

Inspection Report

Course provider: Bournemouth University

Course approval: PG Dip Social Work (Children and Families) Step Up to Social Work (teach out) and PG Dip Social Work (Children and Families) Step Up to Social Work

Inspection dates: 28 May – 31 May 2024

Report date:	25 July 2024
Inspector recommendation:	All courses approved with conditions
Regulator decision:	All courses approved with conditions
Date of Regulator decision:	23 September 2024
Date conditions met and approved:	9 December 2024

Table of Contents

Introduction	3
What we do.....	3
Summary of Inspection	5
Language	6
Inspection.....	7
Meetings with students	7
Meetings with course staff.....	7
Meeting with people with lived experience of social work	7
Meetings with external stakeholders.....	7
Findings	9
Standard one: Admissions.....	9
Standard two: Learning environment	12
Standard three: Course governance, management and quality.....	15
Standard four: Curriculum assessment.....	18
Standard five: Supporting students	22
Standard six: Level of qualification to apply for entry onto the register	25
Proposed outcome.....	26
Conditions	26
Recommendations	27
Annex 1: Education and training standards summary	28
Regulator decision	35
Annex 2: Meeting of conditions.....	36
Findings	37
Regulator decision	39

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 2018¹, and the Social Work England [\(Education and Training\) Rules 2019](#).
4. You can find further guidance on our course change, 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 perception of bias in the approval process.
8. The inspectors complete an assessment of the evidence provided and advise the officer if they have any queries that may be able to be addressed in advance of the inspection.

¹ <https://www.legislation.gov.uk/ukdsi/2018/9780111170090/contents>

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 to 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, approved without conditions or that it does not meet the criteria for approval. Where the course has been previously approved we may also decide to withdraw 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 regulatory decision about the approval of the course.
13. The final 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 if we decide the conditions are not met.

Summary of Inspection

15. The Bournemouth University PG Dip Social Work (Children and Families) Step Up to Social Work course was inspected as part of the Social Work England reapproval cycle; whereby all course providers with qualifying social work courses will be inspected against the new Education and Training Standards 2021.

16. The course had undergone curriculum development, and changes had been made prior to inspection. The inspection team considered reapproval for the existing course, which was to be taught out, and approval of the newly validated course which would commence in January 2026.

Inspection ID	BUR2
Course provider	Bournemouth University
Validating body (if different)	
Course inspected	PG Dip Social Work (Children and Families) Step Up to Social Work (teach out) PG Dip Social Work (Children and Families) Step Up to Social Work
Mode of study	Full-Time
Maximum student cohort	25
Date of first cohort for newly validated programme	January 2026
Date of inspection	28 May – 31 May 2024
Inspection team	Nikki Steel-Bryan (Education Quality Assurance Officer) Monica Murphy (Lay Inspector) Fran Leddra (Registrant Inspector)

Language

17. In this document we describe the Bournemouth University as ‘the education provider’ or ‘the university’ and we describe the PG Dip Social Work (Children and Families) Step Up to Social Work as ‘the course to be taught out’ and the newly validated programme as ‘the course’. Where both version of the course are referred to, we will use the term ‘the courses’. Courses are also referred to as ‘SUSW’.

Inspection

18. A remote inspection took place from 28 May – 31 May 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.

19. 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

20. No parties disclosed a conflict of interest.

Meetings with students

21. The inspection team met with 2 students from the current cohort of Step Up to Social Work (SUSW) students. The inspection team were informed that both attendees were student representatives and the cohort had agreed that they could speak on behalf of all students. Discussions included the student experience of placements, the curriculum, teaching, learning and assessment, feedback, support available through the university and the student voice.

Meetings with course staff

22. 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.

Meeting with people with lived experience of social work

23. The inspection team met with people with lived experience of social work, known within the institution as the PIER partnership, who have been involved in the SUSW programme. Discussions included the admissions processes, their contributions to curriculum development, course design and course delivery and any support they received to carry out their duties.

Meetings with external stakeholders

24. The inspection team met with representatives from placement partners including Bournemouth, Christchurch and Poole (BCP) Council, Wiltshire Council, Reach Dorset, Children and Family Court Advisory and Support Service (CAFCASS) and Dorset Council.

Findings

25. 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.

26. In addition to documentary evidence the university also supplied a mapping document. The mapping document 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

27. The course provider submitted documentary evidence that included admissions policies, panel interview assessment marking criteria, a slide deck from an applicant briefing session and a frequently asked questions (FAQs) for Step Up to Social Work (hereafter SUSW).

28. The narrative included on the mapping document detailed that applicants to the course were interviewed, where they undertook an assessment centre which included a group exercise, panel interview, role play and a written exercise.

