# Performance review process report

# Keele University, Review Period 2018-2023

#### **Executive summary**

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

health & care professions council

We have

- Reviewed the institution's portfolio submission against quality themes and found that we needed to undertake further exploration of key themes through quality activities
- Reviewed the institution's portfolio submission to consider which themes needed to be explored through quality activities
- Undertaken quality activities to arrive at our judgement on performance, including when the institution should next be reviewed
- Recommended when the institution should next be reviewed
- Decided when the institution should next be reviewed

Through this assessment, we have noted:

- The areas we explored focused on:
  - Quality theme 1 The visitors considered service users had contributed positively to the education provider's programmes. The visitors recognised work to establish a Faculty User and Carer Liaison Group (FUCLG) had been undertaken. The education provider stated this group wanted to establish a 'hub' of service users and carers. Through a quality activity we were satisfied with how service users and carers had been involved in the development of this hub, and the timeline for the hub's further development.
  - Quality theme 2 The education provider outlined learner recruitment for the prosthetist / orthotist programme had not yet achieved target numbers to 'make the programme viable'. They had explored marketing with the British Association of Prosthetists and Orthotists (BAPO), the professional body, and NHS England to increase the visibility of the profession. We understood the education provider had begun marketing the programme to veterans as an alternative health professional career when discharged from the Armed Forces. Through a quality activity we were satisfied with the education provider's contingency plan, and associated timescales, should learner recruitment not improve for this programme.
- The provider should next engage with monitoring in five years, the 2028-29 academic year, because:

• The education provider engages with a range of stakeholders with quality assurance and enhancement in mind. The education provider considers sector and professional development in a structured way. Data for the education provider is available through key external sources. From data points considered and reflections through the process, the education provider considers data in their quality assurance and enhancement processes and acts on data to inform positive change.

Previous consideration	Not applicable. The performance review process was not referred from another process.
Decision	<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>
Next steps	<ul> <li>Outline next steps / future case work with the provider:</li> <li>Subject to the Panel's decision, the provider's next performance review will be in the 2028-29 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:

Hazel Anderson	Lead visitor, Prosthetist / orthotist		
Jo Jackson	Lead visitor, Physiotherapist		
Sarah Hamilton	Service User Expert Advisor		
John Archibald	Education Quality Officer		
Tracy Longden-Thurgood	Advisory visitor, Biomedical Scientist		

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

In this assessment, we considered we required professional expertise across all professional areas delivered by the education provider. We considered this because there were areas within the portfolio which the lead visitors could not make judgements on with their professional knowledge or expertise. These areas were reflections in the biomedical science profession.

# Section 2: About the education provider

#### The education provider context

The education provider currently delivers 16 HCPC-approved programmes across five professions and including two independent and supplementary prescribing programmes. It is a higher education provider and has been running HCPC approved programmes since 1996. This was a physiotherapy programme which has since closed.

#### 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	
	Biomedical scientist	⊠Undergraduate	□Postgraduate	2009
Pre-	Paramedic	⊠Undergraduate	⊠Postgraduate	2021
registration	Physiotherapist	⊠Undergraduate	⊠Postgraduate	2018
	Prosthetist / Orthotist	⊠Undergraduate	□Postgraduate	2022

	Radiographer	⊠Undergraduate	□Postgraduate	2017	
Post- registration	Independent Presc	Independent Prescribing / Supplementary prescribing			

## 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<sup>1</sup>.

Data Point	Bench- mark	Value	Date of data point	Commentary	
Numbers of learners	450	572	2022	The benchmark figure is data we have captured from previous interactions with the education provider, such as through initial programme approval, and / or through previous performance review assessments. Resources available for the benchmark number of learners was assessed and accepted through these processes. The value figure was presented by the education provider through this submission. We explored the potential impact on resources to support learners and the visitors were satisfied with the information they received.	
Learner non continuation	3%	2%	2020-21	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.	

<sup>&</sup>lt;sup>1</sup> An explanation of the data we use, and how we use this data, is available <u>here</u>

				The data point is below the benchmark, which suggests the provider is performing above sector norms. When compared to the previous year's data point, the education provider's performance has dropped by 1%.
Outcomes for those who complete programmes	93%	92%	2020-21	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 below 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 5%. The visitors considered the education provider's performance here and were satisfied with the education provider's reflection.
Learner positivity score	76.3%	80%	2023	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 5.5%.
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# 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.

