



Handbook for major review of healthcare programmes

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The Department of Health (England), in partnership with the Nursing and Midwifery Council, the Health Professions Council and the Workforce Development Confederations, has contracted with the Quality Assurance Agency for Higher Education (the Agency) to carry out reviews of all NHS-funded healthcare programmes in England during the period 2003-06. This *Handbook* has been agreed and endorsed by all partners.

The Agency was established with charitable status in 1997 to provide an integrated quality assurance service for UK higher education. It is an independent body whose mission is to promote public confidence in the quality of provision and standards of the awards. To this end, the Agency carries out major reviews, institutional audits, academic reviews and other review and enhancement activity.

Introduction

Background

1 This *Handbook* describes the method and procedures for carrying out major reviews in England, the academic and practitioner standards achieved, and the quality of learning opportunities provided. Major review is an activity undertaken by peer reviewers, resulting in judgements on the standards and quality of NHS-funded healthcare programmes. Major review examines the learning opportunities in theory and practice, however and wherever delivered. The method and procedures comprise an integrated approach focusing on the establishment, maintenance and enhancement of academic and practitioner standards. These are matters for which the responsibility lies with the higher education institutions (HEIs) in partnership with its practice placement providers.

2 The process of major review of healthcare programmes will require a high degree of openness, transparency and trust in the partnership between the Quality Assurance Agency for Higher Education (the Agency), each HEI, Workforce Development Confederation (WDC) and partner placement providers. The process of major review described in this *Handbook* has been developed from the Agency's academic review in partnership with the Department of Health (DH) in England, the WDCs, the Health Professions Council (HPC), the allied health professions bodies, the Nursing and Midwifery Council (NMC) as well as a large number of representative bodies, practitioners, and academics. All these organisations and people have worked together to minimise duplication, reduce overlap between the organisations and promote appropriate links with the different quality assurance activities. Prototype reviews carried out in six HEIs, two published reports evaluating the prototypes and wide ranging discussions among stakeholders helped to refine the process and inform revision of this *Handbook*.

3 This *Handbook* will assist the reviewers, HEIs, practice placement providers, professional statutory and regulatory bodies (PSRBs), employers, funding bodies and the general public, all of whom have an interest in the arrangements for the review of health-related provision in higher education and the outcomes of it. The subject groupings that will be reviewed, in the first instance, using this *Handbook* are set out in Annex A.

4 A key principle underpinning major reviews is that they should be conducted in a spirit of dialogue and cooperation between the HEIs, practice placement providers, their staff and the review teams. The process is one of peer review, it is carried out by specialist teams of professional peers. These subject specialists have roles in other education providers similar to those of the staff in the providers being visited for review. They are drawn both from academic staff and from among practitioners in appropriate practice areas. Peer review enables judgements to be made by those who understand the healthcare programmes under scrutiny and who are familiar with teaching and learning processes. It enables judgements to be credible to subject providers, and to command their respect. For a peer review process to have credibility with external stakeholders, such as PSRBs, NHS Trusts, WDCs, other health service providers and potential students, judgements must be made in a transparent manner, and reported publicly.

Key considerations underpinning major reviews of healthcare programmes

5 The DH in England provides funds for the provision of higher education programmes for many of the health professions. The DH has an interest in bringing key stakeholders together to provide assurance that programmes produce practitioners who are safe and competent to practice and who are equipped to work in a patient-centred NHS. The quality assurance arrangements should build on the internal quality assurance of healthcare education providers and make best use of existing documentation and data.

6 In addition, a number of features particular to healthcare education need to be taken into account and fully reflected in the review process to be used. Healthcare programmes are composed of two complementary and interrelated elements - theory and practice. Competence and safe practice, the pre-requisites for registration for a licence to practice, must be developed and demonstrated on the pre-registration programmes. Students should be prepared for careers as competent healthcare professionals and equipped for self-critical lifelong learning.

7 Practice learning is an integral and vital component of all health profession programmes. Learning in practice placements is an important feature, contributing to the attainment of aims and outcomes. Hence, it must be reviewed as a part of any overall review of a healthcare programme. Therefore, when the standards achieved by students and the quality of the learning opportunities available to them on a particular programme are reviewed, the process must address both the theoretical and the practice components, however and wherever delivered.

8 Work has been undertaken collaboratively by 11 different groups of health professionals to produce benchmark statements for their subjects. These statements describe the nature and standards of programmes of study that lead to awards made by HEIs in the UK. As work progressed on them, considerable overlap among the subject statements became increasingly apparent. Accordingly, a common health professions framework began to emerge. This provides, on the one hand, the shared context upon which the education and training of healthcare professionals rests and, on the other, the uniquely profession-specific context within which programmes are organised. This emerging framework helps to define the competencies/proficiencies, approved by the regulatory bodies, to be expected and reflected in the learning outcomes of programmes that provide the focus for major review. Further work is being undertaken on developing an overarching health professions framework and benchmark statements for more health professions.

9 The development of interprofessional learning is an important principle developing from the emerging healthcare professions framework and in line with DH policy. The need increasingly to deliver patient-centred care has helped to bring about a greater emphasis on interprofessional education and training involving joint learning experiences for students training for different healthcare professions. The emphasis on patient-centred care enables advantage to be taken of the opportunities for shared learning across professional boundaries. This represents a significant and ongoing cultural development in healthcare education. It is a requirement of major review that review teams will comment on the breadth and quality of interprofessional learning that is provided by the HEIs and partner placement providers they visit. This will involve direct reference to the emerging health professions framework and in future the overarching health professions framework which is currently being developed.

10 Major review is concerned with higher education programmes in the healthcare professions from pre-registration to post-registration provision. Provision therefore includes undergraduate certificate, diploma and degree, and taught (ie not through programmes of research) postgraduate diploma and master's programmes, as well as the range of short courses that form part of post-registration continuing education. Through the provision of practice placements, NHS Trusts are co-providers of healthcare programmes of higher education.

11 The need to put the service user/patient at the centre of the student's learning experience is widely acknowledged. Major review is a collaborative initiative to assure the quality of healthcare programmes in terms of standards and the professional requirements of a health service designed around the patient. This collaboration results in an integrated quality assurance process involving three stakeholders:

- those professional and regulatory bodies that have a statutory responsibility for ensuring that programmes are adequate to prepare newly qualified practitioners as fit for practice. In addition for some professions, the professional and statutory regulatory bodies have a responsibility for post qualifying courses, for example recordable qualifications;

- the WDCs who are responsible for judging whether programmes are suitable preparation for staff to be fit for purpose;
- HEIs with degree-awarding powers who are responsible for ensuring that programmes produce graduates (or diplomates) who are fit for award.

What are the aims and outcomes of major review of healthcare programmes?

12 The aims of major review are:

- to encourage improvements and facilitate enhancement in the quality of education provided;
- to contribute towards statutory bodies fulfilling requirements for the protection of the public;
- to provide effective and accessible public information on the quality of higher education in the healthcare professions.

13 The outcomes of major review are:

- confirmation that publicly-funded education is of approved quality;
- speedy identification of major shortcomings in the quality of education where they occur, so that rectification can take place;
- judgements about the standards and quality of education that inform funding;
- sharing of good educational practice to encourage improvement in provision;
- published reports that provide accessible public information about the quality of higher education in the healthcare professions;
- used to inform and be informed by on-going quality monitoring and enhancement, and approval, see Figure 1;
- it is anticipated that the Commission for Health Improvement (CHI) review processes will also inform and be informed by major review.

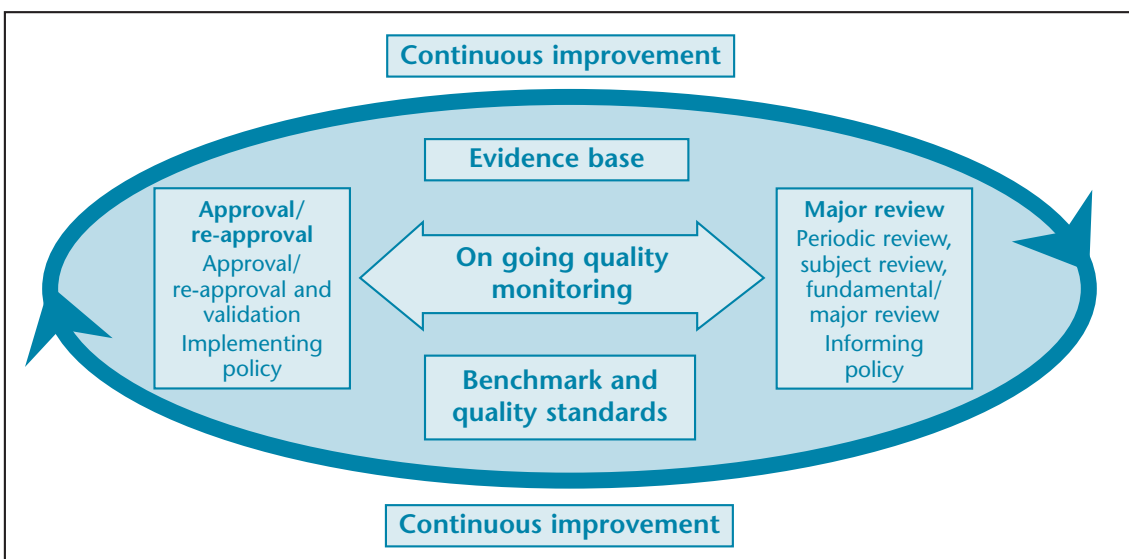


Figure 1 Five Elements of Quality Assurance Framework
(Department of Health 2003)

What does the major review process involve?

14 The DH with its partners is contracting with the Agency to review healthcare programmes. The Agency and the DH work closely with the PSRBs, the WDCs, the practice placement providers and the HEIs to ensure that the approach to review facilitates the integration of the quality assurance processes promoted by each of these key stakeholders. The process focuses on the establishment, maintenance and enhancement of academic and practitioner standards and the quality of learning opportunities for students. Reviews are undertaken by teams of reviewers that include appropriately qualified academics and practitioners (Annex B).

15 This *Handbook* sets out the detail of the review process. The process accommodates the review of practice as well as the theoretical aspects of the programme. It therefore fully recognises the key importance of the learning and teaching that take place within practice settings as well as within campus settings.

16 The major review of healthcare programmes takes account of the Agency's institutional audit process being applied to all HEIs. This process combines scrutiny of internal quality assurance systems at an institutional level with investigation of how those systems operate at the level of the discipline. Whereas major review of healthcare programmes may use the evidence provided by institutional audit reports, it will report independently upon institutional management of standards and quality specifically in relation to the subjects being reviewed. Its reports will be used in annual quality monitoring and enhancement by the principal stakeholder bodies at three levels - the institutional level of management and its impact on the subject; the management of standards and quality in relation to the WDCs; and how the HEI, in partnership with placement providers, meet the requirements of PSRBs.

17 The major review process:

- accommodates a wide diversity of institutional mission and approaches to subjects;
- reflects the core processes of design, delivery, support, assessment and review of programmes of study;
- articulates with an HEI's and partner placement providers' internal processes for the regulation of academic standards and quality;
- articulates with an HEI's and their partner placement providers' processes for meeting the statutory and professional requirements within the healthcare programmes;
- seeks to identify good practice in learning and teaching in the health professions programmes, for dissemination throughout the HE and health services sectors.

18 In preparing their reports and making their judgements, review teams will use evidence provided by the HEIs and partner placement providers. Where possible, that evidence will be produced as part of their internal quality assurance arrangements. The Agency will encourage stakeholders to recognise the mutual value of this evidence base.

19 In the first cycle of major review, there will be a common intensity used across all healthcare programmes. However, where the provision is very extensive and covers a wide range of professional requirements, the review will require greater resources to ensure that evidence-based judgements are securely made. Nevertheless, there is a proper expectation that any system of quality assurance will be as efficient as possible and will consume no more overall resources than necessary. To this end, the method used by the Agency:

- provides transparency of process through the use of qualifications frameworks, subject benchmark statements, the emerging health professions framework, regulatory requirements, programme specifications and the *Code of practice*;

- involves exchange of information between major review and institutional audit processes;
- allows HEIs and their partner WDCs and the PSRBs to discuss the timing of major reviews in relation to their various shared requirements. This makes it possible to align external review with both internal reviews, re-validation/approval and PSRB timetables;
- facilitates alignment of major review with internal processes by spreading the review over a period rather than imposing a 'snapshot' style review visit. Thus evidence from internal processes can be made available to reviewers on request, so that the need for the preparation and assembly of large amounts of documentation in advance of a visit is removed;
- ensures that the amount of time taken to conduct a major review is the minimum necessary to enable reliable judgements to be made;
- draws on evidence provided by audits of the healthcare environment that are concerned with the quality of practice placements.

20 Public confidence in the quality and standards of healthcare education depends on the availability of objective and independent public information about these two interdependent areas:

- reporting on academic and practitioner standards of programme outcomes is concerned with the appropriateness of the intended learning outcomes set by the subject providers (in relation to relevant programme requirements/specifications, subject benchmark statements, qualification levels and the overall aims of the provision); the effectiveness of curricular content and assessment arrangements (in relation to the intended learning outcomes); and the achievements of students;
- reporting on the quality of learning opportunities is concerned with the effectiveness of learning and teaching activities, student progression, the availability and use of learning resources, and staff support for student learning and achievement in campus and practice environments across the programmes in the subject area.

21 The method of major review is centred on the self-evaluation document (SED) produced by the HEI and its partner placement providers. The first task for reviewers is to test, by means of their own observations and analyses, the statements made by the HEI and the partner placement providers in the SED. Secondly, as a team, they will make judgements on the appropriateness and effectiveness of the provision, as outlined above.

Who has an interest in healthcare programmes?

22 DH and WDCs will wish to be assured that the programmes they fund are of approved quality: in terms of academic and practitioner standards and quality of learning opportunities. Judgements made will inform future decisions about funding arrangements and will provide external assurance that provision is fit for purpose, fit for practice, and fit for award.