29. Candidates were required to have a minimum of a lower second-class honours degree (2:2), 6 months full-time (or equivalent) direct experience of working with vulnerable children, young people and / families, carers or vulnerable adults and GCSE English language and mathematics at grade C / 4 or above.

30. The inspection team noted that the admissions process was in line with the national requirements for step-up programmes set by the Department for Education (DfE) and agreed that this standard was met.

Standard 1.2

31. Documentary evidence submitted in support of this standard included guidance provided to assessment centre assessors and the FAQ documentation. Inspectors also considered the programme webpages which included clear statements on the entry requirements including the expectation that candidates would have 6 months' work experience relevant to social care.

32. Through discussion with relevant stakeholders, the inspection team heard that applicants were enabled to draw on their experience when answering interview questions and the mapping document reported that the assessment centre role play, and written task were designed to ensure that applicants were given different opportunities to demonstrate

their experiences and the application of them to social work. The inspection team agreed that this standard was met.

Standard 1.3

33. The university provided narrative within the mapping document that detailed that the assessment centre panels were made up as follows:

- Group exercise: included young people with lived experience of social work supported by a practitioner.
- Panel Interview: Included a university staff member and two social work practitioners.
- A role play: usually included current social work students as the actors.

34. The inspectors triangulated the approach with people with lived experience and employer partners during the inspection and agreed that this standard was met.

Standard 1.4

35. Prior to the inspection, the inspection team reviewed the course website which covered entry requirements including an enhanced disclosure and barring service (DBS) check, which was reviewed by the university and the employer partner. The inspection team also considered admissions policies and procedures for applicants with a disability, medical condition or other support need, for applicants with a criminal record.

36. Through discussion with course staff, the inspection team understood that issues of suitability were considered through a fitness to study panel and an example was provided where an offer of a place was rescinded following this process.

37. Inspectors acknowledged that the mapping document reported that, where an entry was returned on the DBS, or where a student made a disclosure, an institutional disclosure panel was held to make an assessment of potential ongoing risk. Inspectors understood that the panel included the deputy dean, the admissions tutor and a representative of the regulated profession from the programme team, however, did not include an employer partner representative.

38. Following consideration of the evidence, the inspection team concluded that this standard was met.

Standard 1.5

39. The university submitted documentary evidence that included the course website, the admission policy: taught programmes (excluding apprenticeships) and the admissions policies and procedures for applicants with a disability, medical condition or other support

need. The mapping document reported that applicants for the SUSW course were allocated a number to reduce bias and the SUSW Coordinator asks each applicant invited to interview if any reasonable adjustments were required.

40. As part of a secondary submission of evidence the university were asked to supply additional information on equality, diversity and inclusion (EDI) training provided to staff involved in admissions activities. The inspection team were provided with a fair practice in assessment and bias document which was understood to represent the DfE baseline requirement in relation to bias in recruitment to the SUSW programme.

41. Through discussions with stakeholders across the inspection, the inspection team heard that university staff were provided with institutional level EDI training, including in unconscious bias. A further recent example of training delivered to staff was on neurodiversity. Staff were also provided with a training session based on the baseline requirements set by the DfE (c.f. para [40](#)) and people with lived experience of social work involved in SUSW admissions were provided with a short training session around discussion and dialogue. The inspection team understood that all stakeholders involved in interviews who were not qualified social workers were supported by qualified social workers for all admissions activities. The inspection team agreed that this standard was met.

Standard 1.6

42. The course provider shared a link to the government website for the SUSW programme, the institutional course website, a slide deck from an applicant briefing session and the agenda from a SUSW Introductory Day offered to successful candidates.

43. The inspection team triangulated the quality of the information provided to applicants across the inspection and reported that the websites were comprehensive, including providing information on fees and bursaries and the level of expected prior experience. The course team noted that they were required to use the SUSW documentation provided by the DfE and that all activities were linked directly to the professional competencies framework (PCF).

44. The inspectors understood that current students were involved in the assessment centre and that applicants were shown videos from previous students to give a realistic outlook on the challenges of undertaking the course. An example was provided where an applicant made an informed decision not to accept an offer on the course following this process. The inspection team agreed that this standard was met.

Standard two: Learning environment

Standard 2.1

45. The programme handbooks, practice learning handbooks and programme specifications provided to the inspection team indicated that one placement of 70 days (placement 1) and one placement of 100 days (placement 2) were undertaken. The mapping document reported that the 100-day placement was undertaken within a statutory setting.

46. In addition to the two assessed practice placements, students were also required to complete 30 skills days. The number of skills days, and how they were embedded within the programme, was unclear from the documentary evidence supplied in advance of inspection. During the inspection the course team provided a timetable of the programme which clearly identified 30 skills days. Inspectors acknowledged that skills days were timetabled and that some themes had been organised in advance, and some were intentionally left flexible to provide the skills development individual cohorts required.

