

Inspection Report

Course provider: University of Cumbria

Course approval: MA Social Work and PG Dip Social Work (exit route only)

Inspection dates: 20 June – 23 June 2023

Report date:	09 August 2023
Inspector recommendation:	Approved with conditions
Regulator decision:	Approved with conditions
Date of Regulator decision:	27 October 2023
Date conditions met and approved:	19 March 2024

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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 standards](#) and ensure that students successfully completing these courses can meet our [professional standards](#).
2. During the approval process, we appoint partner inspectors. One inspector is a social worker registered with us and the other is not a registered social worker (a 'lay' inspector). These inspectors, along with an officer from the education quality assurance team, undertake activity to review information and carry out an inspection. This activity could include observing and asking questions about teaching, placement provision, facilities and learning resources; asking questions based on the evidence submitted; and meeting with staff, training placement providers, people with lived experience and students. The inspectors then make recommendations to us about whether a course should be approved.
3. The process we undertake is described in our legislation; the Social Worker Regulations 2018¹, and the Social Work England [\(Education and Training\) Rules 2019](#).
4. You can find further guidance on our course change, approval and annual monitoring processes on our website.

What we do

5. When an education provider wants to make a change to a course, or request the approval of a new course, they are asked to consider how their course meets our education and training standards and our professional standards, and provide evidence of this to us. We are also undertaking a cycle of re-approval of all currently approved social work courses in England following the introduction of the Education and Training Standards 2021.
6. The education quality assurance officer reviews all the documentary evidence provided and will contact the education provider if they have any questions about the information submitted. They also provide advice and guidance on our approval processes.
7. When we are satisfied that we have all the documentary evidence required to proceed with an inspection we assign one registrant and one lay inspector. We undertake a conflict of interest process when confirming our inspectors to ensure there is no bias or perception of bias in the approval process.
8. The inspectors complete an assessment of the evidence provided and advise the officer if they have any queries that may be able to be addressed in advance of the inspection.

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

9. During this time a draft plan for the inspection is developed and shared with the education provider, to make sure it is achievable at the point of inspection.
10. Once the inspectors and officer are satisfied that an inspection can take place, this is usually undertaken over a three to four day visit to the education provider. We then draft a report setting out what we found during the inspection and if and how our findings demonstrate that the course meets our standards.
11. The inspectors may recommend in this report that the course is approved with conditions, approved without conditions or that it does not meet the criteria for approval. Where the course has been previously approved we may also decide to withdraw approval.
12. A draft of this report is shared with the education provider, and once we have considered any comments or observations they may wish to provide, we make a final regulatory decision about the approval of the course.
13. The final decisions that we can make are as follows, that the course is approved without conditions, the course is approved with conditions or that the course does not meet the criteria for approval. The decision, and the report, are then published.
14. If the course is approved with conditions, we will write to the education provider setting out how they can demonstrate they have met the conditions, the action we will take once we decide that the conditions are met, and the action we will take if we decide the conditions are not met.

Summary of Inspection

15. The University of Cumbria, MA Social Work and the PG Dip (exit route only) was inspected as part of the Social Work England reapproval cycle; whereby all course providers with qualifying social work courses will be inspected against the new Education and Training Standards 2021.

Inspection ID	UCR2
Course provider	University of Cumbria
Validating body (if different)	
Course inspected	MA Social Work PG Dip Social Work (exit route only)
Mode of study	Full-Time
Maximum student cohort	15
Date of inspection	20 June – 23 June 2023
Inspection team	Nikki Steel-Bryan (Education Quality Assurance Officer) Jane Jones (Lay Inspector) Paula Eaton Perkins (Registrant Inspector)

Language

16. In this document we describe the University of Cumbria as ‘the education provider’ or ‘the university’ and we describe the MA Social Work as ‘the MA’, the PG Dip as ‘the exit award’ and the MA and PG Dip as ‘the course’, ‘the courses’ or ‘the programme’.

Inspection

17. A remote inspection took place from 20 June – 23 June 2023. As part of this process the inspection team planned to meet with key stakeholders including students, course staff, employers and people with lived experience of social work.

18. These meetings formed the basis of the inspection plan, agreed with the education provider ahead of inspection. The following section provides a summary of these sessions, who participated and the topics that were discussed with the inspection team.

Conflict of interest

19. No parties disclosed a conflict of interest.

Meetings with students

20. The inspection team met with five students, three from Year one of the programme, and two from Year two. Discussions included placement, supervision, support and feedback.

Meetings with course staff

21. Over the course of the inspection, the inspection team met with university staff members from the Senior Leadership Team, the Course Team, staff involved in placements, staff involved in admissions and welfare and academic support staff.

Meeting with people with lived experience of social work

22. The inspection team met with people with lived experience of social work who have been involved in the delivery of the MA course. Discussions included their role in the interview processes, their contributions to curriculum development, course design and course delivery and the opportunities provided to feedback to the university.

Meetings with external stakeholders

23. The inspection team met with representatives from placement partners including Westmorland and Furness Council, Eden Valley Hospice, Cumberland Council, Ewanrigg Junior School, Cumbria Family Support, the NHS and Lancashire County Council.

Findings

24. In this section we set out the inspectors' findings in relation to whether the education provider has demonstrated that it meets the education and training standards and that the course will ensure that students who successfully complete the course are able to meet the professional standards.

Standard one: Admissions

Standard 1.1

25. The course provider submitted documentary evidence including a document detailing interview questions with scoring and a mapping document demonstrating how candidates were assessed against the 'point of entry to training' level of the professional capabilities framework (PCF).

26. The inspection team were satisfied that the application process gave applicants the opportunity to demonstrate they had a good command of English and ICT skills as the course entry criteria included a Grade C/4, or equivalent, in GCSE English, or, IELTS with a score of 7.0 or over. Candidates apply via UCAS, or the university website. Interviews were conducted via Microsoft Teams and candidates undertook a written exercise that had to be downloaded, completed, and returned by email.

27. The inspection team queried the volume of interviews undertaken with people with lived experience, or practitioners, as the documentary evidence noted that, on occasion, interviews may go ahead with two members of academic staff where other stakeholders were not available. The inspection team heard from the course team, and staff responsible for admissions, that they aim for a 100% stakeholder engagement. However, practitioner involvement was relatively new, and at the time of the inspection the course provider was limited by the number of people with lived experience able to undertake interviews as well as their availability. The course team reported that they intended to recruit ten more practitioners by September 2023 from the local authorities and voluntary sector organisations to increase the pool of stakeholders available for interviews. The inspection team agreed that this standard was met.

Standard 1.2

28. The inspection team reviewed the documentary evidence in advance of the inspection and noted that interview question eight interrogated applicants' prior experience by asking *'how has your own experience and learning to date (formal or informal) helped you to understand the social work role and prepared you to study to become a social worker?'*

29. From the education and training standards mapping document the inspection team understood that the course team considered prior relevant experience as lived experience

of social work, experience of being a carer, working within the social care field, voluntary work with groups of people with lived experience or placement opportunities that applicants had undertaken within a course of study. The inspection team concluded that the documentary evidence provided in advance of the inspection was able to demonstrate that this standard was met.

Standard 1.3

30. The inspection team considered the proposed Social Work Advisory Board (SWAB) terms of reference submitted in support of this standard, as well as the SWAB meeting minutes from March 2023, where a full review of the recruitment processes for academic year 2023/24 was suggested. From the documentary evidence the inspection team understood that people with lived experience were involved in admission processes. However, practitioners, and other representatives of the employer partners, did not seem to be routinely included.

31. Through discussion with people with lived experience, the inspection team heard that members of the lived experience group were involved in interviewing students as panel members and in the run up to the interview event were involved in developing and reviewing interview questions.

32. The staff involved in selection and admissions reported that engagement with employer partners and practitioners in the admissions processes was 'recent' and that they had just started to work with practitioners. However, at the time of the inspection the pool of practitioners was very small and they had not been successful at having one available at every interview.

33. The inspection team were keen to better understand how the panel was made up for student interviews. Through discussions with the staff involved in selection and admissions, the inspection team heard that each interview panel either had a person with lived experience or a practitioner included, but not both. The course team expressed a desire to have a person with lived experience and a practitioner on each interview panel. However, at the time of the inspection this was not the case due to the size of the pool of volunteers available to them, noting that SWAB were already considering the ways in which they could extend the group of people involved.

34. The inspection team agreed that this standard was met with a recommendation that the university continue to work towards including stakeholders in all aspects of the admissions processes. Full details of the recommendation can be found in the [recommendations sections of this report](#).

