# Inspection Report

## **Course provider:** University of Hull

## **Course approval:** PG Dip Social Work

**Inspection dates: 15th – 17th October 2024**

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| Report date: | 9 December 2024 |
| Inspector recommendation: | Approved with conditions |
| Regulator decision: | Approved with conditions |
| Date of Regulator decision: | 17 January 2025 |
| Date conditions met and approved: | 21 May 2025 |

# Contents

## Introduction

1. Social Work England completes inspections as part of our statutory requirement to approve and monitor courses. Inspections form part of our process to make sure that courses meet our education and training standards and ensure that students successfully completing these courses can meet our professional standards.

2. During the approval process, we appoint partner inspectors. One inspector is a social worker registered with us and the other is not a registered social worker (a 'lay' inspector). These inspectors, along with an officer from the education quality assurance team, undertake activity to review information and carry out an inspection. This activity could include observing and asking questions about teaching, placement provision, facilities and learning resources; asking questions based on the evidence submitted; and meeting with staff, training placement providers, people with lived experience and students. The inspectors then make recommendations to us about whether a course should be approved.

3. The process we undertake is described in our legislation; the Social Worker Regulations 2018[1], and the Social Work England (Education and Training) Rules 2019.

4. You can find further guidance on our course change, new course approval and annual monitoring processes on our website.

## What we do

5. When an education provider wants to make a change to a course, or request the approval of a new course, they are asked to consider how their course meets our education and training standards and our professional standards, and provide evidence of this to us. We are also undertaking a cycle of re-approval of all currently approved social work courses in England following the introduction of the Education and Training Standards 2021.

6. The education quality assurance officer reviews all the documentary evidence provided and will contact the education provider if they have any questions about the information submitted. They also provide advice and guidance on our approval processes.

7. When we are satisfied that we have all the documentary evidence required to proceed with an inspection we assign one registrant and one lay inspector. We undertake a conflict of interest process when confirming our inspectors to ensure there is no bias or appearance of bias in the approval process.

8. The inspectors complete an assessment of the evidence provided and advise the

[1] https://www.legislation.gov.uk/ukdsi/2018/9780111170090/contents

officer if they have any queries that may be able to be addressed in advance of the inspection.

9. During this time a draft plan for the inspection is developed and shared with the education provider, to make sure it is achievable at the point of inspection.

10. Once the inspectors and officer are satisfied that an inspection can take place, this is usually undertaken over a three- or four-day visit to the education provider. We then draft a report setting out what we found during the inspection and if and how our findings demonstrate that the course meets our standards.

11. The inspectors may recommend in this report that the course is approved with conditions, without conditions or that it does not meet the criteria for approval.

12. A draft of this report is shared with the education provider, and once we have considered any comments or observations they may wish to provide, we make a final decision about the approval of the course.

13. The decisions that we can make are as follows, that the course is approved without conditions, the course is approved with conditions or that the course does not meet the criteria for approval.  The decision, and the report, are then published.

14. If the course is approved with conditions, we will write to the education provider setting out how they can demonstrate they have met the conditions, the action we will take once we decide that the conditions are met, and the action we will take it we decide the conditions are not met.

# Summary of Inspection

15. Course details: The University of Hull ('the university') wish to run a Post Graduate Diploma in Social Work.

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| Inspection ID | UHUL_CPP475 |
| Course provider | University of Hull |
| Validating body (if different) | |
| Course inspected | PG Dip Social Work |
| Mode of Study | Full-time |
| Maximum student cohort | 50 (split between the MA and the PGDip) |
| Proposed first intake | September 2025 |
| Date of inspection | 15 October – 17 October 2024 |
| Inspection team | Nikki Steel-Bryan, (Education Quality Assurance Officer)<br>Brad Allen, (Lay Inspector)<br>Michael Isles, (Registrant Inspector) |

## Language

16. In this document we describe the University of Hull as 'the course provider' or 'the university' and we describe the PG Dip Social Work as 'the course' or the 'PG Dip'.

# Inspection

17. A remote inspection took place from 15 October – 17 October 2024. As part of this process the inspection team planned to meet with key stakeholders including students, course staff, employers and people with lived experience of social work.

18. These meetings formed the basis of the inspection plan, agreed with the education provider ahead of inspection. The following section provides a summary of these sessions, who participated and the topics that were discussed with the inspection team.

## Conflict of interest

19. No parties disclosed a conflict of interest.

## Meetings with students

20. The inspection team met with 5 students from the MA course, of which one was in their first year of study, two were in their second year of study and two had completed the course. Discussions included the student experience of placements, the curriculum, teaching, learning and assessment, feedback, support available through the university and attendance.

## Meetings with course staff

21. Over the course of the inspection, the inspection team met with university staff members from the course team, those involved in selection and admissions, the senior leadership team, staff involved in placement-based learning and student support services. Discussions included admissions, resourcing, student numbers and the curriculum.

## Meeting with people with lived experience of social work

22. The inspection team met with people with lived experience of social work who have been involved in the Lived Experience Group (LEG) at the university. Discussions included LEG contributions to the admissions processes, curriculum development, course design and course delivery and any support provided to enable LEG members to carry out their duties.

## Meetings with external stakeholders

23. The inspection team met with representatives from placement partners including North Lincolnshire Council, Hull County Council and East Riding of Yorkshire Council.

# Findings

24. In this section we set out the inspectors' findings in relation to whether the education provider has demonstrated that it meets the education and training standards and that the course will ensure that students who successfully complete the course are able to meet the professional standards.

25. In addition to documentary evidence the course provider also supplied a mapping document which included narrative against the education and training standards and highlighted specific documentary evidence to be considered against each standard. This document is referred to as 'the mapping document'.

## Standard one: Admissions

### Standard 1.1

26. The course provider submitted documentary evidence that included the Humber Social Work Teaching Partnership admissions pack (hereafter 'the admissions pack'). The admissions pack set out the entry requirements including the requirement for candidates to have GCSE English and Maths at Grade C / Level 4 or above, or a minimum score of 7.0 in the IELTS.

27. The inspection team understood that applicants selected for face-to-face interviews sat a written exam, undertook a panel interview and a group discussion, and responded verbally to a case study. ICT skills were evidenced throughout the admissions process as applicants applied online, were communicated with by email and were required to book themselves onto a selection day using an online system. Additionally, applicants were required to sign an ICT declaration and assess their proficiency using databases, MS Teams, or Zoom, word processing, email, the internet, spreadsheets and smart phones.

28. Through discussion with staff involved in admissions the inspection team understood that the selection process for international students was aligned with the practice in place for home students; except for the group discussion, which was reported to be problematic to facilitate online. The inspection team heard that, at the time of inspection, the course team were considering the validity and accessibility of the group discussion for all candidates, and whether it would continue to be part of the selection process for reasons of fairness and parity.

