Inspection Report

Inspection ID	UBRIR1_A
Course provider	University of Brighton
Validating body (if different)	
Course inspected	PG Dip Approved Mental Health Practice
Mode of study	Full-time
Maximum student cohort	30
Date of inspection	12 – 13 May 2026
Inspection team	Caroline Reynolds (Education Quality Assurance Officer) Aidan Phillips (Lay Inspector) Surj Sall-Dullat (AMHP registrant Inspector)
Inspector recommendation	Approved with conditions
Regulator decision:	Approved with conditions
Date of Regulator decision:	05 August 2026
Conditions	Standard 2.2 Standard 2.3 Standard 4.4
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 Brighton as 'the course provider' and we describe the PG Dip Approved Mental Health Practice as 'the course' and/or 'the programme'.

Summary of Inspection

6. University of Brighton and the PG Dip Approved Mental Health Practice course 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.

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

8. As part of this process the inspection team gathered feedback from key stakeholders through meetings on the inspection. This included current and former students, employer representatives from Brighton and Hove County Council, East Sussex County

Council, West Sussex County Council, Surrey County Council and Hampshire County Council. We also met with two people with lived experience and teaching staff including a visiting lecturer. Written feedback was also gathered from a person with lived experience during the inspection

Inspection Findings

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

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

Key observations for standard 1

10. We heard that sponsoring employer partners conducted internal initial screening of applicants from their organisation and agreed to support training on the readiness of the applicant and their

own organisational priorities. Applicants then applied to the course provider for a place. Independent applicants completed the same application information (1.1, 1.6).

11. The PG Dip Application Pack 26-27 (hereafter 'application pack') showed that applicants were required to submit an electronic written application summarising their relevant skills, knowledge and experience in mental health practice. This included reflecting on their engagement with the Mental Health Act. Applicants were also required to complete a pre-course observation of a Mental Health Act assessment and submit a critically reflective account identifying the legal context and ethical challenges. The AMHP Interview Questions 2026-27 evidenced that legal literacy was further assessed during the online interview. The application pack also required candidates to summarise their mental health experience and practical application of relevant legislation. This was triangulated at interview by a course team member, a practising AMHP from a partner local authority, and a person with lived experience. The application also assessed the candidates academic capability to meet the demands of the level 7 course. The admissions tasks clearly reflected the key competencies set out in Schedule 2 of the AMHP Regulations (England) (1.1, 1.4, 1.5, 1.6).

12. The application pack included an employer trust agreement. During the inspection, we heard about the effective engagement with sponsoring partner organisations, and were assured that admissions requirements were mutually understood, implemented and considered. We reviewed evidence including meeting minutes showing the involvement of employers and people with lived experience in the admissions processes, which was further triangulated during the inspection (1.6).

13. The application pack showed that candidates were required to confirm they were professionally qualified and registered, including providing their registration number for the relevant regulatory body. We heard that registration was checked during shortlisting, as evidenced in the AMHP Interview Shortlisting Checklist. The course team shortlisted applicants to ensure they met course requirements before inviting them to interview (1.1, 1.2, 1.4, 1.5).

14. Evidence showed that professional registration and DBS checks were completed prior to enrolment. The application pack required candidates to confirm that they held a current DBS, including the date and certificate number, which was corroborated by their employer, who confirmed that they had seen the original certificate and that it met the organisation's DBS policy requirements. Independent applicants were required to provide their DBS details and submit a copy of the original certificate. Applicants were also invited to disclose any additional learning needs or disabilities on the application form so that reasonable adjustments could be made for interview. The PG Dip AMHP Course Handbook 2026–27 (hereafter 'course handbook'), provided at induction, included information on professional statutory body requirements, including the need to report any changes in circumstances that could affect ongoing fitness to practise (1.2, 1.3, 1.7).

15. We reviewed the University of Brighton Equality, Diversity and Inclusion Policy (hereafter 'EDI policy'). The Education Student Enhancement Plan set out a framework for course delivery, including broader EDI aims and specific actions (1.7).

16. During the inspection, we sought further clarity on the processes for gathering and analysing equality, diversity and inclusion (EDI) data. The course provider recorded EDI data collected at application and enrolment. We heard that, due to low applicant numbers, EDI was monitored at course level, with any concerns discussed with employer partners (1.7).

17. The course provider's website included full course details, and a list of eligible professions that could apply for the programme. We heard that the application pack was circulated to employers and sent directly to independent applicants. Applicants were offered an online information session and a Q&A drop-in. During the inspection, current and former students reported positive experiences of the application process (1.8, 1.9).

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

Key observations for standard 2.

