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## Approval process report

Medipro Limited, Paramedic, 2022-23

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### Executive Summary

This is a report of the process to approve a paramedic programme at Medipro Limited. This report captures the process we have undertaken to assess the institution and programme(s) against our standards, to ensure those who complete the proposed programme(s) are fit to practice.

We have:

- Reviewed the programme against our programme level standards and found we needed to further explore how standards are met in this area via quality activities.
- Reviewed the institution against our institution level standards and found we needed to further explore how standards are met in this area via quality activities undertaken as part of stage 2.
- Set conditions on approval of the programme, which need to be met before we can approve the programme.

Through this assessment, we have set conditions which must be met before the programme is approved, focused on:

- SET 1.1 - how, across the programme, the learning outcomes and assessments will be taught and measured at the appropriate academic level, to ensure learners can meet the SOPs for paramedics. We require the education provider to demonstrate how the programme will be delivered at, or equivalent, to the academic level required for entry to the Register (Bachelor degree with honours) as defined in the Framework for Higher Education Qualifications of UK Degree-Awarding Bodies published by the Quality Assurance Agency (QAA).
  - SETs 3.9 and 3.10 - the qualifications and experience of the current staff members to deliver and assess the programme at the required academic level for entry to the Register. We were unsure how the education provider process will ensure an adequate number of, appropriately qualified and experienced staff, would be in place as the programme develops.
  - SETs 4.1, 6.1 and 6.5 – linked to the condition against SET 1.1, we were unable to identify how the programme will deliver all the SOPs for paramedics, and how learners will be assessed to ensure all SOPs for paramedics are met through, and on completion of, the programme.
  - SET 4.8 – linked to the conditions against SET 1.1 and 4.1, 6.1 and 6.5, we were unclear how learners would be able to develop and successfully achieve the SOPs at the level required for entry to the Register. Registrants must ensure their practice is evidence-based, as required through SOP 11 which requires that registrants ‘assure the quality of their practice’.
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- SETs 5.5 and 5.6 – how the education provider demonstrates they ensure an adequate number of appropriately qualified individuals are in place as practice educators; and who is able to sign off the competences in the practice assessment document.
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**Previous consideration** Not applicable. This was a request to develop a new programme at the required level of a Bachelor degree with honours for paramedics.

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**Decision** The Education and Training Committee (Panel) is asked to decide:

- whether the conditions set on the programme are appropriate and need to be met before we can approve the programme.

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**Next steps** We will:

- Support the education provider in their work to meet the conditions.
- Return to an appropriate Education and Training Committee (or Panel, depending on the final recommendation) in 2024, with a recommendation and reasoning about whether to approve the programme.

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

Gemma Howlett	Lead visitor, Paramedic
Matthew Catterall	Lead visitor, Paramedic
Saranjit Binning	Education Quality Officer
Tracey Samuel-Smith	Education Manager

## **Section 2: Institution-level assessment**

### **The education provider context**

The education provider is based in the East of England and currently delivers one HCPC-approved programme in one profession. It is a private education provider and has been running the HCPC approved programme since 2019.

The education provider is a company that delivers a range of courses and qualifications aimed at the pre-hospital training arena in areas such as Level 3 Certificate: Emergency Response Ambulance Driving or Pre Hospital Trauma Management.

The only programme approved by the HCPC was the Medipro level 6 Paramedic Practice, full time programme validated by Qualsafe Awards Ltd. While this programme title states ‘Level 6’, we previously made the judgement that the programme aligned to a Diploma of Higher Education (DipHE), linked to our previous requirement for the qualification level required for entry to the Register.

The reference to ‘Level 6’ referred to the Office of Qualification and Examinations Regulation (Ofqual) educational framework rather than the Frameworks for Higher Education Qualifications of UK Degree-Awarding Bodies, where Level 6 refers to the Bachelor degree with honours<sup>1</sup>. The last intake to this programme was in August 2021 and the last graduation is expected in August 2024. The closure of this programme was in response to the change to the level of qualification normally expected for entry to the HCPC Register. In September 2021, the level of qualification increased from a DipHE to a Bachelor degree with honours, meaning all paramedic programmes needed to be delivered at, or above, this level from this date.

The education provider recently changed their awarding body from Qualsafe Awards Ltd to Future (Awards & Qualifications) Ltd. Qualsafe Awards Ltd will continue to support the current learners on the programme until they complete. The purpose for this change was a business decision to protect future HCPC paramedic programmes at the provider, and to offer learners reduced qualification fees.

The education provider has an exclusive agreement with Future (Awards & Qualifications) Ltd to not develop any paramedic awards with other providers, which protects their business interests.

Qualsafe (Awards) Ltd and Future (Awards & Qualifications) Ltd are regulated by the Ofqual. Through clarification prior to receiving the submission, the education provider informed us there were no changes to how they will interact with their validating body as both bodies meet the same regulatory standards by Ofqual.

### 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		Approved since
<b>Pre-registration</b>	Paramedic	<input checked="" type="checkbox"/> Undergraduate	<input type="checkbox"/> Postgraduate	2019

### Institution performance data

<sup>1</sup> [The Frameworks for Higher Education Qualifications of UK Degree-Awarding Bodies \(qaa.ac.uk\)](http://www.qaa.ac.uk) – page 45

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).

<b>Data Point</b>	<b>Bench- mark</b>	<b>Value</b>	<b>Date</b>	<b>Commentary</b>
Total intended learner numbers compared to total enrolment numbers	54	30	2022	The benchmark figure is data we have captured from previous interactions with the education provider, such as through initial programme approval, and / or through previous performance review assessments. Resources available for the benchmark number of learners was assessed and accepted through these processes. The benchmark figure represents the number of learners on the closing programme. The value figure represents the number of learners who will be on the proposed programme should it gain approval.
Learners – Aggregation of percentage not continuing	N/A	N/A	N/A	There is no data available for this data point.
Graduates – Aggregation of percentage in employment / further study	N/A	N/A	N/A	There is no data available for this data point.
Learner satisfaction	N/A	N/A	N/A	There is no data available for this data point.

We asked the education provider to consider if they wanted to establish ongoing reporting for the data points above as part of this approval process. The education provider was keen to undertake this activity and we will be working together to establish a regular supply of data, should the programme gain approval.

### **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**
  - Information related to admissions is available on the education providers website for the proposed programme, which includes entry requirements and processes.
  - Additional information is provided on open days where applicants can speak to the programme team.
  - These processes will apply to applicants on the proposed programme and align with the institution wide processes.
- **Assessing English language, character, and health**
  - The education providers website provides clear information on the International English Language Testing System (IELTs) requirements and English Language qualifications.
  - All applicants are required to complete health and Discloser and Barring Service (DBS) screenings.
  - These processes and requirements will apply to applicants for the proposed programme and aligns with institution wide policies and procedures.
- **Prior learning and experience (AP(E)L)**
  - The Recognition of Prior Learning (RPL) Policy is a generic policy that is applied to Accreditation of Prior Experience and Learning (APEL) requests.
  - This policy will apply to applicants on the proposed programme and aligns with the institution wide policy.
- **Equality, diversity and inclusion**
  - The Equality and Diversity Policy is an institution wide policy.
  - There is also an Annual Programme Committee who review equality, diversity and inclusion data from all programmes.
  - This policy will apply to the applicants on the proposed programme.