47. Through discussions with the course team the inspection team understood the allocation methodology, and that placements were contrasting.

48. However, students met by the inspection team reported that, whilst on placement, they had not identified themselves to service users as student social workers. The inspection team heard that students either referred to themselves with the same job title as other members of their placement team doing similar work or that they simply expressed to clients that they were training but were not explicit that this training was as a student social worker. The inspection team provided the course team with an opportunity to provide any documentary guidance given to students on how to refer to themselves when on placement however, the university was unable to provide any.

49. Following a review of the evidence, the inspection team is recommending that a condition and a recommendation is set against standard 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 and its monitoring and approval can be found [in the conditions section of this report](#). Further detail on the recommendation can be found [in the recommendations section of the report](#).

Standard 2.2

50. Documentary evidence reviewed prior to inspection included a placement policy and procedure, the SUSW programme handbook and a SUSW quality assurance plan from the South West Partnership (hereafter SUSW QA plan) that provided details of the matching

process, induction and student support. In advance of the inspection the inspection team requested further clarity on how and where the relationship between the university and the placement providers was set out and understood that the university was contracted in to provide the teaching on the course and that an inter-authority agreement, underpinned by the DfE set-up requirements. Each student had an individual contract with their sponsoring local authority that outlined that the authority would provide the programme placements.

51. Across the inspection the inspection team heard that students were felt to be placed into services that matched their learning needs. Practice educators were experienced, and students reported being able to identify where they had developed on placement.

52. The inspection team agreed that this standard was met however, identified that the placement handbooks contained references to the HCPC.

53. Following a review of the evidence, the inspection team is making a recommendation in relation to Standard 2.2 that the handbooks are reviewed for currency. Full details of the recommendation can be found [in the recommendations section of this report.](#)

Standard 2.3

54. The SUSW QA plan submitted in support of this standard included information on the expectations for induction, and the practice placement agreement included an induction checklist including student health and safety.

55. The inspection team triangulated whether students had an appropriate induction to placement and whether supervision, support, access to resources and workload was realistic. The inspectors were assured that students had access to support and resources whilst on placement and practice educators spoke confidently about the ways in which workloads were protected.

56. The students met by the inspection team had differing experiences of placement induction. The inspectors noted that the documentation was clear that an induction should take place and that, it was the responsibility of the employer to organise induction. The inspection team queried whether induction was audited by the university and understood that the programme leader personally read, and provided feedback, on a sample of placement portfolios, which included the practice placement agreement. Furthermore, the inspectors acknowledged that the student group available to meet the inspection team was small.

57. Following consideration of the evidence received, and heard, the inspectors concluded that this standard was met with the recommendation that the university consider the quality assurance processes in place to ensure that all students have an appropriate and timely induction to placement. Further details on the recommendation can be found [in the recommendations section of this report.](#)

Standard 2.4

58. Documentary evidence received prior to inspection included the SUSW QA plan and the placement handbooks. The placement handbooks included direct references to what appropriate student caseload was. Across the inspection the inspectors heard from a range of stakeholders that students were supported by qualified practitioners, that practice educators were conscious about the case load of their students and that students found their responsibilities on placement appropriate for their stage of education and training. The inspection team agreed that this standard was met.

Standard 2.5

59. Documentary evidence reviewed prior to inspection included the unit specification for the module *Developing Professional Relationships in Social Work (Readiness for Direct Practice)* which clearly detailed the assessed readiness for direct practice activity. The mapping document reported that the assessment included people with lived experience of social work and that students also spent 2 days shadowing in a local authority team to help prepare them for practice. The inspectors triangulated students' readiness for direct practice during the inspection. Practice educators and students both reported an appropriate level of readiness for practice and the inspection team agreed that this standard was met.

Standard 2.6

60. From the narrative included on the mapping document the inspectors understood that the Practice Educator Learning Partnership (PELP) held quarterly panels to review the portfolios of Practice Educators. Through discussion with the staff involved in placement learning the inspection team heard that the local authorities were responsible for ensuring that their practice educators were appropriately trained, and on the register, and that the university maintained oversight of this via a SharePoint folder. Independent practice educators were employed by the university as hourly paid staff, or on a contractual basis. Independent practice educators were required to refresh their skills every 2 years as part of this employment arrangement which included providing their qualifications and DBS clearance. A named member of staff was responsible for cross checking the Social Work England register for all practice educators. The inspection team agreed that this standard was met.

