Approval process report

The University of Northampton, Occupational Therapy, 2024-25

Executive Summary

This is a report of the process to approve an occupational therapy programme at The University of Northampton. This report captures the process we have undertaken 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 our standards are met in this area
- Reviewed the programme against our programme level standards and found our standards are met in this area
- Decided all standards are met, and that the programme should be approved

Through this assessment, we have noted:
- The areas we explored focused on:
  - Quality activity one: The visitors noted the details of staffing contained within the University Workload Planning Guidance document and Staffing Organisational chart. However, we were unsure whether the education provider needed to recruit additional staff to accommodate the new programme and learners. The education provider informed us they had recruited an additional 1.0 whole time equivalent (WTE) and plans are in place to recruit up to 1.5 WTE lecturers from September 2026. We had no further questions in this area and considered the standard to be met.
  - Quality activity two: The visitors acknowledged the availability of various learning resources, including technology for both institutional and practice-based learning. However, we were unsure about the extent of library support and resources for the proposed programme. The education provider informed us the library offers both physical and electronic resources. The visitors were informed the library provides a variety of support for learners. We had no further questions in this area and considered the standard to be met.
- The programme meets all the relevant HCPC education standards and therefore should be approved.

Previous consideration	Not applicable. The approval process was not referred from another process.
Decision	The Education and Training Committee (Panel) is asked to decide: • whether the programme is approved

Next steps Outline next steps / future case work with the provider:
- The provider's next performance review will be in the 2028-29 academic year

Included within this report

Section 1: About this assessment

About us

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

This is a report on the approval process undertaken by the HCPC to ensure that the programme(s) 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 / ongoing approval.

Our standards

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

Our regulatory approach

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

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

The 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 partner visitors to design quality assurance assessments, and assess evidence and information relevant to the assessment. Visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation. If an education provider wishes to, they can supply 'observations' as part of the process.

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

The assessment panel for this review

We appointed the following panel members to support this review:

Jennifer Caldwell	Lead visitor, occupational therapist
Julie-Anne Lowe	Lead visitor, occupational therapist
John Archibald	Education Quality Officer

Section 2: Institution-level assessment

The education provider context

The education provider currently delivers seven HCPC-approved programmes across four professions plus one prescribing programme. It is a higher education provider and has been running HCPC approved programmes since 2002.

The proposed programme will sit within the Faculty of Health, Education and Society. All current HCPC-approved programmes at the education provider sit within this faculty.

The education provider completed the performance review process covering the period 2018-2023. The education provider received the outcome of five years until the next performance review in 2028-29.

Practice areas delivered by the education provider

The provider is approved to deliver training in the following professional areas. A detailed list of approved programme awards can be found in Appendix 2 of this report.

	Practice area	Delivery level		Approved since
Pre-registration	Chiropodist / podiatrist	☒Undergraduate	☐Postgraduate	2002
	Occupational therapist	☒Undergraduate	☐Postgraduate	2002
	Paramedic	☒Undergraduate	☐Postgraduate	2015
	Physiotherapist	☒Undergraduate	☒Postgraduate	2021
Post-registration	Independent Prescribing / Supplementary prescribing			2016

Institution performance data

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

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

Data Point	Bench-mark	Value	Date	Commentary
Total intended learner numbers compared to total enrolment numbers	130	155	2024/25	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. We explored resourcing for the programme as part of quality theme 1 and quality theme 2. We were satisfied with the information provided by the education provider and had no further questions.
Learners – Aggregation of percentage not continuing	3%	5%	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. 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 1%. We reviewed learners' experience on approved programmes and any potential factors for not continuing. We were satisfied with the information provided by the education provider.

Graduates – Aggregation of percentage in employment / further study	92%	91%	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 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 1%. We reviewed learners' experience on approved programmes and any potential for employment and or further study. We were satisfied with the information provided by the education provider.
Learner satisfaction	79.2%	82.4%	2024	This National Student Survey (NSS) positivity score 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 12.6%. We reviewed the learner experience at the education provider and were satisfied

				with the information provided by the education provider.
HCPC performance review cycle length	n/a	2028-29	2023-24	The education provider will next interact with our performance review process in five years' time. This decision was made in 2023-24.