#### Data / intelligence considered

We also considered intelligence from others (eg prof bodies, sector bodies that provided support) as follows:

 NHS England Midlands - We received information considering current pressures regarding practice-based learning for physiotherapy in the Midlands.

#### 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 – service user and carer involvement in the development of the hub

**Area for further exploration**: The visitors considered service users had contributed positively to the education provider's programmes. For example, feedback from service users for the MSc Paramedic Science programme suggested ensuring learner paramedics consider mental health needs is a theme throughout the curriculum. This suggestion positively influenced the development of the curriculum.

The visitors recognised work to establish a Faculty User and Carer Liaison Group (FUCLG) had been undertaken. The education provider stated this group wanted to establish a 'hub' of service users and carers where programmes advertise opportunities for involvement to service users and carers. The visitors were however unsure of how service users and carers had been involved in the development of this

hub, and the timeline for the hub's further development. They therefore sought reflections on how this had been developed.

**Quality activities agreed to explore theme further**: We decided to explore this by requesting an email response from the education provider. We thought this was the most effective way to explore the theme as we decided it was a query to which we needed to clarify our understanding.

**Outcomes of exploration:** The education provider outlined the work they had undertaken to develop the FUCLG. They added it consists of five service users and five academics. The group meet every three months to discuss the hub. They aim to have it up and running in the next two years. The visitors were satisfied the evidence assured them service users had been involved in the development of the hub, and the education provider had a timeline for its development. We had no further areas to explore in this theme.

#### Quality theme 2 - learner recruitment on the prosthetist / orthotist programme

**Area for further exploration**: The education provider reflected learner recruitment for the prosthetist / orthotist programme had not yet achieved target numbers to 'make the programme viable'. They had explored marketing with BAPO, the professional body, and NHS England to increase the visibility of the profession. We understood the education provider had begun marketing the programme to military veterans as an alternative health professional career. This was because the education provider considered these veterans to have more of an awareness of the need for this profession. The visitors however were unsure whether the education provider had considered a contingency plan, and associated timescales, should learner recruitment not improve for this programme. They therefore sought more information about this.

**Quality activities agreed to explore theme further**: We decided to explore this by requesting an email or documentary response from the education provider. We thought this was the most effective way to explore the theme as we decided it was a query to which we needed to clarify our understanding.

**Outcomes of exploration:** The education provider outlined how they are keeping recruitment to the prosthetist / orthotist programme under review. The visitors understood the programme is structured with several shared modules. This allowed learners to study alongside those from other programmes. The education provider stated this shared learning supports the viability of the programme while cohort numbers are smaller than anticipated.

The visitors were satisfied the evidence assured them the education provider had a contingency plan, and associated timescales should learner recruitment not improve for this programme. We had no further areas to explore in this theme.

# Section 4: Findings

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

## **Overall findings on performance**

Quality theme: Institution self-reflection

## Findings of the assessment panel:

## • Resourcing, including financial stability -

- In 2019, the education provider implemented a financial sustainability plan (FSP). This is to ensure continued growth and to allow them to maintain their programmes. This was supported by a University Academic Delivery Plan (ADP) which underpinned the FSP. The FSP and ADP requirements drive the annual budget setting process. This identified targets for income and expenditure. These actions have enabled the education provider to be in a positive long-term position.
- The education provider centralised professional services. They oversee aspects such as the quality of teaching, manage the administration of academic life, staff recruitment and development, marketing. For example, the Placement Management team. This was to facilitate more agile, efficient, and sustainable ways of working.
- A new group, Student Recruitment and Admissions Group (SRAG) was implemented. Consequently, there was a greater level of scrutiny and consistency for new programme development and viability of the existing portfolio. This was also supported and overseen via the new FSP and ADP.
- We were satisfied with how the education provider is performing in this area.
- Partnerships with other organisations
  - The education provider has partnerships with a range of diverse practice-based education providers across England, in the NHS and with private providers, such as in the voluntary sector.
  - The education provider is working towards meeting workforce demands by diversifying their programmes.
  - The education provider restructured the professional services support staff department. There is now a Faculty Placements Team, a Faculty Academic Placement Chair for the Faculty Placement Management and Quality Committee, and school practice-based learning academic leads. The latter roles support the management of practice-based learning and partnerships across all programmes.
  - We were satisfied with how the education provider is performing in this area.