Standard 2.7

61. Documentary evidence reviewed prior to inspection included the institutional whistleblowing policy, a concerns protocol and an anti-discriminatory statement. The inspection team noted an understanding of whistleblowing, and an understanding of where to find the policy, across a variety of stakeholders. Inspectors saw clear links to whistleblowing on the virtual learning environment (VLE) when provided with a

demonstration during the inspection. The inspection team agreed that this standard was met.

Standard three: Course governance, management and quality

Standard 3.1

62. Documentary evidence reviewed prior to inspection included a faculty map of Health and Social Sciences, SUSW QA plan, slide deck from student facing induction activity, Faculty Academic Standards and Education Committee (FASEC) terms of reference. The senior leadership team (SLT) presented the governance structure during the inspection giving a clear explanation of how the various committee, and institutional processes fitted together. The inspection team considered the approach to be appropriate for an academic programme. The inspectors acknowledged that the course was led by people who had direct experience of the social work profession, and that most personal academic tutors (PATs) had experience of the profession or were qualified social workers. The inspection team agreed that this standard was met.

Standard 3.2

63. Documentary evidence reviewed prior to inspection included the Pan-Dorset and Wiltshire Social Work Teaching Partnership (PDWTP) Future Strategy, the PDWTP Labour Market and Workforce Plan and CPD Pathway, the SUSW QA Plan and the institutional placement policy and procedure.

64. Through discussion with stakeholders across the inspection the inspection team heard that the role of the Regional Coordinator for the SUSW programme was pivotal in ensuring that placements met the professional standards, and that any emergent issues were quickly resolved, or moved in the appropriate processes.

65. The inspectors understood that the local authority provided the practice educators for the SUSW course. Through discussion with the practice educators the inspection team heard lived examples of the use of the contingency processes for placement breakdowns.

66. The inspection considered the evidence, acknowledging that a concern around consent had already been reported (c.f. para [48](#)) and concluded that this standard was met.

Standard 3.3

67. Evidence submitted in support of this standard included the PLA. The PLA included a clear induction checklist for social work students and referenced policies such as lone working, risk assessment and personal safety. The mapping document reported that the PLA also included agreements around additional learning needs, equality issues, caring responsibilities, wellbeing and reasonable adjustments. The inspection team acknowledged the documentation provided an induction framework to introduce relevant policies

however, noted that induction practices varied as reported by a small number of students (c.f. para [56](#)).

68. Throughout the inspection the inspectors reported that the approach for all stakeholders appeared to be nurturing. Through discussion with university support services the inspection team heard that wellbeing support, including counselling, continued to be available to students when on placement. Practice educators discussed examples of using the PLA to articulate individual student emotional needs, or reasonable adjustment, and the use of the midterm review to check that the support was working as it should.

69. The inspection team agreed that the standard was met with the recommendation that the university consider the quality assurance processes in place to ensure that all students have a good induction to placement. Further details on the recommendation can be found [in the recommendations section of this report](#).

Standard 3.4

70. The inspection team reviewed the documentary evidence submitted by the course provider and noted that the university was a member of a Teaching Partnership. As part of a secondary submission of evidence, the university supplied minutes from the SUSW Partnership Board. The partnership board included attendees from the university, Bournemouth, Christchurch and Poole (BCP) council, Dorset Council and Wiltshire Council and reported discussions on timetabling, contracts and commissions, recruitment, recruitment, finances, student placements and skills days. Through discussions with stakeholders the inspection team heard how the SUSW QA plan was being enacted and that employers were members of the practice placements panels (PAP). The inspection team agreed that this standard was met.

Standard 3.5

71. Documentary evidence reviewed prior to inspection included a monitoring and enhancement review policy and procedure, a student engagement and feedback policy and procedure, the public involvement in education (PIER) partnership 2022-23 report, the PIER partnership strategy and a weblink to information about the PIER partnership.

72. The inspection team noted that employers, practice educators and students were involved in the Quality Assurance of Placement Learning (QAPL). The staff / student forum (SSF) was reported on via bespoke video messages from the programme leader at the request of students and students could feedback on any part of their course via the university system SimOn. The PIER partners were involved in the PAP and provided an annual report which was considered by the programme board however, there was no evidence that any people with lived experience sat on course governance panels.

73. The inspection team agreed that the standard was met with the recommendation that PIER partners were considered for membership of course governance panels. Further details on the recommendation can be found [in the recommendations section of this report](#).

Standard 3.6

74. The inspection team were satisfied that the number of students admitted to the course took into consideration local and regional placement capacity. As part of the evidence submission the course provider reported that teaching partnership members were involved with national SUSW groups, and that the programme leader attended the national SUSW academics groups where national DfE calls for the step-up programme were discussed. Through discussions with the course staff, and employer partners, the inspectors felt assured that the workforce planning was clear and that all partners understood how many students they were able to accommodate. The inspection team agreed that this standard was met.