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 has an Admissions process and marketing guidelines. There is an education provider approach with regards to open days, school and college liaison teams, admission support and events. Learner support teams help with the admissions process, such as accommodation.
  - The education provider undertakes marketing and support for applicants before programmes start.
  - Applicants are given information about the programme and careers through all the policies and processes in place. They are also provided with access to social media platforms which have information about the campus and learner life.
  - If applicants meet the entry criteria, they are offered an interview. This allows the programme team and applicant to determine their suitability for the programme. It also allows them to make an informed decision about studying with the education provider.
  - This aligns with our understanding of how the education provider runs programmes.
  - We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Assessing English language, character, and health** –
  - The education provider sets out the English language requirements within the Admissions policy. This applies to all allied health

professions (AHP) programmes. These requirements can be found in the programme specification, the programme-specific webpage, and the prospectus.

- o Applicants need to sign an honorary contract when enrolling. They agree to uphold and adhere to the education provider's and the professional body's ethical and professional requirements.
- o The English language requirement for the programme is International English Language Testing System (IELTS) 6.5 (or equivalent) with a minimum of 6.5 in all bands.
- o As part of the Admissions policy, applicants undertake disclosure and barring service (DBS) and occupational health checks. These are to ensure good character and individual health and wellbeing respectively. The practice-based learning team and programme team monitor, and check compliance related to these, as well as mandatory training. All requirements are checked throughout the admissions and post-enrolment processes.
- o This aligns with our understanding of how the education provider runs programmes.
- o We think this as the education provider has indicated there have not been any changes to how they meet this area.

- **Prior learning and experience (AP(E)L)** –
  - o The Accreditation of Prior Learning (AP(E)L) and Credit Transfer policy highlights the requirements and process of transfer of credits. Information also appears in the learner handbook and programme specification document.
  - o Applicants meet with the programme lead to discuss AP(E)L options. The programme lead ensures prior learning maps to the current programme learning outcomes. The outcome of this process determines whether, and at what point on a programme, the applicant will be able to AP(E)L onto.
  - o This aligns with our understanding of how the education provider runs programmes.
  - o We think this as the education provider has indicated there have not been any changes to how they meet this area.

- **Equality, diversity and inclusion (EDI)** –
  - o The education provider is committed to providing a learning environment that values equality, diversity, and inclusion.
  - o Equality and diversity activity is managed through committees such as the Faulty Academic Committee (FAC) and the Access and Participation Plan implementation group. These ensure processes are monitored and are informed by the principles of equality, diversity and inclusion and implemented via formal policies, guidance, and plans. The responsibility of equality and diversity extends beyond the education provider to also include all collaborative partnerships and stakeholders.

- Faculty activities are reflected in the access and participation plan and EDI plan. These are monitored through the faculty executive team and the University Access and Participation lead. This is to ensure action plans are monitored and supported for successful learner progression and completion.
- This aligns with our understanding of how the education provider runs programmes.
- We think this as the education provider has indicated there have not been any changes to how they meet this area.

Non-alignment requiring further assessment: None.

Management and governance

Findings on alignment with existing provision:
- **Ability to deliver provision to expected threshold level of entry to the Register[1]** –
  - The education provider has quality assurance processes to ensure the standards of awards given are appropriate, learners have suitable opportunities to meet the threshold standards, and the expectations of Professional, Statutory and Regulatory Bodies (PSRBs) are met. The education provider's quality assurance process includes validations and periodic subject reviews which are overseen by PSRBs. The education provider's degree outcomes statement, in response to the UK Standing Committees for Quality Assessment, provides assurance they meet its ongoing conditions for registration.
  - The education provider's Quality Assurance Framework monitors, reviews and enhances academic standards and the quality of teaching and learning. This is informed by the Quality Assurance Agency for Higher Education (QAA) UK Quality code.
  - There are a range of committees, such as Academic Quality and Standards Committee (AQSC), Faculty Academic Committee (FAC) who work to implement the quality assurance framework. There are also processes such as Quality Improvement Plan (QuIP) to ensure the delivery of provision is validated and is maintained at the expected level.
  - Quality checks happen through the external examiner. There is a process in place for a response and action plan from the programme team to the external examiner if required. Further feedback is gathered from service user and carer involvement, as well as learner and partner feedback.
  - This aligns with our understanding of how the education provider runs programmes.

