

# Approval process report

University of Cumbria, Occupational Therapy (Degree Apprenticeship) 2024-25

# **Executive Summary**

This is a report of the ongoing process to approve the BSc (Hons) Occupational Therapy (Apprenticeship) programme at the University of Cumbria. This report captures the process we have undertaken to date to assess the institution and programme against our standards, to ensure those who complete the proposed programme are fit to practice.

#### We have:

- Reviewed the institution against our institution level standards and found that
  most of the relevant standards are met at threshold in this area. There were
  certain areas that we needed to explore further and we determined that
  requesting additional information through stage 2 was the most appropriate way to
  do this. We described the areas where we need more information, and explained
  the reasoning for this decision, in section 2 below.
- Reviewed the programme against our programme level standards and found our standards are met in this area, following exploration of key themes through quality activities.
- Recommended all standards are met, and that the programme should be approved

Through this assessment, we have noted:

- The areas we explored focused on:
  - How the education provider would ensure that they deployed visiting lecturers appropriately. We asked them to supply additional evidence about their relationships with local organisations from which they drew additional expertise, alongside their permanent staff.
- The programme meets all the relevant HCPC education standards and therefore should be approved.

Previous consideration	N / A as the case did not arise from a previous process.
Decision	The Education and Training Committee (Panel) is asked to decide whether the programme is approved.
Next steps	Subject to the Panel's decision, we will add the programme to the list of approved programmes.

# Included within this report

Section 1: About this assessment	4
About us Our standards	4
Our regulatory approach The approval process	
How we make our decisions  The assessment panel for this review	
Section 2: Institution-level assessment	5
The education provider context	6 6
AdmissionsManagement and governanceQuality, monitoring, and evaluationLearners	11 13
Outcomes from stage 1	18
Section 3: Programme-level assessment	20
Programmes considered through this assessment	21 21
Quality theme 1 – whether sufficient numbers of appropriate in place	
Section 4: Findings	22
Conditions  Overall findings on how standards are met	
Section 5: Referrals	26
Recommendations	26
Section 6: Decision on approval process outcomes	26
Assessment panel recommendation	26
Appendix 1 – summary report	28 29

# 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 approval process undertaken by the HCPC to ensure that the programme detailed in this report meet our education standards. The report details the process itself, evidence considered, outcomes and recommendations made regarding the programme's 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 approval process

Institutions and programmes must be approved by us before they can run. The approval process is formed of two stages:

 Stage 1 – we take assurance that institution level standards are met by the institution delivering the proposed programme(s) • Stage 2 – we assess to be assured that programme level standards are met by each proposed programme

Through the approval process, we take assurance in a bespoke and flexible way, meaning that we will assess whether providers and programmes meet standards based on what we see, rather than by a one size fits all approach. Our standards are split along institution and programme level lines, and we take assurance at the provider level wherever possible.

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

#### 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 on our website.

#### The assessment panel for this review

We appointed the following panel members to support this review:

Jennifer Caldwell	Lead visitor, Occupational therapy
Patricia McClure	Lead visitor, Occupational therapy
Niall Gooch	Education Quality Officer

### Section 2: Institution-level assessment

#### The education provider context

The education provider currently delivers 19 HCPC-approved programmes across four professions, and four Postgraduate Independent and Supplementary Prescribing Programmes. It is a Higher Education provider and has been running HCPC approved programmes since 1992.

The proposed programme will be delivered in the Institute of Health, as is the rest of the HCPC-approved provision. There is one other HCPC-approved apprenticeship at the education provider.

# 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 2</u> of this report.

	Practice area	Delivery level		Approved since
	Occupational therapy	⊠Undergraduate	⊠Postgraduate	2002
Pre-	Paramedic	⊠Undergraduate	□Postgraduate	2013
registration	Physiotherapist	⊠Undergraduate	⊠Postgraduate	2003
	Radiographer	⊠Undergraduate	□Postgraduate	1992
Post- registration	Independent Preso	2007		

# 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.

This data is for existing provision at the institution, and does not include the proposed programme(s).

Data Point	Bench- mark	Value	Date	Commentary
Learner number capacity	1941	1971	2025	The benchmark figure is data we have captured from previous interactions with the education provider, such as through initial programme approval, and / or through previous performance review assessments. Resources available for the benchmark number of learners was assessed and accepted

				through these processes. The value figure is the benchmark figure, plus the number of learners the provider is proposing through the new provision.  This data point does not raise any concerns for this assessment.
Learner non-continuation	7%	15%	2021-22	This data was sourced from a data delivery. This means the data is a bespoke Higher Education Statistics Agency (HESA) data return, filtered bases on HCPC-related subjects.  The data point is above the benchmark, which suggests the provider is performing below sector norms  When compared to the previous year's data point, the education provider's performance has dropped by 10%.  We explored this by considering how well the education provider is supporting learners to complete the programme. We did not have any concerns in this area.
Outcomes for those who complete programmes	92%	93%	2021-22	This data was sourced from a data delivery. This means the data is a bespoke HESA data return, filtered bases on HCPC-related subjects.  The data point is above the benchmark, which suggests