Standard 1.4

35. Prior to the inspection, the inspection team were able to review the university's disclosure and barring service (DBS) admissions policy (2022) and understood that, at the point an applicant firmly accepted their offer, the university central admissions team provided the appropriate DBS and good health and good character information to initiate the suitability checks. Prior to the DBS check, applicants were asked to complete a self-disclosure form which provided an opportunity for candidates with convictions to supply some narrative of any offence that may require further scrutiny. Where required, a DBS panel was held to consider the nature, age and context of any offence. Applicants were also asked to supply information relating to their health, which was considered and followed up by the university's occupational health provider. The inspection team agreed that this standard was met.

Standard 1.5

36. The university submitted information on the institution's commitment to equality, diversity and inclusion (EDI) which was articulated within the EDI policy as *'providing an inclusive environment where staff, students and visitors are encouraged to be their true self, in order to enhance the individual and collective experience'*.

37. Through discussions with key stakeholders, the inspection team heard that a full analysis of the diversity of applicants had been conducted for the BA (Hons) Social Work programme as part of the widening diversity of social work cohorts' strategy, submitted as evidence against this standard. The staff involved in selection and admissions further explained that the local area was not ethnically diverse, and that the MA tended to attract local students, although interest from international applicants had been increasing.

38. The inspection team heard from the staff involved in selection and admissions that the admissions policy was inclusive and that reasonable adjustments at interview were supported. The written test was provided in advance and was not timed, which was considered to be inclusive by design, and although interviews were held online, applicants could request an in-person interview as a reasonable adjustment. In addition, the inspection team heard that there was a named contact within student services if the course team required any support with specific or complex needs.

39. The inspection team were keen to understand how different stakeholders were prepared to undertake selection and admission activities. Through meetings with key participants, the inspection team heard that academic staff were required to undertake unconscious bias and EDI training. The principle social worker at the local authority confirmed that practitioners had undertaken mandatory EDI training and in addition, they were provided with a 1-2-1 induction on the ethos of student interviews with a named member of the university course team. People with lived experience of social work received an induction from their key staff member contact and the staff employed in the university's

central admissions teams undertook EDI, safeguarding and unconscious bias training as standard. The inspection team agreed that this standard was met.

Standard 1.6

40. The course provider shared the webpage for the course which was a source of information for prospective candidates. As part of a secondary submission, the course team were asked to provide the presentation that was delivered to applicants at the point of interview.

41. The MA webpage included information about the entry requirements (including DBS and health screening), an overview of the course and modules, an introduction to the teaching, learning and assessment approach of the provider and fees, funding and other costs (including a list of key texts for the first year of the programme).

42. The presentation delivered at the point of interview included introductory information on the regulatory role of Social Work England, including the professional standards and the requirement to register. The inspection team concluded that the documentary evidence provided in advance of the inspection was able to demonstrate that this standard was met.

Standard two: Learning environment

Standard 2.1

43. The inspection team noted from the documentary evidence supplied by the university that 200 days had been written into the course documentation and that the university made efforts to match placements to student interests which was evident through the positive student feedback the inspection team received. Over the course of the inspection, the inspection team were assured that two practice placements took place, in contrasting settings, one totalling 70 days, and one totalling 100 days. However, it was less obvious to the inspection team how the skills days were operating.

44. Through discussions with the staff involved in practice based learning, the inspection team heard that skills days were allocated in hours across the teaching programme and that the department had a spreadsheet that managed the attendance to hours calculation for each student. The inspection team noted from this spreadsheet that year one students appeared to be able to carry a high number of missed skills days which did not look to have been made up by the end of the academic year. The inspection team noted that they were unclear about how catch up days worked or how the quality of the catch up opportunities were monitored to ensure they covered cognate skills to those that had been missed.

45. Through discussions with stakeholders, the inspection team became aware that attendance at skills days had not been routinely monitored prior to academic year 2022/23. The inspection team raised their concern with the placement lead and heard that the course team did not want to give false reassurance. They had recognised that there had been a

shortfall in skills days, and issues with the attendance monitoring for the current year two students, and had added six sessions into the curriculum to add value which represented what was realistically possible within the 2022 autumn term for this cohort. The inspection team considered evidence submitted during the inspection that detailed the skills days provided to the year two students, and reported that a shortfall remained.

46. Through discussions with staff involved in placement learning, the inspection team heard that students were clear about which elements of the programme were skills days and were aware that they were mandatory. Moreover, it was noted that attendance had been routinely monitored for the year one students, and that moving forward attendance monitoring was standard. Students reported that they understood which modules contained skills day hours however, commented that they were not aware that their attendance was monitored in these modules.

47. Following a review of the evidence, the inspection team is recommending that two conditions (one issued with immediate effect*) are set against standard 2.1 in relation to the approval of this course. Consideration was given as to whether the finding identified would mean that the course would not be suitable for approval. However, it is deemed that these conditions are appropriate to ensure that the course would be able to meet the relevant standard, and we are confident that once this standard is met, a further inspection of the course would not be required. Full details of the conditions, their monitoring and approval can be found in the [conditions section of this report](#).

*An immediate condition was agreed by the regulator to ensure that the year two students had been provided with appropriate opportunities to develop, and demonstrate, the learning and skills required to meet the professional standards.

Standard 2.2

48. Documentary evidence reviewed prior to inspection included a placement handbook, a placement portfolio, a template for the critical analysis of practice and a sample practice portfolio. The inspection team noted that the assessment of placement was linked to the professional capabilities framework (PCF), that learning expectations, opportunities and outcomes were included in the placement portfolio and that the process provided opportunities to reflect. The students met by the inspection team reported undertaking a wide variety of activities while on placement, including carrying a caseload, working in schools and with asylum seekers, as well as within child and adult services. Students identified the link lecturer as one part of the team supporting and monitoring their progress when on placement. The inspection team found that, throughout the inspection, stakeholders provided positive feedback on the course team placement lead. The inspection team agreed that this standard was met.

Standard 2.3

49. Evidence submitted in support of this standard included a placement handbook, a placement audit and a placement portfolio, which included information on induction. Students reported positive experiences of induction, detailing thorough e-learning that covered policies and culture, staff introductions and shadowing, highlighting the availability of their practice educators during this period.

50. Students discussed receiving weekly supervision. The inspection team heard that practice educators were generally available when needed. There was one example provided where a student had struggled to contact their offsite practice educator. However, this was reported to the placement lead and was quickly, and positively, resolved. Students further noted that their workload was manageable, it was monitored by their practice educators and there was support available for it to be reviewed if necessary. The inspection team heard that students acknowledged that caseload management was one of the skills to learn while on placement.

51. Through discussion with staff involved with placements, the inspection team heard that the placement lead had recently been appointed and that they had made some significant improvements to the placement processes. This included the introduction of PebblePad, which had supported the team with the recording and monitoring of placements, and made guidance updates easier to implement. The inspection team agreed that this standard was met.

Standard 2.4

52. Documentary evidence reviewed prior to inspection included the placement handbook, external examiner feedback, a virtual learning environment (VLE) module learning plan and introductory video for module HSWG7023, *'Professional Knowledge and Skills for Social Work'*. The inspection team noted that students undertook two skills modules and a safeguarding and ethics module prior to undertaking the first placement, and that the appropriateness of progression had been validated by the external examiner. The students met by the inspection team were overall positive about their placement experiences, and practice educators raised no concerns in relation to the appropriateness of the responsibilities for students on placement. Throughout the inspection, the inspection team heard from a variety of stakeholders that there was a strong culture of support and wellbeing within the department. The inspection team agreed that this standard was met.

Standard 2.5

53. Documentary evidence reviewed prior to inspection included the module specification document, module learning plan and introductory video for the module HSW7025, *'Readiness for Direct Practice'*. The assessment for this module consisted of a simulation scenario (50%) and a presentation, plus discussion on reflection and development (50%).

Students must pass the module to progress to placement, and appropriate exception from the regulations was in place to prevent compensation within this module.

54. Through discussion with students, the inspection team heard that they felt well prepared by the *Readiness for Direct Practice* module, noting that they covered PebblePad, were assured of the link lecturer, undertook role plays and took part in an experts by experience day. Students made specific reference to a lecture delivered within this module by an advanced practice lead, which they described as encouraging, exciting and inspiring. Practice educators reported that students were generally well prepared for placement.

55. The inspection team were keen to better understand the immersive room available within the university and how it was used to support students' preparedness for direct practice. The course team explained that the immersive room can have environments projected onto it to give students the experience of walking into a real-life setting. Items within the projection can be interacted with, for example students can open drawers to check documentation, or see medications on a shelf. Instructors can manage the scene through the sessions using controls that can add additional layers to the situation, for example adding the sound of a crying baby in another room. The inspection team agreed that this standard was met.