18. Evidence demonstrated that a robust governance and management structure was in place, with clear roles, responsibilities, and quality management processes, alongside leadership oversight through the School Executive Board (2.1).

19. We reviewed the CV of the individual with overall professional responsibility for the course and were satisfied that they were a qualified and registered social worker with appropriate experience. The course delivery team, including qualified AMHPs with relevant mental health practice experience, were supported by additional approved AMHPs, guest lecturers, speakers, and people with lived experience. This ensured that students learned from a range of individuals with current and relevant practice experience (2.1, 2.4, 2.5).

20. The course team maintained professional knowledge through external training, conferences, refresher events, and the allocation of 20% of staff time for research and scholarly activity. We heard that two team members were no longer practising AMHPs and they had not recently shadowed a practising AMHP. We agreed that the standard 2.6 was met but recommend that course team members seek regular opportunities to shadow practising AMHPs. Full details of the recommendation can be found in the proposed outcome section.

21. Although mechanisms for monitoring, evaluation, and improvement were outlined, there was limited stakeholder feedback regarding their involvement during the inspection. CPD courses management meeting minutes did not provide sufficient assurance of formally recognised, robust monitoring and evaluation systems. We therefore agreed that standard 2.2 was not met. Full details of the condition can be found in the proposed outcome section.

22. Accessibility and flexibility were evident, including a part-time study route. CPD courses management meetings detailed cohort and placement numbers, as well as planning for future cohorts. However, student numbers were driven informally by employers, and we were not assured that admissions aligned with a clear strategy considering local and regional placement capacity. We therefore agreed that standard 2.3 was not met. Full details of the condition can be found in the proposed outcome section.

Standard 3. Curriculum	**Met or not met**
3.1 The views of employers, practitioners and people with lived experience of mental health services are incorporated into the design, ongoing development and review of the curriculum	**Met**
3.2 The content, structure and delivery of the training is in accordance with relevant guidance and frameworks and is designed to enable students to demonstrate that they have the necessary knowledge and skills, including around cross-national border issues in relation to practice in Wales, where this is appropriate	**Met**

3.3 The course is designed in accordance with equality, diversity and inclusion principles, human rights and legislative frameworks	**Met**
3.4 Course content is routinely updated as a result of developments in legislation, research, government policy, and best practice	**Met**
3.5 The integration of theory and practice is central to the course	**Met**
3.6 Students understand how the standards of the student's own professional regulator(s), apply to their specialist practice	**Met**
3.7 The course is designed to enable students to demonstrate an evidence-informed approach to AMHP practice, underpinned by skills, knowledge and understanding in relation to research and evaluation	**Met**

Key observations for standard 3.

23. We reviewed CPD courses management meeting minutes which provided assurance of the involvement of employers and people with lived experience in the design, development and review of the curriculum. Minutes from November 2025 evidenced that these stakeholders had been consulted on the course design and content. We heard that the meetings enabled the ongoing review in relation to employer needs and student performance and provided a forum for improvement discussions. During the inspection, examples of changes were shared, including replacing the law exam with a viva in response to feedback (3.1).

24. The provider held meetings with individuals with lived experience across social work programmes. Minutes from July 2025 showed discussions on increasing their involvement. The provider worked with Capital, a mental health charity led by people with lived experience, and individuals attended CPD courses management meetings. Capital contributed to recruitment, teaching and assessment, though their involvement was not consistent or frequent. We agreed that standard 3.1 was met but have made a recommendation to strengthen the consistency and frequency of the involvement of people with lived experience. Full details of this recommendation can be found in the proposed outcome section.

25. The programme's structure, content and delivery were evidenced in course documentation and the four module specifications available to students on My Studies, the student learning interface. The module specifications evidenced that the integration of theory and practice is central to the course. Learning outcomes were mapped against Schedule 2 of the AMHP Regulations (England). The programme was updated in response to emerging research, legislation and policy, with teaching materials reviewed annually. Two modules were led by a practising AMHP who attended annual refresher training. All modules focused on the lived experience of individuals assessed under the Mental Health Act and required students to integrate reflective practice, apply legal frameworks, and critically engage with the ethical, social justice and human rights issues relevant

to the AMHP role. Students confirmed opportunities to link law and practice through class discussions, exercises, case studies and a viva assessing legal knowledge (3.2, 3.4, 3.5).

26. We reviewed anonymised ethics presentations reflecting on links between AMHP practice and students' own professional backgrounds and we explored with current and former students how they maintained professional standards whilst undertaking the AMHP role. Curriculum evidence showed that students drew on legal frameworks, research, practice and lived experience throughout the course. All assessments required integration of multiple sources, including lived experience, to evidence AMHP practice (3.6, 3.7).