29. The inspection team acknowledged that an annual review of the admissions approach was undertaken and agreed that this standard was met.

### Standard 1.2

30. Documentary evidence submitted in support of this standard included the admissions pack. The narrative supplied in the mapping document reported that applicants were provided with three opportunities to highlight relevant previous experience during the admission process: in the written exam, during the interview and within the personal statement.

31. During inspection, the inspectors asked about the assessment of prior relevant experience and were satisfied that the course team thought broadly about relevant prior experience and agreed that this standard was met.

### Standard 1.3

32. The university provided narrative within the mapping document that detailed that the interview panels were made up of key stakeholders and submitted the admissions pack in support of this standard.

33. Throughout the inspection, the inspection team triangulated involvement in the admissions processes with employer partners and with the Lived Experience Group (LEG group) and heard that both employers and people with lived experience were involved in the following activities:

- Open days
- Selection days
- Pre-course taster days
- Admissions process review

34. In addition, practitioners were also included in DBS and Suitability Panel Meetings, should anything be reported. The inspection team agreed that this standard was met.

### Standard 1.4

35. Prior to inspection, the inspection team reviewed a self-declaration form which was completed as part of the admissions process, a weblink to institutional advice for applicants relating to criminal convictions and the institutional student admissions policy. The narrative provided in the mapping document confirmed that all applicants with an accepted offer were required to complete an enhanced disclosure and barring service (DBS) check and an occupational health screening questionnaire. The inspection team understood any matters arising from an applicant's DBS were considered by a faculty level DBS and Suitability Panel (DBS Panel). The DBS Panel was interprofessional and was attended by the professional lead and admissions tutor from social work and included employer partner and service user representatives.

36. The inspection team noted that the occupational health questionnaire was detailed and were keen to better understand the process. During inspection the university submitted an occupational health handbook, and through discussion with a representative from the occupational health team the inspection team heard that student data was protected and that no action was taken without informed consent from the student.

37. The inspection team agreed that this standard was met.

### Standard 1.5

38. The university submitted documentary evidence that included the institutional Equality, Diversity and Inclusion (EDI) policy and the schedule of mandatory training for university employees, which evidenced EDI Awareness training every 3 years. There was also an institutional infographic entitled designing for diverse learners and the transcript from the admissions group discussion video that was focussed on working with people with autism.

39. As part of a secondary submission of evidence the university submitted an information document provided to applicants which outlined the selection day, including providing clear instructions on how to request reasonable adjustments for selection day tasks.

40. The inspection team understood that members of the LEG group undertook mandatory EDI training before being able to participate in interviews, which was successfully triangulated with LEG members during inspection.

41. The inspection team agreed that this standard was met.

### Standard 1.6

42. At the time of the inspection the course was not available for direct admission and a webpage was not available for the PG Dip. However, the university provided a link to the MA Social Work course for consideration. During inspection the course team reported that the PG Dip website would mirror the MA Social Work website.

43. Through discussion with the staff involved in admissions, the inspection team heard that information was provided via:

- The course webpage
- Face to face open days
- Outreach activities
- On the selection day

44. Applicants who attended a selection day were also able to access the slide deck from the selection day via the admissions PebblePad.

45. Taster sessions were held in May and July for students who had been made an offer. Students were able to come to campus, and experience teaching sessions and undertake group work activities.

46. Students reported that they had what they needed to be able to make a decision about whether to join the programme, including information about bursaries and student loans.

47. Following a review of the evidence, the inspection team is recommending that a condition is set against 1.6 in relation to the approval of this course as the inspectors felt it was neccesary to see the course webpage. Consideration was given as to whether the finding identified would mean that the course would not be suitable for approval. However, it is deemed that a condition is appropriate to ensure that the course would be able to meet the relevant standard, and we are confident that once this standard is met, a further inspection of the course would not be required. Full details of the condition, its monitoring and approval can be found in the conditions section of this report.

## Standard two: Learning environment

### Standard 2.1

48. The BA-MA-PG Dip Placement Handbook (hereafter 'the placement handbook') detailed that students undertook two practice placements. One placement of 70 days (first placement) and one placement of 100 days (last placement). The placement handbook further documented that placements were contrasting and specified that students were required to undertake one placement in a statutory setting. The inspection team triangulated practice in relation to the 170 placement days with relevant stakeholder groups and had no concerns over the availability of statutory placements. In addition to the two assessed practice placements, students were required to complete 30 skills days. It was noted by the inspectors that due to the condensed nature of the programme, the placements occurred within quick succession.

49. Through discussion with stakeholders during inspection the inspection team heard that placements were audited via a modified version of the Quality Assurance in Practice Learning (QAPL) process. The inspectors noted that the QAPL form appeared to have some spelling errors.

50. Practice educators reported that, in their experience placements were contrasting and took into consideration the individual learning and development needs of students.

The course team noted that the placement application form included a summary of learning from previous experience, or placement, and that the link lecturer considered each placement application form. However, they noted that the contrasting nature of placements were not captured in an auditing tool. Through discussion with students the inspection team heard an example where a student had returned to the same team for both placements and the placement was not contrasting.

51. Following a review of the evidence, the inspection team is recommending that a condition, and a recommendation, is set against 2.1 in relation to the approval of this course. Consideration was given as to whether the finding identified would mean that the course would not be suitable for approval. However, it is deemed that a condition is appropriate to ensure that the course would be able to meet the relevant standard, and we are confident that once this standard is met, a further inspection of the course would not be required. Full details of the condition, its monitoring and approval can be found in the condition section of this report. Further details of the recommendation can be found in the recommendations section of this report.

### Standard 2.2

52. Documentary evidence reviewed prior to inspection included a statutory placement audit form, an anonymous placement learning agreement (PLA), an anonymous interim review and the role descriptor for the link lecturer. In a secondary submission of evidence, the course provider also supplied the placement confirmation form.

53. The inspectors considered the placement documentation and noted that no one document contained the information required by the standard. However, they noted that across the suite of documentation students were provided with relevant information about their placements, which included the practical and administrative details, the learning objectives, the structure the learning would take place within and any significant dates and targets.

54. Through discussion with the staff involved in practice learning, the inspection team heard that complexity was inherent within all the placements offered. Students spoke positively about the learning opportunities they had been exposed to while on placement and provided examples of statutory tasks.

55. The inspection team considered the requirements of the standard, and concluded that the standard was met.

### Standard 2.3

56. The slide deck for a placement introduction session, the placement handbook, a practice educator training slide deck, an example Practice Learning Agreement (PLA), an example placement application form and a Health, Safety and Agency Policies /

Procedures Checklist (hereafter 'induction checklist') were submitted as evidence in support of this standard.

