Inspection Report

Inspection ID	UWOR1_A
Course provider	University of Wolverhampton
Validating body (if different)	
Course inspected	Advanced Diploma in Approved Mental Health Professionals (Level 6) PG Cert Mental Health Practice for Approved Mental Health Professionals (Level 7)
Mode of study	Advanced Diploma - Full-time work-based learning PG Cert -Part-time
Maximum student cohort	30 across both courses
Date of inspection	09-10 June 2026
Inspection team	Tom Eaton (Education Quality Assurance Officer) Sarah Mcanulty (Lay Inspector) Jill Hemmington (Registrant Inspector)
Inspector recommendation	Approved with conditions
Regulator decision:	Approved with conditions
Date of Regulator decision:	30 September 2026
Conditions:	Standard 1.1

	Standard 1.4 Standard 1.5 Standard 1.6 Standard 1.8 Standard 2.1 Standard 2.2 Standard 2.5 Standard 3.1 Standard 3.2 Standard 3.5 Standard 4.1 Standard 4.3 Standard 4.4 Standard 5.3 Standard 5.7 Standard 6.1 Standard 6.2 Standard 6.3 Standard 6.4 Standard 6.5
Date conditions met and approved:	

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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 the University of Wolverhampton as 'the course provider' and we describe the Mental Health Practice for Approved Mental Health Professionals Advanced Diploma (Level 6) and the Mental Health Practice for Approved mental Health Professional PG Cert (Level 7) as 'the course', 'the courses' or by their level, 'level 6 course' or 'level 7 course'.

Summary of Inspection

5. University of Wolverhampton Mental Health Practice for Approved Mental Health Professionals Adv. Dip/PG Cert 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 09-10 June 2026.

7. As part of this process the inspection team gathered feedback from key stakeholders through meetings on inspection. This included the course team, students and alumni and placement providers.

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	**Not 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	**Not met**
1.5 Ensure that applicants have a robust level of legal literacy in appropriate legislative and policy areas	**Not met**
1.6 Ensure that employers, placement providers, people with lived experience of social work, and carers are involved in student admissions	**Not 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	**Not met**

methods, duration, and observation requirements including the expectations around arranging or securing placements	
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. The course provider detailed their admissions process and provided evidence that showed elements of suitability checks through a nomination form completed by the employer and a personal statement completed by the applicant. We were not reassured that a clear formalised process for admissions was implemented that showed course team involvement at admissions stage and where decisions were made to confirm applicants had the required skills as set out in standard 1.1. We noted that applicants had set out their prior relevant experience of the practical application of appropriate legislation and policy through internal application forms and an agency nomination form that was screened by partner agencies. However, it was not evident how the course provider demonstrated how they considered this experience as part of the decision making for admissions (1.4). Additionally, the course provider highlighted areas where applicants could demonstrate their previous experience through a personal statement at application stage. However, it was not evident where applicants had the opportunity to showcase their abilities in interpreting and reflecting on impact and changes arising in case law (1.5). A condition was set against these standards for both courses, and further details are available in the proposed outcomes section of this report (1.1, 1.4, 1.5).

10. We were provided with insight into how the course provider confirmed that applicants were registered with a relevant regulatory body through suitability checks carried out by the university. Information was provided to applicants through a course handbook that reminded them of their responsibility to inform the course provider if their registration changes (1.2).

11. We learnt that the initial suitability of applicants was checked by employer partners of the course provider, while DBS checks were carried out by the university compliance team. However, we recommended that the course provider reviewed the process surrounding the suitability of applicants to improve clarity on university involvement in selection across both courses (1.3).

12. The course provider recognised the need for people with lived experience (PWLE) involvement in the admissions process, and highlighted emerging, but limited, involvement with local advocacy and nursing groups. Despite this, the course provider confirmed that at the time of inspection, there was no PWLE involvement in the courses more broadly, including in admissions. Therefore, a condition was set against this standard for both courses (1.6).

