

Visitors' report

Name of education provider	City University
Programme name	BSc (Hons) Radiography (Radiotherapy and Oncology)
Mode of delivery	Full time
Relevant part of HPC Register	Radiographer
Relevant modality / domain	Therapeutic radiography
Date of visit	26 – 27 April 2011

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Executive summary

The Health Professions Council (HPC) approve educational programmes in the UK which health professionals must complete before they can apply to be registered with us. The HPC is a health regulator and our main aim is to protect the public. The HPC currently regulates 15 professions. All of these professions have at least one professional title which is protected by law. This means that anyone using the title 'Radiographer' or 'Therapeutic radiographer' must be registered with us. The HPC keep a register of health professionals who meet our standards for their training, professional skills, behaviour and health.

The visitors' report which follows outlines the recommended outcome made by the visitors on the ongoing approval of the programme. This recommended outcome was accepted by the Education and Training Committee (Committee) on 7 July 2011. At the Committee meeting on 25 August 2011, the ongoing approval of the programme was re-confirmed. This means that the education provider has met the condition(s) outlined in this report and that the programme meets our standards of education and training (SETs) and ensures that those who complete it meet our standards of proficiency (SOPs) for their part of the Register. The programme is now granted open ended approval, subject to satisfactory monitoring.

Introduction

The HPC visited the programme at the education provider to consider major changes proposed to the programme. The major change affected the following standards - programme admissions, programme management and resources, curriculum, practice placements and assessment. The programme was already approved by the HPC and this visit assessed whether the programme continued to meet the standards of education and training (SETs) and continued to ensure that those who complete the programme meet the standards of proficiency (SOPs) for their part of the Register.

This visit was part of a joint event. The education provider reviewed the programme and the professional body considered their accreditation of the programme. The visit also considered a BSc (Hons) Radiography (Diagnostic Imaging) programme. The education provider, the professional body and the HPC formed a joint panel, with an independent chair and secretary, supplied by the education provider. Whilst the joint panel participated in collaborative scrutiny of both programmes and dialogue throughout the visit; this report covers the HPC's recommendations on this programme only. A separate report exists for the other programme. As an independent regulatory body, the HPC's recommended outcome is independent and impartial and based solely on the HPC's standards. Separate reports, produced by the education provider and the professional body, outline their decisions on the programmes' status.

Visit details

Name of HPC visitors and profession	Helen Best (Diagnostic radiographer) Kathryn Burgess (Therapeutic radiographer)
HPC executive officer(s) (in attendance)	Ruth Wood
Proposed student numbers	35 per cohort
First approved intake	September 2005
Effective date that programme approval reconfirmed from	12 September 2011
Chair	Susannah Quinsee (City University)
Secretary	Terry Bransbury (City University)
Members of the joint panel	Claire de Than (Internal Panel Member) Kathryn Waddington (Internal Panel Member) Christine Blyth (Society and College of Radiographers) Sarah Smith (Society and College of Radiographers) Lesley Forsyth (Society and College of Radiographers)

Sources of evidence

Prior to the visit the HPC reviewed the documentation detailed below, sent by the education provider:

	Yes	No	N/A
Programme specification	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Descriptions of the modules	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the education provider has met the SETs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the education provider has met the SOPs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Practice placement handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Curriculum vitae for relevant staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
External examiners' reports from the last two years	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
City University Radiography Supplementary information	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

During the visit the HPC saw the following groups or facilities:

	Yes	No	N/A
Senior managers of the education provider with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Programme team	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Placements providers and educators/mentors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learning resources	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Specialist teaching accommodation (eg specialist laboratories and teaching rooms)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Recommended outcome

To recommend a programme for ongoing approval, the visitors must be assured that the programme meets all of the standards of education and training (SETs) and that those who complete the programme meet our standards of proficiency (SOPs) for their part of the Register.

The visitors agreed to recommend to the Education and Training Committee that a number of conditions are set on the programme, all of which must be met before the ongoing approval of the programme is reconfirmed.

The visitors agreed that 47 of the SETs have been met and that conditions should be set on the remaining 10 SETs.

Conditions are requirements that the education provider must meet before the programme can be recommended for ongoing approval. Conditions are set when certain standards of education and training have not been met or there is insufficient evidence of the standard being met.