Standard 2.6

56. Following review of the documentary evidence provided and discussion with key stakeholders throughout the inspection, the inspection team were satisfied that the university had processes in place to ensure the qualifications, currency and registration status of practice educators. Through discussion with staff involved in placement learning, the inspection team heard that practice educators had a record on the placement management system *InPlace* where their registration end date, qualifications and currency were recorded. When a practice educator was allocated to a student, the placement team double checked the relevant information held on the system. The inspection team agreed that this standard was met.

Standard 2.7

57. Documentary evidence reviewed prior to inspection included the placement handbook, placement portfolio, placement audit and the placement audit review. The inspection team noted that students were provided with training during preparation for practice on recognising when something is worrying, how to deal with it and how the university would support them in this situation. This information was also included in handbooks, the placement portfolio and the placement audit. The inspection team asked students if they understood whistleblowing and whether they felt confident to raise concerns, and they answered positively. The inspection team agreed that this standard was met.

Standard three: Course governance, management and quality

Standard 3.1

58. Documentary evidence reviewed prior to inspection included a social work management structure, vice chancellor committee structure and the social work advisory board (SWAB) terms of reference and structure. SWAB was held quarterly and included academic staff, practitioners, students and people with lived experience. Through discussions with the course team, the inspection team heard that the EDI and People with Lived Experience sub-groups reported into SWAB.

59. The inspection team felt assured that the governance structure had been clearly articulated and that lines of responsibility were evident and distinct. The inspection team agreed that this standard was met.

Standard 3.2

60. Documentary evidence reviewed prior to inspection included the placement audit, placement portfolio, placement handbook, a cause for concern flowchart and a protocol for students raising and escalating concerns. The inspection team were keen to better understand the process in place to manage placement breakdowns, and requested further documentation. As part of a second submission of evidence, the university supplied the fitness to practice policy (noting that it was under review), extracts from the PebblePad system relating to placements causing concern, the placement audit review and highlighted specific pages to consider within the placement handbook.

61. Through discussions with staff involved with practice learning, the inspection team heard that the placement breakdown process was clear and supportive and that it included preparing students in advance of placement by exploring issues of power dynamics. The process of raising concerns was continued in the placement agreement which also included a question about power dynamics. Practice learning concerns could be recorded in the PebblePad portfolio, and where appropriate the fitness to practice policy was applied.

62. The placement team were able to talk through an example where a student had been struggling in placement, it was flagged early to the university by the practice educator and the student was supported with appropriate training, development and reflection opportunities and the placement provider agreed to provide a repeat placement.

63. Staff involved with practice learning further reported that the raising and escalating concerns policy had been recently updated, but at the time of inspection had not been approved at the appropriate level. The inspection team heard that this was a student facing document designed to clearly guide students through the process if there is a concern in practice, and the course team were clear that they support students who come forward to

report concerns when on placement. The inspection team agreed that this standard was met.

Standard 3.3

64. The placement portfolio was submitted as evidence in support of this standard. The inspection team noted that the induction checklist included emergency procedures (including fire, first aid and evacuation) and health and safety (including lone working policies) and that these *'must be accessed by the students during the placement preparation or induction period'*. The inspection team confirmed as part of the documentary evidence that a section on student wellbeing had been added to the practice learning agreement for the 2021-22 intake and concluded that the documentary evidence provided in advance of the inspection was able to demonstrate that this standard was met.

Standard 3.4

65. The inspection team reviewed the SWAB structure submitted as evidence for this standard and acknowledged that employers were represented in the SWAB terms of reference. However, as part of a second submission, the university provided minutes from SWAB dated March 2023 where inspectors noted that employer partners were invited but did not attend. The inspection team were keen to better understand how the university ensured contributions from employers, and what other opportunities were available for their feedback.

66. Through discussions with the course team the inspection team heard that, in addition to being members of SWAB, employers hosted employability skills workshops and were involved in module delivery. The inspection team understood from employer partners that they were not aware of any formal, scheduled, curriculum reviews they could participate in, and some members of the group noted that they had previously delivered curriculum content, but this had not restarted after the Covid-19 global pandemic.

67. The inspection team considered the evidence and acknowledged that employer partners were involved in the allocation and management of placements and that this seemed to work well. In addition, the course team reported that a key sub-group of SWAB, that would consider placement learning and the skills curriculum, was planned but had not yet been established.

68. The inspection team is recommending that a condition is set against standard 3.4 in relation to the approval of this course. Consideration was given as to whether the finding identified would mean that the course would not be suitable for approval. However, it is deemed that a condition is appropriate to ensure that the course would be able to meet the relevant standard, and we are confident that once this standard is met, a further inspection of the course would not be required. Full details of the condition, its monitoring and approval can be found in [conditions section of this report](#).

Standard 3.5

69. Documentary evidence submitted prior to inspection included SWAB minutes from May 2022, examples of mid-module feedback and lecturer responses, EDI subgroup meeting minutes and a report dated December 2022 from the chair of the people with lived experience sub-group on inclusion in social work courses. The inspection team understood that the university employed standard quality assurance systems including a staff student forum (SSR), interim and end of module feedback, internal annual monitoring, regulatory annual monitoring and the quality assurance for placement learning (QAPL) process. In addition, external examiner feedback appeared to be positive. However, the students met by the inspection team reported that module evaluations included their names, and they felt that this was awkward, and would prefer to respond anonymously.

70. Throughout the inspection, the inspection team heard from a variety of stakeholders that the course team were responsive to feedback and heard examples from people with lived experience (c.f. [para 31](#)) and from employers (c.f. [para 81](#)). However, there did not appear to be a formal structure where all stakeholders could engage with a regular and effective monitoring, evaluation and improvement system. Following a review of the evidence, the inspection team is recommending that a condition is set against standard 3.5 in relation to the approval of this course. Consideration was given as to whether the finding identified would mean that the course would not be suitable for approval. However, it is deemed that a condition is appropriate to ensure that the course would be able to meet the relevant standard, and we are confident that once this standard is met, a further inspection of the course would not be required. Full details of the condition, its monitoring and approval can be found in the [conditions section of this report](#).

Standard 3.6

71. Following the documentary review, the inspection team understood that student numbers were considered at a university level as part of the annual portfolio review by the Deputy Vice-Chancellor (DVC) for Academics, alongside the Institute of Health's Head of Student Recruitment. Through discussion with the senior leadership team (SLT), the inspection team heard that the course team were cognisant that programme capacity was influenced by placement capacity and practice educator availability. The SLT noted that a cohort of fifteen did not feel restricted and allowed for a positive student experience. The inspection team noted that they had not received any concerning feedback relating to the size of the course cohort and agreed that this standard was met.

Standard 3.7

72. The evidence provided to support this standard included a CV for the lead social worker, which detailed relevant qualifications and experience. The inspection team noted that the CV did not include a registration number and asked for this to be provided during the

inspection. Once provided this was crosschecked against the register. The inspection team agreed that this standard was met.

Standard 3.8

73. Documentary evidence supplied in support of this standard included staff CVs demonstrating that of the nine staff who teach on the programme, six are registered social workers. Throughout the inspection, the university invited appropriate staff with specialist knowledge in admissions, student support and wellbeing, course design and development and the course leads spoke confidently about their areas of course management. Students confirmed that they felt their progress was monitored throughout the programme and that they considered their lecturers current and up to date, identifying staff members who were still involved in practice as providing valuable insight in the classroom.

74. The inspection team were keen to understand whether the university had identified any knowledge gaps within the course team and heard that historically they were not as strong in adult mental health social care. However, this had been addressed and the skills were now evident within the team. Where they felt more expertise could be beneficial to students, the course team engaged practitioners as hourly paid lecturers. The inspection team agreed that this standard was met.

Standard 3.9

75. The inspection team reviewed data submitted as evidence for this standard, which included information on all social work courses at the university. The raw data was presented with a series of pivot tables that allowed it to be viewed by specified characteristic count (for example age, ethnicity, gender or care leaver status). The university further supplied an equality impact assessment and a social work widening diversity strategy, demonstrating that the course team was responding to trends identified within the data and actively considering the ways in which the cohorts could be diversified.

76. The inspection team understood from the documentary submission that the university annual monitoring review process was completed by the programme leader on an annual basis. The university's monitoring and evaluation webpages described the process as *'informed by a range of sources including student feedback, external examiner reports, staff evaluation, stakeholder feedback and student achievement data'*.

77. From the evidence submitted in advance of the inspection, the inspection team noted that there appeared to be a high-level of attrition on the course. Through discussion with the SLT, the inspection team heard that this was not unique to social work and that there had been deregistration across the health and social care portfolio. In response, the institute developed a strategic mental health and wellbeing curriculum which was embedded into all programmes and was designed to support students to identify warning

signs within themselves and seek appropriate support if necessary. The inspection team agreed that this standard was met.