13. We understood that applicants had the opportunity to disclose their need for reasonable adjustments through their application form, and triangulation confirmed that support was offered. Further support opportunities were highlighted through induction resources and there was evidence of wider university EDI policies across all courses (1.7).

14. We noted that candidates were provided with key information through documentation at application stage, such as the placement requirements and course costs set out on the nomination form. We did not gain clarity on the differences between the award levels and felt they were not clear enough for applicants to make an informed decision on whether to pursue the post graduate certificate (PG Cert) or the advanced diploma (Adv. Dip). We understood that students on both awards were taught the qualifying aspects of the courses together, and that the difference in award level was expressed in assessment. However, it was not clear to us how students understood which level of award to make an application to. Additionally, we identified references to the incorrect regulator in course specification documentation. Therefore, conditions were set against this standard for both courses (1.8).

15. We were reassured through documentary evidence such as a nomination form, that the courses were open to all applicants from the relevant professions. We noted the course provider's awareness that the courses needed to be suitable for all eligible professions (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	**Not 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	**Not 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 • 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	**Not 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. We learnt that the course lead is a registered AMHP with a recognised qualification and has sufficient AMHP experience. Two visiting lecturers were also practicing AMHPS. The course team consisted of 3 visiting lecturers and a course lead. A clear line of professional development could be seen for the course lead. We noted that educators were supported to maintain their knowledge and understanding in relation to professional practice (2.4, 2.6).

17. There was evidence of a practice assessment panel that oversaw competency-based decisions, and a clear line of accountability to the Head of Faculty. However, we did not receive evidence of ongoing quality management of the courses that was clearly demonstrated through a regular review of the courses, and a condition was set against this standard for both courses (2.1).

18. The course provider outlined their course review process and provided a feedback form that students completed at mid-point and end-point stages of their training. However, as the course provider outlined there was currently no PWLE involvement in the courses, a condition was set against standard 2.2 for the inclusion of PWLE in the monitoring and evaluation of both courses (2.2).

19. We were reassured that a clear strategy was followed concerning the number of students admitted to the courses. The nomination form provided highlighted that students needed to have access to a suitable placement before acceptance onto the courses, which indicated cohort sizes were determined by placement availability (2.3).

20. We heard that there was a clear working relationship between the course lead and visiting lecturers. Additionally, the visiting lecturers demonstrated knowledge of AMHP experience and practice. However, it was not evident that there were an adequate number of staff with the necessary experience in higher education quality assurance processes that were utilised by the programmes, to fulfil the functions required of standard 2.5. This included assessment delivery, quality management, curriculum delivery, teaching, and supervising. We were also not assured that visiting lecturers were subject to the course provider's processes in line management, appraisal or their professional development. Therefore, a condition was set against this standard for both courses (2.5).

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	**Not 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	**Not 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	**Not 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.

21. During the inspection, we learnt that there was a new Patient and Public Involvement and Engagement (PPIE) group being established for PWLE to contribute to the design, ongoing development and review of the curriculum. However, as the current iteration of both courses was not shaped by PWLE, a condition was set against this standard (3.1).

22. We learnt from documentary evidence such as a course guide that students were provided with information about "Special Needs Tutors" and were signposted to student support. The module guide highlighted a focus on equality and diversity in the course content (3.3). We were informed that a curriculum review took place in 2023 with local authorities, which has helped shape the current curriculum. Additionally, we were reassured that visiting lecturers had AMHP experience and underwent regular and recent training. The inspectors noted that the last curriculum review with employers was 3 years ago at the time of inspection and recommended that employers are involved in a continuous review of the curriculum for both courses (3.1, 3.4).

23. We heard examples of modules incorporating PWLE and utilising real-life case studies to teach students about the value base of a practising AMHP. The practice portfolio provided as evidence demonstrated how they meet the AMHP competencies and required evidence of their capability for AMHP practice. We were not given sufficient reassurance that placements and practice portfolios were assessed against the statutory competencies, and a condition was set against this standard to ensure this takes place across both courses (3.2).

