Inspection Report

Inspection ID	UCLR1_A
Course provider	University of Lancashire
Validating body (if different)	
Course inspected	Post-Graduate Certificate in Mental Health Practice (AMHP)
Mode of study	Part-time
Maximum student cohort	40 – this is a maximum of 20 for two different cohorts
Date of inspection	12 – 13 May 2026
Inspection team	Sam Jameson (Education Quality Assurance Officer) Jodie Thomas (Lay Inspector) Fakir Chand (AMHP Registrant Inspector)
Inspector recommendation	Approved
Regulator decision:	Approved
Date of Regulator decision:	17 September 2026

Contents

Introduction 3

Summary of Inspection 3

Inspection Findings 4

Outcome 17

Recommendations **17**

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 approval standards for Approved Mental Health Professional (AMHP) courses. We approve courses against these standards to ensure that students who successfully complete an AMHP course can meet the requirements set out in the Mental Health (Approved Mental Health Professionals) (Approval) (England) Regulations 2008.

2. During the approval process, we appoint partner inspectors. This will include a registered inspector who will be a qualified AMHP, and a lay inspector who is not AMHP qualified.

3. These inspectors, along with an officer from the education quality assurance team, undertake activity to review documentary information and evidence, and carry out an inspection. This activity could include observing and asking questions about teaching, placements, facilities and learning resources; asking questions based on the evidence submitted; and meeting with staff, people with lived experience and students. The inspectors then make recommendations to us about whether a course should be approved.

4. The process we undertake is described in our legislation: The Children and Social Work Act 2017, The Social Workers Regulations 2018 - Social Work England, and our Education and Training Rules 2019.

5. In this document we describe University of Lancashire as 'the course provider' and we describe the Post-Graduate Certificate in Mental Health Practice (AMHP) as 'the course' and 'the programme'.

Summary of Inspection

5. University of Lancashire and the Post-Graduate Certificate in Mental Health Practice (AMHP) was inspected as part of Social Work England's reapproval cycle, whereby all course providers with AMHP courses will be inspected against the new education and training approval standards for AMHP courses.

6. A remote inspection took place from 12 – 13 May 2026.

7. As part of this process the inspection team gathered feedback from key stakeholders through meetings on inspection. This included representatives from Kent, Lancashire,

North Yorkshire and Sefton local authorities and members from Comensus, the university Service User, Carer and Academic Group.

Inspection Findings

8. In this section we set out the inspectors' findings in relation to whether the course meets the education and training approval standards for AMHP courses. We describe the inspection team in this section as 'we'.

Standard 1. Admissions	Met or not met.
1.1 Confirm on entry to the course that applicants have: i. the potential to acquire and demonstrate the competences set out in the relevant legislation governing AMHP practice; ii. the capability to meet the academic requirements of the course; and iii. the capability to use information and communication technology (ICT) methods and techniques to achieve course outcomes	Met
1.2 Confirm that applicants are and remain fully registered with a relevant regulatory body in line with the relevant regulations	Met
1.3 Ensure that the admissions processes assess the suitability of applicants, including in relation to their conduct, health and character. This includes appropriate criminal conviction checks	Met
1.4 Ensure that applicants have suitable prior experience of the practical application of appropriate legislation and policy, specifically including but not limited to mental health, mental capacity and human rights legislation	Met
1.5 Ensure that applicants have a robust level of legal literacy in appropriate legislative and policy areas	Met
1.6 Ensure that employers, placement providers, people with lived experience of social work, and carers are involved in student admissions	Met
1.7 Ensure that there are equality, diversity and inclusion policies in relation to applicants and that they are implemented and monitored	Met
1.8 Ensure that the admissions process gives applicants the information they require to make an informed choice about whether to take up an offer of a place on a course. This will include information about the award level and professional qualification, course content, teaching modes, location of study, assessment methods, duration, and observation requirements including the expectations around arranging or securing placements	Met
1.9 Ensure that the admissions process allows candidates from any eligible profession to demonstrate their suitability to join the course	Met

Key observations for standard 1

9. We learnt from the documentary evidence submission that all employer partners identified suitable applicants through appraisals, supervision and/or expressions of interest. Applicants received course briefings, including additional guidance regarding the programme from the course lead. Successful applicants would then be interviewed by their employer, with the course lead and member of the Comensus group in attendance when required.