The visitors have also made a number of recommendations for the programme.

Recommendations are observations on the programme or education provider which do not need to be met before the programme is recommended for ongoing approval. Recommendations are normally set to encourage further enhancements to the programme and are normally set when it is felt that the particular standard of education and training has been met at, or just above the threshold level.

The visitors did not make any commendations on the programme. Commendations are observations of innovative best practice by a programme or education provider.

Conditions

2.1 The admissions procedures must give both the applicant and the education provider the information they require to make an informed choice about whether to take up or make an offer of a place on a programme.

Condition: The programme team must revisit programme documentation (including any website material) where admissions information is referenced, to ensure that the categories for the two types of applicants and their associated selection processes are clearly articulated.

Reason: Documentation provided prior to the visit included details about the programmes' selection and entry criteria. From the documentation the visitors noted there were two applicant categories and associated selection processes for the programme. Discussion at the visit confirmed there were two entry routes onto the programme, a 'standard' and a 'non-standard' route and each had their own selection process.

The 'standard' entry route was described as being used for those who applied to the programme as 'school-leavers'. Their UCAS (Universities & Colleges Admissions Service) points, other academic credits and personal statement would be looked at, along with evidence that they had observed the work of a clinical radiotherapy department. The student would be offered a place on the programme and then invited to attend an open day held at the education provider.

The 'non-standard' entry route was described as being used for anyone who does not meet the 'standard' school-leaver category. Their UCAS points, other academic credits and personal statement would be looked at, along with evidence that they had observed the work of a clinical radiotherapy department. These students would be required to attend a selection day held by the education provider. The selection day would include a questionnaire and a group interview which allows the programme team to assess the applicant's communication and interpersonal skills.

The programme specification document did not include information about the two applicant categories. It stated that "mature students are considered on an individual basis" (p11, BSc (Hons) Radiotherapy and Oncology Programme Specification 2011). The prospectus information detailed the academic entry criteria, it did not detail the two applicant categories used by the programme or the associated selection processes. The website information provided as part of the visit documentation detailed academic entry criteria for "typical offers" and stated "shortlisted applicants will be invited to interview". The website did not give information regarding the 'standard' and 'non-standard' applicant categories.

The visitors considered it to be important for potential applicants to know the details of the categories used so they can determine which category they fit into and so what will be the selection process for them. The visitors also considered consistency through the documentation to be important to ensure the programme team and the potential applicants are fully aware of the admissions procedures. Therefore, the visitors require the programme team to revisit programme

documentation (including any website material) that references admissions information to ensure the categories for the two types of applicants and their associated selection processes are clearly articulated.

2.1 The admissions procedures must give both the applicant and the education provider the information they require to make an informed choice about whether to take up or make an offer of a place on a programme.

Condition: The programme team must revisit programme documentation (including any website material) where admissions information is referenced to ensure consistency is in place when making reference to the programmes' selection and entry criteria.

Reason: Documentation provided prior to the visit included details about the programmes' selection and entry criteria requirements. The visitors found inconsistencies in the details for the selection and entry criteria information provided across all the documents.

The prospectus and the programme specification document detailed the academic entry criteria. They did not detail personal skills or attributes required as entry criteria. The website information provided as part of the visit documentation detailed academic entry criteria and detailed skills and interests needed including "good communication skills and the necessary interpersonal skills".

Discussions at the visit indicated for both the 'standard' and 'non-standard' applicant categories, along with the academic criteria, there were personal skills and attributes required which would be assessed via the selection day interviews and the personal statements.

The visitors considered information regarding applicants' personal skills and attributes to be important in addition to the academic entry requirements as they are reviewed through the admissions procedures when shortlisting candidates who have met the academic entry criteria.

To increase clarity for potential applicants the visitors require the programme team to revisit all admissions documentation, including any website material, to ensure that consistency is in place when making reference to the programmes' selection and entry criteria.

2.5 The admissions procedures must apply selection and entry criteria, including appropriate academic and/or professional entry standards.

Condition: The programme team must ensure they are applying appropriate academic professional entry standards for the programme in light of the additional route onto the programme through the 'Foundation Degree in Health Sciences – Radiotherapy Practice' and 'top-up' programme.