24. Documentary evidence highlighted links between academic learning and practice experience, for example in a use of case scenarios prepared for students. We heard from key stakeholders that students have opportunities to learn theory and practice-based examples in taught sessions. However, we did not see evidence that theory and practice were combined within the practice-based learning elements of the programmes. Additionally, we were not assured that the course provider demonstrated that during the courses, students could apply theory in practice, while having the opportunity for critical reflection. Therefore, a condition was set against this standard for both courses (3.5)

25. We noted that the courses supported students in understanding how to maintain their own professional standards while undertaking their AMHP role through the currency of visiting lecturers. We discovered that students had opportunities to apply their knowledge to scenarios provided by lecturers in a group setting. Documentary evidence illustrated the courses' close links to practice and the portfolio demonstrated that students must do a critical analysis of their practice within a mental health context (3.6, 3.7)

Standard 4. Practice Placements	**Met or not met**
4.1 Ensure practice placements are integral to the course	**Not 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	**Not 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 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	**Not met**

Key observations for standard 4.

26. Documentary evidence such as a course handbook and the AMHP portfolio provided insight into what was expected from placements, including the main policies students needed to abide by. We learnt that students were informed they should engage in key statutory activities, such as Mental Health Act 1983 (amended 2007) assessments, supervised decision-making and reflective supervision, during their placements. However, after triangulation with key stakeholders we were not assured that there was evidence of suitable learning opportunities that allowed students to gain the knowledge and skills necessary to develop and meet the competencies as set out in Schedule 2 of the AMHP Regulations (England). Therefore, a condition was set against this standard for both courses (4.1).

27. We were reassured through documentary evidence that students were required to complete a mandatory 43-day Opportunity for Supervised Practice within an approved mental health agency and supervised by an experienced AMHP Practice Educator. There was evidence of essential and desirable learning outcomes in the portfolio provided (4.2).

28. We noted on inspection that students and their Practice Educator were invited to a joint learning agreement session, in which the learning agreement was discussed and completed. We were satisfied that the portfolio provided detailed guidance on supervision arrangements and assessment methods. However, we were not assured that student's learning outcomes were set against the statutory competencies and would like to see clearly documented monitoring arrangements for students progressing through their placements. Therefore, a condition was set against this standard for both courses (4.3).

29. We learnt that some arrangements were in place to ensure planning and communication with placement providers, such as a portfolio checklist, signed by the practice educator and the personal tutor. However, we did not see an effective process in place that evaluated the effectiveness of placement learning agreements with placement providers as part of the course provider's quality management processes. As a result, a condition was set against this standard for both courses (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	**Not 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 wrongdoing, and report concerns openly and safely without fear of adverse consequences	**Not met**

Key observations for standard 5.

30. We were signposted to a range of support available to students including 1:1 counselling and occupational health services. Conversations with key stakeholders informed us that students were offered support when requested, and that a personal tutor system existed with multiple sessions having been available to students (5.1, 5.2).

31. During inspection, we learnt that students must disclose any factors that impact on their suitability and fitness to practise. We acknowledged that the AMHP portfolio guidance document included a statement that required students to notify the university of any changes to their suitability, health or fitness to practice. However, it was not clear to the inspection team what processes scaffolded this requirement, and we were not reassured that arrangements were in place

for identifying, notifying, and responding to ongoing suitability concerns. A condition was set against this standard for both courses (5.3).

32. Documentary evidence such as an application form and a tutor awareness sheet highlighted how reasonable adjustments could be made for students with health conditions or impairments. It was clear that support was available from the point of application, which extended into placement settings (5.4).