23 The evidence produced by the review, and used to inform it, will assist the PSRBs to fulfil their statutory duties and responsibilities for assuring the fitness for practice of successful students. The evidence will be in the form of the judgements and commentary contained in the reports. The judgements will address the academic and practitioner standards being applied to the provision being reviewed, and the quality of the learning opportunities available to the students on the programmes. PSRBs will nominate individuals to act as reviewers and so contribute to team judgements.

24 HEIs will be able to demonstrate the effectiveness of their internal arrangements for assuring the quality and standards of health profession programmes. They will be able to do so in a way that is familiar to the HE sector as a whole, using the preparation of the SED as a focus for internal review and to facilitate the enhancement of their provision. HEIs, too, will nominate individuals to act as reviewers and so contribute to team judgements.

25 The WDCs, including their constituent NHS Trusts and other health service providers, will be able to use the information that results from the reviews to identify areas where the Trusts have demonstrated a strong contribution to the learning opportunities available to students, and also where improvements are necessary. WDCs will nominate individuals to act as reviewers and so contribute to team judgements.

26 The NHS Trusts and other health service providers, through the provision of practice placements, are co-providers of healthcare programmes. They will be able to review the contributions they make to healthcare programmes through the availability and quality of effective practice placements. They, too, will nominate individuals to act as reviewers and so contribute to team judgements.

27 All reviewers will only be deployed in teams reviewing provision in which they do not have a direct interest.

28 The public as well as service users and carers have an interest in the independent review of healthcare programmes to provide them with assurance about the quality and standards of provision. Reports on the provision reviewed will be published and will provide information for the public and assurance to them. They will also provide information that encourages continuous enhancement, through the identification both of areas that would benefit from improvement and those that represent good practice. The providers' responses to the review will be disseminated through the publication of action plans.

Preparing for review

What will be reviewed and when?

29 This *Handbook* refers to both subjects and programmes. Within each subject, providers offer one or more of the programmes of study followed by students. Programmes may be offered at different levels (for example, pre-registration diploma, degree or postgraduate) within a single subject. The unit of review is the subject although, normally, a group of healthcare subjects will be reviewed together, particularly where they are linked by joint programmes or by interprofessional learning.

30 The HEIs and their partner WDC/s will be asked to complete a 'scope and activities' information form. This is designed to gather information about the range of subjects offered, the programmes to be included under each subject heading, the estimated numbers of student FTEs for each programme, the other quality assurance activities occurring in the review period and the HEI's and WDC's preferred timing for the review. This advance information provides the basis for further discussions to plan and agree the scope and timing of major reviews for the three-year period.

31 As far as possible, the Agency will seek to accommodate the preferences for the timing of reviews expressed by HEIs and their partners. However, the balance of the Agency's overall workload needs to be maintained across the three years of the programme of major reviews and the overall schedule must take into account the availability of reviewers with appropriate expertise. Where 'scope and activities' responses indicate that a preferred timing is to enable a review to coincide with a scheduled internal review, priority will be given to accommodating such preferences. Particular efforts will be made to accommodate the requirements/activities of the PSRBs and WDCs when decisions are made about the timing of reviews.

How do the HEI and its partner placement providers prepare?

32 An SED must be prepared for each major review. It is central to the process and the most important of the small number of documents made available to reviewers in advance of a review. Guidelines for producing SEDs appear at Annex D. These guidelines are intended to ensure that HEIs and partner placement providers address the relevant issues and include the material needed by reviewers to evaluate the provision accurately. The SED will be required by the Agency normally two months before the start of the review.

33 The SED allows the HEI and partner placement providers to evaluate what they do and why, and the methods they use to fulfil their aims. Reviewers analyse the SED, and then visit the HEI and practice placements to gather the evidence they need to make their judgements. The SED fulfils three main functions:

- It should enable reviewers to see how the HEI and its partner placement providers meet statutory and regulatory requirements, and the extent to which the provision meets the need for an education that is fit for practice (the responsibility of PSRBs), for purpose (the responsibility of WDCs) and for award (the responsibility of HEIs).
- It is intended to encourage the subject providers to evaluate the standards achieved by students and the quality of the learning opportunities offered to them. It provides an opportunity for the staff of the subject providers to reflect on 'what do we do?', 'why do we do it?', and 'why do we do it in the way that we do?'.
- It provides a framework for a process of major review based on the testing and verification of statements made by subject providers. The document should reflect on current provision in a manner that evaluates both strengths and weaknesses, indicates the changes that have taken place since earlier external reviews, and considers what may be necessary to change in the future. It has to be endorsed by the lead WDC, the HEI and their partner placement providers.

34 Reviewers will expect to see evidence of careful self-analysis and the involvement of students and practice staff in the production of the SED. This should involve an evaluation of the perceived strengths of the provision, with reference to the evidence that justifies the statements made, and of weaknesses, where these are recognised. Where weaknesses are acknowledged, the subject providers are expected to discuss the issues and the steps being taken to bring about improvements.

35 Specifications for each of the programmes included must be annexed to the SED in order to make them readily available for reviewers. The Agency has prepared a published document, *Guidelines for preparing programme specifications*, to assist HEIs and partner placement providers. The specifications should provide the core factual information about the programmes, allowing the SED itself to provide a reflective analysis of the provision and its development.

What points of reference are there for the review of academic and practitioner standards and quality?

36 Reference points particular to the healthcare field will support education providers in maintaining the standards and quality of their provision. Taken together with other reference points, these will assist HEIs and partner WDCs to be explicit about the ways in which they assure the quality of the student learning experience and the standards of the qualifications they award. These include:

- PSRB regulations/requirements;
- the emerging shared health professions framework, developed by groups of appropriate specialists and illustrating the shared context upon which the education of healthcare professionals rests. This is being developed to become an overarching health professions framework;
- NHS policies and protocols;
- WDC guidelines;
- National Service Frameworks DH.

37 The Agency, in partnership with the sector, has developed a number of reference points intended to assist education providers to assure themselves, and others, of the standards and quality of their provision. These are:

- *The framework for higher education qualifications in England, Wales and Northern Ireland;*
- *a Code of practice for the assurance of academic quality and standards in higher education;*
- subject benchmark statements;
- programme specifications.

The framework for higher education qualifications

38 *The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ)* sets out the structure in which higher education qualifications are organised. It applies to degrees, diplomas, certificates and other academic awards (except honorary degrees and higher doctorates) and qualifications granted by an HEI. It provides reference points to be used to determine whether the intended outcomes for programmes, and actual student achievement, are appropriate to the level of the qualification awarded. The *FHEQ* helps provide public assurance that qualifications bearing similar titles represent similar levels of achievement.

39 Implementation of the *FHEQ* will take place over the three-year cycle of major review. In making judgements about the provision, reviewers will consider how the HEIs and partner placement providers have all of their provision aligned with the *FHEQ*.

The Code of practice

40 The Agency's *Code of practice for the assurance of academic quality and standards in higher education* (the *Code*) addresses good practice in individual areas of academic management. Those sections relating directly to quality and standards provide HEIs and their partner placement providers, and reviewers, with a background against which judgements can be made. The *Code* is accessible at the Agency's web site and is published in the following sections:

- postgraduate research programmes;
- collaborative provision;

- students with disabilities;
- external examining;
- academic appeals and student complaints on academic matters;
- assessment of students;
- programme approval, monitoring and review;
- careers education, information and guidance;
- placement learning;
- recruitment and admissions.

In view of the importance of practice-based learning in health profession programmes, education providers and reviewers will be expected to pay particular attention to the way in which adherence to the placement learning section of the *Code* is demonstrated.

41 Reviewers will expect institutional systems to have at least an 'equivalent effect' to the precepts recorded in the *Code*. In addition, institutional systems will be expected to meet PSRB requirements. The precepts in the *Code* provide criteria against which reviewers can make their judgements on both subject provision and institutional management.

Subject benchmark statements

42 The benchmarking of standards in healthcare subjects was undertaken by groups of specialists drawn from service providers, HEIs and the PSRBs. Subject benchmark statements have been developed in collaboration with a number of healthcare professions and have so far been developed for 11 of the healthcare professions. Statements are cast within an emerging health professions framework that illustrates, on the one hand, the shared basis upon which the education and training of healthcare professionals rests and, on the other, the profession-specific context within which undergraduate programmes are organised. The format of the statements seeks to reflect these two dimensions. There is further work being undertaken to develop subject benchmark statements for more health professions and an overarching health professions framework.

43 The subject benchmark statements include expectations about the academic standards required for a higher education award and the practitioner standards required for an award that is fit for the purpose of preparing students for the start of their careers in practice. Programmes in healthcare integrate academic and practice elements. This integration will be considered throughout the review process, however and wherever the programme under review is delivered. The benchmark statements can be found on the Agency's web site.

44 It is essential that reviewers use both PSRB standards and benchmark statements as sources of guidance to inform the review process, these standards are encompassed within the benchmark statements. Statutory and professional body requirements should be referred to directly for the purposes of major review. Reviewers will use them as a means of determining whether the intended learning outcomes of individual programmes are appropriate. HEIs and partner placement providers should be able to demonstrate how subject benchmark statements have been used to inform decisions about the intended outcomes of programmes and in calibrating the overall demands of the assessment framework.

45 The Agency recognises that HEIs have their own cycles of programme review, and that it is through these that any changes, to reflect benchmark statements, will come. Reviewers will be sensitive to the challenges that institutions will face in working with benchmark statements for the first time. Nevertheless, they provide an immediate starting point for discussion and reflection within teaching teams, and between teaching teams and reviewers, about the appropriateness of the outcomes of their programmes. Benchmark statements are not set in stone and, over time, they will be revised in the light of feedback from subject communities.

46 For some programmes more than one benchmark statement may be relevant, while in some specialist, innovative or interdisciplinary fields there may not be any statement that is of direct relevance. In such cases, the level descriptors of the overall qualifications framework, and the guidance in the *Code of practice* section on programme approval, monitoring and review, will assist HEIs and their partners in ensuring that their provision meets generally accepted standards for a given level of award. In all cases the HEI remains responsible for identifying and assuring the standards of its awards and for ensuring that they reflect appropriate external indicators. However the partner placement providers of the HEIs also have responsibility for the standards and quality of the awards and qualifications through the practice placements.

Programme specifications

47 To be most effective, programme specifications should become part of an HEI's and partner providers curricular planning, approval and review processes. Preparation of them is an opportunity for teaching teams to reflect on the purposes and intended outcomes of their provision. Programme specifications will be the starting point for reviewers as they seek to understand the intended outcomes and the assessment methods for the programmes under review. The programme specification should make it clear whether a programme is accredited by a PSRB. Relevant PSRB requirements will then provide additional reference points that will be used during the review.

Principles for the conduct of major review

Peer review

48 The reviews will be undertaken by teams of academic and practitioner reviewers who are subject specialists, managed and led by a review co-ordinator. The main responsibility of reviewers is to read, analyse and test the self-evaluation produced by the HEI and partner placement providers, and to gather whatever further evidence they need during selective and focused lines of enquiry to make the judgements described later in this *Handbook*. Academic and practitioner reviewers are trained and briefed by the Agency before taking part in reviews. Further details of their function may be found in Annex B. For a note on the composition of teams, see Annex C.

49 Review co-ordinators are individuals with extensive experience of higher education programmes and quality assurance but are chosen not to be specialists in the subject under scrutiny. Each is provided with training specific to their co-ordinating function and following that, each must attend a one-day briefing on major review. Further details of their function are given in Annex B.

50 Particularly when a single member represents discipline expertise on a review team, there may arise the need for specialist consultation. Accordingly, provision is made for the review co-ordinator to call in an Agency specialist adviser who will give a second opinion on specific aspects of the provision and will advise the team accordingly (Annex F). Depending upon the programmes affected, the adviser may also need to be a Visitor for the relevant regulatory body.

Review against the broad aims of the providers

51 Subject providers should be able to set out clearly the broad aims of their programmes. Such statements should indicate, in general terms, what the subject providers are seeking to achieve, how these aims relate to external indicators such as subject benchmark statements, PSRB, or employer expectations, and the general attributes of its diplomates or graduates. These broad aims will provide the context in which the major review takes place. Accordingly,

the Agency will expect the aims of the provision to be stated at the beginning of any SED and will publish the aims in the major review report. The statement must be sufficiently clear to allow intended learning outcomes to be set that ensure the aims are achieved, and to provide a sound basis for the major review to be planned and carried out. Any PSRB accreditation should be made clear in the SED and programme specifications (see Annex D).

Review over an extended period

52 The available reviewer days are spread over a period of normally six weeks to allow reviewers to gain a better understanding of the subject provision than is possible in a concentrated, 'snapshot' use of the same number of days. This reduces the need to prepare large amounts of documentation in preparation for a single visit. Normally, there will be five visit days in total (common intensity), spread over two or three periods of one and two days. Visits to practice placements will normally be the sole activity on the second and/or third day of the review.

Production of a published report

53 The reports produced from the major review process are public reports of 6,000 - 8,000 words that describe the findings of the team of reviewers. They are the principal documented outcome of the review process and provide the main feedback to the HEI and practice placement providers. Normally, one major review report is published for each major review of nursing, midwifery and health visiting and the allied health professions.

54 A report includes:

- a brief description of the review method;
- the subject provision and overall aims;
- an evaluation of the academic and practitioner standards achieved;
- an evaluation of the quality of the learning opportunities provided;
- maintenance and enhancement of standards and quality;
- a summary of the main review outcomes.