**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<sup>2</sup>**
  - The proposed programme is mapped against the Quality Assurance Agency's paramedic subject benchmark statements and against the College of Paramedics curriculum guidance.
  - The education provider is accredited by the validating body to deliver Level 6 education by Ofqual in England.
  - Due to the change in the level of academic delivery between the closing programme (DipHE) and the proposed programme (Bachelor degree with honours), we decided to undertake a review of this standard as part of Stage 2. This allowed us to consider this alongside the programme specific learning outcomes and assessment methods required for Bachelor degree with honours academic level.
- **Sustainability of provision**
  - A recent development to sustain the provision is the exclusive agreement the education provider has with their new validating body, Future (Awards & Qualifications) Ltd. As part of this contract, the education provider will not develop paramedic awards with other providers.
  - The business plan also ensures the sustainability of the provision and outlines clear strategies to develop the provision further.
  - In addition to this, employer engagement demonstrates a commitment to supporting practice-based learning and the education provider has long-term placement agreements with many of these employers.
  - These policies will apply at institution level and will apply to the proposed programme.
- **Effective programme delivery**
  - Programmes are supported by the Quality Team who are responsible for gathering and monitoring internal data and presenting the findings and any actions to the Senior Management Team. The data gathered includes learner feedback, financial data, incidents and complaints and tutor performance, which includes workload and capacity.
  - In addition to this programme specification, Mentor handbook and Practice placement handbook are available to support learners. These documents clearly outline the requirements of programme delivery.
  - These policies will apply at institution level and will apply to the proposed programme.
- **Effective staff management and development**
  - The education provider has Annual Personal Development Reviews and tutor observations and peer to peer reviews to support staff with their professional development.
  - These policies and procedures apply at institution level and will apply to the proposed programme.
- **Partnerships, which are managed at the institution level**
  - The Practice Placement Agreements cover responsibilities and provision for learners at an institution level.

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<sup>2</sup> This is focused on ensuring providers are able to deliver qualifications at or equivalent to the level(s) in SET 1, as required for the profession(s) proposed

- As part of this, the Audit tool is used to ensure safe and effective practice.
- These agreements support partnerships and will apply to the proposed programme.

**Non-alignment requiring further assessment:** Ensure the proposed programme delivers the learning outcomes, and therefore the Standards of proficiency (SOPs), at level required for entry to the Register (Bachelors with honours degree).

### Quality, monitoring, and evaluation

#### **Findings on alignment with existing provision:**

- **Academic quality**
  - The Programme Operations Manual applies to the institution and outlines how the education provider monitors the quality of the provision.
  - Other quality assurance processes include RAG (red, amber, green) ratings, which is a status used by the quality assurance team to determine how much sampling is required.
  - Assessments are also reviewed by External Examiners to ensure an independent review.
  - These policies and procedures apply at institution level and will apply to the proposed programme.
- **Practice quality, including the establishment of safe and supporting practice learning environments**
  - The Practice placement audit tool is applied to all practice learning environments to ensure the environments are safe and supportive for learners.
  - In addition to this, the practice placement agreements identify the support available to learners.
  - These policies and procedures apply at institution level and will apply to the proposed programme.
- **Learner involvement**
  - The Programme Operations Manual and Programme Handbook encourage learner participation and they are invited to all programme committee meetings.
  - The education provider is in the process of developing a system to involve previous learners with the delivery of the programmes, which will enhance the teaching experience for new learners.
  - These policies and procedures apply at institution level and will apply to the proposed programme.
- **Service user and carer involvement**
  - The Patient Carer and Public Involvement policy (PCPI) and Operations Manual outline the process to recruit and involve individuals with programmes.
  - These policies and procedures apply at institution level and will apply to the proposed programme.

**Non-alignment requiring further assessment:** None.

## Learners

### **Findings on alignment with existing provision:**

- **Support**
  - The education provider has a range of policies in place to support learners with pastoral and academic needs, such as the Complaints Policy, Whistleblowing Policy, Student Grievance Policy and Supporting students with disabilities in placement policy.
  - In addition to this, learners have access to Occupational Health Support for advice on health matters.
  - These policies and procedures apply at institution level and will apply to the proposed programme.
- **Ongoing suitability**
  - The Student Code of Conduct Policy is an institution wide policy and outlines the expectations of learners.
  - Expectations are also outlined in the Student, Mentor and Programme handbooks and how by not meeting these expectations could impact on learners' eligibility to apply to the HCPC Register.
  - This policy will apply to the learners on the proposed programme.
- **Learning with and from other learners and professionals (IPL/E)**
  - Currently the education provider only offers IPL through an assignment, which is linked to an inter professional learning event with their practice-based learning providers.
  - The provider is in the process of developing an IPL strategy, which will be reviewed as part of stage 2 of this process.
- **Equality, diversity and inclusion**
  - The Equality and Diversity policy and Supporting students with a disability in placement policy are both institution wide policies. These demonstrate the education providers commitment to equality, diversity and inclusion.
  - These policies and procedures apply at institution level and will apply to the proposed programme.

**Non-alignment requiring further assessment:** The provider is in the process of expanding their IPL strategy and this document will be submitted and reviewed during stage 2 of this process.

## Assessment

### **Findings on alignment with existing provision:**

- **Objectivity**
  - To ensure assessments are objective, all programmes follow the guidance set out in the Assessment Policy.
  - The programme specifications further support this and provide details of the external examiner process.
  - These policies and procedures ensure objectivity and clear quality processes for assessment and marking and will apply to the proposed programme.
- **Progression and achievement**

- Programme handbooks, specifications and module descriptors specific to the individual awards outline the progression and achievement.
- All assessment processes comply with the Programme Operations Manual and apply at institution level and will apply to the proposed programme.
- **Appeals**
  - The Appeal Policy is an institution wide policy and allows learners to appeal their marks.
  - This policy applies at institution level and will apply to the proposed programme.

**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. While the current programme is closing, the education provider demonstrated how the majority of the previous institution wide Stage 1 standards, were met in the same way for the new provision.

As part of the stage 2 process, we assessed whether the education provider and programme aligned to SET 1 requirements, the normal level of qualification for entry to the Register. In addition, we assessed the IPL strategy, how it will be reviewed and applied it to the proposed programme.

### Section 3: Programme-level assessment

#### Programmes considered through this assessment

<b>Programme name</b>	<b>Mode of study</b>	<b>Profession (including modality) / entitlement</b>	<b>Proposed learner number, and frequency</b>	<b>Proposed start date</b>
Level 6 in Paramedic Science (validated by Future (Awards & Qualifications) Ltd)	Part time	Paramedic	15 twice a year	January 2024

#### Stage 2 assessment – provider submission

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

The proposed programme is a four-year programme, spending two years part time, per level. Individuals will undertake a programme the provider describes as ‘level 4’, before applying to the proposed programme. Successful applicants will join the

programme at 'level 5' (year 1) and then progress to 'level 6' (year 2). Through this assessment, we have considered what the provider means by the levels stated.

The programme is formed of academic and placement components offered via blended learning. The programme is delivered over a 4-year period so that learners, who are unable to undertake a full-time programme, have access to training. The education provider believes this will ensure future paramedics come from a 'wider pool'. The primary audience for the programme will be individuals already working in the ambulance service and who wish to train to become a paramedic.

### **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.

Visitors reviewed the initial documentary submission and fed back the areas and reasoning to determine the first quality activity. The second review of documents was undertaken by the Executive. This resulted in a meeting with the education provider to discuss gaps in the submission and receive further information / evidence before a further visitor assessment. This was classed as the second quality activity.

#### Quality theme 1 – level of qualification for the programme to align with the requirement for entry to the Register

##### **Quality Activity 1**

Area for further exploration – the education provider intends that this programme will be delivered in line with our requirements that the level of qualification for entry to the Register for paramedics is Bachelor degree with honours. Requirements of this academic level are set out in The Framework for Higher Education Qualifications of UK Degree-Awarding Bodies published by the Quality Assurance Agency (QAA) (referred to through the remainder of this report as the QAA Framework). The QAA Framework outlines the Qualification Descriptors for a Bachelor degree with honours.

