct, character and health (SET 3.16). This ensures that education providers protect service users and carers who interact with learners, and make sure that learners who complete the programme meet our standards for registration and expectations of professional behaviour.
    - education providers aligned proposed programmes to existing policies and processes to protect service users and carers interacting with learners.

- there were teaching and learning activities embedded which set out expectations of professional behaviour for learners in practice, and to develop learner ability to meet our standards of conduct, performance and ethics at the point of registration.
  - education providers had well documented learner fitness to practice procedures, to make decisions about learner continuation when things go wrong, and normally required declarations from learners when any situation might impact their ongoing suitability.
  - there were some complexities for apprenticeship programmes, where learners are also employees. Education providers are clear which policies should be followed in these situations, and how engagement structures functioned to address any issues which might arise in the practice or academic setting.
- **Concerns about the safety and wellbeing of service users** – Our standards require that there is an effective process in place to support and enable learners to raise concerns about the safety and wellbeing of service users (SET 3.17). This standard is to help learners to recognise situations where service users may be at risk, supporting them in raising any concerns, and making sure action is taken in response.
    - education providers aligned proposed programmes to existing mechanisms and support, through which learners can identify safety or well-being concerns about service users and make sure appropriate actions are undertaken.
    - normally policies were badged as ‘whistleblowing’, and applied to both the practice and academic settings.
    - importantly, education providers were committed to supporting learners to recognise situations where service users may be at risk, through structured teaching and learning.
    - as in the above section about learner suitability, there were some complexities for apprenticeship programmes, where learners are employees. Education providers are clear which policies should be followed in these situations, and how engagement structures functioned to address any issues which might arise in the practice setting.
- **Eligibility for admission to the Register** – Our standards require that all parties are aware that only successful completion of an approved programme leads to eligibility for admission to the Register (SET 3.18). This ensures that there is no confusion about which programmes we approve. Learners, educators and the public must be clear on which programmes meet our standards for registration and which do not.
    - there were clear regulations in place which clearly state which programmes are approved and hence lead to eligibility to apply to the HCPC Register. These were often contained in programme specifications.

## Programme level standards

### Collaboration with practice education providers

#### Our threshold requirements

Our standards require that there must be regular and effective collaboration between the education provider and practice education providers (SET 3.5). This ensures that education providers work in partnership with those who provide practice-based learning as a way of making sure that they provide ongoing quality and effectiveness. We expect this partnership working to also influence the way programmes are designed and delivered.

#### Approaches

To demonstrate how this standard was met, many education providers discussed their formal processes, such as six-monthly meetings between the senior management of both parties, and their informal processes, such as drop-in sessions or catch-up meetings.

Some education providers evidenced this engagement through meeting minutes held during the development of the programme. This was particularly the case for degree apprenticeship programmes. Although we hold the education provider responsible for all aspects of the programme, in practice the nature of apprenticeship programmes mean they are often seen as a joint venture between the education provider and employers, as learners are also employees. Some education providers discussed how the delivery method differed from a traditional higher education programme in areas such as funding. As such, there were different areas to consider through memorandums of understanding (MOUs) when compared to direct entry programmes.

Education providers who already delivered approved programmes generally outlined how their existing engagement processes and relationships would be used in the new programme.

A small number of education providers discussed how they engaged with national or regional practice education provider forums. This allowed them to share best practice and discuss innovations being developed in the wider health care arena.

#### Key findings

Education providers recognised that collaboration with practice education providers was key to the sustainability and quality of programmes. This is due to the centrality of practice-based learning within education and training, and ensuring programmes are resourced and sustainable to deliver practice-based learning to all learners, to support delivery of the learning outcomes and standards of proficiency.

Formal agreements were in place, with defined mechanisms to collaborate contained within these agreements. There were different considerations needed depending on the model of learning, and the type of relationship between the education provider and practice education provider. Many collaborative arrangements established when establishing programmes facilitated co-production of programmes, particularly for apprenticeship routes.

We often needed to explore this area further with education providers, to consider how information provided in documentation would work in practice. Through our explorations, we were satisfied that collaborative arrangements had been established that would be maintained once programmes were approved.

## Capacity of practice-based learning

### Our threshold requirements

Our standards require that there must be an effective process in place to ensure the availability and capacity of practice-based learning for all learners (SET 3.6). This ensures all learners on programmes have access to practice-based learning which meets their learning needs. Education providers must consider the learners currently on the programme and plan for future learners.

We recognise that education providers are not solely responsible for the capacity of practice-based learning. They must operate within professional, regional and national environments, and must design and resource their programmes to align with the capacity of practice partners. We work with other organisations, such as NHS England regional teams, to understand practice capacity and challenges. Our standards enable innovation in practice-based learning. We are not prescriptive about the duration or range of practice-based learning, as long as this learning supports learners to meet our requirements for registration.

### Approaches

To meet this standard, many education providers have programme-level arrangements. This may be through programme specific administrative roles, school / faculty teams, or via more senior management collaboration. Those education providers who already deliver HCPC approved programmes outlined their existing processes to ensure capacity would be adapted and used for new programmes. We expect education providers to outline how they considered the wider regional context, including where other education providers use the same practice education providers, and how these situations are managed to ensure capacity within the nation / region.

We saw innovations in practice-based learning, including:

- the use of simulation;
- broadening the range of practice education providers to include non-NHS providers; and
- changes in practice, such as increasing use of e-consultations.

Degree apprenticeship programmes outlined how practice-based learning capacity was determined differently to direct entry routes, as they were run in conjunction with a specific employer. For example, expressions of interest (EOI) in applying for apprenticeship programmes were received from employees, and this was the start of the process to determine what capacity was required and therefore, how it could be ensured.

There was sometimes tension with securing practice-based learning for apprenticeship and direct entry provision, with employers instinctively preferring apprenticeship learners for practice learning opportunities. This was managed by education providers by setting up clear agreements, such as memorandums of understanding (MOUs) with practice partners, covering both types of learners.

## Key findings

Capacity of practice-based learning is an issue often discussed within the professions we regulate. From our assessments, all education providers were able to demonstrate that there was capacity for their proposed learner numbers, and that capacity issues would be managed effectively. They worked with sector stakeholders to achieve this, including groups that provide national / regional oversight, practice education providers, and other education providers (normally in collaborative regional groups).

## Staffing

### Our threshold requirements

Our standards require that;

- there is an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme (SET 3.9);
- subject areas are delivered by educators with relevant specialist knowledge and expertise (SET 3.10); and
- an effective programme must be in place to ensure the continuing professional and academic development of educators appropriate to their role in the programme (SET 3.10).

These standards enable us to ensure that effective staffing arrangements are in place to deliver programmes.

### Approaches

Education providers frequently provided:

- an overall staffing plan;
- curriculum vitae (CVs) which showed the knowledge, skills and experience of staff / educators;
- an understanding about the academic learning to be delivered;
- which staff members would deliver that learning; and
- the proposed number of learners.

Taken together, these enabled us to make judgements about the number of staff for the number of learners, and whether subject matter experts were available and utilised appropriately.



Some education providers outlined how they planned to use visiting or guest lecturers to deliver key or specialised content. Visiting lecturers tended to be those contracted for an agreed number of hours per academic year. Guest lecturers tended to be asked to deliver a small number of academic sessions on their specialism. These topics and visiting lecturers could change year on year depending on new developments in the profession or due to their availability.

Where education providers were adding programmes in the same profession, they normally outlined how existing staff would be utilised across existing and new programmes. In these cases, education providers evidenced how these staff could undertake increased or different workload associated with a new programme and an increase in the number of learners (where this was applicable). Some education providers recruited, or planned to recruit, more staff to ensure effective delivery, assessment, and support for programmes. In these cases, education providers discussed the training and induction processes in place to ensure new staff could appropriately contribute for the start of the programme.

There are problems with the supply of academic staff across several HCPC professions, and this issue is compounded by increases in learner numbers and number of programmes in the sector. Education providers were aware of this problem and had strategies in place to develop academic staff numbers. These included seconding practice staff, enabling new academic staff to gain formal teaching qualifications, and delivering administrative support staff to free up academics' time to focus on programme delivery and learner assessment.

All education providers set out how they would deliver continuing professional development (CPD) for their staff. Normally this included staff gaining formal teaching qualifications where staff did not already have them, and protected time for research.

## Key findings

Education providers had considered staffing requirements for proposed programmes and were aware of the challenges in this area, often driven by the availability of academic staff across professional areas.

Through our assessments, we were confident that education providers either resourced or had robust plans in place to resource their programmes for the number of learners proposed. They considered how they would use existing staff, recruited new staff, and filled gaps in expertise with visiting or guest lecturers. There were clear mechanisms in place to develop new and existing staff to deliver effective programmes. Therefore, we were satisfied that programmes would be staffed appropriately for the number of learners proposed.

## Resourcing

### Our threshold requirements

Our standards require that resources to support learning in all settings must be effective and appropriate to the delivery of the programme, and must be accessible to all learners and educators (SET 3.12). In addition, effective and accessible arrangements must be in

place to support the wellbeing and learning needs of learners in all settings (3.13). This enables us to consider the resources the education provider has in place to support the delivery of programmes.

## Approaches

In evidencing this standard, education providers outlined physical resources (such as specialist and non-specialist teaching space, and library resources) and support services for learners and others.

Many education providers set out their technological solutions which are often becoming normal practice within higher education. These included the use of simulation and virtual learning environments.

Many education providers discussed the specialist resources available to their learners. Examples of this included:

- immersive 3-D virtual learning environments;
- mock hospital wards within the academic environment;
- anatomy laboratories; and
- profession-specific clinical skills teaching rooms.

## Key findings

Education providers had considered resourcing requirements for proposed programmes. This included technical solutions, physical teaching space, and providing academic materials to support learning.

Through our assessments, we were confident that education providers either resourced or had robust plans in place to resource their programmes for the number of learners proposed. They considered how they would use existing resources and develop new resources where required, depending on the design of the proposed programme. We found that education providers were resourced appropriately to deliver teaching and learning for the number of learners proposed.

## SET 4 – Programme design and delivery

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### Institution level standards

HCPC-approved education providers proposing new programmes relied on cross-programme policies and processes for the programme design and delivery standards set at the education provider level. These institution level standards have already been met through previous process interactions, and we made judgements that new provision aligned with existing provision based on what education providers told us through their approval request. This is in line with the two-stage approach to approval assessments.

These areas were as follows:

- **Interprofessional education (IPE)** – Our standards require that learners are able to learn with, and from, professionals and learners in other relevant professions (SET 4.9). This ensures that learners are prepared to work with other professionals and across professions for the benefit of service users and carers.
  - education providers normally had IPE leadership, policies, and procedures in place, which described the approach and methods used to enable learners of different programmes and from different professions to learn with and from each other.
  - IPE was often well structured into programme delivery and assessment. For example, delivery of sessions about multi-disciplinary teams by staff with different professional backgrounds, multi-professional learner groups discussing case studies, and structured assessments focused on multidisciplinary team situations.
  - learning with and from other professional groups was often also included in practice-based learning agreements.
- **Consent** – Our standards require that there are effective processes for obtaining appropriate consent from service users and learners (SET 4.10). This ensures individuals' rights are respected, and the risk of harm is reduced, while also making sure that learners understand what will be expected of them as health and care professionals.
  - there were established processes in place to enable learners to obtain consent from service users, and for learners in practical or role play sessions.
  - education providers were clear that learners must identify themselves as learners to service users.
  - in practical teaching, education providers gained consent from learners where

required, and had good 'opt out' mechanisms which did not disadvantage individuals.

- **Mandatory attendance and attendance monitoring** – Our standards require that education providers identify and communicate to learners the parts of programmes where attendance is mandatory, and that associated monitoring processes are in place (SET 4.11). This ensures that all learners who complete programmes meet the SOPs, by being fully involved in the parts of the programme which are essential to achieving them.
  - education providers were clear about which parts of programmes were mandatory – these linked to teaching and learning required to meet our requirements for registration.
  - learners are normally informed of attendance requirements through programme handbooks.
  - education providers have processes in place to monitor learner attendance, and intervene when there are potential attendance issues.

## Programme level standards

### Overall programme design

#### Our threshold requirements

Our standards require that:

- our standards of proficiency (SOPs) and our standards of conduct, performance and ethics are delivered and assessed through programmes (SETs 4.1, 4.2, 6.1 and 6.2);
- the integration of theory and practice is central to the programme (SET 4.5);
- learning and teaching methods used must be appropriate to the effective delivery of the learning outcomes (SET 4.6);
- delivery of programmes support and develop autonomous and reflective thinking (SET 4.7); and
- the delivery of programmes must support and develop evidence-based practice (SET 4.8).

These are important standards to ensure those who complete programmes are fit to practice, and that education providers keep their programmes under review to reflect changes in professional requirements and expectations.

Within the 2022-23 academic year, we assessed education providers proposals against our revised SOPs for the first time. All programmes needed to deliver the [revised SOPs](#) to new cohorts from September 2023.

## Approaches

All proposed programmes followed a modular structure, where competencies were delivered through teaching and practical experience, and assessed using a range of assessment methods (which are explored further in the assessments section). There were gateways between levels of study, where learners needed to pass certain elements of the programme before progressing, as is the normative expectation in higher education.

Education providers mapped their programmes to the requirements for registration (including the revised SOPs), by using a mapping tool we provide. This enabled them to show us how competencies would be delivered and assessed by proposed programmes. We assess this by engaging profession and (where required) modality specific partners, to make judgements based on their professional expertise. Normally, education providers link specific standards for registration to learning outcomes, and provide their module descriptors. These include detailed information about the competencies delivered, the methods for delivering competence, and assessment methods used.

Education providers had considered the teaching and learning methods needed to deliver their curricula, which included traditional lectures, group sessions, practical skills sessions and independent learning. We considered whether teaching and learning methods were appropriate for the areas delivered. We asked questions of education providers when it was unclear why specific teaching and learning methods had been used.

Practice-based learning was a key component of programmes and used to develop learner competence using underpinning academic learning. Practice-based learning was structured through programmes to enable learners to gain practical experience of the theoretical concepts they had learned in the academic setting. Examples of this approach include alternating academic learning and relevant practice-based learning via modular approach, which was explained in relevant programme specifications and module descriptors. There was normally a blended approach to delivery which enables learners to use a range of different teaching and learning methods across programmes.

Education providers showed how learners developing autonomous and reflective thinking is embedded through programme delivery. They use various methods such as lectures, practical work, simulation workshops and tutorials, to ensure learners were able to develop into autonomous and reflective practitioners. These learning and teaching methods were clearly explained within programme specification and module descriptors, enabling us to make a judgement about whether our requirements are met.

Many education providers developed new programmes for professions they already delivered via a different model of delivery. For example, education providers developed apprenticeship or masters programmes when they already delivered a direct entry or undergraduate route. In these cases, education providers used modular content from existing programmes, and considered / adapted its delivery based on the new model / level of learning.

As most programmes proposed were at bachelors and masters level, there was a requirement to undertake research in some form, to inform activities like a dissertation.

Education providers made clear links through programmes to evidence informing practice, and were clear with learners that evidence bases change over time. This enables learners to understand how to remain evidence informed when they transition to practice.

Some education providers used a spiral curriculum, where each layer of teaching becomes deeper to encourage integration of theory and practice to ensure learning outcomes are achieved. This is intended to develop learner knowledge and capabilities over the course of a programme, and contributes to autonomous and reflective thinking and integration of theory and practice.

## Key findings

Programmes were structured to deliver our requirements for registration, including ensuring learners were able to develop their skills, knowledge and experience through practice-based learning. Primarily, two types of programmes were proposed:

- Traditional taught programmes, where learners were situated at the academic institution with practice-based learning experience gained away from the academic institution.
- Apprenticeship programmes, where learners were situated at their employer who delivered most practice-based learning, with academic learning gained at the academic institution.

Programmes were designed embedding complimentary academic and practice-based learning to enable learners to develop the academic underpinning and practical skills to meet our requirements. This included ensuring practice is evidence based, through requirements to undertake research as relevant to the academic level of the programme.

## Considering the expectations of professional bodies and other organisations

### Our threshold requirements

Our standards require that programmes reflect the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance (SET 4.3). We do not require that curriculum guidance is always delivered by education providers, which is why we use the term 'reflect' rather than 'keep to.' However, we do expect education providers to have considered relevant curriculum guidance when designing their programmes, and to have made clear and explicit decisions when meeting or deviating from this guidance.

Where we have underpinning arrangements to do so, we work directly with professional bodies and others to inform our assessments, and our profession-specific partners understand the requirements of these bodies. This helps to inform our understanding of this area when applying our own requirements.

