## Performance review process report

## St George's, University of London, 2018-2021

#### **Executive summary**

Process stage - final visitor recommendation reached, covering:

The visitors reviewed the portfolio and explored two themes further via quality activity. They completed their assessment and have not identified a reason or risk to refer themes to another process but have made recommendations for the Providers next Performance Review. The visitors are recommending an ongoing monitoring period of three years.

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We have found the Provider to have fully engaged with this review process. They have been open with their reflections on the challenges they have faced in the review period and cooperative when responding to our queries. We explored the information from the initial submission through the quality activities process and sought points of clarification. No risk or concerns with the Provider's performance were identified. The visitors agreed a review period of three years will allow the Provider to continue to develop and improve their processes ahead of their next review period.

We have identified three areas which we are recommending for further development and are referring this to be highlighted within their next Performance review:

- Service User and Carer involvement.
- Practice Educator involvement and feedback.
- Providers approach to Interprofessional Learning / Education (IPE).

N/A – This is the Provider's first engagement with the Performance Review process since the launch of the HCPC Education department's Quality Assurance Model
<ul> <li>The Education and Training Committee (Panel) is asked to decide:</li> <li>when the education Provider's next engagement with the performance review process should be</li> <li>whether issues identified for referral through this review should be reviewed, and if so how.</li> </ul>
<ul> <li>Outline next steps / future case work with the Provider:</li> <li>Subject to the Panel's decision, the education provider's next performance review will be in the 2024-25 academic year</li> </ul>

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# Section 1: About this assessment

## About us

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

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

## **Our standards**

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

# Our regulatory approach

We are flexible, intelligent and data-led in our quality assurance of programme clusters and programmes. Through our processes, we:

- enable bespoke, proportionate and effective regulatory engagement with education providers;
- use data and intelligence to enable effective risk-based decision making; and
- engage at the organisation, profession and programme levels to enhance our ability to assess the impact of risks and issues on HCPC standards.

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

## The performance review process

Once a programme institution is approved, we will take assurance it continues to meet standards through:

- regular assessment of key data points, supplied by the education provider and external organisations; and
- assessment of a self-reflective portfolio and evidence, supplied on a cyclical basis

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

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

### Thematic areas reviewed

We normally focus on the following areas:

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

#### How we make our decisions

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

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

#### The assessment panel for this review

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

Beverley Ball	Lead visitor, Radiographer, Therapeutic Radiographer
Jo Jackson	Lead visitor, Physiotherapist
Sheba Joseph	Service User Expert Advisor
Alistair Ward-Boughton-Leigh	Education Quality Officer

# Section 2: About the education provider

## The education provider context

The education provider currently delivers 8 HCPC-approved programme across 4 professions and including one Prescribing programme. It is a Professional Body education provider and has been running HCPC approved programmes since 1998.

## Practice areas delivered by the education provider

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

	Practice area	Delivery level	Approved since	
	Radiographer	⊠Undergraduate	□Postgraduate	1998
Pre-	Occupational Therapy	⊠Undergraduate	□Postgraduate	2017
registration	Paramedic	⊠Undergraduate	□Postgraduate	2015
	Physiotherapist	⊠Undergraduate	⊠Postgraduate	1999
Post- registration	Independent Pres	2016		

### Institution performance data

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

Data Point	Bench- mark	Value	Date	Commentary
Total intended learner numbers compared to total enrolment numbers	389	419	2022	The value figure represents the actual number of learners currently enrolled on the providers programmes. This is in comparison to the benchmark figure which refers to the original number of learners these programmes were approved for.

				1
				The value is slightly higher which could refer to programme expansions over time. This was highlighted for the visitors to review ahead of their assessment. The provider has reflected upon this and have also provided the student / staff ratio to help explain this. This data was obtained from the provider.
Learners – Aggregation of percentage not continuing	3%	4%	2019- 2020	This data point indicates that there is a slight difference between the predicted benchmark value and the actual value. The is not significantly different and within a normal range. This data is obtained from HESA (Higher Education Statistics agency).
Graduates – Aggregation of percentage in employment / further study	94%	93%	2019- 2020	This data point indicates that there is a slight difference between the predicted benchmark value and the actual value. The difference is minor not and within a normal range. A score of 93% is still a very good score and indicates that the provider is performing well in regard to this data. This data is obtained from HESA
Teaching Excellence Framework (TEF) award	Bronze		June 2017	There are four levels for TEF awards, bronze being the third on that scale with only provisional below them. Therefore, a Bronze score is one of the lower scores that can be achieved and indicates that there is room for improvement. However, it is worth noting that this was awarded in 2017

				and no more recent assessment has taken place as the replacement for the TEF award is still being developed. Achieving an award of bronze still means that a Provider delivers teaching, learning and outcomes for its learners that meet rigorous national quality requirements for UK higher education.
National Student Survey (NSS) overall satisfaction score (Q27)	69.6%	61.4%	2022	This data point was not available earlier in this review. We therefore referred the visitors to section on this and the reflections available in the portfolio document. This data point is now available and can serve as a source of information in the ongoing monitoring period. This data point gives us independent insight into how the Provider is performing in terms of learner satisfaction of the provision.

Section 3: Performance analysis and quality themes

# Portfolio submission

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

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

## Quality themes identified for further exploration

We reviewed the information provided, and worked with the education provider on our understanding of their portfolio. Based on our understanding, we defined and undertook the following quality assurance activities linked to the quality themes referenced below. This allowed us to consider whether the education provider was performing well against our standards. Quality theme 1 – Ongoing development, feedback and monitoring of Interprofessional Education.