# • Academic quality –

- The education provider launched the Flexible Digital Education Framework. This framework enabled the education provider to respond quickly to the challenges of the pandemic.
- The education provider operated a revised programme approval process. This brought together business case proposals, market insight and programme design. This process ensures new programme proposals are fully supported, resourced and ready for implementation.
- Working with learners is a defining principle of the education provider's approach to education. They have a strong collaborative approach to enhancement. Learners are an integral part of governance structures, core members of committees and project groups, and partners in shared initiatives, such as the design of surveys.
- We were satisfied with how the education provider is performing in this area.
- Placement quality
  - Practice based learning is underpinned by quality assurance processes to ensure high quality. For example, initial and ongoing review audits of practice-based learning providers.
  - Different professions have their own quality assurance processes concerning practice-based learning. The Faculty Placements Team and Faculty Placement Quality and Management Committee review and implement processes to increase quality and improve efficiency.
  - A Faculty Placement Management and Quality Committee has been established. Representatives are drawn from both academic and professional services staff across programmes. The committee shares and highlights the diversity of quality processes and to encourage collaborative working practices.
  - Quality assurance processes drive improvement. For example, an NHS Trust was reviewed for its quality of care. All feedback and documented incidents for allied health profession learners, who had been placed in the Trust, was reviewed. The review was written up in a report and an action plan was created for any feedback themes highlighted at the Trust. The action plan was implemented, discussed, and reviewed regularly. Significant improvements were made. For instance, workforce action groups were carried out to develop a standard approach to practice educator training and embedding resilience into training.
  - $\circ$   $\,$  We were satisfied with how the education provider is performing in this area.

# • Interprofessional education (IPE) -

The IPE committee, which oversees the design and delivery of IPE activities for health-related programmes across the education provider, was restructured in 2023. This was to accommodate the expansion of the health-related provision and to facilitate new ways of integrating

IPE throughout the curricula, including via multidisciplinary skills and simulation-based training.

- Feedback from learners indicated IPE had a positive impact. IPE projects provide opportunities for multi-professional working. The excellent practice relating to IPE has been disseminated as peer reviewed outputs and a conference presentation.
- We were satisfied with how the education provider is performing in this area.

## Service users and carers –

- The pandemic produced a number of challenges in regard to service user involvement. Some service users were classed as vulnerable and were unable to undertake any activities which were in person. Service users were subsequently involved in different ways following adaptations by programme teams. For example, as part of the validation process for the MSci Paramedic Science programme, the education provider met online with service users to gain their perspectives and ideas of what the programme should include and how they view the profession for the future.
- The faculty lead for Service Users and Carers and the staff member who coordinates Non-Medical Prescribing (NMP) are exploring how more service user involvement could be incorporated. The education provider plans to bring a service user into a session focusing on decision-making.
- As discussed in <u>quality theme 1</u>, the FUCLG consists of five service users and five academics. The group meet every three months to discuss the hub. They are aiming to have it up and running in the next two years.
- We were satisfied with how the education provider is performing in this area.
- Equality and diversity
  - The education provider has an Equity, Diversity and Inclusion (EDI) Strategy 2023-27 which promotes and works towards 'a culture of engagement, inclusion and cohesion'.
  - The education provider has identified priority areas and risks and has undertaken work related to equality and diversity. For example, the under-representation in staffing groups. The education provider has increased Black, Asian and minority ethnic staff representation in academic and professional services, and increased representation of women in senior academic roles.
  - The education provider has developed action plans to address EDI issues. Action plans include Active Bystander Training, so learners and staff can help to tackle actions or words that adversely impact minority groups.
  - $\circ$   $\,$  We were satisfied with how the education provider is performing in this area.

- Horizon scanning
  - The education provider has recognised challenges continue to be related to practice-based learning, and especially capacity and availability. For instance, the potential for two new paramedic science programmes to come on board in the Midlands means there may be an increase in learners and exacerbate practice-based learning capacity issues. The Programme Director for Paramedic Sciences has contacted surrounding NHS Ambulance Services to explore potential new practice-based learning opportunities in the East Midlands, Northwest England and Welsh regions, and with a private ambulance service provider. A limited number of simulated practice-based learning opportunities are being developed to augment learners' practice-based learning.
  - Since the inception of the prosthetist and orthotist programme in January 2022, recruitment of learner numbers has been challenging. The education provider stated the viability of this programme is therefore under discussion. As discussed in <u>quality theme 2</u>, recruitment to the programme is under review. The School of Allied Health Professions has been proactive in exploring marketing with the professional body BAPO and through NHS England to increase the visibility of the profession.
  - We were satisfied with how the education provider is performing in this area.