				the provider is performing above sector norms.  When compared to the previous year's data point, the education provider's performance has improved by 2%.  We explored this area through the stage 2 assessment to ensure that the education provider would support learners into next steps appropriately. We considered that there are no concerns in this area.
Teaching Excellence Framework (TEF) award	N/A	Silver	2023	The definition of a Silver TEF award is "Provision is of high quality, and significantly and consistently exceeds the baseline quality threshold expected of UK Higher Education."  We did not explore this data point through this assessment because this ranking does not raise any questions about teaching quality.
Learner satisfaction	79.5%	81.0%	2024	This data was sourced at the subject level. This means the data is for HCPC-related subjects  The data point is above the benchmark, which suggests the provider is performing above sector norms.  When compared to the previous year's data point, the education provider's

				performance has improved by 2%.
				We did not explore this data point through this assessment because it did not raise any concerns about this assessment.
HCPC performance review cycle length	N/A	4 years	2025-26	The education provider went through performance review in 2021-22 and was given a four year interval to the next review.

We also considered intelligence from others as follows:

 NHS England North West informed us in a virtual meeting in June 2025 that they considered this programme was necessary for occupational therapy in the region.

### The route through stage 1

Institutions which run HCPC-approved provision have previously demonstrated that they meet institution-level standards. When an existing institution proposes a new programme, we undertake an internal review of whether we need to undertake a full partner-led review against our institution level standards, or whether we can take assurance that the proposed programme(s) aligns with existing provision.

As part of the request to approve the proposed programme(s), the education provider supplied information to show alignment in the following areas.

# Admissions

#### Findings on alignment with existing provision:

- Information for applicants -
  - The education provider state that such information will be available via open days and, as necessary, through communications with the academic team and through the generic university-level contact team. Admissions are governed by the institutional Admissions Policy and Procedure.
  - In a virtual meeting with the education provider, they clarified that learners on the programme would mostly be employees of existing practice education partners, so that they would use existing collaboration pathways to provide information about the apprenticeship as necessary.
  - There will be a website giving full information for applicants.

 We consider the relevant standards are met because the education provider have clear defined mechanisms for ensuring that appropriate information is available for applicants.

# • Assessing English language, character, and health -

- The education provider state that the requirements around this area will be made available to applicants by means of the programme website, specifically the 'Applicants' and 'Admissions' next steps webpages. The particular academic requirements around English and Maths qualifications will be on the programme website.
- The information in the ARF is relatively brief but the education provider's institutional baseline document, which was recently updated (January 2025) sets out much more detail. The education provider has a self-declaration of good health and character process which applicants on preregistration AHP programmes are required to complete.
- Learners must additionally complete a medical clearance questionnaire, as well as certain blood tests and vaccinations to ensure safety in placement. A successful Disclosure and Barring Service (DBS) check is also required. For internal learners, specific requirements by country are listed on the application website. Applicants with a first language other than English must be able to demonstrate appropriate competence through IELTs or equivalent.
- We therefore consider that the appropriate standards are met.

# Prior learning and experience (AP(E)L) –

- o In the ARF the education provider state that "some prospective students may be able to APL in prior learning (subject to a mapping exercise of qualification and experience). Specifically, the learners can AP(E)L in level 4 work to join the programme at Level 5, this has been mapped to the new OTDA programme". The education provider's policies in this area are governed by a Recognition of Prior Learning policy.
- These arrangements appear to be appropriate and to reflect clear consideration of the specific requirements of this programme. There is extra detail in the January 2025 institutional baseline. Specifically, occupational therapy is mentioned as having a slightly different AP(E)L process, with no more than a third of the programme subject to AP(E)L to meet a Royal College of Occupational Therapists (RCOT) policy.
- In light of all the above detail about the approach in this area, we consider the relevant standard is met.

### Equality, diversity and inclusion (EDI)–

The approval request form provides limited information about the approach in this area. However, the baseline document sets out more information about the policies and procedures governing this area. These include an Equality, Diversity, and Inclusion Policy, an Access and Participation Plan, and an Admissions Policy. All staff involved in admissions must undergo mandatory Equality, Diversity & Inclusion (EDI) training, and staff are also trained in EDI by service users, who also have input into preparation for

- interviewing panels. There is refresher training for staff on diversity in the workplace and applicant interviews are debriefed by service users.
- The education provider has an institutional statement on EDI. They say they "are committed to embracing our responsibility as a facilitator of change and continue to develop our equality agenda in line with and, where appropriate, beyond the Equality Act 2010." The statement mentions all the protected areas from the 2010 EA.
- All programmes are required to conform with this institutional approach.
   What this means in practice is that during the annual review process they are required to account for how they have performed in all those areas.
   The education provider's performance around EDI was found to be good during the 2021-22 performance review process.
- In light of the above, we consider the relevant standards in this area are met.

# Management and governance

### Findings on alignment with existing provision:

- Ability to deliver provision to expected threshold level of entry to the Register<sup>1</sup> –
  - The education provider delivers an existing BSc (Hons) Occupational Therapy and an MSc Occupational Therapy. In the ARF, and in correspondence, they have stated that the new apprenticeship will be "aligned" with the existing Level 6 programme, in terms of content and assessment.
  - The existing provision demonstrates that the education provider has the staff, and the institutional infrastructure and experience, to deliver Level 6 education in occupational therapy. They deliver a broad range of programmes, including another apprenticeship, in HCPC-approved professions, so it is reasonable for us to consider that they are able to deliver additional HCPC-approved apprenticeship.
  - We consider the relevant standards are met because the education provider is able to deliver the provision at the appropriate level. We can be confident of this based on our knowledge of their existing provision and the previous approval processes they have been through.