From the evidence provided by the education provider in their initial submission (assessment criteria ((learning outcomes)) and associated assessment methods), the visitors were unable to determine how the education provider considered learners could achieve the required academic level of learning for a Bachelor degree with honours as set out by the QAA Framework. As the Standards of proficiency (SOPs) are set with the level of qualification in mind, this has a direct link to learner achievement of the SOPs through the duration of the programme.

Quality activities agreed to explore theme further - we initially explored this area further by requesting documentary evidence from the education provider. We considered this would be the most effective method to understand how the programme demonstrated SET 1. We asked the education provider to submit a mapping document against the QAA Framework to demonstrate how the Bachelor

degree with honours requirements would be met and therefore the Standards of proficiency for paramedics would be delivered and assessed to the level required.

### **Quality Activity 2**

Area for further exploration – the education provider submitted a mapping against the QAA Framework. This stated that all the requirements of the QAA Framework would be met by learners through final year modules. We expect that knowledge, experience and understanding of topics would be established and built upon through the programme. We therefore asked the education provider to update the QAA Framework mapping document to show this development across the duration of the programme.

Outcomes of exploration – the education provider submitted an updated QAA Framework mapping document. This listed the assessment criteria numbers / modules and mapped to the QAA Framework descriptors. When the visitors reviewed this, and cross referenced the module descriptors, they noted the assessment criteria did not clearly show how learners would meet the descriptors from the QAA Framework. The education provider only supplied links to assessment criteria but did not provide any reasoning about how or why they considered each area from the framework was delivered by the qualification proposed.

The visitors were therefore unclear how the programme would deliver individuals with an equivalent qualification to a Bachelor degree with honours. As such, the visitors consider that the education provider does not meet the following SET at this time:

- SET 1.1 The Council normally expects that the threshold entry routes to the Register will be Bachelor degree with honours for paramedics

The visitors consider a condition linked to the above standard must be met before the programme is approved.

### Quality theme 2 – entry and selection criteria outline the academic and professional entry standards

Area for further exploration - from the Programme Specification and Programme Operations Manual, we noted an entry requirement was the achievement of a 'Level 4 Diploma in Associate Ambulance Practitioner' (or equivalent). This meant all individuals would be joining the programme at Level 5, meaning the programme would be four years (part time) in duration, rather than a six-year programme as standard for part time undergraduate degree programmes. The visitors recognised there was a learning gap between the exit of the Level 4 programme and the expected level for applicants joining the programme. They were unclear of any additional resources or support in place to assist applicants bridge the gap between the Level 4 qualification required for entry and the start of the proposed programme. We therefore sought further information on the consideration which had been given regarding the learning gap for applicants exiting the Level 4 programme and applying to the programme.

Quality activities agreed to explore theme further - we agreed to initially explore this area further by requesting email evidence from the education provider. We

considered this would be the most effective method to understand how the programme demonstrated this area.

Outcomes of exploration – the education provider outlined how all applicants, exiting the Level 4 programme, would be eligible to apply to the new programme. However, they would still need to complete an entry assessment to ensure they were prepared for the Level 5 modules. This is aimed to ensure the applicant is suitable and adequately prepared, both academically and clinically. The education provider also outlined how they intend to offer a number of open days so that applicants can gain a deeper understanding of the programme. The visitors therefore considered they had no further questions relating to this quality theme.

### Quality theme 3 – regular and ongoing collaboration between the education provider and practice placement providers

#### **Quality Activity 1**

Area for further exploration - we noted there was one yearly meeting with practice placement providers. However, we were unsure what the purpose of this meeting was. The submission also mentioned tripartite meetings between the learner, education provider and practice placement educators. The visitors understood these meetings were once the learner had commenced their practice-based learning and was to discuss progress and undertake monitoring of the site. The visitors recognised this collaboration was not at the strategic management level with practice education providers to help ensure ongoing quality and effectiveness of the programme. This type of meeting would also allow practice placement educators to influence the direction of the programme. We were unable to identify the policies / processes which the education provider will use to collaborate and communicate with practice education partners effectively and regularly on an ongoing basis.

Quality activities agreed to explore theme further - we agreed to initially explore this area further by requesting documentary evidence from the education provider. We considered this would be the most effective method to understand how the programme demonstrated this area.

#### **Quality Activity 2**

Area for further exploration – in response, the education provider outlined they had added a section to the Programme Operations Manual to explain in greater detail how practice-based education is managed. This was included in Section 5: Practice-based Education and included a process to manage the capacity of practice-based education, starting with the Practice Placement Facilitator (PPF). The first step of the process was for the PPF to arrange an initial meeting with the potential site. This did not take account of the steps / actions to communicate / liaise with potential practice placement providers, at a strategic level, before reaching this point. We therefore sought evidence about the collaboration between the education provider and practice placement providers at the strategic level.

Outcomes of exploration - in response, the education provider submitted an updated Programme Operations Manual which expanded upon the strategic decision making undertaken regarding the capacity of practice-based learning. For example, discussions about placement capacity, and other programme delivery considerations



would take place. These would occur monthly at the Resource planning meeting which is attended by members of senior management from the education provider and practice placement providers. In addition, a clear process is in place should potential issues be raised about a practice-based learning site.

The education provider demonstrated regular and effective strategic level collaboration with practice placement educators. The visitors therefore had no further questions relating to this quality theme.

#### Quality theme 4 – ensuring there is sufficient capacity of practice-based learning for the number of learners proposed

##### **Quality Activity 1**

Area for further exploration - we received two Placement Agreements signed with practice education providers in the Northeast of England. The visitors noted, under the Obligations of the Placement Provider section, they must ensure there is appropriate and sufficient staff and facilities to provide an 'educationally relevant' experience with appropriate access and supervision. Under the Obligations of Medipro section, the visitors noted they would provide information to practice education providers about their planned numbers for each practice-based learning site. This did not outline how the education provider determined the capacity of practice-based learning, including who was responsible for undertaking this process at the education provider.

Quality activities agreed to explore theme further – we agreed to initially explore this area further by requesting email / documentary evidence from the education provider. We considered this would be the most effective method to understand how the programme demonstrated meeting standards in this area.

##### **Quality Activity 2**

Executive quality activity - in response, the education provider outlined they had added a section to the Programme Operations Manual to explain in greater detail how practice-based education is managed. This was included in Section 5: Practice-based Education and included a process to manage practice-based education once sites had been identified. The first step of the process was for the PPF to arrange an initial meeting with the site. We were unclear how the PPF or wider programme team determined the overall capacity of practice-based learning for the number of learners. We therefore sought evidence, about the process in place before the PPF contacted the sites.

Outcomes of exploration - the education provider submitted an updated Programme Operations Manual which expanded upon the process to identify the capacity of practice-based learning. This starts with the programme team identifying the range, duration and learning outcomes associated with each practice-based learning opportunity before meeting with the relevant stakeholders to determine feasibility. Discussions about placement capacity, and other programme delivery considerations, take place monthly as a Resource planning meeting which is attended by members of senior management. In addition, a clear process is in place should potential issues be raised about a practice-based learning site.

The education provider demonstrated a clear process for determining the capacity of practice-based learning opportunities for the number of proposed learners on the programme. The visitors therefore considered they had no further questions relating to this quality theme.