Standard 3.10

78. The inspection team reviewed the staff CVs submitted as evidence in support of this standard and were satisfied with the evidence provided. It was noted that staff were supported to attend conferences, shadow practitioners and that they were allocated 25 days within the workplan to engage in research and scholarly activity. Five members of the team were undertaking PhDs. Through discussions with the SLT, the inspection team heard that there was a workload model within the institute and that the workload model for social work was developed alongside the principal lecturer and a member of the social work course team. The course team reported that continuing professional development (CPD) was supported, and the principal lecturer was positive about the team taking time for CPD. The inspection team agreed that this standard was met.

Standard four: Curriculum assessment

Standard 4.1

79. Documentary evidence submitted to support this standard included an assessment strategy and a subject level programme review. In addition, the inspection team considered the programme specification document (PSD) and the professional standards mapping document and were satisfied that the content was appropriate.

80. During the inspection, the inspection team were given a demonstration of the virtual learning environment (VLE) and noted that the relevant professional standards were included alongside the module descriptions.

81. Through discussion with employer partners, the inspection team heard that students were not as up to date on legislation and research as they could be, specifically in the Care Act, Mental Capacity Act and assessments across adults and children. The inspection team were keen to better understand how employers could provide feedback on the curriculum to the university, and heard that in this instance a bespoke meeting had been requested by one of the employers (c.f. [para 92](#)) however, there was no regular or formal opportunity to do this (c.f. [para 70](#)).

82. Following a review of the evidence, the inspection team is recommending that two conditions are set against standard 4.1 in relation to the approval of this course. Consideration was given as to whether the finding identified would mean that the course would not be suitable for approval. However, it is deemed that these conditions are appropriate to ensure that the course would be able to meet the relevant standard, and we are confident that once this standard is met, a further inspection of the course would not be

required. Full details of the condition, its monitoring and approval can be found in [conditions section of this report](#).

Standard 4.2

83. The periodic review report, submitted prior to the inspection in support of this standard, provided details about recent curriculum development, which according to the mapping document included stakeholders.

84. Through discussion with the course team, the inspection team heard that the intention was to develop an additional sub-group of SWAB to capture the views of employers and practitioners (c.f. [para 67](#)). The course team explained that people with lived experience were already involved in some module development alongside a specific staff member, but this practice did not seem to be in place across the course.

85. As, at the time of inspection, employer partners did not appear to be involved in the design, development and review of the curriculum, and the inspection team had heard that employers had identified legislative gaps in knowledge (c.f. [para 81](#)), the inspection team is recommending that two conditions are set against standard 4.2 in relation to the approval of this course. Consideration was given as to whether the finding identified would mean that the course would not be suitable for approval. However, it is deemed that these conditions are appropriate to ensure that the course would be able to meet the relevant standard, and we are confident that once this standard is met, a further inspection of the course would not be required. Full details of the conditions, their monitoring and approval can be found in [conditions section of this report](#).

Standard 4.3

86. Evidence submitted in support of this standard included a PowerPoint presentation from module HSWG7019/7029, *Critical Applications in Statutory Social Work*, that detailed the module structure as including 'Human Rights: Principles and Ethics; Introduction to the Care Act 2014' in week two. Also provided were minutes from the EDI Sub-Group, an EDI Impact Assessment and the social work recruitment and admissions strategy discussion document.

87. Throughout the inspection, the inspection team heard from a variety of stakeholders that practices were embedded within the course to ensure that it was designed in accordance with equality, diversity and inclusion principles, human rights and legislative frameworks. These included the use of oral assessment, a non-timed admissions assessment (c.f. [para 38](#)) and a variety of opportunities to declare any accessibility needs.

88. Practice educators reported that the practice learning agreement included a field to record details about any needs students may have going into placement and spoke about following this up with a question around needs in pre-placement meetings. They discussed an example where a student was invited into the placement environment prior to

placement as the work could be potentially triggering and a further example where the university had supported a student on placement who was also a new parent.

89. The course team provided information regarding the learning environment and the actions they take to ensure it is accessible, which included using accessible slides for taught sessions. Staff had received training on inclusivity slides and ensured they were available in advance on the VLE. Reasonable adjustments were also provided within the classroom and the course team gave examples, including recording sessions and providing sensory adjustments, such as adapting the teaching environment light levels.

90. Through discussion with the employer partners, the inspection team heard that health conditions or learning differences were included within the student profile, and that employers felt that student needs were made clear in advance of placement. They provided examples of being flexible with hours for students who were single-parents, or providing equipment such as blue screens. The inspection team agreed that this standard was met.

Standard 4.4

91. Through review of the documentary evidence, the inspection team considered the currency of the course and noted that the university expectation was that individual module leaders were responsible for updating module content.

92. Employer partners met by the inspection team reported that where they had concerns students were not as up to date on specific aspects of legislation as they might be (c.f. [para 81](#)), a meeting had taken place prior to inspection where this shortfall was addressed. The employer had offered to be involved in the delivery of sessions using the immersive room (c.f. [para 55](#)), and it was felt that the university had acknowledged the feedback and would keep them informed. Through the discussion, the inspection team heard that employer partners felt that there had been an improvement in their relationship with the university in recent years which was continuing to develop.

93. The inspection team were keen to better understand how module updates were overseen, and how updates in legislation were managed through the curriculum development process. The course team explained that modules are reviewed annually to ensure they are up to date, however acknowledged that changes in legislation can have a long lead in time, which on occasion was confusing for students. The departmental approach was to teach the legislation as it was at the point of delivery, but to make students aware that changes would be coming in the future. The course team discussed the changes to the Mental Health Act in more detail, reporting that they acknowledged this was a complex area where students often needed to gain foundational knowledge. However, the transition point in mental health legislation was covered within the curriculum.

94. Practice educators reported that students came to placement with appropriate levels of theoretical and legislation knowledge and that students on the Masters course often

displayed strong information literacy skills and knew where to find information if they needed to. The practice educators described being 'quite impressed' with student levels of discipline-specific knowledge, and noted that the course developed professional curiosity.

95. Through discussions with students, the inspection team heard that students felt up to date on legislation, policy and best practice. Students cited the law exam taken before placement, and the variety of external guest speakers on this module, as especially helpful in preparation for practice. The inspection team further heard that students had found module HSWG7024, *Contemporary Issues in Social Work*, helpful and noted that they had heard from a Ukrainian social worker who came to talk about their experience as a social worker here and abroad and sessions with external speakers to discuss the dangers online. Students spoke positively about the academic staff, noting them as inspiring, with valuable knowledge and stories to share about social work practice. The inspection team agreed that this standard was met.

Standard 4.5

96. As an example of the integration of theory into practice within the curriculum, the inspection team reviewed the module specification documents for HSWG7029, *Critical Applications in Statutory Social Work Practice* and HSWG7030, *Safeguarding and Ethics in Applied Social Work Practice*, where legal literacy was covered. HSWG7025, *Readiness for Direct Practice*, was also considered and the inspection team noted that the course team explained that knowledge of legislation was applied through workshops with external professionals, including barristers and specialist social workers in areas such as adoption. The inspection team further noted that the course structure also included HSWG7026, *Using Research Evidence to Enhance Social Work* and that research skills were embedded into the dissertation (HSWG7031).

97. Through discussion with practice educators, the inspection team heard that students came to placement with good, contemporary, theoretical knowledge which, on occasion, challenged them. Students responded positively when asked if they felt confident to apply theory to practice. The inspection team agreed that this standard was met.

Standard 4.6

98. Through discussion with the course team, the inspection team heard that interprofessional opportunities were provided within the course for example court skills were delivered by a barrister, and police colleagues who covered safeguarding. However, the inspection team were unable to triangulate this information as, when asked, the students met by the inspection team were unable to articulate any interprofessional opportunities other than an outdoor skills instructor during induction week.

99. Following a review of the evidence, the inspection team is recommending that a condition is set against standard 4.6 in relation to the approval of this course. Consideration

was given as to whether the finding identified would mean that the course would not be suitable for approval. However, it is deemed that a condition is appropriate to ensure that the course would be able to meet the relevant standard, and we are confident that once this standard is met, a further inspection of the course would not be required. Full details of the condition, its monitoring and approval can be found in [the conditions section of this report](#).