#### Sustainability of provision –

In the ARF the education provider set out how their institutional policies ensure the sustainability of their provision. They state that "effective delivery of provision is ensured through our leadership structure." This structure includes the Director of the Institute in which AHP programmes sit, and the following roles: Head of Learning, Teaching and Student Experience; Head of Practice Learning and Partnership Engagement; and the Head of Student Recruitment and Portfolio Development.

<sup>&</sup>lt;sup>1</sup> This is focused on ensuring providers are able to deliver qualifications at or equivalent to the level(s) in SET 1, as required for the profession(s) proposed

- However, the ARF contains limited information about how the education provider will ensure the sustainability of this particular apprenticeship.
   They note that is in contained in the Institute of Health's business development plan.
- As a result, we will need to consider through stage 2 of this process how the education provider will ensure that this specific programme can be sustained appropriately. In particular we will need to understand how the education provider will collaborate with employers to ensure sustainable provision. It is relevant to this point, however, that NHS England informed the HCPC that they are supportive of the programme.

# • Effective programme delivery –

- The education provider has been delivering an HCPC approved occupational therapy programme since 2002. This means there is institutional experience and expertise available, as well as the facilities to enable effective delivery of the apprenticeship programme. The education provider also delivers one other apprenticeship, which began in 2022.
- The ARF has limited information about this area but we know from the baseline document and from the 2021-22 performance review that all programmes are expected to make annual reports to ensure their ongoing effectiveness and viability. These reports are used by the senior management team to drive improvement and referred to in future review processes.
- The baseline document states that there are designated professional leads for all AHP programmes, and an annual monitoring process for all programmes. As part of this process the education provider monitors "retention, attrition, student experience, award and progression information."
- O However, the ARF did not provide sufficient detail for us to understand how this specific proposed apprenticeship would be overseen by management, how they would ensure appropriately qualified staff, how they would liaise with the professional body, and how they would work with the employers. We will therefore need to explore the detail of these areas through stage 2 of this process. The particular SET in question is:
  - 3.2 The programme must be effectively managed.

# • Effective staff management and development -

- In the ARF, the education provider note that they have an Academic Workload model. Minimal additional information is given but in the baseline document the education provider sets out in considerable detail how their manage and develop staff. They say that "programmes and staff teams are managed within subject groups by Principal Lecturers". New staff undergo an induction process, and programme leads are required to implement working patterns and responsibilities appropriately, "to ensure a fair allocation of workload across teams and that staff are supported in their personal development".
- The baseline document also notes that staff have access to Academic Development Activity at the institutional Centre for Academic Practice

Enhancement (CAPE). CAPE provides staff with resources including Apprenticeship Toolkits. Additionally all academic staff must work towards a PGCert in Learning and Teaching for Higher Education during their first three years. Part of this process is certifying staff under the UK Professional Standards Framework for Teaching and Supporting Learning in Higher Education (UKPSF, 2011), and "provides participants with the opportunity to be professionally recognised as a Fellow of Advanced HE". Staff also have access to internal opportunities including subsidised involvements in the education provider's provision.

 In light of the above we consider that the relevant standards in this area are met.

#### Partnerships, which are managed at the institution level –

- The education provider stated that their key partnerships are the employer partners who will be providing the apprentices and the relevant placements. The had not presented any detailed information about how they will manage partnerships with the employers are at the time of this stage 1 review. This means that we will have to consider through stage 2 how the education provider will be collaborating with employer partners to deliver appropriate clinical learning.
- The ARF does list several employer partners with whom the education provider is planning to co-operate. We did consider through their most recent performance review that the mechanisms in place for managing partnerships are well established and appropriate. The visitors in that review considered that the education provider was well-integrated with regional consortiums and working groups and had clear internal mechanisms for managing partnerships.
- Gaps in our understanding of this area can be addressed through our review of the stage 2 standards, specifically SETs 3.5 and 3.6, which focus on how the education provider collaborates effectively with practice partners.

#### Quality, monitoring, and evaluation

# Findings on alignment with existing provision:

### Academic quality –

- In the ARF, the education provider refer to the Academic Regulations And the Quality Handbook as evidence in this area. They state that the mechanisms for ensuring academic quality on the apprenticeship will match those on the existing occupational therapy programmes. There is no additional detail.
- There is some additional detail in the baseline document, which notes that the university-level annual monitoring process is the key mechanism for maintaining academic quality. This monitoring involves "different monitoring strands, including learner feedback, staff feedback, external examiner reports and exit data." Part of the annual monitoring process is feedback and suggestions for improvement, and the implementation of

these is monitored in the following review. External examiners and a formalised peer process for peer review of learning, teaching and assessment are also an important part of the education provider's quality monitoring.

o In light of the above, we consider that the relevant standards are met.

