
Approval process report

Canterbury Christ Church University, Occupational Therapy / Physiotherapy, 2023-24

Executive Summary

This is a report of the ongoing process to approve MSc occupational therapy and physiotherapy programmes at Canterbury Christ Church University. This report captures the process we have undertaken to assess the institution and programmes against our standards, to ensure those who complete the proposed programmes are fit to practice.

We have

- Reviewed the institution against our institution level standards and found our standards are met in this area.
- Reviewed the programmes against our programme level standards and found our standards are met in this area following exploration of key themes through quality activities.
- Recommended all standards are met, and that the programmes should be approved.

Through this assessment, we have noted:

- The areas we explored focused on:
 - Quality activity 1: the education provider explained how practice education providers had been involved with the development of the programmes and described the processes in place to ensure ongoing collaboration.
 - Quality activity 2: we were assured that there were a sufficient number of appropriately qualified and experienced staff to support delivery of the proposed programmes for the anticipated learner numbers.
 - Quality activity 3: the education provider explained the mechanisms they had in place to ensure staff had the appropriate specialist knowledge and experience required to deliver the specialist areas of the proposed programmes.
 - Quality activity 4: we were assured the education provider had appropriate oversight of practice-based learning to ensure learners had access to a range of practice-based learning opportunities to demonstrate the relevant learning outcomes.
- The programmes meet all the relevant HCPC education standards and therefore should be approved.

[Previous
consideration](#)

Not applicable. This approval was not referred from another process.

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

- whether the programmes are approved

Next steps Outline next steps / future case work with the provider:

- The provider is currently engaged with the performance review process and visitors have confirmed a three year monitoring period. The education provider will therefore engage with the performance review process again in 2027-28.

Included within this report

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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 programmes detailed in this report meet our education standards. The report details the process itself, evidence considered, outcomes and recommendations made regarding the programmes 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:

| | |
|------------------|--------------------------------------|
| Jo Jackson | Lead visitor, Physiotherapist |
| Rebecca Khanna | Lead visitor, Occupational therapist |
| Saranjit Binning | Education Quality Officer |

Section 2: Institution-level assessment

The education provider context

The education provider currently delivers 12 HCPC-approved programmes across seven professions. It is a Higher Education Institution and has been running HCPC approved programmes since 1998. This includes two post-registration programmes for independent prescribing and supplementary prescribing annotations.

The education provider engaged with the performance review process within our quality assurance model in 2021. We were satisfied that there was sufficient evidence that the standards continued to be met, and the Education and Training Committee agreed the programmes remain approved in January 2023. The recommendation was made as data and intelligence indicated that the education provider was performing well across many areas. Despite that, we were concerned about the NSS scores which had been highlighted. We noted that the education provider had implemented plans to address the issues related to this area, so a three-review period was appropriate. Based on all information presented to them, the Committee decided that the education provider's next engagement with the performance review process should be in the 2024-25 academic year.

The education provider engaged with the approval review process with our quality assurance in 2022 for a proposed MSc Speech and Language Therapy, Full time programme. We were satisfied that there was sufficient evidence to demonstrate that our standards were met, and that the programme was approved by the Education and Training Committee in August 2023.

The education provider engaged with the programme closure process in the 2023-24 academic year to close the BSc (Hons) Speech and Language Therapy, Full time programme.

Practice areas delivered by the education provider

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

| | Practice area | Delivery level | | Approved since |
|-------------------------|-----------------------------------|---|--|----------------|
| Pre-registration | Occupational therapy | <input checked="" type="checkbox"/> Undergraduate | <input type="checkbox"/> Postgraduate | 2019 |
| | Operating Department Practitioner | <input checked="" type="checkbox"/> Undergraduate | <input type="checkbox"/> Postgraduate | 2002 |
| | Paramedic | <input checked="" type="checkbox"/> Undergraduate | <input type="checkbox"/> Postgraduate | 2011 |
| | Physiotherapist | <input checked="" type="checkbox"/> Undergraduate | <input type="checkbox"/> Postgraduate | 2018 |
| | Practitioner psychologist | <input type="checkbox"/> Undergraduate | <input checked="" type="checkbox"/> Postgraduate | 1998 |
| | Radiographer | <input checked="" type="checkbox"/> Undergraduate | <input type="checkbox"/> Postgraduate | 2000 |
| | Speech and language therapist | <input checked="" type="checkbox"/> Undergraduate | <input checked="" type="checkbox"/> Postgraduate | 2007 |

| | | |
|--------------------------|---|------|
| Post-registration | Independent Prescribing / Supplementary prescribing | 2019 |
|--------------------------|---|------|