10. We were able to review the Supplementary Application Form (SAF) prior to the inspection, that identified how an applicant's potential to acquire and demonstrate the competences set out in the relevant legislation governing AMHP practice, their capability to meet the academic and the information and communication technology (ICT) requirements of the course. The applicant's prior relevant experience, potential to learn and develop their legal literacy and knowledge was also tested and explored by pre-application interviews ahead of the submission of the SAF. (1.1, 1.4, 1.5)

11. The course provider identified that they had not had any independent applicants for a number of years prior to the inspection but that they could support an independent applicant and there was a process in place to support them. It was made clear that it would be the independent applicant's responsibility to secure their placement, including a suitably qualified and experienced AMHP Practice Educator, and the placement provider would complete the SAF in the same way.

12. We were satisfied that the SAF required details of professional registration (including the registration number and certificate of evidence) as well as details of DBS (including number) and agency confirmation that this was in place. The course leader confirmed that they checked the relevant register on receipt of the SAF. The Course and Practice Learning Handbooks had information outlining what actions must be undertaken in the event of a change in circumstances/DBS status. (1.2, 1.3)

13. As identified above, employer partners were clearly involved in the admissions processes. However, we were uncertain how people with lived experience were consistently involved. We heard from the course provider and employer partners that people with lived experience were involved in some areas, such as within interviews but this was not standard practice across all employer partners within the course. As a result, the inspection team made a recommendation in relation to standard 1.6. Full details of this recommendation can be found in the proposed outcome section.

14. We were able to explore how the course providers' equality, diversity and inclusion policies were implemented and monitored within the admissions process. Student representatives, employer partners and the course provider spoke through examples of reasonable adjustments and support that had been put in place to uphold individual requirements, linking in with the university Starfish, the course providers electronic student support system, to ensure ongoing support and adjustments from the admissions stage into the course for successful applicants. (1.7)

15. The course website provided applicants with a range of information that they needed to make an informed choice about whether to take up an offer of a place on the course. We heard from student representatives that they were made aware of the course requirements from their employer. The course lead identified the work that they did to provide course briefings and question and answer sessions to help support and inform applicants of the course requirements. Documentary evidence and discussions with the course lead and employer partners confirmed that the admissions process was open to applicants from any professions from which people are eligible to train as an AHMP. (1.8, 1.9).

Standard 2. Course governance, management and quality.	Met or not met
2.1 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	Met.
2.2 Ensure that regular and effective monitoring, evaluation and improvement systems are in place, and that these involve employers, people with lived experience including carers, and students	Met.
2.3 Ensure that the number of students admitted is aligned to a clear strategy, which includes consideration of: i. local and regional placement capacity; and 1. the availability of part-time or other flexible course arrangements to widen access wherever possible.	Met.
2.4 Ensure that the person with overall professional responsibility for the course is a relevant qualified professional with appropriate experience	Met.
2.5 Ensure that there is adequate provision of appropriately qualified and experienced staff, with relevant specialist subject knowledge and expertise	Met.
2.6 Ensure that educators are supported to maintain their knowledge and understanding in relation to professional practice	Met.

Key observations for standard 2.

16. Discussions with the course lead, professional lead and the lead for Continuing Professional Development identified the course's organisational structure, including its governance and quality assurance processes. We were able to identify roles, responsibilities, and lines of accountability at both the course and wider institutional levels. As a result of the documentary evidence reviewed and the inspection meetings held, we were satisfied that the person with overall professional responsibility for the course was a suitably qualified professional with appropriate and relevant AMHP experience. We were provided with examples of how their knowledge, research and experience as a qualified AMHP were embedded within the teaching, operational delivery, and quality management of the course. (2.1, 2.4)