Standard 4.7

100. The inspection team reviewed a subject briefing document that detailed internal validation changes to the programme, including some uplift in hours, the course specification and module specification documents to assess this standard. It was noted that overall the course documentation intended to align to the university's definition of a notional learning hour as detailed within their regulations (one credit as equivalent to ten hours of notional academic learning time). However, some module specification documents appeared to have inconsistent indicative student workloads attached. For example, HSWG7031, *Dissertation: Research Production, Analysis and Dissemination* totalled 20 credits with 484 hours of indicative workload.

101. The inspection team did not receive any feedback to suggest that the hours on the programme were insufficient and students responded positively when asked if there were enough hours within the programme for them to develop the knowledge and skills required to meet the professional standards. The inspection team agreed that this standard was met with a recommendation that the university consider the core programme documentation to ensure stated notional learning hours align. Full details of the recommendation can be found in the [recommendations sections of this report](#).

Standard 4.8

102. Prior to inspection, the inspection team reviewed the MA social work programme assessment strategy (2022 – 2025) submitted as evidence for this standard, alongside the PSD and the module specification documents (MSDs). It was noted that the assessment strategy had been recently updated and the methods of assessment had been reviewed and diversified. The strategy detailed professional approaches to evidenced assessment that emerged in the module specification documents. Assessment was varied and included oral assessments, written assignments, presentations and more creative assessments, such as academic posters. Through discussion with employer partners, the inspection team heard that there were no concerns over employing graduates from the university, indicating that the assessment strategy within the university, and on placement, ensured that graduates of the course were suitable to enter the profession. The inspection team agreed that this standard had been met.

Standard 4.9

103. The inspection team reviewed the assessment strategy and noted that assessments were mapped and appropriately matched student progression through the course. The inspection team concluded that the documentary evidenced provided in advance of the inspection was able to demonstrate that this standard was met.

Standard 4.10

104. Evidence submitted in support of this standard included the PSD and the fitness to practice policy. The inspection team were keen to better understand the approach to academic feedback within the institute, and the course team explained that feedback was released on the 20th day through the VLE, that the date is advertised on the VLE and students are alerted when it becomes available. It was acknowledged by the course team that there was variation around the depth of feedback provided to students, and that a core approach to feedback was to be considered at a summer away day following the end of the academic year 2022/23.

105. Through discussions with students, the inspection team heard that their experience with formative feedback was variable. They reported occasions where formative assessments had been issued and feedback never provided, or occasions where the formative feedback arrived too close to the summative assessment hand-in dates and therefore could not be acted upon. When feedback was provided, the students noted it was helpful. The inspection team raised this line of enquiry with the course team during the inspection, however, the course team were not aware there had been an issue.

106. Following a review of the evidence, the inspection team is recommending that a condition is set against standard 4.10 in relation to the approval of this course. Consideration was given as to whether the finding identified would mean that the course would not be suitable for approval. However, it is deemed that a condition is appropriate to ensure that the course would be able to meet the relevant standard, and we are confident that once this standard is met, a further inspection of the course would not be required. Full details of the condition, its monitoring and approval can be found in the [conditions section of this report](#).

Standard 4.11

107. The inspection team reviewed the course staff CVs and the external examiner CV, and noted that staff had appropriate expertise to undertake assessment for social work, and that the external examiner was suitably qualified and on the register. The inspection team agreed that this standard was met.

Standard 4.12

108. Evidence submitted in support of this standard included observations of practice templates, a placement portfolio template and the placement handbook. The university

reported that students had access to the full range of university support systems in relation to progression, and the inspection team confirmed that the course specification contained satisfactory exception to university regulations to prevent automatic compensation or condonement and to ensure that *Readiness for Direct Practice* was passed to progress to placement.

109. Through discussion with practice educators, the inspection team heard students were well prepared for practice observations by the university and that it is discussed in the practice learning meeting. Practice educators reported that students understood what an observation was for, and what a critical analysis of practice was. However, they explained that they strengthened that preparation through supervision to ensure students went into the observation with a good idea of how to plan the observation, what the practice educator was looking for, and what the practicalities of the observation were; for example who would sit where, and when a practice educator might intervene. One observation was done before the midpoint, and one was done before the end of placement. The practice educators reported that the report form flowed well and included guidance. The inspection team agreed that this standard was met.

Standard 4.13

110. The inspection team reviewed the PSD in advance of the inspection and were content that the programme appeared to be underpinned by research and evidenced based practice (c.f. [paras 96 – 97](#)). The students met by the inspection team reported not being clear on the research interests of their academic staff, however, they recognised that one of their lecturers was undertaking a PhD which was discussed within the classroom.

111. Throughout the inspection, the inspection team heard from a variety of stakeholders that evidenced-based practice was central to the course (c.f. [paras 73, 96 and 97](#)) and the inspection team agreed that this standard was met.

Standard five: Supporting students

Standard 5.1

112. The inspection team met with a range of staff from the central student support services and heard that confidential counselling, careers advice and support and occupational health services were available alongside TogetherAll for 24 hour access to support. However, the inspection team were concerned that access to disability and wellbeing services was difficult for students. Lines of communication were limited to a web-based form known as the 'step query', and it was unclear to inspectors how the services could meet individual student needs at the point of contact. Students could not speak to a member of staff as there was no telephone number for the service, and bookable appointments were limited.

113. The inspection team were keen to understand what the offer to students looked like, and asked the service staff whether there was an advertised response time to the web based form. The staff explained that there were no KPIs in relation to response times following a step query, as they have a limited resource and operated as a risk based service. It was further reported that there had been some recent vacancies within the team which had been resolved, and a new IT system had been brought online to better support the teams to track referrals through from the step query to resolution. The inspection team remained unclear about how transparent the process and subsequent outcomes were for students.

114. Through discussions with students, the inspection team heard that there had been significant issues with learning support plans with one student describing it as 'not an easy process' to navigate. Another student discussed feeling disadvantaged as they had reached the end of the programme without a plan in place. More generally, the students described contacting central student wellbeing services as 'really hard', noting they could not speak to anyone. One student explained they had enquired about financial support and only received an email response which had not been helpful.

115. The inspection team noted, however, that the careers advisory service provided a comprehensive service to students for up to three years after graduation, with flexible appointments that students could book by email. The core offer from the service included 1-2-1 advice, mock interviews, CV support and a job application service which provided personalised feedback. The careers service also delivered careers fairs and networking events, maintained a jobs portal, provided enterprise advice and guidance and supported an employability and skills award named the Career Ahead Award.

116. The inspection team acknowledged that, throughout the inspection, there was a clear sense that the course team were keen to embed mindfulness, resilience and wellbeing skills within the curriculum to equip students with tools to enable a sustainable, healthy, professional career. This was evident within HSWG7027, *Resilience, Leadership and Healthy Social Work Careers*, as well as through feedback from students who reported being asked how they were feeling in themselves in each session, and cited lectures on mental health and self-care, and mindfulness.

117. Following a review of the evidence, the inspection team is recommending that a condition is set against standard 5.1 in relation to the approval of this course. Consideration was given as to whether the finding identified would mean that the course would not be suitable for approval. However, it is deemed that a condition is appropriate to ensure that the course would be able to meet the relevant standard, and we are confident that once this standard is met, a further inspection of the course would not be required. Full details of the condition, its monitoring and approval can be found in the [conditions section of this report](#).

Standard 5.2

118. Evidence submitted in support of this standard included a link to the Skills@Cumbria webpage, which was a student-facing page providing advice and guidance on a variety of academic skills including reading and notetaking, writing at university, presentations, reflection, being critical, and referencing, plagiarism and the assessment submission software Turnitin. The inspection team also reviewed the PSD that included detail on the personal academic tutor system.

119. Through discussions with academic skills staff, the inspection team heard that the library provided a comprehensive service to the university community which included supporting academic staff with reading lists and collection development, maintaining the physical library and study spaces, and embedding information literacy, search and retrieval, critical thinking, referencing and other study skills sessions directly into the curriculum. For example, in the week prior to inspection the MA Social Work students attended a classroom-based session with the library and lecturers to cover academic skills expectations and where help was available. Some of these study skills were also available as webinars. Students were able to access physical library services on weekdays during opening hours which extended to 9.00pm Monday – Thursday. However, the online services were available at any time, and the Learning Gateway study space was open 24 hours a day. Students were able to book face to face or online appointments flexibly via email.

120. Throughout the inspection, the inspection team heard that the personal tutor was integral to the support systems within the institute and noted that the role had been highlighted as part of the support for ensuring that the learning environment was accessible for students with specific learning differences or disabilities, or as an avenue for pastoral support for example with the cost of living crisis. Through discussion with the students, the inspection team heard that personal tutors were not always staff involved in the delivery of the MA programme and that students felt it was easier to reach out and speak to course/module leader staff who already knew them. One student reported that their personal tutor did not teach on the MA programme and consequently did not have a good understanding of their course so was unable to provide any academic support. Students were overall unclear whether the provision was intended to be for academic or pastoral support.