57. The placement handbook included information on induction and set out supervision arrangements and the induction checklist covered agency familiarisation activities as well as policy related induction.

58. Through discussion with the students, the inspection team heard that some students had not received an induction to placement. They raised this line of enquiry with practice educators and the course team. Practice educators reported a variety of approaches to induction ranging from structured 3 or 5-day approaches to more flexible arrangements which depended on teams, or a student's previous experience. The staff involved in practice learning explained that inductions were not explicitly audited, however the induction checklist was signed and returned to the university.

59. The inspection team explored student supervision, workload and support with a variety of stakeholders during the inspection and acknowledged hearing of instances where students had felt uncertain about raising safeguarding concerns that arose on placement with the university. Through further discussion with the course team the inspection team understood that the QAPL documentation was read by the university and where concerns were raised with the course provider they were acted upon.

60. Following a review of the evidence, the inspection team is recommending that a condition is set against 2.3 in relation to the approval of this course. Consideration was given as to whether the finding identified would mean that the course would not be suitable for approval. However, it is deemed that a condition is appropriate to ensure that the course would be able to meet the relevant standard, and we are confident that once this standard is met, a further inspection of the course would not be required. Full details of the condition, its monitoring and approval can be found in the conditions section of this report.

### Standard 2.4

61. Documentary evidence reviewed prior to inspection included data and a report from the MA QAPL, which was submitted as part of a secondary request for evidence.

62. Through discussion with staff involved in placement learning, the inspection team heard that the course provider had a process of grading placements to ensure that students' responsibilities were appropriate for their stage of education and training.

63. The inspectors noted that the placement audit form classified whether the placement was to be used for final placements only and included the kinds of tasks students would become involved in. The staff involved in placement learning reported that the PLA recorded the intended learning outcomes for students.

64. The inspection team heard a variety of approaches to placement allocation from employer partners, but all processes reported included some form of discussion with the student at the placement application stage and bespoke allocation based on that interaction to meet learning needs.

65. The inspection team agreed that this standard was met.

### Standard 2.5

66. Documentary evidence reviewed prior to inspection included the placement handbook and the Module Specification Document (MSD) for a Readiness for Practice module. The placement handbook noted that students were required to pass all trimester 1 modules and the module assessment to be eligible to progress to placement.

67. The MSD detailed that progression was contingent on student attendance (70% across the programme, and 100% on skills days), attending personal supervisor meetings and passing the summative assessment which took the form of a panel interview. The inspection team understood that the panel included a LEG member and a practitioner.

68. The inspection team triangulated evidence across the inspection with relevant stakeholders and heard that practice educators generally felt that the university prepared students well and discussed being involved in the panel interviews. Overall students reported being well prepared for practice, highlighting mock visits with the LEG group and role play sessions as being helpful. The inspection team agreed that this standard was met.

### Standard 2.6

69. The university submitted the placement confirmation form in support of this standard.

70. Through discussion with the staff involved in practice education, the inspection team understood that practice educators were allocated by the placement provider who confirmed the details to the university via the placement confirmation form. It was also reported that practice educator documentation was saved in a shared drive that was accessible to all stakeholders, and that the university placement lead had access to this folder. At the time of inspection there were no independent practice educators within the Humber region.

71. The inspection team queried who checked the registration, and currency, of the practice educators allocated to students. The staff involved in placement education explained that the local authority agency and the university both carried out checks on practice educators. However, the course provider reported that the internal university

checks were not recorded, and there was no formal audit record of any checks taking place. It was not clear to inspectors how the university had oversight of practice educators' registration, qualification and currency.

72. The inspectors reported that the placement confirmation form did not have a space to record the practice educator's Social Work England registration number.

73. Following a review of the evidence, the inspection team is recommending that a condition is set against 2.6 in relation to the approval of this course. Consideration was given as to whether the finding identified would mean that the course would not be suitable for approval. However, it is deemed that a condition is appropriate to ensure that the course would be able to meet the relevant standard, and we are confident that once this standard is met, a further inspection of the course would not be required. Full details of the condition, its monitoring and approval can be found in the conditions section of this report.

### Standard 2.7

74. Documentary evidence reviewed prior to inspection included the placement handbook which contained information on whistleblowing, the induction checklist and the institutional whistleblowing policy. The students met by the inspection team responded positively when asked if they knew what whistleblowing was, and the course team discussed where the policy was emphasised within the programme. The inspection team agreed that this standard was met.

## Standard three: Course governance, management and quality

### Standard 3.1

75. Documentary evidence reviewed prior to inspection included a university and faculty governance structure, a governance committee structure, an example of the MA programme review and an MA external examiner report. The inspection team concluded that the documentary evidence provided in advance of the inspection was able to demonstrate that this standard was met.

### Standard 3.2

76. Documentary evidence reviewed prior to inspection included the partnership agreement between the university and Hull Social Work Academy. It was understood by inspectors that the agreement was discussed at a Humber Social Work Teaching Partnership meeting, where all partners confirmed the use of the agreement for practice placements with the university.

77. Throughout the inspection, the inspection team discussed placement processes and experiences with relevant stakeholders and heard that practice educators,

placement providers and the university worked closely. Placement breakdown was explored, and the inspection team heard that the university operated a staged concerns process. The course team and employer partners provided a case example with the placement agencies noting that the process was fair and robust, and students were supported. The inspection team agreed that this standard was met.

### Standard 3.3

78. Evidence submitted in support of this standard included the placement handbook, the induction checklist, an institutional student pregnancy and new parent policy, and an institutional pregnancy support plan.

79. The inspectors noted that the support mechanisms available at the university were comprehensive (c.f. Standard 5.1 and Standard 5.2) and included risk management for students when on placement. The inspectors understood that all services continued to be available to students when on placement. Through discussion with employer partners and placement providers the inspection team heard that employers were involved in decision making and any adaptations required for students when on placement.

80. The induction checklist included the lone working policy and working with complex behaviours as required policies and procedures for induction.

81. However, the inspection team acknowledged that students provided examples of practice that they considered to be safeguarding issues and, or, risky, and which were reported to the placement provider. The inspection team acknowledged that the concerns did not appear to have been reported back to the university (c.f. para 59) and were not included in the QAPL reports. It was noted that the QAPL documentation was being revised at the time of the inspection.

82. Following a review of the evidence, the inspection team is recommending that a condition is set against 3.3 in relation to the approval of this course. Consideration was given as to whether the finding identified would mean that the course would not be suitable for approval. However, it is deemed that a condition is appropriate to ensure that the course would be able to meet the relevant standard, and we are confident that once this standard is met, a further inspection of the course would not be required. Full details of the condition, its monitoring and approval can be found in the conditions section of this report.