# Risks identified which may impact on performance: None.

#### Outstanding issues for follow up: None.

#### Quality theme: Thematic reflection

#### Findings of the assessment panel:

- Embedding the revised Standards of Proficiency (SOPs) -
  - The education provider undertook a mapping exercise for all programmes with the revised SOPs. The education provider was able to see whether any updates needed to be made to programmes and was subsequently able to implement these.
  - Colleagues involved in the curriculum design of each programme shared progress and approaches to integrating the revised SOPs. The education provider outlined the overarching approach to the SOPs in all programmes. During the annual programme review, any changes to modules and learning outcomes were matched to the revised SOPs for each programme.
  - There are multiple shared modules across the programmes in the school relating to promoting public health and preventing ill-health. The education provider has upgraded learning outcomes toward to better ensure resilience in learners. They outlined how this ensured they can

deliver health promotion and ill-health prevention messages from a position of self-reflection and personal strength.

- All programmes have a focus on EDI which is embedded into the curriculum. In biomedical science, the Professional Relationships module includes teaching activities on EDI which are linked to a summative group assessment.
- The involvement of service users is threaded throughout the education provider's programmes. For instance, on the diagnostic imaging provision, each cohort of learners receives a themed presentation from service users.
- Programmes promote registrants' mental health throughout the curricula. For example, the prosthetist programme explores issues such as end-of-life care and bereavement, as well as support networks.
- Digital skills are integrated within all provision. This starts from prearrival and induction support, which includes a digital insights survey. Digital capability is one of the education provider's four pillars for programme design.
- Leadership is integrated within curricula. For example, the MSci Paramedic Science programme has seven modules which include content delivery on leadership. One of them is a specific 'Clinical Leadership for Paramedics' module.
- $_{\odot}$   $\,$  We were satisfied with how the education provider is performing in this area.
- Learning and developments from the COVID-19 pandemic
  - The pandemic was a challenging period for learners which impacted their academic experience. The education provider's strategy emphasises the importance of community and values. They focussed on continuing to provide an environment which supported high quality learning.
  - During the pandemic the education provider transitioned to online delivery. Ongoing support, training and virtual drop-in workshops were put in place to ensure smooth operations. The education provider provided learners with laptops and invested in loan laptops. This supported remote access has continued post-pandemic.
  - All teaching spaces have been adapted to provide audio visual equipment and lecture capture software, to facilitate in-class engagement.
  - The education provider accelerated plans to embed digital learning and capabilities within delivery. The education provider had academic and welfare support in place for learners to engage with the changes to delivery. They worked with NHS partners to ensure health learners and clinical staff could engage in national efforts to tackle the virus. They also put in place measures to amend assessments to account for the impact of the disruption to study. These included amendments to assessment design, an additional reassessment opportunity and appropriate safety net procedures for the calculation of outcomes. External examiners commended the education provider's response to

teaching assessment, support, and the determination of awards considering Covid-19.

- The education provider enhanced their approach to inductions and transition in response to learners' needs post-pandemic. Support for learners begins before arrival with an induction package for learners, which comprises an online pre-arrival induction, principally for new learners, it is also available to returners.
- Feedback from learners indicated the education provider responded well to the pandemic, surpassing the benchmark on every question in National Student Survey 2021.
- Education delivery moved quickly from in-person teaching and practice-based learning settings to online delivery. In some areas all activity moved online and in others specific activities remained inperson due to their nature. This process was already taking place, but the pandemic accelerated the progress of online delivery. The education provider continued to produce safe and effective practitioners throughout the pandemic.
- We were satisfied with how the education provider is performing in this area.
- Use of technology: Changing learning, teaching and assessment methods –
  - During the pandemic, remote learning and social distancing made the use of traditional face-to-face delivery more challenging. The requirement to use simulation to enhance practice-based learning was heightened with restrictions placed on practice-based learning. Group sizes were reduced which meant there was repetition in the delivery of sessions. This increased demands on staff and facilities. Staff worked cross-professionally to develop training simulations for learners.
  - The integration of simulation technology is enhancing the learner experience in preparedness for clinical practice. Artificial intelligence (AI) has been introduced into radiography modules. The education provider has also recognised the presence of AI and its accessibility to learners. Learners have been informed about appropriate ways to use AI for assignment writing.
  - We were satisfied with how the education provider is performing in this area.