121. The inspection team noted that the PSD included information on the delivery of the personal tutor system which stated;

'you will be allocated a personal tutor when you embark on your Masters programme. Your personal tutor is a member of the programme team who is proactively involved in the delivery of your programme and they will have contact with you throughout your time at the University. Their role is to support your overall learning and development'

The inspection team reported that the process and policy regarding personal tutors was clearly communicated within the PSD but did not appear to be being implemented as written.

122. Following a review of the evidence, the inspection team is recommending that a condition is set against standard 5.2 in relation to the approval of this course. Consideration was given as to whether the finding identified would mean that the course would not be suitable for approval. However, it is deemed that a condition is appropriate to ensure that the course would be able to meet the relevant standard, and we are confident that once this standard is met, a further inspection of the course would not be required. Full details of the condition, its monitoring and approval can be found in [the conditions section of this report](#).

Standard 5.3

123. Prior to inspection, the inspection team reviewed the fitness to practice policy, and the declaration of good health and good character form which was completed by students annually.

124. Through discussions with the course team, the inspection team heard that the fitness to practice policy was a university-level process and outside of the control of the course team. The policy commenced with DBS and occupational health screening on admissions, and where concerns were raised students were supported through the process, which had a variety of levels depending on the severity of the concern. The highest level, which could result in a student being removed from the programme, was the Health and Conduct Committee which was chaired by an independent director and included practice experts, the student union, an independent panel member from within the university and student procedures colleagues.

125. The course team provided an example where a concern was raised about a student's professionalism within the classroom and on placement. The team supported the student by encouraging reflection and managed to resolve the situation. The inspection team agreed that this standard was met.

Standard 5.4

126. The inspection team reviewed the placement handbook and the student progress review policy to better understand how the process for reasonable adjustments worked in practice. Through discussions with the course team, the inspection team heard that the departmental approach relied on the central university services to provide advice and guidance both to students and staff. The inspection team were keen to better understand how students were supported while awaiting their action plan, as students had reported difficulties with these central assessment services (c.f. [paras 112 – 114](#)). The course team were able to articulate the needs of students, reporting that they do not wait for the action

plan and adjust and provide interim support as appropriate. Furthermore, through discussion with employer partners, the inspection team were reassured that student needs on placement were identified via the student profile and were clear in advance of the placement starting and employer partners provided examples of the types of reasonable adjustments made on placement (c.f. [para 90](#)). Following a review of the evidence, the inspection team is recommending that a condition is set against standard 5.4 in relation to the approval of this course. Consideration was given as to whether the finding identified would mean that the course would not be suitable for approval. However, it is deemed that a condition is appropriate to ensure that the course would be able to meet the relevant standard, and we are confident that once this standard is met, a further inspection of the course would not be required. Full details of the condition, its monitoring and approval can be found in the [conditions section of this report](#).

Standard 5.5

127. The PSD was submitted as documentary evidence in support of this standard. The inspectors also considered the module specification documents, placement handbook, webpages and submitted module presentations. Through discussion with students, the inspection team heard that students understood the transition to professional social worker and discussed the process from classification panel to the regulator expectation for CPD, including that registration was not automatic. The inspection team agreed that this standard was met.

Standard 5.6

128. Prior to inspection, the inspection team reviewed the placement handbook submitted as evidence against this standard, and reported that the expectations around attendance on placement were clear. However, the attendance arrangements for academic commitments were less obvious.

129. Through discussion with the course team, the inspection team heard that core modules were mandatory and attendance was taken by paper register, which was digitised and uploaded by the administrative support team. All teaching took place face to face unless there were exceptional circumstances requiring an online session, where attendance would be recorded by Microsoft Teams. Attendance on placement was recorded within the PebblePad system, and attendance at skills days had started to be recorded via an Excel spreadsheet (c.f. [para 46](#)).

130. The students met by the inspection team understood what was required of them for placement attendance, articulating clearly that they must attend 170 placement days and 30 skills days. However, attendance at academic sessions was less clear, with some reporting that they had been told that two modules were not required to register as a professional social worker.

131. Through discussion with employer partners, the inspection team heard that some placement environments allowed students flexibility on placement, allowing them to miss some placement days and make them up using study days without reporting the absence to the university. Although placement attendance was recorded on PebblePad, the inspection team felt that the university needed to be clear about any expectations they had around attendance on placement, and the reporting of missed or swapped placement days.

132. Following a review of the evidence, the inspection team is recommending that two conditions are set against standard 5.6 in relation to the approval of this course. Consideration was given as to whether the finding identified would mean that the course would not be suitable for approval. However, it is deemed that conditions are appropriate to ensure that the course would be able to meet the relevant standard, and we are confident that once this standard is met, a further inspection of the course would not be required. Full details of the condition, its monitoring and approval can be found in the [conditions section of this report](#).

Standard 5.7

133. Following a review of the documentary evidence provided, and through discussions with key stakeholders throughout the inspection, the inspection team were assured that students had access to satisfactory points of feedback for summative assessments. Feedback was automatically provided via the VLE on the 20th day following submission (c.f. [para 104](#)), as well as by practice educators and on placement.

134. Students reported that feedback when received was useful. However, it was acknowledged that there were concerns regarding the timeliness of formative feedback (c.f. [para 105](#)).

135. Following a review of the evidence, the inspection team is recommending that a condition is set against standard 5.7 in relation to the approval of this course. Consideration was given as to whether the finding identified would mean that the course would not be suitable for approval. However, it is deemed that a condition is appropriate to ensure that the course would be able to meet the relevant standard, and we are confident that once this standard is met, a further inspection of the course would not be required. Full details of the condition, its monitoring and approval can be found in the [conditions section of this report](#).

Standard 5.8

136. Documentary evidence reviewed prior to inspection included a link to the university student union webpage on academic appeals, which provided student-facing guidance on the institutional appeals process. Through discussion with the course team, the inspection team heard that, on occasion, they recommended that students engage with this process in a supportive way if it could benefit them. For example, if they had been too unwell to

engage with the mitigating circumstances process. The course team reported that there had been an academic appeal within the current cohorts where an extended deadline was provided, and one student was graduating in the current academic year following a series of successful academic appeals. The inspection team agreed that this standard was met.

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

Standard 6.1

137. The inspection team reviewed the course specification and agreed that the awards of MA Social Work and PG Dip Social Work (exit award) met the standard, noting that other exit awards were clearly distinguished from the registered award.

Proposed outcome

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

Conditions

Conditions for approval are set if there are areas of a course that do not currently meet our standards. Conditions must be met by the education provider within the agreed timescales.

Having considered whether approval with conditions or a refusal of approval was an appropriate course of action, the inspection team are proposing the following conditions for this course at this time.

	Standard not currently met	Condition	Date for submission of evidence	Link
1	Standard 2.1	The education provider is required to provide a comprehensive report to evidence how they were assured the students had gained the required skills, experience and exposure associated with the learning outcomes from the placement modules and skills days which would enable them to meet the professional standards as a social worker.	12 July 2023	Para 45
2	Standard 2.1 5.6	The education provider should have a clear skills day policy, document or process, that details: - Forward planning of skills days; - A clear and transparent approach to skills days which is easy to articulate and understand; - How student attendance is monitored on skills days; - What a maximum number of skills days to miss and make up might be; - A process for making up skills days including the quality assurance of the make-up tasks; - A communication plan to ensure that students are aware their	26 December 2023	Para 44 - 47 129

		attendance is monitored and mandatory.		
3	Standard 3.4 3.5 4.1 4.2	The education provider is required to set up, run and evaluate the Practice Learning and Skills sub-group of the SWAB and provide evidence of these being effective	26 December 2023	Paras 67 70 81 84
4	Standard 4.1	The education provider will review the content, delivery and student learning within modules which cover the Care Act, Mental Capacity Act and assessments and discuss potential solutions with partners providing evidence of coproduction and any resulting curriculum development.	26 December 2023	Para 81
5	Standard 4.2	The education provider will review their practice of co-production with people with lived experience and make it clear how feedback is collected, how it impacts the curriculum and how it is fed into the governance structures.	26 December 2023	Para 84
6	Standard 4.6	The education provider will review the opportunities for interprofessional learning within the curriculum, being clear about which elements are 'work with' and which are 'learn from'.	26 December 2023	Para 98
7	Standard 4.10 5.7	Following the summer away day (June 2023) the education provider will provide details on the student assessment feedback approach moving forward and any resulting policies or processes.	26 December 2023	Paras 104 – 106 133 – 134
8	Standard 5.1 5.4	The education provider will raise the concerns regarding the disability and wellbeing services highlighted by the inspection team with the Head of Student Services for feedback and will review the steps taken within the institute to ensure students who require adjustments are supported whilst waiting for the central services learning support action plan.	26 December 2023	Paras 112 – 114