### Standard 3.4

83. The inspection team reviewed the documentary evidence submitted by the course provider and noted that the university was a member of a Teaching Partnership. Through discussion with employer partners and placement providers, the inspection

team heard that they were involved in the annual review of programmes, module teaching, and module enhancement processes. Partners further noted that a variety of agency staff were involved in regular meetings relating to programme design and delivery. The inspection team agreed that this standard was met.

### Standard 3.5

84. Documentary evidence reviewed prior to inspection included the institutional code of practice for the Continual Monitoring, Evaluation and Enhancement (CMEE) journal, the CMEE journal for the MA course, teaching partnership governance minutes that included members of the LEG group and minutes from an MA programme review meeting which included members of the LEG group and practitioners.

85. Throughout the inspection, the inspectors triangulated evidence and heard that people with lived experience of social work, practitioners and students were involved in monitoring, evaluation and improvement systems.

86. However, as previously discussed (c.f. 59), the inspectors noted that students reported examples of practice that they considered to be safeguarding issues which did not seem to be identified within the current placement monitoring processes. The inspectors noted that there did not seem to be a standard university presence at the midpoint review, induction to policies and procedures (c.f. para 58) did not appear to have oversight and the QAPL did not appear to have picked up these concerns.

87. Following a review of the evidence, the inspection team is recommending that a condition is set against 3.5 in relation to the approval of this course. Consideration was given as to whether the finding identified would mean that the course would not be suitable for approval. However, it is deemed that a condition is appropriate to ensure that the course would be able to meet the relevant standard, and we are confident that once this standard is met, a further inspection of the course would not be required. Full details of the condition, its monitoring and approval can be found in the conditions section of this report.

### Standard 3.6

88. The inspection team were satisfied that the planned number of students to be admitted onto the course took into consideration the local and regional placement capacity. The university submitted a workforce & development strategy document as evidence against this standard that detailed a clear plan, developed in conjunction with the teaching partnership. Through discussions with the Senior Leadership Team (SLT) the inspection team heard that the current MA was recruiting a stable number of students each cycle, and that employer partners had communicated enthusiasm for the PG Dip. The inspection team agreed that this standard was met.

### Standard 3.7

89. The evidence provided to support this standard included the CV for the lead social worker which detailed relevant qualifications, experiences and a registration number. This was cross checked with the Social Work England register. The inspection team noted that this standard was met.

### Standard 3.8

90. Documentary evidence submitted in support of this standard included mini-CVs for the social work staff. Inspectors understood that the staff student ratio (SSR) was 1:16 and that 10 staff would be involved in delivering the PG Dip. The inspection team agreed that this standard was met, noting that the SLT reported that the SSR was lower in social work than other programmes in recognition of the workload required to deliver the course.

### Standard 3.9

91. The inspection team reviewed the CMEE journal in advance of the inspection and considered it to be comprehensive. The CMEE journal included the following information:

- Mid and final Module Evaluation Questionnaire (MEQ) feedback
- Module marks
- Data on recruitment, retention and attrition
- Data on student fails

92. In addition to the CMEE, programme directors were able to access the institutional Awarding Gap Dashboard to consider awarding gaps at subject level, identify issues and take action. The narrative provided within the mapping document further explained that the circumstances of failing students identified within the CMEE were considered, and support plans either reviewed or put in place as a result. The inspection team agreed that this standard was met.

### Standard 3.10

93. The university submitted several institutional policies in support of this standard as follows:

- Learning and development policy
- Academic careers framework policy
- Academic workload planning framework

- Appraisal and development review policy
- Apprenticeship CPD strategy
- Appraisal form for academics and guidance

94. The narrative within the mapping form described staff as having diverse practice experience and provided a number of examples of the ways in which staff maintained links with practice. Examples included the violence prevention partnership, involvement in the Anti-Racist Practitioner Humber Network, delivering training workshops in bereavement by suicide and through conference delivery. Through discussion with the SLT, the inspection team heard additional examples of links to practice and a commitment to supporting staff to remain current. The inspection team agreed that this standard was met.

## Standard four: Curriculum assessment

### Standard 4.1

95. Documentary evidence submitted in support of this standard included a mapping document that illustrated where competencies against the Social Work England Professional Standards were delivered within the course. The university also supplied MSDs for the course. The Social Work England Professional Standards were mapped at the module level, under section 18 of the MSD proformas.

96. Through discussion with relevant stakeholders the inspection team heard an overall knowledgeable approach to the delivery of the professional standards throughout the programme. The course was co-delivered and co-produced with practitioners and people with lived experience of social work and the inspection team agreed that this standard was met.

### Standard 4.2

97. The university submitted 8 documents in support of this standard which included evidence relating to consultation days for the course, interview documentation, readiness for practice module documentation and the programme review.

98. In addition, the inspection team acknowledged that the university utilised a team-based learning approach known within the university as a Professional Learning Team (PLT). PLTs were led by the personal supervisor (PS) and included academic staff, students and a practising social worker. PLTs provided students with the opportunity to work in a functioning team, developing skills in critical reflection and analysis and evidence-based decision making.

99. Across the inspection, the inspection team triangulated the involvement of employers, practitioners and people with lived experience of social work and their involvement in the design, ongoing development and review of the curriculum. The inspection team heard that the LEG group was represented on the Teaching Partnership, in module review meetings and the DBS panel. LEG members were university employees and had access to all relevant systems and training. Employer partners highlighted the annual programme review as an example of involvement but noted that they regularly attend meetings, and reviews, and felt fully involved in the development of the PG Dip. The inspection team agreed that this standard was met.

### Standard 4.3

100. Narrative supplied on the mapping document reported that the course had been designed with a renewed focus on EDI. At programme and module level, the vision was underpinned by the principles of social justice, equality and diversity, with an emphasis on inclusion, community and belonging. Evidence submitted in support of this standard included the institutional Inclusive Education Framework, the Education Strategy and the inclusive assessment marking and feedback policy.

101. The inspection team understood that the university Inclusive Education Framework sought to ensure that inclusion was designed into the course curriculum across the institution. It was reported that while some students still required reasonable adjustments to be made, the vision was that programme design should be as inclusive to as many students as was possible.

102. Through discussion with the course team, the inspection team heard that the staff were clear about the demographic of the students on their courses and highlighted that there had been an increase in neurodivergent students which had been taken into account when designing the course. The course team further explained that the Human Rights Act (1998) was foregrounded in teaching with a strong ethical rights-based focus running through all the modules, which they reported was modelled through their relationships with students.