### Approaches

Most education providers showed commitment to aligning with professional body expectations through their submissions, and many programmes were also assessed by professional bodies alongside HCPC assessments. In these cases, education providers often explicitly mapped to the guidance of these bodies.

Sometimes, where professional body expectations and regulatory requirements link, education providers used meeting professional body expectations as evidence they meet HCPC standards. This is based on the misconception that HCPC standards are 'minimum' standards and professional body standards go beyond these. Where professional bodies ask for specific inputs (such as staff / learner ratios, and specific durations of practice-based learning), we need to consider whether education provider approaches are appropriate in the situation. This means that education providers need to have considered why their staff / learner ratio, or duration of practice-based learning (as examples) are appropriate in the situation, rather showing they have complied with specific metrics. In these situations, we worked with education providers to understand our requirements, and they were able to reason through their approaches to demonstrate how they met our standards.

Education providers also considered other frameworks, such as Institute for Apprenticeships and Technical Education (IfATE) professional standards and Ofsted requirements (for apprenticeship programmes), or the requirements of commissioning organisations (such as Health Education and Improvement Wales). Through this information, we were able to assess alignment to, and deviation from, the guidance and requirements of other organisations.

### Key findings

Education providers were aware of and usually aligned with the expectations of professional bodies and other relevant organisations. We welcomed consideration and alignment with these expectations, as it showed that education providers were considering professional norms in developing and delivering programmes.

When there were bodies that had regulatory or commissioning requirements of education providers, those requirements were central to programme design. We frequently saw alignment for apprenticeship programmes, and programmes centrally commissioned in Wales.

Sometimes, alignment with requirements was presented as meeting our standards in and of itself. We explored these areas with education providers to ensure our standards were met with these approaches.

### Currency of curricula

#### Our threshold requirements

Our standards require that programme curricula are kept current, in an ongoing way (SET 4.4). This enables us to consider how education providers take account of and reflect current practice within programmes, so they remain relevant and effective in preparing learners for practice.

#### Approaches

Education providers designed their programmes considering current practice, such as HCPC requirements for registration (including the most recent version of the SOPs), professional body curriculum guidance (where available), and the requirements of

commissioning organisations (such as Health Education and Improvement Wales) and / or employers (particularly for apprenticeship programmes).

They also involved stakeholder groups in designing programmes, such as service users and carers, employers, and existing learners for developing new provisions in professions already delivered by the education provider. Education providers are also leaders in the field of developing practice, and many education providers referenced their own research (and the research of others) to inform development of new provision.

We also saw structures in place to continually review curricula. Normally there were central frameworks for how this should happen, and mechanisms to review curricula on a regular basis. Again, stakeholders are involved in this development, to ensure there were a broad range of voices to consider how programmes should be developed in line with current practice.

### Key findings

Consideration of current practice informed programme design. This was enabled by education providers developing their curricula with stakeholder input, to meet regulatory requirements and normally professional body expectations. Mechanisms were inbuilt into quality assurance processes to ensure currency of programmes were continually considered, which normally included stakeholder input and active review of changing requirements and expectations of other bodies.



## SET 5 – Practice-based learning

### Institution level standards

HCPC-approved education providers proposing new programmes relied on cross-programme policies and processes for the practice-based learning standards set at the education provider level. These institution level standards have already been met through previous process interactions, and we made judgements that new provision aligned with existing provision based on what education providers told us through their approval request. This is in line with the two-stage approach to approval assessments.

These areas were as follows:

- **Quality and safety of practice-based learning** – Our standards require that there is a thorough and effective system in place for approving and ensuring the quality of practice-based learning (SET 5.3), and that practice-based learning takes place in an environment that is safe and supportive for learners and service users (SET 5.4). This ensures practice-based learning is of the required quality to support learners to progress through programmes, and that practice-based learning is undertaken in a safe environment.
  - systems were in place to ensure that practice-based learning is initially approved and regularly monitored, to ensure it is of good quality and undertaken in a safe environment.
  - there were normally well-established audit processes for practice-based learning, covering areas such as availability of experiences, supervision expected, and whether relevant policies and processes were in place to ensure a safe and supportive learning environment. Audit tools normally included ensuring that appropriate staff were in place in the practice setting.
  - these audits enabled education providers to make specific judgements on the quality of practice provision, and the safety of learners within that provision.
  - there were also normally mechanisms to gathering and acting on feedback from learners and practice educators.
- **Information for learners and practice educators** – Our standards require that learners and practice educators have the information they need in a timely manner to be prepared for practice-based learning (SET 5.8). This ensures clear expectations about practice-based learning are set and communicated to everyone involved.
  - education providers have mechanisms in place to set clear expectations for both learners and practice educators to ensure they are prepared for practice-based

learning.

- these expectations were normally contained through learner and practice educator handbooks.
- many education providers have individuals or teams to manage the placement experience. Their responsibilities include ensuring all involved in practice-based learning have the information they require to be prepared for practice-based learning.
- there was also normally documentation, such as practice assessment documents, which enabled practice educators and learners to understand specific requirements and competencies to be achieved.
- education providers also provided training for practice educators to support this area.

## Programme level standards

### Centralising practice-based learning in programmes

#### Our threshold requirements

Our standards require that practice-based learning is central to programmes (SET 5.1). This ensures that practice-based learning is used to prepare learners for practice.

#### Approaches

Education providers outlined how practice-based learning and academic learning were woven together through the duration of programmes. This ensured timely introduction of academic theory and learning into the practice-based learning environment. Some education providers outlined how new programmes would utilise existing policies / processes from existing HCPC-approved programmes. Often this information was contained through handbooks, module descriptors, programme specifications and practice assessment documents.

Some education providers discussed the regional context for practice-based learning capacity. They worked with local trusts and other education providers to secure sufficient and appropriate sites to ensure practice-based learning is central and integral to the programme. Education providers who already ran approved programmes in the same profession considered how the increased pressure on local services could be managed to ensure practice-based learning would be in place for new and existing programmes.

For degree apprenticeship programmes, education providers discussed how the model of delivery ensured practice-based learning was integral to the programme. For these programmes, 20% of the programme is academic learning via the education provider and 80% is based at the learner's employer. This meant that work-based, and practice-based learning occurred while in employment and was fundamental to the delivery model.

## Key findings

All proposed programmes planned to deliver practice-based learning, which was properly integrated with academic learning to support learners to meet our requirements for registration. There were two main approaches to this, linked to the two main types of programmes considered:

- traditional taught programmes, where learners were situated at the academic institution with practice-based learning experience gained away from the academic institution.
- apprenticeship programmes, where learners were situated at their employer who delivered most practice-based learning, with academic learning gained at the academic institution.

We were satisfied with the arrangements to ensure practice-based learning was central to programmes in both models.

## Structure, duration and range

### Our threshold requirements

Our standards require that the structure, duration and range of practice-based learning supports the achievement of the learning outcomes and the standards of proficiency (SET 5.2). This ensures that the way practice-based learning is designed allows learners to achieve the learning outcomes of the programme and the SOPs.

We do not set specific requirements to be adhered to, like the number of practice hours, or the range of settings. Instead, we ask that education providers are able to demonstrate how the structure, duration and range of practice-based learning is able to support learners to progress through the programme and meet our expectations for registration.

### Approaches

Education providers set out the number, duration, and range of practice-based learning that was required by the programme, and how this would be integrated into programme delivery. This was normally contained within programme handbooks and module descriptors for practice-based learning modules.

Some education providers outlined how they reflected relevant professional body guidance in terms of range and duration of practice-based learning. For example, some professional bodies recommend a certain number of hours is required to demonstrate competence in a particular area or over the duration of the programme. Professional bodies also often recommend areas in which practice-based learning should be undertaken. We do consider the expectations of other organisations, such as professional bodies, but similarly to our approach for other standards, do not hold education providers to these requirements.

Education providers discussed a wide range of practice-based learning opportunities, including:

- NHS settings relevant to the profession;
- emerging areas for the profession, such as non-ambulance placements for paramedics;
- private / independent / voluntary organisations; and
- particularly for degree apprenticeship programmes, employment sites and opportunities in different departments.

For degree apprenticeship programmes, employers were the practice education providers and therefore learners were employees. These programmes discussed the difference between work-based, and practice-based learning in relation to how these benefited the learner on the programme. They also discussed how they would ensure a range of practice-based learning, to ensure experience was gained outside of the employer of the learner / apprentice. This is important to ensure learners can access the range of practice-based learning required to meet our standards for registration.

### Key findings

Education providers had considered the number, duration, and range of practice-based learning required to support learners to achieve competencies required by the programme. This was different for different programmes, depending on the profession and the model of learning. All education providers were able to show how their intended number, duration and range of practice-based learning would effectively support learners.

### Staffing

#### Our threshold requirements

Our standards require that:

- there is an adequate number of appropriately qualified and experienced staff involved in practice-based learning (SET 5.5);
- those staff have relevant knowledge, skills and experience to support safe and effective learning and, unless other arrangements are appropriate, must be on the relevant part of the Register (SET 5.6); and
- those staff undertake regular training which is appropriate to their role, learners' needs and the delivery of the learning outcomes of the programme (SET 5.7).

These standards enable us to consider if learners are supported to take part in safe and effective practice-based learning.

### Approaches

Practice-based learning quality mechanisms, which included initial approval and regular audits of practice-based learning, considered the number of practice educators available to support

learners, and how those individuals needed to be qualified to effectively support learners.

Education providers occasionally provided curriculum vitae (CVs) which showed the knowledge, skills and experience of practice educators. In other instances, they outlined how they used CVs as part of their processes for determining capacity and suitability.

Many education providers discussed the initial and refresher training they provided for their practice educators. This was to ensure the practice educators understood the expectations of the role, were clear about the learning outcomes and objectives for the programme / specific placement, and the processes and lines of communication in place. This information was also often outlined in programme documentation, like practice educator handbooks.

Some education providers also provided training for potential practice educators, with the intention to drive up numbers of practice educators. This was when the education provider recognised there were insufficient numbers, or individuals wanted to learn more about the role before becoming a practice educator.

Some education providers explained how they managed the processes. For example, the internal roles responsible for recruiting, training and providing ongoing support to practice educators.

Some professional bodies deliver specific training for practice educators. A small number of education providers outlined how they required practice educators to undertake this training. However, in these cases, education providers also provided programme specific information through training and / or documentation for those practice educators. This is important, because although there are common skills required for practice educators, a key aspect of their preparation is knowledge and understanding of the specific programme, including what learners need to achieve in specific situations.

For degree apprenticeship programmes, employers were the practice education providers and learners were employees. For these programmes, contracts were in place between the education provider and employers to cover all aspects of the programme, for example admissions and support for the learner / employee. These contracts also included a requirement for the employer to ensure an adequate number of appropriately trained, skilled and experienced, individuals to act as practice educators.

## Key findings

Education providers had mechanisms in place to set out requirements for practice educators to ensure practice educators were able to effectively support learners. These included the audit mechanisms applying to practice-based learning including areas to actively consider the staffing of practice-based learning. We were confident that these mechanisms were appropriate to ensure learners are supported by appropriately qualified and experienced practice educators in practice-based learning.

Education providers recognised the challenges in this area, and that they had a role to play in driving up numbers of practice educators to support increases in learner numbers in the sector.

### Institution level standards

HCPC-approved education providers proposing new programmes relied on cross-programme policies and processes for the assessment standards set at the education provider level. These institution level standards have already been met through previous process interactions, and we made judgements that new provision aligned with existing provision based on what education providers told us through their approval request. This is in line with the two-stage approach to approval assessments.

These areas were as follows:

- **Objective and fair assessments** – Our standards require that assessments provide an objective, fair and reliable measure of learners’ progression and achievement (SET 6.3). This enables us to ensure that learners are fit to practice by the end of programmes.
  - objectivity and fairness in assessment was central to assessment strategies. All education providers had systems and mechanisms to ensure assessments are conducted in an objective and fair way to measure and determine learner performance.
  - education providers demonstrated how their assessment procedures were set up with objectivity and fairness in mind, with mechanisms such as marking criteria for staff, the use of plagiarism software, second marking and grade reviews, and the appointment of external examiners.
- **Progression and achievement** – Our standards require that requirements for progression and achievement through programmes are clearly specified (SET 6.4). This ensures that learners understand what is expected of them at each stage of programmes, and educators can apply assessment criteria consistently.
  - education providers had clear requirements for learner progression through programmes. These were set out in programme and module specification documents.
  - normally, there were ‘no condonement’ arrangements in place, due to the nature of programmes needing to deliver the full range of competencies as required by our standards. This means that it is not possible for learners to fail certain elements of the programme and still achieve the academic award that leads to registration.
  - there were normally well defined ‘gateway’ points in programmes, such as a

certain assessment being passed before learners could progress to practice-based learning. This is particularly important, when ensuring the safety of service users who will come into contact with learners.

- **Academic appeals** – Our standards require that there is an effective process in place for learners to make academic appeals (SET 6.6). This ensures that assessment processes are applied fairly, and that learners have a mechanism to appeal when they feel they have not been.
  - these are processes which clearly explain how learners can make academic appeals at the institutional level. These can be found in academic regulations, and complaints policies and procedures.
- **External examiners** – Our standards require that there must be at least one external examiner for each programme, who is appropriately qualified and experienced and, unless other arrangements are appropriate, on the relevant part of the Register (SET 6.7). This is to ensure there is an appropriate person in place, and that the education provider has a mechanism for ensuring this role is filled on an ongoing basis.
  - all programmes had at least one appropriately experienced external examiner in place, and mechanisms to replace external examiners when needed.
  - most external examiners appointed were HCPC registrants from the profession, and where this was not the case, the education provider was able to describe how their alternative arrangements were appropriate, for example more than one external examiner who between them cover the knowledge base required.
  - external examiners' feedback is considered through quality mechanisms such as programme boards, and they are provided with appropriate training and support.

## Programme level standards

### Assessment design and application

#### Our threshold requirements

Our standards require that a programme's assessment strategy and design ensures those who successfully complete programmes meet the our requirements for registration (SETs 6.1 and 6.2). Assessment methods used must also be appropriate and effective at measuring the learning outcomes (SET 6.5). These standards ensure those who complete programmes meet our requirements for registration.

#### Approaches

Education providers demonstrated how proposed programmes were structured to ensure learners who complete programmes meet our standards for registration. They set out their assessment strategy, and for all education providers, set out clearly how each learning outcome was to be assessed to ensure competence. Normally, information

about the strategy was included in programme specification documentation, and the detail about how this strategy was to be delivered was contained through module descriptors.

Education providers often approached the assessment of learning outcomes in a similar manner. They used a range of assessment tools and techniques to ensure learning outcomes are assessed appropriately. These included formative and summative assessments, which informed progression through the programme, and a view of competence for each learner. Education providers assessed using traditional academic techniques, including written, multiple choice, and oral examinations, essays and vivas, and techniques focused on practical skills or practice-based learning, such as objective structured clinical examinations (OSCEs), reflective accounts, and case studies.

### Key findings

Assessments were designed to measure achievement of the learning outcomes, which education providers clearly linked to our requirements for registration. Assessments were undertaken through programmes, to ensure learners had the skills, knowledge and experience required to progress to the next stage of the programme. We saw a range of techniques used, appropriate to the areas being assessed, and are confident that education providers have the mechanisms in place to ensure only those who are fit to practice complete programmes.



# Appendix 2

## Performance review assessment findings – detailed analysis

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## Appendix 2 – Performance review assessment findings – detailed analysis

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Through performance review assessments, we undertake periodic, proportionate engagement with education providers, to understand their performance and the quality of their provision. We seek to gain assurance about the education provider's continued alignment to our education standards. Through an assessment, we decide when we next need to engage with the education provider, and set a review period of between one and five years. This is based on risks, potential issues, and when those might need exploring. As part of this, we will consider significant issues, and where education providers do not meet our standards we can withdraw approval.

Education providers complete a portfolio covering a set of themes we consider are important to demonstrate ongoing quality of their education provision for the programmes we approve. These themes are linked to our standards, sector developments and initiatives which may affect the quality of education provision. Where available, we also ask education providers to reflect on performance data points linked to the numbers of learners, learner non-continuation, outcomes for those who complete programmes, and learner satisfaction. These data points give us metrics-based information about how education providers are performing linked to these areas (normally in comparison to a benchmark), and over time whether there are changes in that performance.

The portfolio and data points enable us to form a risk-based view of education provider performance, and to identify and support education providers who may not be performing as they need to. Ultimately, we can trigger regulatory interventions if there are risks to learners not meeting our standards on programme completion. Education providers need to share challenges, how they have overcome them, and their successes, which enable us to fully inform our view on performance.