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[1] 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

- o We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Sustainability of provision** –
    - o Long-term sustainability is considered through the validation process, and a budget is set. This considers staffing and resource requirements against the planned curriculum and anticipated learner numbers. Learner numbers and programme viability are considered through business planning with Development Approval Forms (DAF) submitted to the leadership team prior to programme development and approval.
    - o Faculty annual portfolio reviews evaluate programmes' ongoing sustainability. Any recommendations are actioned as required.
    - o The programme team collaborate with practice-based learning partners to develop and promote a wide variety of practice-based learning opportunities.
    - o This aligns with our understanding of how the education provider runs programmes.
    - o We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Effective programme delivery** –
    - o The programme is managed through the Governance and Management process. This ensures the financial and resource sustainability of each programme is monitored through a range of reviews, for example, annual portfolio reviews.
    - o The Line Management process ensures the person holding full responsibility for the programme is sufficiently qualified and experienced to ensure the quality of the programme required.
    - o The programme team collaborate with stakeholders throughout the development and review stages to ensure appropriate and contemporary practice is delivered through the curriculum and the teaching, learning and assessment processes are effective.
    - o The education provider learns from best practice when considering options such as programme structure. They obtain stakeholder feedback to inform and refine programme design and delivery.
    - o This aligns with our understanding of how the education provider runs programmes.
    - o We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Effective staff management and development** –
    - o All academics are expected to engage in continual professional development (CPD) appropriate to their programme and are allocated 25 days of scholarly activity.
    - o The education provider has an internal CPD programme, which supports academic staff. The Annual Personal Development Review process identifies key objectives based on individual and faculty priorities, with actions to support this. Staff are supported to engage with CPD required to maintain their registration. A process is in place

for staff to request and attend both internal and external CPD opportunities.
- o Academics on the programme team have either the fellowship of the higher education academy or are working towards this.
- o The induction and probation process ensures new staff are supported within the institution. They are set objectives in line with the programme requirements to manage and identify training needs.
- o The programme team has an in-service training and supervision process to maintain effective staff development.
- o This aligns with our understanding of how the education provider runs programmes.
- o We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Partnerships, which are managed at the institution level** –
  - o Partnerships at the institutional level are evaluated and monitored for fit for purpose through the institutional audit process every two years. Learner, partner, and External Examiner feedback is captured through evaluation mechanisms and action plans are developed from this. The education provider uses the faculty escalation process where immediate action needs to be addressed.
  - o The education provider holds regular meetings with organisations such as practice-based learning partners, integrated care systems, and NHS England.
  - o This aligns with our understanding of how the education provider runs programmes.
  - o We think this as the education provider has indicated there have not been any changes to how they meet this area.

Non-alignment requiring further assessment: None.

Quality, monitoring, and evaluation

Findings on alignment with existing provision:
- **Academic quality** –
  - o Regular and effective monitoring and evaluation of programmes follow the education provider's quality and standard mechanisms. They are conducted through processes such as External Examiner reporting. They are evaluated through committees such as Academic Quality and Standards Committee (AQSC).
  - o Internal scrutiny of External Examiner applications ensure they are appropriately qualified and experienced to ensure the quality of programmes.
  - o This aligns with our understanding of how the education provider runs programmes.
  - o We think this as the education provider has indicated there have not been any changes to how they meet this area.

- **Practice quality, including the establishment of safe and supporting practice learning environments** –
    - o The faculty escalation process allows learners to raise concerns about the safety and wellbeing of service users. This process is completed with the Practice Escalation process, where all incidents are recorded so they can be monitored. Actions are put in place where required. Governance processes monitor actions at faculty level through the Faculty Placement Committee.
    - o The faculty has an audit system for approving and ensuring quality within practice-based learning. All practice-based learning environments are evaluated and monitored through this system. The audit system includes an initial audit of the learning environment. The education provider also uses External Examiner feedback and communication with stakeholders through partnership meetings and Placement Steering Group meetings to ensure quality assurance.
    - o The programme team ensure Practice Educator training is provided to all Practice Educators. The training provides them with the knowledge and understanding of quality assurance processes, practice assessment processes and learning outcomes. Practice Educators have access to Pebblepad, the system the programme uses for practice assessment information, and the education provider's blackboard, Northampton Integrated Learning Environment (NILE). Key documents such as Placement Handbook are kept on this site.
    - o Practice Educators will be offered additional CPD by the programme team twice yearly. This training is informed via surveys, discussion at practice-based learning forums and feedback from learners. All Practice Educators will be provided with bespoke training to ensure they have the knowledge and understanding of the new programme.
    - o Before practice-based learning, information is shared between the practice organisation, Practice Educator and the learner in a timely manner. This is so all parties have adequate information to support and prepare them for practice-based learning.
    - o The programme team collaborate with practice-based learning providers to ensure learners have an equal experience throughout their practice-based learning. They have practice education debrief sessions and learner voice meetings, and personal academic tutor support, to allow for discussion about EDI.
    - o The faculty Placement Learner Forum (PLF) is attended by and has representation from all AHP programmes. This forum is used to discuss, and problem-solve relevant EDI actions. The Learner Experience committees at faculty- and education provider-level ensure actions are monitored and actioned appropriately.
    - o This aligns with our understanding of how the education provider runs programmes.
    - o We think this as the education provider has indicated there have not been any changes to how they meet this area.