Reason: The documentation provided prior to the visit clarified the entry routes onto the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' programme. There was the standard entry route straight onto the first year of the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' programme. There was an additional entry route that allowed students completing the 'Foundation Degree in Health Sciences – Radiotherapy Practice' with a merit or distinction the chance to complete a 'top-up' programme which would allow them entry onto the third year of the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' programme bypassing the first and second year. The documents stated students who could not progress past the first year of the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' programme due to failure would be offered the chance to enter onto the 'Foundation Degree in Health Sciences – Radiotherapy Practice' programme.

The visitors were concerned that if a student failed the first year of the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' programme they would then be able to progress through the 'Foundation Degree in Health Sciences – Radiotherapy Practice' onto the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' programme via the 'top-up' modules. The visitors felt this could mean that professional standards taught and assessed through the three years of the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' programme may not be met at the end of the third year for those students entering through the 'Foundation Degree in Health Sciences – Radiotherapy Practice' and 'top-up' modules route'.

Discussions at the visit indicated the programme team had not put this route into practice as yet and were in the process of finalising some of the details for it. The visitors suggested a checking mechanism to ensure these students would not be able to simply progress through to the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' would be advisable. The visitors considered students on both programmes would need to know the details of any checking mechanisms to ensure they are all fully aware of the implications of failure to progress and their options.

The visitors therefore, require the programme team to submit details of how they will manage situations where students cannot progress past the first year of the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' and enter the 'Foundation Degree in Health Sciences – Radiotherapy Practice' where currently the option is there to progress into the third year of the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' programme. The visitors also require the programme team to include details of this management for students on both the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' and 'Foundation Degree in Health Sciences – Radiotherapy Practice' programme.

3.2 The programme must be effectively managed.

Condition: The programme team must provide further evidence to demonstrate all placements in the programme are subject to a signed placement agreement and are made aware of the agreement.

Reason: Documentation provided as evidence prior to the visit stated that “every clinical placement partner that City University students attend has signed a Clinical Placement Agreement” (SETs mapping document SET 5.1). The documentation included one letter of agreement between the education provider and an independent placement site. There was no evidence of other agreements, for example with NHS placement sites. Discussions at the visit with the clinical partners indicated they were unaware of agreements being signed between the education provider and the practice placement setting. At the close of the visit it was clarified by the programme team that the chief executives of all placements signed the agreements not those people in direct supervisory positions with students on placement or their direct managers.

The visitors were concerned that those who were in direct contact with the students on placement were unaware of the signed agreements and as such might not be aware of the details of the agreement the placement is working under. The visitors are aware that the education provider must retain overall responsibility of the placement and consider the signed clinical placement agreement to be crucial in ensuring all parties involved in placement are clearly aware of their roles and responsibilities. As the education provider must take responsibility for placement management for the programme the visitors therefore require further evidence of placement management to ensure that this standard is being met. The visitors require evidence that all placements have signed an agreement with the education provider (such as a monitoring list confirming signatures) and evidence that all members at the practice placement settings are aware of an agreement having been signed and the associated implications.

3.3 The programme must have regular monitoring and evaluation systems in place.

Condition: The programme team must provide further evidence to demonstrate the programme has regular monitoring and evaluation systems in place when considering the practice placement settings used.

Reason: From the documentation provided prior to the visit the visitors could not find enough evidence of formal processes in place for the on-going monitoring of placements used for this programme. There was no information provided regarding documented processes by which the programme team can regularly evaluate the suitability of the placements being used.

The SETs mapping document provided stated all “clinical sites are assigned a link lecturer, to facilitate and monitor placement, Link Lecture visit forms are completed after each visit and these in turn are monitored by the Clinical Coordinators” (SETs mapping document SET 5.4). The form for the link lecturer to complete was included in the evidence. The form allows the link lecturer to record the staff seen, to record issues being raised and actions against the issues. The form is acknowledged by clinical staff and the clinical coordinator. There was no further information given regarding this form and there was no accompanying guidance to indicate where issues might occur to aid the link lecturer in filling in the form. Discussions at the visit confirmed that the link lecturer role is the key

role in providing on-going monitoring to the placement and they report back to the clinical coordinator in the programme team.