55 A report provides:

- information for the public, who can use it to inform choices about where to study and to have confidence in the quality and standards of the provision. Potential students, employers and other members of the public require clear and concise information about a subject provision that allows them to distinguish between different providers of similar programmes. For this purpose, each major review report contains a summary of the findings and judgements made on both standards and quality;
- information for the PSRBs who can use it to inform the decisions they must take about student fitness for practice and in validating programmes for professional purposes. The report may meet PSRB needs for quality assurance of the provision in the year in which the review takes place;
- information for the WDCs who need to be assured about the quality and standards of the provision being commissioned and its fitness for purpose. WDCs will use the published report as an equivalent to that of a fundamental review or an annual contract review;
- information for the providers, both HEIs and NHS Trusts, who can use it as a basis for enhancing the quality of their provision, ensuring that standards are maintained, and ensuring the fitness for award. The report will meet HEI needs for annual monitoring of the provision in the year in which the review takes place;

- information for the DH which needs to be assured that the provision the NHS is funding is fit for purpose and to demonstrate that those in receipt of public money are accountable for that funding;
- information for prospective partners who may be considering establishing new courses in the health profession field;

56 The publication of a review report is an important stage in the review process, but it is not the final stage. The providers, HEIs and partner placement providers, will prepare an action plan setting out the actions they will take to build on the strengths identified by the review team and to address any aspects in need of improvement. This action plan will provide the focus for on-going quality assurance activities in which the HEIs, WDCs, PSRBs and the DH will have an interest.

How the process works

Major review teams

57 The Agency invites nominations of academic and practitioner reviewers from various stakeholders. These nominees are trained by the Agency and reviewers' names are listed on the Agency's web site. The Agency selects an appropriate review team from this list. The number of reviewers in each team will reflect the size, range and complexity of the education provided. There will normally be up to a maximum of eight reviewers in a team. Review teams will normally include at least one member who is a registered practitioner for each of the subject areas to be reviewed. Where applicable, there will be due regard to Parts of a Register.

58 As far as possible, within the resources available, the Agency will match the expertise of the team with the broad specialisms of the subject provision under scrutiny. The criteria for team composition are given in Annex C. The role of reviewers is set out in Annex B.

Preparation for major review

Liaison between the HEI, partner placement providers and the review team

59 HEIs may nominate a facilitator for each review, the major review facilitator (MRF). The lead WDC will nominate a person performing the strategic leadership role in the WDC for major review, a practice review facilitator (PRF) (see Annex E). The MRF role is liaison between the review co-ordinator, the PRF, the HEI and the practice placement providers. The MRF and PRF will ensure that the team obtains accurate and comprehensive information about the subject provision and its context. The Agency offers briefing sessions for MRFs and PRFs. Further details of the roles are given in Annex E. To ensure that practice placement providers in the partnership are fully prepared for the review, the MRF will liaise closely with the PRF.

Advance planning and the preparatory meeting

60 Advance planning begins with the return by HEIs and partner WDCs of a completed scoping information form sent to them before the start of the review cycle. The Agency will seek mutual agreement for a six-week period within which the review will take place. Once the review period has been agreed, the HEI and WDC partners will know the exact dates of the five days (normally maximum) that will be used for the review visit. These dates are fixed and cannot be changed. The reviewers and review co-ordinator (CR) will be recruited for those dates. Although the Agency will ask the HEI/WDCs to identify a preferred period for their review it may not be possible to accommodate their preference. If this is the case, the matter will then be discussed with the HEI and partner WDCs with a view to reaching agreement on another period. In the absence of agreement, the Agency will notify the providers of the period to be adopted. Providers with large student FTE numbers or a multiplicity of healthcare

programmes may require two reviews. This division will be based on discipline/programme groupings and will be subject to negotiation and agreement with the providers on the exact timing. In the unlikely event of agreement not being reached, the Agency will notify providers of the periods to be adopted.

61 A common approach to planning the major reviews will be adopted. The review co-ordinator will initiate a preparatory meeting with the MRF, subject staff (leaders/managers) and the PRF. An Agency officer may be present. The meeting should take place after submission of the SED, and before the start of the agreed review period. The purposes of this meeting are to establish effective relationships between all parties involved in the review; to agree protocols and responsibilities; and to agree the timetable of events that will make up the review.

Documentary evidence available to the reviewers initially to inform the review

62 Although reviews will take place using a common intensity, past evidence of good or less good practice in the subject provision will be available to the review team (Annex D, Annex G). Such evidence might include, where available:

- data and evidence regarding partnership working;
- reports from PSRBs, such as previous annual monitoring reports;
- subject review reports;
- clinical governance and audit reports.

63 This evidence will assist the review teams to conduct the review efficiently and effectively, targeting their enquiries appropriately. Indicators of a need for improvement, drawn from previous subject review reports, might include:

- recommendations for action;
- issues highlighted for attention;
- grade(s) 2 or below (or equivalent) in subject review graded profile(s);
- evidence that the management of standards and quality is not in line with the expectations of good practice expressed in the *Code*;
- suggestions of differential performance between levels and modes.

Analysis of the SED

64 The review team will use the SED prepared by the HEI and partner placement providers to help to set priorities for and to plan the review. Reviewers will consider whether the broad aims of the provision are clear and whether the intended learning outcomes allow the aims to be achieved. The reviewers will also consider whether:

- the aims are an adequate expression of the broad educational purposes of the provision;
- the aims reflect appropriately any relevant outcomes/competencies/proficiency statements of approved programmes;
- the aims reflect appropriately any relevant subject benchmarks statements;
- there is a clear relationship between the broad aims and the intended learning outcomes.

If the aims, or their relationship with the intended learning outcomes, are unclear, the providers will be asked for clarification.

65 The SED will be checked to see that all sections required (Annex D) have been included. The reviewers evaluate the SED from their specialist perspective. They produce separate written commentaries to provide an analysis of the strengths of the subject that they need to confirm, the initial questions they need to ask, and the points that require further clarification. These commentaries are distributed to all reviewers prior to Day One of the review.

Conducting the review

Testing the self-evaluation and gathering evidence

66 Reviewers assume a collective responsibility for gathering, verifying and sharing evidence that enables them to test statements made in the SED and to inform robust judgements on academic and practitioner standards and the quality of learning opportunities.

67 In general, reviewers will seek to establish that:

- intended learning outcomes are clearly expressed, and that they appropriately meet regulatory and professional requirements, reflect relevant subject benchmark statements and the overall aims of the programme;
- curricular content supports the intended outcomes, and that assessments effectively measure their achievement;
- there is effective communication with students and academic and practice staff, so that learners, practitioners and teachers know what is expected of them;
- there is effective partnership working with practice placement providers, WDCs, and PSRBs.

68 The review method addresses:

- subject provision and aims;
- academic and practitioner standards:
 - a learning outcomes;
 - b curricula;
 - c assessment;
 - d student achievement;
- quality of learning opportunities;
 - a learning and teaching, including strategies for establishing, supporting and monitoring appropriate practice-based learning environments;
 - b student progression;
 - c learning resources and their effective utilisation;
- maintenance and enhancement of standards and quality.

69 Reviewers gather evidence through a combination of scrutiny of documentary evidence, direct observation, and meetings with key stakeholders. The review co-ordinator is responsible for ensuring that the review team meets sufficiently often to consider the accumulating evidence and the team's findings. The MRF will normally attend these meetings. However, the MRF may not attend team meetings or parts of meetings at which direct discussion of judgements takes place.

70 Documentary evidence includes items listed in Annex G. Reviewers will consider external examiners' reports from the three years prior to the review, and will themselves sample student work. The balance between reliance upon the reports of external examiners and direct sampling of student work will depend on the confidence that reviewers have in the external examining arrangements of the HEI. The section of the *Code* on external examining will provide a point of reference.

71 Review teams will visit a number of practice placements (Annex H) in order to enable them to make judgements about the overall quality of the learning and teaching environment. The practice settings visited and questions raised will reflect strengths and weaknesses highlighted in the SED. The review co-ordinator will ensure that, for each profession, placements deemed suitable by the reviewers are visited.

72 Although all reviews will involve visits to practice placements and other learning environments, reviewers may not need to make direct observations of campus and practice based teaching where subject providers can provide evidence of good quality delivery. Such evidence is likely to come from internal peer review; from student questionnaires and other arrangements for gathering feedback; from the deployment of learning resources; and from student performance in assessments. Direct observation of teaching will be required if:

- there are issues that reviewers feel would be best addressed by such observation;
- there is insufficient other evidence that effective delivery is being achieved; or
- there are indications that the learning opportunities for students are less than satisfactory.

A guidance note on the observation of teaching is at Annex I.

73 Each review includes a number of meetings between members of the HEI and partner providers and reviewers to consider the various aspects of provision related to standards and quality. The views of current and recent past students and employers (WDCs, NHS Trusts, and other partner placement providers) are important. These are recorded in meetings to enable reviewers to establish:

- the students' understanding of the overall aims and intended learning outcomes;
- their responses to the teaching and learning experiences they have experienced;
- their and the employers' views about the appropriateness of the curricula;
- views on academic and practice support and the resources available;
- feedback about the courses and the learning opportunities in practice;
- how the views of students and employers are represented and responded to.

The MRF and the PRF do not attend meetings with students and employers but may be consulted about the issues raised by the students/employers. Arrangements for meetings with current and past students and employers are set out in Annex J. The reviewers may also seek the views of former students, their employers, and representatives from relevant organisations or professions.

74 All reviewers are expected to identify, share, consider and evaluate evidence related to the programmes under scrutiny. Reviewers should keep notes of all meetings with staff and students, of their observations, and of comments on the quality of students' work and its assessment. Notes should be analytical rather than merely descriptive, should summarise strengths and weakness and refer to sources of information. Notes are circulated within the review team and collated by the review co-ordinator. These notes will form part of the collective evidence base on which judgements are based. Circulation of the notes is via the Agency's confidential web folders.

75 Team meetings are used to review the evidence gathered, form preliminary judgements, identify good practice, and determine which issues require further exploration. Discussion of the emerging judgements must involve the whole review team. Discussion also takes place through the web folder - each major review has a specific folder on the Agency's communications system for the use of the review team.

76 At the end of the review period, a final judgement meeting of the review team will be held, led by the review co-ordinator. The MRF will not attend this meeting. Following the meeting, the HEI and partner placement providers will be given informal feedback about the reviewers' findings and the judgements reached. A letter to the HEI and lead WDC will confirm these judgements within two weeks of the final judgement meeting. Judgements should remain confidential to those parties involved until the review report is published.

What judgements do review teams make?

Judgements on academic and practitioner standards

77 Reviewers will make a judgement about the academic and practitioner standards set and demonstrated in the programmes for each of the health professions offered by a provider. The issues that reviewers must address in order to make these judgements are described in greater detail in Annex D. Subject benchmark statements represent general expectations about standards in a discipline, particularly in relation to intellectual demand and challenge. Issues of interprofessional learning are also addressed in the benchmark statements and the health professions framework. The *FHEQ* sets expectations for awards at a given level more generally. Reference points are provided to assist reviewers in determining whether the provision is meeting the standards expected by the subject and professional communities, for awards of a particular type and level.

78 The reviewers will consider:

- whether there are clear aims and learning outcomes that have been set appropriately in relation to the *FHEQ*, regulatory requirements, the relevant subject benchmark statements, the health professions framework and the relevant professional requirements;
- whether the curriculum is designed to enable the intended outcomes to be achieved;
- whether assessment is rigorous, equitable and consistent in measuring achievement of the outcomes; and
- whether student achievement matches the intended outcomes and the level of the qualification.

79 In the light of this, review teams will state whether they have:

- confidence in academic and practitioner standards: a judgement that is made if reviewers are satisfied with current standards and with the prospect of those standards being maintained into the future. A judgement of limited confidence is made if standards are being achieved but the reviewers have doubts about the ability of the HEI and partner placement providers to maintain them into the future; or
- no confidence in academic and practitioner standards: a judgement that is made if arrangements are inadequate to enable standards to be achieved or demonstrated. If a failure to achieve standards has occurred in specific programme/s and/or mode/s and/or level/s only, and there is confidence in standards at other levels, the failing programme/s mode/s level/s will be identified separately.

80 If the intended learning outcomes are found not to match expectations, it is unlikely that reviewers will have confidence in the standards of the provision. An example of potential failure is when a postgraduate programme has learning outcomes set at an undergraduate level only. If a significant number of the intended learning outcomes are found not to be supported by the curriculum, it is unlikely that reviewers could have confidence in the standards of the provision. If significant intended learning outcomes appear not to be assessed, or if there are serious doubts about the integrity of the assessment procedures, it is unlikely that reviewers could have confidence in the standards of the provision. Reviewers will take account of the section of the *Code* on assessment of students.

81 Where an expression of 'limited confidence' in academic and practitioner standards is made, reviewers must identify in what respect the HEI and partner placement providers need to take action to safeguard standards. The HEI in partnership with the placement providers will then be asked to prepare immediately a short-term plan, for implementation over the following three months. It will be used and monitored by the NMC and/or HPC, WDCs and the HEI, as well as by the Agency.

82 If a judgement is made that standards are not being achieved, there will normally be a further major review by the Agency within one calendar year. If standards continue not to be achieved, funding is potentially at risk. Decisions about funding are not within the remit of the Agency. Where regulatory requirements are identified as not being met, mechanisms are in place to promptly inform the relevant statutory body.

Judgements on the quality of learning opportunities

83 Judgements about the quality of learning opportunities offered to students are made against the broad aims of the provision and the intended learning outcomes of the programmes. This part of the major review process focuses on the learning opportunities on campus and in the practice placements that enable students to achieve the academic and practitioner standards. Normally, all provision will be covered by one set of composite judgements about the quality of learning opportunities. However, where the quality of provision differs across programme, mode or level, then separate judgements will be reported. This is designed to ensure that there is no averaging of overall performance that could conceal good practice deserving praise or shortcomings that require attention.

84 Reviewers consider:

- the effectiveness of learning and teaching, wherever and however it takes place - in relation to curriculum content and programme aims;
- student progression - the effectiveness of recruitment, and of support for students during their learning, and the extent to which they progress successfully to complete their programme;
- learning resources and their effective utilisation - the adequacy of the library, equipment, accommodation, placement facilities, skills laboratories, and the effectiveness of their use by students; the qualifications and adequacy of the academic and practitioner staff resource.