# • Apprenticeships in England –

- All apprenticeship provision has been co-designed with employer partners to meet regional skills needs. The diagnostic radiographer apprenticeship programme was developed with local Trusts. The model of delivery was designed to support a broad geographic intake to support learners and those who may have caring responsibilities, which would act as a barrier to regularly travelling to training. Learners are on campus for one day every five weeks.
- The education provider has an Apprenticeships Community of Practice where experience is shared.

 $\circ$   $\,$  We were satisfied with how the education provider is performing in this area.

## 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 education provider is confident it meets the Expectations and Core and Common Practices in full.
  - The QAA Quality Code is embedded in the curriculum and assessment design and programme development processes. The education provider has processes to ensure regulatory compliance with the QAA Quality Code.
  - The QAA is currently consulting on a redeveloped Quality Code during 2023-24. They have not published a timeline for the publication of the final revised Quality Code. When it is published, the education provider will review the content and reflect on whether any changes in policy are needed.
  - We were satisfied with how the education provider is performing in this area.

# • Office for Students (OfS) -

- Compliance with OfS B conditions is tested at programme validation, quinquennial revalidation and is monitored through the education provider's annual programme review process. The education provider has increased support for curriculum design to ensure programme design continues to meet the requirements set out by OfS.
- The education provider was not required to undertake enhanced monitoring, nor have there been any OfS inspections linked to compliance with B conditions.
- The education provider was awarded TEF gold status overall in 2023.
- We were satisfied with how the education provider is performing in this area.

#### Other professional regulators / professional bodies –

- The education provider follows and responds to professional, regulatory, and statutory body guidance as appropriate across all provision. They created a Professional, Statutory and Regulatory Body (PSRB) and Quality Assurance (QA) Team to support this.
- For example, the MSc Physiotherapy (pre-registration) programme is accredited by the Chartered Society of Physiotherapy (CSP). CSP accreditation lasts for five years. The education provider engages with the CSP throughout the academic year and formally submits an annual programme review report.

• We were satisfied with how the education provider is performing in this area.

#### 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 -
  - During the CSP re-accreditation of physiotherapy provision in November 2023, the education provider reviewed and updated themes such as core subject knowledge, and leadership. The programme team consulted learners, service users and practice educators in planning these changes.
  - The NHS long term plan, and feedback from stakeholders instigated a review of the radiography curriculum. The education provider has reviewed and mapped themes such as digital skills and new technologies.
  - HCPC standards and the NHS long term plan were used in the design of the Prosthetics and Orthotics programme. The themes of leadership, digital skills and new technologies, promoting health and preventing illhealth, and diversity and inclusion are all consequently present within the programme.
  - The Independent and Supplementary Prescribing module specification was updated to reflect the updated Royal Pharmaceutical Society framework 2021. Teaching sessions were reviewed as per the mapping document and some additional elements were added. The education provider added a session on sustainable / eco prescribing.
  - Changes to the SOPs and QAA Subject Benchmark Statements instigated a review of the biomedical science curriculum and practicebased learning. All themes were addressed, and some elements required more explicit signposting.
  - We were satisfied with how the education provider is performing in this area.

#### Development to reflect changes in professional body guidance –

 The education provider reviewed and considered professional body guidance and updated their programmes as appropriate. For example, in response to the revised SOPs, the Institute of Biomedical Science (IBMS) released version five of the IBMS registration portfolio. This is mapped to the revised SOPs. The IBMS circulated guidance to all HEIs to clarify the position of learners who had already begun to complete a previous version of the portfolio mapped to the previous standards. This required learners and all registrants to demonstrate how they met the revised standards. Learners issued the IBMS registration portfolio after September 2023 must complete version five.

- We were satisfied with how the education provider is performing in this area.
- Capacity of practice-based learning (programme / profession level) -
  - The education provider has experienced challenges related to the capacity of practice-based learning. For example, there is competition from other education providers in the Midlands for physiotherapy practice-based learning. Capacity within NHS Trusts for physiotherapy practice-based learning has decreased due to an increase in apprenticeship learners. The Practice Placement Team are working with stakeholders to increase capacity and explore different practicebased learning models.
  - The education provider has used hybrid practice-based learning which includes leadership and simulation. These have increased practicebased learning capacity. Learners have been positive about simulation practice-based learning. Simulation has proven particularly effective with learners with neurodiverse conditions.
  - $\circ$   $\,$  We were satisfied with how the education provider is performing in this area.