Standard 3.7

75. The evidence provided to support this standard included weblinks to the online profile for the programme lead which detailed an appropriate social work qualification. The Social Work England register was cross checked, and no annotations were recorded. The inspection team agreed that this standard was met.

Standard 3.8

76. Documentary evidence submitted in support of this standard included weblinks to the profiles for the social work staff. The inspection team agreed that this standard was met noting a high proportion of qualified social workers, many with PhDs and active research careers.

Standard 3.9

77. The inspection team reviewed the Annual Monitoring and Enhancement Review (AMER) policy and procedure documents, a Student Engagement and Attendance policy and the Marking and Moderation policy. As part of a secondary submission of evidence the university provided the AMER reports from 2022-23 and 2024. The AMER was understood to include data on equality, diversity and inclusion (EDI), and, at the faculty level, informed course actions.

78. The narrative included on the mapping document reported that staff were able to check on the progress of students at any time either via Turnitin or through the university system and it was noted that PATs check on their tutees progress prior to meeting with them. Employers also reported continuing to track the SUSW students through the assessed and supported year in employment (ASYE). The course team understood the university and DfE

EDI priorities, however, did not have responsibility for the initial selection of applicants. The inspection team agreed that this standard was met.

Standard 3.10

79. The inspection team reviewed a peer reflection on education practice policy and procedure and a Performance Framework for support and development. The narrative supplied within the mapping document provided detailed examples of practice related activities undertaken by the team including staff members who practiced as best interest assessors (BIA), staff involved in running a support group, staff who were deprivation of liberty safeguards (DOLS) assessors and staff involved in mentoring neurodivergent young adults. Staff were also understood to be supported to attend conferences and publish research.

80. The inspection team triangulated the evidence submitted with the course team. Staff talked confidently about the peer review of teaching, practice-based activities, research and annual appraisal. The inspection team agreed that this standard was met.

Standard four: Curriculum assessment

Standard 4.1

81. Documentary evidence submitted to support this standard included institutional policies and procedures on marking and moderation, assessment criteria and assessment design. The university also supplied a mapping document that clearly demonstrated how the course mapped to the Social Work England Professional Standards.

82. The inspection team carefully considered the mapping documents provided and noted that they had no concerns regarding the academic content of the programme, highlighting that the majority of staff were qualified social workers who continued to be engaged in practice and were research active. Through discussion with stakeholders the inspection team heard that students spoke positively about the course and their learning and employers reported taking active roles in delivering teaching and being able to shape aspects of the curricula. The inspection team agreed that this standard was met.

Standard 4.2

83. The documentary evidence submitted prior to inspection in support of this standard for all courses included an institutional Programme Approval and Periodic Review Process and the SUSW QA Plan. As part of a secondary submission of evidence the university provided the PIER Strategy (2025) and the PIER Partnership Annual Report (2022-23).

84. The course provider presented several photographs to the inspection team which illustrated the process of consultation for the newly validated course which included

employers, BA Social Work students, MA Social Work students, SUSW students and the PIER members.

85. PIER members reported positively on their contributions to the development and design of the curriculum citing opportunities to talk through with academic staff potential curriculum development. Additionally, people with lived experience were members of the PAP for the SUSW course where it was reported they could raise overall themes in relation to practice assessment. Employers and practitioners reported being consulted about programme changes for the new curriculum, highlighting legal literacy, and developing research mindedness as being two areas they felt they had made an impact. The inspection team agreed that this standard was met.

Standard 4.3

86. Evidence submitted in support of this standard included an institutional Equality and Diversity Implementation Policy and a link to an Anti-Racist Practice Steering Group (ARSG). The narrative included on the mapping form stated that the course was mapped to the knowledge and skills statements (KSS) for child and family social work, the professional capabilities framework (PCF) and that it met the United Nations Sustainable Development Goals which the course provider understood ensured the programme was designed in accordance with EDI and human rights frameworks. The inspectors also acknowledged evidence submitted for other standards as follows:

- adjustments made via the Additional Learning Need (ALN) process (c.f. para [107](#)).
- unit specification for *Law and Social Policy for Social Work with Children and Families* included human rights.

87. The inspection team understood from the narrative in the mapping document that there was a Faculty Inclusivity Lead who took leadership for the improvement and enhancement of maintaining a safe and inclusive environment.

88. Throughout the inspection, the inspectors recognised a commitment to EDI and human rights, including a dedication to the importance of embedding social work values in the course from the SLT. Through discussions with the course team the inspection team heard examples of the globalisation of the reading lists and the curriculum, including diversity within case studies. University staff were provided with EDI training, including on specialist topics where appropriate, an example of training on neurodiversity was provided. The inspection team agreed that this standard was met.