- **Learner involvement** –
  - o Learners are involved in the development of the programmes. They co-create new programmes and are involved in amending existing programmes through the Creating Aligned Interactive Educational Resource Opportunities (CAIeRO) process.
  - o Ongoing learner involvement includes mid-module evaluations and end of year programme assessment. These highlight areas of satisfaction and areas for development. These are actioned by the programme. Student Voice meetings allow learners to work with the programme team on improvements to the programme. There are cross-cohort Student Voice meetings to capture feedback and discuss issues between all cohorts studying a programme.
  - o Learners feedback through the National Student Survey (NSS). Actions are monitored through Quality Improvement plans at programme, faculty, and institution level.
  - o This aligns with our understanding of how the education provider runs programmes.
  - o We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Service user and carer involvement** –
  - o Service users and carers are involved throughout the quality assurance process. This includes the development of new and existing programmes through the CAIeRO processes. Involvement includes the delivery of programme sessions, and assessment.
  - o Service users and carers feedback throughout the year, share good practice and identify areas for personal development.
  - o This aligns with our understanding of how the education provider runs programmes.
  - o We think this as the education provider has indicated there have not been any changes to how they meet this area.

Non-alignment requiring further assessment: None.

Learners

Findings on alignment with existing provision:
- **Support** –
  - o The education provider ensures there are effective services in place to support the wellbeing and learning needs of all learners. For example, Additional Student Support and Inclusion Services Team (ASSIST), who provide disability and additional needs support, mental health and wellbeing support, study assistance, mentoring and advice.
  - o Applicants are required to undertake an occupational health assessment during the application process. The programme team implement any appropriate reasonable adjustments. Learners are

advised to share occupational health outcomes with ASSIST to ensure a rounded approach to learner support.

- o Personal Tutor sessions are scheduled with learners, to provide personalised support based on the needs of each learner. Support is given at specific points in the programme. Effectiveness of this support is monitored through Student Voice meetings.
- o Other elements of support for learners include:
  - Programme Leader support;
  - Student Union support;
  - Academic Advisors; and
  - Pastoral and faith support.
- o This aligns with our understanding of how the education provider runs programmes.
- o We think this as the education provider has indicated there have not been any changes to how they meet this area.

- **Ongoing suitability** –
  - o All learners must also complete an annual self-declaration to ensure their fitness to study and suitability of character to the programme.
  - o Ongoing suitability is assessed through practice-based learning, using the Common Placement Assessment form, and Practice Educator and service user feedback. Learner's conduct is monitored through ongoing assessment within the programmes taught sessions.
  - o The learner's role and responsibilities in relation to character, health, and suitability whilst studying is captured through the Honorary Contract all learners must sign.
  - o The emerging concerns process can be used to raise concerns about a learner's conduct, character, and health. If escalation is required, concerns are considered through the fitness to study and practice processes.
  - o This aligns with our understanding of how the education provider runs programmes.
  - o We think this as the education provider has indicated there have not been any changes to how they meet this area.

- **Learning with and from other learners and professionals (IPL/E)** –
  - o The Interprofessional Education Strategy outlines the education provider's approach to IPL/E. IPL/E is embedded at all levels throughout programmes. Programmes have shared modules within the curriculum.
  - o The IPL/E lead for the faculty evaluates sessions from the perspectives of a learner, tutor and service user for quality improvement and enhancement. Feedback is also requested at programme level through Student Voice meetings and session evaluations.
  - o Learning outcomes relating to IPL/E are embedded at all levels and are identified within module specifications. IPL/E takes place on campus and in practice-based learning.

- o This aligns with our understanding of how the education provider runs programmes.
  - o We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Equality, diversity and inclusion** –
  - o The Quality Assurance framework monitors all activity to ensure it is informed by the principles of equality, diversity, and inclusion.
  - o Programme teams are given the skills and knowledge through EDI training, to ensure all learners have equal opportunity to have a positive learning experience and are supported to progress and complete their programmes.
  - o The Business Intelligence Management Information (BIMI) unit collects programme data in relation to protected characteristics. This identifies any disparities between groups of learners, which are addressed through actions and any impact monitored through quality processes.
  - o Programme teams encourage learner involvement in professional body representative groups who focus on EDI principles in practice.
  - o This aligns with our understanding of how the education provider runs programmes.
  - o We think this as the education provider has indicated there have not been any changes to how they meet this area.