## 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 education provider has a range of mechanisms to receive feedback from learners. For example, module feedback is gained at the end of every module. This is analysed and reported back during module review processes.
  - The education provider considers feedback and makes improvements to programmes if appropriate. For example, paramedic learners' feedback from their practice-based learning experiences was positive. However, learners highlighted they experienced challenges around a lack of understanding of the paramedic role and scope of practice. They said they had been treated as having the same requirements as nursing learners and have been supervised by nurses who did not have a comparable skillset. This led to frustration for learners. They were broadening the understanding of healthcare professionals about the paramedic skillset and advancements in the roles available for Paramedics in secondary care. The liaison role of the Clinical Skills and Practice Liaison Lecturers from the education provider developed this awareness and relationships with practice partners.

• We were satisfied with how the education provider is performing in this area.

# • Practice placement educators –

- The education provider considers feedback and makes improvements to programmes if appropriate. For example, practice educators reported an increase in health and wellbeing issues with learners undertaking health care programmes. They asked for more support with resilience training and more contact with learners undertaking practice-based learning. The education provider developed a hybrid link tutor visit role, with a blend of supportive in-situ and online link tutor meetings. At times, meetings have been arranged with the practice educator, learner, and the education provider to provide more support. The education provider has also shared all the learner support services details with practice educators to help them to signpost learners. The education provider will review the hybrid link tutor visits and amend if appropriate.
- Practice educators can feed back to the education provider in a number of ways. For instance, monthly drop-in Teams sessions give practice educators the opportunity to have direct contact with the Placement Team to answer any questions, to provide top up assessment training and to discuss any common themes of issues.
- We were satisfied with how the education provider is performing in this area.

# • External examiners –

- External examiner feedback has been positive. For example, the external examiner for the prosthetist and orthotist programme commended the academic team for good practice in several areas and for their hard work in establishing this new programme. They highlighted staff were seen by learners as approachable, helpful, knowledgeable and enthusiastic about their profession.
- Where the external examiner has made recommendations, the education provider has considered it and implemented changes to programmes, if appropriate. For example, the external examiner for the MSci Paramedic Science programme recommended greater external examiner input into the finalising of assessment papers. The education provider improved the process of finalising assessment papers to incorporate increased external examiner input. Programme Administrators have been made the sole communication channel between module leads so assessment papers and sample assessments are provided in a timely manner.
- We were satisfied with how the education provider is performing in this area.

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

Outstanding issues for follow up: None.

#### Data and reflections

#### Findings of the assessment panel:

#### • Learner non continuation:

- The education provider recognised the cost-of-living crisis and growing intensive pressure on the health system as potential reasons why learners decide they can no longer continue their studies. They make available support such as hardship funds, and support services with a Student Experience and Support Manager.
- Continuation and withdrawal data are monitored and scrutinised annually via the annual programme review process. This is overseen by the Education Performance Data Group. This group identifies emerging trends and, if necessary, puts in place interventions to address any issues and shares good practice between programmes.
- We were satisfied with how the education provider is performing in this area.

#### Outcomes for those who complete programmes:

- The education provider noted they have performed well here. They were unsure if they could attribute the data to a specific cause at this point. However, they considered their employer links and focus on developing employability skills is a key factor in high graduate outcome data. For example, assessments are designed to ensure they are linked to learning, practice, and the development of skills for future employment. They considered they work to engage with employers to have direct input into curriculum design and revalidation. This is to ensure the appropriate skills, competencies and behaviours are being developed in learners.
- The education provider aims to build on their completion rates. They stated the broadening of their portfolio allows for more IPE. The education provider considers this will support learners both on the programme and once they are in the workplace.
- We were satisfied with how the education provider is performing in this area.

#### • Learner satisfaction:

- The education provider noted their score was equitable with the subject benchmark, and therefore conclude that they have performed well.
- They are keen to make improvements to the learner experience. Programme teams develop an annual National Student Survey action plan to address any issues that were brought to attention at programme level and to highlight and escalate any issues requiring attention from outside of the programme team. These are reviewed by faculty education committees and reported to the Education Data Performance Group. This allows the education provider to identify good practice which is shared with all programmes.

• We were satisfied with how the education provider is performing in this area.