# Practice quality, including the establishment of safe and supporting practice learning environments –

- The ARF states that the key policy in this area is the Placement for Healthcare Professionals Policy. It does not provide a great deal of additional information. However, the baseline document elaborates on this information to some degree. It mentions the Health Care Professionals Placement Policies and an Escalating Quality Issues (including Deescalation and Sharing) policy. Placement quality is overseen by a Placement Unit. On the web page of this Unit, there will be information about the responsibilities and requirements of practice educators.
- The baseline document also makes clear that the Placement Unit will undertake audits of relevant Trusts and gather learner feedback. It will also have responsibility for managing the tripartite learner-provider-employer relationship. The Raising and Escalating Concerns (by students) policy and the Fitness to Practice policy are also relevant in this area.
- This is appropriate information, and enables us to understand how the education provider will ensure quality in practice-based learning. However, we are not entirely clear on how the education provider will ensure that the employer partners can ensure a safe and supportive environment for all learners in their clinical settings, therefore we will explore this through stage 2.

#### Learner involvement –

- In the ARF several mechanisms governing learner involvement are mentioned: the Quality Handbook, the Mid Module evaluation process, Staff/Student Liaison meetings and the Student Charter. They state that for this new proposed programme the same mechanisms will be used as for the existing approved provision, although the information is limited.
- The baseline document expands on this information, noting that "student Voice and Learner involvement are an ongoing priority. Learner involvement is now embedded within our quality processes. The University has a Dean for Student Experience and Success, and each Institute has a Lead/Head of Learning Teaching and Student Experience." Learners have the opportunity to be involved in programme design and development.
- The baseline document also mentions a Student Evaluative Feedback Policy and an Institute of Health Student Board, both of which have input into ongoing quality arrangements.
- In light of the above, we consider that the relevant standards are met.

# • Service user and carer involvement -

The ARF refers to an Institute of Health Experts by Experience strategy, but does not provider additional information except to say that the service

- user and carer involvement on the proposed programme will reflect the involvement on the existing provision.
- The baseline document expands on this information to some degree. It mentions an Institute of Health Community and Public Involvement Strategy Group, which is a new organisation designed to manage to service user involvement at the strategic level.
- In the most recent performance review, 2021-22, we considered that use
  of service users by the education provider was effective and appropriate.
   Specific individuals within faculties have responsibility for working with this
  group for their programmes.
- This is all useful information. However we consider that it would be helpful for our understanding of service user involvement with the specific programme under review if the education provider submits additional information about this area through stage 2.

#### Learners

## Findings on alignment with existing provision:

# Support –

- The ARF notes that the key mechanisms for supporting learners: the Quality Handbook, the Student Handbook and the Personal Tutoring policy. It does not expand on how these policies are implemented, except to say that it will be the same on the new programme as on the existing provision.
- The baseline document states that the "university offers a wide variety of student support services", including "Money and finance support Library services Health and Wellbeing Student success Chaplaincy Careers and employability".
- This is appropriate information, setting out clear policies and pathways in place for supporting learners at the education provider. However, we still do not have clear information about how the education provider would work with employer partners to support learners. We will therefore need to consider through stage 2 how the education provider will manage this requirement for the apprenticeship.
- We recognise there will be additional policies and processes in place from the employer which support wellbeing and learning (SET 3.13). As part of this, we need to understand which policies apply in each situation and how learners know about these; how learners access academic support while in their place of employment; and whether and how processes are shared between the employer and the education provider.
- We will also need to consider policies and processes in place for obtaining appropriate consent from service users and learners (SET 4.10). This is because the education provider and employer may have specific, and differing, policies / processes.

# Ongoing suitability –

- The ARF states that the key mechanism in this area are as follows: the Good Health and Good Character declarations, Fitness to Practice policy, the Fitness to study policy, and the Academic Regulations. The education provider note that these will be applied in the same way on the new programme as on the existing provision. The ARF does not expand on this information.
- The baseline document also has relatively limited information in this area, noting only the Student Code of Conduct and Disciplinary Procedure, incorporating the Fitness to Practise policy.
- This appears to be broadly appropriate as far as the education provider is concerned. However, we do not have sufficient information regarding how the education provider will work with employer partners on the apprenticeship.
- The education provider and employer will have specific policies and processes to ensure the ongoing suitability of the learner (SET 3.16). We will need to understand which apply in which situation, and which takes priority relating to achievement and progression.

# • Learning with and from other learners and professionals (IPL/E) -

- The ARF does not elaborate on the education provider's IPE approach in any detail. It notes that there is an Institute of Health IPE strategy, and that it is already in use on other programmes at the education provider. In the baseline document, the education provider states that they have a well-developed IPL/E model and that IPL/E is in place across different aspects of programmes. They say that they will elaborate in more detail in their stage 2 submission, as regards how IPL/E will work on the specific programme under consideration through this approval
- In correspondence and discussions, the education provider stated that apprenticeships gives opportunities for multi-disciplinary learning that other programmes may not offer. This is because the learners on an apprenticeship spend longer in the workplace. They are also more closely integrated with a workplace because of their existing employment.
- It appears that the education provider approach is appropriate. However, we will consider through stage 2 the detail of IPL/E on the new programme.