Non-alignment requiring further assessment: None.

Assessment

Findings on alignment with existing provision:
- **Objectivity** –
  - o The education provider's Quality Assurance framework ensures assessments provide an objective, fair and reliable measure of learner's progression and achievement. All assessment practices are monitored to ensure objectivity. For example, by internal and external panel members at validation and revalidation events.
  - o Internal quality assurance mechanisms such as assessment moderation and standardisation meetings monitor the objectivity of the assessment process. This ensures learners are supported to achieve module and programme learning outcomes. Within the programme design processes, feedback is gained from multiple stakeholders to ensure assessments are appropriate and effective and to ensure inclusive practice.
  - o Exam boards monitor learner progress and completion of programmes. This is overseen by External Examiners. External examiners give advice to enhance the assessment and feedback process for all assessments, including practice-based learning. This is responded to by programme teams and monitored at faculty level.

- o Practice educators receive training to ensure an objective, reliable and fair measure of learner progression and achievement within practice-based learning. During practice-based learning, a Visiting Tutor will meet the Practice Educator and learner to ensure the expectations and marking criteria are being implemented. The Visiting Tutor can provide help to ensure there are adequate learning opportunities and action plans for development of the learner in place. The Visiting Tutor also moderates learner evidence.
  - o This aligns with our understanding of how the education provider runs programmes.
  - o We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Progression and achievement** –
  - o The education provider's external and internal quality assurance mechanisms are used to ensure learners eligibility to apply to the HCPC Register.
  - o Progression and achievement for learners is supported through the Personal Academic Tutor (PAT) system and the 'My Engagement' application. These record learner engagement and is monitored so any learners who may need some additional support are identified. PATs signpost learners to any of the support mechanisms which may be appropriate. For example, library and learning support.
  - o The Programme Leader or the Academic Tutor analyse learner data, such as successful module completion, to ensure all required competencies are achieved. The Programme Specification and Student Handbook specify the requirement for progression and achievement throughout the programme. Data such as progression, achievement, engagement, and module evaluations are used to inform the programme team of common themes to be addressed to support progression and completion. The programme team respond to feedback and this data to implement appropriate strategies to support progression and achievement.
  - o This aligns with our understanding of how the education provider runs programmes.
  - o We think this as the education provider has indicated there have not been any changes to how they meet this area.
- **Appeals** –
  - o The Complaints and Appeals policy allows learners to appeal. These arrangements are in line with the QAA code of practice.
  - o Information relating to the process is made available to learners through the education provider's website and NILE. Appeals are monitored through the Faculty Academic Committee (FAC) and the Undergraduate Reflective Board.
  - o Actions to mitigate and reduce appeals are monitored and reflected upon at these committees. Actions are also monitored by External Examiners to ensure processes are robust.

- o This aligns with our understanding of how the education provider runs programmes.
- o We think this as the education provider has indicated there have not been any changes to how they meet this area.

Non-alignment requiring further assessment: None.

Outcomes from stage 1

We decided to progress to stage 2 of the process without further review through stage 1, due to the clear alignment of the new provision within existing institutional structures, as noted through the previous section.

Education and training delivered by this institution is underpinned by the provision of the following key facilities:
- The programme team includes roles such as the professional lead for occupational therapy. There is a senior leadership team, which includes the Head of Subject. There is also administrative and wider support from roles such as Faculty Managers.
- There are physical resources, for example sports science / performance laboratories.
- Resources are in place for the current occupational therapy provision. Any additional resources will be budgeted. The education provider has planning permission to build a multidisciplinary clinic. This also has a budget allocated to it.

Risks identified which may impact on performance: None.

Outstanding issues for follow up: None.

Section 3: Programme-level assessment

Programmes considered through this assessment

Programme name	Mode of study	Profession (including modality) / entitlement	Proposed learner number, and frequency	Proposed start date
MSc Occupational Therapy (Pre-Registration)	FT (Full time)	Occupational Therapy	25 learners, one cohort per year	5 January 2026

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 others (e.g. prof bodies, sector bodies that provided support) as follows:
- NHS England (Midlands) – we did not receive any information which could impact on this assessment

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 [Findings section](#).