The visitors were concerned that there appeared to be no documented procedures in place for monitoring the placements and recording the information collected from placements. The visitors are aware that a formal auditable process for monitoring placements would allow the programme team to maintain overall responsibility for the placements.

The visitors require further evidence that as part of the overall monitoring for this programme the programme team has a documented procedure in place to monitor existing placements on a regular basis to ensure their suitability. The visitors require further information about the application of the monitoring process such as frequency, reporting and recording processes, information collected and resulting follow up actions in response to such monitoring.

5.4 The education provider must maintain a thorough and effective system for approving and monitoring all placements.

Condition: The programme team must provide further evidence to demonstrate all placements for the programme are subject to formal approval and monitoring processes. This should include documented processes for initial approval and systems in place for on-going monitoring of placements.

Reason: From the documentation provided prior to the visit the visitors could not find enough evidence of documented processes in place for the initial approval and on-going monitoring of placements used for this programme. There was no information provided regarding the initial approval processes by which the programme team can evaluate and record the suitability of the placements to be used. The documents did provide a 'Record of link lecturer's visit to clinical site' form for the monitoring of the placements. The form has an area to record issues being raised and actions against the issues but there was no accompanying guidance to indicate where issues might occur to aid the link lecturer in filling in the form.

Discussions at the visit indicated the placements currently used for the programme had been used with the programme for some time and that no new placements had been, or were being, sourced. There was no discussion at the visit regarding any initial approval procedures used when initially approving placements.

Discussions at the visit indicated the link lecturer is the key role in providing on-going monitoring to the placement. They report back to the clinical coordinator in the programme team using the 'Record of link lecturer's visit to clinical site' form on a weekly basis. There was no evidence to give information regarding documented processes behind this collection of data. This includes the mandatory frequency of this collection (and processes if not collected), how the information was recorded in a central location or how responses to the information gathered were made. It was clarified at the close of the visit a central database was used to record the data about the placements. However, no information had been provided regarding the database, what information was

recorded in the database and how the database is used with approval and monitoring procedures (for example who has access and how database information is used).

The visitors were concerned there appeared to be no documented procedures in place for initially approving placements and recording information about the on-going monitoring of placements. The visitors are aware a formal auditable process for initially approving placements would allow the programme team to maintain overall responsibility for the placements they hold.

As the programme team must take responsibility for placement management for the programme the visitors require further evidence to ensure this standard is being met. The visitors require evidence which illustrates the documented placement monitoring and review processes in place in order to demonstrate the programme has effective approval and monitoring and systems for all of the placements including information about the central database.

5.6 There must be an adequate number of appropriately qualified and experienced staff at the practice placement setting.

Condition: The programme team must provide further evidence to demonstrate the procedures in place used (at the initial approval of placements and through on-going monitoring) to ensure there is an adequate number of appropriately qualified and experienced staff at the practice placement.

Reason: From the documentation provided prior to the visit the visitors could not find enough evidence of documented processes in place for the initial approval and on-going monitoring of placements used for the programme. They were unable to determine what information at the placement approval stage, including the number of appropriately qualified and experienced staff at placements, was taken into account. The documentation included a 'Record of link lecturer's visit to clinical site' form which was used as part of the on-going monitoring carried out by the link lecturer roles. The form has an area to record issues being raised and actions against the issues. There was no accompanying guidance to indicate where issues might occur to aid the link lecturer in filling in the form.

The visitors were concerned if the programme team does not take account of the numbers of appropriately qualified and experienced staff at the placement settings at the initial approval, changes in staff might not be picked up during the on-going monitoring of the placements. The visitors were concerned that if there was no way for the programme team to keep track of the staffing levels at the placements they could not be assured there was an adequate number of appropriately qualified and experienced staff at the practice placement setting. The visitors considered information about staff at the placement settings should be part of the on-going monitoring the link lecturers undertake whilst using the 'Record of link lecturer's visit to clinical site' form and as part of any initial approval procedures.