Quality theme 5 – adequate number of appropriately qualified staff, including specialist knowledge and expertise, to deliver an effective programme

**Quality Activity 1**

Area for further exploration - the curriculum vitae's (CVs) showed the staff who could potentially be made available to deliver the programme. There was no information about who would be delivering specific parts of the programme. For example, the CV of the Managing Director was supplied as part of this, but it was not clear what role they, or others, would undertake in management, delivery, teaching or assessment. We were therefore unclear about the number of staff members available for the programme, what they will lead and teach on and therefore, whether they had the relevant expertise. In the submission, the education provider outlined they planned to increase their learner numbers in the future. However, they did not outline the timescale for this.

It was also noted that practice educators are expected to play a fundamental role in the delivery of the programme. However, it was unclear how / when they would be involved, their qualifications and experience, and how they will be quality assured.

We therefore sought further information about who would be directly involved with the teaching and delivery, and what areas they would be involved in. This included:

1. Which staff members would be leading / teaching on each module.
2. How staffing levels will be managed to demonstrate sufficient resources to support this programme.
3. The wider administration of the programme, such as practice co-ordination and quality assurance of the programme.
4. How these resources will be increased as the programme grows in learner numbers over the next few years.
5. How practice educators will be involved in the academic delivery of the programme.

Quality activities agreed to explore theme further - we agreed to initially explore this area further by requesting documentary evidence from the education provider. We considered this would be the most effective method to understand how the programme demonstrated this area.

**Quality Activity 2**

Area for further exploration - in response, the education provider included a revised programme team structure. This focussed on those who would be working on delivering the programme. In addition, the module descriptors were updated to show the named module leads. The Practice Assessment Documents (PADs) were updated to outline the role of practice educators and how they will be involved in the delivery of the programme and can be involved in its development. The visitors were therefore satisfied with the information about the wider administration of the programme (question 3 above).

However, this elicited further questions relating to areas outlined above.

- Questions 1 and 2
  - The module descriptors showed a number of the module leads were practice educators or clinical experts. It was unclear how their contribution / capacity / availability would be managed to ensure sufficient resources.
  - Modules descriptors were received indicating the involvement of individuals who were not outlined as delivering aspects of the programme. We were unsure of the role of these individuals.
- Question 4
  - The Programme Operations Manual had been updated to include the staff:student ratio (SSR). The education provider stated this had been added to ensure consistency as the programme numbers grow. However, this did not include, or define, the process to show how the education provider will resource the programme with increasing numbers. For example, how they ensure an appropriate capacity of adequately qualified and experienced staff, nor how this would be increased as learner numbers grew.
- Question 5
  - References in the Practice educators handbook, indicated the education provider would like practice educators to be involved in delivering the programme. We were unsure if this meant they had already committed to being involved or were being sought.

Outcomes of exploration - the education provider provided clarity about who would be teaching on the programme, their roles (including teaching and support) and whether they were full time employees or externally sourced individuals.

The visitors cross referenced the information about staff with the CVs submitted. In the submission of documentation, they identified thirteen CV's. From these, they noted that only two held a teaching qualification and there was a range of paramedic qualifications. These ranged from the Institute of Health Care Development (IHCD) qualification through to Masters programme in subjects outside of the paramedic field. The IHCD qualification was previously delivered by ambulance trusts and was an approved HCPC programme at a Certificate of Higher Education level. They were therefore unclear how these tutors would be able to teach / assess the learning outcomes and assessment methods to the required academic level (Bachelor degree with honours). Nor were they clear whether the individuals, due to teach specialist themes, had the appropriate subject specific knowledge and experience at the right academic level. This meant they were unclear about whether there was an adequate number of appropriately qualified and experienced staff to deliver an effective programme.

In addition, the Programme Operations Manual outlined the process for ensuring growth and contingency planning relating to staff requirements. However, as the visitors remained unclear about the qualifications and experience of the current staff members, they were unsure how the process would ensure an adequate number of, appropriately qualified and experienced staff, would be in place as the programme develops.

The visitors were therefore unclear about how the education provider met the following SETs:

- SET 3.9 – There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective practice.
- SET 3.10 – Subject areas must be delivered by educators with relevant specialist knowledge and expertise.

The visitors consider a condition linked to the above standards must be met before the programme is approved.

### Quality theme 6 – availability of resources to support learning in all settings

#### **Quality Activity 1**

Area for further exploration - the education provider directed us to the Programme Handbook regarding information about health and fitness. We were also referred to the Programme Operations Manual which included a list of the library resources and a reading list. The visitors considered the resources listed in these documents were appropriate. However, there was no clear information about the learning platform, library, systems etc, that the learners would have access to either while on site at the education provider or in practice-based learning. We therefore sought further information about the range of resources available to learners in all settings, including the virtual learning environment (VLE).

Quality activities agreed to explore theme further - we agreed to initially explore this area further by requesting email evidence from the education provider. We considered this would be the most effective method to understand how the programme demonstrated this area.

#### **Quality Activity 2**

Area for further exploration - the education provider outlined the Programme Operations Manual had been updated to include the range of journal databases available to learners. They also outlined that the VLE is an e-portfolio system called Qualls-Direct. This provides learners with access to a range of materials, including handbooks. It also allows learners to submit academic material and receive feedback.

We noted from the second page of the Programme Operations Manual this was a legal contract between the education provider and their validating body. It was therefore not a document which would be readily available to learners. As such, we consulted the Programme Handbook and were unable to identify information about the resources or VLE available to learners in all settings. We therefore remained unclear about how learners were made aware of the resources available to them.

Outcomes of exploration - the education provider outlined how learners are made aware of the resources available to them across the programme, in the Programme Handbook. The visitors reviewed the updated version submitted and were satisfied that information about appropriate resources was available, and learners will be made aware of how to access them while in the academic and practice-based

learning environments. The visitors therefore considered they had no further questions relating to this quality theme.

### Quality theme 7 – learning outcomes and assessments must ensure achievement of the standards of proficiency (SOPs) for paramedics

#### **Quality Activity 1**

Area for further exploration – The education provider supplied a SOPs mapping document in the submission. The SOPs were mapped to individual modules and specific learning outcomes. When the visitors checked the relevant modules, it became apparent these learning outcomes were framed as assessment criteria. In addition, it was apparent these were the statements from the relevant section of the College of Paramedics (CoP) curriculum guidance<sup>3</sup>. We expect education providers to outline how they meet the relevant regulatory requirements in their documentation. Through the programme documentation, the education provider needs to demonstrate how it ensures HCPC SOPs for paramedics are delivered through the programme, and how they assess that those who complete the programme meet the SOPs.

The COP curriculum guidance comprises of outcome focussed statements of what an individual should be able to demonstrate upon completion of the programme. This meant that not all statements presented by the education provider were assessment criteria. For example, C2.3.6 in the SPS5-1 Clinical Practice Application module, stated the assessment criteria was 'Emergency Ambulance'. A narrative, explaining how the environment would enable learners to develop their skills in urgent and emergency care, was included. However, this did not outline the objective of this area, or how the learner would be assessed.

In some modules, the visitors noted a large number of assessment criteria. Again using module SPS5-1 as an example, there were 24 assessment criteria mapped. This also referenced which SOPs were covered in this module. However, this listed the SOP number only and included a total of 80 SOPs. These were not linked to the individual learning outcomes.

In the SPS5-1 module, these assessment criteria were to be assessed via:

- a Level 5 final exam (three hour short essay)
- four practical Objective Structured Clinical Examinations (OCSEs)
- practice placement document
- Inter-professional learning Professional Discussion

At the end of the SPS5-1 module descriptor, there was a table containing a mapping of Assessment learning outcomes for the four assessments. These were also linked to the CoP curriculum guidance rather than the HCPC SOPs.

