

Approval process report

Education Provider	University of the West of England, Bristol
Professions	Radiography (Diagnostic and Therapeutic)
Name of programme(s)	<ul style="list-style-type: none"> • BSc (Hons) Diagnostic Imaging Practice WBL (Work Based Learning) • Bsc (Hons) Therapeutic Radiography WBL (Work Based Learning)
Date Assessment commenced	13.10.2021
Visitor recommendation made	22.02.2022
Case reference	APP UWE DRAD TRAD 2021-22

Executive summary

Process stage – sharing visitor findings (pre-quality activities), covering:

- Current process stage: The assessment stage is now complete and the visitors have given their recommendation. This follows a quality activity that was comprised of an additional documentary submission. Following these additional documents the visitors feel that all standards have been met at the threshold level and are recommending approval of the programs.
- Summary of key findings: visitors felt that standards 3.6, 3.12, 5.1, 4.1, 4.3, 4.5, 4.6, 4.7, 4.2, 6.1, 6.2, 6.4, 6.5 were not met after the stage 2 submission.
- They have cited a lack of evidence and insufficient specific evidence as reasoning for this
- They requested an additional documentary submission as the quality activity to address their concerns and for explanations to be provided to answer any outstanding areas.
- Particularly they wanted further information regarding; placements, timetabling, a revised handbook, resourcing around apprentice numbers, progression information and use of specific resources such as ‘pebblepad’.

Process stage – final visitor recommendation reached, covering:

- Visitors have recommended approval of the proposed programs with no conditions.
- Visitors commented that while they feel all standards have been met at Threshold level, they would advise the education provider to be more detailed going forward.
- Next steps – report to be finalised and passed to education provider before being sent to March 2022 panel.

Process stage – post-decision publication, covering:

- Visitors expressed that while they felt that standards were met at threshold level, they also felt that as a learning point for the provider, more detail could be provided in future submissions. This can be seen as a developmental point

and could be useful for the provider going forward in order to identify areas of good practise.

- After the quality activities at stage 2 of the approvals program it was felt that all standards were met at threshold level and that the program should be approved with no conditions.

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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 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:

Beverley Ball	Lead visitor, Radiographer – Therapeutic Radiography & Oncology
Stephen Boynes	Lead visitor, Radiographer – Diagnostic Radiography

Section 2: Institution-level assessment

The education provider context

The education provider currently delivers 24 HCPC-approved programmes across 7 professions. It is a Higher Education Institution and has been running HCPC approved programmes since 1996.

From the context setting and performance scoring aspect we found that overall the Provider is performing well, having achieved a TEF Gold rating and looking at the data we received from HESA and the OFS they seem to be performing well. Our overall score was 0.98 on our context setting document. This overall score is considered a very high score as it is close to the maximum score of 1. This data indicates the education provider is performing very well overall

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 1 of this report.

	Practice area	Delivery level	
Pre-registration	Arts therapist	Undergraduate	<input checked="" type="checkbox"/> Postgraduate
	Biomedical scientist	<input checked="" type="checkbox"/> Undergraduate	Postgraduate
	Occupational therapy	<input checked="" type="checkbox"/> Undergraduate	Postgraduate
	Paramedic	<input checked="" type="checkbox"/> Undergraduate	Postgraduate
	Physiotherapist	<input checked="" type="checkbox"/> Undergraduate	Postgraduate
	Practitioner psychologist	Undergraduate	<input checked="" type="checkbox"/> Postgraduate
	Radiographer	<input checked="" type="checkbox"/> Undergraduate	Postgraduate
Post-registration	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.