Institution performance data

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

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

| Data Point | Bench-mark | Value | Date | Commentary |
|--|------------|-------|---------|--|
| Total intended learner numbers compared to total enrolment numbers | 1094 | 1179 | 2024 | The benchmark figure is data we have captured from previous interactions with the education provider, such as through initial programme approval, and / or through previous performance review assessments. Resources available for the benchmark number of learners was assessed and accepted through these processes. The value figure is the benchmark figure, plus the number of learners the provider is proposing through the new provision. |
| Learners – Aggregation of percentage not continuing | 3% | 3% | 2020-21 | <p>This data was sourced from a data delivery. This means the data is a bespoke Higher Education Statistics Agency (HESA) data return, filtered bases on HCPC-related subjects.</p> <p>The data point is equal to the benchmark, which suggests the provider's performance in this area is in line with sector norms.</p> |

| | | | | |
|---|-----|--------|---------|--|
| | | | | <p>When compared to the previous year's data point, the education provider's performance has been maintained.</p> <p>We did not explore this data point through this assessment because there was no impact on SETs considered.</p> |
| Graduates – Aggregation of percentage in employment / further study | 93% | 92% | 2020-21 | <p>This data was sourced from a data delivery. This means the data is a bespoke HESA data return, filtered bases on HCPC-related subjects.</p> <p>The data point is below the benchmark, which suggests the provider is performing below sector norms.</p> <p>When compared to the previous year's data point, the education provider's performance has dropped by 1%.</p> <p>We did not explore this data point through this assessment because there was no impact on SETs considered.</p> |
| Teaching Excellence Framework (TEF) award | N/A | Silver | 2023 | <p>The definition of a Silver TEF award is "Provision is of high quality, and significantly and consistently exceeds the baseline quality threshold expected of UK Higher Education."</p> <p>We did not explore this data point through this assessment because there</p> |

| | | | | |
|--|-------|---------|---------|--|
| | | | | was no impact on SETs considered. |
| National Student Survey (NSS) positivity score | 79.5% | 72.8% | 2024 | <p>This data was sourced at the subject level. This means the data is for HCPC-related subjects</p> <p>The data point is below the benchmark, which suggests the provider is performing below sector norms</p> <p>When compared to the previous year's data point, the education provider's performance has improved by 9%</p> <p>We did not explore this data point through this assessment because there was no impact on SETs considered.</p> |
| HCPC performance review cycle length | N/A | 2024-25 | 3 years | The education provider is currently engaged with the performance review process. |

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 the admissions process is available on the education provider's website on the Study Here webpages for applicants. This includes undergraduate entry requirements and process, while Postgraduate entry requirements are specified on the individual programmes.
- There is also an online portal where information relating to start dates, timetables and induction can be found. This information is sent as a link to applicants when they are accepted on the programme.
- All admissions requirements are reviewed at school and course level annually as part of the Periodic Review process and any updates are applied at the start of each admissions cycle.
- These processes and requirements will apply to applicants for the proposed programmes, which aligns with the institution wide policies and procedures.
- **Assessing English language, character, and health –**
 - The education provider has policies in place for this area and these are detailed on their website in relation to programme entry requirements.
 - The Admissions policy states the requirement for applicants to complete the relevant health and Disclosure and Barring Service (DBS) checks. The policy is adjusted to accommodate any profession specific requirements.
 - All applicants are required to demonstrate at least level 2 in English and Maths as part of the admissions criteria.
 - These processes and requirements will apply to applicants for the proposed programmes, which aligns with the institution wide policies and procedures.
- **Prior learning and experience (AP(E)L) –**
 - The education provider has processes in place to assess applicants' prior learning and experience and details of this are outlined in the Regulations for Taught Awards document. All applications for prior learning and experience for entry onto HCPC approved programmes must comply with this.
 - All applications for recognition of prior learning are reviewed and approved by the Faculty Quality Sub-Committee.
 - These processes and requirements will apply to applicants for the proposed programmes, which aligns with the institution wide policies and procedures.
- **Equality, diversity and inclusion –**
 - The education provider is involved with a range of initiatives relating to equality, diversity and inclusion. These initiatives include the Race Equality Charter, Athena Swan and Stonewall membership.
 - The University Strategic Framework – Vision 2030 outlines the education provider's aims and objectives to work towards a more inclusive environment. There is a particular focus on widening participation and working and supporting learners from under-

represented backgrounds. To support this area further, they also have an Access and Participation Plan.

- There are several policies which aims to support and encourage a diverse and equal learning environment. These policies include the Equality, Diversity and Inclusion policy, University Equity and Inclusion Strategy 2024-27, Anti-bullying and Harassment Policy and Dyslexia Support.
- These processes and requirements will apply to applicants for the proposed programmes, which aligns with the institution wide policies and procedures.

Non-alignment requiring further assessment: None.

Management and governance

Findings on alignment with existing provision:

- **Ability to deliver provision to expected threshold level of entry to the Register¹ –**
 - The processes and procedures outlined in the Regulation for Taught Awards document support the delivery of the provision to the expected threshold level of entry to the Register. This includes the involvement of External Examiners with all assessment processes.
 - These processes and requirements will apply to applicants for the proposed programmes, which aligns with the institution wide policies and procedures.
- **Sustainability of provision –**
 - All proposals to expand provision are considered by the Faculties' Programme Planning Executive (FPPE) to ensure programmes are sustainable and fit for purpose.
 - Programmes are developed in line with the requirements of the Vision 2030 and University Learning and Teaching and Assessment Strategy. To support this, the University Learning and Teaching Enhancement Unit developed guidance to assist programme teams with designing programmes.
 - These processes and requirements will apply to applicants for the proposed programmes, which aligns with the institution wide policies and procedures.
- **Effective programme delivery –**
 - The Quality Manual outlines the process for course proposals and approvals. The process ensures programmes are effectively supported and managed by appropriately qualified and experienced individuals.
 - There is a requirement for all staff to be registered with the HCPC and the Faculty and School Directors are responsible for monitoring the currency of staff registration. Human Resources and Organisational Development produce a monthly report for this purpose.