85 Each of these three categories is judged as either:

- commendable - the provision contributes substantially to the achievement of the intended outcomes, with most elements demonstrating good practice; or
- approved - the provision enables the intended outcomes to be achieved, but improvement is needed to overcome weaknesses. The summary report will normally include a statement containing the phrase 'approved, but...', which will set out the areas where improvement is needed; or

- failing - the provision makes a less than adequate contribution to the achievement of the intended outcomes; significant improvement is required urgently if the provision is to become at least adequate.

86 Where the review covers provision in two or more professional areas, separate judgements will be made on the academic and practitioner standards for each of those benchmarked areas. If the reviewers have no confidence in the standards achieved, or if they find that any element of the quality of learning opportunities on campus or in practice placements is failing, then the provision in that professional area will normally be subject to a further formal review within one year. It follows that all provision that is not failing is approved. The report of the review will state whether or not provision in each professional area is approved. Where regulatory requirements are identified as not being met, mechanisms are in place to promptly inform the relevant statutory body.

Good practice in teaching and learning in healthcare programmes

87 Review teams have the opportunity to identify good practice in any of the settings under scrutiny. The good practice:

- should be directly linked to the teaching and learning supporting programmes under scrutiny;
- could be of an innovative nature but it also could be ordinary practice that is undertaken very well;
- should be commented upon and noted within the relevant section/s of the academic and practitioner standards and/or quality of learning opportunities.

88 Review co-ordinators need to be kept informed by the reviewers and to ensure the review team has robust evidence for the identification of good practice. Good practice will be commented upon in the summary of the report.

89 Good practice will be monitored in a number of ways. Firstly, as the review reports are drafted the frequency and nature of the good practice will be recorded. Secondly, during visit support any reference, discussion and agreement on good practice by the review team will be noted. Thirdly, an analysis of the action plans produced after a review will be undertaken to identify how the good practice is used, further developed and disseminated.

90 A formal analysis of the types, number and characteristics of good practice will be undertaken as part of the annual review trends report.

The Major Review Report

91 In all cases, major review reports will contain a narrative commentary on the strengths and weaknesses that reviewers have identified in the provision. Sections of the draft report will be written by the reviewers and edited by the CR. There will be sections devoted to each element of the judgements made about standards and quality of learning opportunities, together with a brief summary of the evidence upon which these judgements are based (see Annex D).

92 Reporting on standards takes account of the education in both theory and practice with reference where appropriate to the relevant regulatory and professional requirements, sections of the *FHEQ*, the *Code*, the health professions framework and subject benchmark statements. The narrative may identify good practice wherever it occurs, matters for particular commendation and matters of concern, together with the ability of the HEI and partner placement providers to maintain standards into the future. Good practice may include both innovative features and ordinary ones that are being done particularly well. Reporting on the quality of learning

opportunities in the campus and practice environment takes the form of a narrative commentary evaluating each of the three elements of provision in both campus and practice placement settings, learning and teaching, student progression and learning resources and their effective utilisation. The commentaries will identify particular strengths, weaknesses, and areas of good practice, and will conclude with the reviewers' judgements.

93 The section on the maintenance and enhancement of standards and quality will be a narrative commentary, considering the effectiveness of the partnership between the HEI and practice placement providers; fitness for purpose of the quality assurance processes at the subject level; the partnerships between the HEI and their WDC/s and finally, the effectiveness of the relationship between HEI and their partner placement providers with the PSRBs.

94 The HEI/lead WDC receives a copy of the draft report. The HEI is responsible for appropriate liaison with placement providers for comment on matters of factual accuracy. Feedback about the review is provided to the HEI, the WDC/s and their partner placement providers through the draft report. The Agency aims to publish reports, on its web site, within 20 weeks from the end of a review.

95 Prior to the publication of reports, the HEIs and WDCs will prepare an action plan setting out the actions they will take to build on the strengths identified in the report and to address any aspects in need of improvement. The action plan will be published as part of the report, it is the responsibility of the MRF and PRF to ensure all partners have agreed and signed off the action plan. Where appropriate, the PSRBs should be involved in the action plan. The plan should be reviewed internally following normal quality assurance procedures of the HEIs. The PSRBs, the WDCs, the partner placement providers and the HEIs will make use of the action plan as well as the review report in their ongoing monitoring. The Agency will draw on both documents for the institutional audit and they may be used by other organisations such as the Commission for Health Improvement (CHI). DH will examine the reports to identify the themes which will inform the annual review trends reports.

Annual review trends report

96 At the completion of each annual schedule of reviews, an annual report of emerging trends will be produced and published. This report is designed to record the findings of the review teams and to promote best practice. It will focus on:

- learning gained about standards and learning opportunities across the sector during the conduct of major reviews;
- subject-specific issues arising in each of the healthcare professional areas;
- good practice identified and of value for dissemination through the sectors.

In the light of these reports, the subject communities will consider any amendment they may deem necessary to the subject benchmark statements.

Annex A: Provision covered by this Handbook (in the first instance)

The intention of the contract between the Agency and the Department of Health is to review all pre-registration, post registration and CPD taught programmes (in nursing, midwifery, health visiting, allied health professions and other healthcare professions) where the NHS funds the majority of the provision. Additionally, intermediate award bearing taught programmes will be included.

Dietetics	2003-2006
Health Visiting	2003-2006
Midwifery	2003-2006
Nursing	2003-2006
Occupational Therapy	2003-2006
Orthoptics	2003-2006
Physiotherapy	2003-2006
Podiatry (Chiropody)	2003-2006
Prosthetics and Orthotics	2003-2006
Radiography (Diagnostic and Therapeutic)	2003-2006
Speech and Language Therapy	2003-2006
Other subjects to be decided	

Annex B: Academic and practitioner reviewers

The Agency operates an equal opportunities policy. All those wishing to be reviewers will be considered on the basis of their ability to meet the specifications outlined below.

Introduction

- 1 There are two types of reviewer used by the Agency:
 - academic and practitioner reviewers, with current teaching experience in the discipline concerned, or experience of relevant professional or occupational practice;
 - review co-ordinators, who lead major review teams, and have extensive experience of quality assurance and approval of higher education programmes, usually gained by working with such procedures in more than one discipline.

Qualities required in all reviewers on completion of the major review training programme

- 2 Effective reviewers will possess the following qualities:
 - an enquiring and sceptical disposition;
 - powers of analysis and sound judgement;
 - personal authority and presence coupled with the ability to act as an effective team member;
 - good time management skills including, in the case of academic reviewers, experience of chairing meetings effectively, chairing small groups, time management and leadership, and in the case of practitioner reviewers, experience of clinical supervision or mentorship;
 - the ability to make appropriate judgements in the context of complex institutions/organisations different from their own;
 - experience of organisation and management, in relation to teaching and learning matters and/or patient/client care;
 - a high standard of oral and written communication, preferably with experience of writing formal academic or patient/client care reports to strict deadlines;
 - demonstrable commitment to the principles of quality assurance in higher education and/or in the practice learning environment.
- 3 In addition, reviewers are expected to have a clear knowledge and understanding of the Agency's whole review process, a reasonable acquaintance with all published sections of the *Code*, and a detailed working knowledge of those sections of the *Code* that are the subject of regular consideration in reviews. A sound knowledge of the section of the *Code* on placement learning, as well as the PSRBs' requirements, is necessary.

Selection, training and role of academic and practitioner reviewers

4 Academic and practitioner reviewers are selected by the Agency from individuals nominated by HEIs, NHS Trusts, other service provider organisations, WDCs, the HPC, professional bodies, the NMC, and from individuals who reply to advertisements, according to the criteria identified (the person specification is available on the Agency's web site). The Agency prefers to select reviewers who are available for the entire review period (2003-06), but will also consider shorter involvement under some circumstances. Depending upon the major review requirements, those meeting the specifications at the appropriate level will be invited for training at a suitable point in the review method. Reviewers are selected and trained to ensure that they are capable of carrying out their duties effectively. In particular, academic and practitioner reviewers who undertake reviews should:

- hold current registration for a profession subject to review;
- possess the knowledge and skills set out in detail below;
- have completed successfully the Agency's training programme. The co-ordinating reviewers and QAA officer will judge this at the end of the training using the qualities outlined above. Normally, applicants will have only one training opportunity;
- ensure that they are available for the specified dates and report drafting required for a review for which they have been selected;
- potentially be available for up to three reviews per year;
- be able to access a computer, manipulate documents and have an understanding of the internet and email.

Training of reviewers is carried out by the Agency by means of three-day (presently residential) courses. The Agency will pay all travel and subsistence expenses incurred by reviewers, in line with its published travel and subsistence arrangements. It will pay fees at an agreed rate for each review but not for reviewers' mandatory attendance at training courses. The Agency evaluates the performance of all reviewers, using feedback from review visits to compare with the qualities required (paragraphs 2 and 3).

5 As far as possible, the Agency ensures that the combined experience and expertise of the reviewers on its list reflects the range of the subject provision in the healthcare professions on offer across the NHS/HE sector. The Agency's list of reviewers shows, for each reviewer, the main subject discipline areas that s/he is qualified to review and their professional qualifications.

6 The key purpose of acting as a reviewer is to contribute to the maintenance and enhancement of standards and quality of learning opportunities in healthcare education by reporting to the Agency and stakeholders on the standards and quality of the educational programmes scrutinised during major reviews. Reviewers are expected to agree individual timetables of activity with the review co-ordinator, with a view to making the most effective contribution to the review. The responsibilities of reviewers include:

- reading and analysing the SED prepared by the HEI and partner placement providers and any other documentation sent in advance of a review;
- participating in visits to the subject providers in order to gather, share, test and verify evidence;
- making team judgements on the academic and practitioner standards achieved and the quality of the learning opportunities provided;
- contributing draft sections to and commenting on the compilation of the report of the review and keeping all documentation until the review report is published.

The Agency not only tries to ensure that the particular qualifications and experience of individual reviewers are relevant to the reviews they undertake, but that, over time, each reviewer works in a variety of teams scrutinising a range of institutions.

7 In particular, academic and practitioner reviewers:

- review and evaluate the curricular contents and their suitability for achieving the academic and practice learning outcomes;
- review and evaluate the assessment processes designed for the programmes and determine whether they are suitable to assess theory and practice learning outcomes as stated in the programme specifications;
- judge the overall standards for subjects and the procedures associated with their maintenance and enhancement;
- review and evaluate overall student achievement, including progression to employment;
- review and evaluate the contribution made to student achievement by the opportunities for learning in both campus and practice environments. These include the quality of teaching; meeting the PSRB requirements; support to ensure the effective progression of students; and learning resources, their deployment (including staffing) and the effectiveness of their use by students;
- contribute to the compilation of a report to the Agency. Each reviewer will be expected to write various sections of the report in an evaluative narrative form, and comment on the whole;
- reviewers are expected to use sensitive information properly and to have due respect for confidentiality. Information gathered while working for the Agency should not be used for commercial or personal gain, or otherwise misused.

Reviewers must ensure that they:

- respect confidential information;
- are responsible and professional in using and allowing access to information on staff, reviewed organisations and others;
- use information in line with the principles of the Data Protection Act 1998;
- report to their review co-ordinator anyone, whether a member of staff, the public or other, who attempts to put pressure on them for access to information to which they are not entitled.

Knowledge and skills required of academic and practitioner reviewers

8 To carry out the role outlined above for each review, reviewers will need to demonstrate:

- experience, knowledge and understanding of the professional and practice environment and/or higher education;
- personal credibility in the subject area with peers in the professional and practice environment, or in UK higher education;
- ability to assimilate a considerable amount of disparate information, and to analyse and draw reliable conclusions about complex provision;
- ability to identify, plan and follow lines of investigation to meet a task specified by a major review team, using a variety of sources, including documentary and oral evidence, in order to draw secure conclusions;
- post-qualification experience (normally five years) of providing teaching and learning in higher education; and/or a similar breadth of experience of the professional or practice environment, combined with a familiarity with healthcare education teaching and learning;
- in the case of reviewers working in the HE sector, current experience of delivering teaching, supporting learning, and examining at level H or M within the subject area; of working with programme specifications written for programmes in the subject area;

- familiarity with support strategies and the functions of academic and/or practice tutorial support;
- experience of examining (and preferably of external examining). Assessment of practice is considered appropriate experience;
- knowledge of the quality assurance processes employed by institutions providing higher education and/or practice placements;

Knowledge and understanding within the subject area

- knowledge and understanding of the requirements of PSRBs;
- knowledge of the subject benchmark information produced for programmes within the relevant subject area;
- familiarity with the subject matter of the self-evaluation, the programme specifications written for the subject area, the initiation and development of practice placement provision;
- familiarity with comparable programmes and standards of awards in other HEIs and partner placement providers;
- understanding of external examiners' and assessors' reports and internal documentation;
- understanding of programme learning outcomes;
- understanding of the context in which provision is delivered;
- understanding of health and social care policy;

Skills

- ability to conduct meetings and interviews with staff in a collegial manner;
- ability to conduct meetings with a range of current and former students in groups in a respectful and non-inquisitorial manner;
- ability to write succinctly, coherently, quickly and to deadlines;
- ability to meet exacting timescales and deadlines;
- ability to work effectively as a member of a team.

Selection, training and role of review co-ordinators for major review

9 Review co-ordinators must possess extensive experience of the assurance of standards and quality of healthcare programmes. They will be expected to perform a number of duties, of which managing reviews and writing reports are the major responsibilities. Opportunities to contribute to other activities such as editing reports from other reviews, training reviewers and producing annual review reports may also be available.

10 Because of the relative complexity of the review co-ordinator role, induction into the role for major review will include attendance at, and participation in, at least one reviewer training programme, as well as shadowing an experienced review co-ordinator during a major review, and attendance at workshops and conferences arranged by the Agency. All review co-ordinators will have one day's further briefing for major review. The Agency will pay all travel and subsistence expenses incurred by review co-ordinators during induction and training, in line with the Agency's published arrangements. Fees will also be paid for review co-ordinator induction and training.