The examples provided above are illustrative only, the visitors considered this applied across all module descriptors.

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<sup>3</sup> [Paramedic Curriculum Guidance \(collegeofparamedics.co.uk\)](http://collegeofparamedics.co.uk)

We did not liaise directly with the CoP during this assessment. Through the submission, there were references to contact the education provider had had with the CoP. However, we were provided with no evidence to support these references.

Due to the number of assessment criteria and lack of clear information about where the SOPs would be appropriately taught and assessed, we were unclear how a learner would learn about, and demonstrate they meet, all the HCPC SOPs at the required level of proficiency.

Quality activities agreed to explore theme further - we agreed to initially explore this area further by requesting documentary evidence from the education provider. We considered this would be the most effective method to understand how the programme demonstrated this area.

## **Quality Activity 2**

Area for further exploration – the education provider submitted a mapping against the QAA Framework. This stated that all the requirements would be met in the modules of the final year. From this information, the visitors were unclear how learners would be taught or assessed against the HCPC SOPs.

It appeared there were seven modules across the programme. We were unsure about this due to the possibility of modules stretching across more than one year.

The education provider submitted module roadmaps in the Programme Operations Manual and Programme Handbook. These roadmaps did not match, and we were unclear which one was the correct version. We also recognised the Programme Operations Manual was not a learner facing document as outlined earlier in this report.

Outcomes of exploration – the visitors recognised the clarification provided said there were no modules stretching across more than one year, and that the roadmaps now matched. The visitors had no further queries about this technical aspect of programme design.

The education provider submitted revised module descriptors to identify the assessment criteria and assessment methods. They also outlined that learners would be made aware of the assessment methods through the Programme Handbook. The visitors considered the revised module descriptors and recognised there had been a reduction in the number of assessment criteria for some modules. For example, module SPS5-1 had reduced from 24 to 19 assessment criteria. However, there remained a query about how 19 assessment criteria could be taught and assessed in one module.

When comparing the revised module descriptors for SPS5-1 and SPS6-1 (Advancing Clinical Practice), they both contained the assessment criteria C1.3.24. This stated, 'Conduct a comprehensive and detailed physical examination of service users across the lifespan'. The assessment for both modules was the PAD. The module descriptors did not differentiate between the learning / assessment across the academic levels. The visitors were therefore unclear about how the learners and

practice educators would be able to easily differentiate between what they needed to do in each year.

In addition, the visitors noted the assessment criteria continued to relate to the CoP curriculum. As outlined above, this meant that assessment criteria were replicated without adapting them to the relevant academic level. This meant that some of the Level 5 assessment criteria used language normally associated with Level 6 learning outcomes. For example, when considering the taxonomy of learning levels and their associated language, the word 'demonstrate' is normally associated with Level 6. However, in Level 5 modules, (e.g. in module SPS5-1) learners are asked to 'Demonstrate capacity to safely administer therapeutic medications, including an applied understanding of pharmacology which considers relevant physiological and/or pathophysiological changes' (assessment criteria C1.1.15). The visitors were unclear how learners would be taught and assessed on this topic at Level 5.

The visitors were therefore unclear about how the education provider met the following SETs:

- SET 4.1 The learning outcomes must ensure that learners meet the standards of proficiency for the relevant part of the Register.
- SET 6.1 The assessment strategy and design must ensure that those who successfully complete the programme meet the standards of proficiency for the relevant part of the Register.
- SET 6.5 – The assessment methods used must be appropriate to, and effective, at measuring the learning outcomes.

The visitors consider a condition linked to the above standards must be met before the programme is approved.

### Quality theme 8 – centralising understanding the service user in learning and teaching, to enable delivery of the SOPs

#### **Quality Activity 1**

Area for further exploration – due to the revised SOPs becoming effective in September 2023, we asked the education provider to map their programme against these standards. One key thematic change within the revised SOPs was further centralising the service user within the standards. This included a focus on valid consent and effective communication. These SOPs were updated due to the evolving service user consent and to reflect the wider circumstances when consent is required. Within the initial submission, the education provider submitted mapping documents and module descriptors. From these, the visitors were unable to identify where the learning and assessment would take place relating to the revised central role of the service user. We therefore sought further information about how these competencies were delivered and assessed through the programme.

Quality activities agreed to explore theme further - we agreed to initially explore this area further by requesting documentary evidence from the education provider. We considered this would be the most effective method to understand how the programme demonstrated this area.

#### **Quality Activity 2**

Area for further exploration – in their response, the education provider outlined how their Patient, Carer and Public Involvement (PCPI) members are involved in delivering or supporting the modules. For example, they provide formative and summative feedback to learners. They are also involved in the annual committee meetings. The visitors recognised this explained how PCPI members are involved in the delivery of the programme. However, there was no further information about how learners would be taught / assessed against the revised SOPs in this theme.

Outcomes of exploration – in response, the education provider explained how the Assessment Briefs demonstrated how the learners are challenged relating to their patient interactions, assessments and management. The visitors reviewed the updated module descriptors and, as before, were unable to specifically identify where learners would be taught and assessed against the revised SOPs in this theme. These include the following standards around centralising the role of the service user:

SOP 2. practise within the legal and ethical boundaries of their profession

- 2.2: promote and protect the service user's interests at all times
- 2.5: respect and uphold the rights, dignity, values, and autonomy of service users, including their role in the assessment, diagnostic, treatment and/or therapeutic process
- 2.6: recognise that relationships with service users, carers and others should be based on mutual respect and trust, maintaining high standards of care in all circumstances

SOP 6. understand the importance of and maintain confidentiality

- 6.4: understand the need to ensure confidentiality is maintained in all situations in which service users rely on additional communication support (such as interpreters or translators)

SOP 7. communicate effectively

- 7.1: use effective and appropriate verbal and non-verbal skills to communicate with service users, carers, colleagues and others
- 7.4: work with service users and/or their carers to facilitate the service user's preferred role in decision-making, and provide service users and carers with the information they may need where appropriate
- 7.5: modify their own means of communication to address the individual communication needs and preferences of service users and carers, and remove any barriers to communication where possible
- 7.6: understand the need to support the communication needs of service users and carers, such as through the use of an appropriate interpreter
- 7.8: understand the need to provide service users or people acting on their behalf with the information necessary in accessible formats to enable them to make informed decisions

SOP 8. work appropriately with others

- 8.1: work in partnership with service users, carers, colleagues and others
- 8.5: identify anxiety and stress in service users, carers and colleagues, adapting their practice and providing support where appropriate



SOP 11. assure the quality of their practice

- 11.2: gather and use feedback and information, including qualitative and quantitative data, to evaluate the responses of service users to their care
- 11.5: evaluate care plans or intervention plans using recognised and appropriate outcome measures, in conjunction with the service user where possible, and revise the plans as necessary

SOP 13. Draw on appropriate knowledge and skills to inform practice

- 13.11: engage service users in research as appropriate

In addition, as outlined in [Quality Theme 7](#), the visitors remained unclear how the assessment criteria would ensure learners were taught and assessed at the relevant academic level across the programme.

As both these areas impact the assessment criteria and assessment of the enhanced service user role, the visitors were unclear about how the education provider met the following SETs:

- SET 4.1 The learning outcomes must ensure that learners meet the standards of proficiency for the relevant part of the Register.
- SET 6.1 The assessment strategy and design must ensure that those who successfully complete the programme meet the standards of proficiency for the relevant part of the Register.

The visitors consider a condition linked to the above standards must be met before the programme is approved.