103. The course team provided examples of reasonable adjustments that had been made for students on other courses within the university and discussed the occupational health processes in place. It was also noted that the inclusive design of the course ensured that some accessibility practices were in place as standard, such as lecturers wearing microphones to deliver content. Lectures were always recorded, unless there were specific reasons for this not to happen. Examples provided by the course provider included where lecture content could be sensitive, or triggering, and students required support to engage with the content. Recorded lectures were uploaded to the virtual learning environment (VLE) and PowerPoints were uploaded to the VLE in advance.

104. The inspection team agreed that this standard was met.

### Standard 4.4

105. Through review of the documentary evidence the inspection team considered the currency of the programme modules. Through discussion with the course team the inspection team heard specific examples of module updates as a result of changes in research, legislation and government policy, including an example where a current policy that was due to be considered by Parliament during the inspection was cited, and had already been introduced to students. The course team further discussed the impact of research on the development of module content with examples including the involvement of a member of the team on a project considering the NHS forensic evaluation of adults, where there have been injuries, that has fed into the Social Work with Adults module. The inspection team agreed that this standard was met.

### Standard 4.5

106. The inspection team reviewed the programme specification document (PSD) submitted in support of this standard, which clearly detailed application of theory and knowledge to academic work and social work practice as a programme competency that was delivered in the following modules:

- Critical Approaches to Mental Health
- Human Development across the Lifespan
- Child and Family Social Work
- Social Work with Adults
- First Placement
- Last Placement

107. The narrative included in the mapping document reported that modules were sequenced to ensure learning was progressive and moved from theory to practice, in both breadth to depth.

108. Through discussion with practice educators, the inspection team heard that workshops were delivered for students in most agencies, and that practitioners were embedded into the programme via PLTs, or teaching, to support students with theory into practice.

109. Students reported being well supported with integrating theory into practice, highlighting use of theory on the course and elements of assessment where they were

required to demonstrate their theoretical knowledge, including in their reflections on placement.

110. The inspection team agreed that this standard was met.

### Standard 4.6

111. Evidence submitted in support of this standard included documentation related to a Domestic Abuse, Stalking, Harassment and Honour Based Violence (DASH) risk assessment simulation exercise, an interdisciplinary case study undertaken with midwifery students and an agency visit on the Specialisms in Practice module. The narrative included on the mapping form also highlighted an observational visit to a magistrate or crown court. Students spoke positively about the interdisciplinary opportunities highlighting the co-taught session with midwifery students and working in multi-disciplinary teams on placement. The inspection team agreed that this standard was met.

### Standard 4.7

112. The inspection team reviewed the PSD and MSDs and noted that a standard credit accumulation and transfer systems (CATS) was in place allocating 1 credit to 10 hours of notional learning time. The inspection team agreed that this standard was met.

### Standard 4.8

113. Prior to inspection, the inspection team reviewed 14 documents submitted in evidence in support of this standard including:

- the placement handbook
- the programme handbook
- the institutional grade descriptor for level 7
- an assessment scrutiny form
- the institutional policy on assessment procedures
- the institutional policy on external examining
- information on the boards of examiners

114. During inspection, the inspectors queried whether all placement portfolios were read on behalf of the university and heard that they were. The inspection team agreed that this standard was met.

### Standard 4.9

115. The inspection team reviewed the assessment map submitted as evidence in support of this standard. It was noted by inspectors that the start date of the Last Placement module had been brought forward and as a result the course was 5 months shorter than the MA. The inspectors queried whether the reduction in study time had an impact on students, resulting in assessment overload. The course team explained that, as the students on the PG Dip would not be undertaking the dissertation, the course could be successfully shortened. The inspection team heard that consultation had taken place with students who reported a shorter course would be more attractive to them, and that the shorter course structure was well received by the Teaching Partnership. The inspection team agreed that this standard was met.

### Standard 4.10

116. Evidence submitted in support of this standard included the institutional assessment procedures policy, an MA/PG Dip Social Work Assessment Strategy, the institutional level 7 grade descriptor, the institutional personal supervision policy and an agenda for the Social Work Module Board. Additionally, the narrative within the mapping document noted that, at the time of inspection, the university had drafted an Inclusive Assessment, Marking and Feedback Policy which was awaiting Senate approval.

117. During the inspection, the inspectors asked students whether their feedback was useful, timely, consistent, and, if it included developmental points. Students responded generally positively about their feedback and acknowledged feedback coming from academic staff and from practice educators. Students described feedback as well structured including positive points, and areas for development. The inspection team agreed that this standard was met.

### Standard 4.11

118. The inspection team reviewed academic staff mini-CVs, a recent external examiner report from the BA and MA courses, the institutional policies on assessment procedures and external examining and the External Examiner CVs. The narrative provided in the mapping document set out the measures in place to quality assure assessment marking which inspectors reported as being satisfactory.

119. The inspection team acknowledged that academics were aligned to mark work within their subject specialisms, and that a high percentage of the academic staff were registered social workers. The external examiners were confirmed to be registered with Social Work England. The inspection team agreed that this standard was met.

### Standard 4.12

120. Evidence submitted in support of this standard included a link to the institutional Quality and Standards Handbook, example of a direct observation of practice, institutional regulations in relation to fitness to practice, extensions, taught master's degrees and the board of examiners. In addition, the course provider also submitted the social work assessment strategy and MSDs. The narrative provided in the mapping document was comprehensive and explained the assessment and progression processes, including the role of direct observations of practice. The inspection team acknowledged a diverse range of people inputting into progression decisions including people with lived experience, practitioners, practice educators and academic staff. The inspection team concluded that the documentary evidence provided in advance of the inspection was able to demonstrate that this standard was met.

### Standard 4.13

121. The inspection team considered the MA Programme Review, the PSD and MSDs. Also provided was a Social Work Publications and Research document which included information on recent research and where it appeared in the course at the modular level and the institutional Education Strategy, which included a strategic aim to build strong educational communities of learning.

122. The inspectors acknowledged that theory into practice was demonstrated across the course (c.f. paras 106 - 109) and through discussion with the course team the inspection team heard that research mindedness was a core component of the Human Development across the Lifespan module that was delivered in the first year. A further example was provided from the SPLOC module where students were required to take part in a debate, and the arguments presented within the debate were expected to be backed up by research evidence.

123. In addition, the library offered a series of self-directed learning resources entitled the Academic Mastery Programme, which supported the development of critical reading and search and retrieval skills. The inspection team also understood that students could apply to take part in research, as a research assistant. The inspection team agreed that this standard was met.

## Standard five: Supporting students

### Standard 5.1

124. The inspection team found that, throughout the inspection, students support was articulated clearly within the documentary evidence submitted prior to inspection and through discussions with stakeholders.

125. Central services reported that counselling, careers advice and support and occupational health service were available flexibly, on and off campus. Through

discussions with central staff the inspection team heard of a comprehensive package of support available across a variety of support and wellbeing services. Students spoke positively about the support they were offered by members of the course team and provided examples where they had made contact with academic staff for wellbeing support. The course team spoke confidently about working with the central support services on the plans for students with complex needs. The inspection team agreed that this standard was met.