11 With the exception of secondees, review co-ordinators should normally be available to manage up to six major reviews per year. Reviews take place throughout the academic year and within six-week periods. Review co-ordinators will need to organise their time, and to reach agreement with their teams of reviewers, about the pattern of review activities in such a way as to ensure effective use of the time available.

12 All major reviews consist of four main activities:

- preparation for the review;
- visits to the subject providers, including practice learning environments;
- analysis of documentary evidence;
- report writing.

The review co-ordinator is responsible for maintaining an overview of the range and balance of these activities, and for helping the reviewers to apportion their time effectively. The achievement of an appropriate balance between the various activities requires planning in advance of the review and co-ordination throughout; above all, the activities must enable the team to develop a robust evidence base on which to make judgements.

Knowledge and skills required of review co-ordinators

13 In order to carry out their role, review co-ordinators will need to demonstrate:

Knowledge and understanding of HE programmes

- recent knowledge and understanding of current issues;
- awareness of current teaching methods and curricula;
- knowledge and understanding of the assurance of standards and quality;
- experience of liaison with senior management and staff at other levels;

Skills

- ability to manage small teams, with experience either in higher education or in the professional and practice environments;
- ability to work within tight timescales and to strict deadlines;
- ability to lead a team of experts;
- ability to communicate effectively in face-to-face interaction;
- ability to produce clear and succinct reports to time;
- experience of word processing.

14 The essential qualities outlined above might be reinforced by experience of a wide range of teaching higher education programmes, and/or by experience of contract review, programme accreditation by professional or statutory bodies, programme approval or validation events, quality audits, quality assessment/subject review or inspection.

15 In major review, review co-ordinators need to demonstrate an awareness of the context of healthcare education in England. They need to have an appreciation of the unique contribution of each reviewer, whether from an academic or a practice background.

Annex C: Major review teams

Team composition

1 Each review team reflects the nature and scope of the subject provision. The number of academic and practitioner reviewers in each team reflects the size, range and complexity of the education provided. As far as possible, the Agency matches the collective expertise of the team with the broad specialisms of the subject provision, taking account also of the specific needs of PSRBs and WDCs. Using its list of nominated reviewers, the Agency will propose a major review team to an HEI and the lead WDC before the review starts. Account is taken of conflicts of interest declared by reviewers. Any person nominated who is in partnership with the HEI and/or placement providers under review will be treated as having a conflict of interest for the purposes of that review and will not participate as a member of the team.

2 HEIs and the lead WDC are invited to comment on the composition of teams and to confirm their agreement in writing to the Agency within four weeks of notification, having taken account of the views of practice placement providers. Any concerns about the suitability of reviewers should be discussed with the Agency as soon as possible after notification and, if not resolved satisfactorily, put in writing to the Agency.

3 The average team of reviewers consists of the review co-ordinator and six academic and practitioner reviewers. The maximum is eight reviewers. The precise number of reviewers depends on the number of professions represented in the provision under review, and the breadth and complexity of programmes offered.

Team function for major review

General matters

4 Reviewers focus their attention on the subject and only address institutional matters when they have a direct bearing on the student learning process. It is, however, important that review co-ordinators ensure that matters related to institutional function that come to their team's attention are reported, thereby making them available to reviewers who carry out institutional audit. For example, reviewers might collect information relevant to institutional practices on external examining when considering assessment practices in relation to a subject.

5 Reviewers assume a collective responsibility for gathering and verifying evidence in relation to academic and practitioner standards, but may concentrate individually on specific matters in relation to the quality of learning opportunities. All judgements are, however, made **collectively**. For the benefit of other team members, reviewers may be asked by the review co-ordinator to produce brief written commentaries based on the self-evaluation and the evidence gathered during the review. These commentaries should make full reference to the aims of the subject provider and identify matters for which additional evidence is required. They will inform the team's priorities, the balance of activities undertaken and the collective judgements made.

Team meetings

6 At the first meeting of the team, the following matters will be considered:

- questions arising from the SED and any other documentation supplied by the subject providers prior to the review;
- the scope and nature of the provision and identification of the main matters for review and judgement;
- the role of the MRF and the PRF in relation to the conduct of the review;

- confirmation of the allocation of individual responsibilities among members of the team;
- confirmation of the activities arranged by the review co-ordinator at the preparatory meeting, both on campus and in practice settings.

7 A team meeting will be the first event when the team gathers for its first visit to the subject provider. It can take place either at the institution or elsewhere, but will be followed by meetings with the subject providers as arranged by the review co-ordinator at the preparatory meeting. Subject provider representatives, if they wish, may make a brief presentation about the provision to be reviewed, and to inform the team of any developments since the SED was written. If appropriate, student representatives may participate in this meeting.

Team visits

8 The review co-ordinator discusses the content of each of the review visit days with the Agency and will notify it of any concerns about their use.

9 Reviewers visit the institution within the agreed days of the six-week period agreed for the review, but always by mutual agreement with the subject providers and within the overall number of reviewer days allocated by the Agency. This may involve the team visiting together, as for Day One of the review with the subject providers, or it may involve two or more reviewers visiting for specific observations or meetings. Review teams do not, however, arrange for individual reviewers to visit any part of the provision alone.

10 Each major review will include a number of meetings between members of the HEI, practice placement providers and reviewers to consider the various aspects of provision related to standards and quality. The review co-ordinator is responsible for ensuring that the team considers the accumulating evidence and comes to conclusions.

11 Telephone or email contacts between the CR and the MRF may be used to request information or to give notice of issues that the reviewers might wish to explore.

12 All reviewers will be expected to identify, share, consider and evaluate evidence related to the programmes under scrutiny. Reviewers should keep notes of all meetings with staff and students, their observations, and comments on students' work and its assessment. Circulation of these notes within the team will help develop a collective evidence base on which the judgements can be made. Reviewers will be expected to evaluate how the accumulating evidence compares with the evidence provided by the subject providers in the SED, and to test the strength of the evidence adduced to support the judgements. Discussion of the emerging judgements must involve the whole review team.

13 During the course of the review, academic and practitioner reviewers will draft evaluative summaries of the strengths and weaknesses of theory and practice for every section of the report, referring to all relevant external points of reference. The summaries will focus on the evaluation of evidence in relation to the providers' claims about the standards and quality of the programmes. Summaries should be analytical rather than descriptive and will underpin the judgements made. A final meeting of the reviewers will be used to review any additional evidence, to agree and finalise the judgements, and to determine precisely what is to be reported.

Reports

14 The review co-ordinator produces the first draft of the report immediately after completion of the review, from the written drafts prepared by reviewers. This draft is then checked by reviewers for factual accuracy and affords an opportunity for further comment before the report is despatched to the HEI and partner placement providers. As the reports provide the main feedback about reviews to HEIs and partner WDCs, it is particularly important that teams check their accuracy carefully.

15 The published report is the main documented outcome of the major review process. Publication should take place by 20 weeks from the end of a review. Reports should be characterised by succinct, accurate writing and a clear, consistent style. The evidence base must be sound, and must be recorded accurately by reviewers.

Practical arrangements for reviewers

16 Practical arrangements made by the Agency for reviewers include:

- hotel accommodation, where this is required;
- travel and subsistence reimbursement;
- advice and support for the use of web folders (an electronic system for communication about an individual review) and email.

17 Reviewers will need to have access to computer facilities suitable for word processing and for the electronic transfer of written summaries. The equipment must be compatible with that of the Agency so that reviewers can access the designated web folder for the visit. Reviewers must conform to procedures described in the IT guidelines supplied to them by the Agency, as these are designed to protect against damage and computer viruses.

Annex D: Guidelines for producing self-evaluation documents for major review and for reviewers

Introduction

1 These guidelines have been prepared to help HEIs and their partner placement providers prepare self-evaluation documents (SEDs). The guidelines set out the kind of questions reviewers will ask. They aim to assist the HEIs and partner placement providers to prepare SEDs that provide an adequate basis for the review. In this form, they also will provide guidance to reviewers, giving them prompts to assist their analysis of the SED prior to the review, the collection of evidence during the review, and in writing the review report.

2 The guidelines are neither prescriptive, nor exhaustive. Reviewers will use the SED in any reasonable form, provided the information is adequate to enable them to plan and conduct the review. The evaluation of the subject provision in the SED should not exceed 8,000 words in length. However, word limits may be treated as guidelines rather than as inflexible requirements.

3 An SED is a statement demonstrating that the subject providers have responded effectively and in a constructive, self-critical manner to the following questions:

- How appropriate are the academic and practitioner standards that have been set for the programmes being delivered?
- How effective is the curriculum in delivering the intended outcomes of the programmes?
- How effective is assessment in measuring attainment of the intended outcomes?
- To what extent are the intended standards and outcomes achieved by students?
- How are students admitted; how well are they supported by staff; how well do they progress; and what proportion complete their programmes?
- To what extent does the quality of the learning opportunities provided and the effectiveness of their use by students support the achievement of learning outcomes?
- How effective are procedures for the management and enhancement of the quality of the provision?
- How effective are procedures for the management and enhancement of partnership arrangements?

4 SEDs must address all aspects of the provision, including arrangements for monitoring it on campus and in partner practice providers. Reviewers will explore whether the SED:

- illustrates how internal HEI and partner placement providers processes play a full part in assuring academic and practitioner standards and support continuing improvement;
- supports a clear statement of the overall educational aims;
- identifies how interprofessional learning opportunities are being implemented and developed;
- informs institutional, PSRBs' and WDCs' quality assurance processes;
- gives a self-critical account of known strengths and perceived opportunities for enhancement of both campus and practice provision;
- identifies the issues associated with any weaknesses and shows that the steps being taken to bring about improvements are openly discussed and reported;
- demonstrates the benefit to the current provision from changes that have taken place, such as modifications made internally to approved programmes and considers changes that may be necessary in the future;

- confirms that supporting information, both quantitative and qualitative, is already available or that steps are being taken to develop a comprehensive evidence base in the near future.

5 Therefore, the SED should discuss both the strengths and weaknesses of the campus and practice placement provision. The document is an opportunity to demonstrate how the strengths of the provision identified in previous subject reviews, monitoring or approval/re-approval events have been built upon, and how any weaknesses identified have been addressed. The providers are well advised to involve subject staff, students and practice staff during the writing of their SED. Reviewers are looking for evidence of the:

- systematic development of the learning outcomes to ensure their continuing relevance;
- regular review of curricula content, assessment arrangements and student achievement in relation to programme learning outcomes;
- continuing improvement in both campus and practice learning and teaching;
- support that enables students to progress;
- effective provision, updating and use by students of the learning resources.

Reviewers will give credit for appropriate remedial plans that address effectively any acknowledged weaknesses and will expect to see examples, from the past two or three years, of how internal processes have resulted in enhancement. As it will necessarily address practice learning, partner placement providers who are involved with the provision should endorse the SED. The practice review facilitator and the major review facilitator have the joint responsibility to ensure this formal signing off by all partners is accomplished and incorporated into the SED.

6 Major review involves reviewers testing and verifying statements made in SEDs, thereby arriving at team judgements on standards and quality. This process places the SED at the centre of the review. A high quality, reflective document that draws upon robust internal review procedures is likely to lead to a review that places a minimum burden on the institution. An inadequate document that is poorly organised and descriptive rather than evaluative, will leave reviewers needing to gather for themselves a far greater proportion of the evidence they will require to make their judgements. This will result in a review that may prove more burdensome to the subject providers.

7 SEDs should commence with a short statement of the range of the provision being reviewed. Factual material provided in the programme specifications need not be repeated in the document.

8 A flexible approach should be taken to preparing and presenting SEDs to accommodate the range and potential complexity of subject provision. For example, some subjects may well contain large numbers of programmes, while some programmes may be part of complex modular schemes. Where a number of professional areas are included in the review, the HEI and partner placement providers should distinguish the strengths and weaknesses of each in its SED. The subject providers may wish to present a short overview dealing with its approach to the health professions as a whole.

9 Where subject provision is offered within a wider, multidisciplinary framework, general information about the framework and the main pathways within any modular structure should be included in an annex to the SED. In this case, an introductory overview of the approach to the provision as a whole may be appropriate.

10 SEDs should be structured to address:

- Overall aims of the subject provision;
- Evaluation of the subject provision:
 - a Academic and practitioner standards:
 - learning outcomes;
 - curricula;
 - assessment;
 - achievement of learning outcomes by students.
 - b the quality of learning opportunities:
 - learning and teaching;
 - student progression;
 - learning resources and their effective utilisation;
 - c maintenance and enhancement of standards and quality.

and should have annexed:

- a programme specification for each programme in the subject(s) under review;
- information about relevant modular structures or collaborative arrangements;
- information about practice placement provision;
- student progression data.

It is important to note that the reviewers will differentiate between subjects (Annex A) when writing their reports. They also differentiate between subjects when making judgements in relation to standards, though not in relation to making judgements of the quality of learning opportunities. The SED should address key points of difference between subjects.

11 When drafting an SED, subject providers may find it helpful to refer to:

- the precepts in those sections of the *Code* relating directly to quality and standards (www.qaa.ac.uk/public/cop/codesofpractice.htm);
- the section of the *Code* on placement learning and other guidance published by the PSRBs (www.qaa.ac.uk/public/cop/copplacementFinal/letter.htm).

What will reviewers be seeking in the SED and elsewhere?

Overall aims of the subject provision

12 There must be a clear statement of the overall aims of the subject provision. This will be used by reviewers to assess whether the provision achieves its broad purposes. The statement of aims will be reproduced at the start of the major review report. Overall aims will reflect the distinctive mission of the institution, and might place study of a discipline in contexts such as:

- enabling students to develop their capacity to learn;
- meeting international, national, regional or local healthcare needs;
- preparing students for health professional employment; the first stage of professional practice; meeting qualification requirements; developing post-qualifying practice; or for further study;
- widening access to healthcare education and healthcare employment.

13 Statements of aims should be succinct but should convey clearly the parameters of the subject provision. They may be presented as narrative statements, bullet points, or as a mixture of the two. They should not normally exceed 500 words in length.