Through this section, we have summarised:

- the purpose of each portfolio area;
- our threshold requirements which should be in place, as set out in our standards;
- education provider approaches in each portfolio area; and
- the developments and challenges that education providers reported to us.

We have provided our view on best practice where possible, and provided key findings for each area. This is intended to provide a 'state of the nation' view for the education providers and programmes we approve.

# Appendix 2 contents

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<b>Portfolio theme – institution self-reflection</b>	<b>92</b>
Portfolio area – resourcing, including financial stability	92
Portfolio area – partnerships with other organisations	94
Portfolio area – academic and placement quality	96
Portfolio area – interprofessional education	100
Portfolio area – service users and carers	103
Portfolio area – equality and diversity	107
Portfolio area – horizon scanning	110
<b>Portfolio theme – thematic reflection</b>	<b>112</b>
Portfolio area – embedding the revised HCPC standards of proficiency (SOPs)	112
Portfolio area – impact of COVID-19	116
Portfolio area – use of technology: changing learning, teaching and assessment methods	119
Portfolio area – apprenticeships	121
<b>Portfolio theme – sector body assessment reflection</b>	<b>125</b>
Portfolio area – assessments against the UK Quality Code for Higher Education	125
Portfolio area – assessment of practice education providers by external bodies	127
Portfolio area – Office for Students	129
Portfolio area – other professional regulators / professional bodies	131
<b>Portfolio theme – profession specific reflection</b>	<b>134</b>
Portfolio area – curriculum development	134
Portfolio area – development to reflect changes in professional body guidance	135
Portfolio area – capacity of practice-based learning (programme / profession level)	137
<b>Portfolio theme – stakeholder feedback and actions</b>	<b>139</b>
Portfolio area – learners	139
Portfolio area – practice placement educators	141
Portfolio area – external examiners	143
<b>Portfolio theme – data</b>	<b>146</b>
Our use of data through performance review	146
Education provider reflection on supplied data points	146
Education providers not included in external supplies	147

## Portfolio theme – institution self-reflection

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For this theme, we asked education providers to reflect on their own performance and approach across several areas. These areas are linked to our standards and are integral to continued programme quality.

### Portfolio area – resourcing, including financial stability

#### Purpose

Enables us to consider the education provider's financial and resource modelling and outcomes, linking to sustainability of their provision.

#### Our threshold requirements

- there are mechanisms in place to consider resourcing, including financial stability, in an ongoing way (SET 3.1).
- programmes are sustainable for all learners currently enrolled, and any future cohorts, through to learner completion (SET 3.1).
- practice-based learning capacity is considered when making judgements and decisions to increase learner numbers (SET 3.6).

#### Approaches

All education providers have mechanisms in place to consider resourcing, including financial stability. At higher education institutions (HEIs), these are embedded into cyclic validation and review activities. Many education providers run an annual planning exercise, where they consider data about applicants and learners (including retention), partner organisations (such as number of placement opportunities), and competitor institutions. This helps education providers understand workforce need and training capacity, to ensure staff and learner recruitment in line with staff / learner ratio expectations, and within other resource conventions.

Education providers have different financial models, which are either linked to centralisation (or lack of) of funding within nations, the type of organisation, and / or they type of education provision. With some exceptions, for the professions we regulate:

- english HEIs are market driven, but operate within constraints primarily linked to the availability of practice-based learning.

- northern Irish, Welsh<sup>1</sup> and Scottish HEIs are generally commissioned to deliver training from devolved governments and / or health services.
- some other types of organisations have directly commissioned numbers from national sources.
- professional body programmes sit within a broad portfolio of the work of the body, and fees from professional programmes often cover operating costs for those programmes.
- for private organisations, education is often a small part of income – this is seen as investment in the next generation of employees.

External commissioning comes with an additional layer of scrutiny. Education providers presented ongoing engagement with the requirements of commissioning organisations as integral to their continued sustainability, and an influencer on quality.

Some education providers discussed potential programme proposals through this section. Although we did not explicitly review new programmes through this process, it was helpful for us to hear about potential expansion through performance review, as it helps us to plan approval assessments with education providers, and to understand context when we receive formal requests.

## Developments and challenges

Education providers generally presented a balanced view through this section. They often noted that there are financial issues within the sector (explored further below), and that they need to operate within a budget. They also recognised that continued investment is needed to ensure provision is attractive and delivered to high quality. Investments reported were normally physical, such as skills facilities. These were usually to replace existing facilities to ensure they are up to date, or as part of investment for new programmes.

Specific challenges highlighted by education providers were:

- a loss of income due to the COVID-19 pandemic, but this was generally due to a loss of campus activities impacting the use of accommodation and campus facilities, rather than the revenue of specific programmes.
- the relative value of learner fees for HEIs in England. As these fees are set centrally, and have not been raised significantly since they were introduced, education providers have felt a 'squeeze' in finances due to inflationary pressures. To combat this, education providers have needed to think innovatively about programme resourcing and delivery, but this challenge has also led to some programmes being less viable.
- there are consistent challenges with maintaining and increasing the numbers of academic staff to maintain staff / learner ratios, or when delivering new programmes. Education providers are generally able to recruit and fulfil commitments in interim

1. We did not review any Welsh HEIs in the two-year period reviewed through this report, due to a commissioning exercise concluding for AHP provision in the 2021-22 academic year which resulted in five approval assessments for Welsh education providers in this year. We decided to review all Welsh education providers in the 2023-24 academic year, so we could consider the impact of the commissioning exercise, and anything which linked back to our approval assessments.

periods, by enacting contingency planning (such as using visiting lecturers), however this solution does not work long term, and there were occasions where education providers were not able to resource as intended.

Education providers have saved costs through modernising and digitising initiatives, and outsourcing areas of their operations. This saves academic staff time, and enables more focus on programme delivery and quality. In turn, staff / learner ratios can be reviewed, to consider viability of increases in learner numbers, or reductions in permanent staff numbers.

Learner numbers presented opportunities and risks / issues. Often education providers aspired to increase learner numbers, and presented increased numbers as positive, or due to / to facilitate investment. There was also sometimes a focus on 'growing income' through learner fees. Where education providers can demonstrate a maintenance of quality in growing provision (through investment in staff and resources, and where this is supported in the practice setting), we are satisfied. Sometimes these areas were not fully explored by education providers in their initial reflections, and in these cases, we needed assurance that increasing learner numbers did not come at the expense of quality, and growth did not happen without relevant investment.

Some education providers in England noted restrictions on growth, due to the capacity of practice-based learning and increased competition in the market. Capacity of practice-based learning is an important consideration for education providers when making judgements and decisions to increase learner numbers and when proposing new programmes. This is a core part of our regulatory assessment, and without satisfying these requirements, programmes cannot be (or remain) approved.

## Key findings

We found that education providers who are cognisant of the current landscape, internal and external initiatives / challenges, and their own data, are best equipped to manage their resources and finances. Planning is key to this, and understanding the environment and specific situations help education providers plan, and deliver on those plans. For example, new provision can facilitate investment in physical resources, but comes with challenges of staff recruitment and availability of practice-based learning. Understanding and planning to mitigate these challenges is a key part of ensuring there is a return on investment, and that programmes remain fit for purpose.

## Portfolio area – partnerships with other organisations

### Purpose

Enables us to consider how partnerships with other organisations have developed from a governance and management perspective, to deliver programmes effectively.

### Our threshold requirements

- there are strategic partnerships in place with relevant organisations, such as practice partners, employers and / or commissioners, which ensure that programmes are well resourced, and keep quality high (SET 3.1).

- structures are set and followed at an operational level, to manage different aspects of programmes where partners are involved (SETs 3.2 and 3.5).

## Approaches

Based on previous assessments, we are confident appropriate partnerships are in place to deliver programmes. Through performance review submissions, education providers often focused on:

- how existing partnerships were maintained to ensure their provision is continually improved and enhanced; and
- new partnerships established, including how they support their programmes.

Education providers have partnerships with many different organisations, including:

- practice education providers across a range of organisation types – often there were two approaches to engagement for these partnerships, in forum-type settings, and one to one with each partnership;
- professional bodies, normally focused on accreditation of professional programmes, and on informing professional expectations of professional bodies through feedback and engagement;
- other education providers delivering HCPC programmes – often these partnerships are well established and are focused on coordination, especially related to practice-based learning;
- government departments, the NHS, and commissioning organisations, to influence policy, and related to commissioning;
- employers, where education providers deliver apprenticeship programmes. This is a different type of partnership to those established with practice education providers, as the focus is on the education provider being a ‘customer’ of the employer. Often, employers deliver the majority of practice-based learning for linked apprenticeship programmes and will also normally deliver practice-based learning for non-apprenticeship programmes. In these cases, there were two types of partnership relationships to maintain with the same organisation, which introduces complexities to the relationship;
- several education providers mentioned membership bodies, like the Council of Deans of Health (CoDoH);
- where non-HEIs have a HEI as a validating body, this was referenced as a crucial partnership; and
- a small number of education providers mentioned partnerships with service user representative groups – we have explored service user input into education provision in a later section.

Formal partnership working arrangements are often defined through memoranda of understanding (MOUs) and service level agreements and are normally goal-oriented, with a specific focus for each partnership / group. We consider this is what good partnership working looks like – formal arrangements which clearly define objectives, expectations, and responsibilities, which are supported by clear and auditable engagement procedures. We were also pleased to see problems being identified and fixed through partnership working. Education providers were normally open about challenges faced, and solutions enacted. Many education providers have or were establishing specific roles to manage partnership relationships, which is also helpful to ensure strong partnership working.

## Developments and challenges

Some education providers noted they needed to introduce new partnerships with increased competition to manage practice-based learning. COVID-19 also affected the smooth running of some partnerships, and established structures with partners were essential in the pandemic response. On occasion, partnership working led to initiatives such as in-house clinics which are used as a resource for learners at the education provider, and to provide practice-based learning experience to professional learners.

## Key findings

Across education providers, partnership working was understood as integral to the running of programmes. All education providers had identified and were maintaining partnerships, as required by our standards, and most were performing well in this area.

## Portfolio area – academic and placement quality

### Purpose

Enables us to consider how assessment of academic and placement quality has been used to drive improvements.

### Our threshold requirements

- academic quality is central to programmes (SET 3.4).
- a multifaceted approach to quality is in place, which covers all areas of programmes (SETs 3.4 and 5.3).
- data (such as feedback data and quality metrics) is used to inform decisions about quality assurance and enhancement, in the academic and practice settings (SET 3.4).
- external examiners are in place, who regularly report on the quality of programmes, and that feedback is used to improve (SET 6.7).
- systems are in place to consider external reviews of practice education providers (SET 5.3).

### Approaches

Education providers often split this section in two, as policies and processes, and education



provider reflections were usually different for academic and placement settings. In portfolios for education providers engaging from 2023-24 onwards, we have split this section in two to better facilitate reflections for the two distinct areas.

Education providers recognise the importance of quality and noted they were committed to understanding and enhancing the quality of their provision. Education providers noted a range of reasons for centring quality in their work, including a focus on public protection and employability of graduates (and the reputational risks should either of these areas be compromised) and aligning with internal, regulatory, and professional body expectations. When education providers were considering new or innovative ways of doing things, quality was normally central to their thinking.

### Developments and challenges

There was a split in education providers, with some running a 'continuous improvement' approach to quality, and some running a cyclical review model. Continuous improvement is a responsive approach to quality improvement, enabling data, information, and feedback to be acted upon quickly (often stripping out unnecessary bureaucracy) to have timely impact for stakeholders. Cyclical reviews tend to have specific windows within which data, information and feedback are considered and acted upon for implementation in the next periodic cycle.

The continuous improvement model is seen by many as best practice within the sector, with multiple education providers moving to this approach within their review periods, and no education providers moving the other way.

Within both models, the following mechanisms were often used by education providers:

- set, and review provision against, internal quality standards;
- ongoing or regular reviews of provision, including learner feedback and module-level reviews;
- internal governance arrangements to interrogate and sign off developments and change;
- review of provision by external examiners, resulting in feedback and actions; and
- defined quality arrangements for practice-based learning – such as initial and ongoing review and sign off of practice learning providers, and embedding of these arrangements into contracts (as referenced in the partnerships section).

For non-HEI education providers, recognised standards and frameworks are less likely to exist or are not accessible to them as organisations. This is allowable within our education standards, and we are comfortable with education providers demonstrating how they monitor and enhance quality outside of HEI frameworks. This does present some challenges for non-HEI education providers in maintaining quality and in demonstrating to others (including HCPC) that they are doing so.

Some education providers reflected on introducing mechanisms we would expect to already be in place, for example initial approval of practice learning providers, and mechanisms to capture the feedback of individuals. Normally non-HEI education providers had moved to having these mechanisms in place within their review periods, so we did not need to take any action to ensure education providers were aligned with regulatory requirements.

Education providers often noted that operational responsibility for running quality processes sits with specific roles, many of which were created with a pure or partial focus on quality.

## Data and intelligence

All education providers used data and intelligence in some way, usually to assess quality, inform actions and (less frequently) to measure the success of interventions. Sometimes data was continually monitored with escalation required when certain thresholds were reached. Some education providers used data as a starting point, with further interventions and feedback mechanisms used to explore results with stakeholders. This helped education providers fully understand problems and come to better solutions, and we consider this good practice in this area.

Data and intelligence used included:

- feedback surveys from individuals at key points, such as learners and practice education providers;
- internal academic data sets (eg. to understand continuation rates by protected characteristics);
- National Student Survey (NSS) results (only applicable for undergraduate programmes at HEI education providers), broken down to the profession or programme where this was useful;
- National Education and Training Survey (NETS) results (only applicable for HEI education providers in England), focused on learner experience of practice-based learning. Some education providers commented that it was difficult to interpret results with low response rates for the exercise; and
- Care Quality Commission (CQC) reports, to enable intervention, and if needed removal of learners, where practice education providers were failing.

Linked to the above point about the NETS survey, some data was hampered by poor response rates or feedback fatigue. Education providers often made internal improvements to drive up response rates, but they are not in direct control of external exercises, such as NETS.

## Alignment with external mechanisms

Education providers referenced or aligned to quality mechanisms set by other organisations:

- where professional bodies set expectations for education and training:
  - these requirements were often used as a marker of quality. For example, with expectations for practice-based learning, specific expectations were often considered as a required threshold by the education provider.
  - a ‘sign off’ from the professional body was seen as important when education providers were making changes to curricula or other academic areas.
- UK Quality Code for Higher Education (which although sometimes referenced here, was included in another portfolio area for relevant education providers);
- a small number of education providers mentioned Office for Students (OfS) standards;
- Quality Assurance Agency (QAA) subject benchmark statements;
- some education providers mentioned the NHS Education Contract 2021-2024, which is the “formal mechanism for the relationship between [Health Education England] HEE<sup>2</sup> and [practice education] providers<sup>3</sup>”;
- education providers valued regional groups (for example regional groups run by NHS England Workforce, Training and Education (NHSE WT&E) Directorate aimed at refining audit processes and addressing issues;
- where there was apprenticeship provision, Office for Standards in Education, Children’s Services and Skills (Ofsted) requirements; and
- non-HEIs who had validating arrangements with an HEI were required to report on quality to their validating body.

## Key findings

Quality is a central consideration for education providers, and they are maintaining the quality of their programmes well. This is important because quality of provision has a direct impact on learners meeting our regulatory requirements and becoming professionals who are fit to practice.

There are different approaches to quality, but broadly speaking, education providers have a multifaceted approach which covers all areas of programmes and partnerships. There were very few education providers which were underdeveloped in this area, and all education providers were able to demonstrate continued alignment with our standards through this exercise. For the small number of education providers with gaps, they had always identified those gaps and had implemented appropriate solutions.

2. Health Education England merged with NHS England in 2023, as the functions performed by HEE are now undertaken by NHSE’s Workforce, Training and Education directorate

3. [New NHS Education Contract | Health Education England \(hee.nhs.uk\)](https://www.hee.nhs.uk)

## Portfolio area – interprofessional education

### Purpose

Enables us to consider how interprofessional education (IPE) helps learners to inform their future practice for the benefit of service users.

### Our threshold requirements

Through their education and training, learners must be prepared to work with other professionals and across professions for the benefit of service users and carers. Good interprofessional learning can develop learners' ability to communicate and work with those outside their own profession, ultimately improving the environment and quality of care for service users. One of our standards of education and training (SETs) requires that "learners are able to learn with, and from, professionals and learners in other relevant professions." (SET 4.9).