Standard 4.4

89. Through review of the documentary evidence the inspection team considered the currency of the programme modules and the research interests submitted as part of the staff biographies. Throughout the inspection, the inspection team heard examples of

research informed practice, some of which included the PIER partnership, employers, or practitioners. The inspection team acknowledged the role of the AMER in ensuring currency of courses and did not hear any evidence that suggested that the courses were not continually updated, or any concerns from stakeholders about the currency of the programme. The inspection team agreed that this standard was met.

Standard 4.5

90. The inspection team reviewed the programme specification and unit outlines submitted in advance of the inspection. Through discussion with stakeholders the inspection team heard that practice educators had access to resources for supervision, for example theory cards. Students were able to talk confidently and positively about research that was happening within the university and described supervision as reflective. The inspection team agreed that this standard was met.

Standard 4.6

91. Evidence submitted in support of this standard included placement handbooks and unit specifications. Through discussion with stakeholders across the inspection the inspection team heard that a skills day had been held on death and dying, that students visited court as part of a skills day and that legal professionals were involved in the delivery of law and policy modules. The inspection team agreed that this standard was met.

Standard 4.7

92. The narrative supplied within the mapping document provided a table of contact hours and reported that students undertook 180 hours of academic contact time divided between modules using a standard credit accumulation and transfer systems (CATS) where 1 credit was equal to 10 hours of notional learning time. The university expectation was that for every 30 hours teaching, students were expected to undertake 170 hours self-study (total 200 hours, per 20 credits). The inspection team agreed that this standard was met.

Standard 4.8

93. Prior to inspection, the inspection team reviewed institutional policies on assessment design, generic assessment criteria and programme specifications. The inspection team noted a range of assessment linked to practice including case studies, reflective work and appropriate analysis. Students reported that the assessment schedule was manageable, and they had sufficient information to plan work in advance. The inspection team agreed that this standard was met.

Standard 4.9

94. The inspection team reviewed the programme specifications and a unit sequencing map. Students reported a manageable assessment schedule (c.f. para [93](#)) and the inspection team

did not hear any evidence to suggest that either the level, form, or timing of assessments was not appropriate. The inspection team agreed that this standard was met.

Standard 4.10

95. Evidence submitted in support of this standard included the institutional policy on assessment feedback and return of work and independent marking and moderation policy, and a unit sequencing map. The students met by the inspection team were at the beginning of their studies however, had received some feedback. They noted that as assessment was varied it was not always obvious how the feedback from one assignment supported the next; for example, feedback on an assessment completed referral form didn't seem to easily apply to the law assignment. However, they acknowledged that each module was different and reported feeling as though they were developing through the course. The inspection team agreed that this standard was met.

Standard 4.11

96. The inspection team reviewed the CV of the external examiner and the teaching team staff profiles. The inspectors also acknowledged the institutional policies on assessment feedback and marking and moderation. The inspection team cross-referenced the Social Work England register for the external examiner and confirmed that they were appropriately qualified and on the register. Staff were considered to have appropriate expertise to undertake assessment. Practice educators were considered to be appropriately trained and experienced to assess placement learning. The inspection team agreed that this standard was met.

Standard 4.12

97. Evidence submitted in support of this standard included placement handbooks, the SUSW QA Plan and the institutional policies and procedures for marking and moderation. In addition, the course provider submitted the unit specification for Developing Professional Relationship in Social Work (Readiness for Direct Practice).

98. The inspection team noted that a diverse range of people were involved in assessment decisions. Academic work was considered by academic staff and placement portfolios were understood to be reviewed by practice educators, the programme leader and members of the PIER group. In addition, all students were allocated a PAT who had access to their students' full range of progression information (c.f. para [78](#)). The PAP included academics, practitioners and PIER group members and the PLA included details of direct observation of practice. The inspection team agreed that this standard was met.

Standard 4.13

99. The inspection team reviewed documentation for an existing SUSW course that was being delivered, and for a new course that would commence in 2026 (please see the

summary of inspection for more details). The inspection team reported that the department was research based and recognised the identified links between theory and practice already reported (c.f. paras [90](#)). Through discussion with the course team the inspection team heard examples of how evidence informed practice was embedded into the course and that the expectation was that students would leave the university with the ability to appraise research. The institutional approach of the Fusion Model where research, education and practice were brought together and where what was learnt through research was expected to impact the curriculum and passed onto practice through engagement. The students met by the inspection team spoke positively about the research resources, and academic content of the programme. Throughout the inspection, from a range of stakeholders, the inspection team heard how university research was used and embedded. The inspection team agreed that this standard was met.