Evaluation of the subject provision

14 Reviewers will expect to find numbered references to documentary evidence that supports claims made in the evaluation text and to which they may wish to refer for substantiation during the review. It is likely that at least the following information will be relevant:

Quantitative data:

- statistics on student achievement in all forms of summative assessment;
- degree classifications;
- entry qualifications;
- progression and completion rates;
- first employment destinations;
- placement audits for the placements that will be visited;
- statistics on assessors/supervisors.

Qualitative feedback:

- student feedback on theory and practice;
- staff feedback;
- external examiners' reports;
- employers' views on graduates or diplomates they have recruited;
- accreditation and monitoring reports by professional and/or statutory bodies;
- previous subject reviews;
- comments from internal reviews and re-validation exercises.

Programme information:

- programme specifications;
- relevant modular structures and collaborative arrangements;
- details of practice placements provision;
- relevant prospectuses;
- subject or programme handbooks.

Academic and practitioner standards

Learning outcomes

15 The first part of the SED evaluation should address the appropriateness of the intended learning outcomes in relation to the overall aims of the provision, relevant subject benchmark statements, and other external reference points. The evaluation should discuss the effectiveness of measures to ensure that staff and students have a clear understanding of the aims and intended outcomes of programmes.

Reviewers will consider:

- How do the intended learning outcomes relate to the aims of the provision, meet professional and regulatory requirements¹, reflect relevant subject benchmarks, interprofessional developments and the interests of external stakeholders?

¹ Where the learning outcomes must reflect specific competencies or proficiency statements in order for fitness for practice to be determined, reviewers must ensure the programmes are evaluated against the requirements of the regulatory body.

- How does the health professions framework inform the learning outcomes?
- How are the intended learning outcomes of a programme and its constituent parts communicated to staff, students and external examiners?
- To what extent are staff and students made fully aware of the learning outcomes?
- How does the HEI involve the Trusts and the other health services in developing the learning outcomes?
- How have the HEI and partner placement providers' reflected/met regulatory and professional body regulations/requirements in the learning outcomes²?

16 Reviewers will then evaluate the intended learning outcomes against relevant external reference points and against the aims of the provision that are recorded in the SED. Review activities may include an analysis of programme content and benchmark statements, discussions with members of the teaching and practice staff, and review of the reports of external examiners. Sources of information to support the SED will include programme or subject handbooks and curricular documents such as module or unit guides. As a result of these activities reviewers should be able to judge:

- whether the intended learning outcomes are clearly stated;
- whether the provision meets regulatory and professional requirements, reflect appropriately relevant benchmark statements, other external references, and the overall aims of the provision;
- the adequacy of arrangements within the subject for communicating intended learning outcomes.

Curricula

17 The SED evaluation should review the effectiveness of the content and design of the curricula in enabling the intended outcomes of programmes to be achieved.

Reviewers will consider:

- Are competence and safe practice, the pre-requisites for registration for a licence to practice, developed and demonstrated on the programmes?
- How do the subject providers plan, design and approve the curricula?
- How do the providers continue to meet regulatory requirements of PSRBs?
- How do the providers ensure that curriculum design, content and organisation enable students to achieve the intended learning outcomes in terms of knowledge and understanding, cognitive skills, subject-specific skills, practice and professional skills, transferable skills, progression to employment and/or further study, and personal development?
- What evidence is there that curricular content and design are informed by recent developments in interprofessional learning, good practice in teaching and learning, current research and scholarship, changes in the practice environment, and by any changes in relevant occupational or professional requirements?
- What evidence is there of appropriate academic and intellectual progression within the curriculum?
- How appropriate to achieving the intended learning outcomes are the levels and modes of study, their breadth and depth, coherence, flexibility, and the extent of student choice; placement availability; interprofessional learning; the role, where relevant, of PSRBs?

² Where the learning outcomes must reflect specific competencies or proficiency statements in order for fitness for practice to be determined, reviewers must ensure the programmes are evaluated against the requirements of the regulatory body.

- To what extent is the prospective client/patient at the centre of the student's learning experience?
- How is the health professions framework reflected in the curriculum content?
- To what extent do the curricula prepare students for careers as competent healthcare professionals equipped for self-critical lifelong learning?
- How does the HEI involve the Trusts and other health service practice managers and practitioners in developing the curriculum?
- How have the HEI, WDCs and partner placement providers reflected the regulatory and professional body requirements in the curriculum?

18 Reviewers will then evaluate the design and content of the curriculum for each programme in relation to its potential for enabling students to achieve the intended learning outcomes. Sources of information to support the SED will include institutional curricular documents, curricular review and validation reports, PSRB accreditation reports, policy developments in NHS Trusts and WDCs, subject or programme handbooks and curricular documents, such as module or unit guides, practice placement handbooks, and further study and employment statistics. The section of the *Code* on programme approval, monitoring and review will provide an important point of reference, as will the section on placement learning. Review activities will include discussions with members of the teaching teams (academic and practice), support staff and administrative staff, and discussions with students.

19 As a result of these activities reviewers should be able to judge the adequacy of procedures for ensuring that programmes are designed to enable students to achieve the intended learning outcomes, programme currency, and how appropriate they are in terms of their content and organisation in relation to coherence, flexibility, level and progression.

Assessment

20 The SED evaluation should review the effectiveness of student assessment in measuring the achievement of the intended outcomes of programmes.

Reviewers will consider:

- Does the assessment process enable learners to demonstrate achievement of the intended outcomes in both campus and practice settings?
- To what extent are the intended learning outcomes for practice-based learning assessed appropriately and as part of a coherent assessment strategy?
- In each case, is the assessment method selected appropriate to the nature of the intended outcome and to the type and level of work?
- Are there criteria that enable internal and external examiners to distinguish between different categories of achievement, and are these criteria communicated effectively to students?
- Can there be full confidence in the security, integrity and consistency of the assessment procedures, of the setting, marking and moderation of work in both campus and practice settings, and the return with feedback of student work?
- Does the assessment strategy have an adequate formative function in developing student abilities, providing students with prompt feedback, and assisting them in the development of their intellectual skills?
- How have practitioners and practice managers contributed to the development of assessment strategies?

- How do the HEI, WDCs and partner placement providers work together to ensure consistent application of assessment strategies and procedures?
- How do the HEI, WDCs and partner placement providers work together to ensure assessment strategies and procedures take account of professional and regulatory requirements?

21 Reviewers will then evaluate whether the overall assessment process and the particular assessment instruments chosen are appropriate and effective and will seek evidence of, for example:

- clear guidance about the assessment arrangements, including the contribution of assessment of practice learning to the final award and the responsibilities of the parties involved;
- assessment tools that are appropriate for the learning outcomes being assessed;
- an assessment strategy that reflects progression, integration and coherence;
- preparation of assessors to meet the PSRB requirements;
- the competence of those involved with the assessment arrangements.

22 Sources of information will include assessment criteria and guidance to assessors and markers, external examiners' reports, procedures for monitoring and recording achievement, samples of marked student work, and practice assessment documentation. Review activities will include discussions with teaching (academic and practice) teams, students and external examiners and the analysis of the methods for recording progress and achievement. The sections of the *Code* dealing with assessment of students and external examining will be important points of reference.

23 As a result of these activities, reviewers should be able to judge whether assessment processes securely measure the achievement of the intended programme outcomes.

Student achievement

24 The SED evaluation should review evidence of the extent to which students achieve the learning outcomes set.

Reviewers will consider:

- What evidence does students' assessed work provide: for their achievement of the intended learning outcomes; and to meet the regulatory requirements for each profession?
- Do the standards achieved by learners meet the minimum expectations for the award, as measured against relevant subject benchmarks and the *FHEQ*?
- Are students prepared effectively for their subsequent professional roles? To what extent are they competent, fit for purpose and fit for practice?
- Are students prepared for careers as competent healthcare professionals and equipped for self-critical lifelong learning?
- Do statistics indicate successful progression to and in careers in the relevant health professions?
- How do the HEI, partner placement providers and WDCs work together in relation to promoting student achievement and preventing and/or reducing attrition?

25 Reviewers will then evaluate whether student achievement meets such expectations. Sources of information will include external examiners' reports, practice assessors/supervisors' reports, examination board minutes, samples of student work, and statistical data on career destinations and progression. Review activities will include discussions with teaching teams, external examiners, practice placement providers, NHS Trusts and WDCs. Relevant subject benchmark statements and the level descriptors of the *FHEQ* will be important points of reference.

26 As a result of these activities, reviewers should be able to judge whether appropriate standards are being achieved.

The quality of learning opportunities

Learning and teaching

27 The SED evaluation should review the effectiveness of learning and teaching of theory and practice in relation to programme aims and curriculum content. Review teams will pay particular attention during the reviews to the effectiveness of the programmes in preparing students for practice. Practice-based learning can be arranged in different ways, and subject providers will wish to explain and evaluate the effectiveness of their approaches.

Reviewers will consider:

- How effective are learning opportunities on campus and in practice in relation to curriculum content and programme aims?
- To what extent are the learning opportunities managed effectively?
- To what extent is the prospective client/patient at the centre of the student's learning experience?
- How effectively do staff draw upon their research, scholarship, practice and professional activity to inform their teaching?
- To what extent are the environments in which practice-based learning occurs conducive to effective learning; how is this audited and with what frequency?
- Is there evidence of an interprofessional approach to providing and supporting practice-based learning? How significant are the opportunities for interprofessional learning and approaches to care?
- How good are the materials provided to support learning?
- Is there effective engagement with and participation by students? How is feedback sought and what actions are taken in response?
- Is the quality of teaching maintained and enhanced through effective staff development, peer review of teaching, integration of part-time and visiting staff, effective team teaching and induction and mentoring of new staff?
- How is the quality of learning and teaching maintained in the practice environment?
- What opportunities are there for peer observation of practice teaching and assessor development?
- How effectively is learning facilitated in terms of student workloads?
- Does practice provide carefully selected, developed and varied learning environments and a supportive practice learning culture?
- Are health and safety given proper consideration?
- Is there clear information about practice-based learning, including allocation and timing of learning opportunities; the aims and intended learning outcomes; assessment arrangements; arrangements for reporting concerns and raising complaints?

- Do the partnership arrangements provide adequate numbers and range of placement opportunities to support students' learning?
- How do the HEI, partner placement providers and WDCs work together to ensure that practice-based environments are conducive to effective learning?
- How do the HEI, partner placement providers and WDCs work together to ensure the quality and consistency of practice placements?
- To what extent do the partnership arrangements between the HEI, Trusts and WDCs support effective practice placement to enable student learning?
- To what extent does the teaching and learning in practice placements reflect the regulatory requirements of the professional and regulatory bodies?

28 The reviewers will then evaluate the overall effectiveness of learning and teaching activities, in particular:

- the breadth, depth, pace and challenge of teaching;
- whether there is suitable variety of teaching methods;
- the effectiveness of the teaching of subject and interprofessional knowledge; and
- the effectiveness of the teaching of subject-specific, transferable, practical and professional skills.

29 Sources of information will include student questionnaires, internal review documents, staff development documents, subject or programme handbooks, and academic staff appointment documents. Review activities will include direct observation of teaching where judged to be necessary by reviewers, discussions with teaching and practice staff, and discussions with students.

30 It is the responsibility of the HEI and partner placement providers, in negotiation with the co-ordinating reviewer, to organise and co-ordinate any observation of teaching in practice. It is also the responsibility of the HEI, in partnership with their partner placement providers, to secure the agreement of patients/clients where they are involved. Sources of information will include both the section of the *Code* on placement learning and the joint ENB/DH publication, *Placements in focus*. These documents are available to members of review teams and provide a useful guide to the issues that need to be considered both by the review team and by the subject providers during the review.

31 As a result of these activities, reviewers will make an overall judgement of the extent to which teaching and learning in the campus and practice environments contribute to the achievement of the intended learning outcomes.

Student progression

32 The evaluation should review student progression. The effectiveness of strategies of campus and practice placement support, and the extent to which they enable students to progress through their programmes, should be discussed.

Reviewers will consider:

- Are there effective arrangements for admission and induction that are generally understood by staff and applicants?
- Is there an appropriate overall strategy for campus and practice-based support, including written guidance, which is consistent with the student profile and the overall aims of the provision?

- How are students effectively prepared for and supported during practice-based learning?
- How are staff enabled to provide the necessary support to students?
- How are assessors prepared to meet PSRB requirements?
- How is account taken of the ability profile of the student intake and any special learning needs of individuals in relation to the aims of the programmes?
- What are the rates of completion and of student withdrawal, and what strategies are adopted to reduce or limit the latter?
- How effectively is learning facilitated by both campus and practice guidance, feedback and supervisory arrangements?
- Are the arrangements for campus and practice-based tutorial support clear and generally understood by staff and students?
- Is there appropriate guidance before, during and after any practice placements, to secure safe and ethical practice and effective learning and reflection?
- Is there consistent and appropriate supervision by staff who are competent to undertake their roles and who are developed and encouraged to support learning by students?
- Is there a clear understanding by students and staff of their respective responsibilities?
- To what extent are partner placement providers and WDCs involved in the admission, and progression of students?
- To what extent do WDCs and Trusts work with the HEI to ensure that academic and practice staff are enabled to provide the necessary support to students?
- To what extent does the support and guidance provided by practitioners and practice managers reflect the regulatory and professional body requirements?
- To what extent are the Trusts and other health service providers clear about their responsibilities in relation to supporting students in the practice environment?

33 Reviewers will then evaluate whether the arrangements in place are effective in facilitating student progression towards successful completion of their programmes. Sources of information will include subject or programme handbooks, student questionnaires, internal review documents, recruitment data, and progression data. Review activities will include discussions with admissions staff, teaching staff and students.

34 As a result of these activities, reviewers should be able to judge the effectiveness of the recruitment arrangements, the strategy for student support and the progression of students.