**Area for further exploration**: We noted from the Provider's submission Interprofessional learning / education (IPE) is an important focus for them and was included as part of their recent internal re-validations. They also reflected on the fact there are different parts of modules where learners work alongside other learners from different programmes and profession areas and jointly enrol on some modules together. It was unclear how learners were responding to IPE and no evidence is submitted on the outcomes of IPE in terms of learners benefiting or developing from IPE.

Their reflections did not include information on how evidence is gathered, or feedback is sought on IPE. We requested clarification on how feedback is sought on IPE and to determine if the Provider has an appropriate system in place for the ongoing monitoring of IPE. It is important for our review to understand if IPE is being further developed and to understand how the provider identifies what areas need to be developed and how they plan to do this.

**Quality activities agreed to explore theme further**: We sought clarification on these points through additional reflections / explanations via email and where necessary additional documents to allow the Provider to elaborate on the existing information available. We determined this would allow the provider the space to expand on the existing information available through a narrative response, but also provide them the option to submit hard evidence where required.

**Outcomes of exploration:** The Provider submitted further details and clarifications regarding their approach to IPE. This includes how placements provide an opportunity for learners to learn from one another and how learners on their Radiography, Physiotherapy and Occupational Therapy programmes are introduced to IPE through the 'Essentials for Allied Health Professionals' module required in their first year. Additionally, there are several mechanisms for learners to provide feedback on IPE. This includes via course reps, formative and summative assessments, module discussion boards, and end-of-module surveys. Learners' attendance and engagement with IPL modules is also monitored by educators.

The Provider also explained how development of the IPE modules are informed by a combination of critical analysis and evaluation of feedback about the modules; and developments emerging in policy and practice. They also stated that work is underway to develop resources that will enable learners to understand how modules are interconnected. This helped build their ability to evidence how their capacity for interprofessional learning/practice has developed over time.

We found this response to the quality activity demonstrates that the provider has plans in place for development of the IPE and how this development is based by the feedback they receive from learners. They have detailed the different mechanisms available for learners to feedback and also further highlighted the opportunities present for IPE. We found the response gave useful clarity but also denotes this as an area still in development. Although we have no concerns or identified any risks in relation to the provider's performance in this area, this is an area of development to be assessed and reflected upon at their next performance Review. We recommend the provider consider learner feedback and factor in examples of this for their next review.

## Quality theme 2 – Assessments and reviews conducted by Health Education England (HEE) within the review period

**Area for further exploration**: The Provider referred to the reporting process they have in place from external body assessments and how this informs their overall planning and reporting. There was no evidence of reviews or reports from Health Education England (HEE) to demonstrate the outcome of the reviews conducted.

It is important for our review that we understood the relationships the provider has with bodies like HEE and how their feedback / assessments are factored into the Providers planning and development. We therefore asked if HEE had conducted a recent review (within the review period) and if so, could the provider provide information for us on this and their approach to using this report going forward. It is important for our review to understand the feedback the provider is receiving from bodies like HEE and to determine how the provider is responded to this feedback and if they are using it in their forward planning.

**Quality activities agreed to explore theme further**: We sought clarification on these points through additional reflections / explanations via email and where necessary additional documents to allow the Provider to elaborate on the existing information available.

**Outcomes of exploration:** The Provider responded with a further narrative explanation and submitted a report on this area from March 2021. The provider informed us no specific feedback from HEE has been provided in the review period other than examples from other (non HCPC) programmes. They still note this as a good learning point to include this learning as standard practice across the institution. They are factoring this feedback into their ongoing developments and processes with their Practice Education Group and instilling the need for them to engage more proactively with HEE across the organisational boundaries. The nature of this they discuss, will be determined as they reorganise out their external engagement processes following dissolution of the joint partnership with Kingston University.

The report provided details of concerns raised in relation to placement gaps. We noted this report and the work being done to make the practise education group more effective. We found their response and the expansions they provide to be reasonable and measured. We found the Provider to have learnt from the points raised in our quality activity and to respond to our concerns. The have demonstrated that work being done to further embed the reporting and feedback they receive into their processes. Following the additional information submitted we have no further questions or concerns.

Section 4: Summary of findings

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

## **Overall findings on performance**

## Quality theme: Institution self-reflection

## Findings of the assessment panel:

## • Resourcing, including financial stability –

- The provider has discussed various factors that has influenced and affected their financial stability and resourcing. This includes their calculations that in academic year 2020-21 the Provider had 934 pre-registration AHP (allied health profession) learners who generated an income for them of over £11 million.
- The Provider discussed changes that have taken place in terms of structuring with the School of Allied Health, Midwifery and Social Care being created in 2016. This enabled a better resourcing model for high quality education, including closer working across a range of health and social care professions.
- The Provider has made significant investments to improve the learner experience and provide opportunities for learning in the review period. This includes investment in simulation space and technology, including a radiography suite to accommodate learners as part of their relocation from Kingston University. The Provider discussed the changes and developed in their approach to using IT, with a single virtual learning environment (VLE) called canvas now in place, Panopto video recording systems to record lectures which has increased the learner experience and their programmes popularity.
- The visitors found the provider to have reflected well on this area. They agreed that the partnership working between St George's and Kingston has required the development of a detailed understanding of the resourcing supporting their programmes. As the move to independence from Kingston university progresses, this appears to have provided a sound basis to ensure that the programmes continue to be well managed financially and able to access appropriate resources. Furthermore, Since the joint venture there have been financial benefits which are highlighted in the reflection. We therefore found the provider to be performing well here and had no concerns going forward.