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

- They use formative and summative assessments and offer a range of opportunities, which allow learners to demonstrate their knowledge and skills. Some of the opportunities provided include peer feedback, small group discussions and presentations. The variety of assessment methods also supports learners who have varying capabilities.
- These processes and requirements will apply to applicants for the proposed programmes, which aligns with the institution wide policies and procedures.
- **Effective staff management and development –**
 - There are staff management and development processes in place, which are outlined in the University Staff Development Policy. All teaching staff are required to have a teaching qualification or are required to complete the PGCert in Academic Practice. In addition to these, all line managers are required to complete mandatory courses, such as Positive Performance Conversations.
 - Policies and procedures for professional development and annual appraisal are outlined in the University Staff Development Policy. This is further supported by the University Statutory and Requirement Training matrix, which outlines the mandatory training staff are required to undertake.
 - The education provider reported they are committed to supporting all new members of staff with a full induction. This includes Staff Orientation and Welcome event, an online induction module and online e-learning courses.
 - These processes and requirements will apply to applicants for the proposed programmes, which aligns with the institution wide policies and procedures.
- **Partnerships, which are managed at the institution level –**
 - The education provider has collaborative partnerships in place, which are managed by the Academic Strategy Committee. These partnerships are governed by the procedures outlined in the University Quality Manual: Collaborative Partnerships. The purpose of the procedures is to assess any risks attached to a partnership and also provide a process for managing and terminating any partnerships.
 - The education provider stated that in order to ensure effective collaborations with partnership organisations, there are various contracts and agreements in place, such as Service Level Agreements, NHS England National NHS Contract and Placement Agreements.
 - These processes and requirements will apply to applicants for the proposed programmes, which aligns with the institution wide policies and procedures.

Non-alignment requiring further assessment: None.

Quality, monitoring, and evaluation

Findings on alignment with existing provision:

- **Academic quality –**
 - The policies and procedures for quality, monitoring and enhancement are outlined in the Quality Manual, which includes Boards of Study and Continuous Improvement. In addition to this, it also provides information about course planning, approval and modifications. These policies ensure the continuous improvement of programmes.
 - All programme approvals are reviewed by the Faculty approval panel before being submitted to an independent University level panel for final approval. The purpose of this process is to provide independent scrutiny of the documentation and involve the senior management team within the Faculty. To maintain quality, the Continuous Improvement process applies to all approved programmes. This ensures all feedback received is considered and improvements are made where necessary.
 - External examiners are involved with all programmes at all levels and provide input into all aspects of the assessments including the practice elements. Their input ensures fair and transparent decisions are made in relation to awards and progression.
 - The education provider requires all programmes to complete Course Performance Plans (CPPs). These plans enable the programme teams to gather evidence and make improvements but most importantly they enable them to monitor the overall performance of the programmes. If these plans do not meet the required benchmarks they are submitted and reviewed by the University Portfolio Performance Committee (UPPC), which is chaired by the Deputy Vice Chancellor for further scrutiny.
 - These processes and requirements will apply to applicants for the proposed programmes, which aligns with the institution wide policies and procedures.
- **Practice quality, including the establishment of safe and supporting practice learning environments –**
 - The Quality Manual outlines the quality assurance processes for practice-based learning. These processes are set at institution level and overseen by the Faculty Work-based, Placement and Practice Learning Sub-Committee.
 - The education provider uses the Pan London Practice Learning Environment audit tool to evaluate practice areas and encourages all learners and staff to engage with this system. This tool enables them to evaluate and monitor the quality of placements and take appropriate action where required.
 - There are several policies and procedures to ensure practice quality and a safe and supportive practice learning environment. Some of these include the Education Audit, Faculty Practice Learning Risk Register, Placement Capacity Mapping process and the Faculty of Medicine, Health and Social Care Placement Strategy. In addition to

this the Practice Learning Unit oversees all processes relating to practice learning, including quality assurance and communication with learners.