As the programme team must take responsibility for placement management for the programme the visitors require further evidence to ensure this standard is being met. The visitors require further evidence to demonstrate the procedures

in place used (both at initial approval of placement and through on-going monitoring) to ensure there is an adequate number of appropriately qualified and experienced staff at the practice placement.

5.7 Practice placement educators must have relevant knowledge, skills and experience.

Condition: The programme team must provide further evidence to demonstrate the procedures in place used (at initial approval of placements and through on-going monitoring) to ensure placement supervisors have relevant knowledge, skills and experience.

Reason: From the documentation provided prior to the visit the visitors could not find enough evidence of documented processes in place for the initial approval and on-going monitoring of placements used for this programme. They were unable to determine what information at the placement approval stage, including placement supervisors' knowledge, skills and experience, was taken into account. The documentation included a 'Record of link lecturer's visit to clinical site' form which was used as part of the on-going monitoring carried out by the link lecturer roles. The form has an area to record issues being raised and actions against the issues. There was no accompanying guidance to indicate where issues might occur to aid the link lecturer in filling in the form.

The visitors were concerned if the programme team does not take account of placement supervisors' knowledge, skills and experience at the initial approval, changes in staff might not be picked up during the on-going monitoring of the placements. The visitors were concerned if there was no way for the programme team to keep track of the staff knowledge, skills and experience at the placements they could not be assured placement supervisors have the relevant skills, knowledge and experience needed to work with students. The visitors considered information about staff at the placement settings should be part of the on-going monitoring that the link lecturers undertake whilst using the 'Record of link lecturer's visit to clinical site' form and as part of any initial approval procedures.

As the programme team must take responsibility for placement management for the programme the visitors require further evidence to ensure this standard is being met. The programme team must provide further evidence to demonstrate the procedures in place used (both at initial approval of placements and through on-going monitoring) to ensure placement supervisors' have relevant knowledge, skills and experience.

5.8 Practice placement educators must undertake appropriate practice placement educator training.

Condition: The programme team must provide evidence to show how they ensure placement supervisors have undertaken appropriate initial training and undertake 'refresher' training on a regular basis.

Reason: From the documentation submitted by the education provider, the visitors could not determine how the education provider ensured placement supervisors had undertaken appropriate training prior to working with trainees or continued to undertake any secondary 'refresher' training once working with trainees. In discussion with the programme team, it became evident the programme team expected placement supervisors to be initially trained and to undertake 'refresher' training but did not make it mandatory and there was no information as to how they recorded training attendance.

The visitors were aware there are difficulties in ensuring all placement supervisors are initially trained and undertake 'refresher' training. The initial training would be to prepare placement supervisors to work with trainees. The secondary 'refresher' training would enable the education provider to keep placement supervisors up to date with any changes to the programme and refresh their skills at working with trainees. At the close of the visit the visitors were informed there was a database to record information about the placements. No information had been provided regarding the database. The visitors agreed this database could be used to include the training records for the placement educators.

The programme team must take responsibility to ensure appropriate training of some kind has taken place and is monitored. Therefore, the visitors require further evidence to show how they ensure placement supervisors have undertaken appropriate initial training and undertake 'refresher' training on a regular basis.

5.9 Practice placement educators must be appropriately registered, unless other arrangements are agreed.

Condition: The programme team must provide further evidence to demonstrate the procedures in place used (at initial approval of placements and through on-going monitoring) to ensure placement supervisors are appropriately registered or other arrangements have been agreed.

Reason: From the documentation provided prior to the visit the visitors could not find enough evidence of documented processes in place for the initial approval and on-going monitoring of placements used for this programme. They were unable to determine what information at the placement approval stage, including the registration status of placement supervisors, was taken into account. The documentation included a 'Record of link lecturer's visit to clinical site' form which was used as part of the on-going monitoring carried out by the link lecturer roles. The form has an area to record issues being raised and actions against the issues. There was no accompanying guidance to indicate where issues might occur to aid the link lecturer in filling in the form.

The visitors were concerned if the programme team does not take account of placement supervisors' registration status at the initial approval, changes in staff might not be picked up during the on-going monitoring of the placements. The visitors were concerned if there was no way for the programme team to keep track of the staff at the placements they therefore could not be assured that placement supervisors are appropriately registered or other arrangements have

been agreed in order for them to work with students. The visitors considered information about staff at the placement settings should be part of the on-going monitoring the link lecturers undertake whilst using the form and as part of any initial approval procedures.