## • Partnerships with other organisations -

 The Provider reflects on their joint venture the Faculty of Health, Social Care and Education which exists between Kingston and St George's universities. HCPC programmes like radiography have been relocated to St. George's where midwifery has moved to Kingston.

- The Provider has discussed their relationship with Health Education England where they have received re-imbursement for placement activity since 2018. This is a set nationally agreed rate and is managed by the Provider in their tripartite agreement between HEE, the Provider and each placement provider. The HEE Education Contract currently only applies to NHS placements, but this may be expanding to include Private, Independent and Voluntary Organisations too. Until this is ready, the provider has existing agreements it can continue with these Private, Independent and Voluntary Organisations (PIVOs).
- PIVO's currently provide placements for learners across their Occupational Therapy, Paramedic Science and Physiotherapy provision. This provides learners with the opportunity to enhance their learning by learning in a different environment. This will help learners build their confidence and gives them the opportunity to work as part of multi-professional teams.
- The Provider has referred to their membership of the council of deans and the London Healthcare Education Group's pan-London education alliance. This group meets on a regular basis to discuss challenges presented by the pandemic.
- The visitors note the most significant partnership has been that between the two universities and this will cease from the end of the academic year 2021/22. Additionally, this has clearly worked well but there is a clear rationale for its closure.
- We found the provider to have in place a range of robust and beneficial partnerships and also understand the reasons for the termination of their partnership with Kingston university. This will give them further autonomy and they have many of partnerships being developed. We therefore have no concerns going forward for this area finding the Provider to be performing well.

### • Academic and placement quality –

- The Provider discussed how education quality assurance has been delegated across various university bodies to the Quality Assurance and Enhancement Committee (QAEC), a part of their Quality and Partnerships Directorate (QPD). This not only oversees quality but is also responsible for new validations. Programmes report to QAEC via their respective undergraduate and postgraduate committees (Undergraduate programmes committee and via the Taught post graduate Course Committee.
- The Provider discussed how each programme runs termly committees and learner-staff consultative committees. These committees monitor and inform the operational running of each programme and in partnership with learners. The minutes inform the creation of annual programme monitoring reports which are reviewed and inform planning for enhancement.
- Placement activity is managed within dedicated modules in preregistration programmes, included in the APMR (annual programme monitoring report) process monitoring quality. A

dedicated reporting and monitoring system, the Faculty Practice Education Group (FPEG) exists to help monitor this too.

- The Provider has discussed examples of good practise identified including the move to online training. Which has proved efficient as the sessions typically last 2 hours as opposed to whole days of in-person training and allowing for double the number of attendees.
- We found there to be a clearly articulated process for monitoring and enhancing academic quality. Furthermore, it is good to see the successes being outlined. We did note that it would be useful for our assessment to see some evidence from committee meetings, feedback documents. We have found the Provider to have systems in place, but also recognise this could be an area for further development. We recommend that by the next review a more coordinated approach has been adopted and information on this is made available for review.

## • Interprofessional education –

- The Provider considered some opportunities for this in developments that have taken place and have also said that IPE forms a part of the education for all their programmes. They have reflected that shared learning was an important focus that was considered during their recent round internal re-validations. There are parts of modules where learners work alongside other learners from different programmes and profession areas and jointly enrol together on their Essentials for Allied Health Professionals module. These modules enabled learners to go from an inexperienced learner to a promising practitioner with a broader understanding of the AHP practitioner's role and function in the care of the patients.
- The Provider has explained how facilitating IPE has been a challenge and in particularly due to the number of learners and timetabling conflicts. They have also discussed that IPE naturally occurs is during placements. Learners are exposed to the regular interactions with other health professionals as part of the normal working pattern and routines.
- We found the Providers reflections on this area to be limited and to give us a limited insight into this area. We decided to explore this further via quality activity and this is detailed in quality theme <u>one</u>. Following this expansion, we have noted this as an area for developed and something to be examined at the Providers next Performance Review.

### Service users and carers –

 The Provider states that each programme manages its own engagement with service users and that service users are involved in various area or programmes across their provision. This includes curriculum development, learner recruitment, online assessment and curriculum delivery. They have also stated there are mechanisms in place for learners to feedback on all aspects of their programmes, including their involvement with service users.