Quality theme 1 – additional staffing needed for the new programme

Area for further exploration: The visitors noted the details of staffing contained within the University Workload Planning Guidance document and Staffing Organisational chart. They also noted there were a variety of staff roles, for example the academic team, and administrative support. The education provider informed us staff work across all occupational therapy provision. However, the visitors were unsure whether the education provider needed to recruit additional staff to accommodate the new programme and learners. They therefore could not be sure the programme had an appropriate number of staff who are able and equipped to deliver the programme effectively. We therefore sought more information about this.

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 informed us they had recruited an additional 1.0 WTE. They added, should learner recruitment targets be met and their workload planning model indicates no capacity within current staffing, they planned to also recruit up to 1.5 WTE lecturer from September 2026 in anticipation of year two planning and delivery. The visitors were satisfied the evidence

demonstrated how the programme had an appropriate number of staff who are able and equipped to deliver the programme effectively for the proposed number of learners. They had no further questions in this area and considered the standard to be met.

Quality theme 2 – library support and library resources available for learners

Area for further exploration: The visitors acknowledged the availability of various learning resources, including technology for both institutional and practice-based learning. They also noted the presence of handbooks and digital / online materials. However, they were unsure about what library support and resources there were for the proposed programme. They therefore were unsure programme resources were readily available to learners and educators and were used effectively to support the required learning and teaching activities of the programme. We sought more information about this.

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 informed us the library offered both physical and electronic resources. Resource purchases were guided by learner numbers and reading list priorities. They stated the programme team collaborated with the Library and Learning Services to ensure programmes were well-resourced. Additional materials are added based on research and teaching needs. About 80% of the collection was digital and accessible online 24 / 7 via the provider's login, ensuring flexible access for learners.

The visitors were informed the Learning Hub was accessible 24 / 7, with library staff available during standard office hours Monday to Friday. Learners received academic and information literacy support through scheduled sessions and can access study skills help via the Learning Development Team, both online and on campus. The education provider explained Academic Librarians also provided personalised support online and on campus. These teams collaborated with academic staff and learner services to support those with additional needs.

The visitors were satisfied the evidence demonstrated the extent of library support and resources for the proposed programme. They were satisfied programme resources were readily available to learners and educators and were used effectively to support the required learning and teaching activities of the programme. They had no further questions in this area and considered the standard to be met.

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** –
  - To be eligible for the proposed programme, applicants must meet the following entry requirements:
    - BSc / BA degrees in any subject with a first- or second-class-degree classification; and
    - 5 GCSEs grade C / 4 or above, with two being Mathematics and English Language, or have Functional Skills Level 2 Maths and English.
  - The visitors considered the relevant standards within this SET area met.
- **SET 3: Programme governance, management and leadership** –
  - The education provider has formal partnerships with practice education providers. Collaboration is maintained through a Partnership Agreement and a quarterly Placement Quality Forum (PQF). These address issues such as challenges, capacity, training, and planning.
  - Regular communication occurs between key roles such as Placement Co-ordinator and Occupational Therapy Placement Lead, focusing on offers and capacity growth.
  - Staff have workload hours dedicated to practice-based learning. Central support teams and an administrator facilitate communication.

- o Each learner is assigned a visiting link tutor for support and assessment.
- o Programme design has involved wide stakeholder consultation, including learners, service users, and external examiners, with emphasis on innovative practice-based learning models, simulation, and user involvement.
- o The education provider has a robust and strategic process to ensure sufficient and high-quality practice-based learning capacity for all Occupational Therapy (OT) learners. The OT Practice-Placement Lead and supporting academic staff are responsible for developing practice-based learning. The OT Placement team works closely with the central Health Placements team to manage offers and learner allocation. The education provider uses innovative practice-based learning models to expand capacity. These include Role Emerging Placements and the University Multi-disciplinary Clinic.
- o The proposed programme is supported by qualified staff - 16 posts totalling 11.07 full time equivalent (FTE). As discussed in [quality theme 1](#), the education provider recruited an additional 1.0 WTE and also plans to recruit up to 1.5 WTE lecturers from September 2026. Staffing levels are monitored and adjusted through an annual workload allocation process. This tracks pressure and ensures balanced workloads. Staff assignments consider experience, specialism, and development opportunities. Programme leaders are managed by the Head of Subject, who oversees workload across the subject area.
- o The programme team includes a variety of roles such as academic integrity officers and personal tutors. Academic staff in the programme team hold appropriate qualifications, including HCPC registration, and expertise in their teaching area. Staffing is structured into academic staff, administrative support, and central support services. Guest lecturers contribute to sessions aligned with their expertise.
- o Learning support resources are grouped into staffing, physical spaces and equipment, support services, and digital tools. These include teaching spaces, equipment, library, IT, and learning services. As discussed in [quality theme 2](#), the library offers physical and electronic resources, and a variety of support. Digital resources are accessible 24 / 7 via platforms like NILE. Resources are regularly reviewed for accessibility and effectiveness. Under the Inclusion Policy, learners can access the ASSIST team for support with teaching and assessment.
- o The visitors considered the relevant standards within this SET area met.
- **SET 4: Programme design and delivery** –
  - o Programme and module learning outcomes have been mapped to the standards of proficiency (SOPs) for occupational therapists. Each module descriptor outlines the specific outcomes it addresses. This ensures all successful graduates meet the required standards by the end of the programme.