9	Standard 5.2	The education provider will review, and critically assess, the personal tutor provision as set out in the PSD and develop processes to ensure that the offer is met for all students.	26 December 2023	Paras 120 - 121
10	Standard 5.6	The education provider will ensure that placement providers are clear regarding the expectations of the university in relation to placement provision, and consider the process for recording missed, and made-up placement days.	26 December 2023	Para 131

Recommendations

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

	Standard	Detail	Link
1	Standard 1.3	The inspectors are recommending that the university work towards ensuring that stakeholders are involved in all aspects of the admissions process for example in the development of interview questions, designing the tasks for assessment of applicants and / or as a member on an interview panel.	Para 32 - 33
2	Standard 4.7	The inspectors are recommending that the university consider the core course documentation and ensure that it is consistent in the stated delivery of notional learning hours.	Para 100

Annex 1: Education and training standards summary

Standard	Met	Not Met – condition applied	Recommendation given
Admissions			
1.1 Confirm on entry to the course, via a holistic/multi-dimensional assessment process, that applicants: i. have the potential to develop the knowledge and skills necessary to meet the professional standards ii. can demonstrate that they have a good command of English iii. have the capability to meet academic standards; and iv. have the capability to use information and communication technology (ICT) methods and techniques to achieve course outcomes.	☒	☐	☐
1.2 Ensure that applicants' prior relevant experience is considered as part of the admissions processes.	☒	☐	☐
1.3 Ensure that employers, placement providers and people with lived experience of social work are involved in admissions processes.	☐	☐	☒
1.4 Ensure that the admissions processes assess the suitability of applicants, including in relation to their conduct, health and character. This includes criminal conviction checks.	☒	☐	☐
1.5 Ensure that there are equality and diversity policies in relation to applicants and that they are implemented and monitored.	☒	☐	☐
1.6 Ensure that the admissions process gives applicants the information they require to make an informed choice about whether to take up an offer of a place on a course. This will include	☒	☐	☐

Standard	Met	Not Met – condition applied	Recommendation given
information about the professional standards, research interests and placement opportunities.			
Learning environment			
2.1 Ensure that students spend at least 200 days (including up to 30 skills days) gaining different experiences and learning in practice settings. Each student will have: i) placements in at least two practice settings providing contrasting experiences; and ii) a minimum of one placement taking place within a statutory setting, providing experience of sufficient numbers of statutory social work tasks involving high risk decision making and legal interventions.	☐	☒	☐
2.2 Provide practice learning opportunities that enable students to gain the knowledge and skills necessary to develop and meet the professional standards.	☒	☐	☐
2.3 Ensure that while on placements, students have appropriate induction, supervision, support, access to resources and a realistic workload.	☒	☐	☐
2.4 Ensure that on placements, students' responsibilities are appropriate for their stage of education and training.	☒	☐	☐
2.5 Ensure that students undergo assessed preparation for direct practice to make sure they are safe to carry out practice learning in a service delivery setting.	☒	☐	☐
2.6 Ensure that practice educators are on the register and that they have the relevant and current knowledge, skills and experience to support safe and effective learning.	☒	☐	☐

Standard	Met	Not Met – condition applied	Recommendation given
2.7 Ensure that policies and processes, including for whistleblowing, are in place for students to challenge unsafe behaviours and cultures and organisational wrongdoing, and report concerns openly and safely without fear of adverse consequences.	☒	☐	☐
Course governance, management and quality			
3.1 Ensure courses are supported by a management and governance plan that includes the roles, responsibilities and lines of accountability of individuals and governing groups in the delivery, resourcing and quality management of the course.	☒	☐	☐
3.2 Ensure that they have agreements with placement providers to provide education and training that meets the professional standards and the education and training qualifying standards. This should include necessary consents and ensure placement providers have contingencies in place to deal with practice placement breakdown.	☒	☐	☐
3.3 Ensure that placement providers have the necessary policies and procedures in relation to students' health, wellbeing and risk, and the support systems in place to underpin these.	☒	☐	☐
3.4 Ensure that employers are involved in elements of the course, including but not limited to the management and monitoring of courses and the allocation of practice education.	☐	☒	☐
3.5 Ensure that regular and effective monitoring, evaluation and improvement systems are in place, and that these involve	☐	☒	☐

Standard	Met	Not Met – condition applied	Recommendation given
employers, people with lived experience of social work, and students.			
3.6 Ensure that the number of students admitted is aligned to a clear strategy, which includes consideration of local/regional placement capacity.	☒	☐	☐
3.7 Ensure that a lead social worker is in place to hold overall professional responsibility for the course. This person must be appropriately qualified and experienced, and on the register.	☒	☐	☐
3.8 Ensure that there is an adequate number of appropriately qualified and experienced staff, with relevant specialist subject knowledge and expertise, to deliver an effective course.	☒	☐	☐
3.9 Evaluate information about students' performance, progression and outcomes, such as the results of exams and assessments, by collecting, analysing and using student data, including data on equality and diversity.	☒	☐	☐
3.10 Ensure that educators are supported to maintain their knowledge and understanding in relation to professional practice.	☒	☐	☐
Curriculum and assessment			
4.1 Ensure that the content, structure and delivery of the training is in accordance with relevant guidance and frameworks and is designed to enable students to demonstrate that they have the necessary knowledge and skills to meet the professional standards.	☐	☒	☐
4.2 Ensure that the views of employers, practitioners and people with lived experience of social work are incorporated into the design,	☐	☒	☐

Standard	Met	Not Met – condition applied	Recommendation given
ongoing development and review of the curriculum.			
4.3 Ensure that the course is designed in accordance with equality, diversity and inclusion principles, and human rights and legislative frameworks.	☒	☐	☐
4.4 Ensure that the course is continually updated as a result of developments in research, legislation, government policy and best practice.	☒	☐	☐
4.5 Ensure that the integration of theory and practice is central to the course.	☒	☐	☐
4.6 Ensure that students are given the opportunity to work with, and learn from, other professions in order to support multidisciplinary working, including in integrated settings.	☐	☒	☐
4.7 Ensure that the number of hours spent in structured academic learning under the direction of an educator is sufficient to ensure that students meet the required level of competence.	☒	☐	☐
4.8 Ensure that the assessment strategy and design demonstrate that the assessments are robust, fair, reliable and valid, and that those who successfully complete the course have developed the knowledge and skills necessary to meet the professional standards.	☒	☐	☐
4.9 Ensure that assessments are mapped to the curriculum and are appropriately sequenced to match students' progression through the course.	☒	☐	☐

Standard	Met	Not Met – condition applied	Recommendation given
4.10 Ensure students are provided with feedback throughout the course to support their ongoing development.	☐	☒	☐
4.11 Ensure assessments are carried out by people with appropriate expertise, and that external examiner(s) for the course are appropriately qualified and experienced and on the register.	☒	☐	☐
4.12 Ensure that there are systems to manage students' progression, with input from a range of people, to inform decisions about their progression including via direct observation of practice.	☒	☐	☐
4.13 Ensure that the course is designed to enable students to develop an evidence-informed approach to practice, underpinned by skills, knowledge and understanding in relation to research and evaluation.	☒	☐	☐
Supporting students			
5.1 Ensure that students have access to resources to support their health and wellbeing including: I. confidential counselling services; II. careers advice and support; and III. occupational health services	☐	☒	☐
5.2 Ensure that students have access to resources to support their academic development including, for example, personal tutors.	☐	☒	☐
5.3 Ensure that there is a thorough and effective process for ensuring the ongoing suitability of students' conduct, character and health.	☒	☐	☐

Standard	Met	Not Met – condition applied	Recommendation given
5.4 Make supportive and reasonable adjustments for students with health conditions or impairments to enable them to progress through their course and meet the professional standards, in accordance with relevant legislation.	☐	☒	☐
5.5 Provide information to students about their curriculum, practice placements, assessments and transition to registered social worker including information on requirements for continuing professional development.	☒	☐	☐
5.6 Provide information to students about parts of the course where attendance is mandatory.	☐	☒	☐
5.7 Provide timely and meaningful feedback to students on their progression and performance in assessments.	☐	☒	☐
5.8 Ensure there is an effective process in place for students to make academic appeals.	☒	☐	☐
Level of qualification to apply for entry onto the register			
6.1 The threshold entry route to the register will normally be a bachelor's degree with honours in social work.	☒	☐	☐

Regulator decision

Approved with conditions.