Quality theme 9 – ensuring learners are able to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics

### **Quality Activity 1**

Area for further exploration - we noted the delivery and assessment of this subject matter was focussed within the dissertation module at the end of the programme. The visitors were unable to identify where this learning was delivered or assessed earlier in the programme. We also recognised that practice-based learning was occurring before the dissertation module and therefore before learners had been made aware of these subject areas. The visitors were therefore unclear how learners were able to meet expectations of professional behaviour through the programme.

We sought more information about when this subject matter is covered and assessed. Alternatively, we sought understanding as to why the education provider feels it is appropriate to focus this learning and assessment in the dissertation module.

Quality activities agreed to explore theme further - we agreed to initially explore this area further by requesting email evidence from the education provider. We considered this would be the most effective method to understand how the programme demonstrated this area.

### **Quality Activity 2**

Area for further exploration – in response, the education provider outlined how this learning was delivered across the duration of the programme. However, we were unclear from the revised module descriptors where this was outlined. We therefore remained unclear about where professional behaviour was specifically taught and assessed during the programme.

Outcomes of exploration - in response, the education provider specifically outlined how professional behaviour was taught and specifically assessed within a variety of modules across the programme. In addition to assessment via the PAD, the visitors were directed to updated module descriptors which outlined how this was assessed via an exam (module SPS5-1) and essays in the second year. They also identified how sessions would be held before each practice-based learning opportunity to ensure learners were aware of, and could demonstrate, the expectations of being a registered professional at the end of the programme. The visitors therefore considered they had no further questions relating to this quality theme.

### Quality theme 10 – how the programme remains relevant to current practice

#### **Quality Activity 1**

Area for further exploration - the mapping document outlined Annual Programme Monitoring (APM) will gather information on a regular basis. The visitors recognised this quality assurance process focussed on a review of how the programme has performed. However, they were unclear about how the education provider takes account of, and reflects, current practice. This is so the programme remains relevant and effective in preparing learners for practice. For example, how the programme reacts to, and subsequently reflects, changes in legislation, practice or services. We therefore sought more information about this process.

Quality activities agreed to explore theme further - we agreed to initially explore this area further by requesting email / documentary evidence from the education provider. We considered this would be the most effective method to understand how the programme demonstrated this area.

#### **Quality Activity 2**

Area for further exploration - the education provider outlined how the Programme Operations Manual had been updated to show when programme data would be collected and how this would feed into the APM. They outlined how this would allow the Programme Committee to consider changes to the programme. However, this did not demonstrate how the education provider works with intelligence or changes in legislation, practice or services to ensure currency of the programme.

Outcomes of exploration – the education provider outlined their wider processes and, stakeholders they work with, to ensure the programme remains relevant to current practice. For example, they clarified how data and feedback from a range of stakeholder's feeds into the APM. In addition, they outlined how members of the programme team attend NHS England Workforce, Training and Education Directorate (formally Health Education England (HEE)) workshops and work with other education providers in the region, to share best practice. This also allows them to work together around shared issues, particularly around practice-based learning. The education provider recently established a Clinical Advisory Group (CAG) to

support, and advise on, legislative changes and / or practice or service changes. The Terms of Reference were included for this newly formed group. Across the quality activities, the visitors were satisfied with how the education provider ensured the programme will remain relevant to current practice. The visitors therefore considered they had no further questions relating to this quality theme.

#### Quality theme 11 – programme delivery support evidence-based practice

##### **Quality Activity 1**

Area for further exploration - in the mapping document, the education provider outlined evidence-based practice was in both levels of the programme and that learners would build upon their knowledge through the duration of the programme. From the documentation, the visitors noted the Introduction into Evidenced based research module at the end of the first year. They also identified elements of evidence-based practice being taught and assessed in the dissertation module.

This standard of education and training is about helping learners use evidence to inform and systematically evaluate their practice as a key part of meeting the SOPs required for registration. This is specifically linked to 'SOP 11. assure the quality of their practice' (effective from 1 September 2023) and applies across the professions. As such, we sought further information about how evidence-based practice is developed to the level required for registration.

Quality activities agreed to explore theme further - we agreed to initially explore this area further by requesting documentary evidence from the education provider. We considered this would be the most effective method to understand how the programme demonstrated this area.

##### **Quality Activity 2**

Area for further exploration – the education provider submitted an updated QAA mapping document as part of their evidence to meet [Quality Theme 1](#). As part of this, the education provider identified that all the QAA framework descriptors were demonstrated in the final year of the programme. The visitors were directed to this evidence in response to the additional documentary request for this theme.

Outcomes of exploration - in response, the education provider outlined how evidence-based practice was delivered across both levels of the programme. Revised module descriptors were also received. From this, the visitors identified where evidence-based practice would be delivered and assessed throughout the programme. However, as outlined in [Quality Theme 7](#), they were unable to determine how learners would be able to develop and successfully achieve the SOPs at the level required for entry to the programme.

Without understanding how the education provider is delivering and assessing the SOPs across the programme, we were unable to determine how the programme will support and develop evidence-based practice at the appropriate academic level. As such, the visitors were unclear how the education provider met the following SET:

- SET 4.8 The delivery of the programme must support and develop evidence-based practice.

The visitors consider a condition linked to the above standard must be met before the programme is approved.

### Quality theme 12 – practice-based learning is integral to the programme.

#### **Quality Activity 1**

Area for further exploration - the mapping document clearly outlined the required practice-based learning hours for the programme. We were also referred to the Programme Operations Manual. These, and other documents, described the academic delivery of the programme but lacked detail about when practice-based learning would be delivered and how this was incorporated into the overall learning and assessment of the programme. Visitors therefore requested further information about how the education provider ensures the practice element of the programme is clearly integrated with the academic element to ensure effective delivery and assessment of the learning outcomes.

Quality activities agreed to explore theme further - we agreed to initially explore this area further by requesting documentary evidence from the education provider. We considered this would be the most effective method to understand how the programme demonstrated this area.

#### **Quality Activity 2**

Area for further exploration - the education provider updated the Programme Operations Manual to provide information about the tripartite meetings (learner, practice educator and education provider) which occur every thirteen weeks. This demonstrated to the visitors how the practice-based learning opportunity was monitored. The purpose of this standard is to demonstrate how practice-based learning is used effectively, in association with the academic context, to prepare learners for future practice.

In addition, the education provider outlined that the PADs had been updated to provide information to learners and practice educators about what each practice-based learning site involved.

Outcomes of exploration - the education provider submitted updated module documentation and PADs which provided greater clarity about the requirements relating to the academic content and how practice-based learning would be incorporated into this. Based on this, the visitors were confident that practice-based learning was integral to the programme. The visitors therefore considered they had no further questions relating to this quality theme.

### Quality theme 13 – structure, duration and range of practice-based learning supporting delivery of the learning outcomes

#### **Quality Activity 1**

Area for further exploration - as outlined in [Quality theme 7](#), we noted the large number of assessment criteria (learning outcomes) for some modules on the programme. This applied to academic and practice-based learning modules. In addition, as outlined in [Quality theme 12](#), we noted we were unsure how academic learning and practice-based learning were integrated.

In terms of the structure, duration and range, we were unable to identify where the learning outcomes were outlined for learners or practice educators within practice-based learning materials. We were therefore unsure how the groups would know what learning outcomes they needed to demonstrate / assess in each area. We therefore sought further information for practice educators and learners, which identified the relationship between academic and clinical elements of the programme. This was so we could understand how the structure, duration and range of practice-based learning supports the learning outcomes and achievement of the SOPs.

Quality activities agreed to explore theme further - we agreed to initially explore this area further by requesting email / documentary evidence from the education provider. We considered this would be the most effective method to understand how the programme demonstrated this area.