- These processes and requirements will apply to applicants for the proposed programmes, which aligns with the institution wide policies and procedures.
- **Learner involvement –**
 - The education provider expects learners to be involved, and have input into the learning experience, which is outlined in the Quality Manual and the student partnership agreement. They work closely with the Student Union and have produced a Course Rep Guide for learners, to encourage them to get involved with committees and meetings.
 - There are various policies to support this area, such as the Student Engagement in Learning Policy. Other policies include module and student placement evaluations, placement debriefs and the Peer observation and review guide for staff.
 - The Student Survey Unit is responsible for gathering data in relation to learner experience and destinations. The Unit therefore plays a key role in the coordination of several surveys, which includes the Postgraduate Taught Experience Survey (PTES), Postgraduate Research Experience Survey (PRES), UK Engagement Survey (UKES) and National Student Survey (NSS).
 - These processes and requirements will apply to applicants for the proposed programmes, which aligns with the institution wide policies and procedures.
- **Service user and carer involvement –**
 - There is a Service User and Carer Sub-Committee who oversee and coordinate service user and carer involvement within the Faculty of Medicine, Health and Social Care.
 - The Faculty Service User Partnership Strategy outlines how service users and carers should be involved with programmes, e.g., curriculum design, development, recruitment and teaching. All service user and carer involvement is audited, which enables the education provider to ensure they are maximizing service user and carer involvement across the programmes and increasing involvement where required.
 - This level of service user involvement will apply to the proposed programmes.

Non-alignment requiring further assessment: None.

Learners

Findings on alignment with existing provision:

- **Support –**
 - Learners are offered a range of services to support their wellbeing and learning needs. Some of this support is accessible via the online

student portal, such as timetables, teaching materials and the Virtual Learning Environment (VLE). Other communication channels used to provide learners with information relating to their programmes include email, student handbooks and 'My Essential Guide' booklet. In addition to this, the Practice Learning Unit (PLU) provides learners with vital support in relation to their placements. This includes information on webpages, programme specific practice learning handbooks and material and providing them with placement related updates.

- All learners are allocated a Personal Academic Tutor to provide them with pastoral and academic support. This includes referral to specific support services, such as the Student Support, Health and Wellbeing Department and Disability Services. Other support includes the Mental Health and Wellbeing framework, which ensures learners have access to mental health resources such as drop-in sessions and an online service that is available 24 hours a day 7 days a week.
- These processes and requirements will apply to applicants for the proposed programmes, which aligns with the institution wide policies and procedures.
- **Ongoing suitability –**
 - The Faculty of Medicine, Health and Social Care PSRB Course policy applies to all learners and requires them to complete criminal conviction and health clearance checks. These checks take place at the admissions stage and thereafter learners are required to complete ongoing declaration of suitability at the start of each year.
 - Suitability concerns are considered through the Student Fitness to Practise Policy (SFTP). Concerns considered through this process include learner's health and conduct.
 - These processes and requirements will apply to applicants for the proposed programmes, which aligns with the institution wide policies and procedures.
- **Learning with and from other learners and professionals (IPL/E) –**
 - All programmes must offer inter professional learning opportunities to learners in accordance with the Faculty of Medicine, Health and Social Care PSRB Course policy. To ensure these opportunities are available to all learners, interprofessional education is embedded into the design of the programmes.
 - Learners are also provided with opportunities to complete short placements in multidisciplinary teams. In addition to this the simulation facilities are also multidisciplinary and encourage learners to work with each other across different disciplines.
 - These processes and requirements will apply to applicants for the proposed programmes, which aligns with the institution wide policies and procedures.
- **Equality, diversity and inclusion –**
 - The education provider are committed to providing learners with an inclusive learning environment and supporting access to higher

education through widening participation. There are a range of policies in place to support this area, such as the Equity and Inclusion Strategy. This ensures individuals with protected characteristics have input into the processes that will affect them. Other policies include University Learning Teaching and Assessment Strategy 2023 to 2030, the Access and Participation Plan and the Closing Our Gap campaign supports the work the education provider are undertaking to reduce the attainment gap.

- The Learning Support Plan process identifies the support learners require and enables the education provider to make the relevant reasonable adjustments to support them with their learning. There is specific support available for learners who have dyslexia and other learning needs. This demonstrates there is a clear commitment to supporting learners with diverse needs.
- These processes and requirements will apply to applicants for the proposed programmes, which aligns with the institution wide policies and procedures.

Non-alignment requiring further assessment: None.

Assessment

Findings on alignment with existing provision:

- **Objectivity –**
 - The education providers assessment procedures, such as the marking procedure, feedback of assessed work process and the second marking and moderation process are applied to all assessments. This ensures consistency and transparency across all programmes.
 - To support learners with additional needs or exceptional circumstances the exceptional circumstances procedures can be applied. This ensure fairness with the assessment process and accommodates learners who have additional learning needs.
 - External Examiners are involved with all elements of assessments and provide independent input into the assessments to ensure quality and academic standards are maintained.
 - These processes and requirements will apply to applicants for the proposed programmes, which aligns with the institution wide policies and procedures.
- **Progression and achievement –**
 - The Module Award Boards and The Institutional Progression and Award Boards confirm progression and awards. Both Boards comply with the education provider's academic regulations but operate at different levels. The Module Award Boards confirm learner achievement in the individual modules and the Institutional Progression and Awards Boards are responsible for making progression and award decisions for learners. Both Boards have two separate external

examiners who they consult with continuously to ensure academic standards are maintained.