17. Our meetings with the course lead, professional lead and the lead for Continuing Professional Development, and the documentary evidence review, confirmed that there was adequate provision of appropriately experienced and qualified staff. We were assured that the course team was supported to maintain their knowledge and understanding in relation to AMHP practice through the course providers appraisal system and access to wide range of continuing professional development opportunities. (2.5, 2.6)

18. We met with employer partners and people with lived experience, who provided examples of where and how they were involved in the monitoring, evaluation and improvement of the course. Feedback and involvement from these key stakeholders were part of the Course Review and Monitoring Process and fed into the end of year Dean of School Report which aims to evaluate provision across the whole School and identify actions for improvement for the next academic year. (2.2)

19. We heard from the course lead and employer partners of how the number of students admitted to the course could vary due to local and national workforce planning and requirements. Information submitted by the course provider outlined the university's robust Admissions Policy and Applicant Complaints Procedure, which governs all university courses. We were assured that the course lead and team have close working relationships and means of communication with their employer partners to ensure there were course arrangements in place to widen participation and that all students were assessed and supported to complete placements in appropriate settings. (2.3)

Standard 3. Curriculum	Met or not met
3.1 The views of employers, practitioners and people with lived experience of mental health services are incorporated into the design, ongoing development and review of the curriculum	Met.
3.2 The content, structure and delivery of the training is in accordance with relevant guidance and frameworks and is designed to enable students to demonstrate that they have the necessary knowledge and skills, including around cross-national border issues in relation to practice in Wales, where this is appropriate	Met.
3.3 The course is designed in accordance with equality, diversity and inclusion principles, human rights and legislative frameworks	Met.
3.4 Course content is routinely updated as a result of developments in legislation, research, government policy, and best practice	Met.
3.5 The integration of theory and practice is central to the course	Met.
3.6 Students understand how the standards of the student's own professional regulator(s), apply to their specialist practice	Met.
3.7 The course is designed to enable students to demonstrate an evidence-informed approach to AMHP practice, underpinned by skills, knowledge and understanding in relation to research and evaluation	Met.

Key observations for standard 3.

20. As identified within standard 2.2, we met with employer partners and people with lived experience, who provided examples of where and how they were involved in the course. Feedback and involvement from these key stakeholders were part of the Course Review and Monitoring Process and fed into the end of year Dean of School report which aims to evaluate provision across the whole School and identify actions for improvement for the next academic year. For the university social work team, there was the Service User, Carer and Academic Group (SUCAG), the Comensus Steering Group would meet three times a year, with the academic leads. We heard from members of the SUCAG of their input into the curriculum and involvement in teaching sessions for the AMHP course. (3.1)

21. We heard from the course lead and employer partners of the formal meetings they previously had in place and why these were moved away from. We learnt that following discussions between them all, the meetings were not the best use of time and often caused queries of sharing information between other employer partners that they did not need or require regarding students from different areas. We heard how the course lead was in regular contact with employer partners regarding the course and provided examples of their feedback being brought into the course.

22. We were given examples of where the course provider responds constructively to additional identified learning needs such as the work being done to provide additional focused training regarding the Nearest Relative Role. There were a wide range of professionals involved in the design and teaching of the course, these included but were not limited to, Consultant Psychiatrists, Mental Health Nurses, a Dietician and Academic and Policy Advisor and AMHPs, including their own research areas. Information contained in the presentation from the course lead identified the annual individual discussions they have with all local partners covering trainee progress, teaching quality, placement experiences, practice educator support and future planning requirements, with the teaching schedule being discussed and agreed as part of this process. (3.1)

23. We agreed that based on the documentary evidence provided prior to the inspection the content, structure and delivery of the course was in accordance with relevant guidance and frameworks. The course was designed to enable students, there were none from Wales, to learn and demonstrate that they have the necessary knowledge and skills to meet the required competencies by the end of their course. (3.2)