Annex 2: Meeting of conditions

1. If conditions are applied to a course approval, Social Work England completes a conditions review to make sure education providers have complied with the conditions and are meeting all of the [education and training standards](#).
2. A review of the conditions evidence will be undertaken and recommendations will be made to Social Work England's decision maker.
3. This section of the report will be completed when the conditions review is completed.

	Standard not met	Condition	Recommendation
1	2.1	The education provider is required to provide a comprehensive report to evidence how they were assured the students had gained the required skills, experience and exposure associated with the learning outcomes from the placement modules and skills days which would enable them to meet the professional standards as a social worker.	Condition is met
2	2.1 5.6	The education provider should have a clear skills day policy, document or process, that details: • Forward planning of skills days; • A clear and transparent approach to skills days which is easy to articulate and understand; • How student attendance is monitored on skills days; • What a maximum number of skills days to miss and make up might be; • A process for making up skills days including the quality assurance of the make-up tasks; • A communication plan to ensure that students are aware their attendance is monitored and mandatory.	Condition is met

3	3.4 3.5 4.1 4.2	The education provider is required to set up, run and evaluate the Practice Learning and Skills sub-group of the SWAB and provide evidence of these being effective	Condition is met
4	4.1	The education provider will review the content, delivery and student learning within modules which cover the Care Act, Mental Capacity Act and assessments and discuss potential solutions with partners providing evidence of coproduction and any resulting curriculum development.	Condition is met
5	4.2	The education provider will review their practice of co-production with people with lived experience and make it clear how feedback is collected, how it impacts the curriculum and how it is fed into the governance structures.	Condition is met
6	4.6	The education provider will review the opportunities for interprofessional learning within the curriculum, being clear about which elements are 'work with' and which are 'learn from'.	Condition is met
7	4.10 5.7	Following the summer away day (June 2023) the education provider will provide details on the student assessment feedback approach moving forward and any resulting policies or processes.	Condition is met
8	5.1 5.4	The education provider will raise the concerns regarding the disability and wellbeing services highlighted by the inspection team with the Head of Student Services for feedback and will review the steps taken within the institute to ensure students who require adjustments are supported whilst waiting for the central services learning support action plan.	Condition is met
9	5.2	The education provider will review, and critically assess, the personal tutor provision as set out in the PSD and develop processes to ensure that the offer is met for all students.	Condition is met
10	5.6	The education provider will ensure that placement providers are clear regarding the expectations of the university in relation to placement provision, and consider the process for recording missed, and made-up placement days.	Condition is met

Findings

4. The conditions review was undertaken as a result of the conditions set during the course approval as outlined in the original inspection report above.
5. Condition 1, recorded against standard 2.1, was issued with a shorter submission deadline by the regulator following the inspection in response to concerns over the number of placement days undertaken by the Year 2 students. The course provider submitted a report that contextualised the experiences of the students, and provided an individualised report for each student that demonstrated examples of assurances that the student was ready to meet the Social Work England Professional Standards upon qualification. The inspectors reported that the evidence provided demonstrated how the Year 2 MA students had been supported to develop appropriate skills and knowledge to meet the professional standards and that the condition was met.
6. The course provider submitted a practice learning and skills strategy (2023 – 2026), a PowerPoint presentation that covered the skills days approach, attendance and catch up programme, a template form that is completed by students to plan and record skills days catch up activity, minutes from the practice learning sub-group (PLSG) committee dated 1 November 2023 and the MA2 skills day attendance record, in response to condition 2, recorded against standard 2.1 and 5.6. The inspection team reviewed the evidence provided and agreed that it was sufficient to demonstrate that the systems for communicating expectations around skills days, monitoring of attendance, and catch up procedures were now in place. The inspection team agreed that this condition was met.
7. In response to condition 3 recorded against standards 3.4, 3.5, 4.1 and 4.2 the course provider reported that the inaugural meeting of the PSLG took place on 28 September 2023 and submitted the PSLG terms of reference, minutes dated 28 September 2023 and 1 November 2023, and the slides from the initial meeting. The inspection team considered the evidence and reported that the minutes showed appropriate discussion and the next meeting schedule and agreed that the condition was met.
8. The course provider provided commentary within the mapping document in response to condition 4 recorded against standard 4.1. They noted that the curriculum had been developed following programme review in 2022 as, prior to programme review, HSWG7019, *Critical Applications in Statutory Social Work*, was undertaken in Year 2 and as a result Year 1 students carried out their first placement without any knowledge of statutory social work. The module was also identified for curriculum development as it did not include adequate coverage of the Care Act, the Mental Capacity Act or learning from practitioners. The module was replaced by HSWG7029 in September 2022. HSWG7029 is taken in year 1 of the programme and included teaching input from practitioners. In addition, HSWG7025, *Readiness for Direct Practice*, was also introduced in academic year 2022/23 and focussed on skills development including assessments.

9. The course provider reported that the heard evidence from stakeholders provided to inspectors during inspection related to the previous version of the programme and that they acknowledged that 'contemporary social work requires an open and reflective approach to topics such as the Care Act and the Mental Capacity Act'. The inspectors considered the detail included on the mapping form and agreed that this condition had been met.
10. No evidence was submitted in response to condition 5, recorded against standard 4.2. However, the course provider included narrative on the mapping form that reported that written feedback to experts by experience would be implemented and that the experts by experience steering group would be involved in module workload planning for the coming academic year 2023/24. The steering group feeds into the wider social work advisory board (SWAB) which has responsibility for governance, curriculum development and programme content. The inspectors acknowledged that some steps had been taken and agreed that overall the condition was met.
11. No evidence was submitted in response to condition 6 recorded against standard 4.6. However, the course provider included narrative on the mapping document that acknowledged that they have not been explicit about the difference between working with and learning from other professions. It was reported that, moving forward, all programme sessions included explicit consideration about whether the session was working with, learning from, or both, and students have had opportunities to share workshops with midwifery and nursing students. The inspection team agreed that this condition was met.
12. In order to satisfy the inspection team that condition 7, recorded against standards 4.10 and 5.7 had been met, the course provider submitted an example of the formative submission and release dates for HSWG7027, and the information relating to summative assessment submission and grade release dates housed on the university virtual learning environment (VLE) BlackBoard. The course provider confirmed within the mapping document that following the MA Social Work programme review in 2023 all feedback, both formative and summative, has a transparent timeline for submission and feedback release across the course. All submission and feedback was moved to Turnitin and the feedback model was developed to be tripartite and covered the following:
- Reflection on the submission as areas for development;
 - Recognition of current strengths;
 - Feed-forward focussed on suggested development.
13. The inspectors considered the evidence and acknowledged that timelines for submission and feedback were now clearly provided to students, and that an approach to feedback had been established. The inspection team agreed that this condition was met.

14. In response to condition 8, recorded against standard 5.1 and 5.4, the course provider submitted the draft terms of reference for the Institute of Health (IoH) Disability and SpLD issues Task and Finish Group. They also submitted a table of data from the 2021/22 cohort and the 2022/23 cohort that demonstrated that students with declared disabilities were achieving academic results in line with, or better than, non-disabled peers.
15. The terms of reference showed a range of membership across departments within the Institute with the remit to 'consider what is a reasonable adjustment for a student on a professional programme in relation to readiness for practice'. Within the mapping document the course team reported that the issues identified by the inspection team had been raised with the Director of Student Services and that physical StEP desks were in the process of being rolled out at all campuses to complement the online contact forms. The inspection team agreed that this condition had been met.
16. No evidence was submitted in response to condition 9, recorded against standard 5.2. However, the course provider included narrative on the mapping document that an internal review of the personal tutor system concluded that while there was evidence of good practice demonstrated by personal tutors, there was a need to ensure the offer was consistently delivered and recorded. Moving forward all MA students had the same personal tutor to ensure consistency and will be reviewed again at the end of academic year 2023/24. The inspection team agreed that this condition was met.
17. In order to satisfy condition 10, recorded against standard 5.6, the course provider submitted the updated placement handbook which included a detailed statement that set out the university's expectations for placements. The statement covered placement hours, reflective study time, attendance and planned leave. The university also provided the amended practice learning agreement template that was housed on their PebblePad and a newsletter sent to the placement network forum dated 17 October 2023, which included an update regarding placement attendance. Within the mapping document the course provider highlighted that placement attendance, absence and reflective study time was also clarified with students in pre-placement lectures. The inspectors agreed that this condition was met.
18. Following the review of the documentary evidence submitted the inspection team are satisfied that the conditions set against the approval of the MA Social Work, and PGDip Social Work (exit route only) are met.

Regulator decision

Conditions Met