### **Quality Activity 2**

Area for further exploration - the education provider outlined how each module descriptor states the assessment criteria, which are linked to the practice-based learning area. The education provider went on to outline how these are linked to the assessment criteria in each PAD. The PADs also outlined how learners should 'navigate' their practice-based learning. This helps learners and practice educators understand the purpose and expectations of each site.

The visitors noted the roadmap in the Programme Operations Manual. On page 11, the roadmap showed the delivery of module and practice-based learning across the programme. This indicates that teaching in the first year of the programme is one week and two weeks of practice-based learning in January and February. This amounted to three weeks of learning across the two months. We were unsure whether learners were employees of the local NHS Trusts. We sought clarification about this to better understand the timings, and any possible restrictions on the roadmap.

**Outcomes of exploration:** The education provider outlined they had updated the roadmap to provide learners and practice educators with further information. They also confirmed that learners would not be employees and therefore there were no associated restrictions on meeting the roadmap timings. The visitors noted the intention of the roadmap was to illustrate teaching and practice-based learning could be across January and February. The visitors therefore understood the academic learning point was fixed and then learners could undertake the practice-based learning at any point during these two months. The education provider confirmed the specified element of practice-based learning must be completed within this timeframe. This would mean that all learners would start the next teaching block with the same knowledge and understanding. The visitors therefore considered they had no further questions relating to this quality theme.

Quality theme 14 – adequate number of appropriately qualified and experienced staff in practice-based learning including relevant skills and knowledge

### **Quality Activity 1**

Area for further exploration - we noted the Clinical Practice placement Audit Tool and the Placement agreement stated there must be enough practice educators to support the learners. The Programme Handbook included the contact details for the education provider Practice Placement Facilitator. However, we were unable to identify how the education provider ensured an adequate number of appropriately qualified and experienced practice educators. This included the qualifications / experience expected by the education provider and how practice educators are selected, supported and updated at appropriate times.

As outlined earlier in [Quality Theme 5](#), the visitors were unclear how practice educators would be involved in the programme. For example, in the delivery of the academic element of the programme and who would be responsible for signing off competences. From the Programme Handbook, the visitors noted that all practice educators 'are professional clinicians and qualified within their role as a practice educator'. The visitors were unclear whether this meant only paramedics or other registered professionals. Therefore, they were unclear what the education provider requirements were for practice educators around their knowledge, skills and experience to ensure they were appropriate as practice educators for the programme. The visitors sought information about this to help determine whether the qualifications / experience expected of the practice educators, were appropriate.

Quality activities agreed to explore theme further - we agreed to initially explore this area further by requesting documentary evidence from the education provider. We considered this would be the most effective method to understand how the programme demonstrated this area.

## **Quality Activity 2**

Area for further exploration - the education provider outlined how the Programme Operations Manual and / or the PADs had been updated to:

- Outline what the education provider expects from practice educators.
- Outline how the education provider inducts practice educators to prepare for learners.
- Include a section about who can sign off competences.

From these documents, we remained unclear about the process in place to determine there was an adequate number of appropriately qualified practice educators or other professionals to sign off the competences. Further questions were raised, as follows:

- How the education provider was planning on developing the practice educator workforce.
- Inductions were mentioned for the practice educators. As we remained unclear who could sign the competences, we were unsure who the inductions would be for and whether this was generic / programme / Tier (level) specific training.
- From the PAD, we identified that the competences for both levels could be signed off by any professional. We remained unclear about the qualifications / experience required of practice educators.

Outcomes of exploration – the education provider outlined how they had a 'number of strategies' to support these areas. These were outlined in a range of

documentation, such as the Programme Handbook, PAD and Practice Educator Handbook. In addition, the Programme Operations Manual outlined how the education provider would induct practice educators. The education provider went on to outline the range of support and meetings they use to monitor the performance of, and support to, the learner and practice educator. For example, the four monthly tripartite meetings. The education provider also confirmed they had removed the system relating to the Tier system in their approach to competency sign off.

The visitors noted these documents were available to stakeholders once on the programme or already signed up as a practice educator. They also outlined the process once a learner had started the practice-based learning site. As such it did not address the process for ensuring an adequate number of appropriately qualified and experienced practice educators prior to learners attending practice-based learning.

The visitors noted the removal of the Tier system regarding assessment in practice-based learning. However, there was continued reference to other professionals being able to sign off competences in the PAD. They therefore remained unclear about who could supervise and / or sign off the competences, for example, in terms of qualifications and experience.

The visitors were therefore unclear about how the education provider met the following SETs:

- SET 5.5 – There must be an adequate number of appropriately qualified and experienced staff involved in practice-based learning.
- SET 5.6 – Practice educators must have relevant knowledge, skills and experience to support safe and effective learning and, unless other arrangements are appropriate, must be on the relevant part of the Register.

The visitors consider a condition linked to the above standards must be met before the programme is approved.

## 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 recommend that the following conditions are met before the programme can be approved.

## 1.1 The Council normally expects that the threshold entry routes to the Register will be bachelor degree with honours for paramedics

**Condition:** The education provider must demonstrate how the proposed programme meets the academic qualification level for a Bachelor degree with honours, as set out in section 4.5 of the QAA Frameworks for Higher Education Qualifications of UK Degree-Awarding Bodies<sup>4</sup>.

**Reason:** Through [Quality Theme 1](#), we explored how the education provider considered the proposed programme was delivered at the level of qualification as required by our standards (Bachelor degree with honours for paramedics). Descriptors for this level are set out in the QAA Framework. We identified concerns with the education provider's approach which are summarised below:

- The education provider linked descriptors from the QAA Framework to assessment criteria within modules. These assessment criteria are outcome focused, and nowhere in the education provider's submission was the learning an individual would need to undertake in order to meet each criterion adequately or clearly described.
- The mapping appeared to be a technical exercise, rather than critical reflection of how the programme delivers high-level and at times philosophical descriptors. This was demonstrated by the education provider not giving any rationale as to why or how descriptors would be met by learners through and on completion of the programme.
- Even if the above two points are ignored, descriptors were only partially covered by the assessment criteria mapped.

The below is provided as an example of how the education provider mapped their assessment criteria to the QAA descriptors. The education provider noted the module and assessment criteria numbers only in the mapping. For clarity, this has been expanded upon in this report.

QAA framework descriptor	Indicated module / assessment criteria
Critically evaluate arguments, assumptions, abstract concepts and data (that may be incomplete), to	Module SPS6-2 – Health Care Systems and organisational Structures <ul style="list-style-type: none"><li>• C1.5.4 Develop a contextual understanding of the role of the paramedic in health education and promotion working in the spirit of a multi professional approach.</li></ul>

<sup>4</sup> [The Frameworks for Higher Education Qualifications of UK Degree-Awarding Bodies \(qaa.ac.uk\)](http://www.qaa.ac.uk)



<p>make judgements, and to frame appropriate questions to achieve a solution – or identify a range of solutions – to a problem</p>	<p>Module SPS6-3 – Ethics and Professional Standards For the developing Health care Professional</p> <ul style="list-style-type: none"> <li>• C1.4.9 Evaluate ethical issues associated with paramedic practice and apply ethical principles to practice.</li> <li>• C[1].8.11 Demonstrate a critical and contextual understanding of the ethical frameworks surrounding health research</li> <li>• C1.8.8 Understand how a research question or hypothesis is formulated.</li> </ul>
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Using the above as an illustrative example of the concern, nowhere in the assessment criteria listed is the learner required to demonstrate critical evaluation. They are expected to ‘evaluate ethical issues associated with paramedic practice’. This is a specific outcome linked to ethical issues that learners would need to demonstrate, but its inclusion does not show how learners would be able to think critically regardless of the situation. In their evidence, the education provider did not explain how the ‘evaluation’ in this specific context would enable a learner to meet the QAA Framework descriptors.