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

Data Point	Benchmark	Value	Date	Commentary
Total intended learner numbers compared to total enrolment numbers	491	544	2021	This score is negative, because the actual learner numbers across existing HCPC programmes is above the intended learner numbers - for last academic year within this institution
Learners – Aggregation of percentage not continuing	7.9	7.5	2018/19	We collected this data from the Higher Education Statistics Agency (HESA). Score of 0 is the minimum expected score of good performance, hence this means the education provider is doing well.
Graduates – Aggregation of percentage in employment / further study	95.3	95.6	2016/17	We collected this data from the Higher Education Statistics Agency (HESA). Score of 0 is the minimum expected score of good performance, hence this means the education provider is doing well

Teaching Excellence Framework (TEF) award	N/A	GOLD	2018	This is the highest data point score as GOLD is the highest award from TEF. This indicated the quality of teaching is good for this University.
National Student Survey (NSS) overall satisfaction score (Q27)	73.61	77.07	2021	We collect this data from the Office for Students (OfS), who run a survey for learners and graduates of undergraduate Higher Education. This score indicates the education provider is performing well in this area.
HCPC performance review cycle length	N/A	N/A		This data point is not currently available, as will be decided through the next performance review process (next year)

The route through stage 1

The Institution, which runs HCPC-approved provision has 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 complete 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 Provider highlighted ways in which information is available to applicants prior to applying in their approval request form. They highlighted the open days and web pages being the sources of information.
 - From the approval request form, the Provider stated the following; “UWE apprenticeship webpages are externally accessible to future students and employers. Information available at university level includes: benefits of a becoming a degree apprentice, support for degree apprentices and the range of degree apprenticeships available to study at UWE.”

- Furthermore, regarding the individual courses the Provider stated that “Specific course pages provide detail of each UWE Degree Apprenticeship programme.”
- The provided also states in their Approval request form that much of the documentation and planning had taken place prior to the approval request. That stated “Documentation was prepared as part of previous major change process before QA model changed” and also referenced that this documentation was available by 20.10.2021.

Assessing English language, character, and health – The Provider has listed the following policies as being in place to support this new provision and ensure standards are being met;

- UWE English Language Requirements are detailed on UWE Webpages
- UWE Admissions Policy
- BSc (Hons) Diagnostic Imaging Practice Placement Process
- BSc (Hons) Therapeutic Radiography Placement Process
- UWE Disclosure and Barring Policy Conduct Policy
- UWE Professional Suitability and Conduct Procedure
- UWE Policy Statement on the Recruitment of Ex-offenders
- UWE Fitness to Study Policy

Prior learning and experience (AP(E)L) – The Provider has listed the following policies as being in place to support this new provision and ensure standards are being met;

- UWE Academic Regulations: Section E6, Accredited learning process
- Applicant self-assessment questionnaire
- The provider has also stated the following in regards to Prior learning and experience (AP(E)L): UWE Academic Regulations and the UWE process for accredited learning provide robust mechanisms for AEL into UWE programmes (where PSRBs permit AL/AEL). Where permitted, the assessment of applications for AEL is undertaken by designated staff within each faculty, who hold appropriate subject, discipline and professional expertise, and relevant experience of, or training in, the appropriate procedures. In addition, the programmes employ the Applicant self-assessment questionnaire as a gap analysis where learners rate their prior learning in relation to the knowledge skills and behaviours at course commencement. This is recorded by the UWE Degree Apprenticeship Hub.

Equality, diversity and inclusion – The Provider has listed the following policies as being in place to support this new provision and ensure standards are being met;

- UWE Transforming Futures: Equality, Diversity and Inclusivity Strategy
- UWE Bristol Access and Participation Plan 2020 – 2021 to 2024-2025
- The provider has also stated the following in regards to Equality, Diversity and Inclusion: “Equality, diversity and inclusivity (EDI) underpin our core values at UWE, and we strive to ensure that our commitment to equality is reflected in the behaviour, values and practices throughout the University. UWE 2030 strategy documents and the UWE Bristol Access and Participation Plan, set out the University’s commitment towards the development of inclusive and

supportive learning and working environments for all students and staff, where all individuals have the opportunity to fulfil their potential.

The apprenticeship programmes listed in section 2 reflect our core values at School and programme level through widening entry and access to higher education and the profession.”