- The academic regulations are outlined in the Regulation and Credit Framework. The education provider recognises some regulations may have to be adjusted for specific programmes to ensure Professional, Statutory and Regulatory Bodies (PSRB) requirements are met. The PSRB Course Policy also acknowledges this.
- These processes and requirements will apply to applicants for the proposed programmes, which aligns with the institution wide policies and procedures.
- **Appeals –**
 - The Student Appeals procedure allows learners to submit an appeal against the assessment process. This process is a three stage process, which starts from the early resolution stage and goes on to formal investigation stage and review stage. To ensure fairness and consistency, all these stages have a 20 working day time limit, however exceptions can be made depending on the complexity of the case.
 - These processes and requirements will apply to applicants for the proposed programmes, which aligns with the institution wide policies and procedures.

Non-alignment requiring further assessment: None.

Outcomes from stage 1

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

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

- Currently there are several full time members of staff who will be able to contribute to the delivery of the proposed programmes, however, additional staff will be recruited to deliver key curriculum areas of the programmes. The Faculty Business Plan supports this and it will ensure the education provider maintain staff student ratios.
- All the teaching and clinical skills facilities are based in Canterbury. The education provider has acknowledged some planning will be required to ensure there are adequate learning and teaching facilities to accommodate the proposed programmes.

Section 3: Programme-level assessment

Programmes considered through this assessment

| Programme name | Mode of study | Profession (including modality) / entitlement | Proposed learner number, and frequency | Proposed start date |
|---|----------------|---|--|---------------------|
| Master of Science Occupational Therapy (pre-registration) | FT (Full time) | Occupational therapist | 30 learners, 1 cohort | 01/09/2025 |
| Master of Science Physiotherapy (pre-registration) | FT (Full time) | Physiotherapist | 30 learners, 1 cohort | 01/09/2025 |

Stage 2 assessment – provider submission

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

Quality themes identified for further exploration

We reviewed the information provided, and worked with the education provider on our understanding of their submission. Based on our understanding, we defined and undertook the following quality assurance activities linked to the quality themes referenced below. This allowed us to consider whether the education provider met our standards.

We have reported on how the provider meets standards, including the areas below, through the [Findings section](#).

Quality theme 1 – effective collaboration with practice education providers to develop the proposed programmes

Area for further exploration: The education provider submitted evidence which demonstrated there were a range of processes in place, at a strategic level, to encourage ongoing partnership between themselves and practice education providers. The visitors acknowledged this evidence, however it was not clear to them what collaboration had actually taken place between the education provider and practice education providers to develop the proposed programmes. It was important to understand this, as the engagement with practice education providers ensured external input throughout the programme and contributed to the quality and effectiveness of the programme. Visitors therefore requested further evidence of this collaboration in the form of any meetings and discussions that had taken place and any other evidence to demonstrate this.

Quality activities agreed to explore theme further: We agreed to explore this area further by requesting email and documentary evidence from the education provider. We considered this would be the most effective method to understand how the education provider had collaborated with practice education providers to develop the proposed programmes.

Outcomes of exploration: In their response, the education provider outlined that a joint co-design meeting had been held to discuss the development of both programmes. The visitors took note of the feedback, both positive and negative, that was shared during this meeting and acknowledged the subsequent email correspondence from the education provider, which confirmed that feedback from practice education providers was being actively considered in the design of the proposed programmes. Additionally, the visitors recognised the meeting that took place between the two programme teams and the Allied Health Professions (AHP) Faculty within the Kent and Medway Integrated Care System (ICS), where discussions focused on the programmes and the capacity for practice-based learning. Alongside this, details were provided of ongoing collaboration with practice education providers through planned sessions, such as co-production events.

Visitors acknowledged the additional information supplied by the education provider and confirmed they were satisfied the education provider had collaborated with practice education providers appropriately to develop the programmes. They recognised there was a clear process to encourage collaboration between the education provider and practice education providers.

Quality theme 2 – appropriate number of suitably qualified and experienced staff to deliver the programmes for the number of learners on the programmes.

Area for further exploration: The visitors reviewed the CVs provided by the education provider and noted the accompanying narrative within the mapping document, which outlined the current staffing arrangements in place to support the proposed programmes. While it was recognised that the listed staff are involved in the delivery of the approved BSc (Hons) Physiotherapy and BSc (Hons) Occupational Therapy programmes, the visitors were not assured that the staffing levels would be sufficient for the additional proposed programmes and the associated increase in the number of learners training towards these professions. Consequently, they requested further information in the form of a clear rationale. This was to demonstrate how the education provider will ensure an adequate number of appropriately qualified and experienced staff are in place to deliver the proposed programmes. This should include a staffing plan outlining how current levels will be maintained and any intentions to recruit additional staff.

Quality activities agreed to explore theme further: We agreed to explore this area further by requesting email and documentary evidence from the education provider. We considered this would be the most effective method to understand how they

would ensure there were an adequate number of appropriately qualified staff to deliver the proposed programmes.