#### Equality, diversity and inclusion –

- The ARF and the baseline document set out several policies and procedures which govern the education provider's EDI approach, including a University Inclusivity Statement, an Equality, Diversity and Inclusion (EDI) Strategy, and the use of an Equality Diversity Inclusion and Wellbeing Committee (EDIW). The ARF notes that the overall approach will be the same on the new programme as on the existing programmes.
- These policies appear to be appropriate. However, through stage 2 we will need to consider some additional information around how the education provider and the employer partners will implement these policies and

ensure they are followed. This will enable us to be confident that learners on the programme are being treated fairly and equitably.

# <u>Assessment</u>

# Findings on alignment with existing provision:

# • Objectivity -

- The ARF sets out the policies governing this area: the Learning, Teaching & Assessment strategy, the Programme Assessment strategy, and the Academic Regulations. The education provider state in the ARF that the approach for this programme will reflect the approach taken on the existing provision.
- The baseline document expands on this information to some degree. The
  education provider state there that they use a mix of assessment
  approaches in line with institutional requirements, and that appropriate
  notice is take of the "regulations and requirements" of professional bodies.
- This appears to be reasonable overall. However we have limited information about how the education provider will use these policies to ensure objectivity in assessment on this specific programme (the relevant SET is 6.3).

#### Progression and achievement –

- Learners progress through programmes at the education provider in the manner set out in detail in the Academic Regulations. The education provider state that the arrangements will be the same for this programme as on the existing provision. However, there is limited information in the ARF.
- The baseline document does not provide a large amount of additional information, but does state the strategic approach taken to progression by the education provider, i.e. it defines which learners are considered by the progression policy.
- O Given the lack of information available, we will need to consider additional information through stage 2 to ensure we are making an informed and appropriate decision about how learners progress and achieve on the programme. In particular we will need to understand more about how the education provider will work with employer partners to ensure effective programme delivery. This is covered by SET 6.4, which is a stage 1 standard, but will also likely be addressed by the evidence for SETs 6.1 and 6.2 (stage 2).

#### Appeals –

 The ARF refers to the Academic Regulations and states that the approach on the new programme will mirror that already used on the existing provision. There is no further information, but the baseline document refers to the Academic Appeals process and the Academic Procedures and Processes. The baseline document does not provide a large amount of additional information, but does state the overall appeals policy. In previous approval processes and in the 2021-22 performance review, we considered that the education provider's institutional appeals process was effective and being applied appropriately. We therefore can be satisfied that the relevant standards in this area are met.

# **Outcomes from stage 1**

We decided to progress to stage 2 of the process without further review through stage 1. As outlined above, there were some areas which we considered we should explore further through stage 2 of the process.

We considered it was appropriate to consider the outstanding issues through stage 2 without further stage 1 review, for two main reasons:

- The additional information we are seeking mostly overlaps with information that would normally be supplied through a stage 2 submission, so we do not want to request duplicate information from the education provider as this would be unnecessarily burdensome;
- The additional information we are seeking is mostly clarification or expansion
  of information that we have already reviewed from the education provider,
  rather than new evidence, meaning that it would be disproportionate to
  request a full new submission.

Additionally, having this information reviewed by partner visitors through stage 2 will add to the depth of the scrutiny we can apply, and give the visitors additional context for their assessment.

Education and training delivered by this institution is underpinned by the provision of the following key facilities:

- Occupational Therapy suite containing specialised equipment and facilities
- Simulation suite
- Library
- General classrooms
- Student quiet spaces

Risks identified which may impact on performance: None.

**Outstanding issues for follow up:** From our stage 1 review, we identified a number of areas that we will need to pick up through stage 2. Below we briefly outline these areas and note the SETs to which they are relevant.

We considered that it would be disproportionately burdensome to request a separate stage 1 documentary submission to address these issues. This is because we do have generally good information to work with in the approval request form and the January 2025 baseline document, and are seeking to fill gaps in our understanding, rather than us having serious doubts about whether the stage 1 standards are met. Additionally, the gaps in our understanding are in areas where there is overlap with programme level standards, so the information that the education provider would normally submit for stage 2 will largely cover the gaps.

# • 3.1 The programme must be sustainable and fit for purpose

In relation to the 'Management and governance' section above, we will need to see additional information about how the education provider will work with individual employer partners to ensure the programme is sustainable (the programme level SETs 3.5 and 3.6 overlap significantly with this area).

# 3.2 The programme must be effectively managed

In the 'Management and governance' section above, under 'Effective programme delivery', we noted that we did not yet have sufficient information about how the programme management would oversee the new programme. Specifically we were not fully clear how the management would ensure appropriately qualified staff, how they would liaise with the professional body, and how they would work with the employers. There is overlap here with the programme level SETs 3.5, 3.6, 3.9, 3.10 and 3.12.

# • 3.7 Service users and carers must be involved in the programme

In the 'Quality, monitoring, and evaluation' section above, under 'Service user and care involvement', we note that there are strong arrangements in place at the institution level for service users and carers to be involved in programmes at the education provider, but that it is not entirely clear what the arrangements will be for the specific programme. In stage 2, the education provider must provide additional information about how this will be done.