- The Provider has detailed some of the different mechanisms they employ, and the different ways service users can be involved in programmes. This includes actors being brought in to assist on their paramedic programme and the education team has worked with actors with learning disabilities who act as simulated patients.
- The Provider recognised their lack of a coordinated approach to be a weakness. They plan to move towards a coordinated / provider-wide approach to service user and carer involvement. They detailed policies and learner experiences of working with service users and carers and informed us that they are planning to engage them in course committee meetings and programme design. They recognise this as an area requiring development going forward.
- We found this to be an area which is still being developed still but have not found a reason to refer this to another process. Instead, we will factor this into our ongoing monitoring decision and allow the provider to develop this further. We expect to review updates on this area as part of their next Performance review.
- Equality and diversity
  - The Provider reflects that they have continue to embed Equality, Diversity and Inclusion (EDI) policies into their normal practises. There has been an increasing focus on inclusive practices that are strengthened by governance and representation. The Provider established a new Deanship to focus on equality, diversity and inclusion in 2021, with the new Dean being supported by two Associate Deans (Associate Dean for Equality and Diversity Enhancement and Associate Dean for Culture and Development). They work with the Dean for Students, Deputy Principal for Education, and other members of the Executive Board to nurture the existing diversity of our community and create a truly inclusive environment for learners and staff.
  - Other programme / department leads have a duty to develop good practices, implementing and monitoring the relevant policies. In 2021 the Provider refreshed its EDI governance structure, including the establishment of the Race Equality Action and Engagement Group, to ensure impact, accountability and sustainability. They detailed how this new group sits in their internal hierarchy and that all diversity and inclusion groups draw on voices from across the University with learner representation. Additional staff or learners are also co-opted into the discussions.
  - The visitors note that there is a clear commitment to understanding and reflecting on equality and diversity. The appointment of a Dean for Equality, Diversity and Inclusion illustrates this well. This is an example of implementing continuous improvement and enhancement when required. Their approach to Equality and diversity are clearly articulated in their reflections. At both Institution and programme level, there

are clear areas where improvements have been undertaken with success and areas for future developments. We found the provider to be performing well here and had no concerns going forward.

## • Horizon scanning -

- The Provider reflects that Allied Health Professions (AHP) are a key part of the Government and NHS planning for future healthcare provision as embedded in the NHS long term plan. They reflect that as a provider delivering AHP provision they have continued to grow since 2018 as much as their estates and capacities have allowed and they intend to continue this to support the sectoral demands. They suggest this is by their response to the occupational therapist shortages in the UK, to address this they introduced their BSc in 2017, an MSc in 2022, and are now considering an Occupational Therapy Doctorate at pre-registration level (OTD) by 2025.
- The Provider have reflected on the drivers of change and have discussed the importance of keeping their curriculum up to date and are working to increase Allied Health professions in Primary Care, building Integrated Care, embracing Genomics and Digital Health. They were aware the skill set was always changing, and they worked with the pan-London and national networks to produce graduates to meet sector demands and support their future workplaces.
- We noted their reflections and their plans for expansion but also noted the fair analysis that growth can be restricted by capacity both in terms of the Providers resources but also in placement availability. As a result, of the shortage in local authority services more specific plans linked to developing relationships to support this expansion would be helpful for their next review. We have found the provider has plans going forward for their provision and do not note any concerns for this area.

**Risks identified which may impact on performance:** We did identify an area for development but determined this did not pose a risk to the quality or ongoing continuity of the Providers provision.

**Outstanding issues for follow up:** We are referring the Providers processes and policies regarding service user and carer involvement to their next Performance review.

### Quality theme: Thematic reflection

### Findings of the assessment panel:

- Impact of COVID-19 -
  - The Provider discusses how they followed governmental advice in the early stages of the pandemic, moving their teaching online. Teaching was delivered entirely remotely from March 2020 to January 2021 after which they moved to a hybrid form of delivery. They also continued to adapt practice placement

activities, in line with the guidance of the relevant professional bodies. Some physiotherapy placements were postponed or cancelled due to the pandemic. To address this, the provider altered their approach to the final year of the programme, marking learners against a set of criteria and allowing them to progress (if criteria met) with two completed placements as opposed to three. This change was made in line with guidance from HCPC to ensure learners still met HCPC standards of proficiency and they are planning to move back to their traditional placement arrangements if capacity allows.

- The Provider reflects how the pandemic lead to learners having less time for informal conversations or face-to-face interactions with their education team. To combat this, they introduced informal Course Director and Year lead communication sessions every other month and encouraged module leads to run 'Q+A's' and facilitate opportunities for communication. They also worked to ensure learner compliance with vaccinations, ensuring all learners have the required covid vaccinations to go on placement.
- Programme teams became well-versed in online learning technologies to provide online delivery of the curriculum.
   Practice education teams went to great lengths to ensure all placements could continue, to source placements from their partners and create new and innovative placement opportunities during such a challenging time.
- The Provider discussed permanently adopting changes to teaching and assessment that had originally been intended as temporary Covid-19 measures. These policies will be examined and reflect upon in upcoming internal re-validations to determine if there have been positive changes made to the programme due to Covid, with online resources improving, and online delivery becoming more interactive. They also discussed their project to support the online delivery of programmes. This commenced in 2021 to review and develop a clear framework for systems and processes that are necessary for the successful rollout of online programme delivery. We found the provider to have responded well to and learnt from the pandemic and have clear plans going forward to retain elements introduced.

### Use of technology: Changing learning, teaching and assessment methods –

 The Provider discusses the large shift which took place to online learning in 2020-21. They reflect on why this was necessary to ensure learners could continue their studies in line with Covid-19 restrictions. They developed a framework for online education that was based on a range of principles intended to enhance learners learning experience. The implementation of the Online Education Framework also led to the establishment of an Online Education Exchange, a community of practice in Microsoft Teams which was created to support the implementation of the framework. This hosts a range of mechanisms include peer exchanges and technical support workshops, now the framework is being developed for the postcovid era to support the planned hybrid model of learning.