When we revised our SETs in 2017, we added this requirement and it became effective for all education providers from September 2018. We assessed how education providers had embedded interprofessional education (IPE) into their programmes via the annual monitoring process in our previous education quality assurance model, and decided that all programmes met our requirements. That review focused on the programme level, in line with the requirements of our previous model. Reviewing through our performance review process has enabled us to consider IPE at the institution level, which lends itself to better consideration of IPE approach (which is by nature, cross programme).

IPE in training is integral to the delivery of our standards of proficiency (SOPs)<sup>4</sup>, where learners are required to demonstrate knowledge, skills and behaviours such as:

- identify the limits of their practice and when to seek advice or refer to another professional or service (SOP 1.1);
- make and receive appropriate referrals, where necessary (SOP 4.4);
- work in partnership with service users, carers, colleagues and others (SOP 8.1);
- recognise the principles and practices of other health and care professionals and systems and how they interact with their profession (SOP 8.2);
- understand the need to build and sustain professional relationships as both an autonomous practitioner and collaboratively as a member of a team (SOP 8.3); and
- contribute effectively to work undertaken as part of a multi-disciplinary team (SOP 8.4).

There was some inconsistency in how we applied our expectations in this area, particularly considering what good looks like (as opposed to meeting threshold expectations). We would benefit from developing framework guidance to enable more consistent consideration of education provider performance in this area.

4. [Standards of proficiency I \(hcpc-uk.org\)](https://www.hcpc-uk.org/standards-of-proficiency-1)

## Approaches

From our review, this was an area where some education providers were less developed than we expected, and / or were not able to sufficiently articulate their reflections through their submission. This was at times impacted by education providers finding it difficult to articulate how their IPE functioned, and / or difficulties in reflecting on developments and challenges in this area.

This may link to findings from our annual year in registration survey, with 7% of respondents from the last survey reporting they did not engage with other professions during their training, and 6% reporting engagement did not positively impact on their practice<sup>5</sup>.

We found that education providers delivering one health or care profession needed to work harder and think differently to embed IPE when compared to education providers delivering multiple health and care professions. This does not apply to just HCPC-regulated professions – we found that education providers delivering non-HCPC-regulated professions such as nursing, pharmacy, or teaching (as examples) found it easier to embed IPE into programme delivery.

Particularly, we found strong IPE practices at education providers delivering several allied health professions which were sat within the same administrative division. These divisions often had overarching IPE leadership, policies and procedures. Many education providers had a lead role for IPE, and we saw lots of good practice such as IPE embedded into learning outcomes.

IPE was generally at its strongest when it was considered as a key part of institution / division strategy, meaning it was properly integrated in programme delivery and quality enhancement. It was generally at its weakest when it was seen as a supplementary initiative added to programmes.

Working with professionals and learners from other professions in practice learning settings can be a part of good IPE, as demonstrated by education providers who adequately prepared learners and practice educators, and ensured learner reflection about interprofessional engagement.

We also saw many examples where IPE was well structured into programme delivery and assessment. For example, delivery of sessions about multi-disciplinary teams by staff with different professional backgrounds, multi-professional learner groups discussing case studies, and structured assessments focused on multidisciplinary team situations.

Some education providers have referenced external organisations, frameworks and initiatives which enable and support IPE, such as:

- the Centre for the Advancement of Interprofessional Education (CAIPE);
- professional body expectations;

5. [Year in Registration survey 2023 - highlights report I \(hcpc-uk.org\)](https://www.hcpc-uk.org/registration-survey-2023-highlights-report/)

- the Heart and Sole movement, especially relevant to chiropodists / podiatrists and physiotherapists within HCPC professions; and
- Schwartz Rounds which “provide a structured forum where all staff, clinical and non-clinical, come together regularly to discuss the emotional and social aspects of working in healthcare”<sup>6</sup>.

We consider it helpful when education providers use external frameworks and work with other industry bodies, as this shows they are considering good practice when developing their own approaches. This enables new thinking and ideas to inform education provider initiatives.

### Developments and challenges

Education providers were comfortable in reporting problems with their IPE approach and where their approach needed development. This shows education providers are transparent through the process, and enables them to show they have identified problems and are working on them, which is a strength of good quality assurance.

Common problems included:

- logistical challenges of aligning timetables to facilitate face-to-face engagement; and
- problems driven by changes to onsite teaching and practice-based learning due to the COVID-19 pandemic – particularly that opportunities for cross-professional interactions were reduced with a move to virtual teaching and practice-based learning.

Some education providers had identified weaknesses in their IPE through internal and external reviews and were making improvements. For example, some education providers identified that learners engaging with a broader range of professional groups would be beneficial. In these cases, education providers identified other relevant professions from different divisions within the education provider, which might not be naturally aligned within their school or faculty (eg. speech and language therapists with teachers and / or educational psychologists).

We also made suggestions through assessments where it was appropriate for us to do so, for example, where single profession education providers could find collaboration opportunities with other regional education providers.

We identified several common pitfalls in education providers’ approaches to embedding IPE, or with what they referred to within this area:

- ‘chance encounters’ (rather than structured engagement) with other professionals / learners, without supporting structures to ensure learners are learning ‘with and from’ others (as required by the standard);
- learning about other professions within academic sessions, without the involvement of those professions;

6. [About Schwartz Rounds - Point of Care Foundation](#)

- learning about cross professional areas alongside other professions, rather than engaging with them;
- for some education providers, particularly those who deliver one profession, those with portfolio-type routes, or where practice learning is identified by the learner, there was reliance on learners identifying their own opportunities for IPE within practice, and this being reflected upon. If properly managed, this could meet regulatory thresholds, but close management was not always a feature of these arrangements – we followed this up with education providers and set further requirements to ensure this area was addressed, where required; and
- perception or presentation by education providers, and / or understanding by learners, that IPE is not a ‘core’ activity – this incorrect assumption was often strengthened by (at least some) IPE activities being optional rather than mandatory.

Some education providers referenced utilising (and helping to develop) skills of learners outside of health and care professions, such as drama / theatre studies programmes providing actors for role play sessions, film students making films to be discussed by learners in interprofessional sessions. This requires good preparation of others and quality control of materials, to ensure positive impact on the learning of health and care learners. However, this was not an example of interprofessional education in professions relevant to HCPC professions (as required by the standard).

### Key findings

Most education providers showed good IPE through their reflections, which positively impacted on learning linked to the SOPs. Where there were gaps in this area, education providers had often identified these gaps as areas for improvement, and were working on developing their IPE. Where gaps remained, we set expectations for education providers to improve in the short term or as part of their next portfolio submission, and this was considered in review periods we established through assessment outcomes.

## Portfolio area – service users and carers

### Purpose

Enables us to consider how education providers have continued to involve service users and carers, to contribute to the overall effectiveness of programmes.

### Our threshold requirements

- A clear definition of who service users and carers are, relevant to the professions delivered.
- Policies and processes are in place to ensure service users and carers contribute to programmes.
- Service users and carers are supported to undertake their role(s).
- There are processes in place to plan, monitor and evaluate involvement.

Our standards require that “service users and carers must be involved in [programmes]” (SET 3.7). We introduced this requirement into our SETs in 2014. We assessed how education providers integrated service user and carer involvement into their programmes via the annual monitoring process in our previous education quality assurance model and decided that all programmes met our requirements through this assessment. The review focused on the programme level, in line with the requirements of our previous model, so was limited in scope. The reviews did not enable us to consider broader service user involvement strategies, but instead focused on more granular involvement at the programme level. Reviewing through our performance review process has enabled us to consider service user and carer involvement at the institution level, which lends itself to better consideration of the education provider’s overall approach.

This area is particularly important currently with the introduction of our revised standards of proficiency (SOPs), which became effective from September 2023. A key theme within the revisions is to [‘further centralise the service user’](#) within practice, and we consider good service user involvement within training provision as important to support this theme.

Similarly to the IPE section, there was some inconsistency across assessments in how we applied our expectations in this area, particularly considering what good looks like (as opposed to meeting threshold expectations). Although we had the option to, we did not directly engage with service user groups at education providers through quality activities linked to this area. This is an area we can improve on, to ensure we are properly exploring potential problems, and triangulating information given by the education provider. We would benefit from developing framework guidance to enable consistent consideration of education provider performance in this area.

We have a ‘service user expert advisor’ partner role, and we engaged these partners to review service user involvement at education providers, focused on the following areas:

- how education providers ensured underpinning policies are complied with;
- outcomes from monitoring of service user involvement;
- service user feedback and actions taken;
- potential risks; and
- innovations

Service user expert advisors were crucial to our reviews in this area, providing important insight from the service user perspective. This feedback and insight was used by lead visitors to inform their judgements about this portfolio area.

## Approaches

From our review, this was an area where some education providers were less developed than we expected and / or were not able to sufficiently articulate their reflections through



their submission. This was at times impacted by education providers misunderstanding what good engagement looks like, finding it difficult to articulate who relevant service users and carers are, and / or reflecting on developments and challenges in this area. Education providers did not routinely set out a clear vision for service user involvement or provide clarity about what they were trying to achieve.

This may link into findings from our annual year in registration surveys with 9% of respondents from the last survey reporting they did not engage with service users in the academic setting and 6% disagreeing that service users supported learning in a structured way<sup>7</sup>.

Similarly to IPE, service user and carer involvement was most effective when it was considered as a key part of institution / division strategy, meaning it is properly integrated into various aspects of programmes and the way the institution / division functions. It was generally at its weakest when it was seen as a supplementary initiative added to programmes.

We found that education providers with a more ‘hands off’ academic approach, for example those delivering portfolio-based routes, or programmes where learners were more independent, needed to work harder to integrate service users and carers into their provision. Within more traditional HEI provision, there was a broad range of involvement, from basic non-structured involvement (which could sometimes be tokenistic), to service users thoroughly integrated into multiple aspects of programmes in a strategic way.

We often saw established central groups drawn upon by programmes to provide specific involvement within education provider frameworks, with service users and carers involved in:

- a wide range of learner-facing areas (such as in admissions, delivery of content, assessments and fitness to practice panels);
- governance (ranging from advisory groups to integration of service users and carers within a wide range of groups with differing functions);
- quality improvement (such as with design and development of programmes, and the production of policies – again involvement was wide ranging from single point consultation through to co-production); and
- less frequently, service users and carers were involved in research.

We also saw lots of good practice, such as

- internal lead roles responsible for developing service user and carer involvement strategy (with service users and carers), and co-ordinator roles to manage involvement and logistics;
- measuring success embedded into reporting;
- payment for service users and carers, above and beyond expenses (which is seen by some service users as essential, rather than ‘good practice’);

7. [Year in Registration survey 2023 - highlights report I \(hcpc-uk.org\)](https://www.hcpc-uk.org/registration-surveys/2023-highlights-report-1)

- support for service users and carers, in the form of training and preparation for sessions, practical support for attendance, and risk assessments where required;
- contingency planning if things went wrong, such as unexpected unavailability for a learner session;
- wellbeing considerations for learners and service users and carers built into learner sessions; and
- feedback from service users and carers and others being acted on, to further embed involvement, with good communication of changes made in response to feedback.

Education providers also referenced external frameworks, standards and organisations to inform service user and carer involvement, such as:

- the requirements of other regulators;
- professional body expectations; and
- regional groups, which represent service user and carer interests in geographic areas.

### Developments and challenges

We identified several common pitfalls in education providers' approaches to involving service users and carers:

- reliance on a small number of individuals;
- too narrow a range of experiences within service user groups;
- ill-defined staff responsibilities to support, integrate, and optimise service user and carer involvement;
- uncoordinated approaches to involvement, which were not underpinned by clear objectives, a service user strategy, and / or the required resources to support; and
- impact of involvement was not evaluated in a structured way.

Some of these pitfalls can contribute to sustainability issues. When good practices reside with individuals (service users and / or staff) rather than through policies and structures, practices and momentum is lost when people move on. There is also a linked challenge in balancing service users and carers who are able to contribute (with the support and level of institutional understanding needed to do this), and over-institutionalisation which can affect the ability of an individual to contribute to topics with the service user and carer perspective.

Education providers were comfortable in reporting problems with service user and carer involvement, and where their approach needed development. This shows education providers are transparent through the process and it enables education providers to show they have identified problems, and are working on them, which is a strength of good quality assurance.

COVID-19 pandemic restrictions presented challenges for the continuation of service user and carer involvement. Specific issues included the initial move to online delivery, and accessibility of online services for service users and carers. When restrictions eased, service users were more likely to be in vulnerable categories, so face-to-face sessions were more difficult to arrange. This often led to prolonged suspension of activities, some of which have only recently been returned to pre-pandemic levels. Education providers able to adapt more quickly to the pandemic, and bounce back from reduced involvement, are those with service user and carer involvement embedded into their provision, rather than those who saw involvement as an additional part of programmes.

Recruitment and retention can also be an issue for education providers, but this was sometimes presented as an explanation for small groups or narrow ranges of experiences, rather than a problem to be solved to improve service user and care involvement.

Some education providers used simulation as an example of service user involvement. Although service user input into the development of simulation is service user involvement, the continued use of materials / technology produced with service user input is not in itself service user involvement.

## Key findings

All education providers involved service users and carers in some way at the institution and / or programme level, and most were able to demonstrate how this involvement positively impacted on learning linked to the SOPs. Where there were gaps in this area, education providers had often identified these gaps as areas for improvement and were working on developing their service user and carer involvement. Where gaps remained, we set expectations for education providers to improve in the short term or as part of their next portfolio submission, and this was considered in review periods we established through assessment outcomes.

## Portfolio area – equality and diversity

### Purpose

Enables us to consider how education providers have ensured underpinning equality, diversity and inclusion (EDI) policies are complied with, the outcomes from monitoring, potential risks, and current differential attainment and mitigation plans.

### Our threshold requirements

- There must be equality and diversity policies in place in relation to applicants, and that these policies must be monitored (SET 2.7).
- Programmes must implement and monitor equality and diversity policies in relation to learners (SET 3.14).
- Education providers must comply with legal responsibilities in this area (SET 3.14).

This area is particularly important currently, with the introduction of our revised standards of proficiency (SOPs) from September 2023. We [significantly expanded the role of EDI in our SOPs](#), placing specific importance on making sure that practice is inclusive for all service users. We consider strong EDI policies at education providers important to support learners, and to underpin delivery of the SOPs.

We aim to enable adoption of good practice frameworks through our work. In performance review in 2023-24, we asked education providers to consider reflecting on the OfS Equality of Opportunity Risk Register<sup>8</sup> and the Council of Deans of Health (CoDoH) report on Anti-racism in Allied Health Professional (AHP) Education<sup>9</sup>. We should be able to report specifically on adoption of these frameworks through future reports.

## Approaches

From our assessments, education providers meet and deliver these standards. They are aware of their legal responsibilities in this area and have institution-level strategies / high level commitments in place related to EDI. Strategies are aimed to ensure education providers are inclusive and fair in their activities, focused on areas such as learner recruitment and admissions, experience, progression, attainment, and employability.

Education providers generally recognised that data is important to understanding this area, especially linked to areas like disparity in admissions or attainment. Data is most useful when it is then used by education providers to inform actions and developments, and some education providers recognised the value of sharing data with others within the sector to inform a broader conversation.

Most strategies have been in place for the last 2-5 years, and often delivery plans are part way through completion. We recognise this is not an area education providers are aiming to 'complete', as developments in the EDI space will continue to be needed beyond existing strategy and action plan terms.

At education providers, there is a focus on all staff enabling good practice in this area, with support provided to staff such as mandatory EDI training, objective setting and support. Often, there are specific job roles at education providers which are entirely focused on EDI, with this sometimes being at Dean and Associate Dean level. There are also committees, boards, and groups that support delivery of EDI initiatives and provide feedback and consultation mechanisms for education providers. These groups normally include senior people, and representation from learners, staff, and service users and carers.

We consider it helpful when education providers use external frameworks and work with other industry bodies, as this shows they are considering good practice in developing their own approaches. This enables new thinking and ideas to inform education provider intentions.

8. [Equality of Opportunity Risk Register - Office for Students](#)

9. [CoDoH - Anti-racism in AHP Education: Building an Inclusive Environment](#)

Some education providers referenced external frameworks and awards, such as:

- the Athena Swan Charter, which “is a framework... is used across the globe to support and transform gender equality within higher education (HE) and research”<sup>10</sup>; and
- the Race Equality Charter which “helps institutions in their work to identify and address the barriers facing Black, Asian and minority ethnic staff and students, while also providing a framework for action and improvement”<sup>11</sup>.