Learning resources and their effective utilisation

35 The SED evaluation should review the adequacy of learning resources and the effectiveness of their utilisation.

Reviewers will consider:

- Is there an overall strategy for the deployment of learning resources both in the practice-based environment and on campus?
- How effectively is learning facilitated in terms of the provision of resources?
- Is the collective expertise of the academic and practice staff suitable and available for effective delivery of the curricula, for the overall teaching, learning and assessment strategy, and for the achievement of the intended learning outcomes?

- Do the partner placement providers have an overall strategy for the provision of placements? How is their quality monitored? How do the subject providers ensure consistency of experience for and between students?
- Is there clear and appropriate allocation of responsibilities between the partners for securing and managing placement opportunities?
- Is there the allocation of appropriate resources to support practice-based learning opportunities, and commitment, at the highest level, to providing and maintaining those opportunities?
- Are appropriate development opportunities available for both campus and practice-based staff?
- Is appropriate technical and administrative support available?
- Is suitable teaching and learning accommodation available?
- Are the subject book and periodical stocks appropriate and accessible?
- Are suitable equipment and appropriate IT facilities available to learners?
- How effectively overall do students use the learning resources available to them?

36 Reviewers will then evaluate how appropriate the learning resources are, the effectiveness of deployment, the use of the learning resources by students, and the deployment of academic and support staff in support of the intended learning outcomes. Sources of information will include visits to practice placements, skills laboratories, placement audit schedules, equipment lists, library stocks, staff CVs, internal review documents, external examiners' reports, and staff development documents. Review activities may include direct observation of teaching (where carried out), accommodation and equipment, discussions with teaching teams, and discussions with students.

37 As a result of these activities reviewers should be able to judge whether the learning resources available successfully underpin the provision and whether there are appropriately qualified staff that are contributing effectively to the achievement of the intended student learning outcomes.

Maintenance and enhancement of standards and quality

38 The SED should evaluate the effectiveness of the measures taken to maintain and enhance the standards and quality of the provision.

Reviewers will consider:

- How effective is the evaluation and use of quantitative data and qualitative feedback from students, external examiners and other stakeholders in a strategy of enhancement and continuous improvement?
- How do partner placement providers use evaluation to improve the quality of their provision?
- How have external reference points been used at the subject level? How have, for example, national HE developments through the Academy for Teaching and Learning been taken into account?
- How have the outcomes of either periodic/major internal review or annual monitoring been translated into action to bring about enhancement?
- To what extent are the expectations set out in the relevant sections of the *Code* being met?

- How have the subject providers interpreted and used the statistical indicators and management information accessible from the central institutional and placement provider systems?
- How well do the subject providers' quality assurance mechanisms work both in the campus and practice areas at the level of the subject(s) under review?
- How do health and social service care groups know about improvement that is needed and when it has been carried out?
- What evidence is there that the HEI and partner placement providers are meeting and responding effectively to regulatory and professional body requirements?
- What evidence is there of a positive and effective working relationship between the HEI and partner placement providers?
- What evidence is there of partnership arrangements with WDCs?

39 Reviewers will then evaluate the extent to which the framework for assuring and enhancing the quality of the HEI and the partner providers' provision succeeds in fully supporting the programmes under review. Sources of information will include the minutes of committees that consider programme approval and validation, annual programme reviews, external examiner reports, and student programme and module evaluations. Review activities will focus on verifying these documentary contents through discussion with teaching and practice staff, students and employers.

40 As a result of these activities, reviewers should be able to judge the effectiveness of the HEI's and partner placement providers' quality assurance for the subjects.

Self-evaluation document annexes

41 A programme specification for each programme (including each approved programme) covered by the review should be annexed to the SED. Separate programme specifications are not required for every possible pathway within a modular structure. For joint honours, or similar combined studies programmes, a short statement of the rationale for the combination should accompany the programme specifications for each subject.

42 Where appropriate, brief factual explanations may also be provided of:

- curricular structures, options and pathways provided in the subject(s) being reviewed, including details of any applicable modular scheme;
- any relationship with a collaborating institution, for example if a programme is provided jointly, or is franchised.

Each explanation should not exceed 500 words in length.

The Major Review Report

The format is as follows:

Name of HEI and lead WDC

Subject area/s

Introduction

This report presents the findings of a review of the academic and practitioner standards achieved and the quality of the learning opportunities provided in (subject area) programmes at (name of HEI and lead WDC). The review was completed in the academic year [year].

A Subject provision and overall aims

[free text]

B Academic and practitioner standards

There is a section for each subject in the review to enable specific commentary, e.g. B1 Nursing, B2 Midwifery, B3 Radiography, etc. Under each subject heading, commentary will incorporate evaluation of the provision against the expectations of PSRB requirements, subject benchmarks, the *Code*, and the claims made in the SED. The commentary will be arranged under the following sub-headings:

Intended learning outcomes

Curricula

Assessment

Student achievement

Summary of academic and practitioner standards in relation to the health professions framework

With respect to academic and practitioner standards, the reviewers conclude that:

- [bullet points]

Overall, the reviewers have [confidence/limited confidence/no confidence] in the academic and practitioner standards achieved by the programmes in [subject area] at [name of HEI and lead WDC], per subject benchmark.

C Quality of learning opportunities

One section only unless a need to differentiate between professional areas occurs

Learning and teaching

The quality of learning and teaching is [commendable/approved/failing]

Student progression

The quality of student progression is [commendable/approved/failing]

Learning resources and their effective utilisation

The quality of learning resources and their effective utilisation is [commendable/approved/failing]

D Maintenance and enhancement of standards and quality

Narrative including specific reference to meeting the quality assurance, monitoring needs and partnership arrangements of the HEI and those of PSRBs, WDCs and NHS Trusts.

Summary of the main review outcomes

Subject provision and overall aims

[Subject area] programmes at [name of HEI and lead WDC] were reviewed in the academic year [insert year]. Judgements were made about the academic and practitioner standards achieved and the quality of the learning opportunities provided.

The review covered the following programmes:

- [insert named awards/programmes]

Academic and practitioner standards

Overall, the reviewers have [confidence/limited confidence/no confidence] in the academic and practitioner standards achieved by the programmes in [subject area(s)] at [name of HEI and lead WDC]. This must include commentary on the standards in relation to the health professions framework.

Strengths include:

- [bulleted summary of key findings]

Issues include:

- [bulleted summary of key findings]

Quality of learning opportunities

Learning and teaching

The quality of learning and teaching is [commendable/approved/failing].

- [bulleted summary of key findings]

Student progression

The quality of student progression is [commendable/approved/failing].

- [bulleted summary of key findings]

Learning resources and their effective utilisation

The quality of learning resources is [commendable/approved/failing].

- [bulleted summary of key findings]

Maintenance and enhancement of standards and quality

- [free text]

Annex E: The major review facilitator and the practice review facilitator

Introduction

1 Each HEI will nominate a member of staff to take on the role of major review facilitator (MRF) and each lead WDC will nominate a person to take on the role of practice review facilitator (PRF). This is to provide effective liaison between the team of reviewers and the subject and practice staff, and to ensure that the team obtains accurate and comprehensive information about the educational provision and its institutional context. The MRF and PRF should also help subject providers prepare for major review, disseminate good practice within the institution and practice placement providers, and highlight areas for improvement identified by the review. MRFs and PRFs will be briefed for their role by the Agency.

2 To ensure that practice placement providers in the partnership are fully prepared for the review, the MRF will liaise with the PRF who is the person performing the strategic leadership role in the WDC and who co-ordinates the placement provision for major review, for the WDCs and placement providers.

Criteria for the MRF

- thorough knowledge of the structure, policies, priorities, procedures and practices of their institution;
- extensive knowledge and experience of working in HE at a senior level;
- extensive experience of quality assurance procedures;
- knowledge and understanding of the major review method;
- qualifications and experience in a subject area other than that being reviewed;
- an ability to maintain confidentiality;
- must have attended a QAA Facilitator Workshop.

Placement review facilitator

3 Each lead WDC will nominate a member of staff to take on the role of PRF. The aim is to undertake a strategic leadership role in the WDC and on behalf of other WDCs involved in review, to co-ordinate the practice placement providers in partnership with the relevant HEI/s.

Role of the PRF

- to support the MRF in her/his role, ensuring all communication is via the MRF to the review co-ordinator;
- provide effective liaison between the partner placement providers and the MRF, and through the MRF to the review team;
- have responsibility for ensuring all Trusts, the HEIs and the lead WDC sign off the SED;
- ensure input from the WDC/s, Trusts and other health service providers in the preparation of the SED;
- ensure that accurate information is provided about the practice placements and is available for the preparatory meeting with the review co-ordinator;
- to help the WDC and practice staff prepare for major review and disseminate good practice;

- interface between the WDC, Trusts and the HEIs;
- liaise with the partner placement providers in arranging visits by the review team;
- to brief clinical staff on the major review method highlighting their role in the production of the self-evaluation document, the purpose of visits to practice placements and their role in developing and implementing the action plan;
- liaise with the MRF to ensure that the appropriate staff are available to meet reviewers either in meetings or on visits to practice placements;
- to ensure that the Action Plan responds fully to key points made in the draft Review Report and is signed off by all providers of the provision.

Criteria for the PRF

- ability to identify the most appropriate individuals within the WDC/s, Trusts and other health service providers to contribute to major review.
- thorough knowledge of the structure, policies, priorities, procedures and practices of their WDCs and other WDCs.
- knowledge of the role of practice placements in educational provision.
- extensive knowledge and experience of working at a senior/strategic level.
- experience of quality assurance procedures.
- knowledge and understanding of major review.
- an ability to maintain confidentiality.
- must have attended a QAA Facilitator Preparation Workshop.

Role of the MRF

General matters

4 Organisation and management of the review is the responsibility of the review co-ordinator. Responsibility for ensuring that the review team is provided with appropriate evidence to allow it to reach its judgements lies primarily with the subject provider. The MRF's role is to ensure that the channels of communication between the HEI, the PRF, the partner placement providers and review team work effectively. Discussions between the MRF and review co-ordinator should ensure that the subject providers are aware of issues being addressed by the team and the evidence needed to clarify them. It is helpful if HEIs supply each review co-ordinator with brief outlines of their MRF's previous experience and current institutional roles.

5 Throughout the course of a review, the MRF helps the reviewers to come to a clear and accurate understanding of the structures, policies, priorities and procedures of the institution, and the nature of the provision under scrutiny. S/he may wish to bring additional information to the attention of the team and may seek to correct factual inaccuracies. However, it is for the reviewers to decide how best to use the information provided. The MRF is not a member of the review team and will not make judgements about the provision.

6 The role requires the MRF to observe objectively, to communicate clearly with the team, the subject and practice placement providers, and the PRF, to respect the protocols on confidentiality outlined below, and to establish effective relationships with the review co-ordinator and the team, as well as with the subject staff. The MRF should refrain from acting as an advocate for the subject provision under review. However, s/he may legitimately:

- have responsibility for ensuring all relevant Trusts, the HEI and the lead WDC sign off the SED;
- assist the HEI and partner placement providers in understanding issues of concern to reviewers;
- respond to requests for information and comment;
- draw the review team's attention to matters that may have been overlooked;
- identify the location of evidence;
- provide advice on institutional matters.

Activities preceding reviews

7 HEIs and their partner placement providers should involve their MRF and PRF fully in preparation for a review, including the preparatory meeting with the review co-ordinator. The MRF should receive copies of all correspondence between the Agency and the subject providers, and will normally attend the preparatory meeting.

Activities during major reviews

8 The pattern of major review requires the MRF to fulfil three main functions, in addition to the general liaison role outlined above. Firstly, the MRF should maintain regular telephone and/or email contact with the review co-ordinator to ensure that reviewers are receiving the information or documentation that they need, particularly for off-site analysis.

9 Secondly, the MRF may attend all of the following meetings:

- team meetings, except those in which judgements are being discussed by the team of reviewers;
- formal meetings held between the reviewers and the subject providers to investigate matters specific to standards and quality, except those with current and former students;
- 'progress' meetings held between the review co-ordinator and lead subject staff.

10 Thirdly, s/he should monitor the pattern of visits by reviewers. If it appears that there is a departure from the agreed pattern, the matter should be discussed immediately with the review co-ordinator.

Confidentiality

11 The MRF and PRF will observe the same conventions of confidentiality as the reviewers. In particular, no information gained during a review shall be used in a manner that allows individuals to be identified. The MRFs and PRFs must exercise care when reporting back to campus and practice-based staff to maintain the confidentiality of written material produced by reviewers for Day One, or at other times during the review. However, the MRF may make her/his own notes on team discussions in order to help subject staff understand the issues being addressed by reviewers. This can improve the effectiveness of a review, and contribute to the enhancement of standards and quality within the HEI and partner placement providers.

Annex F: The specialist adviser

1 Each academic and practitioner reviewer is responsible for providing the team with evidence that the subject area is reaching the required standards and providing an adequate quality of learning opportunities for students. It is for the major review team to assure itself that its views about a particular subject area are soundly based. The team as a whole may consider that it needs particular additional specialist advice about a specific subject area. In such circumstances, the team may request that a specialist adviser is provided. The Agency will deploy a suitably qualified and experienced individual, subject to the views of the Agency's manager of the major review method. This individual will be a trained reviewer and subject to the same rules of confidentiality. Where a specialist adviser is deployed who is also required to be a Visitor, then the PSRB should be informed.

2 Once the review team has identified the need for specialist advice, the review co-ordinator will contact the Agency's Assistant Director responsible for major review (ADMR) to discuss the grounds for requesting the assistance of a specialist adviser. The review co-ordinator will also inform the subject providers through the MRF and indicate the area where the team would welcome the provision of further information. The subject providers then have the opportunity, if they wish, to provide additional information before the end of the visit that might assist the review team. If after the receipt of such information the team still considers that advice is needed, the ADMR is informed.

