Inspection Report

Inspection ID	UCHR1_A
Course provider	University of Chester & Cheshire Approved Mental Health Professional (AMHP) Partnership
Validating body (if different)	
Course inspected	Applied Mental Health Practice
Mode of study	Part time
Maximum student cohort	45
Date of inspection	19 – 20 May 2026
Inspection team	Kate McEleny (Education Quality Assurance Officer) David Childs (Lay Inspector) Andrea McCarthy (AMHP registrant Inspector)
Inspector recommendation	Approved with conditions
Regulator decision:	Approved with conditions
Date of Regulator decision:	13 August 2026
Conditions	Standard 1.1 Standard 1.2 Standard 1.7 Standard 1.9 Standard 2.1

	Standard 2.2 Standard 3.1 Standard 3.2 Standard 3.4 Standard 5.3
Date conditions met and approved:	

Contents

Introduction

1. Social Work England completes inspections as part of our statutory requirement to approve and monitor courses. Inspections form part of our process to make sure that courses meet our education and training 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 Chester and Cheshire Approved Mental Health Professional (AMHP) Partnership as 'the course provider' and we describe the Applied Mental Health Practice as 'the course'.

Summary of Inspection

5. The University of Chester and Cheshire Approved Mental Health Professional (AMHP) Partnership and the Applied Mental Health Professional 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.

6. A remote inspection took place from 19-20 May 2026.

7. As part of this process the inspection team gathered feedback from key stakeholders through meetings on inspection. This included teaching staff as the university and

teaching partnership, those involved in admission, people with relevant lived experience (PWLE) and current students.

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 *see key observations for standard 1 for further information*
1.2 Confirm that applicants are and remain fully registered with a relevant regulatory body in line with the relevant regulations	Not met *see key observations for standard 1 for further information*
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	Not met *see key observations for standard 1 for further information*

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	Not met *see key observations for standard 1 for further information*

Key observations for standard 1

9. We reviewed various documentary evidence prior to the inspection. We were satisfied that the application process used by the course provider enabled the assurance that applicants had the capability to use ICT methods to achieve course outcomes. (1.1)

10. Similarly, the academic requirements were tested through the application process, and we were satisfied this was sufficient. The course provider also ensured applicants had suitable prior experience, and a robust level of legal literacy. (1.1, 1.4, 1.5).

11. The requirement for applicants to acquire and demonstrate the competencies set out in relevant legislation governing AMHP practice was designed from the perspective of a social work background. Whilst this was adequate for applicants with a social work background, we heard from the course team that they accepted applicants with other professional backgrounds. (1.1)

12. It was unclear how the course provider assessed applicants with other professional backgrounds (nurses, occupational therapists and psychologists) capabilities, or suitability, to join the course and therefore the inspectors recommended a condition against the relevant standards (1.1, 1.9)

13. We were satisfied that there was a process in place for ensuring applicants from a social work background were registered with Social Work England, however there was lack of process for checking registration of other professionals. We recommended a condition against this standard. (1.2)

14. We saw and heard evidence demonstrating there was a process in place for assessing applicants' suitability and we agreed this was adequate. However, it was identified there was no agreement in place which stipulated how current a DBS needed to be for applicants, and therefore this aspect of assessing applicants' suitability lacked robustness. We recommend that the course

provider ensure there is a consistent approach to expectations around assessing the suitability of applicants

15. In relation to stakeholder involvement, this was demonstrated through the interview process as the panel included PWLE and employers/placement providers. In addition to interviewing, PWLE advised being involved in the creation of interview questions and post interview discussions. (1.6)

16. There were policies in place in relation to EDI, and we heard there was a proactive approach to making adaptations and reasonable adjustments for applicants as part of the admissions process. We were however not assured the implementation and monitoring of policies was consistent across organisations as the employer partners were responsible for recruitment. We understood that the application form gathered applicant data, but we were not clear about what was done with the data and therefore recommended a condition against this standard. (1.7)

17. As part of the evidence submission we were directed to information on a public facing website, which gave applicants from a social work background all of the required information in order for them to make an informed choice about whether to take up an offer of the place on the course. (1.8)

18. We explored with the course provider what information was provided to non-social work applicants relating to their specific pathway to AMHP registration and were advised that this information was provided on an ad hoc basis and was relevant to the individual. (1.8)

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 *see key observations for standard 2 for further information*
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.	
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.

19. We saw documentation demonstrating the faculty structure, and as part of the inspection we learned about the lines of accountability and responsibilities of staff involved in the course.

20. The course provider was comprised of staff from both the university, and the AMHP teaching partnership, and we felt the governance plan did not reflect how things worked. There was also a lack of oversight from the university, and it was unclear how the course was managed. We recommend a condition that is set against this standard. (2.1)

21. In relation to stakeholder involvement in the monitoring, evaluation and improvement of the course we heard examples from students about changes which had been made to the course. (2.2)

22. We were not assured PWLE, or employers outside of the partnership were involved in making course improvements as there was no evidence of this, documented or heard. (2.2)

23. We felt that despite there being evidence of some improvements based on student feedback, this was done informally and we were not assured there was a system in place for monitoring, evaluating and improving the course, and as a result we recommend a condition is set against standard 2.2.