Some education providers have also secured funding from the Workforce, Training and Education Directorate of NHS England for certain initiatives, and have worked with organisations to improve, for example the Office for Students (OfS) and their ambition to reduce awarding gaps for black, Asian and minority ethnic students<sup>12</sup>.

## Developments and challenges

Identifying issues is not an issue in itself. Good performance looks like education providers honestly reflecting on situations through their portfolios, and attempting to address problems through their work. Education providers usually freely discussed problems in this area, and have clear interventions and plans in place to address them, such as:

- Attainment gaps for particular groups of learners, with a range of interventions depending on the group, education provider, and specific situation, including data-informed responses and initiatives.
- Recognition that some professions have traditional profiles (as shown in our data<sup>13</sup>). Education providers often work upstream, and with specific groups in mind, when advertising programmes, to enable applications from a broader range of people than from the current registrant profile. This shows that education providers can ‘own’ and act to widen the professional profile, even though they may be several steps from the source of a more limited profile.
- Working to address systemic racism in response to the Black Lives Matter and anti-racism movements, which includes decolonising curricula.

## Key findings

Our analysis shows that EDI is a key area of focus for education providers, which should not be surprising considering current societal focus, and that education providers (particularly in higher education) have been leaders in this area for some time. For example, the widening participation agenda has been in place for more than 20 years, and data and information shows the positive impact of this initiative<sup>14</sup> (although there is further work to do) and other corrective actions, such as responding to attainment gaps. Education providers are most successful in this area when they are proactive in their approach, clearly define their intentions, plan how to deliver these, and measure success.

10. [Athena Swan Charter | Advance HE \(advance-he.ac.uk\)](https://advance-he.ac.uk/)

11. [Race Equality Charter | Advance HE \(advance-he.ac.uk\)](https://advance-he.ac.uk/)

12. [Degree attainment: Black, Asian and minority ethnic students - Office for Students](https://www.officeforstudents.org.uk/news-events/news/2022/02/degree-attainment-black-asian-and-minority-ethnic-students)

13. [HCPC Diversity Data 2021 factsheets | \(hcpc-uk.org\)](https://www.hcpc-uk.org/2021/07/21/hcpc-diversity-data-2021-factsheets/)

14. [Widening participation in higher education, Academic year 2021/22 – Explore education statistics – GOV.UK \(explore-education-statistics.service.gov.uk\)](https://www.gov.uk/government/statistics/widening-participation-in-higher-education-academic-year-2021-22)

## Portfolio area – horizon scanning

### Purpose

Enables us to consider how education providers are planning for and responding to long term challenges and opportunities.

### Our threshold requirements

- Ability to plan and respond to challenges and initiatives to ensure programmes remain fit for purpose, embedded into their continuous improvement activities (SETs 3.1, 3.4, and 5.3).
- Possible risks or threats to delivering the programme are effectively managed (SET 3.1).

### Approaches

Through this section, education providers focused on the areas they had considered through their horizon scanning activities.

Horizon scanning often informed:

- developing strategies;
- workforce development, by understanding workforce needs and being able to respond to challenges and opportunities;
- collaborative working to overcome challenges with sector partners; and
- linked to the above, but paradoxically, understanding other education providers to gain / retain competitive advantage.

Education providers themselves often play a leadership role within the professions they deliver, and within education and training generally. For example, if an education provider has strong research capability, then they may position themselves at the forefront of changes in practice or technology.

Education providers were often members of regional and national stakeholder groups, such as ones run by NHS England's regional Workforce Training and Education teams, and working groups like Apprentice Trailblazers. Some education providers noted that staff are given protected time to consider areas which might impact on their provision.

### Developments and challenges

Education providers commonly reflected on areas which they were considering through their horizon scanning, including:

- new provision, including apprenticeship provision;
- challenges with practice learning capacity;
- availability and required growth of the academic staff workforce, to support increasing

learner numbers;

- increased use of technology (including generative artificial intelligence) in learning and assessment;
- changes in regulatory body requirements (for example the Office for Students (OfS) conditions of registration, and developing quality assurance practices), and the Quality Assurance Agency's (QAA) subject benchmark statements;
- increasing use of allied health professionals (AHPs) in primary care; and
- education provider and individual cost pressures due to inflationary pressures, cost of living, and real terms reductions in funding.

Many English higher education institutions also mentioned the expected impact of the NHS Long Term Workforce Plan, the detailed impact of which is yet to be defined. This is a significant area for education providers, employers, HCPC, and many other groups, and we are pleased to see education providers considering the impact of the plan or aware of its delivery. We are currently working with sector stakeholders to ensure HCPC's role within delivery of the plan is well understood, and at the level of burden required to ensure quality within education to enable public protection.

### Key findings

Good horizon scanning was undertaken at the regional, national, and occasionally global level, to enable education providers to plan effectively, mitigating risk and exploiting opportunities. Education providers who effectively horizon scan were better placed to win commissions, more quickly implement change, and less likely to experience problems due to external changes.

Through portfolios, education providers were less clear how they undertook horizon scanning, instead focusing on the specific areas they had identified. For 2023-24 submissions, we have expanded our guidance for education providers so we can better understand and assess their horizon scanning mechanisms, to inform our overall view of education provider performance.

## Portfolio theme – thematic reflection

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For this theme we asked education providers to reflect on how they had managed external drivers for change. These areas were identified by HCPC as important to understand continued quality of education provision in line with sectoral developments.

### Portfolio area – embedding the revised HCPC standards of proficiency (SOPs)

#### Purpose

Enables us to consider how education providers embedded thematic changes from the revised SOPs (2023) across their HCPC-approved programmes, focused on:

- the process education providers used to integrate revisions;
- where changes were required, and what changes were made; and
- where changes were not required, how existing arrangements meant our revisions were already integrated.

Our revised standards for proficiency (SOPs) became effective on 1 September 2023. Education providers needed to deliver the revised SOPs from this date, and we asked that they reported their approach to integrating the revised SOPs through their performance review submissions from 2022-23 onwards. This means that analysis in this section is based on submissions from education providers in the 2022-23 academic year only.

We assessed this portfolio area at the institution level where we could, as many changed requirements were common across all professions. These assessments were made by our lead visitor partners for each assessment case. Where we needed to, we were also able to engage further profession-specific partners where the lead visitors did not have professional expertise required to make profession-specific judgements, but did not need to engage any further partners to make reasonable judgements about alignment.

#### Our threshold requirements

The SOPs are important because they are the threshold competencies for safe and effective practice. Our standards of education and training require that the SOPs are delivered (SET 4.1) and assessed (SET 6.1), to ensure those who complete programmes are fit to practice. Our standards also require that curricula are kept up to date (SET 4.4).

We are confident that those who complete programmes are fit to practice linked to the previous version of the SOPs, as programmes meet SETs 4.1 and 6.1. All approved pre-registration programmes must deliver the revised SOPs for learners commencing from September 2023.



Through portfolio submissions, we asked education providers to consider / define:

- their approach to reviewing their programmes to embed the revised SOPs;
- the [key development themes](#), and how these are or can be embedded within and across their provision. These themes are:
  - active implementation of the standards;
  - promoting public health and preventing ill-health;
  - equality, diversity and inclusion;
  - further centralising the service user;
  - registrants' mental health;
  - digital skills and new technologies; and
  - leadership.
- Profession specific changes (which we asked education providers to reflect on through the curriculum development section); and
- whether changes were required to provision – we recognised that education providers may already be delivering SOPs to the level required by the revisions.

## Approaches

Our analysis shows that education providers either had plans to integrate or had already integrated the revised SOPs into their programmes. We did not need to see delivery through assessments in the 2022-23 academic year, as we only required delivery to commence from September 2023. Broadly, there were two mechanisms used to ensure that that the revised SOPs were fully implemented by September 2023:

- centrally driven mechanisms (such as workshopping how to embed revisions, and gap analysis tools); or
- programme / profession led mechanisms (such as programme leaders tasked with reviewing programmes, then reporting upwards for scrutiny).

A significant proportion of reflections explained how important learner input was when embedding the revised SOPs and keeping them updated with regards to the changes being made. Education providers put processes in place to support learners to understand and apply the revised SOPs. Examples of the support learners received included running workshops for learners and staff and informing them of how the changes would impact learning.

Many education providers noted that existing arrangements meant they already integrated some elements or parts of the revised SOPs. For example, themes relating to promoting

public health and preventing ill health, leadership, and equality, diversity and inclusion were often already integrated.

### Developments and challenges

Where changes were made / planned, education providers submitted detailed explanations and evidence of how they had updated their learning outcomes. They also defined how existing arrangements meant they already delivered new requirements through existing arrangements.

### Active implementation of the standards

We changed the wording of the standards to move registrants away from a passive understanding of the standards towards active implementation of them. We did this to reflect the importance of registrants being autonomous and caring professionals. More active wording makes clear the expectations on registrants.

Education providers already considered the SOPs as 'active' when teaching and assessing. This is because they needed to deliver and then actively assess competence to ensure learners are fit to practice. Learners needed to actively demonstrate how they meet each SOP through existing programme assessments – it is not possible to do this in a passive way.

### Promoting public health and preventing ill-health

We introduced new standards about promoting public health and preventing ill-health. We did this because registrants are part of a larger healthcare system and play an important role in promoting good health in their professions.

Education providers often referenced existing modular content when addressing this theme, with most education providers having existing modules which already contained or were updated in line with our requirements. This theme was usually contained in professional practice modules, and some education providers had specific modules focused on public health and wellbeing.

Inter-professional education was often noted as important, as understanding of the wider healthcare system is key to professionals being able to understand the roles of other professionals and refer when needed. Education providers also referenced work with service users and carers, to help learners to understand the whole patient rather than a set of needs linked to their own professional area.

### Equality, diversity and inclusion (EDI)

We significantly expanded the role of EDI, placing specific importance on making sure that practice is inclusive for all service users. We did this because we are committed to ensuring that our registrants can provide healthcare to all their service users. We already had EDI requirements in the SOPs and the standards of conduct, performance, and ethics, and with these changes we have strengthened our EDI commitment.

We have covered education provider developments in relation to EDI in an earlier section. Many education providers considered that their existing practices already covered the

changes in this area, with existing approaches to ensuring practice is inclusive. Some education providers had developed specific modular content and learning materials, such as sessions on gender identify, and developing case studies from a fuller range of service user backgrounds.

#### Further centralising the service user

We improved the central role of the service-user. This includes registrants understanding the importance of valid consent and effective communication in providing good care. We did this because how we understand a service user's consent has been evolving and our new standards ask registrants to take a wider range of circumstances into account when determining consent. Standards on confidentiality have also been strengthened and reference emerging technology implications.

Education providers often referenced existing modular content when addressing this theme, with most education providers having existing modules which already contained or were updated in line with our requirements. They also referenced how service users contact informed learners when developing their practice.

#### Registrants' mental health

We emphasised the importance of registrants looking after their own mental health and seeking help where necessary as a part of maintaining their fitness to practise. We did this because the previous standards were less about the registrant and their health and more focused on fitness to practise. This wording reflects our position as a compassionate regulator and our understanding of the centrality of registrant wellness.

Education providers reflected on the actions they took to embed this area into programme curricula, and also highlighted the importance of ensuring appropriate support for learner mental health. Some explained how in addition to integrating changes within their curriculum, they implemented further support mechanisms across their institution. We considered this good practice to provide an underpinning to support future registrants for managing their own mental health.

#### Digital skills and new technologies

We emphasised the need to be able to keep up to date with digital skills and new technologies. We did this to because technology continues to play an expanding role in the work of our registrants. We have made it clear that we expect registrants to maintain their ability to use new technology relevant to their practice.

Education providers discussed how inclusion of this area within the revised SOPs linked with work underway through digital strategies and curricula review. We have considered the educational side of digital skills and new technologies in the use of technology section, and many education providers recognised that digital literacy required to undertake education and training was linked to digital literacy in practice. Education providers noted that mechanisms to review curricula were used to consider and update modules and learning materials with this area in mind.

## Leadership

We emphasised the role and importance of leadership at all levels of practice. We did this because we believe in the importance of registrants being autonomous professionals and in displaying leadership without needing to be in a management role.

Most programmes already had leadership embedded in some way, with some (usually masters level) programmes explicitly focusing on growing the next generation of leaders in practice. There was a focus on leadership through practice-based learning opportunities – usually final placements had leadership embedded in some way, as these were the placements where learners started to feel more autonomous in practice. Education providers had reviewed their teaching and learning in line with the requirements of the revised standards, and had made changes to embed those requirements where needed.

Some education providers referenced the ability for learners to take up leadership roles within the programme, such as programme rep roles, or contributing to committees. Although these were good opportunities for learners, they did not develop competence in a structured way for all learners, and so we did not consider them as contributing to addressing this area.

## Key findings

It was clear from the reflections that education providers implemented effective processes to conduct the review and implementation the revised SOPs in a structured way. Through our review, we were satisfied that all education providers assessed would deliver and assess the revised SOPs from September 2023.

We will continue to review this area over the coming academic years for all education providers and programmes not assessed to this point. This programme of work will be completed in the 2026-27 academic year.

## Portfolio area – impact of COVID-19

### Purpose

Enables us to consider the impact on provision due to the pandemic, and what learning / developments education providers took forward.

Within this section we have focused on the pandemic response at a high level. There is information about how the pandemic impacted other areas threaded through other sections of this report.

### Our threshold requirements

The following areas from our standards are relevant to this portfolio area:

- education provider ability to respond to challenges, applying their requirements flexibly when situations require it (SET 3.1); and
- ensuring those who complete programmes are fit to practice (SETs 4.1, 4.2, 6.1 and 6.2).

The COVID-19 pandemic was an unprecedented situation, which impacted significantly on society, practice, and education and training. In a very short space of time, practice delivery changed to online services (particularly in the NHS), practice was impacted by rising COVID-19 cases and the complexities of managing these cases, and practice-based learning opportunities were stopped or significantly reduced. With this in mind, we were looking for honest reflections on actions undertaken – our aim was not to find issues with how the pandemic was responded to.

## Approaches

It was clear from education provider reflections that they recognised the unprecedented nature of the pandemic, and needed to make urgent decisions as a result. The biggest challenges experienced related the reduced capacity or loss of practice-based learning and having to change their models of delivery. Policies and processes were adapted and developed urgently to support learners and staff.

## Developments and challenges

We worked with the UK government to create a COVID-19 Temporary Register. This enabled those who had retired from practice and final year learners who had completed the practice component of their programmes to help with the pandemic response. Almost 6,000 learners on HCPC-approved programmes were added to the temporary register.

This presented a unique challenge for education providers, to identify learners that could enter the temporary register, and then manage these learners through completion of their programme, whilst learners were supporting the pandemic response in service. Education providers managed this situation well, making individual decisions to qualify individuals who were on the temporary register, to enable full registration.

We also provided guidance and information to education providers about the interpretation of our standards, and how they might consider introducing areas such as simulation in practice-based learning<sup>15</sup>. We did not want to add additional burden due to our requirements, and our standards and quality assurance model are well structured to enable the responsive innovations which were needed to manage this very complex situation. We did not need to amend our standards as some other regulators with more specific requirements needed to. For example, regulators requiring specific practice learning hours, with a limit on the percentage of these hours delivered by simulation, needed to amend their standards to enable programmes to remain compliant with regulatory requirements.

## Technology and support

Where it was not already used, education providers quickly invested in new technology which enabled teaching, and submission of assessments to be moved online. The urgent move to online delivery and assessment meant some education providers needed to provide additional training for staff and learners. Education providers were able to adjust and continue to deliver teaching to learners and conduct assessments through existing technology or with investments made.

15. [Advice for education providers I \(hcpc-uk.org\)](https://www.hcpc-uk.org/advice-for-education-providers/)

The rapid development and implementation of new technology which enabled continuation of the delivery of teaching, learning, and assessment is one of the key successes identified by education providers. Rapid changes made due to the pandemic have often resulted in permanent adoption new technology, and the implementation of new policies and process.

### Practice-based learning

For practice-based learning, availability of placements dropped due to pressures in service, and safety concerns for learners and service users. Reasonably, education providers did not want to put their learners or service users at risk through physical practice-based learning. This needed to be balanced with ensuring learners were able to gain sufficient practice experience of a good quality to develop their skills, knowledge and experience, to meet requirements for registration.

Education providers often worked collaboratively with practice partners and other education providers to facilitate practice experience through pandemic restrictions. This was easier for some professions / practice settings than others – for example, face-to-face consultations moving to online consultations could still be good practice experience for learners. This also helped learners to prepare for practice, with some changes made to the health and care system becoming normal practice after the pandemic (for example increased use of e-consultations).