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 Register¹** –The provider has listed the following policies being in place to support the new programs:
 - BSc (Hons) Diagnostic Imaging Practice Programme Specification
 - BSc (Hons) Therapeutic Radiography Programme Specification
 - The provider also stated in their approval request form that they are working closely with employers in the South West to ensure that the programme design meets employers and apprentices needs and is able to deliver provision that enables students to achieve the requisite BSc (Hons) Diagnostic Imaging Practice / BSc (Hons) Therapeutic Radiography as the expected threshold level of entry to the register. Additionally that these programmes have been recommended for approval by the College of Radiographers.

Sustainability of provision – The provider referred to their “UWE 2030 Strategy” in relation to this standard and stated that apprenticeships are a key part of this strategy and that they are aiming for significant growth of apprenticeships. They also reference contracts they have with a group of employers in the South West Region that led to the proposed programs.

Effective programme delivery – The provider has listed the following policies to support this section:

- UWE Programme Management Committee Terms of Reference
- UWE Student Rep Staff Forums Terms of Reference
- UWE Academic Standards and Quality Committee Terms of Reference
- They also state in the descriptive narrative that they have ‘robust monitoring and governance processes for ensuring academic standards and quality. Effectiveness of programme delivery is monitored through module reports and evaluations that directly inform Annual Programme Reviews (APR). The APR, and its associated continuous improvement plan, ensure features of best practice are recognised and supported to continue and areas requiring development are addressed.’ Furthermore that each APR feeds directly into School level reporting that is considered and monitored by the Faculty Academic Standards and Quality Committee (ASQC).

Effective staff management and development – The provider referred to their UWE Scholarly Activity Guidelines and Academic Professional Practice Programme Specification in relation to this section.

- They also stated the following narrative: UWE’s Postgraduate Certificate in Academic Professional Practice (PGCAPP) is an award designed for those

¹This 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

who are directly responsible for teaching and learning in higher education. The programme contributes to the UWE CPD framework and is accredited by the Higher Education Academy (HEA). The programme provides a credit-bearing qualification embedded within the Academic Professional Apprenticeship. UWE ensures that all newly appointed members of teaching teams without a Post Graduate Certificate in Higher Education are supported to undertake the programme, with a subsequent reduction in teaching load to facilitate engagement and professional development.

- Through UWE's appraisal system, radiography teaching staff are also supported to access continuing professional development to ensure currency in their role as educators. UWE Scholarly Activity Guidelines exist to ensure professional development is supported through the appraisal system. In addition, all UWE staff have access to institutional learning resources and ongoing professional development provided internally through the learning and development centre and the Academic Practice Directorate (APD). UWE's APD support academic development activity related to teaching, learning and assessment, to facilitate and promote an institutional culture of ongoing enhancement and are core members of programme design and development activities.

Partnerships, which are managed at the institution level – The education provider referred to the following to answer these standards;

- Radiographer apprenticeship – South West Community of Practice DRAFT Terms of Reference.
- They expanded on this with; “The UWE Degree Apprenticeship Hub and a dedicated UWE Partnership Team ensure effective partnership working with employers who support UWE apprenticeship provision.”
- Radiographer apprenticeship – South West Community of Practice is a newly established group has terms of reference which includes ensuring programme development is fit for purpose and involves relevant stakeholder; ensuring the programme is developed and operates in line with university QMEF, HCPC, COR, ESFA and IFTA guidance; maintaining a risk register and creating partnership action plans as needed, and maintaining oversight of resources, required to ensure the successful implementation and ongoing delivery of radiography apprenticeships.

Non-alignment requiring further assessment: None

Quality, monitoring, and evaluation

Findings on alignment with existing provision:

- **Academic quality** –The provider listed the following policies in place to meet this requirement;
 - UWE Academic Regulations
 - UWE Academic Board Terms of Reference
 - UWE Enhancement Framework
 - UWE 2030 Strategy
 - The Provider also referred to their enhancement framework that is in place that sets out procedures for the approval of new programs and enhancement of existing ones. This is informed they state by the ‘Quality Assurance Agency’s (QAA) UK Quality Code for Higher Education’. The Enhancement Framework is concerned with the assurance of academic standards; quality and enhancement through curriculum design; approval; annual monitoring; evaluation, programme enhancement and alignment to UWE 2030 strategy.