24. We considered evidence across the inspection and were satisfied that the course was supported by university wide policies and procedures, including the allocation of a personal tutor for wellbeing and academic support. We reviewed information on the course provider's equality, diversity and inclusion policies and heard about the accessibility of teaching and assessment methods, including any adjustments that individuals required to support their progress through the course. We heard that applicants were encouraged to disclose relevant information during admissions and selection, with any needs identified within the university Starfish system. We heard examples of reasonable adjustments that had been put in place for those who required them, including timetabling of teaching to be accessible to individual needs, the planning of accessible seating plans and teaching materials provided in advance. (3.3)

25. We concluded that the documentary evidence, including the Statutory Competencies and Teaching Mapping document, demonstrated that the integration of theory and practice was central to the course, and the course content was routinely updated because of developments in legislation, research, government policy, and best practice. We heard from the course lead of how their own research (and other members of the teaching teams research), and wider work within the AMHP role both locally and nationally, kept the course up to date. We met with another member of the teaching team who was a Mental Health Barrister and provided insight into how they worked with the course lead and wider teaching team to reflect any developments or changes in legislation,

government policy and current best practice in the curriculum. Student representatives that we met with spoke of how the course taught them appropriate theoretical frameworks and an evidence-informed approach to AMHP practice, that they could then take into their placement settings and be supported to apply and develop a greater understanding for their future role as an AMHP. (3.4, 3.5, 3.7)

26. We agreed that based on the documentary evidence provided and from discussions with the course lead, student representatives and employer partners, the course provided opportunities for students to explore the relationship between their role as an AMHP and their professional background and the opportunities and challenges this presents when working as an AMHP. (3.6)

Standard 4. Practice Placements	Met or not met
4.1 Ensure practice placements are integral to the course	Met.
4.2 Ensure that the number, duration and range of practice placements is appropriate to support the delivery of the course and the achievement of the learning outcomes	Met.
4.3 Ensure that students, practice placement providers and educators are prepared for each placement, which will include information about: i. the learning outcomes to be met ii. the timing and duration of any placement experience iii. the records to be maintained iv. expectations of professional conduct v. assessment procedures including the implications of, and any action to be taken in the case of failure to progress vi. communication and lines of responsibility	Met.
4.4 Maintain clear collaborative arrangements for planning and communication with placement providers including a thorough and effective system for approving and monitoring all placements, in order jointly to ensure: i. that practice placement settings provide a safe and supportive environment	Met.

ii. that placement providers have equality, diversity and inclusion policies in place which will apply to students, and which they will implement and monitor iii. that there is an adequate number of appropriately qualified and experienced staff, with relevant specialist subject knowledge and expertise, at the practice placement setting iv. that practice placement providers support their placement staff to maintain their knowledge and understanding in relation to professional practice, including appropriate practice placement educator training v. that a range of learning and teaching methods that respect the rights and needs of people with lived experience of social work and colleagues must be in place throughout all practice placements	

Key observations for standard 4.

27. The course provider confirmed that the SAF required signed confirmation from employer partners that a placement and a suitably qualified AMHP Practice Educator would be made available for an individual student as part of the admissions and selection process. The Module Handbook for SW4117 Theory and Practice of Mental Health Law (Role of the AMHP) clearly identified the administrative and practical information regarding placements and what a student should expect to do and learn during their placement, including the assessment methods and learning outcomes. (4.1)

28. The Practice Learning Handbook provided details of the placement requirements including portfolio requirements, assessment and contents, including information about expectations and responsibilities for all parties. The Handbook also set out the duration and breakdown of hours and required activities for placement/practice time. Placements on the course were a total of 55-days and the ways in which this was to be planned were set out in the Practice Learning Contract (including start date and submission date for the portfolio), with block and part-time release to support workforce arrangements. The inspection team considered this number of placements to be appropriate to support delivery of the course, and achievement of the learning outcomes. (4.2)

29. We learnt that all students were given an induction, and there was an Induction Checklist within the Practice Learning Contract, that included review of the placements' policies and health and wellbeing checks were identified and recorded. There was a section on the Practice Learning Handbook about expectations of professional conduct, guidance in the event of any difficulties/failure to pass academic work, as well as whistleblowing guidance. Students would meet with their Practice Educator and University Personal Tutor to draw up the Practice Learning Contract, and this will be revisited at the mid-point meeting, with checks regarding meeting the

required learning outcomes and competencies. The University Personal Tutor and the Course Leader remained a point of contact throughout the placement and there were recall days and tutorials planned for the students. (4.3, 4.4)