- 3.13 There must be effective and accessible arrangements in place to support the wellbeing and learning needs of learners in all settings
- 4.10 The programme must include effective processes for obtaining appropriate consent from service users and learners
- 5.4 the processes to make sure practice-based learning takes place in an environment that is safe and supportive for learners and service users.

In the 'Learners' section, under 'Support', we reviewed the education provider's institutional policies and processes for supporting learners' wellbeing and learning, for EDI monitoring in relation to learners, for managing complaints, for ensuring ongoing suitability and for allowing learners to raise concerns. These all seemed appropriate. However, we were not clear how the education provider would ensure that their employer partners understood their obligations in these areas, so we request the education provider to elaborate on SET 3.13 through stage 2. Related to 3.13 is 5.4, which we also considered in relation to the 'Practice quality' section, and we will need to understand further how the education provider will ensure that employer partners are providing a safe and supportive environment.

SET 4.10 is also included here because the education provider needs to clarify how that standard will be met for the new programme, and how they will ensure that employer partners have effective processes.

For all of these, there is some overlap with the programme level SET 3.5, which covers effective collaboration with employer partners, and SET 5.6, which requires practice educators to be appropriate persons to support learning.

- 6.3 Assessments must provide an objective, fair and reliable measure of learners' progression and achievement.
- 6.4 Assessment policies must clearly specify requirements for progression and achievement within the programme

Under 'Assessment' above, we note that we need some more information about two areas:

- how the assessment approach on the programme will provide objective,
   fair and reliable measures of learners' progression and achievement; and
- how the assessment policies will ensure that the requirements for progression and achievement within the programme are clear, particularly for learners in clinical settings.

The information submitted in clarification of these standards is likely to overlap with the information submitted for the programme level standards 6.1, 6.2 and 6.5.

# Section 3: Programme-level assessment

# Programmes considered through this assessment

Programme name	Mode of study	Profession (including	Proposed learner	Proposed start date
			number,	

		modality) / entitlement	and frequency	
BSc (Hons)	FT (Full	Occupational	30 learners,	01/10/2025
Occupational Therapy	time)	Therapist	1 cohort per	
(Apprenticeship)			year	

### Stage 2 assessment - provider submission

The education provider was asked to demonstrate how they meet programme level standards for each programme. They supplied information about how each standard was met, including a rationale and links to supporting information via a mapping document.

# Data / intelligence considered

We also considered intelligence from NHS England who informed us via regular collaboration meetings that they were extremely supportive of additional occupational therapy apprenticeship provision in the north-west of England.

# Quality themes identified for further exploration

We reviewed the information provided, and worked with the education provider on our understanding of their submission. 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 met our standards.

We have reported on how the provider meets standards, including the areas below, through the <u>Findings section</u>.

Quality theme 1 – whether sufficient numbers of appropriately qualified staff are in place

**Area for further exploration**: In their submission the education provider gave details of their staffing arrangements. We viewed curriculum vitaes and a validation briefing document which set out which staff members would have which responsibilities for different parts of the programme. From this evidence we understood that a total of 8.9 Full Time Equivalent (FTE) was available.

This was suitable evidence because it explained how the education provider had organised their staffing to deliver the academic components of the programme. However, from the validation briefing document, the visitors were aware that the education provider was intending to make use of visiting lecturers, and it was not clear from the documentation how these would be integrated into the overall delivery. For example, the visitors did not understand from the documentation how the

education provider would determine which areas of the programme needed to be enhanced or supported by visiting lecturers. Without this knowledge there was a risk that the programme would not be using appropriately qualified and experienced staff to deliver the whole curriculum. We therefore decided to explore this through quality activity.

**Quality activities agreed to explore theme further**: We requested additional evidence from the education provider to enable us to understand this aspect of the programme delivery.

**Outcomes of exploration:** In their response, the education provider provided details of some of their visiting lecturers – this included links to their professional webpages. They also explained how they work with local partners to choose appropriate members of staff to teach on the programme. They elaborated, as an example, on their memorandum of understanding (MOU) with an NHS Trust, University Hospitals of Morecambe Bay (UHMB). This MOU incorporates a shared staffing resource to make it easier for the education provider and UHMB to share staff as appropriate and to allocate staff time effectively.

Additionally, the education provider stated that they would be drawing on relationships developed via the existing approved programme, the BSc (Hons), to provide visiting staff. Their response to the quality activity noted that they have local relationships with private, independent and voluntary organisations – the PIVO sector – and that individuals from these organisations would be used to deliver additional teaching on the programme as necessary and appropriate. They gave several examples of specialists from these organisations who would teach on the programme, including those who worked in schools, in mental health and with refugees.

Having reviewed the additional evidence, we concluded that the relevant standards were met. The education provider had demonstrated that they had a clear mechanism for incorporating visiting lecturers as required, and that they could draw on a strong base of expertise in local partners.

# Section 4: Findings

This section details the visitors' findings from their review through stage 2, including any requirements set, and a summary of their overall findings.

#### **Conditions**

Conditions are requirements that must be met before 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.

The visitors were satisfied that no conditions were required to satisfy them that all standards are met. The visitors' findings, including why no conditions were required, are presented below.

# Overall findings on how standards are met

This section provides information summarising the visitors' findings against the programme-level standards. The section also includes a summary of risks, further areas to be followed up, and areas of good practice.