- Students, service users and carers/patients and the public; practice colleagues and external professional academic colleagues are all involved in the program design, evaluation and approval.
- They also refer to professional services such as Library, Careers and Student Services, including the Professional Practice Office (PPO). Peers external to the Faculty and the Institution, and representatives of Professional and Statutory Regulatory Bodies (PSRB) also play an important part in programme monitoring and approval.
- The education provider also stated the following regarding their academic regulations: “The University’s Academic Regulations assure academic standards, ensuring learners are treated consistently and equitably. UWEs academic standards, procedures and regulatory framework relating to the quality management and enhancement of programmes and modules are approved through Academic Board. Academic Board is responsible for providing assurance to the Board of Governors on the effectiveness of the University’s academic governance, continuous improvement of the student experience and the setting and maintaining of standards.”
- The education provider also referred to their ‘External Examining System’ as a ‘key’ part the Enhancement Framework and monitoring of academic standards and quality. Additionally “External examiners contribute to the on-going review and enhancement of modules/ programmes; they ensure that academic standards are comparable to similar awards in other universities and that assessments are fair and conducted appropriately. External examiners are appointed to provide independent, impartial, judgement and advice regarding the quality and standards of the provision. They attend examination boards where decisions on module assessments and the award of credit are made and ensure that decisions are commensurate with University requirements and with higher education standards.”

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

- The education provider referred to the ‘Placement Processes’ for both the programs and ‘UWE Raising and Escalating Concerns Process’ in respect to point.
- The also stated that “As partners, employers source placements for apprenticeship programmes, however quality assurance of placements and management of placement profiles will be managed by UWE’s PPO. Together PPO, Programme Leader and Employers ensure that the students’ placement profiles are appropriate, and also that due consideration and support for access needs and other areas of student support are available in the learning environment.”

UWE supports the development of practice educators through the following processes:

- Bespoke practice educator update sessions.
- Practice learning and student support module (level 3 or masters level).
- Bespoke experienced educator training sessions.
- Providing a named programme contact (the visiting tutor) to meet educators and students 3 times during the placement to offer support and guidance.
- Ensuring practice educators supporting students on placements are supported to undertake assessment in practice.
- Regular communication with Practice Educators assessing students in practice, will ensure that assessment processes, using the learning contract, are fully understood and can be confidently applied. This will involve provision

of orientation sessions as well as online information by UWE. Additionally, practice educators handbooks support practice educators.

- The School of Health and Social Wellbeing utilises clear processes to support students and partners to raise and escalate concerns that may arise during practice placement learning. These processes apply equally to students on professional practice apprenticeship programmes.

Learner involvement – The education provider listed the following policies in respect of this standard;

- UWE Bristol Principles of Academic Representation
- Academic, Standards and Quality Committee Terms of Reference
- Programme Management Committee Terms of Reference
- Student Rep Staff Forums Terms of Reference
- The education provider also stated that “Learner feedback and student representation are central to module and programme quality monitoring and evaluation. At completion of a module run, formal student feedback is collated through anonymous online module surveys. Where appropriate, student feedback is promptly disseminated to our partners so that quality processes are seen as a collective responsibility.”
- Additionally “The student voice is embedded at every level of the University structure, from representing students at a programme level during SRSFs, through to representation at Academic Board.”
- The education provider also stated that these are institutionally engrained in “UWE Bristol Principles of Academic Representation”, at a program level forums exist for feedback on student experiences. Matters can be escalated to program management and faculty level from here.
- Furthermore “Outcomes from module surveys, SRSF, and PMC feed directly into module reporting and programme review and enhancement processes.”