3 The ADMR will require the review team to prepare clear guidance for the specialist adviser by the end of the day, preferably Day One or Two. The guidance provided by the team should set out the case for requesting specialist advice, and should:

- identify the subject area that is to be the focus of the advice;
- state, as clearly as possible, the nature of the referral for advice, for instance:
 - a request for advice about interpreting the information or evidence provided and its nature and location;
 - a request for the specialist adviser to review and comment on evidence which was unavailable or inadequate at the time of the team's visit;
- summarise the information that was available to the team and provide references to documents consulted and, where relevant, extracts of such documents; and identify the individuals in the institution who were party to discussions.

4 Before leaving the subject providers at the end of the day the review co-ordinator will inform the MRF of the team's decision about the need to deploy a specialist adviser. The review co-ordinator will also indicate whether or not the specialist adviser is likely to join the team during its next visit.

5 The ADMR will ensure that the specialist adviser identified by the Agency will receive guidance about the specific requirements of the review team. S/he will also seek guidance about any additional information that the adviser will need to see. The adviser may also contact members of the team via the Agency's web site to request further guidance or to pose questions. A decision about whether or not the specialist adviser needs to join the review team on its next visit will then be made. It may be possible for adequate specialist advice to be given by email correspondence.

6 While the specialist adviser is expected to focus primarily on the matter(s) referred to them by the review team, it is possible that during her/his exploration of documentation, in discussion or on a subsequent visit to the subject providers s/he may identify areas for concern beyond her/his remit. The nature of such areas should be discussed with the review co-ordinator and ADMR who will consider what action will be taken.

7 As with other stages of the review process, it is essential that careful note is taken of documents and other evidence scrutinised by the specialist adviser. On a visit, notes will be taken of any discussions between the specialist adviser and staff and students, observations and scrutiny of student work.

8 At the end of any visit joined by the specialist adviser, the review co-ordinator will chair a team meeting, attended by the MRF, in which the specialist adviser will state a view on the matter referred to them. A record is kept of this opinion. It is for the team to decide how the findings of the adviser should be incorporated into their thinking and what impact their findings might have on judgements reached during the visit. Review teams are not required to accept the findings of a specialist adviser but, where they choose to reject them, they must be able to provide a clear justification for doing so, supported by evidence.

9 Where the findings of the specialist adviser include reference to an area of concern that is not part of the original reference by the review team, her/his view will be sought about whether or not further action is needed. The review team will decide whether further discussions are required with the subject providers.

Annex G: Documentation, including student work, for major review

Documents

1 Apart from the SED, reviewers will not normally expect documents to be prepared especially for major review. Subject providers should direct reviewers, in the SED and/or by means of a separate list, to the availability and relevance of documents that might assist them to test and verify the statements made in the self-evaluation or that are relevant to the judgements they will make. There is no requirement for documents to be assembled in a room for the use of reviewers. However, the reviewers will need a room in which to work and documents requested by the review co-ordinator at or following the preparatory meeting might usefully and efficiently be made accessible to the reviewers in this space during their visits. Because major review takes place over a six week period, immediate availability of any document requested is not necessary.

2 The following documents, at least will be required in advance of the review:

- the SED, with annexes giving:
 - a a programme specification for each programme in the subject(s) under review;
 - b information about relevant modular structures or collaborative arrangements;
 - c information about practice placement provision;
 - d student progression data;
 - e further study and employment statistics;
- relevant prospectuses;
- subject or programme handbooks;
- the most recent external examiners' reports;
- the most recent PSRB reports;
- campus and practice placement location maps.

3 The availability and relevance of further documentation will be discussed with the provider at both the preparatory meeting and Day One. As the review progresses, reviewers may ask for further documentation. The following will be relevant to the review:

- practical or placement handbooks;
- curricular documents, module or unit guides;
- subject or programme monitoring reports, including those from external sources such as PSRBs and WDCs, if these are available;
- programme approval/validation documents and review reports;
- student evaluation/feedback data on both theory and practice placements;
- external examiners' reports for the previous three years;
- clinical governance reports; placement learning audit reports; where appropriate, local midwifery supervisory authority, monitoring reports;
- student intake and progression data for the previous years (up to three);
- practice documentation.

The following documents may also be relevant, but this list is neither prescriptive nor exhaustive:

- minutes of relevant meetings, including examination boards, staff-student liaison committees, and placement provider forums;
- equipment lists;
- further study and employment statistics (student destinations);
- academic staffing list and short profiles (indicating main teaching and research interests and any administrative responsibilities);
- list of practice staff involved in student placements;
- staff development and training reports and opportunities.

Reviewers will not necessarily ask for copies of documents. They may prefer to read the documents during the course of a visit. Documents can be provided in electronic form by mutual agreement between the subject providers and the review co-ordinator.

Student work

4 Reviewers will expect to scrutinise students' assessed work. The range and nature of student work to be made available will be discussed at the preparatory meeting. In most cases, subject providers will be able to identify appropriate work completed by all cohorts of students during the preceding academic year. If the current academic year is well advanced at the time of the review visit, the available work may be a mixture of that from the previous year's and current year's cohorts.

5 Reviewers will scrutinise students' assessed work to evaluate whether:

- student work demonstrates the achievement of the intended outcomes of the programme(s);
- assessment is designed appropriately to measure achievement of the intended learning outcomes;
- the assessment instruments provide an adequate basis for discriminating between different categories of attainment;
- the marking and assessment process is rigorous, consistently applied and equitable;
- the outcomes of programmes meet the minimum expectations and demonstrate fitness for practice, fitness for purpose and fitness for the award.

Reviewers will not duplicate or 'second-guess' the work of practice assessors or external examiners, although they may comment on its effectiveness. As such, reviewers will not normally expect to see work that is currently under consideration by external examiners or practice assessors.

6 Reviewers will need to see a broad sample of student work that demonstrates use of the full range of assessment instruments deployed in both formative and summative assessments. To enable them to gain a full understanding of the assessment strategy, reviewers will need to see marking guides or other assessment criteria, and any guidance given to staff for providing feedback to students through assessment. They will use external examiners' reports to triangulate with their own observations of work from each level/year of study, samples of work from core modules and specialist options and from a representative range of attainment. Work to be seen by the reviewers may include, for example:

- AP(E)L portfolios;
- coursework of various types;
- OSCEs and associated documentation;

- projects and/or dissertations;
- examination scripts;
- practice portfolios and other practice assessment documentation.

7 Reviewers will record the evidence derived from such scrutiny of student work using the student work and assessment pro forma provided by the Agency for this purpose.

Annex H: Guidance for visits to practice environments

1 The reviewers will visit practice placements in order to satisfy themselves of the extent to which the claims made by the HEI and their partner placement providers can be substantiated.

2 In the context of visits to practice placements reviewers should do so sympathetically, efficiently, promptly and without bias or maladministration. Reviewers should always work within their professional codes of conduct/practice. Reviewers observing and interacting with the practice environment should offer the public, users, carers and peers the highest standards of conduct and service.

3 All reviewers should ensure they:

- follow safety codes for every site that will be visited during the review;
- comply with hygiene requirements for individual sites that will be visited during the review;
- wear any necessary safety clothing;
- report any incidents or near misses that happen;
- attend any medical examination as required;
- never risk injury to self or others.

4 The HEI and partner placement providers should include in their SED an overview of the practice placements available to students on the programmes under review. The SED narrative may contain suggestions for placements that the reviewers might visit in order that they may verify the claims made by the institution.

5 The review co-ordinator will discuss the opportunities for visits to practice at the preparatory meeting with subject staff. The review team will normally spend at least one day, and a maximum of two, visiting practice areas.

6 The reviewers will confirm that the range of placements proposed by the subject providers to visit is relevant and sufficient. Reviewers may request alternative or additional placement visits. The review co-ordinator will satisfy him or herself that there is sufficient rationale for changes to the placement visit programme. A list of the practice areas visited will be recorded and kept by the Agency, if another HEI is being reviewed at a later date that uses the same practice areas the review co-ordinator will ensure different areas are used for the verification and evidence gathering in that major review.

7 The reviewers will not visit practice placements alone. Normally, two reviewers will attend each one of a range of practice placements. This may be two reviewers from the same or different professions.

8 The reviewers will evaluate learning resources, may observe teaching and learning (see Annex I) and will talk with practice staff, other colleagues and students whilst visiting practice placements. All such evidence is documented by the reviewers, on standard forms provided by the Agency, and shared with the whole review team.

Annex I: Guidance for the observation of teaching

General arrangements

1 Arrangements for the review of academic and practice teaching carried out by subject providers will vary to reflect the nature and scope of the provision. The circumstances in which direct observation of teaching is likely to be appropriate are set out in paragraph 72 of this *Handbook*. Reviewers may not need to make direct observations of teaching where subject providers can demonstrate that there is evidence of good quality delivery, and where the review of student work indicates that student achievement is in line with the intended learning outcomes.

Protocol for direct observation of teaching

2 When direct observation of teaching takes place, the reviewer will meet the member of staff responsible for the teaching session before it commences in order to introduce her/himself, to discuss the overall objectives for the session, and to determine how students are intended to benefit from it. Understanding the precise purpose of a teaching session is essential. For example, a session delivered for the express purpose of transmitting information will be structured differently from one designed to elicit student participation or stimulate extensive further reading. Reviewers should not make comments during their observation, and should not be intrusive or engage directly in the activity. For sessions lasting more than one hour, a suitable period of observation may be agreed beforehand.

3 Whenever reviewers observe teaching, a standard teaching observation note provided by the Agency should be completed. In making judgements about individual teaching sessions, reviewers must provide oral feedback to members of staff, even if this requires a later appointment to be made. Oral feedback is confidential to the member of staff and should be given privately. Its purpose is to offer constructive comment rather than to prescribe preferred practice. Reviewers must also preserve the anonymity of the staff observed teaching in all written reports and in discussions with other staff of the HEI or partner placement providers.

4 On occasion, students engaged in practical or independent learning sessions may be asked by reviewers to talk about their learning experiences and how the activity being observed relates to the learning outcomes of the class, module and programme. As with other observations, reviewers should endeavour to meet with the relevant member of staff to ascertain the intended learning outcomes of the session and should provide feedback wherever possible. It is also important that reviewers seek agreement from the member of staff in relation to their discussions with students, if part of a session.

Judgements

5 All judgements by reviewers about the quality of teaching and learning opportunities offered to students should be made against the broad aims of the subject provider and the intended learning outcomes set to bring about achievement of those aims.

Annex J: Agenda for meetings with WDC and practice staff, other employers, and with current and past students

Introduction

1 Meetings with WDC and practice staff, other employers, and current and recent past students, enable reviewers to establish these stakeholders' views of the provision being considered. Following initial guidance from the review co-ordinator at the preparatory meeting, subject providers will select representative groups of these stakeholders to meet the reviewers. Current and past students will be from across the range of programmes and levels. Employers will include representatives from other organisations and institutions that employ graduates from the provision.

2 Meetings with current students, recent past students and employers, are normally held separately. They provide an opportunity not only to hear the direct views of those present, but also to establish more generally whether there are effective arrangements for student feedback and representation. The review facilitators (Annex E) should not attend this meeting. Comments made by past and present students and employers will not be attributed to named individuals. Reviewers will use their views in a more general way to inform their further discussion with academic and placement staff and their judgements of standards and the quality of learning opportunities.

3 The meetings are normally chaired by the review co-ordinator. S/he will introduce the reviewers and provide a brief summary of the review method. S/he will outline the purpose of the meeting and will emphasise the importance of transparency of the review process. The dialogue will normally start with a question to establish on what basis the participants were selected to attend the meeting.

4 Throughout the meeting, participants should be given opportunities to raise points not covered by the agenda. Reviewers will focus on issues related to the aims and learning outcomes specified for the provision. However, such questions may fall within those expressed in more general terms below.

General matters in relation to quality and standards

- How are student and employer views sought?
- Are students and employers represented on committees? If so, what is their role?
- To what extent are student and employer views influential? Can the participants provide examples?
- What contribution did students and employers make to the SED?

The curriculum and intended learning outcomes

- By what means are students and practice staff made aware of the intended learning outcomes?
- What is the match between the expectations of students, the intended learning outcomes and the curricular content?
- What are the opportunities for practice learning and vocational experience?
- How does the curricular content encourage the development of knowledge and skills?
- How relevant is the curriculum to further study and prospective employment?
- How appropriate are timetables and workloads?

Assessment

- To what extent do students and practice staff understand the criteria for assessment and the methods employed?
- In all settings, how much assessment is formative as well as summative?
- Do the participants consider the marks they receive for assessed work to be fair?
- What feedback is there? How prompt and effective is it?

Achievement

- In the experience of both students and employers, to what extent do students achieve the intended learning outcomes?
- What discussion about their achievement takes place between students and academic and practice staff and assessors?
- What skills are acquired? How do these skills enhance employability?
- What are students' further study and career aspirations and are they likely to be satisfied?
- Do both employers and students consider that graduating students are competent and safe to practice, and have met the pre-requisites for registration for a licence to practice where appropriate?
- Do employers and students consider that the latter are being adequately prepared for careers as competent healthcare professionals and equipped for self-critical lifelong learning?

Learning and teaching

- To what extent is the range of teaching and learning methods in practice placement and on campus appropriate for delivering the curriculum?
- How do students and employers perceive the quality of the teaching?
- What are the opportunities for independent study and how is it encouraged?
- How extensive are the opportunities for interprofessional education?

Student progression and support

- What admission and induction procedures did students experience?
- What are the arrangements for academic support? How accessible are tutors?
- Do these arrangements extend to practice learning, work experience, study abroad and other off-site experiences?
- How are assessors prepared for their role? Are assessors able to effectively engage in the role?
- How effective is the support provided for students during practice learning?
- Overall, how effective is the support for students?

Learning resources and their effective utilisation

- How good are the library services on campus and in placement environments in terms of opening hours, access, user support, availability of books and journals?
- What IT support is there - on campus and in placement environments? Are opening hours, access, user support and availability of workstations and software appropriate?
- To what extent are programme-specific materials suitable?
- How well suited to meeting student needs are the learning and teaching environments on campus and in practice environments, and how well equipped are they?
- To what extent do students use the full range of resources available to them?

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