Outcomes of exploration: In their response, the education provider explained that staffing levels for the proposed programmes were determined in accordance with the institution's policy, which stipulates a student-to-staff ratio of 20:1. The visitors also acknowledged that the Physiotherapy team is in the process of appointing an additional one full-time equivalent (1.0 FTE) academic post and one 1.0 FTE clinical academic role. To support the narrative further they supplied visitors with the MSc pre-reg physio – course rationale and placement capacity document. Visitors noted the document provided further details of the staffing for the proposed programme and how professional body guidelines had been considered to set learner numbers.

With regard to the Occupational Therapy programme, the visitors acknowledged the table provided, which detailed the number of staff involved in the delivery of the proposed programme. They also noted the rationale submitted in relation to the Royal College of Occupational Therapists (RCOT) requirements, confirming that staff holding a Level 7 qualification are suitably qualified to teach on the proposed programme. Based on the information presented, the visitors were satisfied that the staffing levels for the programme are appropriate.

Based on the information provided, it was evident that the programme teams had appropriate arrangements in place to manage staffing levels effectively. As a result, the visitors were assured that there were a sufficient number of appropriately qualified and experienced staff to support delivery of the programmes for the anticipated learner numbers.

Quality theme 3 – ensuring staff have relevant specialist knowledge and expertise

Area for further exploration: The education provider submitted CVs that offered an overview of the team's qualifications and experience relevant to delivering the proposed programmes. The visitors acknowledged the breadth of specialist knowledge and expertise within the team and noted that certain subject areas were delivered by individuals described as 'experts in the field'. However, based on the information provided, it was not clear how the education provider ensured staff had the necessary knowledge and expertise to deliver the specialist areas of the programmes. The visitors requested further information outlining the mechanisms in place to ensure staff had the appropriate specialist knowledge and experience required for these areas.

Quality activities agreed to explore theme further: We agreed to explore this area further by requesting email and documentary evidence from the education provider. We considered this would be the most effective method to understand how the education provider ensured 'experts in the field' had the relevant knowledge and expertise to deliver the proposed programmes.

Outcomes of exploration: The education provider outlined how the Associate Lecturer model facilitated access to experienced practitioners and subject specialists from local NHS Trusts. Visitors recognised the model enabled practitioners to contribute to various aspects of the programmes, including teaching and simulation-based learning. Its primary aim was to strengthen partnerships with practice education providers, fostering mutual benefit. We noted how through this approach, the education provider gained valuable input from skilled professionals, while Associate Lecturers benefitted from access to training opportunities and resources offered by the education provider. The visitors acknowledged the clear processes in place to ensure Associate Lecturers had the necessary knowledge and expertise. This included maintaining a centralised register of Associate Lecturers and providing them with comprehensive guidance and clearly defined role descriptors. The visitors noted the close collaboration between module leads and external practitioners, which served as a quality assurance mechanism. Module leads also monitored the quality of activities involving Associate Lecturers and provided them with appropriate support, including preparation for sessions and access to relevant teaching materials and resources.

Visitors acknowledged the additional information supplied by the education provider and confirmed they were satisfied the education provider had mechanisms in place to ensure staff had the appropriate specialist knowledge and experience required to deliver the specialist areas of the programmes.

Quality theme 4 – ensuring there are a range of practice-based learning opportunities

Area for further exploration: There was clear information provided in relation to the structure and duration of the practice-based learning. Visitors, however, were not clear on how the range of practice-based learning would be managed and how the education provider would ensure all learners had access to the appropriate range of practice-based learning to demonstrate all the learning outcomes of the proposed programmes could be met. Further information was therefore requested to understand the range of practice-based learning learners would have access to.

Quality activities agreed to explore theme further: We agreed to explore this area further by requesting email clarification from the education provider. We considered this would be the most effective method to understand the range of practice-based learning that learners would have access to on the proposed programmes.

Outcomes of exploration: Visitors acknowledged both the narrative and supporting evidence presented, noting that the education provider demonstrated comprehensive oversight of practice-based learning across multiple levels. This included governance at the School level, the presence of dedicated placement leads within programme teams, and the support of the School Work-Based Learning Unit, which collectively ensured consistency and compliance across all programmes. In addition to this, the Interprofessional Learning and Practice (IPLP) Board played a key role in overseeing the integration of interprofessional learning within practice-based

learning. This strategic approach ensured that learners were exposed to a diverse range of professional contexts and received appropriate support from the School to access and benefit from these varied learning opportunities.

Evidence considered as part of this narrative included:

- CCCU MSc pre-reg physio - course rationale & placement capacity v2
- CCCU MSc pre-reg OT - Placement Offers 2024-25
- JD Placement Lead
- Example of Placement Circuits

Visitors acknowledged the additional information supplied by the education provider and confirmed they were satisfied the education provider had appropriate oversight of practice-based learning to ensure learners had access to a range of practice-based learning opportunities to demonstrate the relevant learning outcomes.

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.