Service user and carer involvement – The Provider states the following in terms of Service User and Carer involvement;

- The School of Health and Social Wellbeing at UWE works collaboratively and in partnership with admissions and outreach services; practice partners and the public to maintain a robust approach to recruitment that ensures service users and carers are involved throughout the programmes listed in Section 2.
- At the recruitment stage, interviews are completed with a representative employer, a UWE representative, and where possible, a service user/carer.
- During ‘off the job’ training, standardised patients, who may be service users, are used to support in-class skills based sessions.

Non-alignment requiring further assessment: None

Learners

Findings on alignment with existing provision:

- **Support** – The education provider referred to both their UWE Reasonable Adjustments Process and UWE Access Plan Process policies in terms of learner support.
- Stating also that “The UWE Student Wellbeing Service offers a comprehensive array of support services to help students with wellbeing and personal development needs. This includes counselling, mentoring and mental health support.”

- They also referred to their 'student services' function that provides the following services; study skills advisors, careers advice, money and finance services and a Disability Service.
- The 'Disability Service' they state "ensures the needs of all learners are assessed and those who require or want it, have a reasonable adjustment plan devised in collaboration with a student advisor and a member of the Academic team."
- They also refer to pastoral care also being available through the "University Community Faith Representatives and the Chaplaincy service". Additionally through UWE support services on campus, over the phone and online.
- Specifically "Diagnostic Imaging Practice and Therapeutic Radiography apprenticeship students also have an allocated Tripartite Reviewer, who will facilitate tripartite meetings every 12 weeks with the student and their workplace assessor. The workplace assessor is the student's main point of contact within the workplace in relation to their learning needs and will meet with the student in fortnightly supervision meetings to review these. Alongside this assessor role, which may be undertaken by the student's line manager, there is also a workplace mentor role. Their role is to support, advise and encourage the student across the three years, in meetings on a monthly basis."

Ongoing suitability – The education provider listed the following policies in regards to ongoing suitability: the 'UWE Professional Suitability and Concerns Process', the 'UWE Disclosure and Barring Policy' and the 'Conduct Policy UWE Fitness to Study Policy'.

- Stating that "UWE has a series of robust measures including risk assessment, professional suitability and fitness to study that, where needed, are put in place to put in place to safeguard the public. For professional practice apprenticeship programmes, a UWE requirement exists for employers to evidence DBS and OH clearance and, whilst on programme, for apprentices to self-declare good character and health annually via ARC (UWE's student management information system). Students who fail to complete this will be managed in accordance with the UWE Professional Suitability and Conduct Process. Student progression and fitness to study is subject to ongoing professional suitability, with processes in place should concerns about student wellbeing or professionalism exist."

Learning with and from other learners and professionals (IPL/E) – The provider refers to their "Healthy Futures Module Specification" in response to this section. The provider also refers to opportunities that exist where Inter-professional working and learning can take place, the healthy future module being one such example. The Provider provided the following narrative on the module; "The module is underpinned by interprofessional education principles and driven by exploration of future health care services and needs: enabling UWE graduates to be ready and able future facing practitioners. In addition, the professional practice modules require weekly competency assessment of interprofessional working, in the learning environment."

Equality, diversity and inclusion – The provider referred to the following policies in relation to equality, diversity and inclusion:

- UWE Transforming Futures: Equality, Diversity and Inclusivity Strategy
- BSc (Hons) Diagnostic Imaging Practice Programme Specification
- BSc (Hons) Therapeutic Radiography Programme Specification
- UWE Reasonable Adjustments Process

- UWE Access Plan Process
- Furthermore, stating “Equality, diversity and inclusivity (EDI) underpin our core values at UWE, and we strive to ensure that our commitment to equality is reflected in the behaviour, values and practices throughout the University, as reflected in the UWE Transforming Futures: Equality, Diversity and Inclusivity Strategy.”
- They also stated; “UWE’s Inclusivity Tool Kit ensures that inclusivity is built into the shaping, resources and delivery of both full-time programme and apprenticeship programmes.”
- The provider demonstrated a range of different policies that are in place to support equality, diversity and inclusion. This includes a BAME network group that meets quarterly, this group includes students but also lecturers and faculty members.
- In regards to students with disabilities the provider stated the following; “UWE has a proven track record of support students with physical and mental health conditions to engage successfully with the programme, through the use of reasonable adjustments, access planning and the support of the Disability Services.”