Education providers also increased their use of simulation in practice. We provided [guidance](#) for education providers about our how this fits within our regulatory requirements, considering that our standards are output focused and should not be seen as a barrier to innovation.

### Finance and resources

The pandemic put financial and resource strain on education providers as they needed to develop their resourcing, and procure additional resources, such as:

- new technology to deliver and support a shift to online learning;
- creating online resources for learners;
- providing additional financial support for learners ; and
- training for staff in the use of technology, and how to provide further pastoral support .

Providing support for learner and staff physical and mental health was a key priority for education providers. This particularly linked to reducing the risks of face-to-face contact and supporting the wellbeing of individuals in a difficult situation. Education providers recognised that people would be personally affected by the pandemic, with impact ranging from the loss of loved ones to mental health problems cause by isolation (to name two examples). Education providers responded to this challenge by applying existing mitigating circumstances policies, with an understanding that those who complete programmes needed to be fit to practice at the point of completion.

## Assessments

One of our key focuses was to ensure that education providers continued to ensure learners who complete programmes meet our requirements for registration. This was central to the advice we provided, linking back the output focused nature of our standards and how education providers can meet them in different ways, as long as learners meet the requirements for registration.

Many education providers moved exam assessments online, which came with challenges relating to academic integrity and utilisation of technology. Education providers overcame these challenges by designing these assessments in specific ways (eg. 'open book' examinations), integrating plagiarism software, and ensuring good support for staff and learners in platforms used.

Within higher education, there was a sector-wide assumption that there would be 'no detriment' to learners completing programmes (considering progression and academic gradings). No detriment is to 'mitigate against the impact of a set of circumstances, by ensuring that an individual is not unfairly disadvantaged by a requirement to change rules or regulations'<sup>16</sup>. We were clear when engaging with stakeholders that 'no detriment' could not apply to learners for HCPC professions, if that meant those individuals did not meet our professional standards. Therefore, education providers often secured exemptions from institution-level no detriment policies, whilst supporting learners in individual situations.

## Key findings

Education providers responded well to an extremely challenging situation, and had gained valuable insight because of the pandemic. The successful and rapid adjustments to challenges show that most education providers have policies, processes, and structures in place to respond to challenging situations. Education providers used responses to the pandemic as a catalyst to deliver more permanent innovations to their programmes.

## Portfolio area – use of technology: changing learning, teaching and assessment methods

### Purpose

Enables us to consider how education providers' provision has developed in line with changing technology, including simulation in practice-based learning, and increased accessibility of artificial intelligence (AI) in learning and practice.

This section is linked to the above section about COVID-19. Challenges from the pandemic had a significant impact on the decisions education providers made to adopt new technology to continue delivery and assessment of programmes as part of their pandemic response.

### Our threshold requirements

- Resources are in place to support learners, and the delivery of programmes (SETs 3.12 and 3.13).

16. [COVID-19 supporting resources - No Detriment Policies: An Overview \(qaa.ac.uk\)](https://www.qaa.ac.uk/quality-improvement/assessments/assessments-and-examinations/assessments-and-examinations-2019-2020/assessments-and-examinations-2019-2020-16)

- Practice-based learning supports achievement of the standards of proficiency (SOPs) (SET 5.2).
- Learning and teaching methods are appropriate to the effective delivery of the learning outcomes (SET 4.6), and assessment methods are effective at measuring them (SET 6.5).
- Assessments are objective, fair and reliable (SET 6.3).

## Approaches

Due to the pandemic response, often education providers moved teaching online using various platforms such as MS Teams, Zoom, and Blackboard. This was a steep learning curve for some education providers who were using this technology for the first time, to make online learning engaging and where required interactive. Those who were already using these types of technology prior to the pandemic found it easier to adapt.

The immediate benefits of using technology to switch to online delivery and assessment included things such as increased flexibility of delivery of lectures and assessment. For example, learners found it beneficial to have access to pre-recorded videos and it enabled education providers to further explore how to incorporate the use of technology in the delivery of their programmes.

We found that many education providers did not move back to pre-pandemic approaches in their entirety after restrictions eased. This is because education providers, learners, and others saw value in keeping some approaches to deliver education and training in a blended way, rather than exclusively face to face. This also applied to the shift in what normal looks like in practice, with for example the continued use of e-consultations.

## Developments and challenges

The change to online learning, teaching and assessment in a very short space of time due to the pandemic response was one of the biggest challenges, which led to:

- the immediate pivot to online delivery because of the pandemic and upskilling staff to enable effective delivery of programmes;
- moving assessments online;
- providing digital training to staff / educators; and providing additional support to learners with limited digital literacy;
- learners having difficulty accessing technology systems in the practice environment; and
- finding the balance between applying the benefits of technology and retaining the strength of the traditional face-to-face learning.

Education providers made 'significant' investment in simulation technology such as virtual and augmented reality headsets, software and simulation suites. The core objective of the investments was to support learners in developing their skills in alternative settings



to practice-based learning. Education providers reported that feedback from learners on the new technology has been positive and has contributed to improvements made to programmes. They also believe the technology investment will help prepare learners for safe and effective practice, with changes in practice also driven by the pandemic response.

Our analysis shows there has been an increased use of simulations in practice-based learning across education providers. The primary catalyst for this increase was in response to the limited access to practice placement during the pandemic. The investment in and increased use of simulation enabled the supplementation of key skills such as clinical skills, problem solving and communication. Education providers continued to use simulation technology post-pandemic to continue to meet the needs of learners who have recognised the benefits on their learning experience. Learners and practice educators provided positive feedback with regards to the use of simulation learning.

A small number of education providers reflected on the increased accessibility of artificial intelligence (AI), and the impact this is having on learning, assessment, and innovations in practice. We have set a more specific reflection point for education providers for assessments from the 2023-24 academic year, and we will be able to explore education provider responses more fully through the next annual report.

## Key findings

Our analysis shows that the pandemic was the major catalyst for the review and implementation of the use of technology for delivering lessons and conducting assessments. A key outcome of this has been increased understanding of the opportunities that can be harnessed using enhanced technology to deliver programmes. The urgent need to adapt to using technology enabled education providers to identify the digital skills gaps amongst staff and learners. Overall, education providers have performed well in this area because they adapted effectively to the urgent need to use technology to continue the delivery of their programmes. Many education providers have returned to at least some traditional face-to-face teaching post-pandemic, and many also retained a form of hybrid learning with the combination of online and face-to-face learning.

## Portfolio area – apprenticeships

### Purpose

Enables us to consider the impact of apprentice provision on the education provider, when education providers run (or are planning) apprentice programmes, and / or when there are apprenticeship programmes run or planned by others.

### Our threshold requirements

- Different types of programmes are effectively managed by the education provider (SET 3.2), with strong partnerships to support delivery (SET 3.5).
- Learning and assessment is appropriate to the model of delivery (SETs 4.6 and 6.5).
- Possible risks or threats are being effectively managed (SET 3.1).

The professions we regulate are usually delivered at degree level and above. There is a clear structure for the development of higher and degree apprenticeships in England, managed by the Institute for Apprenticeships and Technical Education (IfATE), but this structure does not currently exist in Northern Ireland, Scotland or Wales. Therefore, we only asked education providers in England to reflect on this area.

## Approaches

Education providers who responded in this area have highlighted benefits, opportunities, and challenges with regards to the development of apprenticeships. A significant proportion reflected on the importance of working closely with employers, as apprenticeship provision is employer led. Education providers noted challenges which occurred because of the development of new apprenticeships, such as meeting the requirements of multiple groups (particularly employers and regulators) whilst ensuring the quality of apprenticeship programmes.

There was a range of appetite for delivering apprenticeship programmes. Many education providers already deliver apprenticeship programmes, and some are planning to develop new apprenticeship programmes in the future. Some education providers have no plans to deliver apprenticeship programmes, but we were clear they needed to be aware of apprenticeship programmes within professions and regions, to help understand the context when delivering their own direct entry programmes.

## Developments and challenges

Development of apprenticeship provision is employer led. When developing apprentice provision for the first time in a profession, IfATE sets up a 'Trailblazer Group' which is responsible for developing an apprenticeship 'standard' which education providers need to meet to secure the delivery of an apprenticeship programme.

These groups are led by employers, with representation from education providers, and professional bodies. There are tensions in developing standards, with employers sometimes focusing on delivering employees who meet workforce needs. This can lead to employers defining a narrow expectation of the skills, knowledge and experience required by apprentices to fill specific employer needs, rather than to develop fully rounded professionals who can enter practice in any setting. To mitigate this, normally we have sat on Trailblazer Groups in an advisory capacity to ensure regulatory requirements are understood when developing standards. We also supplied a 'letter of support', confirming that standards were developed which align to our regulatory requirements. This was an important part of IfATE governance.

Once standards are developed, when considering to deliver apprenticeship provision, education providers considered:

- financial and sustainability incentives for increasing learner numbers, via a method that has funding attached and central government support;
- demands and availability of practice-based learning within specific professions and

regions, to support the development of a sustainable workforce, and considerations about whether proposed cohort numbers would make programmes viable; and

- providing a different route to registration, considering the widening participation initiative.

Embedding the standard defined by the Trailblazer Group into proposed programmes required close engagement and collaborative working with employers. A small proportion of education providers highlighted working in partnership with employers as one of their key challenges in this area. This is linked to a changing relationship with an existing partner, as many employers procuring apprenticeship programmes already supplied practice-based learning opportunities to education providers. This meant that those employers effectively became a 'customer' of the education provider. Education providers normally managed this changing relationship well, with quality at the centre of developing new apprenticeship provision.

The most common challenges identified related to:

- ensuring sufficient practice-based learning capacity for apprenticeship learners;
- securing the resources required to develop apprenticeship programmes;
- regulatory burden, with the IfATE and Ofsted involved in addition to existing regulatory requirements (HCPC, OfS, QAA), and other quality standards (internal, and professional body);
- managing increase in learner numbers; and
- developing resources required to support a different set of learners, with different needs.

Education providers were able to address these challenges, by securing internal resource to develop programmes, and working collaboratively with practice education providers and employers.

We also asked education providers who are not delivering apprenticeship programmes to reflect on how new apprenticeship provision was impacting their own provision. Particularly, challenges reported by these education providers focused on availability of practice-based learning, with employers sometimes preferring placing their apprentices, and sometimes preferring placing traditional learners due to accessing the funding tariff from NHSE. This challenge was managed by enacting and developing existing formal arrangements with practice education providers to supply practice-based learning opportunities.

With the intentions of the NHSE long term workforce plan, development of apprenticeship programmes will continue to grow in the future. Education provider reflections show there is a demand for the growth in apprenticeship programmes based on employer needs and increase in learner intakes to date. This is an area on which we will continue to engage the sector, ensuring our regulatory requirements are clear, and providing insight from our work in the apprenticeship space to date.

## Key findings

Education providers were managing this area well. Many education providers have directly engaged with the apprenticeship initiative, either delivering or planning to deliver apprenticeship programmes. Other education providers recognised the impact the apprentice provision would have within professions and / or regions. Particular challenges mainly linked to the availability of practice-based learning, and the shifting relationship with practice partners.

## Portfolio theme – sector body assessment reflection

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For this theme, we asked education providers to reflect on how they had considered and managed expectations, requirements, and assessments of sector bodies. These bodies and areas were identified by HCPC as important to understand continued quality of education provision in line with the expectations of other sector bodies.

### Portfolio area – assessments against the UK Quality Code for Higher Education

#### Purpose

Enables us to consider how higher education institutions (HEIs) have considered assessments against, and changes to, the [Quality Code](#), and how these have been used to measure and ensure quality.

#### Our threshold requirements

We asked education providers to reflect on their performance against the UK Quality Code for Higher Education (Quality Code). This links with our requirement that there are regular and effective monitoring and evaluation systems in place (SET 3.4).

The Quality Code was developed by the QAA in consultation with HEIs and published in 2018. This provided a quality framework for HEIs. We recognise that the Quality Code is no longer a regulatory requirement with the de-designation of the Quality Assurance Agency (QAA) as the quality body in England, and that the four UK nations have different requirements linked to the Quality Code. This section only applied to HEIs, which meant we did not ask non-HEI education providers to provide reflections on this area.

In Scotland, Wales and Northern Ireland, the Quality Code is a key reference point for quality arrangements. In England, it is not regulatory, though education providers may use it to inform their approach to quality. This enables a level of comparability across the UK. We do expect that monitoring and evaluation is informed by external expectations / frameworks, and although this may be used differently by HEIs, it is still a well understood external reference framework for HEIs.

During the 2022-23 academic year, the QAA [started a conversation](#) about the future scope and structure of the Quality Code to ensure it remains current. When the revised Quality Code is published, we will consider its implementation and how we embed it within our own quality assessments in the future.

## Approaches

Where it was applicable, education providers designed their quality assurance policies and processes to meet the Quality Code. They did this through their initial internal quality assurance mechanisms, and in an ongoing way through their regular monitoring. In addition, education providers undertook regular mapping exercises to ensure continued adherence to the Quality Code. Those education providers validated by a different organisation outlined how their validating body was responsible for liaising with the Quality Assurance Agency (QAA) and thus, for ensuring compliance with the Quality Code. Overall, as part of their internal processes, education providers undertook appropriate reviews and devised outcomes to benefit the ongoing delivery of their programmes.

A proportion of HEIs did not provide any reflection on this theme, as their last review had been undertaken prior to the review period. Some education providers reflected upon the actions undertaken since their last review, for example including the development and progression of action plans. However, most of these education providers did not provide any reflections other than to say this theme was not applicable at this time. We recognised when this had occurred, and considered the education provider was performing satisfactorily. We have developed our expectations of education providers when this is the case, as we would expect that a continued assessment of alignment to regulatory requirements is undertaken to ensure continued good quality.

## Developments and challenges

Since May 2022, from a regulatory perspective the Office for Students (OfS) [Conditions of Registration](#) have superseded the Quality Code in England. Some education providers discussed the changes being made to the Quality Code, and within this group, a small number of education providers noted that they had stopped reporting internally against the Quality Code as it was no longer mandatory to do so. However, they would continue to use it as a framework within their quality assurance processes. A small number of education providers reflected on their reviews by the OfS and whether the Conditions for Registration had been met.

Some education providers in Scotland reflected on their engagement with the Enhancement-led Institutional Review (ELIR) undertaken by QAA Scotland<sup>17</sup>. In these cases, they reflected upon the actions undertaken since the review. This included the development and progression of action plans.

## Key findings

Through portfolios, education providers were clear about how they utilised the Quality Code in their processes, instead of focusing on their reflections of how they had performed against this. We will expand our guidance for education providers and provide clarity about the status of the Quality Code so education providers can understand what to reflect upon. This will provide us with information to inform our overall view of education provider performance.

17. [Enhancement-led Institutional Review \(ELIR\) \(qaa.ac.uk\)](https://www.qaa.ac.uk/enhancement-led-institutional-review)

## Portfolio area – assessment of practice education providers by external bodies

### Purpose

Enables us to consider how assessment of practice education providers by external bodies has been used to drive improvements.

### Our threshold requirements

In this section, we asked education providers to reflect on how they used the work of other bodies to inform their view on the quality of practice-based learning delivered by practice partners. We expect that systems are in place to consider external reviews of practice education providers (SET 5.3).

We advised education providers to consider how they use assessments by bodies such as the Care Inspectorate Wales, Care Quality Commission (in England), Healthcare Improvement Scotland, or The Regulation and Quality Improvement Authority (in Northern Ireland). We expected that education providers would have systems in place to consider external reviews of practice education providers.

Welsh Higher Education Institutions (HEIs) were not included in either of the two years reviewed, due to our decision to review all Welsh HEIs in the third year of our review programme (the 2023-24 academic year).

The level of reflection by education providers often depended on what external assessments had occurred within the review period, and some education providers were not able to reflect on this area due to the model of learning provided (for example, portfolio-based programmes). For 2023-24 assessments onwards, we have integrated this section into the 'placement quality' portfolio area.

### Approaches

Education providers consistently considered and reviewed:

- regional or national placement audit tools;
- specific to English education providers:
  - Care Quality Commission (CQC) reports and critical incidents;
  - NHSE (formerly HEE) quality outputs, which focus on the quality of education in practice;
  - National Education and Training Survey (NETS) results;
  - Office for Standards in Education, Children's Services and Skills (Ofsted) reports; and
  - the work of Integrated Care Systems (ICS) (replacing Clinical Commission Groups (CCGs)).