### Standard 5.2

126. The inspection team met with representatives from academic support services and heard that students had access to library services, academic development and academic skills services to support academic writing, as well as a dedicated Disability Inclusion Team. A variety of services were offered including SPLD tutors to provide one-to-one support funded through the disabled students allowance (DSA), and study skills sessions which were embedded within the course at the point of need. On the course, students were allocated a personal tutor, known at the university as a personal supervisor. The personal supervisor stayed the same for the duration of the course and acted as the leader for the relevant PLT. The inspection team agreed that this standard was met.

### Standard 5.3

127. The inspection team understood that students undertook a self-declaration, DBS and occupational health check at the point of admission to the course (c.f. Standard 1.4). Ongoing suitability was checked on an annual basis via the Good Health and Good Character form (hereafter the GHGC form) submitted as evidence in support of this standard. The GHGC form was understood to be audited by the programme director.

128. Through discussion with the course team the inspection team heard that although the GHGC form was completed annually, the expectation was that students would disclose any change to their status at the point of the change and that this expectation was set at induction. The inspection team agreed that this standard was met.

### Standard 5.4

129. Evidence submitted in support of this standard included the occupational health screening questionnaire, and the institutional Inclusive Education Framework. The narrative supplied within the mapping document noted the course team were able to contact, and receive advice from, the Disability Inclusion Team, the Learning Support Team and the Autism Support Team and that these teams provided advice on any reasonable adjustments required for students. The course team provided examples of reasonable adjustments they had delivered for students within their courses and the approach of the university more broadly to inclusive learning (c.f. para 103).

130. Through discussion with the Disability Inclusion Team the inspection team heard that the university utilised a student passport system. Through the passport system students were supported by the team to communicate their strengths, and their areas for development or support, including aspects of 'please avoid', in their own voice to enable them to advocate for their own needs.

131. The inspectors acknowledged that the institutional codes of practice governed aspects of regulation such as extensions, additional considerations and student illness in relation to reasonable adjustments. The inspection team agreed that this standard was met.

### Standard 5.5

132. Evidence submitted in support of this standard included the placement handbook, the assessment strategy, assessment map, PSD and MSDs. The narrative provided on the mapping form noted that the Virtual Learning Environment (VLE), Canvas, was the central repository for information for students. As part of a second submission of evidence the university also supplied the slide deck from the welcome week which covered professional requirements and the slide deck from an ASYE workshop delivered to students.

133. Through discussion with students the inspection team heard that the information provided during welcome week was considered helpful and gave an overview of the course requirements. Students acknowledged that information was available on the VLE but reported that they were not provided with any training on Canvas.

134. Regarding the transition to registered social worker, students were aware that they needed to register, and students further along in their course of study reported that they were given enough information at the appropriate time to support this transition.

135. Through discussion with the representative from the Careers Advice Service, the inspection team heard that the careers service held a fair each spring for social work students that included local providers and delivered a presentation on the assessed and supported year in employment (ASYE). The fair was open to all students who may have an interest in pursuing social work as a career. The inspection team agreed that this standard was met.

### Standard 5.6

136. Prior to inspection, the inspection team reviewed a slide deck from an induction week session which provided some detail regarding attendance. The MA/PG Dip course handbook included comprehensive information about attendance.

137. The inspection team understood that attendance at the following sessions was mandatory:

- All scheduled teaching was mandatory unless otherwise stated. Social work students were required to have 70% attendance across the programme.
- Skills days
- PLT meetings
- Personal Supervisor meetings
- Appointments
- 170 days of practice learning

138. Attendance on campus was monitored via a card system where students could 'tap into' teaching sessions. The students met by the inspection team were clear on which parts of the course were mandatory and cited practice placement days, readiness for practice, lectures and skills days as being mandatory. However, the inspection team reported that there was some conflict within the documentary evidence regarding mandatory attendance on the course when it was expressed as a percentage. The induction slide deck referred to a required attendance level of 60% across the course whereas the MA / PG Dip Handbook referred to a required attendance level of 70% attendance.

139. Following a review of the evidence, the inspection team is making a recommendation in relation to 5.6. We recommend that the university ensure clarity and consistency in their documentation regarding required attendance. Further details on the recommendation can be found in the recommendations section of this report.

### Standard 5.7

140. Following a review of the documentary evidence provided, and through discussions with key stakeholders throughout the inspection, the inspection team were assured that students had access to satisfactory points of feedback. Feedback was provided formatively, as well as on assessments. Feedback was also provided by practice educators on students' placement portfolios, through their PLT and from LEG members as part of the readiness for practice panel interview. Students reported that feedback was useful and timely (cf. Standard 4.10 for further information on student feedback). The inspection team agreed that this standard was met.

### Standard 5.8

141. Documentary evidence reviewed prior to inspection included the institutional Academic Appeals policy and the MA / PG Dip course handbook which included information on the right to invoke appeals or complaints. The students who met the inspection team were not aware of the appeals policy, however, noted that they

assume it would be available for them on the internet. The inspection team agreed that this standard was met.

### Standard six: Level of qualification to apply for entry onto the register

#### Standard 6.1

142. The inspection team reviewed the PSD and agreed that the award of PG Dip Social Work met the standard, noting that the available exit awards were clearly differentiated from the qualifying award.

## Proposed outcome

The inspection team recommend that the course be approved with conditions. These will be monitored for completion.

### Conditions

Conditions for approval are set if there are areas of a course that do not currently meet our standards. Conditions are binding and must be met by the education provider within the agreed timescales.

Having considered whether approval with conditions or a refusal of approval was an appropriate course of action, we are proposing the following condition for this course at this time.

| | Standard not currently met | Condition | Date for submission of evidence | Link |
|---|---|---|---|---|
| 1 | Standard 1.6 | The course provider will provide a link to the course webpage when it becomes available. | 20 April 2025 | Para 42 |
| 2 | Standard 2.1 | The course provider will provide evidence that demonstrates that they can ensure that all students undertake a contrasting placement. | 20 April 2025 | Para 50 |
| 3 | Standard 2.3 | The course provider will provide evidence of how they will ensure that while on placements students have an appropriate induction. | 20 April 2025 | Para 58 |

| | | | | |
|---|---|---|---|---|
| 4 | Standard 2.6 | The course provider will provide evidence of the process by which they ensure practice educators are on the register and that they have the relevant and current knowledge, skills and experiences. | 20 April 2025 | Para 70 - 71 |
| 5 | Standard 3.3<br>Standard 3.5 | The course provider will provide evidence that the QAPL revision has ensured that:<br>• Students are supported to raise concerns about their health, wellbeing and risk when on placement.<br>• Regular and effective monitoring of placements takes place which enables the university to be confident that student's health, wellbeing and risk on placement is appropriately supported. | 20 April 2025 | Para 81 86 |

## Recommendations

In addition to the conditions above, the inspectors identified the following recommendations for the education provider. These recommendations highlight areas that the education provider may wish to consider. The recommendations do not affect any decision relating to course approval.

| | Standard | Detail | Link |
|---|---|---|---|
| 1 | Standard 2.1 | The inspectors are recommending that the university check the placement audit form for spelling errors. | Para 49 |
| 2 | Standard 5.6 | The inspectors are recommending that the university ensure clarity and consistency in their documentation regarding required attendance | Para 138 |

It should be noted that all qualifying social work courses will be subject to re-approval under Social Work England's 2021 education and training standards.