Non-alignment requiring further assessment: None

Assessment

Findings on alignment with existing provision:

Objectivity – The Provider has listed the following policies in relation to Objectivity; ‘UWE Assessment and Feedback Policy’ and the ‘HAS Faculty Marking Descriptors’

- The Provider also gave the following narrative description: “Curriculum development, that includes assessment design is scrutinised through School and Faculty Curriculum Review Processes to enhance objectivity of assessment processes. UWE Assessment and Feedback Policy serves to increase objectivity and alignment of assessments methods to module aims and learning outcomes. Standardised Faculty wide marking descriptors and the use of External Examiners for all credit bearing modules/programmes further support objectivity and robust assessment processes”

Progression and achievement – The Provider has listed the following policies in relation to progression and achievement ‘UWE Academic Regulations’ and ‘UWE Examining Board Notes of Guidance’.

- The Provider also gave the following narrative description: “ At UWE, programme leaders maintain oversight of student progression through quality assurance and award board ratification processes. In accordance with UWE Academic Regulations, where an apprentice fails a practice module, a UWE Award Board will consider the student’s academic profile and progression when making an objective decision relating to a further opportunity at practice. If granted, a retrieval placement will be arranged allowing for a second opportunity.”

Appeals – The provider has listed “UWE Complaints Procedure” and “UWE Academic Appeals Procedure” policies in relation to appeals.

- The provider also give the following narrative description: “UWE has robust Academic Appeals and Complaints Procedures that are student facing and accessible via UWE webpages. The Academic Appeals Procedure enables students to raise concerns regarding potential irregularities in the assessment

process, following the publication of results from a UWE Examination Board, or the outcome of an assessment offence panel. UWE welcomes all feedback, both positive and negative, and considers complaints to be a valuable source of information enabling improvement to services and/or enhance the student experience.”

Non-alignment requiring further assessment: None

Outcomes from stage 1

Stage 1 was executive led as the provider already runs a number of programs. The approval request form demonstrated how the new provision is resourced for and will fit in with existing schools and programs.

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

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Areas of good and best practice identified through this review: 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
BSc (Hons) Diagnostic Imaging Practice	WBL (Work based learning)	Diagnostic Radiographer	25 learners per year in one cohort rising to 35 in the first intake.	07.03.2022
BSc (Hons) Therapeutic Radiography	WBL (Work based learning)	Therapeutic Radiographer	15 learners per year in one cohort	07.03.2022

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.

Performance data

We also considered as follows:

- We looked at data from HESA, OFS and TEF scores in compiling evidence for our context setting document.
- The provider achieved an overall good score of 0.98 in our performance scoring model.

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.

Quality theme 1 – Practice Based learning Capacity

Area for further exploration: The visitor's highlighted concerns regarding the capacity of practise-based learning after assessing the stage two submission. This particularly related to the inclusion of apprentices and whether they were being considered among the total 'learner' numbers, or were they additional?

This is to ensure that apprentices have access to the same resources and practise-based learning as conventional learners. But also, that the practise-based learning is fully resourced for and that their inclusion as additional will not impact the learning of others.

Specifically, the Visitors asked to see more information around placement agreements, audits and validated pro-forma from the College of Radiographers. The visitors also asked for more information on the 'tripartite meeting' regarding practise-based learning.

Quality activities agreed to explore theme further: The most effective way to explore this was for the missing/additional documentation to be provided via an additional documentary submission. A list of questions relating to the standards not yet being met were sent to the Provider who responded with a comprehensive documentary submission.

Outcomes of exploration: Following the receipt of the documents that formed the Quality activity visitors were provided with more details on Practise based learning. It is now felt that this theme has been addressed, visitors stated; "Due consideration has been given to the maximum number of learners with review of capacity, placement audits, staff numbers and learning opportunities to ensure student experience is not compromised".