- They have also discussed the changes made to simulation use in placement learning. This included using new technology and software such as Simu cases which are a simple web-based tool with various patient video library content and simulated patient information. It is used within Occupational Therapy to fill the gap in the shortage of placements available for their learners. VERT simulation software enables skill development and demonstration of the working environment for radiographers. The provider already used a standard version of VERT in their provision, but this has been upgraded to an enhanced version. Shaderware is another piece of technology they have invested in; this is a radiography training package using 3D interactive simulation.
- The visitors found this section to be well reflected upon. It presented additional insight to the learners on the providers approach to Covid-19 and the lessons they learnt going forward. We also found examples given of how their approach has developed particularly in relation to the use of IT in assessments. We found the provider to be performing well in this area and have no concerns going forward.

## • Apprenticeships –

- The Provider has stated that don't offer apprenticeships that are linked to HCPC registration as a healthcare professional and don't have plans to do so. They have also stated that since 2020, they have offered an MSc Advanced Clinical Practice that includes an apprenticeship route. This route does provide the option for AHP apprentices to take the Prescribing module, which falls within the scope of this review. However, the numbers have been very limited and after the faculty dissolution will not be offered going forward.
- They discuss the challenges that apprenticeships have presented include the additional levels of regulatory burden linked to them. But also, in terms of learner support, quality of education and trainer, and employer engagement, there are no additional challenges.
- The visitors reviewed these limited reflections but did not offer specific feedback on this area as it is not an area the provider run HCPC-approved programmes in. We recommend the provider continue to consider this going forward and offer reflections in the future should they pursue this route.

### Risks identified which may impact on performance: None

### Outstanding issues for follow up: None

Quality theme: Sector body assessment reflection

## Findings of the assessment panel:

- Assessments against the UK Quality Code for Higher Education -
  - The Provider reflects that they have not been reviewed by the QAA (quality assurance agency) since their institutional audit in 2011. They make use of the QAA's Advice and Guidance, and their Quality Manual is mapped to its Themes. They are also subscribed to QAA Membership and encourage their staff to attend QAA events and to make use of their resources.
  - The confirmed that the QAA no longer conducts regular visits but that they do comply with the Office for Students (OfS) conditions of registration and also that the OFS has introduced new quality and standards arrangements which came into force in May 2022.
  - The provider is planning on mapping their processes against the new OfS conditions, but do not anticipate these will lead to any substantive changes. They will continue to utilise the guidance and information made available by the QAA. We found these expansions to give further clarity and show their approach here to be reasonable. We had no further questions or concerns.

## Assessment of practice education providers by external bodies –

- The Provider reflects that a key part of assessments by external bodies is managed via the Health Education England monthly reporting system of any concerns within practice. This is then fed back by their network of academic staff assigned to learners when on practice and collated by the practice education leads for each profession. This was used in their joint faculty with Kingston university but will still be fed back as necessary to their intendent framework. They also state that concerns are less often raised via the CQC (care quality commission) around Allied Health Professions, but these will be identified within this monthly reporting process.
- We noted from the providers reflections that they have referred to the reporting process and their review from HEE, but no information on this review or report was provided. We therefore chose to explore this further via a quality activity as detailed in quality theme two.
- Following this further assessment, we had no questions or concerns going forward. We found their response to be reasonable and measured and evidence that the Provider has learnt from the points raised in our questioning. They have demonstrated that work being done to embed this into their processes and develop this area going forward.

## National Student Survey (NSS) outcomes –

• The provider has used this section to report on the results of the 2019-2021 surveys. They reflect that these results have been disappointing, but in response to this their principal of the institution has held specific Summit meetings with programme teams and other staff in the institution who contribute to running the programmes. These have been revealing they reflect and

helpful in identifying the causes of challenges within each programme, common challenges across the institution and just as importantly best practice where this is apparent in programmes with better results.

- They have reflected on the results and given some reasoning 0 that may explain the lower scores, including staff absences caused by the pandemic and also the move of some programmes from Kingston to St George's campus'. They also reflect that several of the AHP programmes still scored highly and also that the 'teaching on my course' category consistently scored well. The 'assessment and feedback' category generally scored the lowest and the Provider reflects that institution-wide projects have been put in place to address the feedback raised and work to reverse these lower scores. They are also brining the learner voice into these discussions with learner feedback being considered and learner representatives being able to raise issues to the academic teams. The NSS 2021 summits they reflect are an opportunity for an open discussion of these results and also a chance to look at what issues may have caused this.
- The Provider has also discussed the impact of their cohorts size and therefore how the results can be disproportionately affected by cohort effects (both up and down) caused by experiences of a few learners that in other (larger) universities would balance out across the results from different faculties. Additionally, the window for completing the NSS is between March and April and any issues that arise in this time can skew the results.
- The visitors found the provider to have reflected on their disappointment in the NSS results. Examples of how they have engaged with learners are provided in their submission. We found it may have been helpful to consider the NSS results alongside their own quality monitoring and capturing of student voice over their university journey. NSS results articulated as well as the actions from the results and some success that they have enjoyed. We found this area to be well reflected upon and evidenced with plans on how they will use these results going forward. We had no area we wanted to explore further or any concerns.

## • Office for Students monitoring –

 The Provider has states in this section that they are a registered provider with the Office for Students. But have not been subject to monitoring within this review period. They did not provide any further reflections; the visitors reviewed this section and noted the lack of response. They did not find this to constitute a risk or have any concerns regarding this. We note also that several mechanisms and systems are monitoring are in place and can be considered as part of any ongoing monitoring period.