As the programme team must take responsibility for placement management for the programme the visitors require further evidence to ensure this standard is being met. The programme team must provide further evidence to demonstrate the procedures in place used (both at initial approval of placements and through on-going monitoring) to ensure placement supervisors are appropriately registered or other arrangements have been agreed.

6.7 Assessment regulations must clearly specify requirements for student progression and achievement within the programme.

Condition: The programme team must ensure they are clearly specifying requirements for student progression within the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' and the 'Foundation Degree in Health Sciences – Radiotherapy Practice' programmes.

Reason: The documentation provided prior to the visit clarified the progression routes for the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' programme. Students who could not progress past the first year of the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' programme due to failure would be offered the chance to enter onto the 'Foundation Degree in Health Sciences – Radiotherapy Practice' programme. The documents stated that students completing the 'Foundation Degree in Health Sciences – Radiotherapy Practice' with a merit or distinction would have the chance to complete a 'top-up' programme which would allow them entry onto the third year of the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' programme bypassing the first and second year.

The visitors were concerned if a student failed the first year of the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' programme they would then be able to progress through the 'Foundation Degree in Health Sciences – Radiotherapy Practice' onto the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' programme via the 'top-up' modules. The visitors felt this could mean that professional standards taught and assessed through the three years of the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' programme may not be met at the end of the third year for those students entering through the 'Foundation Degree in Health Sciences – Radiotherapy Practice' and 'top-up' modules route'.

Discussions at the visit indicated the programme team had not put this route into practice as yet and were in the process of finalising some of the details for it. The visitors suggested a checking mechanism to ensure these students would not be able to simply progress through to the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' would be advisable. The visitors considered students on both programmes would need to know the details of any progression regulations to ensure they are all fully aware of the implications of failure to progress and their options.

Therefore the visitors require the programme team to submit details of how they will manage situations where students cannot progress past the first year of the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' and enter the 'Foundation Degree in Health Sciences – Radiotherapy Practice' where currently the option is there to progress into the third year of the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' programme. The visitors also require the programme team to clearly specify requirements for student progression within the 'BSc (Hons) Radiography (Radiotherapy and Oncology)' and the 'Foundation Degree in Health Sciences – Radiotherapy Practice' programmes for students.

Recommendations

3.6 Subject areas must be taught by staff with relevant specialist expertise and knowledge.

Recommendation: The programme team may wish to consider reviewing how they can use persons external to the programme team in areas such as programme delivery, programme development and design and programme admissions to enhance the programme.

Reason: The visitors felt the programme team currently has access to a wide range of people who could be used when looking at various aspects of the programme. The visitors felt that people such as clinical partners, specialist experts and service users could be used to support the teaching already undertaken by the programme team to provide greater diversity and variety of information given to students. The visitors also felt clinical partners and service users could be valuable when looking to develop and improve the programme in terms of the curriculum. The visitors also felt service users and clinical partners could be used within the recruitment procedures as part of interview teams, screening teams or as speakers on open days and selection days. The visitors felt there was a lot these people could offer the programme team to make use of. By using a range of people the programme would be enhanced and the students', clinical partners' and service users' own experiences with the programme would also be enhanced.

6.4 Assessment methods must be employed that measure the learning outcomes.

Recommendation: The programme team may wish to consider reviewing how they present their assessment strategy for the programme.

Reason: The documentation provided for the visit included details about the assessment strategy rationale which looked at the spread of assessments throughout the programme from a high level department viewpoint. The documentation included details about the individual programme assessments used for the programme. The visitors felt there was a discrepancy between the department assessment strategy rationale and the chosen assessments for the programme. There appeared to be a considerable amount of time pressured assessments for the students as opposed to less pressurised coursework assignments. The department level rationale however, wanted to reduce the "academic pressure points in order to minimise stress on both staff and students" (p25, Document 10 Supplementary Information for all Pre-reg programmes 2011). The visitors wish to recommend the programme team look to developing a programme assessment strategy to clearly justify the range of assessments employed within the programme.

Helen Best
Kathryn Burgess