30. We heard from student representatives and employer partners of how accessible and involved the course lead and wider team were in the planning for all placements. Students spoke of knowing where to access relevant policies and procedures for their placements, including accessing Blackboard for anything they required from the university. There was evidence of reviews of placements, feedback from students and Practice Educators, including an approach to ensure people with lived experience of mental health services were ethically and appropriately considered and able to contribute. (4.3, 4.4)

Standard 5. Supporting students.	Met or not met
5.1 Ensure that students have access to resources to support their health and wellbeing including: i. confidential counselling services ii. occupational health services, where appropriate	Met.
5.2 Ensure that students have access to a system of academic and pastoral student support for their progression, development, wellbeing and welfare	Met.
5.3 Ensure that there is a thorough and effective process for ensuring the ongoing suitability of students' conduct, character and health	Met.
5.4 Make reasonable adjustments for students with health conditions or impairments to enable them to progress through their course and meet the relevant standards, in accordance with relevant legislation	Met.
5.5 Provide timely information to students about parts of the course where attendance is mandatory and have associated monitoring mechanisms in place	Met.
5.6 Provide timely and meaningful feedback to students on their progression and performance in assessments	Met.
5.7 Ensure that policies and processes, including for whistleblowing, are in place for students to challenge unsafe behaviours and cultures and organisational	Met.

wrongdoing, and report concerns openly and safely without fear of adverse consequences	

Key observations for standard 5.

31. Following the review of documentary evidence and from discussions with key stakeholders, we were assured of the range of university student support services available to support both students' educational and pastoral needs, including support from personal tutors and availability of counselling services and occupational health services. We were satisfied that there was a process in place for the course provider to ensure the ongoing suitability of students' conduct, character, and health. Discussions with the course team and student representatives enabled us to triangulate the documentary evidence relating to the support mechanisms, the Starfish system and processes in place to support any reasonable adjustments a student may require progressing through the course. (5.1, 5.2, 5.3, 5.4)

32. During our discussions with student representatives, it was identified that there was some uncertainty about the range of support services on offer to them from the university. As a result, the inspection team made a recommendation in relation to standard 5.1. Full details of this recommendation can be found in the proposed outcome section.

33. We received confirmation from employers that they knew how to raise concerns about student practice (while on placement) with the course team, but it was less clear how practice educators were reminded regularly, or students themselves were regularly reminded of the obligation to raise anything that might call into question their fitness to practice as an AMHP. As a result, the inspection team made a recommendation in relation to standard 5.3. Full details of this recommendation can be found in the proposed outcome section.

34. We concluded that the documentary evidence provided in advance of the inspection was able to demonstrate that attendance requirements were made clear in both the Course Handbook and Practice Learning Handbook. The course provider also set out the process and expectations about procedures for notifying any absence and the recording of attendance carried out by the course lead and use of electronic systems. (5.5)

35. Students on the course confirmed that they had received feedback in a timely manner, we heard that is often earlier than the timeframe identified within the University Academic Regulations. Student representatives that we met with also identified how the feedback they received was used to inform other academic work as they progressed through the course and supported their academic development and progression. (5.6)

36. The inspection team heard that the format of direct observation forms (for when the student is undertaking MHA assessments while on placement) varies between practice placement settings. These forms, where in place, are used to assess and provide feedback on progress and performance. As a result, the inspection team made a recommendation in relation to standard 5.6. Full details of this recommendation can be found in the proposed outcome section.