Continuing with this example, individuals who gain a qualification equivalent to a Bachelor degree with honours need to be able to undertake critical evaluation to be able to meet the descriptor at this level. For clarity, this is an example of the gap in the education provider’s evidence and reasoning. Visitors had concerns across all the QAA Framework descriptors as the education provider had not reasoned through how each would be demonstrated by learners through, or on completion of, the programme.

The visitors considered a fundamental issue remained that the education provider was unable to demonstrate how the programme aligns with QAA Framework descriptors for a Bachelor degree (with honours).

This links to concerns identified in quality themes [5](#), [7](#), [8](#), [11](#), and [14](#) that the visitors were unable to identify how, across the programme, the learning outcomes and assessments would be taught and measured at the appropriate academic levels, to ensure learners can meet the SOPs for paramedics.

The visitors therefore require the education provider to demonstrate how the programme will be delivered at or equivalent to the academic level required for entry to the Register (Bachelor degree with honours) as defined in the QAA Framework.

**3.9 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective practice.**

**3.10 Subject areas must be delivered by educators with relevant specialist knowledge and expertise.**

**Condition:** The education provider must demonstrate how they ensure there is an adequate number of appropriately qualified and experienced staff to deliver and assess learning outcomes at a Bachelor degree with honours level.

**Reason:** As explored through [Quality Theme 5](#), the education provider provided information about who would be teaching on the programme, their roles (including teaching and support) and whether they were full time employees or externally sourced individuals. Alongside this, the Programme Operations Manual outlined the process for ensuring growth and contingency planning relating to staff requirements.

The visitors cross referenced the information about staff with the CVs submitted. From the thirteen CV's, they noted only two held a teaching qualification and there was a range of paramedic qualifications. These ranged from the IHCD qualification through to Masters programme in subjects outside of the paramedic field. They were therefore unclear how these tutors would be able to teach / assess the assessment criteria to the required academic level (Bachelor degree with honours). Nor were the visitors clear whether the individuals, due to teach specialist themes, had the appropriate subject specific knowledge and experience at the right academic level.

In addition, the Programme Operations Manual outlined the process for ensuring growth and contingency planning relating to staff requirements. However, the visitors remained unclear about the qualifications and experience of the current staff members. The visitors were therefore unsure how the process would ensure an adequate number of, appropriately qualified and experienced staff, would be in place as the programme develops.

The visitors therefore require that the education provider demonstrates how they ensure an adequate number of staff / educators who are appropriately qualified and experienced to deliver and assess a programme equivalent to a Bachelor degree with honours.

#### **4.1 The learning outcomes must ensure that learners meet the standards of proficiency for the relevant part of the Register.**

#### **6.1 The assessment strategy and design must ensure that those who successfully complete the programme meet the standards of proficiency for the relevant part of the Register.**

#### **6.5 The assessment methods used must be appropriate to, and effective, at measuring the learning outcomes.**

**Condition:** The education provider must demonstrate that the learning outcomes are appropriately set, and assessed, to enable learners to achieve the SOPs for paramedics.

**Reason:** Through [Quality Theme 7](#) and [Quality Theme 8](#), we explored how the education provider intended to deliver and assess the revised SOPs for paramedics. We identified concerns with the education provider's approach which are summarised below:

- They had used the College of Paramedics (COP) curriculum framework to define what learners would learn and be assessed against. This did not enable understanding of how the HCPC SOPs would be delivered and assessed through the programme.
- There was lack of clarity about how learner knowledge and understanding would be developed through the programme, with the education provider appearing to consider learning as a set of skills to be delivered, rather than knowledge to be developed over time by a future autonomous professional.
- Linked to the above point, the assessment criteria were not specific to the academic level of relevant modules, which would make it difficult for those undertaking the programme and assessing competence to understand what needs to be achieved.
- The number of assessment criteria was high for some modules, meaning (similarly to the above) that it would be difficult for those undertaking the programme and assessing competence to understand what needs to be achieved.
- As per [Quality Theme 8](#), it was not clear where learners would develop, and be assessed on, the centralised understanding of the service user to enable achievement of the SOPs.

This condition links to SET 1, as the academic level of the programme is relevant to the delivery of the SOPs to the required level of competence. Where this should be considered in the education provider's response, they should consider and respond to this condition separately as there are different and more technical issues with their approach in this area. By this, we mean that we are unclear how the programme delivers and assesses the SOPs for paramedics through the programme. The required level of detail specific to what the education provider intends to teach and assess, and how that links to the SOPs, has not been provided.

The visitors therefore require the education provider demonstrates how the programme will deliver all the SOPs for paramedics, and how learners will be assessed to ensure all SOPs for paramedics are met through, and on completion of, the programme. This should include clear descriptors of learning, assessment methods, and how these link to the SOPs for paramedics, and updated documentation which supports learners and staff to ensure this is the case.

#### **4.8 The delivery of the programme must support and develop evidence-based practice.**

**Condition:** The education provider must demonstrate that evidence-based practice is delivered and assessed at the academic level required to deliver the standards of proficiency (SOPs) for paramedics.

**Reason:** Through [Quality Theme 11](#), we explored how evidence-based practice was delivered across both years of the programme. We identified where the education provider intended that evidence-based practice would be delivered and assessed throughout the programme. However, linking to the issues remaining as referred to in the conditions for SET 1.1, 4.1, 6.1 and 6.5, we were not clear how learners would be able to develop and successfully achieve the SOPs at the level required for entry

to the Register. Registrants must ensure their practice is evidence-based, as required through SOP 11 which requires that registrants 'assure the quality of their practice'.

As such, the visitors require the education provider to demonstrate how the programme supports the development of evidence-based practice to deliver learners who meet requirements for registration.

**5.5 There must be an adequate number of appropriately qualified and experienced staff involved in practice-based learning.**

**5.6 Practice educators must have relevant knowledge, skills and experience to support safe and effective learning and, unless other arrangements are appropriate, must be on the relevant part of the Register.**

**Condition:** The education provider must demonstrate how they ensure there is an adequate number of appropriately qualified and experienced staff to deliver and assess learning outcomes in practice-based learning.

**Reason:** Through [Quality Theme 14](#), we explored staffing arrangement for practice-based learning. We identified concerns with the education provider's approach which are summarised below:

- The education provider has not defined what they consider as the 'relevant' knowledge, skills and experience that practice educators must have to support learners in practice, whether these individuals must be paramedics, or whether other professionals / roles can act as practice educators.
- There is not a clear mechanism to ensure individual practice educators, or groups of practice educators, within practice learning environments meet the knowledge, skills and experience required (once this is set out by the education provider).
- Some information (e.g. the Programme Handbook) about practice-based learning expectations is set out too late to stakeholders to have the intended impact.

As such, the visitors require the education provider to demonstrate how they ensure an adequate number of appropriately qualified individuals are in place as practice educators; and who is able to sign off the competences in the practice assessment document (PAD).

## Section 5: 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 the programme should be approved subject to the conditions being met.

Appendix 1 – list of open programmes at this institution

<b>Name</b>	<b>Mode of study</b>	<b>Profession</b>	<b>Modality</b>	<b>Annotation</b>	<b>First intake date</b>	<b>Last graduation</b>
Medipro level 6 Paramedic Practice	FT (Full time)	Paramedic			01/03/2019	01/08/2024