33. We learnt through the course and module guides that attendance was expected at taught sessions and at the required 43 days of supervised practice placement. We were informed that students were supported if they missed taught sessions through opportunities to meet with the course lead and discuss any sessions that were missed. Students could be given formative feedback through a draft assessment task, that ensured students were making progress through both courses (5.5, 5.6).

34. The course provider signposted to their whistleblowing policy and a course handbook that detailed the steps students could take should they need to engage in university whistleblowing procedures. We were also made aware that individuals could use their own agency's internal procedure for raising concerns about problematic practice. However, we were not assured that appropriate checks were in place to confirm that placement providers had effective policies and procedures relating to whistleblowing and the challenging of unsafe behaviours. Therefore, a condition was set against this standard for both courses (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	**Not met**
6.2 Ensure that professional aspects of practice are integral to assessments	**Not met**
6.3 Use objective measures of student performance which ensure safe and effective practice as an AMHP	**Not met**
6.4 Regularly monitor and evaluate assessment standards	**Not met**

6.5 Clearly specify requirements for student progression and achievement within the course	**Not 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.

35. We saw evidence of student assessment in the form of written assignments, supervised practice and a portfolio that evaluated their skills, knowledge and professional judgement. We received an assessment handbook that outlined some details of the assessment process. However, we were not reassured that there was a comprehensive assessment strategy that outlined how the course provider arrived at assignment tasks across the level 6 and level 7 courses (6.1).

36. We understood that elements of professional aspects of practice were integral to assessments through a critical incident presentation that demonstrated an individual's decision-making process during an incident that occurred on placement. However, it was not clear to us, in the absence of an assessment strategy, where the variety of skills, experiences and professional perspectives that arise from a multi professional cohort were considered. Through documentary evidence such as the curriculum and competence document, we learnt which methods were used to assess students against each required learning outcome and how these outcomes aligned with the competencies. However, we weren't assured that there was an assessment strategy that evidenced how assignment tasks had been arrived at to understand how they're mapped onto the statutory competencies. Therefore, a condition was set for standards 6.1, 6.2 and 6.3 across both courses

37. We saw some evidence of the monitoring and evaluation of assessment standards through an internal moderation report and an external examiner's feedback for the course team. However, we did not receive clarity on a formalised process for the evaluation of the quality and effectiveness of assessments on an ongoing basis. The inspectors were also not reassured that PWLE were involved

in the relevant monitoring and evaluation processes. Therefore, conditions were set against this standard for both courses (6.4).

38. We were provided with a course guide that showed us the information students receive concerning progression and achievement throughout both courses. We understood that students must pass all assessment and complete the required number of placement hours alongside a practice portfolio. However, we were not clear about the expectation differential between level 6 and level 7 students on the courses, and the parameters for progression within each course category, nor were we clear about how pass / fail decisions on portfolios were reached. We did not see evidence of a formalised process that specified the requirements for student progression and achievement for either level of the courses. Therefore, a condition was set against this standard for both courses (6.5).

39. We felt it was clear that there were no aegrotat awards available, and that a course handbook and university website provided students with information about academic appeals should they need any support or guidance (6.6, 6.7).

40. We were confident that a process was in place for the appointment of an external examiner (EE), and documentary evidence confirmed the appointment and identification of an appropriate EE at the university who had the opportunity to make suggestions with regards to changes in the curriculum (6.8).

Outcome

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

The regulator decision maker agreed with this recommendation (Link)

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 course 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 these courses at this time.