37. We considered evidence across the inspection and were satisfied that the course provider and employer partners had policies and processes in place, including for whistleblowing. Student representatives that we met with expressed that they felt able to challenge unsafe behaviours and cultures and organisational wrongdoing, identifying who and how they would report concerns to and the level of support they would be able to access during the process. (5.7)

Standard 6. Assessments	Met or not met
6.1 Ensure that the assessment strategy and design demonstrate that the assessments are robust, fair and consistent, and that those who successfully complete the course have developed the knowledge and skills necessary to meet the competencies set out in the relevant legislation and rules as set out in the guidance that accompanies these standards	Met.
6.2 Ensure that professional aspects of practice are integral to assessments	Met.
6.3 Use objective measures of student performance which ensure safe and effective practice as an AMHP	Met.
6.4 Regularly monitor and evaluate assessment standards	Met.
6.5 Clearly specify requirements for student progression and achievement within the course	Met.
6.6 Clearly specify that any aegrotat award which may be made will not lead to eligibility to be approved as an AMHP	Met.
6.7 Clearly specify the procedure for the right of appeal for students	Met.
6.8 Clearly specify a process for the appointment of at least 1 external examiner who must be appropriately experienced and qualified and from the relevant part of an appropriate professional register	Met.

Key observations for standard 6.

38. Following review of documentary evidence provided and discussions with key stakeholders, we were able to confirm that the variety of assessment methods utilised on the course were mapped to and met the statutory competencies and standards. Module descriptors for the course set out the learning outcomes, teaching, assessment methods and pass marks. The Course Handbook outlined the credits and pass marks for each module, the assessment strategy and the maximum length of time a student could study over was three years. (6.1)

39. Employer partners that we met with identified that students who completed the course were at a level and competency that they would expect for an AMHP. The external examiner reports identified that the course assessments were robust, fair and consistent. There were clear processes in place to ensure the monitoring and effectiveness of assessments including, the Verification and Moderation Reports for Moderation. The University Assessment Policy and Procedures document set out the moderation framework, and we heard examples of the internal and external moderation processes in place for the course. (6.2, 6.3, 6.4)

40. We were satisfied that the Course Handbook set out clear criteria and processes for monitoring and assessing how and when a student had successfully completed the course. Guidance within the Course Handbook confirmed that students must complete all modules and that there were two allowed attempts per assignment. The Practice Learning Handbook identified the requirement for Practice Educators to assess and confirm a student's competency, if they have met the requirements and were suitable for approval for AMHP practice. (6.5)

41. We concluded that the documentary evidence provided in advance of the inspection was able to demonstrate that the Programme Specification identified that no alternative award was available to students who do not complete the programme. We considered whether the wording in the Course Handbook and communication with students could be strengthened in this area and therefore, the inspection team made a recommendation in relation to standard 6.6. Full details of this recommendation can be found in the proposed outcome section.

42. We agreed that based on the documentary evidence provided and from discussions with the course lead that there was an academic appeals process in place for students on the course. Student representatives that we met with confirmed that they knew where it was and how to access it if they had required it. (6.7)

43. As a result of the documentary evidence submitted by the course provider, we were able to confirm that the external examiner was suitably qualified and experienced. We were assured that the course provider had a process in place for their appointment and the role of a chief external examiner to support them in this role. (6.8)

Outcome

The inspection team recommend that the course be approved.

The regulator decision maker agreed with this recommendation.

Recommendations

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

	Standard	Detail	Link
1	1.6.	The inspectors are recommending that the course provider considers how they advance partnership working and engagement with sponsoring bodies and other partner organisations to ensure that people with lived experience are involved in the admissions processes.	1.6
2	5.1	The inspectors are recommending that the course provider considers broadening the communication and advertisement regarding the range of student support and services on offer from the course provider and provides regular reminders to students of the wide range of support and services on offer.	5.1
3	5.3	The inspectors are recommending that the course provider reviews the arrangements for regularly reminding both practice educators and students of the need to flag anything that might call into question their fitness to practice as an AMHP throughout the duration of the course/placement.	5.3
4	5.6	The inspectors are recommending that the course provider works with employers to review and, if felt necessary, take steps to improve the content and consistency of in-placement assessment and feedback to students across employers.	5.6
5	6.6	The inspectors are recommending that the course provider considers reviewing the wording in the Course Handbook to make it clear that no alternative award is available for students who do not complete	6.6

		the programme, and that all competencies must be passed to achieve the target award.	