# Findings of the assessment panel:

- SET 1: Level of qualification for entry to the Register this standard is covered through institution-level assessment
- SET 2: Programme admissions
  - The education provider submitted their programme specification and provided links to relevant webpages, to demonstrate how they applied relevant professional and academic standards in admissions.
  - Applicants for the programme are required to be already working in a relevant healthcare role, ideally in an occupational therapy setting, to have GCSEs in Maths and Science, and at least one science-related A-Level. They will need to be formally supported by an employer. The education provider has defined a process of collaboration with employers by which they will determine whether applicants are suitable. There is also an agreement between education provider and employer to co-operate on recruitment.
  - We considered the relevant standards are met in this area, because the education provider had demonstrated they could operate an appropriate process for selecting learners for the programme.
- SET 3: Programme governance, management and leadership
  - As well as the normal stage 2 standards, we asked the education provider to submit additional evidence for SET 3, around SETs 3.1, 3.2, 3.7 and 3.13. These standards address sustainability, management and governance, service user involvement, and support for learners.
  - For the management and sustainability standards, the education provider supplied an expanded version of the programme specification, as well as a Digital Employers' Guide, an institutional strategy document, and Apprenticeship Information for Employers document. These documents set out how they would collaborate with employers and what the various structures of accountability were. They also specified additional local organisations with whom they would be working.

- Regarding service user involvement, the evidence consisted of the
  education provider's Strategy for Engagement of People Who Use
  Services and Their Carers (PUSC) / Community and Public
  Involvement (CAPI). This document explained how service users would
  be involved in the programme in design, in teaching and learning
  activities, and in assessment. The education provider also noted which
  specific modules would have input from service users.
- Regarding support for learners, the key pieces of evidence supplied were the Personal Tutoring Policy, the Student Support online directory, and relevant policies around support, additional needs and access to welfare services. These had been specifically tailored to include apprentices – the employers were required to agree that they would collaborate with the education provider's support and service arrangements.
- Regarding the education provider's collaboration with practice-based learning partners, the education provider submitted evidence related to the working on their Placement Unit (PU). The PU is a dedicated team at the education provider tasked with maintaining and expanding the practice-based learning capacity available to the programmes. The education provider noted also that they will have monthly meetings with all the employers involved in the apprenticeship, to discuss learner progress and any matters arising. These will be chaired by senior staff. Additionally, the occupational therapy placement lead will seek to have monthly meetings with Placement Educator Facilitators (PEFs).
- The education provider submitted staff CVs and a delivery plan showing which parts of the curriculum would be delivered and supported by which staff. They also mentioned using guest / visiting lecturers. We explored this area further through quality activity.
- We considered all the standards ion this area to be met, as the education provider had demonstrated the ability and the systems to manage the programme effectively and to ensure appropriate staffing and support.

# • SET 4: Programme design and delivery -

- The education provider submitted a standards of proficiency (SOPs) mapping exercise. They also mapped the HCPC standards of conduct, performance and ethics (SCPEs). Additionally they supplied a Quality-Handbook, Curriculum Design Framework, Academic Regulations, a programme specification and the programme handbook.
- We also saw a mapping exercise for the Royal College of Occupational Therapy (RCOT) standards, which demonstrated how the education provider would incorporate the professional expectations and best practice into their delivery. RCOT have accredited the programme.
- The teaching and learning schedule demonstrated that the education provider had collaborated with the employer appropriately to deliver integration of theory and practice, and use appropriate teaching techniques. This was demonstrated through the programme specification.

- Regarding SET 4.10, which pertains to procedures for obtaining appropriate consent, where we requested some additional evidence out of stage 1, the education provider specified where in each module the learners would be taught about appropriate ways to obtain informed consent.
- We considered all the standards met in this area, because the education provider had demonstrated that the apprenticeship would be designed in such a way as to ensure learners received all the appropriate knowledge and experience. They had shown that the curriculum would enable learners to understand the profession, and to understand their autonomy and evidence-based working. The academic regulations also made it clear that the education provider had mechanisms for maintaining the clinical currency of the curriculum.

# SET 5: Practice-based learning –

- The education provider's submission included module descriptors and a programme specification which set out how the clinical learning in the employer setting would be integrated with academic learning in the university setting. It was also clear from this evidence that the education provider would ensure that there was an appropriate range and duration of clinical learning in the employer setting.
- Regarding the education provider's ability to ensure that staff in employer settings were appropriately qualified and experienced, and that there were an appropriate number of them, the education provider supplied some CVs. They also submitted the New Educator Course & Educator Update training materials, and the template agreements that employers would have to sign. These agreements include a section on appropriate supervision. Practice educator arrangements in the employer setting will also be discussed at the regular meetings between the education provider and employers.
- We asked for additional evidence around SET 5.4, normally a stage 1 standard, which addresses how the education provider ensures that practice-based learning is safe and supportive. This is addressed through the agreements with employers and the regular meetings, as well as opportunities for learners to discuss progress with staff.
- We considered the standards met because the education provider has demonstrated that the employer placements integrate appropriately with the rest of the programme. They have also shown that they can exercise appropriate oversight of the practice-based learning and the suitability of the people involved.