Overall findings on how standards are met

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

Findings of the assessment panel:

- **SET 1: Level of qualification for entry to the Register –**
 - This standard is covered through institution-level assessment.
- **SET 2: Programme admissions –**
 - The selection and entry criteria were clear and set at an appropriate level for the proposed programmes. The entry criteria was available on the education provider's website and accessible to applicants.
 - The Course Specifications provided clear information and confirmed appropriate academic and professional entry standards would be applied fairly and consistently. This included the academic grade requirements, Disclosure and Barring Service checks and Occupational Health checks.
 - The visitors therefore considered the relevant standard within this SET area met.
- **SET 3: Programme governance, management and leadership –**
 - There was clear evidence of ongoing collaboration between the education provider and practice education partners. Existing relationships that were originally established through the undergraduate Occupational Therapy and Physiotherapy programmes

had been maintained and further strengthened during the development of the proposed programmes. There were a range of processes applied at strategic level to ensure ongoing collaboration, such as the Faculty Practice Learning Sub-committee who had oversight of the development of practice education for learners. Through [Quality theme 1](#) we understood how the education provider had collaborated with practice education providers in order to develop the proposed programmes.

- There were appropriate processes in place to ensure the availability and capacity of practice-based learning. It was noted the Work Based Learning Unit were responsible for ensuring there was adequate placement capacity. There was evidence of mechanisms to ensure sufficient capacity and to further support expansion for the proposed programmes, which included engagement with practice education providers and other education providers within the region. These included the University of Brighton and the University of Chichester.
- Visitors noted the education provider had an adequate number of staff to deliver both programmes, however they were not assured that the staffing levels would be sufficient for the proposed programmes. They also noted the education provider were in the process of appointing a full time equivalent senior lecturer for the Physiotherapy programme. Their concerns were considered through [Quality theme 2](#) and the visitors were satisfied with the evidence submitted.
- Visitors acknowledged the CVs submitted and noted staff had a range of clinical practice expertise and academic qualifications. They noted how specialist areas would be delivered by 'experts in the field' who were referred to as Associate Lecturers. Through [Quality theme 3](#) we understood how the education provider would ensure staff had the appropriate specialist knowledge and experience required to deliver the specialist areas of the programmes.
- There were a wide range of resources to support the effective delivery of the proposed programmes available at the Canterbury and Medway campus. These included access to a range of teaching spaces, library and IT facilities, the virtual learning environment and the Anatomy Learning Centre where learners can access anatomical resources, which was based in Canterbury Campus. Other resources included a simulation suite that consisted of an adapted kitchen and dining area, bedroom and fully equipped toilet and shower room at the Medway Campus. In addition to this there was also a Health Simulation Suite, which was equipped with medical equipment including hospital beds. Through clarification, we noted the proposed programmes would primarily be based at the Medway Campus, however if there were planned practical sessions at the Canterbury Campus the education provider would arrange transport for learners.
- The visitors therefore considered the relevant standard within this SET area met.

- **SET 4: Programme design and delivery –**

- The learning outcomes were mapped against the Standards of Proficiency (SOPs) mapping document and outlined in the module descriptors. The structure of the modules ensured learners will meet the SOPs.
 - Learners were supported to meet standards of professional behaviours, which included the HCPC standards of conduct, performance and ethics. These expectations were clearly embedded throughout the programmes, as reflected in the learning outcomes of both the academic modules and the clinical practice and placement components.
 - The philosophy, core values, skills and knowledge base were clearly articulated in the structure and delivery of the programmes. This was evidenced through the module outcomes and programme specifications. The education provider also demonstrated a clear awareness of the professional body requirements for both programmes and showed evidence of having considered relevant curriculum guidance in their development.
 - There were appropriate mechanisms in place to ensure the curriculum for both programmes will remain relevant to current practice. It was noted how both programmes were designed with flexibility to adapt to future developments in practice. A co-design approach with practice education providers ensured that current professional practices were effectively integrated.
 - There was evidence of a variety of learning and teaching methods being used to integrate theory and practice, which were evidenced in the module descriptors. These included a combination of traditional methods such as lectures, groupwork and presentations alongside experiential and simulated learning. These teaching methods were considered appropriate to ensure the learning outcomes were achievable.
 - It was noted how the learning, teaching and assessment methods were varied and encouraged learners to develop their autonomous and reflective thinking skills throughout the programmes. Learners were encouraged to engage in critical self-reflection for ongoing learning and personal development through the programmes. This was further supported through the Academic and Professional Orientation module where learners were taught the foundations of reflective practice.
 - We recognised evidence-based practice was integrated throughout the programmes. Specifically, it was noted how the occupational therapy programme had two modules focused on the development of evidence based practice. These were Evidence Based and Sustainable Practices and Quality Improvement, Innovation and Leadership modules.
 - The visitors therefore considered the relevant standard within this SET area met.
- **SET 5: Practice-based learning –**