## Other professional regulators / professional bodies –

 The Provider has states that they engage with the following professional bodies; the chartered Society of Physiotherapists, Society and College of Radiographers, the Royal College of Occupational Therapists and the College of Paramedics. This reflects the various profession areas that they currently run provision in, and the Provider will be subject to regular reaccreditations of their programmes from these bodies. They discuss some of these reaccreditation events that have occurred over the review period as well as accreditation events for new programmes. This includes the MSc Occupational Therapy programme that was approved in February 2022.

- The Provider has also described fitness to practice panels across the professional groups as an opportunity to explore other regulatory bodies such as the GMC (general medical council) or NMC (nursing and midwifery council) and all members of their academic team are encouraged to be aware of these bodies and their regulatory functions. They reflect that this can be an opportunity to view, discuss and implement the regulations from another professional body.
- The Provider submitted; the RCOT outcome report for the 2021 accreditation of BSc and MSc Occupational Therapy, the 2022 Annual Quality Review from the Chartered Society of Physiotherapy and the College of Radiographers report confirming approval of the revalidated BSc Diagnostic Radiography and BSc Therapeutic Radiography programme in 2019. This is to demonstrate different assessments and reviews conducted by other professional regulators and professional bodies during the review period.
- We found this confirms that the provider has clear processes in place for engagement and assessment from their professional bodies and that this is a system being utilised. The additional evidence confirmed to us that there are no risks from this area to the providers provision and the visitors noted that this additional evidence provided clarification of this area for us. We have no further questions or concerns going forward.

### Risks identified which may impact on performance: None

### Outstanding issues for follow up: None

### Quality theme: Profession specific reflection

### Findings of the assessment panel:

- Curriculum development
  - The Provider states that their programmes are subject to regular reviews and revalidations typically occurring every five years or less. This process aims to ensure that the curriculum is current and meets the needs of its intended market through a Panelbased event that includes internal staff, external experts and a learner panel member. Visitors from professional bodies are also invited to these events, when reaccreditation is required, and service users are also involved in curriculum development.

All programme teams develop the curriculum in partnership with learners ongoing via learner-staff liaison meetings and in the more formalised revalidation process.

- The Provider discusses that at an institutional level they are continuing to move to a blended hybrid way of teaching and that ongoing efforts are being to better embed diversity into the curriculum. They then reflect on a few programme level enhancements that have taken place, such as the recognition in their physiotherapy provision that there was a lack of training within the curriculum for self-management support. To address this, a project with Bridges Self-Management Support Social Enterprise commenced in 2018 supported with funding from HEE to embed in the curriculum for pre-reg physiotherapy (BSc and MSc) and Occupational therapy.
- We found the provider to be performing well in this area. Finding the provider to have demonstrated a clear sense of ongoing curriculum development, with specific examples related to three of the professional groups. Furthermore, a clear desire to ensure the contemporary nature of their curricular is evident. We had no concerns or questions relating to this area.

## Development to reflect changes in professional body guidance –

- Following recent revalidations, the provider has recruited 0 additional staff in order to be in line with professional body guidance on staff-learner ratios. They have also changed their assessment guidelines around resits and learners failing placements to be in line with the professional body guidance. Work has also been undertaken to enhance equality diversity and inclusion across the provider with recent recruitment from ethnically diverse backgrounds to be reflective of the diverse student body in the teaching profile of staff. When designing case-based learning, the use of diverse patient descriptors /case studies helps the course to be reflective of a diverse patient population. A member of their Physiotherapy education team has also contributed to the development of a training resource for racial inclusivity in physiotherapy practice education. This project was funded by HEE and involved three other HEI's.
- The visitors found the provider to have demonstrated that they clearly engage with the relevant professional bodies and examples are provided of changes reflecting guidance or priority areas. The programmes engage with the various professional bodies and respond to any developments. We had no questions or concerns for this area finding the provider to be performing well here.

### Capacity of practice-based learning –

 The Provider reflects that placement capacity is a challenge across all of their provision and is one of their main limitations on provision growth. Their programmes they discuss remain popular and with less reliance on clearing to meet target numbers. The pandemic has led to more capacity challenges on the University campus, placement capacity continues to be the main limiter to expansion to meet the needs of society.

- The Provider has worked to establish good relationships with HEE's new Practice Education Facilitator roles. This has enabled better communication with placement providers to plan for the full academic year and address individual learner issues as well as building capacity. London HEI's have historically operated with a voluntary donation model and Provider states that there is untapped placement capacity in London. Securing adequate placement capacity at the last-minute is time consuming and inefficient and tends to focus on asking.
- The Provider discuses that as a result of Covid they now have more options for offering flexible and innovative placements for learners. With options such as working from home when selfisolating being in place and guidance being offered to learners on how they can demonstrate their learning. They also reflect on the different placement's sites, with many being available and the majority within two hours of the university. This means learners do not have to travel too far but can act as a limit on growth by not including further afield sites. Tripartite agreements are in place ot manage learner numbers at sites, with input from the provider, the sites and the relevant professional body.
- The visitors found the Provider reflections to be useful for their assessment and insightful. Challenges are noted in relation to practice based learning capacity across the professional groups and some frustration with the potential to expand is evident. The provider clearly engages with all existing mechanisms to support the development of practice opportunities. Practicebased learning challenges are highlighted and some evidence as to how these have been overcome during the pandemic and moving forwards. We found the Provider to be managing this well and had no concerns going forward.