Standard five: Supporting students

Standard 5.1

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

101. Central Services reported that a GP medical centre, counselling, careers advice and support and occupational health services were available flexibly, on and off campus. Counselling was available to students via a 24 hour a day helpline. The inspection team noted that careers advice was offered as a lifelong service to graduates of the university and IT equipment. Students spoke positively about the support they were offered. The inspection team agreed that this standard was met.

Standard 5.2

102. The inspection team met with representatives from academic support services and heard that students had access to library services, academic development and academic skills eservices to support academic writing. Within the department students were allocated a PAT.

103. Through discussions with employer partners the inspection team heard that dyslexia testing was not funded for students on the SUSW course, and the inspection team were keen to better understand how students were supported where funding wasn't available. It was explained that a bursary scheme was available to allow students to access a full diagnostic assessment.

104. The inspection team was given a demonstration of the VLE and the IT system integration which covered the way in which students could find out about and book

appointments with university services, as well as the types of sessions on offer. The inspection team agreed that this standard was met.

Standard 5.3

105. Prior to inspection the inspection team reviewed student handbooks, a fitness to practice policy, an interruption of study procedure, a support to study policy and the student engagement and attendance policy. As part of a secondary submission of evidence the university also provided the student disciplinary policy and the unacceptable behaviour policy.

106. Through discussion with the course team, the inspection team heard that students signed a student charter which required them to disclose any changes to their suitability for social work. The students reported being aware that it was their responsibility to notify the university and their employer should anything impact their suitability to study. The inspectors agreed that this standard was met.

Standard 5.4

107. The inspection team reviewed the institutional admissions policy and the admission policy for students with a disability, medical condition or other support need. The inspection team understood from the narrative supplied on the mapping document that the ALNs team contacted students who declared a disability or learning support need. ALNs worked with students to identify reasonable adjustments and put support in place as appropriate dependant on individual need. Through discussion with the course team, the inspection team heard an example of supporting a student with dyslexia and ensuring that the university and employer IT account had access to the same software for communication. The inspection team agreed that this standard was met.

Standard 5.5

108. Evidence submitted in support of this standard included the programme handbook which contained unit specifications and information about the course and assessment. The course provider also submitted programme specifications and a slide deck from an induction activity.

109. Students reported being aware of registration and the requirement to complete CPD, and the narrative on the mapping document noted that all students were offered an ASYE interview within their employing local authority and that an interview day preparation session was offered.

110. The inspection team noted that the course handbook was comprehensive, noting that the professional standards were introduced in the first module of the programme, Law and Social Policy.

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

Standard 5.6

112. Prior to the inspection, the inspection team reviewed the programme handbooks and the institutional attendance policy and procedure. The programme handbooks for each course made a clear statement that attendance in timetabled sessions was considered a professional expectation comparable to workplace norms alongside a notice that attendance would be monitored.

113. The narrative in the mapping document reported that the university monitored attendance using a number of data points that included attendance at teaching sessions, submission or non-submission of unit assessment and access and use of the VLE.

114. Attendance at skills days was monitored by an attendance sheet. The inspection team were keen to better understand how missed skills days were remediated. Through discussion with the course team, the inspection team heard that students were required to undertake a bespoke exercise to demonstrate their learning and compensate for their absence.

115. Placement attendance was recorded by placement supervisors and the practice educator. The inspection team agreed that this standard was met.

Standard 5.7

116. 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 summative assessments. Feedback was also provided by practice educators, on students' placement portfolios and through PAT meetings. PIER partners offered feedback on readiness to practice and through the PAP panel. Students reported that feedback was generally timely. An example was provided where feedback was late and the cohort had been contacted with an explanation, the communication was considered positively by students. The inspectors were satisfied that students reported having a sense of progression and that feedback was provided, and that students had been supervised and assessed (c.f. standards [3.9](#), [4.8](#) and [4.10](#) for more information on student feedback). The inspection team agreed that this standard was met.

Standard 5.8

117. Documentary evidence reviewed prior to inspection included student handbooks and the institutional policy and procedure on academic appeals. The inspection team noted that the policy was available, and that some information on academic appeals was included in the handbooks. The inspection team agreed that this standard was met.

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

Standard 6.1

118. The inspection team reviewed the programme specifications for all courses and agreed that the award of PG Dip Social Work (Children and Families) Step Up to Social Work met the standard, noting that non-qualifying exit awards were clearly distinguished from the registered 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 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, the inspection team are proposing the following conditions for this course at this time.