- specific to Scottish education providers:
  - the work of the Scottish Health Improvement Service (HIS); and
  - Quality Standards for Practice Learning (QSPL) – A Scottish government audit tool.
- specific to Northern Irish education providers, the Northern Ireland Regulation and Quality Improvement Authority (RQIA).

Some education providers on borders between nations, or who deliver education and training across the UK needed to consider a broader range of bodies than single nation education providers.

Education providers often had teams or individuals who were responsible for monitoring assessments by external bodies, and also had assessments flagged through:

- requirements set out in agreements for practice education providers to inform education providers once a new assessment was undertaken;
- discussion of CQC status and action plans as part of regular meetings with practice education providers;
- the CQC alert system; and
- active sharing of information between education providers and others.

Where assessments were considered, they were often used as part of initial or ongoing quality monitoring assessment of practice education providers. We saw good practice when education providers did not just use headline results or scores, but considered how results (and any action plans) are related to provision they deliver.

## Developments and challenges

Not all education providers (with a relevant model of learning) were routinely reviewing external assessments, or where they were, they were not always doing this in a structured way through their quality assessment procedures. We often picked this up with education providers – but we noted that some did not think they needed to consider external reports due to the robustness of their internal practice learning quality audit systems. We have developed our guidance to be clearer in our expectation that education providers should use all relevant information and data in considering the quality of practice-based learning.

When assessments of practice education providers showed poor results, some education providers took a low tolerance approach, and withdrew learners. This was an easier decision for education providers when there is an oversupply of placement opportunities (which is uncommon).

Although this approach was understandable where it is possible / when there is low risk appetite, we found that many education providers made reasonable decisions to continue placing learners within organisations with poor assessments. To do this, they actively assessed the specific situation, considering whether there could be negative impact on



learners (their learning or their wellbeing), and if so, how they might mitigate that impact. For example, if problems were found in operating theatres at a practice education provider, then operating department practice learners may be impacted, but ward-based or out-patient AHP placements might not be. Similarly, although not the practice education provider for paramedics, problems in an accident and emergency department might impact on paramedic learner experience.

For this approach to work, education providers needed to accept that there are problems in service environments. Difficult practice-learning experiences can still be a good learning experience, if learners are properly supported from a safety and wellbeing perspective, and to reflect on their experience, including ensuring good cultural expectations are set appropriately by the education provider. In these circumstances, simple mechanisms like tripartite action plans (between the learner, practice education provider, and education provider) to help support learners provide a mechanism to enable a good learning experience.

With the above in mind, we recognise it can be difficult for education providers to withdraw learners, because there are frequently problems with the capacity of practice-based learning in most professions, nations and / or regions. Where there is an oversupply, this is advantageous for education providers, enabling them to set simple thresholds for placing / withdrawing learners. There is a tension between potentially disrupting learner progression (with the impact this could have on contractual obligations, learner feedback (such as NSS scores), and workforce supply), and ensuring learners meet relevant standards within regulatory and professional expectations.

## Key findings

We found that education providers were often considering external assessments of practice education providers when reviewing the quality of practice-based learning. We also found that some education providers could do more in this area, and will set clearer expectations that all information about the quality of practice-based learning should be considered when making decisions about continuation of, and support for, learners in practice settings.

Strong strategic and operational relationships with practice partners were helpful in resolving any issues and maintaining or improving the learning experience to required standards.

## Portfolio area – Office for Students

### Purpose

The 2017 Higher Education and Research Act (HERA) legislated the creation of the Office for Students (OfS). The OfS's mission is to “ensure that every student, whatever their background, has a fulfilling experience of higher education that enriches their lives and careers”<sup>18</sup>. They fulfil this aim by assessing quality and standards to determine whether their Conditions of Registration are met by applicable education providers. In May 2022, the OfS

18. [Our strategy - Office for Students](#)

published their revised [Conditions of Registration](#) in England.

The HERA allowed an organisation to be 'designated' to carry out assessments on behalf of the OfS. The QAA was designated by the Secretary of State in 2018 to undertake these assessments. In 2022, the QAA decided to stop being the designated body. As such, the powers to assess quality and standards reverted to the OfS.

This portfolio area enables us to consider any monitoring undertaken by the Office for Students (OfS), and how the education provider has responded to the revised ongoing conditions of registration<sup>19</sup>. This enables us to consider how education providers are complying with regulatory requirements, to inform our understanding of risk.

### Our threshold requirements

- Compliance with the regulatory requirements of other organisations (SET 3.4).
- Monitoring and evaluation are informed by external expectations / frameworks (SET 3.4).

This section only applied to Higher Education Institutions in England, which meant that we only asked for reflections on this area from English HEIs.

For portfolios submitted from 2023-24 onwards, we have expanded our guidance for education providers, to provide clarity about the status of the OfS Conditions of Registration, to enhance education provider understanding about the areas to reflect on. This will provide us with further information to inform our overall view of education provider performance.

### Approaches

Most relevant education providers had achieved registration with the OfS prior to the HCPC review period. Since then, education providers had reported to the OfS, but there had been limited additional monitoring by the OfS for some education providers, due to the impact of COVID-19 on OfS regulatory activities.

Many education providers described how they ensure they remain compliant by considering the OfS requirements through their internal processes. A range of actions came about due to this to ensure they kept abreast of the Conditions of Registration. For example, actions to decolonise the curriculum, ensure freedom of speech, and how to increase equality of opportunity for underrepresented groups. A small number of education providers noted that senior managers were involved in ensuring the programmes continued to meet the Conditions of Registration before this filtered down to the professional or programme level.

### Developments and challenges

A small number of education providers reflected upon the conditions they needed to resolve as part of gaining initial OfS registration, or due to enhanced monitoring during the review period. Only one education provider outlined they had an OfS inspection within the review

19. [The regulatory framework for higher education in England - Office for Students](#) (specifically B1, B2, B4 and B5)

period and the outcome of this process.

As noted, the OfS developed revised Conditions of Registration during the review period. While the OfS developed and consulted upon the revisions, they paused the monitoring within the existing model. This explains why many of the education providers were unable to provide detailed reflection on their involvement with the OfS during the review period. A small number of education providers outlined how they have contributed to the consultations undertaken in early 2022 before the revised conditions were rolled out in May 2022. All education providers noted that they align to the revised Conditions of Registration, and were waiting for a decision by the OfS.

## Key findings

Through portfolios, education providers were clear about how they utilised the OfS Conditions of Registration in their processes to ensure continued compliance, instead of focusing on reflections about how they had performed against these requirements or the outcomes of their internal reviews. We appreciate there were temporary pauses to engagement with the OfS requirements due to the pandemic and while they finalised, and rolled out, their revised Conditions of Registration. We did not identify any risks as the education providers had appropriate mechanisms in place to ensure continued compliance internally. We therefore considered education providers were performing well in this area.

## Portfolio area – other professional regulators / professional bodies

### Purpose

Enables us to consider how assessments by other regulators or professional bodies have impacted HCPC-approved provision, such as actions education providers have taken because of feedback from these bodies. This helps us to understand how education providers respond to the requirements and / or expectations of others, to inform our view on their quality mechanisms.

### Our threshold requirements

- Programmes must reflect the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance (SET 4.3).
- Linked to the above, although it is not a regulatory requirement, education providers may choose to adhere to professional body guidance in areas like staff / learner ratios, the role of external examiners, accreditation of practice educators, and the structure, duration and range of practice-based learning.
- Compliance with the regulatory requirements of other organisations (SET 3.4).

There was inconsistency in how we applied our expectations in this area, particularly considering what good looks like (as opposed to meeting threshold expectations). We have developed further guidance for education providers and our partners to enable consistent

consideration of performance in this area.

## Approaches

The level of reflection by education providers often depended on what external assessments had occurred within the review period. For example, those education providers who had been accredited / validated by a professional body during the review period, tended to focus their reflection on the outcomes of this event. Other education providers, who had not been accredited / validated during the review period, reflected on how they continued to engage with the professional body and / or how they ensured the delivery of their programme reflected guidance and current practice.

Some education providers were unable to reflect on this area due to the nature of the education provider (for example, being the professional body themselves). However, this was not a blanket response for these education providers and some education providers had alternative means of demonstrating beneficial relationships to deliver and develop the programmes.

Some education providers outlined how other regulatory bodies were considered and engaged with during the period. For example, the General Pharmaceutical Council (GPharm) and the Nursing and Midwifery Council (NMC) were liaised with as part of the development and approval of supplementary and independent prescribing programmes by those regulators, normally alongside the HCPC.

Some education providers also outlined their interactions with regulators and professional bodies which did not have a direct impact on HCPC professions. For example, engagement with the NMC, the General Optical Council (GOC) and Social Work England (SWE) were discussed, with consideration about how this engagement would be used to improve professional programmes across the board.

Many of the larger education providers (delivering a number of programmes across a range of professions / modalities) tended to discuss those professional bodies who accredit or validate education programmes. For example, the College of Paramedics (CoP) and the Royal College of Occupational Therapists (RCOT). In these circumstances, some education providers discussed the challenges associated with meeting the regulatory and professional body requirements when developing or updating their programmes. We discuss profession specific alignment with professional body expectations in a later section.

## Developments and challenges

The education providers delivering a large number of HCPC professions tended to focus on professional bodies for larger professional programmes. We normally only saw professional bodies for the smaller professions / modalities mentioned by education providers delivering only those smaller professions. This shows that larger education providers may be missing some of the professional bodies for the professions they deliver, either in internal considerations or when reflecting for us.

From the education providers delivering a large number of professions, there was a tendency to outline which professional bodies the education provider had engaged with during the review period and state the nature of that engagement. For example, they outlined how they remained endorsed by the relevant professional body but stated they had not been re-accredited / re-validated during the period. Some reflection on this continued relationship was provided.

Some professional bodies do not endorse education programmes, for example the BAAT. Alternatively, as professional body endorsement is not mandatory, not all education providers seek this form of engagement. In these circumstances, education providers outlined alternative forms. For example, collaboration on key topics such as updates to a practice handbook, enhancing assessments in practice-based learning, or to follow guidance produced in response to the pandemic. These education providers recognised the value of engagement outside of the formal cyclical validation cycles.

### Key findings

Where education providers engaged with other regulators and / or professional bodies, they usually reflected well on that engagement. Some education providers who were not subject to external reviews provided limited reflection, which missed some of the good work they may have done with engagement outside of formal review processes.

We also found that professional bodies for smaller professions, or without a strong education accreditation function were overlooked by education providers in their reflection. This misses opportunities, either with education providers considering the work of the whole range of professional bodies, or in defining to the HCPC how they are keeping abreast of developments in professions. The former may limit the ability of education providers keeping their provision up to date, the latter may negatively impact on our view of risk for the education provider.

## Portfolio theme – profession specific reflection

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For this theme, we asked education providers to reflect on their own performance and approach linked to the profession(s) they deliver. These areas are normally linked to our programme level standards, and are integral to continued programme quality.

### Portfolio area – curriculum development

#### Purpose

Enables us to consider developments to curricula, focused on ensuring learners are fit to practice on completion of their programme, for each profession delivered by the education provider.

#### Our threshold requirements

- Those who complete programmes must be fit to practice linked to the HCPC standards of proficiency (SETs 4.1 and 6.1), standards of conduct, performance and ethics (SETs 4.2 and 6.2), and professional expectations (SET 4.3).
- Programme curricula must remain relevant to current practice (SET 4.4) – meaning there are processes in place to continually review curricula to ensure this is the case.

#### Approaches

Our analysis shows that education providers are committed to continuously developing curricula and most explained their approach to considering and making changes. Their reflections show there are planned and structured processes to enable the effective reviews of curricula. Often, there are mechanisms in place, such as committees, with staff, learners, service users and external examiners to contribute to developments. For some education providers, there are specific teams who are responsible for reviewing and making changes to the curriculums.

Education providers reflected on the importance of professional bodies when reviewing the curriculum to ensure currency. They do this through either regular engagement with professional bodies through seeking advice and feedback; and / or through reviewing updates to professional body guidance. We found that changes to professional body guidance were usually the main reason for making significant changes to the curricula. We have explored this further in the next section.

Equality, Diversity and Inclusion (with initiatives such as decolonising curricula), and the revised HCPC standards of proficiency also triggered and influenced reviews and changes. We often saw that training provided to staff with regards to these areas ensures that the changes are fully embedded across education providers.

## Developments and challenges

A small proportion of education providers reflected on the challenges they experienced with regards to curriculum development. The challenges related to the impact of the COVID-19 pandemic on education provider ability to review curricula through traditional means, profession specific challenges, and the programme of work to consider implementation of the revised SOPs. Examples of the profession specific challenges include:

- a reduction in placement availability;
- the need to reassess approaches to delivery as the result of increasing use of technology; and
- providing appropriate equality diversity and inclusion training to staff to effectively approach the decolonising of teaching.

These challenges did not have any significant impact on their ability to review and update their curriculum.

## Key findings

Our overall analysis shows that education providers have generally performed well in this area because they have demonstrated how they systematically review their curriculum and make changes when required. They have robust processes and policies in place to continuously monitor, review and make changes to their programmes through consultations with internal and external stakeholders.

Changes are made to reflect standards from professional and regulatory bodies, but other catalysts include the need to meet learner need. Education providers have shown they are committed to continuously improving their curriculums to ensure learners meet the relevant standards.

## Portfolio area – development to reflect changes in professional body guidance

### Purpose

Enables us to consider how education providers have informed the development of their programmes with changing professional expectations.

### Our threshold requirements

- Those who complete programmes must be fit to practice linked to professional expectations (SETs 4.1, 4.2, 4.3, 6.1 and 6.2),
- Education providers have agency in this area – we do not require that curriculum guidance is always delivered by education providers. However, we do expect education providers have considered relevant curriculum guidance when designing and developing their programmes, and to have made clear and explicit decisions when meeting or deviating from this guidance.

## Approaches

Our analysis shows that education providers regularly engage with professional bodies. They have processes in place to identify and make updates to their programmes to reflect any relevant changes to professional body guidance. The overall reflections show that their engagement with professional bodies was positive which they cited as one of the key successes during the review periods. This section links to the above section about curriculum development.

## Developments and challenges

Education providers considered changes in relevant professional body guidance to make updates to their curricula. They provided examples of changes that were made by their professional bodies updated their curriculum to reflect major and minor updates. They reflected on changes they had made to their assessment guidelines to align to specific changes made by their professional bodies. There were no cases where these changes were significant or had major impacts on the delivery of programmes.

Education providers highlighted some of the key challenges related to adopting the regularly varying changes in guidance and standards required by multiple professional bodies and health regulators.

A significant number of education providers reflected on how they engaged with their professional bodies during the COVID-19 pandemic. This was important because it enabled them to adjust to placement practice challenges quickly and support learners in placements effectively. These reflections should be considered against the COVID-19 and capacity of practice-based learning sections. Some the key changes made by professional bodies during this period related to learners' completion of practice placements. Temporary modifications were made to the minimum number of placement hours expected by professional bodies, completing placements online, and the use of simulation.

A very small number of education providers submitted reflections in relation to updates made with regards to Equality Diversity and Inclusion (EDI). Those who did reflect on this area noted there was a push by the professional body towards developing guidance and explained the updates they have made in response.

## Key findings

Overall, we considered that education providers performed well in this area. Our analysis of the reflections shows most education providers have regular engagement with professional bodies relevant to their professions and update their curriculum to reflect changes made by their respective professional bodies. We noted the relationships between education providers and professional bodies was positive overall, and there was regular engagement between both parties. We are confident education providers have the processes in place to make adjustment in an effective way to meet professional body expectations. Some education providers gave explanations of the specific changes they made in response to changes to professional body guidance.



## Portfolio area – capacity of practice-based learning (programme / profession level)

### Purpose

We hold education providers to strict requirements in this area. This portfolio area enables us to consider how:

- placement modelling was applied practically for each profession / programme;
- practice-based learning was managed to ensure all learners were supported to achieve learning outcomes; and
- innovations in practice-based learning contributed to capacity.

### Our threshold requirements

- The structure, duration and range of practice-based learning supports the achievement of the learning outcomes and the standards of proficiency (SET 5.2),
- There is a thorough and effective system for approving and ensuring the quality of practice-based learning (SET 5.3),

We recognise that availability of practice-based learning is not solely owned by each education provider – they must work within existing systems, with multiple parties responsible for availability, and other education providers. With this in mind, education providers are responsible for placing all learners from their HCPC-approved programmes, and we require that there is an effective process in place to ensure the availability and capacity of practice-based learning (SET 3.6).