# SET 6: Assessment –

 The education provider submitted a marking and moderation policy, alongside the RCOT mapping and the SOPs mapping already mentioned. They also noted certain modules as being the key areas for delivery of professional requirements (the SCPEs), and supplied a Student Code Of Conduct which explained how the SCPEs were

- integrated into their general expectations of learner behaviour for the programme.
- We also reviewed the education provider policies on progression and achievement, as required through stage 1. In addition, we reviewed the section in the programme handbook which explained the range of assessment methods that would be used on the programme.
- We considered that all the relevant standards were met, because the education provider had shown that assessment on the programme would appropriately test the learners' knowledge and ability, and that a suitable range of methods were used. We also considered that the education provider had shown us how they had developed and communicated the requirements for progression.

# Risks identified which may impact on performance: None.

# Section 5: Referrals

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

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

#### 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 met before programmes can be approved, but they should be considered by education providers when developing their programmes.

The visitors did not set any recommendations.

# Section 6: Decision on approval process outcomes

#### Assessment panel recommendation

Based on the findings detailed in section 4, the visitors recommend to the Education and Training Committee that all standards are met, and therefore the programme should be approved.

# **Education and Training Committee decision**

Education and Training Committee considered the assessment panel's recommendations and the findings which support these. The education provider was

also provided with the opportunity to submit any observation they had on the conclusions reached.

Based on all information presented to them, the Committee decided that:

• The programme is approved

**Reason for this decision:** The Panel accepted the visitor's recommendation that the programme should receive approval.

Date of ETP: 30<sup>th</sup> September 2025

# Appendix 1 – summary report

If the education provider does not provide observations, only this summary report (rather than the whole report) will be provided to the Education and Training Committee (Panel) to enable their decision on approval. The lead visitors confirm this is an accurate summary of their recommendation, and the nature, quality and facilities of the provision.

Education provider	University of Cumbria		
Case reference	CAS-01793-M8Y7N2	Lead visitors	Jennifer Caldwell, Patricia McClure
Ouglitus of manufation			

#### **Quality of provision**

Through this assessment, we have noted:

- The areas we explored focused on:
- o How the education provider would ensure that they deployed visiting lecturers appropriately. We asked them to supply additional evidence about their relationships with local organisations from which they drew additional expertise, alongside their permanent staff.
- The programme meets all the relevant HCPC education standards and therefore should be approved.

# Facilities provided

- Occupational Therapy suite containing specialised equipment and facilities
- Simulation suite
- Library
- General classrooms
- Student quiet spaces

Programmes			
Programme name	Mode of study	First intake date	Nature of provision
BSc (Hons) Occupational Therapy (Apprenticeship)	FT (Full time)	01/10/2025	Apprenticeship

# Appendix 2 – 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	c radiographer	01/01/1992
BSc (Hons) Diagnostic Radiography (top up, degree apprenticeship)	WBL (Work based learning)	Radiographer	Diagnostic	c radiographer	01/02/2022
BSc (Hons) Diagnostic Radiography (top-up)	FT (Full time)	Radiographer	Diagnostic	c radiographer	01/02/2022
BSc (Hons) Occupational Therapy	FT (Full time)	Occupational t	herapist		01/09/2008
BSc (Hons) Paramedic Science	FT (Full time)	Paramedic			01/09/2020
BSc (Hons) Paramedic Science - East of England Ambulance Service (EEAS)	WBL (Work based learning)	Paramedic			01/04/2021
BSc (Hons) Paramedic Science - Isle of Wight (IoW)	WBL (Work based learning)	Paramedic			01/10/2020
BSc (Hons) Paramedic Science - London Ambulance Service (LAS)	WBL (Work based learning)	Paramedic			01/10/2020
BSc (Hons) Paramedic Science - North West Ambulance Service (NWAS)	FLX (Flexible)	Paramedic			01/10/2020
BSc (Hons) Paramedic Science - South Central Ambulance Service (SCAS)	WBL (Work based learning)	Paramedic			01/10/2020
BSc (Hons) Paramedic Science - South East Coast Ambulance Service (SECAMB)	WBL (Work based learning)	Paramedic			01/02/2021

BSc (Hons) Paramedic Science - South Western	WBL (Work	Paramedic		01/10/2020
Ambulance Service (SWAS)	based			
	learning)			
BSc (Hons) Physiotherapy	FT (Full time)	Physiotherapist		01/09/2008
MSc Occupational Therapy (pre-registration)	FT (Full time)	Occupational therapist		01/09/2013
MSc Physiotherapy (pre-registration)	FT (Full time)	Physiotherapist		01/09/2012
Non-Medical Prescribing for AHPs (level 6)	PT (Part time)		Supplementary prescribing;	01/01/2014
(Conversion)			Independent prescribing	
Non-Medical Prescribing for AHPs (level 7)	PT (Part time)		Supplementary prescribing;	01/01/2014
(Conversion)			Independent prescribing	
UAwd Independent / Supplementary Prescribing	PT (Part time)		Supplementary prescribing;	01/09/2020
for Allied Health Professionals (Level 6)			Independent prescribing	
UAwd Independent / Supplementary Prescribing	PT (Part time)		Supplementary prescribing;	01/09/2020
for Allied Health Professionals (Level 7)			Independent prescribing	