	Standard not currently met	Condition	Date for submission of evidence	Link
1	2.1	The education provider will provide evidence that they have: • Provided students with an immediate clear and explicit instruction that every student is to identify themselves as a student social worker, working in a learning capacity, when on placement. • Provided guidance to students and practice educators specifying that service users are to be made aware of the student status of student social workers and that they need to provide consent to work with a student social worker. • Updated relevant paperwork to ensure that student status and service user consent is appropriately understood for each placement (for example, updating the PLA and / or the placement induction process to ensure status is	23 December 2024	Para 48

		discussed and the discussion is recorded). Developed a quality assurance measure of the process to ensure all students are being provided with appropriate guidance regarding status and consent (for example auditing the PLA or induction forms).		
--	--	--	--	--

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	2.1	The inspectors are recommending that the university review the information regarding skills days to ensure consistent advice as to whether they are counted as placement days.	Para 46
2	2.2	The inspectors are recommending that the university review the placement handbooks and remove references to the HCPC.	Paras 52
3	2.3 3.3	The inspectors are recommending that the university considered the quality assurance measures in place to ensure that all students have an appropriate and timely induction to placement.	Paras 56 67
4	3.5	The inspectors are recommending that the university considers PIER partners for membership of course governance panels.	Para 72

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: i. have the potential to develop the knowledge and skills necessary to meet the professional standards ii. can demonstrate that they have a good command of English iii. have the capability to meet academic standards; and 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 take up an offer of a place on a course. This will include	☒	☐	☐

Standard	Met	Not Met – condition applied	Recommendation given
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: i) placements in at least two practice settings providing contrasting experiences; and 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 current knowledge, skills and experience to support safe and effective learning.	☒	☐	☐

Standard	Met	Not Met – condition applied	Recommendation given
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.	☒	☐	☐
3.5 Ensure that regular and effective monitoring, evaluation and improvement systems are in place, and that these involve	☒	☐	☒

Standard	Met	Not Met – condition applied	Recommendation given
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 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,	☒	☐	☐

Standard	Met	Not Met – condition applied	Recommendation given
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 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.	☒	☐	☐

Standard	Met	Not Met – condition applied	Recommendation given
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: i. confidential counselling services; ii. careers advice and support; and iii. occupational health services	☒	☐	☐
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.	☒	☐	☐

Standard	Met	Not Met – condition applied	Recommendation given
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			
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

1. 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](#).
2. A review of the conditions evidence will be undertaken and recommendations will be made to Social Work England's decision maker.
3. This section of the report will be completed when the conditions review is completed.

	Standard not met	Condition	Recommendation
1	2.1	The education provider will provide evidence that they have: • Provided students with an immediate clear and explicit instruction that every student is to identify themselves as a student social worker, working in a learning capacity, when on placement. • Provided guidance to students and practice educators specifying that service users are to be made aware of the student status of student social workers and that they need to provide consent to work with a student social worker. • Updated relevant paperwork to ensure that student status and service user consent is appropriately understood for each placement (for example, updating the PLA and / or the placement induction process to ensure status is discussed and the discussion is recorded).	Met

		Developed a quality assurance measure of the process to ensure all students are being provided with appropriate guidance regarding status and consent (for example auditing the PLA or induction forms).	
--	--	--	--

Findings

4. The conditions review was undertaken as a result of the conditions set during the course approval as outlined in the original inspection report above.
5. The course provider submitted an updated practice learning agreement (PLA) and a mapping form which provided narrative evidence, and embedded screenshots, in support of the condition set against standard 2.1.
6. The embedded evidence in the mapping document included:
 - an email to all students explaining the importance of ensuring that their documentation, ID badges and email signatures used the title '*Social Work Student*'
 - a screenshot of the slide deck used at the University induction programme which covered professionalism and student status and addressed consent
 - a screenshot of the update to the PLA
7. The PLA submitted as evidence against this standard had been updated to include a section on '*transparency over role as a social work student*'. Within this section it was made clear that all students must identify themselves as a 'social work student', that they must specify to all service users, and other professionals, that they are a social work student and that all service users must provide consent to work with a social work student. Additionally, this section of the PLA noted that practice educators and placement supervisors must also refer to them as a social work student.
8. The narrative within the mapping document explained that practice educators and placement supervisors were provided with guidance to ensure that student status was discussed at the practice learning agreement meeting, and that students were additionally advised they must be clear about their student status at the placement preparation day. In addition, the mapping form reported that the Step-up to Social Work Coordinator read, audited and signed all PLAs to ensure that induction was appropriately undertaken. It was understood by the inspectors that, going forward, this

would also include ensuring the section on transparency had been completed satisfactorily.

9. Following the review of the documentary evidence submitted, the inspection team are satisfied that the condition set against the approval of the PG Dip Social Work (Children and Families) Step Up to Social Work (teach out) and the PG Dip Social Work (Children and Families) Step Up to Social Work is met.

Regulator decision

Conditions met.