	Standard not currently met	Condition	Date for submission of evidence	Link
1	1.1, 1.4, 1.5	The course provider will provide evidence of a formalised process for applicant admissions that evidences that the course team is appropriately involved at admissions stage and where decisions are made. For each standard, this relates to: • A process or criteria that demonstrates how applicants are identified to have the potential to meet the relevant capabilities set out in standard 1.1. • Clearly demonstrate that an applicant's relevant experience is confirmed by the course provider (1.4). • Ensure that applicants can show during the admissions process, an ability to interpret, reflect on and	01 February 2027	Link

		understand the impact of changes arising from case law, as well as legislative and policy developments (1.5).		
2	1.6, 2.1, 2.2, 3.1 6.4	The course provider will provide evidence of people with lived experience of mental health services being involved in the student admissions processes (1.6), in the monitoring evaluation and improvement of the courses (2.2), and the processes for monitoring (6.4) to ensure the courses are shaped by their views and experience (3.1).	01 February 2027	Link
3	1.8	The course provider will make it clear to prospective applicants about all possible award levels, qualifications and delivery methods so they can make an informed choice about taking up a place on the courses.	01 February 2027	Link
4	1.8	The course provider will ensure all documentation (such as the course spec and curriculum review) are up to date and reference the Social Work England as the regulator for approving AMHP programmes in England.	01 February 2027	Link
5	2.1	The course provider will provide evidence of a governance plan that shows clear lines of responsibility and roles and accountability for quality management. For example, an annual course review process or another relevant plan.	01 February 2027	Link

6	2.5	The course provider will provide evidence of a process to support the professional development of visiting lecturers to meet the requirements of standard 2.5	01 February 2027	Link
7	3.2	The course provider will provide evidence to demonstrate that placements and practice, and portfolios are assessed against the statutory competencies.	01 February 2027	Link
8	3.5	The course provider will provide evidence to demonstrate that during the courses, students can apply theory in practice, while having the opportunity for critical reflection.	01 February 2027	Link
9	4.1	The course provider will provide evidence of an implemented framework that allows them to meet the statutory competencies as set out in Schedule 2 of the AMHP Regulations (England).	01 February 2027	Link
10	4.3	The course provider will clearly document monitoring arrangements for students progressing through placements.	01 February 2027	Link
11	4.4	The course provider will ensure there is a method of feedback or review to evaluate the effectiveness of placements and the placement learning agreement with placement providers as part of your quality management process.	01 February 2027	Link

12	5.3	The course provider will provide evidence that shows that arrangements are in place for identifying, notifying, and responding to ongoing suitability as detailed in the guidance for standard 5.3.	01 February 2027	Link
13	5.7	The course provider will provide evidence that they have checked that placement providers have: • Appropriate policies and processes in place in relation to whistleblowing and challenging unsafe behaviours. • Arrangements in place to inform the course provider of any subsequent changes to the relevant policies.	01 February 2027	Link
14	6.1, 6.2, 6.3	The course provider will provide evidence of an assessment strategy that: • Demonstrates how students will be able to apply their knowledge and competence against the statutory competencies (6.1). • Enables students to gather evidence to satisfy the competencies in Schedule 2 of the regulations (6.2). • Shows how the assignment tasks have been arrived at to understand how they're mapped onto the statutory competencies (6.3).	01 February 2027	Link

15	6.4	The course provider will show how they monitor and evaluate the quality and effectiveness of their assessments on an ongoing basis. This may form part of their course review.	01 February 2027	Link
16	6.5	The course provider will provide a process that specifies the requirements for student progression and achievement for each level offered, that outlines how decisions are made in relation to portfolios and ensures that decisions about progression are sufficiently robust.	01 February 2027	Link

As conditions have been attached to the approval, *University of Wolverhampton* must provide evidence of meeting these conditions as outlined in the report and in the timescales agreed. Failure to do so may result in approval being withdrawn.

Recommendations

In addition to the conditions above, 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	1.3	The course provider may wish to review the process surrounding the suitability of applicants to improve clarity on university involvement in selection	Link
2	1.4	The course provider may wish to map the condition set for standard 1.4 against the competencies.	Link
3	3.1, 3.4	The course provider may wish to review the employer's involvement in a continuous review of the curriculum.	Link

Meeting of Conditions

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

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

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

	Standard not met	Condition	Inspector recommendation
1			
2			
3			

Findings