# Annex 1: Education and training standards summary

| Standard | Met | Not Met – condition applied | Recommendation given |
|---|---|---|---|
| **Admissions** | | | |
| 1.1 Confirm on entry to the course, via a holistic/multi-dimensional assessment process, that applicants:<br><br>i. have the potential to develop the knowledge and skills necessary to meet the professional standards<br>ii. can demonstrate that they have a good command of English<br>iii. have the capability to meet academic standards; and<br>iv. have the capability to use information and communication technology (ICT) methods and techniques to achieve course outcomes. | ☒ | ☐ | ☐ |
| 1.2 Ensure that applicants' prior relevant experience is considered as part of the admissions processes. | ☒ | ☐ | ☐ |
| 1.3 Ensure that employers, placement providers and people with lived experience of social work are involved in admissions processes. | ☒ | ☐ | ☐ |
| 1.4 Ensure that the admissions processes assess the suitability of applicants, including in relation to their conduct, health and character. This includes criminal conviction checks. | ☒ | ☐ | ☐ |
| 1.5 Ensure that there are equality and diversity policies in relation to applicants and that they are implemented and monitored. | ☒ | ☐ | ☐ |
| 1.6 Ensure that the admissions process gives applicants the information they require to make an informed choice about whether to | ☐ | ☒ | ☐ |

| Standard | Met | Not Met – condition applied | Recommendation given |
|---|---|---|---|
| take up an offer of a place on a course. This will include information about the professional standards, research interests and placement opportunities. | | | |
| **Learning environment** | | | |
| 2.1 Ensure that students spend at least 200 days (including up to 30 skills days) gaining different experiences and learning in practice settings. Each student will have:<br>i) placements in at least two practice settings providing contrasting experiences; and<br>ii) a minimum of one placement taking place within a statutory setting, providing experience of sufficient numbers of statutory social work tasks involving high risk decision making and legal interventions. | ☐ | ☒ | ☒ |
| 2.2 Provide practice learning opportunities that enable students to gain the knowledge and skills necessary to develop and meet the professional standards. | ☒ | ☐ | ☐ |
| 2.3 Ensure that while on placements, students have appropriate induction, supervision, support, access to resources and a realistic workload. | ☐ | ☒ | ☐ |
| 2.4 Ensure that on placements, students' responsibilities are appropriate for their stage of education and training. | ☒ | ☐ | ☐ |
| 2.5 Ensure that students undergo assessed preparation for direct practice to make sure they are safe to carry out practice learning in a service delivery setting. | ☒ | ☐ | ☐ |
| 2.6 Ensure that practice educators are on the register and that they have the relevant and | ☐ | ☒ | ☐ |

| Standard | Met | Not Met – condition applied | Recommendation given |
|---|---|---|---|
| current knowledge, skills and experience to support safe and effective learning. | | | |
| 2.7 Ensure that policies and processes, including for whistleblowing, are in place for students to challenge unsafe behaviours and cultures and organisational wrongdoing, and report concerns openly and safely without fear of adverse consequences. | ☒ | ☐ | ☐ |
| **Course governance, management and quality** | | | |
| 3.1 Ensure courses are supported by a management and governance plan that includes the roles, responsibilities and lines of accountability of individuals and governing groups in the delivery, resourcing and quality management of the course. | ☒ | ☐ | ☐ |
| 3.2 Ensure that they have agreements with placement providers to provide education and training that meets the professional standards and the education and training qualifying standards. This should include necessary consents and ensure placement providers have contingencies in place to deal with practice placement breakdown. | ☒ | ☐ | ☐ |
| 3.3 Ensure that placement providers have the necessary policies and procedures in relation to students' health, wellbeing and risk, and the support systems in place to underpin these. | ☐ | ☒ | ☐ |
| 3.4 Ensure that employers are involved in elements of the course, including but not limited to the management and monitoring of courses and the allocation of practice education. | ☒ | ☐ | ☐ |

| Standard | Met | Not Met – condition applied | Recommendation given |
|---|---|---|---|
| 3.5 Ensure that regular and effective monitoring, evaluation and improvement systems are in place, and that these involve employers, people with lived experience of social work, and students. | ☐ | ☒ | ☐ |
| 3.6 Ensure that the number of students admitted is aligned to a clear strategy, which includes consideration of local/regional placement capacity. | ☒ | ☐ | ☐ |
| 3.7 Ensure that a lead social worker is in place to hold overall professional responsibility for the course. This person must be appropriately qualified and experienced, and on the register. | ☒ | ☐ | ☐ |
| 3.8 Ensure that there is an adequate number of appropriately qualified and experienced staff, with relevant specialist subject knowledge and expertise, to deliver an effective course. | ☒ | ☐ | ☐ |
| 3.9 Evaluate information about students' performance, progression and outcomes, such as the results of exams and assessments, by collecting, analysing and using student data, including data on equality and diversity. | ☒ | ☐ | ☐ |
| 3.10 Ensure that educators are supported to maintain their knowledge and understanding in relation to professional practice. | ☒ | ☐ | ☐ |
| **Curriculum and assessment** | | | |
| 4.1 Ensure that the content, structure and delivery of the training is in accordance with relevant guidance and frameworks and is designed to enable students to demonstrate | ☒ | ☐ | ☐ |

| Standard | Met | Not Met – condition applied | Recommendation given |
|---|---|---|---|
| that they have the necessary knowledge and skills to meet the professional standards. | | | |
| 4.2 Ensure that the views of employers, practitioners and people with lived experience of social work are incorporated into the design, ongoing development and review of the curriculum. | ☒ | ☐ | ☐ |
| 4.3 Ensure that the course is designed in accordance with equality, diversity and inclusion principles, and human rights and legislative frameworks. | ☒ | ☐ | ☐ |
| 4.4 Ensure that the course is continually updated as a result of developments in research, legislation, government policy and best practice. | ☒ | ☐ | ☐ |
| 4.5 Ensure that the integration of theory and practice is central to the course. | ☒ | ☐ | ☐ |
| 4.6 Ensure that students are given the opportunity to work with, and learn from, other professions in order to support multidisciplinary working, including in integrated settings. | ☒ | ☐ | ☐ |
| 4.7 Ensure that the number of hours spent in structured academic learning under the direction of an educator is sufficient to ensure that students meet the required level of competence. | ☒ | ☐ | ☐ |
| 4.8 Ensure that the assessment strategy and design demonstrate that the assessments are robust, fair, reliable and valid, and that those who successfully complete the course have developed the knowledge and skills | ☒ | ☐ | ☐ |