## Risks identified which may impact on performance: None

### Outstanding issues for follow up: None

### Quality theme: Stakeholder feedback and actions

### Findings of the assessment panel:

- Learners
  - The Provider has discussed their 'student voice platforms' which are used to inform and enact action plans at various levels across the institution. These include final year learners completing the National Student Survey (NSS) and others completing the Student Experience Survey (SES). At a modular level data are collected via the Student Online Teaching Survey (SOLTS). The fourth platform used is Unitu which facilitates continuous and representative student feedback and the ability

to 'close the loop' on issues raised. Learner and year representatives are also available, and gain collect feedback and raise issues.

- The provider has discussed various challenges that they have faced including achieving high enough levels of engagement in the various platforms for feedback with modular level surveys achieving an average of 28.42% response rate. In response a multi-channel approach has been developed to increase engagement with completion and module leader response. This includes revising staff briefings to ensure the survey cycle is understood, conducting staff training where required and also revising the survey promotion materials to include examples of action taken in response to module feedback.
- Other developments include the formation of the Unitu Bat 0 Signal group in Autumn 2021, who meeting on a weekly basis to consider and respond to urgent/serious posts on Unitu that require input from multiple stakeholders. They also ran a "You Said, We Did" campaign which showcased how they acted upon feedback provided by learners to enhance their experience, the scope of this is expanding to a "Did You Know?" campaign to highlight the range of resources, opportunities and support mechanisms available. They are also implementing a series of learner-chaired 'Student Voice Committees' (SVCs) to be rolled out in 2022-23 for undergraduate programmes with a view of expanding this to postgraduate programmes. Their purpose is to provide a forum for two-way communication and discussion aimed at shaping programmes with effective teaching, learning and learner experience.
- We identified that some aspects of the submission were minimal, but steps have been taken to expand on this and efforts shown to embed this into their processes. We have found this not to constitute a risk to their provision but want to highlight this as an area for review for their next Performance Review.

### • Practice placement educators –

- The Provider states that feedback from placement educators is a key part of each programme, the differences between the way each profession works means the mechanisms vary. Their Physiotherapy provision reflects that they continue to offer a programme of Practice Educator training which were moved online during the height of the pandemic. They found attendance trebled as a result of this and the 'Teams' format allows for greater numbers of involvement. Participants have expressed a preference for the 2-hour online sessions and the Provider will continue to review these sessions.
- The Provider reflects that they have had regular contact with HEE and Practice Education Leads, with particular focus on SW London providers. This has created much closer working relationships for capacity and quality issues. Every 6 months the Clinical Liaison Meeting (CLM) is held with the academic team

and student co-ordinators for the clinical partners. The discussions allow us to share best practice and ensure awareness to the teams of any changes proposed that affect the clinical education aspects of the programme.

- Feedback is also obtained from evaluation forms and practise assessment documents include a summary of progress, initial and end placement reviews, learner "drop in" days and developmental action plans. Learners are supported by these plans with 'Practice Ed', Link Tutors and Provider Leads supporting as required. Placement liaison tutors from individual trusts are invited to 'Joint Staff and Student Consultative Meetings' to offer and receive placement feedback.
- We noted reflections in this area but found that little of the information provided related to feedback from practice placement educators. It would be useful for our review to have a better understanding of how practice educators engage with the programme and provide feedback is required. It would be useful to see evidence as to how the practice educators provide and how the feedback is used. We do not find this constitutes a risk to their provision but instead recommend that this area is developed before the next review and information as to what is covered in the training minutes of meetings is provided as part of this review.

## • External examiners –

- The provider has detailed how the Quality and Partnerships Directorate submits a report to the Quality Assurance and Enhancement Committee on an annual basis to provide an overview of the way in which the External Examiner system is operating. In 2020-21 they received praise for the way the system was operating and also on the use of Microsoft Teams, with some feedback suggesting it had increased attendance.
- The Provider stated that external examiner reports also form part of the evidence for Periodic Review or Revalidation. All programmes are typically reviewed or revalidated every five years. Most recently the BSc Occupational Therapy underwent a revalidation in October 2021. All reports for the HCPC accredited courses that fall under the scope of this review received positive and supportive feedback. Course teams submit responses to external examiner feedback and work towards implementing feedback throughout the next academic year. External examiners are then invited to comment on the team's progress since the report of the previous year.
- We note the summary provided by the provider and also the use of examples. The visitors did comment that being provided an example of an external examiner report would help their assessment, the Provider opted to send us copies of recent reports upon seeing this feedback. The visitors found it useful to see the external examiners feedback for the programmes and following this we had no further concerns or questions.

## Risks identified which may impact on performance: None

**Outstanding issues for follow up:** We explored their approach to learner involvement and how learners can feedback and how this feedback is acted upon. We do not constitute this as a risk to their provision but are highlighting this as an area for development to be looked at during their next Performance Review. We also identified the collecting and acting upon practise educator feedback as an area for development to be looked at during their next review.