- The programme and module learning outcomes are aligned and mapped to the HCPC standards of conduct, performance and ethics. All learners are provided with a Student Handbook for their postgraduate study. They must ensure they meet the expectations for professional behaviour and performance specifically outlined within the following key policies:
  - Academic integrity
  - Fitness to practice
  - Health wellbeing and fitness to study
  - Misconduct policy.
- The programme is mapped to Royal College of Occupational Therapists (RCOT) Learning and Development Standards and World Federation Occupational Therapy (WFOT) Minimum Standards for the Education of Occupational Therapists 2016. The programme philosophy is clearly stated in the Course Handbook. The CAIeRO process ensured the team had the vision, skills and values at the forefront of their minds when designing the programme.
- The education provider maintains an ongoing review process to ensure its programmes reflect current practice. Staff stay engaged with the sector through councils, forums, and conferences. Changes to provision follow scheduled approval deadlines and are guided by the UK Code for Higher Education and learner partnership principles. Staff are allocated 188 hours for scholarly activity to stay current with evidence-based and professional standards, supported by roles in practice and regulatory engagement.
- Theory and practice are closely integrated throughout the programme. Modules combine academic and practice-based learning, with clear links between them. For example, in year two, the practical module, Occupational Therapy Placement: Leadership Development, follows the leadership-focused academic module, Leading Innovative Change in Practice.
- The education provider follows a Learning and Teaching Strategy that incorporates varied methods such as interactive group work and simulation activities. Innovative approaches, including practical skills and group tasks, are strategically placed within the programme to effectively deliver content aligned with specific learning outcomes.
- The programme fosters autonomous and reflective learning through pre-session materials, reflective practice, and structured debriefing activities like simulation. Learners engage in reflection with academic tutors and during practice-based sessions, promoting psychological safety and wellbeing. Modules such as, Becoming an Autonomous Practitioner and Occupational Therapy Principles, support the development of self-awareness, autonomy, and reflective thinking, with evidence provided in module specifications.
- Evidence-based practice is embedded across all modules in the programme. Learners are expected to engage with current literature and best practice to inform their decisions and discussions. For

example, the module, Leading Innovative Change in Practice, requires critical analysis of evidence to support self-development and professional practice. Each module includes a regularly updated reading list to ensure content remains contemporary and evidence based.
  - o The visitors considered the relevant standards within this SET area met.
- **SET 5: Practice-based learning** –
  - o Practice-based learning is a core component of the programme, integrated into dedicated modules with specific learning outcomes. These modules are placed to ensure sufficient capacity. Their design is informed by stakeholder engagement to balance workloads and support a positive learner experience. Practice-based learning modules are compulsory and scaffold theoretical learning into practical application. In year one, simulation-based learning prepares learners for practice, with simulation hours counted as practice-based learning.
  - o The structure, duration and range of practice-based learning modules were developed in collaboration with stakeholders. Each learner completes four practice-based learning to ensure broad exposure across diverse settings. These experiences help learners achieve key outcomes, including developing the skills, knowledge, and behaviours needed to become safe and effective occupational therapists. The duration of each practice-based learning balances depth in specific areas with breadth across the profession.
  - o Practice-based learning has adequate levels of staffing dedicated to it. This includes those from the academic team, central teams and those in practice. Staffing at the education provider includes the Placement Lead for OT who oversees practice-based learning capacity, quality assurance, innovation and compliance. Staff within the practice-based learning setting include Placement educators / mentors who work with and assess the learners throughout.
  - o Prior to practice-based learning, practice educators attend training or refresher sessions and confirm HCPC registration through the Placement Audit. Refresher training builds on existing experience and focuses on effective learner support. In settings without a qualified Occupational Therapist, such as charities, a long-arm supervision model is used, where an academic or OT acts as lead educator through on-site and virtual meetings to ensure safe and effective supervision.
  - o The visitors considered the relevant standards within this SET area met.
- **SET 6: Assessment** –
  - o All assessments are designed in collaboration with the Learning and Teaching Enhancement team to align with programme learning outcomes and ensure learners meet the SOPs. Assessments are detailed within the module descriptors. The strategy includes a diverse