The visitors also stated that that placement capacity is appropriately considered to ensure learner experience is not compromised for all learners and as such this theme was addressed and the related standards met.

Regarding the tripartite meetings, the visitors noted improvements in the handbook stating; "There is now information in the programme handbook concerning the tripartite meetings and this addresses the point raised."

Quality theme 2 – Structure and teaching

Area for further exploration: The visitors raised a few specific concerns around the structure of the courses, how resources are used for the programs, progression and online learning that required additional information to explain. Specifically, the visitors asked:

- For a 'timetable for teaching', what is taught during blocks and examples of e-learning would be useful.
- Would like to see examples of planned online learning activities.
- I would like more details on how "Pebblepad" is used on the programme to support the development of reflection.
- A more detailed plan to see how all the activities are broken down would be useful. They felt that this is not clear from the module specifications. (Referring to appropriate learning and teaching methods).
- Would like to see more information on the clinical competency e-portfolio.
- Would like to see program specifications explain the requirements for progression and award that are out with the standard university regulations.
- Would like to see what regulations pertain to supplementary assessment of clinical modules?

Quality activities agreed to explore theme further: This was covered in the previously mentioned list of questions and further documentary response.

Outcomes of exploration: As part of the additional documentary submission quality activity the visitors were provided with more information. The visitors felt that this addressed many of their concerns and in some cases the module handbooks were amended/update and now felt these areas are met. Visitors did highlight they feel these are met at threshold level and would like the provider to reflect on this, in future reviews (performance Review) to provide much more comprehensive information. Furthermore, visitors also wanted to state that they would expect information related to the tripartite meetings to be more readily available as these are key to the integration of academic and practical education. Please note also that following the documentary submission, the Visitors did ask for the Provider to provide a mapping document for the submission to show how they have addressed the different points raised and how the various documents link to the standards they are aiming to satisfy.

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. This approval case was executive led through stage one and the stage one standards were found to be met. The Provider is an existing provider having run programs since 1996, they were found to be meeting the standards and had made provision for how these new programs would fit into existing policies.
- **SET 2: Programme admissions** – Visitors did not indicate any concerns with admission standards. Admissions standards would also have been looked at in stage one. Standards found to be met. No issues or concerns raised.
- **SET 3: Programme governance, management and leadership** –Visitors did not indicate any concerns with these standards and indicted stage two standards around this were met at threshold. Would also have been looked at in stage one and no concerns raised.
- **SET 4: Programme design and delivery** – The visitors have some concerns around the programs design and delivery. This related to the structure of the programs and progression along the course. This was addressed in the quality activity including being provided with updated and more details programme handbooks.
- **SET 5: Practice-based learning** – The visitors raised concerns in stage two of this approvals case about the capacity of practise-based learning, how the placements were organised and requested additional information on the “tripartite meetings”. The Quality activity requested more information on this and following the additional documentary submission the visitors concerns were addressed, and they found these standards met.
- **SET 6: Assessment** – Visitors felt these standards were met in the stage 2 submission and the new programmes will be accommodated in existing university-wide provisions and existing policies. Visitors did not this was met at threshold level and links into previously made point about program progression – more detailed information in programme specification would be useful going forward.

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 indicated that after the quality activity they felt that the standards were met, but only at threshold level. They indicated a desire for the provider to consider this and look to enhance materials in the future. They note specifically that the programme handbook could have much more details, particularly around practise-based learning, progression, the tripartite agreements, apprenticeships and workplace agreements.

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 University of the West of England (UWE), Bristol, BSc (Hons) Diagnostic Imaging Practice and Bsc (Hons) Therapeutic Radiography programmes should be approved with no conditions.

Reason for next engagement recommendation: The visitors recommend that during the next engagement, whether this be another approval case, performance review or a focussed review, that the Provider provide a high level of detail in their submissions.

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 programmes are approved

Reason for this decision: Provide reasoning as noted through the decision notice.