27. We heard that welfare, rights and equality were embedded within university and course policies and procedures. The EDI policy linked to the Equality Act, and the provider's Distinctly Brighton 2035 strategy outlined its approach to inclusive education. EDI data was reviewed locally, and inclusive practices aligned with the provider's Learning and Teaching Inclusive Practice and Accessibility Policy. My Studies included an analytical tool that provided an accessibility score for teaching materials based on suitability for people with different disabilities (3.3).

28. Students were encouraged to contact the Disability and Learning Support Team before starting the course to obtain a Learning Support Plan (LSP), outlining any reasonable adjustments required. Students also had access to student support and guidance tutors for additional support and signposting to central services (3.3).

29. The course provider confirmed that they had not accepted any students practicing in Wales, nor any students registered in Wales (3.2).

Standard 4. Practice Placements	**Met or not met**
4.1 Ensure practice placements are integral to the course	**Met**
4.2 Ensure that the number, duration and range of practice placements is appropriate to support the delivery of the course and the achievement of the learning outcomes	**Met**
4.3 Ensure that students, practice placement providers and educators are prepared for each placement, which will include information about: i. the learning outcomes to be met ii. the timing and duration of any placement experience iii. the records to be maintained iv. expectations of professional conduct	**Met**

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	
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** *See key observations for standard 4 for further information.*

Key observations for standard 4.

30. The Managing Mental Health Act Assessment module included a minimum 40-day placement, with an additional five days available as a buffer where required. Most students were sponsored by their employing organisation, which was expected to provide both a suitable placement and a practice supervisor. Independent applicants were only accepted where they evidenced secured arrangements for both (4.1, 4.2).

31. The module introduction outlined placement requirements, including learning outcomes and final assessment expectations. Group and one-to-one tutorials provided reflective opportunities for students to review their progress with peer and tutor support. Practice supervisors, who were qualified and experienced AMHPs, delivered fortnightly supervision (4.1, 4.2, 4.3).

32. A key assessment component was the practice portfolio, requiring students to evidence competence against Schedule 2 of the AMHP Regulations (England). Practice supervisors completed the final assessment report, determining a pass or fail. Students were unable to complete the programme without successfully passing the placement (4.1, 4.2, 4.3).

33. In cases of placement breakdown, processes were explained during the inspection. At the outset of placement, students, practice supervisors and course staff jointly completed a Learning and Development Plan (LDP). Students were prepared for placement through induction, with expectations for professional conduct outlined in the course handbook (4.2, 4.3).

34. We assessed the rigour of the governance arrangements during the inspection. It was evident that reliance was placed on strong working relationships and a shared understanding among stakeholders to proactively raise and discuss issues through CPD courses management meetings, which served as the primary mechanism for planning and communication with placement providers. These meetings underpinned the expectations. However, we agreed that there was limited evidence of how accountabilities and responsibilities were formally managed across stakeholders. In the absence of formalised agreements, we concluded that the standard 4.4 was not met. Full details of the condition can be found in the proposed outcome section.

Standard 5. Supporting students.	**Met or not met**
5.1 Ensure that students have access to resources to support their health and wellbeing including: i. confidential counselling services ii. occupational health services, where appropriate	**Met**
5.2 Ensure that students have access to a system of academic and pastoral student support for their progression, development, wellbeing and welfare	**Met**
5.3 Ensure that there is a thorough and effective process for ensuring the ongoing suitability of students' conduct, character and health	**Met**
5.4 Make reasonable adjustments for students with health conditions or impairments to enable them to progress through their course and meet the relevant standards, in accordance with relevant legislation	**Met**
5.5 Provide timely information to students about parts of the course where attendance is mandatory and have associated monitoring mechanisms in place	**Met**
5.6 Provide timely and meaningful feedback to students on their progression and performance in assessments	**Met**
5.7 Ensure that policies and processes, including for whistleblowing, are in place for students to challenge unsafe behaviours and cultures and organisational wrongdoing, and report concerns openly and safely without fear of adverse consequences	**Met**

Key observations for standard 5.

35. Evidence demonstrated that students were eligible for a wide range of support, signposted at induction, through generic emails, and in the course handbook. This included one-to-one tutorials, student support and guidance tutors, access to the disability and learning support, and wellbeing services. As most students were employer-sponsored, they also accessed wellbeing support within their organisations. Where additional support was required - such as for reasonable adjustments not provided by the employer or for independent students - the course lead referred students for an occupational health assessment through the university provider (5.1, 5.2, 5.4).

36. Students were allocated a Personal Academic Tutor (PAT) for the duration of the course, who contributed to the LDP governing placement experience. Students attended three group tutorials and three one-to-one tutorials, with additional sessions available on request. Tutors also attended a midway placement review with the student and practice supervisor (5.2).