mix of formative and summative assessments such as multiple-choice questions, essays, presentations, case studies, and clinical exams. This variety ensures authenticity to OT practice and accommodates different learner strengths and needs.

- o Assessments are designed with support from the learning and teaching enhancement team to meet course learning outcomes and HCPC standards of conduct, performance, and ethics. Practice-based learning assessments focus on key areas such as service user protection, communication, risk management, and professional boundaries. These are complemented by academic tasks and monitored through learner engagement and behaviour policies to ensure professionalism and ethical conduct.
- o Assessments are designed with input from the learning and teaching enhancement team to ensure alignment with programme learning outcomes. Specific assessment mapping has been completed to ensure the methods of assessment clearly align to being effective and appropriate at measuring the module learning outcomes. Every module includes a rubric which outlines performance levels for each learning outcome.
- o The visitors considered the relevant standards within this SET area met.

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 observations 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 considered the report and accepted the visitor's recommendation that the programme should receive approval.

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	Case reference	Lead visitors	Quality of provision	Facilities provided
The University of Northampton	CAS-01705-L0W6Z0	Jennifer Caldwell Julie-Anne Lowe	Through this assessment, we have noted: The areas we explored focused on: Quality activity one: The visitors noted the details of staffing contained within the University Workload Planning Guidance document and Staffing Organisational chart. However, we were unsure whether the education provider needed to recruit additional staff to accommodate the new programme and learners. The education provider informed us they had recruited an additional 1.0 WTE and plans are in place to recruit up to 1.5 WTE lecturers from September 2026. We had no further questions in this area and considered the standard to be met.	Education and training delivered by this institution is underpinned by the provision of the following key facilities: The programme team includes roles such as the professional lead for occupational therapy. There is a senior leadership team, which includes the Head of Subject. There is also administrative and wider support from roles such as Faculty Managers. There are physical resources, for example sports science / performance laboratories. Resources are in place for the current occupational therapy provision. Any additional resources will be budgeted. The education provider has planning permission to build a multidisciplinary clinic.

			Quality activity two: The visitors acknowledged the availability of various learning resources, including technology for both institutional and practice-based learning. However, we were unsure about the extent of library support and resources for the proposed programme. The education provider informed us the library offers both physical and electronic resources. The visitors were informed the library provides a variety of support for learners. We had no further questions in this area and considered the standard to be met. The programme(s) meet all the relevant HCPC education standards and therefore should be approved.	This also has a budget allocated to it.

Programmes		
Programme name	**Mode of study**	**Nature of provision**
MSc Occupational Therapy (Pre-Registration)	FT (Full time)	Taught (HEI)

Appendix 2 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
BSc (Hons) Podiatry	FT (Full time)	Chiropodist / podiatrist		POM - Administration; POM - sale / supply (CH)	01/01/2002
BSc (Hons) Podiatry (Apprenticeship Route)	FT (Full time)	Chiropodist / podiatrist			29/09/2025
BSc (Hons) Occupational Therapy	FT (Full time)	Occupational therapist			01/09/2002
BSc (Hons) Occupational Therapy	PT (Part time)	Occupational therapist			01/09/2002
BSc (Hons) Occupational Therapy - Apprenticeship Route	FT (Full time)	Occupational therapist			01/09/2019
BSc (Hons) Paramedic Science	FT (Full time)	Paramedic			01/09/2015
BSc (Hons) Physiotherapy	FT (Full time)	Physiotherapist			29/09/2025
BSc (Hons) Physiotherapy Integrated Apprenticeship Route	FT (Full time)	Physiotherapist			29/09/2025
MSc Physiotherapy (pre-registration)	FT (Full time)	Physiotherapist			01/01/2021
Supplementary and Independent Prescribing for Allied Health Professionals	PT (Part time)			Supplementary prescribing; Independent prescribing	01/08/2016