24. The course provider made it clear that they did not accept independent applicants. There was evidence of the consideration of student numbers contained in the programme management meeting minutes where there was proactive discussion with employers and placement providers relating to the student intake (2.3)

25. We also understood that the course provider was flexible around students' needs and allowed breaks or pauses in learning. (2.3)

26. Documentary evidence demonstrated that staff who taught on the course had a range of AMHP practice or other relevant experience, and the course lead was a relevant qualified professional with appropriate experience. (2.4, 2.5)

27. Finally, we agreed that educators were current and knowledgeable and documentary evidence confirmed how educators were supported to maintain knowledge in relation to professional practice, and this was triangulated with the course team as part of the inspection. (2.6)

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 *see key observations for standard 3 for further information*
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 *see key observations for standard 3 for further information*
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	Not met *see key observations for standard 4 for further information*
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	Not met *see key observations for standard 3 for further information*

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.

28. As the partnership put together the course content, there was clear and sufficient involvement of employers and practitioners in the design, ongoing development and review of the curriculum. However, in relation to the involvement of PWLE, despite evidence of attending feedback sessions, we were not assured there was involvement in the design and development of the curriculum as no evidence was presented for the same and we recommend a condition is applied in order for the standard to be met (3.1)

29. Prior to the inspection we reviewed the programme specification which was not fully mapped to the AMHP standards. Additionally, the programme specification referenced the HCPC as the regulatory body. During the inspection the course provider acknowledged that despite the intention to update the programme specification, they were not currently meeting the standard, and we recommend a condition is imposed. (3.2)

30. It was clear the course was designed with consideration of EDI and human rights, with appropriate policies in place. (3.3)

31. During the inspection we explored whether the course was routinely updated because of developments in legislation, research, government policy, and best practice. We heard how the course provider discussed developments in practice as part of PMG meetings and there was reference to research being undertaken. (3.4)

32. Despite conversations had on inspection, we were not assured there was a process in place to ensure developments, or changes in legislation, informed the course as there was no documented process in relation to this. We recommend that a condition is set against standard 3.4.

33. There was documentary evidence demonstrating that the integration of theory and practice was central to the course, and the course was designed in a way that enabled students to demonstrate an evidence-informed approach to AMHP practice, underpinned by skills, knowledge and understanding in relation to research and evaluation. (3.5, 3.7)

34. We met with students during the inspection and explored whether they understood how the standards of their own regulator applied to their practice. All the students we met with were social workers and they provided assurance they were knowledgeable about this. (3.6)

35.Despite the assurance we got from students we considered whether students from other regulatory backgrounds would have the same understanding. We agreed that there were opportunities for students to explore the relationship between their role as an AMHP and their professional background, and support was also available from their tutors. However, we are recommending the course provider review the opportunities available for non-social work students to ensure these are sufficient. (3.6)

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

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

Key observations for standard 4.

36. We explored placements as part of the documentary evidence review prior to the inspection and were satisfied that the course provider ensured practice placements were integral to the course and there was a commitment to placements. This was demonstrated in the placement handbook, placement audit tool and the course information book. (4.1)

37. The documentation referenced above demonstrated there were clear expectations of the placement, and we heard as part of the inspection that there was rationale for the duration of placement. (4.2)

38. Students were required to complete a placement portfolio, and this enabled them to demonstrate their knowledge and understanding in relation to practice. (4.2)

39. We agreed that students, placement providers and practice educators were prepared for placements. Documentation provided included clear evidence of information sharing with students, practice educators and employers about all aspects of placement and made clear, including the learning outcomes, assessment information and the requirement for an induction for students. (4.3)

40. We were satisfied that there was an adequate amount of placement staff with subject knowledge, and we heard they were supported by their respective local authorities to maintain their knowledge and understanding in relation to professional practice. (4.4)

41. There were EDI policies in place, and we heard examples of reasonable adjustments provided to students. (4.4)

42. The AMHP handbook outlined the expectations around obtaining consent from PWLE when students went on visits or shadowed, demonstrating there was consideration of the rights and needs of PWLE when students were on placements. (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 *see key observations for standard 5 for further information*
5.4 Make reasonable adjustments for students with health conditions or impairments to enable them to progress through their course and meet the relevant standards, in accordance with relevant legislation	Met
5.5 Provide timely information to students about parts of the course where attendance is mandatory and have associated monitoring mechanisms in place	Met
5.6 Provide timely and meaningful feedback to students on their progression and performance in assessments	Met
5.7 Ensure that policies and processes, including for whistleblowing, are in place for students to challenge unsafe behaviours and cultures and organisational	Met

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

Key observations for standard 5.