37. Students were encouraged to contact the disability and learning support team to obtain an LSP which outlined required adjustments and provided guidance for academic staff. During the inspection, examples of reasonable adjustments, such as extensions and considerations of diverse needs, were evidenced. Current and former students reported feeling well supported, and there was clear evidence of wraparound, student-centred support in place (5.1, 5.2, 5.4).

38. Student suitability was assessed at the application stage and embedded throughout the course. During the inspection, the steps taken in response to concerns were described, including referral to fitness to study or practise procedures, and, where appropriate, to the student's professional body and sponsoring employer (5.3).

39. Attendance requirements and expectations were clearly outlined in the application pack, and the course handbook. Induction information also explained how attendance was monitored, including how concerns such as poor attendance were shared with the sponsoring employer where relevant. Students were required to sign a register for each session (5.5).

40. Students submitted work online via My Studies, with feedback on the strengths and areas for development provided within 20 days, in line with the course provider's assessment and feedback policy. Students could request formative feedback on pre-course work, including their critically reflective account of a Mental Health Act assessment, to support preparation for summative assessments. During the inspection, further information on marking criteria and feedforward was provided (5.6).

41. The provider's Whistleblowing Policy was reviewed, and it was noted that students were also subject to their employer's policy. The LDP confirmed that students had seen these policies (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	**Met**

the competencies set out in the relevant legislation and rules as set out in the guidance that accompanies these standards	
6.2 Ensure that professional aspects of practice are integral to assessments	**Met**
6.3 Use objective measures of student performance which ensure safe and effective practice as an AMHP	**Met**
6.4 Regularly monitor and evaluate assessment standards	**Met**
6.5 Clearly specify requirements for student progression and achievement within the course	**Met**
6.6 Clearly specify that any aegrotat award which may be made will not lead to eligibility to be approved as an AMHP	**Met**
6.7 Clearly specify the procedure for the right of appeal for students	**Met**
6.8 Clearly specify a process for the appointment of at least 1 external examiner who must be appropriately experienced and qualified and from the relevant part of an appropriate professional register	**Met**

Key observations for standard 6.

42. The course provider's General Examination and Assessment Regulations (GEAR 25-26), alongside the module and course specifications and academic framework, demonstrated that the course was delivered and assessed robustly, fairly and consistently. We reviewed an external examiner report, which provided an objective quality assurance perspective, and heard further details about the assessment strategy during the inspection, including professional practice assessments and marking criteria (6.1, 6.2).

43. Mapping of the course against Schedule 2 of the AMHP Regulations (England) outlined the competence criteria, with all assessments aligned to module learning outcomes. Evidence demonstrated a range of assessment methods, including quality assurance processes for student portfolios (6.2, 6.3).

44. Internal and external moderation processes, along with feedback from people with lived experience, student outcomes and feedback, were used regularly to review assessment standards. We heard examples of changes made to assessments in response to student feedback, performance data and EDI research trends (6.4).

45. The course provider clearly set out requirements for student progression and achievement, including minimum pass rates. We were assured that students were awarded the PG Dip only upon achieving the full 120 credits. An aegrotat award was not permitted, as stated in the course specification (6.5, 6.6).

46. We reviewed evidence outlining clear procedures for student appeals, as detailed in the course handbook. We also reviewed the course provider's External Examiner Handbook, which set out the requirements for appointing external examiners, alongside the CV of the current external examiner. This demonstrated that the examiner was suitably experienced and qualified (6.7, 6.8).

Outcome

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

The regulator decision maker agreed with this recommendation.

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 this course at this time.

	Standard not currently met	Condition	Date for submission of evidence	Link
1	2.2	The course provider will provide evidence that demonstrates there is a plan in place to ensure that regular formal and robust monitoring and evaluation systems are in place to inform improvements on the programme, and this includes employers, students and people with lived experience.	5 November 2026	2.2
2	2.3	The course provider will provide evidence that the number of students admitted onto the course is aligned to a clear strategy, taking into consideration the local and regional placement capacity.	5 November 2026	2.3

3	4.4	The course provider will provide evidence that formal agreements are in place with placement providers.	5 November 2026	4.4

As conditions have been attached to the approval, the University of Brighton 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	2.6	We are recommending that the course team continues to seek regular opportunities to spend time back in practice.	2.6
2	3.1	We are recommending that the course provider considers strengthen the consistency and frequency of the involvement of people with lived experience in the CPD courses management meetings.	3.1

Meeting of Conditions

If conditions are applied to a course approval, Social Work England completes 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