# • Programme level data:

- Tight timelines for approval and recruitment to new programmes impacted the enrolment for the first intake of some programmes. Marketing and recruitment for subsequent intakes has been more effective and resulted in larger intakes.
- The education provider informed us they had expanded their portfolio of approved programmes. They were 'excited' to see new programmes develop and flourish alongside pre-existing AHP programmes.
- $\circ$   $\,$  We were satisfied with how the education provider is performing in this area.

# 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).

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

Section 6: Decision on performance review outcomes

# Assessment panel recommendation

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

• The education provider's next engagement with the performance review process should be in the 2028-29 academic year.

# Reason for next engagement recommendation

- Internal stakeholder engagement
  - The education provider engages with a range of stakeholders with quality assurance and enhancement in mind. Specific groups engaged by the education provider were learners, service users, practice educators, partner organisations, and external examiners. This ensured the education provider's performance had not identified any risks for delivering provision of good quality.
- External input into quality assurance and enhancement
  - The education provider engaged with a number of professional bodies, Society and College of Radiographers, Royal College of Occupational

Therapists, College of Paramedics, Chartered Society of Physiotherapy, British Association of Prosthetists and Orthotists, and IBMS. They considered professional body findings in improving their provision.

- The education provider engaged with Quality Assurance Agency, Care Quality Commission, Office for Students, NHS England, Nursing and Midwifery Council, and Royal Pharmaceutical Society. They considered the findings of other regulators in improving their provision.
- The education provider considers sector and professional development in a structured way.
- Data supply
  - Data for the education provider is available through key external sources. Regular supply of this data will enable us to actively monitor changes to key performance areas within the review period.
- What the data is telling us:
  - From data points considered and reflections through the process, the education provider considers data in their quality assurance and enhancement processes and acts on data to inform positive change.

#### **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 education provider's next engagement with the performance review process should be in the 2028-29 academic year

**Reason for this decision:** The Panel agreed with the visitors' recommended monitoring period, for the reasons noted through the report.

# 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 the next steps for the provider. The lead visitors confirm this is an accurate summary of their recommendation (including their reasons) and any referrals.

Education provider	Case reference	Lead visitors	Review period recommendation	Reason for recommendation	Referrals
Keele University	CAS-01362- M5V3J9	Hazel Anderson Jo Jackson	Five years	The education provider engages with a range of stakeholders with quality assurance and enhancement in mind. The education provider considers sector and professional development in a structured way. Data for the education provider is available through key external sources. From data points considered and reflections through the process, the education provider considers data in their quality assurance and enhancement processes and acts on data to inform positive change.	There were no outstanding issues to be referred to another process.

# Appendix 2 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
BSc (Hons) Applied Biomedical Science	FT (Full time)	Biomedical scientist			01/09/2009
MSc Occupational Therapy	FT (Full time)	Occupational the	Occupational therapist		20/01/2024
MSci Paramedic Science	FT (Full time)	Paramedic			01/09/2021
BSc (Hons) Physiotherapy	PT (Part time)	Physiotherapist			01/09/2014
BSc (Hons) Physiotherapy	FT (Full time)	Physiotherapist			01/10/1996
BSc (Hons) Physiotherapy	PT (Part time)	Physiotherapist			01/01/2002
BSc (Hons) Physiotherapy (with international year)	FT (Full time)	Physiotherapist			01/08/2018
MSc Physiotherapy	FTA (Full time accelerated)	Physiotherapist			01/01/2020
MSci Physiotherapy	FT (Full time)	Physiotherapist			01/09/2019
MSci Physiotherapy (with International year)	FT (Full time)	Physiotherapist			01/09/2019
MSc Prosthetics and Orthotics	FT (Full time)	Prosthetist / orthotist		01/01/2022	
BSc (Hons) Radiography (Diagnostic Imaging)	FLX (Flexible)	Radiographer	Diagnostic	radiographer	26/09/2022
BSc (Hons) Radiography (Diagnostic Imaging)	FT (Full time)	Radiographer	Diagnostic	radiographer	01/09/2017
MSci Speech and Language Therapy	FT (Full time)	Speech and lang therapist	uage		23/09/2024
Independent and Supplementary Prescribing for Allied Health Professionals	PT (Part time)			Supplementary prescribing; Independent prescribing	01/01/2014
Supplementary Prescribing for Allied Health Professionals	PT (Part time)			Supplementary prescribing	01/09/2010