- Visitors noted the clear integration of practice-based learning in the programmes. For the physiotherapy programme, learners were required to complete two six-week placements in year 1 and three six-week placements in year 2. On the occupational therapy programme, learners will have the opportunity to complete three practice placements. This approach enabled learners to develop their practice skills throughout the programmes.
- There was evidence of an adequate number of appropriately qualified and experienced staff to support practice-based learning, which included practice educators. It was noted how this process was managed through the Biannual Placement Audits, which monitored the number of staff involved with practice-based learning and practice educator training. Visitors recognised existing practices will apply to the programmes to ensure there are an adequate number of appropriately qualified and experienced staff to support practice-based learning.
- The education provider offers practice educator training to ensure individuals have the relevant knowledge, skills and experience to support safe and effective learning. Alongside this they also complete the Biannual Placement Audit, which acts as a mechanism to ensure practice educators are on the relevant part of the Register and are suitably qualified for the role.
- There was evidence to demonstrate the structure and duration of practice-based learning was appropriate to enable learners to meet the SOPs and achieve the learning outcomes. Through [Quality theme 4](#), understood how the education provider had appropriate oversight of practice-based learning to ensure learners had access to a range of practice-based learning opportunities. This was further supported by the Work-Based Learning Unit.
- The visitors therefore considered the relevant standard within this SET area met.
- **SET 6: Assessment –**
 - The programmes were mapped against the SOPs and the assessment strategy ensured learners met these. The range of assessments were summarised in the Course Student Handbook, Course Specification and module descriptors.
 - Professional behaviours, including adherence to the HCPC standards of conduct, performance and ethics, are embedded within various assessments across the programmes. For the physiotherapy programme, these include the Academic and professional orientation, Innovation and Leadership and Future Focus modules. For the occupational therapy programme, these standards are focused on during placement and a face to face session is also delivered to learners when they commence the programme to emphasise the importance of professional behaviours.
 - Assessment methods were clear and appropriate and were outlined in the module descriptors and the SOPs mapping document. It was noted

there were a range of assessment methods used to assess the learning outcomes, which included formative assessments.

- The visitors therefore considered the relevant standard within this SET area met.

- **Risks identified which may impact on performance:** None.

Section 5: Referrals

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

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

Recommendations

We include recommendations when standards are met at or just above threshold level, and where there is a risk to that standard being met in the future. They do not need to be met before programmes can be approved, but they should be considered by education providers when developing their programmes.

The visitors did not set any recommendations.

Section 6: Decision on approval process outcomes

Assessment panel recommendation

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

- All standards are met, and therefore the programmes should be approved.

Appendix 1 – summary report

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

| Education provider | Case reference | Lead visitors | Quality of provision | Facilities provided |
|-------------------------------------|------------------|-------------------------------|--|--|
| Canterbury Christ Church University | CAS-01592-F4B0X0 | Jo Jackson and Rebecca Khanna | <p>Through this assessment, we have noted:</p> <ul style="list-style-type: none">The programmes meet all the relevant HCPC education standards and therefore should be approved. | <p>Education and training delivered by this institution is underpinned by the provision of the following key facilities:</p> <ul style="list-style-type: none">Currently there are several full time members of staff who will be able to contribute to the delivery of the proposed programmes, however, additional staff will be recruited to deliver key curriculum areas of the programmes. The Faculty Business Plan supports this and it will ensure the education provider maintain staff student ratios.All the teaching and clinical skills facilities are based in Canterbury. The education provider has acknowledged some planning will be required to ensure there are adequate learning and |

| | | | | |
|---|--|--|----------------------|---|
| | | | | teaching facilities to accommodate the proposed programmes. |
| Programmes | | | | |
| Programme name | | | Mode of study | Nature of provision |
| Master of Science Occupational Therapy (pre-registration) | | | FT (Full time) | Taught HEI |
| Master of Science Physiotherapy (pre-registration) | | | FT (Full time) | Taught HEI |

Appendix 2 – list of open programmes at this institution

| Name | Mode of study | Profession | Modality | Annotation | First intake date |
|--|---------------------------|-----------------------------------|-------------------------|--|--------------------------|
| BSc (Hons) Occupational Therapy | FT (Full time) | Occupational therapist | | | 01/09/2000 |
| BSc (Hons) Occupational Therapy (Apprenticeship) | WBL (Work based learning) | Occupational therapist | | | 01/09/2019 |
| BSc (Hons) Operating Department Practice | FT (Full time) | Operating department practitioner | | | 01/09/2009 |
| BSc (Hons) Operating Department Practice | WBL (Work based learning) | Operating department practitioner | | | 02/09/2019 |
| BSc (Hons) Paramedic Science | FT (Full time) | Paramedic | | | 01/04/2011 |
| BSc (Hons) Physiotherapy | FT (Full time) | Physiotherapist | | | 01/09/2018 |
| Doctorate in Clinical Psychology (DClinPsychol) | FT (Full time) | Practitioner psychologist | Clinical psychologist | | 01/01/1998 |
| BSc (Hons) Diagnostic Radiography | FT (Full time) | Radiographer | Diagnostic radiographer | | 01/07/2004 |
| BSc (Hons) Speech and Language Therapy | FT (Full time) | Speech and language therapist | | | 01/09/2018 |
| MSc Speech and Language Therapy | FT (Full time) | Speech and language therapist | | | 18/09/2023 |
| Non-Medical Prescribing | PT (Part time) | | | Supplementary prescribing | 01/03/2019 |
| Non-Medical Prescribing | PT (Part time) | | | Supplementary prescribing; Independent prescribing | 01/03/2019 |