### Data and reflections

### Findings of the assessment panel:

- The Provider has all the required data points available and has reflected on each of these in turn. In aggregation of percentage of learners not continuing, the provider scores 3% which is in line with the benchmark. This indicates that they are performing well and as expected. They reflect that they are performing well here but recognise their Occupational Therapy provision is the lowest scoring (but within a normal range) and this is an area they have continued to monitor and pay attention to.
- In Aggregation of percentage of those who complete programmes in employment / further study the provider scores 93% which is also in line with the benchmark and show that the provider is performing well here too. They reflect that their Physiotherapy provision is slightly higher than the rest in this area, but this could be down to market competition and the abundance of Physiotherapy graduates. They note the positive score and are now aiming to increase the response rate to the Survey and has been working on campaigns to raise awareness of the survey.
- The provider has a bronze level award from the TEF, which they reflect is from their 2016-17 assessment. In the 2017-18 academic year they volunteered to be in the pilot for the TEF award replacement. They note that they have note had a subsequent TEF award since the initial award in 2016-17, but have been working to implement excellence in teaching, learning and assessment, learner experience and learner outcomes for all learners and courses across the institution.
- In the National Student Survey (NSS) overall satisfaction score (Q27) the Provider scored 56% which is below the benchmark score of 75%. They state that overall satisfaction score has been at or above the benchmark of 75% for the past 10 years with the notable exception of 2021. This they say was an exception year that saw a decline across the entire higher education sector. The topology across programmes does vary over the years with some programmes attaining 100% satisfaction.
- The different programmes and profession areas will have varying scores and the average does not reflect these scores. They reflect that that they have experienced fluctuations across the years and across provisions. BSc Therapeutic Radiography scored 100% in 2020 and just fell short of the threshold for reporting in 2021 which also influences the results. They reflect that their BSc Occupational Therapy

had a good performance across the board but also saw varying results with 'Learning Resources' scoring 70% but 'Students' Union' scoring 50%.

 We note the provider reflections and analysis of these data points and also that generally they are scoring well with the NSS score being the exception. The provider has demonstrated that they have a system in place to review and monitor these scores. Furthermore, they have also discussed plans to review the feedback and act upon this. We did not find these scores to constitute a risk to their provision. The data points being in place means that we can continue to monitor their performance throughout the ongoing monitoring period and these scores can feed into the monitoring period that we are recommending.

## Risks identified which may impact on performance: None

## Outstanding issues for follow up: None

## Section 5: Issues identified for further review

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

### Referrals to next scheduled performance review

#### Service User and Carer involvement in Providers processes

**Summary of issue:** We noted from our assessment a lack of a coordinated approach to the involvement of Service Users and Carers in the Providers processes. The Provider has demonstrated ambitions to develop this area further and to better integrate Service Users and Carers into their processes, but these ambitions do not appear to have been fulfilled yet and this area required development. We are recommending a three-year ongoing monitoring period before the Providers next Performance Review and are referring this matter to be looked at during this next review. We recommend the Providers look at this area and reflect upon it at their next review with three years being sufficient time to do so.

### Placement Educator involvement and feedback

**Summary of issue:** We note that the provider has a system in place for the training and involvement of Practise placement educators. However much of their review referred to the training involved, and it was unclear how educators can feedback on their involvement, the systems in place for this or how their feedback is utilised. We therefore are recommending that the provider develop this area further and reflect upon it at their next Performance Review.

### Providers approach to Interprofessional Learning / Education (IPE)

**Summary of issue:** We note that the Provider has in place a system for receiving feedback and developing their IPE. But we also note that much of this seems to be being developed and has not been fully implemented. We explored this further via

quality activity (<u>one</u>) and following this have a greater understanding of their plans in place. This is an area still being developed and we recommend the provider develop this further and reflect upon this at this next performance review with a focus on learner feedback and its use in the development of IPE.

## Section 6: Decision on performance review outcomes

## Assessment panel recommendation

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

- The education provider's next engagement with the performance review process should be in the 2024-25 academic year
- The issues identified for referral through this review should be carried out in accordance with the details contained in section 5 of this report and reviewed at the next Performance Review.

**Reason for this recommendation:** We are recommending a three-year monitoring period as we have found the Provider to have completed the review, engaged well in their reflections, been open about the challenges they have faced and creative in finding solutions to these. They have cooperated with us throughout our review and responded well to the quality activities we raised. We have identified an area for improvement around service user, carer and involvement and note that the Provider has plans in place to develop this.

We have also identified and area for improvement around the involvement of practise placement educators and also their option to feedback on the Provider processes. We are recommending an ongoing monitoring period of three years to allow sufficient time for the Providers plans and developments to be enacted and for feedback on this from the service users, carers and practise placement educators to be collected. We note that all four required data points are in place that will allow us to continue to monitor their progression over this time. We believe three years is sufficient time for these developments to be enacted and for their effectiveness to be realised and also reflects the work the Provider has put into this review.

Appendix 1 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
BSc (Hons) Diagnostic Radiography	FT (Full time)	Radiographer	Diagnostic	radiographer	01/01/1998
BSc (Hons) Occupational Therapy	FT (Full time)	Occupational the	erapist		01/09/2017
BSc (Hons) Paramedic Science	FT (Full time)	Paramedic			01/09/2015
BSc (Hons) Paramedic Science (In Service)	FT (Full time)	Paramedic			01/01/2017
BSc (Hons) Physiotherapy	FT (Full time)	Physiotherapist			01/09/1999
BSc (Hons) Radiotherapy and Oncology	FT (Full time)	Radiographer	Therapeutic	radiographer	01/09/2023
BSc (Hons) Therapeutic Radiography	FT (Full time)	Radiographer	Therapeutic	c radiographer	01/01/1999
MSc Physiotherapy (Pre-registration)	FT (Full time)	Physiotherapist			01/09/2013
Prescribing: Independent and Supplementary	PT (Part time)			Supplementary prescribing; Independent prescribing	01/06/2016