### Approaches

Education providers highlighted the importance of effective planning to help to sustain and increase practice placements in the future. Some education providers discussed how they were contributing to this, including the types of models which would be used to ensure sufficient capacity.

Education providers reflected on the importance of having strong and effective working relationships with practice-based learning partners to ensure they had sufficient opportunities for learners on their programmes. These relationships enabled the increase in placement capacity, developing innovative placement practices, and adapting to fluctuations with capacity. They also highlighted the benefits of working with a range of stakeholders such as individual NHS Trusts, NHS England, other education providers and employers. Their reflections show their engagement and partnership with a wide range of stakeholders enabled positive information sharing to properly understand capacity within settings, regions, and nations. Some education providers had dedicated members of staff responsible for these partnerships.

## Developments and challenges

Education providers identified two key challenges with regards to capacity of practice-based learning. These were related to the impact of COVID-19, and the limited availability of placements for particular professions and subject areas. They noted how placements were suspended during the pandemic or they had to find alternative methods to enable learners to complete their practical training. There were limitations of placement capacity at regional and national levels for professions such as paramedics and physiotherapists. They also reflected on other challenges such as funding, staffing, pressures on service / workload pressures, national and region-specific issues, and increased range of routes to qualification requiring placements. Reflections show that there were already pressures around limited places which were compounded by the pandemic.

Education providers reflected on the innovative practices they developed and implemented to address some the challenges experienced in this area to increase placement capacity opportunities. There was an increase in the use of simulation, and the use of other technological solutions such as virtual reality to increase practice-based learning capacity.

Limited availability of practice educators to support learners during their placement was an important consideration for placement capacity. Education providers were cognisant of ensuring learners were effectively supervised in practice to ensure a good learning experience in supporting progression through programmes. Some education providers discussed the use of Long Arm Supervision to increase capacity, opportunity and quality of practice-based learning. Other had plans to increase the amount of training for practice educators to address shortfalls.

## Key findings

Throughout their reflections in the portfolios, education providers recognised the challenges and importance of developing quality placement practices for learners. They explained how they addressed the short-term challenge of the COVID-19 pandemic and the processes implemented to address the ongoing challenges with regards to limited practice-based learning capacity. They adapted to serious challenges relating to placement capacity through long and short-term plans to continue to increase placement capacity through the development of planning models, technological innovations and effective partnerships. It is clear the ability to sustain practice-based learning capacity is a primary objective of the education providers and there are processes in place to ensure appropriate capacity of practice-based learning opportunities to support learners. There are also effective processes in place to manage and support learners on current placements.

## Portfolio theme – stakeholder feedback and actions

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For this theme, we asked education providers to reflect on their interactions with three key stakeholder groups. Our standards require that programmes “must have regular and effective monitoring and evaluation systems in place” (SET 3.4). This standard is about making sure programmes deliver overall quality and effectiveness on an ongoing basis. This includes processes which allow education providers to gather information on quality and effectiveness, as well as respond to identified risks, challenges or changes.

As part of this, education providers must collect and act on feedback from a range of stakeholders. In addition to the groups contained in this section, education providers working with service users and carers is also important, and we have covered this group in a previous section.

### Portfolio area – learners

#### Purpose

Enables us to consider a summary of feedback from and actions taken in response to learners, and how education providers ensure learner feedback mechanisms are functioning as intended.

#### Our threshold requirements

- Learners are able to contribute to the quality and effectiveness of programmes (SET 3.8).
- Regular and effective monitoring and evaluation systems are in place, including in relation to learner feedback, to ensure the quality of programmes (SET 3.4).
- There are equality and diversity policies in place in relation to learners, which are implemented and monitored (SET 3.14).
- There is a process in place for receiving and responding to learner complaints (SET 3.15).
- Learners are supported and enabled to raise concerns about the safety and wellbeing of service users (SET 3.17).

We introduced the requirement that “learners must be involved in [programmes]” (SET 3.8) into our standards in 2014. We assessed how education providers integrated learner involvement into their programmes via the annual monitoring process of our previous education quality assurance model and decided that all programmes met our requirements. This was focused on the programme level, in line with the requirements of our previous

model. Reviewing through our performance review process has enabled us to consider learner involvement at the institution level, which lends itself to better consideration of the education provider's approach.

We do not state how learners must be involved. It is up to the education provider to determine the best approach for their learners to be able to contribute to the programme.

## Approaches

Primarily, education providers sought feedback from learners, and many education providers also directly involved learners in review activities such as curriculum development and approving new programmes.

From our analysis, education providers had a range of ways to gather learner feedback and take actions forward. For example:

- module or end of year feedback forms – electronic or paper to allow analysis and close the feedback loop, such as through “You said, we did” mechanisms;
- representation at meetings – such as learner forums, representation at quality assurance proceedings, and ‘Town Hall’ meetings;
- review of external feedback data – analysis of National Student Survey (NSS) results, the National Education and Training Survey (NETs), and the Postgraduate Taught Experience Survey (PTES); and
- complaints considered by the Office for the Independent Adjudicator (OIA).

Many education providers discussed a range of some of, or all, areas above. A small number of education providers focussed on specific activities such as feedback forms or OIA complaints analysis. While these are valid uses of learner feedback, they do not fully represent how learners contribute to the quality and effective delivery of the programme.

## Developments and challenges

Education providers outlined how these processes had resulted in a variety of changes and enhancements to the delivery of programmes. For example:

- academic delivery – releasing programme materials (such as timetables) earlier to relieve anxiety among learners about the forthcoming year;
- programme management – creating specific inboxes to receive feedback at any time, and weekly drop-in sessions;
- assessment methods – for example, allowing online assessments to be taken in a 24 hour period to allow learners with children, or other responsibilities, to manage their time more effectively;
- staffing levels – recruiting additional staff to ease the burden on existing staff to improve turnaround times for assessment feedback; and

- support mechanisms – introduction of ‘Freedom to Speak Up Guardians’ in practice settings, and updating programme documents to provide clarity about the support mechanisms available.

Some education providers discussed how learner feedback had subsequently led to changes to the programme and the programme team was now seeing the benefit of this. This could be through internal or external learner feedback. In these cases, the education providers were clearly seeing the benefit of the feedback loop and how this enhanced the learner experience.

Education providers reflected on learner feedback received during the COVID-19 pandemic. Much of this was in relation to the move to online learning and the impact on practice-based learning. Measures put in place included additional support for learners (such as IT based solutions for technology and software). Alternative practice-based learning opportunities were developed to allow inter-professional learning to continue and provide learners with the clinical experience and understanding necessary to meet the Standards of proficiency (SOPs). We discussed this in more detail in the COVID-19 section.

Some education providers discussed their disappointment with the level of learner feedback received. Low numbers of learners participating in feedback surveys meant it was difficult for some education providers to reach well informed decisions about developments. Some of these education providers spoke about how they are encouraging learners to participate, for example by ensuring feedback is collected online anonymously.

## Key findings

Overall, we considered education providers clearly outlined effective processes for involving learners in the quality and effective delivery of the programmes. They appropriately reflected on the benefit of learner feedback and how this contributed to the ensuring the quality of the programme. Some education providers went on to discuss how they plan to enhance learner involvement going forward.

## Portfolio area – practice placement educators

### Purpose

Enables us to consider a summary of feedback from and actions taken in response to practice educators, and how education providers ensure practice educator feedback mechanisms are functioning as intended.

### Our threshold requirements

- Regular and effective monitoring and evaluation systems are in place to ensure the quality of programmes (including practice-based learning), including in relation to practice educator feedback (SET 5.3).
- The needs of practice educators must be understood, so they are supported with their role in programmes (SET 5.8).

- Mechanisms are in place for practice educators to raise concerns about learners, and / or placements (SETs 5.3 and 5.4).

## Approaches

Education providers recognised the importance of practice educators being able to feed back, the value of practice educator feedback, and how this promotes a collaborative approach to designing and delivering a programme.

Education providers outlined a range of mechanisms for collecting and responding to practice educator feedback, including:

- regular meetings eg. tripartite meetings (between the learner, education provider, and practice educator), formal and informal virtual or face to face meetings, conferences, and workshops;
- online support through practice educator handbooks, policies, and processes;
- open communication lines; and
- clearly setting out the roles and responsibilities of all involved.

Due to how some approved programmes are delivered, it was not applicable for some education providers to reflect upon this theme. For example, 'test of competence' programmes are a period of academic learning, with a test to ensure competence, for existing practitioners within NHS settings. In these circumstances, there is no additional practice-based learning undertaken.

## Developments and challenges

Some education providers noted how they had experienced problems gathering enough responses or the feedback received was not complete. These education providers are considering how best to enhance the levels of feedback received. For example, considering a formal data management system to capture feedback and undertake analysis of it.

The COVID-19 pandemic also had an impact on practice educators and practice-based learning. For example, some education providers outlined how it had been a challenge to collect feedback during this time. Other education providers reflected on the pressures practice educators found themselves under, for example, limited time while working to develop / supervise learners, and a high turnover of practice educators. Education providers discussed a range of responses to these pressures, for example:

- moving practice educator training and meetings online so individuals could better fit this around their clinical workload. This resulted in a greater uptake in training and more opportunities for feedback; and
- rescheduling of practice-based learning based on the availability of practice educators.

Many education providers outlined how they had received feedback and the actions put in place in response. Examples of this included:

- increased information for practice educators prior to the learner arriving. This included programme information, such as clarity in practice educator handbooks. It also included greater information about the learner themselves, such as in a 'learner passport';
- provision of academic guidance to learners prior to attending practice-based learning, such as how to write reflectively;
- the need for new and / or emerging practice-based learning sites. For example, to fill a gap created by staff absences; and
- the use of a geographical practice assessment document, especially when there was a high number of education providers delivering programmes in the same profession in the region. This resulted in the education provider using the same materials as other education providers. This meant that practice educators do not need to learn and assess learners against a variety of competences and different processes.

A small number of education providers identified they did not have a formal process in place to engage with, and collect, practice educator feedback. These education providers also discussed developments currently underway, or due to start, to actively collect feedback from this stakeholder.

A small number of education providers focussed on the training given to practice educators, which did not clearly reflect the feedback received or how it was considered. Alternatively, they reflected on the feedback provided by learners about practice educators.

### Key findings

Overall, we considered education providers clearly outlined effective and regular processes for gathering, and responding to feedback from practice educators. This enabled collaborative approaches to maintaining the quality and effective delivery of the programmes.

## Portfolio area – external examiners

### Purpose

Enables us to consider a summary of feedback from and actions taken in response to external examiners, and how education providers ensure external examiner mechanisms are functioning as intended.

### Our threshold requirements

- There must be at least one appropriately qualified and experienced external examiner in place for each HCPC-approved programme (SET 6.7),
- Regular and effective monitoring and evaluation systems are in place, including in relation to external examiners, to ensure the quality of programmes (SET 3.4).

## Approaches

All programmes have at least one external examiner in place, and mechanisms to recruit new external examiners when needed. Mechanisms for seeking and using external examiner feedback were embedded into quality mechanisms. These include:

- regular feedback points in the academic year, such as yearly external examiner reports or attendance at Exam Boards;
- contributing to revalidation events;
- acting as a critical friend. For example, during the COVID-19 pandemic when assessments were being developed to be undertaken online; and
- observations, via onsite or virtual attendance, at end of year presentations from learners.

Some education providers outlined their analysis of feedback process which included an initial programme leader review of the external examiner reports. These would then be discussed at programme level before following the relevant escalation route. Responses would be collated into an action plan and forwarded to the external examiners. Progress against the action plan would be reviewed in the previous year.

## Developments and challenges

Approximately half of education providers reflected how their external examiner feedback had been mainly positive. For example, commending the communications from the programme management team; the pastoral support for learners particularly through the COVID-19 pandemic; and the quality of feedback provided to learners following assessments. Some of these education providers went on to discuss how these commendations had been used to further improve the quality of programmes.

Additionally, many education providers discussed the feedback received and how these had been actioned. This feedback fell into two themes related to;

- the delivery and assessment of programmes; and
- how the external examiner process, including operational activities, were undertaken.
- Examples in relation to the delivery and assessment of programmes included:
  - feedback to learners – to become more consistent and transparent across assessors;
  - timing of assessments – to reduce the burden on learners which resulted in changes to the assessment timetable;
  - alternative assessment methods – such as changing how a practice assessment document was marked. Particularly in the COVID-19 pandemic, this resulted in the development of online assessments to ensure assessment and progression through the programme; and
  - academic skills – to enhance the quality of learner academic skills which led to the development of writing skills training.



Examples in relation to the external examiner process, and operational activities, included:

- access to materials – to make it easier for external examiners to access all the information they required. Particularly due to the COVID-19 pandemic, activities moved online, and it was not always easy to access, or know where to find, materials. Some education providers are looking to develop their online external examiner portals or equivalent;
- IT integrity – a small number of education providers experienced issues with their IT software or security which impacted on how external examiners were able to access materials, and feedback. This resulted in temporary alternative mechanisms to ensure the process continued to run;
- replacement of external examiners – some education providers reflected on the challenges they had experienced when recruiting for replacement examiners and the transition to the new examiner. This could be because an individual had reached the end of their tenure or unexpectedly resigned; and
- streamline of the process – to provide clarity about the timelines, actions, and responsibilities at each stage of the process.

It was clear the COVID-19 pandemic had an impact on the operational activities for external examiners. For example, some education providers were required to extend their external examiner contracts. Other education providers reflected on how their systems had moved online. This enhanced the use of technology in the process and permitted external examiners to attend meetings or observe practical sessions remotely. Both these examples allowed the continued and effective external examination of programmes during the pandemic.

A small number of education providers outlined how they had centralised their external examiners report analysis. This meant that feedback was initially received and considered at the School or Faculty level before being cascaded to the relevant programme.

Larger education providers (delivering a number of programmes across a range of professions / modalities) recruited external examiners for each of their approved programmes / professions. Approximately half of the education providers delivering one programme / profession outlined how they recruited two external examiners. This may be linked to the QAA updating their External Examining Principles in November 2022<sup>20</sup>.

### Key findings

Overall, it was clear that education providers had a good working relationship with their external examiners. They value the importance of the external examiner role, and these processes were robust and transparent to ensure the continued quality of programmes. The processes closed the feedback loop so individuals could see how their feedback had been considered and had been of benefit to the programme.

20. [External Examining Principles \(qaa.ac.uk\)](https://www.qaa.ac.uk/external-examining/principles)

## Portfolio theme – data

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### Our use of data through performance review

We do not make regulatory decisions using solely data we produce or receive. We use data and intelligence to form part of a quality picture of education providers / programmes. For the performance review process this means that where risk assessment allows, we will lengthen the period between performance review engagements from two years (which is the historical norm for the HCPC), up to a maximum of 5 years.

To remain confident with education provider performance, we rely on regular supply of data and intelligence to help us understand education provider performance outside of the periods where we directly engage with them. We source the following data for most education providers:

- numbers of learners;
- learner non continuation;
- outcomes for those who complete programmes; and
- learner satisfaction.

For most education providers, we source data as follows:

- number of learners from learner numbers agreed through previous assessments, and from all education providers through their portfolio submissions;
- learner non continuation data from a Higher Education Statistics Agency (HESA) data supply, with 73% of HCPC-approved education providers covered;
- outcomes data also from the HESA supply, with 87% of HCPC-approved education providers covered; and
- learner satisfaction is from the National Student Survey (NSS), with 86% of education providers covered.

### Education provider reflection on supplied data points

Where data is available from external supplies, we provide this data to education providers through their portfolio and ask them to reflect on the data. This might include noting how they have used a disappointing data point as a catalyst for change, or challenging us if they are unclear how data points were arrived at, and / or if data points are out of date.

Through our assessments, it was clear that education providers consider data in developing

their programmes. Normally, they were aware of disappointing results, and had plans in place to address these results. These areas are referenced through our analysis for specific portfolio areas.

### Education providers not included in external supplies

When we do not have access to data points for normal areas, the maximum length of time we will allow between performance review assessments is two years. This is so we can continue to understand risks in an ongoing way when data is not available.

If the education provider can show us how they will supply relevant data points, then the two-year cap is lifted – we consider what is reasonable on a case-by-case basis. This might include externally available or verifiable data but may also include data supplied directly by the education provider. Establishing the method of supply is important in this – we need to be assured that we will receive good data on a regular basis, and agreeing the method for this supply is a key part of the cap being lifted.

In the period reviewed, no education providers established data returns that would satisfy our requirements, although some are making progress to be able to do this. We will produce further guidance for education providers to help them establish data supplies that would be acceptable to us, to enable moving beyond a two-year monitoring cycle.