| Standard | Met | Not Met – condition applied | Recommendation given |
|---|---|---|---|
| necessary to meet the professional standards. | | | |
| 4.9 Ensure that assessments are mapped to the curriculum and are appropriately sequenced to match students' progression through the course. | ☒ | ☐ | ☐ |
| 4.10 Ensure students are provided with feedback throughout the course to support their ongoing development. | ☒ | ☐ | ☐ |
| 4.11 Ensure assessments are carried out by people with appropriate expertise, and that external examiner(s) for the course are appropriately qualified and experienced and on the register. | ☒ | ☐ | ☐ |
| 4.12 Ensure that there are systems to manage students' progression, with input from a range of people, to inform decisions about their progression including via direct observation of practice. | ☒ | ☐ | ☐ |
| 4.13 Ensure that the course is designed to enable students to develop an evidence-informed approach to practice, underpinned by skills, knowledge and understanding in relation to research and evaluation. | ☒ | ☐ | ☐ |
| **Supporting students** | | | |
| 5.1 Ensure that students have access to resources to support their health and wellbeing including:<br><br>i. confidential counselling services;<br>ii. careers advice and support; and<br>iii. occupational health services | ☒ | ☐ | ☐ |

| Standard | Met | Not Met – condition applied | Recommendation given |
|---|---|---|---|
| 5.2 Ensure that students have access to resources to support their academic development including, for example, personal tutors. | ☒ | ☐ | ☐ |
| 5.3 Ensure that there is a thorough and effective process for ensuring the ongoing suitability of students' conduct, character and health. | ☒ | ☐ | ☐ |
| 5.4 Make supportive and reasonable adjustments for students with health conditions or impairments to enable them to progress through their course and meet the professional standards, in accordance with relevant legislation. | ☒ | ☐ | ☐ |
| 5.5 Provide information to students about their curriculum, practice placements, assessments and transition to registered social worker including information on requirements for continuing professional development. | ☒ | ☐ | ☐ |
| 5.6 Provide information to students about parts of the course where attendance is mandatory. | ☒ | ☐ | ☒ |
| 5.7 Provide timely and meaningful feedback to students on their progression and performance in assessments. | ☒ | ☐ | ☐ |
| 5.8 Ensure there is an effective process in place for students to make academic appeals. | ☒ | ☐ | ☐ |
| **Level of qualification to apply for entry onto the register** | | | |

| Standard | Met | Not Met – condition applied | Recommendation given |
|---|---|---|---|
| 6.1 The threshold entry route to the register will normally be a bachelor's degree with honours in social work. | ☒ | ☐ | ☐ |

## Regulator decision

Approved with conditions.

## Annex 2: Meeting of conditions

If conditions are applied to a course approval, Social Work England completes a conditions review to make sure education providers have complied with the conditions and are meeting all of the education and training standards.

Inspectors will undertake the conditions review and make recommendations to Social Work England's decision maker.

This section of the report will be completed when the conditions review is completed.

| | Standard not met | Condition | Inspector recommendation |
|---|---|---|---|
| 1 | 1.6 | The course provider will provide a link to the course webpage when it becomes available. | Condition met |
| 2 | 2.1 | The course provider will provide evidence that demonstrates that they can ensure that all students undertake a contrasting placement. | Condition met |
| 3 | 2.3 | The course provider will provide evidence of how they will ensure that while on placements students have an appropriate induction. | Condition met |
| 4 | 2.6 | The course provider will provide evidence of the process by which they ensure practice educators are on the register and that they have the relevant and current knowledge, skills and experiences. | Condition met |
| 5 | 3.3 & 3.5 | The course provider will provide evidence that the QAPL revision has ensured that:<br>• Students are supported to raise concerns about their health, wellbeing and risk when on placement.<br>• Regular and effective monitoring of placements | Condition met |

| | | | |
|---|---|---|---|
| | | takes place which enables the university to be confident that student's health, wellbeing and risk on placement is appropriately supported. | |

## Findings

This conditions review was undertaken as a result of conditions set during course approval as outlined in the original inspection report above.

After the review of documentary evidence, the inspection team are satisfied that the conditions set against the approval of the PG Dip Social Work course are met.

In relation to the condition set against standard 1.6 the course provider submitted the link to the course webpage. The inspectors confirmed that information contained within the web pages was clear, informative and detailed with useful explanatory content about the course. The condition has now been met.

In relation to the condition set against standard 2.1 the course provider submitted a Last Placement Application form and a Last Placement Planning form. These, alongside the Placement Confirmation Tracker, ensure that the needs of the students are assessed based on their first placement experiences. These systems support the university and placement partners to monitor the types of placements students are completing to enable them to provide contrasting placements. This condition is now met.

In relation to the condition set against standard 2.3 the course provider submitted an Induction Checklist and an extract from the enhanced practice educator training which highlights the importance of an induction for all students at the start of their placement. The induction checklist now forms part of a student's portfolio and is monitored by the practice educator. This condition is now met.

In relation to the condition set against standard 2.6 the course provider submitted a Social Work Placements Service Catalogue (2025), a Practice Educator Register Template, and Placement Confirmation form, and the Placement Confirmation tracker. The inspectors agreed that the course provider outlined a process which includes how they monitor the qualifications, currency and registration of the practice educators. They utilise the Placement Confirmation form as part of their annual placement audit. This detail is collated and monitored using the Placement Confirmation Tracker by the Link Lecturers. This condition is now met.

In relation to the condition set against standards 3.3 and 3.5, the course provider submitted the Social Work Placements Service Catalogue (2025), the QAPL Student form, and an Extract from the Placement Induction Presentation. The course provider has amended their process by revising the QAPL form with the intention of supporting students to raise concerns. Responsibility for monitoring students' responses is that of the Placement Lead and Placement Team. The enhanced placement induction has strengthened the awareness of how students will be supported to gain support and guidance when sharing concerns. This condition is now met.

## Conclusion

The inspection team is recommending that as the conditions have been met, the course be approved.

It should be noted that all qualifying social work courses will be subject to reapproval under Social Work England's 2021 education and training standards.

## Regulator decision

Approved.