43. As part of the inspection we met with students who reported there were counselling and occupational health services available to them and they knew how to access them if necessary. (5.1)

44. As well as there being wellbeing services, we heard about reasonable adjustments which were made for students where appropriate, we saw evidence of there being both academic and pastoral support available to students. Students had an academic tutor as well as an AMHP tutor, both providing tutoring and support (5.2, 5.4)

45. In relation to ongoing suitability, there was an annual declaration for students to complete, however as we heard from the partnership and fitness to practice issues were not communicated to the university, we heard the partnership were making decisions outside of the agreement and we were not assured the declaration was shared with the university. (5.3)

46. There were clear expectations around attendance. Students confirmed they were aware of expectations on attendance, as well as knowing what elements of the course were mandatory. The course provider provided assurance that there were contingencies in place and missed learning which we felt was appropriate. (5.5)

47. The course provider had a policy which set a 20-working day turnaround from submission to releasing marks and feedback to students. When asked about feedback, students were complimentary and informed us that this was timely and meaningful. (5.6)

48. There was also a whistleblowing policy in place, which was accessible to students. (5.7)

Standard 6. Assessments	**Met or not met**
6.1 Ensure that the assessment strategy and design demonstrate that the assessments are robust, fair and consistent, and that those who successfully complete the course have developed the knowledge and skills necessary to meet the competencies set out in the relevant legislation and rules as set out in the guidance that accompanies these standards	Met
6.2 Ensure that professional aspects of practice are integral to assessments	Met

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

Key observations for standard 6.

49. Various assessment documentation and policies were provided as part of the evidence submission. Documentation included information on reasonable adjustments, appeals, results, and marking.

50. We agreed that the documentation demonstrated that assessments were robust, fair and consistent, and the course enabled students to have the knowledge and skills necessary to meet the relevant competencies and be prepared for the AMHP role. (6.1, 6.2). We were also satisfied that the assessment standards were regularly monitored and evaluated. (6.4)

51. The external examiner was appropriately qualified, experienced and on the relevant register, and stated that the assessment methods used helped students demonstrate attainment of the learning outcomes, and we agreed this contributed to safe and effective practice as an AMHP (6.3, 6.8)

52. In relation to progression and achievement, we felt that the course information booklet was clear to students as it set out processes for panel approval and assessment submission. The programme specification confirmed there was no aegrotat or exit award available. (6.5, 6.6)

53. There was appeals process in place for students, and this was made clear to students in the course information book. (6.7)

Outcome

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

55. The regulator decision maker agreed with this recommendation.

Conditions

56. 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.

57. 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	1.1	The course provider must ensure the admissions process allows applicants from non-social work backgrounds to demonstrate their potential to acquire and demonstrate the competences set out in the relevant legislation governing AMHP practice;	13 November 2026	*1.1*
2	1.2	The course provider will provide evidence that there is a process in place to confirm the registration of applicants for all relevant regulatory bodies.	13 November 2026	*1.2*

3	1.7	The course provider must ensure that there is a process in place for ensuring consistency of implementation and monitoring in relation to applicant data.	13 November 2026	*1.7*
4	1.9	The course provider must ensure that the admissions process allows candidates from any eligible profession to demonstrate their suitability to join the course	13 November 2026	*1.9*
5	2.1	The course provider must ensure an accurate 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	13 November 2026	*2.1*
6	2.2	The course provider much 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	13 November 2026	*2.2*
7	3.1	The course provider must incorporate PWLE into the design, ongoing development and review of the curriculum.	13 November 2026	*3.1*
8	3.2	The course provider must 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, including around cross-national border issues in relation to practice in Wales, where this is appropriate	13 November 2026	*3.2*
9	3.4	The course provider must ensure there is a documented process	13 November 2026	*3.4*

		showing developments in legislation, research, government policy, and best practice inform the course.		
10	5.3	The course provider must provide evidence that the university has oversight of students on placement and demonstrate there are mechanisms in place for communicating and documenting when student issues arise.	13 November 2026	*5.3*

58. As conditions have been attached to the approval, the University of Chester and Cheshire Approved Mental Health Professional (AMHP) Partnership 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

59. 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	Standard 1.3	The inspectors are recommending that the course provider review the consistency of relevant policies and process across employer partners to ensure DBS checks have similar currency. The inspectors are recommending that the course provider ensure there is a consistent approach to expectations around assessing the suitability of applicants	1.3
2	Standard 3.6	The inspectors are recommending that the course provider review the opportunities available for non-social work students to ensure they have equal understanding of how the standards of their own professional regulator(s), apply to their specialist practice.	3.6

Meeting of Conditions

60. 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 the AMHP standards.

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

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

	Standard not met	Condition	Inspector recommendation
1			
2			
3			

Findings