



M
MOTT
MACDONALD

M

GOsc Education Quality Assurance

Monitoring of Recognised Qualification Report

This report provides a summary of findings of the providers QA visit. The report will form the basis for the approval of the recommended outcome to PEC.

Please refer to section 5.9 of the QA handbook for reference.

Provider: Health Sciences University – UCO School of Osteopathy

Date of visit: 7th – 8th May 2025

Programme(s) reviewed: Masters in Osteopathy M.Ost (Bournemouth campus)

Visitors: Ana Molares Bargiela, Dr Brian McKenna, Sandra Stephenson

Outcome of the review

Recommendation to PEC:

- Recommended to renew recognised qualification status
- Recommended to renew recognised qualification status subject to conditions being met
- Recommended to withdraw recognised qualification status

Programme start date: September 2026

Date of expiry (if applicable):

Date of next review:

This document is issued for the party which commissioned it and for specific purposes connected with the above-captioned project only. It should not be relied upon by any other party or used for any other purpose.

We accept no responsibility for the consequences of this document being relied upon by any other party, or being used for any other purpose, or containing any error or omission which is due to an error or omission in data supplied to us by other parties.

This document contains confidential information and proprietary intellectual property. It should not be shown to other parties without consent from us and from the party which commissioned it.



Abbreviations

AB	Academic Board
AHP	Allied Health Professional
AI	Artificial Intelligence
AQF	Academic Quality Framework
ASQC	The Access Standards Quality Committee
ASSC	The Access and Student Success Committee
BDA	British Dyslexia Association
CIF	Course Information Form
CPD	Continuous Professional Development
CT Scanner	Computed Tomography Scanner
DBS	Disclosure Barring Service
DSA	Disabled Students' Allowance
DVC	Deputy Vice Chancellor
EDI	Equality, Diversity, Inclusion
EE	External Examiner
Exec	Executive
FHEQ	Frameworks for Higher Education Qualifications
FTE	Full Time Equivalent
FtP	Fitness to Practice
GDPR	General Data Protection
GOPRE	Guidance for Osteopathic Pre-registration Education
GP	General Practice
HE	Higher Education
HESA	Higher Education Statistics Agency
HR	Human Resources
HSU	Health Sciences University
IPL	Inter-professional learning
IT	Information Technology
MDT	Multi Disciplinary Team
MOst	Masters of Osteopathy
MRI	Magnetic Resonance Imaging
MScPR	Masters of Osteopathy Pre-registration
NHS	National Health Service



NSS	National Student Survey
OPS	Osteopathic Standards
PALs	Peer-Assisted Learning Scheme
PDR	Personal Development Review
PSRB	Professional Accreditation, Professional Statutory and Regulatory Bodies
QA	Quality Assurance
QAA	Quality Assurance Agency
QR Codes	Quick Response Codes
RAE	Research Assessment Exercise
RPCL	Recognition of Prior Certificated Learning
RPEL	Recognition of Prior Experiential Learning
RPL	Recognition of Prior Learning
RQ	Recognised Qualification
SEEC	Southern England Consortium for Credit Accumulation and Transfer
SET	Standards for Education and Training
SMG	Senior Management Group
SMT	Senior Management Team
SPACE	Sharing Patient and Community Experience
SRMG	Student Recruitment Management Sub-Group
SRSG	Student Recruitment Strategy Group
SSLCG	Student and Staff Liaison Consultation Group
SSS	Student Support Servicer
SU	Student Union
ToRs	Terms of Reference
UCAS	Universities and Colleges Admissions Service
UCO	University College of Osteopathy
VLE	Virtual Learning Environment
VR	Virtual Reality



Overall aims of the course

The Integrated Master of Osteopathy (MOst), to be delivered from the University's Bournemouth campus from September 2026, is an undergraduate programme that will enable graduating students to apply to the General Osteopathic Council (GOsC) for registration as an osteopath in the UK.

The programme is designed to deliver a fully integrated programme that covers the theoretical and practical knowledge and skills required to be an osteopath, and the course focuses on the theory and application of contemporary osteopathic practice.

The University confirmed the following aims of the new MOst course within the mapping tool:

- 1) Enable students to attain the capabilities and qualities of a HSU Graduate and in so doing to meet the OPS and the Graduate Outcomes published by the General Osteopathic Council (GOsC) by developing the essential knowledge base, interpersonal, cognitive, clinical, and hands on skills expected of a HSU graduate osteopath.
 - 2) Support students to develop attributes of critical enquiry, self-reflection, professionalism, ethical caring and respect that characterises a competent, confident, and capable osteopath.
 - 3) Provide an approach to teaching and learning that embodies the effective management of change and uncertainty, development of practical skills, and encourages a commitment to self-managed, life-long learning.
 - 4) Enable students to successfully practise in primary osteopathic care and be eligible to apply for registration with the GOsC.
-



Overall Summary

The visit to the University was undertaken over two days at the HSU campus in Bournemouth. The RQ visit was limited in its purpose to reviewing the plans and suitability of the University offering a new MOst from its Bournemouth campus, including reviewing the suitability of the Bournemouth campus facilities.

Visitors met with a range of relevant stakeholder groups to support their work in relation to the visit specification. This included meetings with current patients of the chiropractic clinic in Bournemouth, current and past chiropractic (Bournemouth-based) and current and past osteopathy (London-based) students. The visitors also met with current osteopathic teaching staff at the London campus, as well as the SMT, the executive leadership group, Bournemouth-based clinic staff, support services, and members of the marketing team. The University had prepared well for the visit and meetings held across the two-days facilitated good understanding of the arrangements in place to support visitors with triangulation.

Strengths and good practice

The range of support available through the student services team with a particular emphasis on putting students first and supporting their mental wellbeing in all aspects of student life. (2iv, 3iii)

The planned use of VR to simulate patient encounters with the aim to provide more detailed, relevant and quality feedback to students is an excellent example of how technology can enhance learning. (4iv)

The transition to new processes for staff management and training was managed well. New processes are clear and easy to follow. (8i)

The facilities at the proposed new clinic in Bournemouth, as well as professionalism and knowledge of the staff and management, were exemplary. (9i)

Areas for development and recommendations

The University should consider creating a detailed plan on how students, staff, and patients and in which areas will be involved in the design and development of the new MOst programme at Bournemouth to ensure relevant stakeholders' feedback is utilised. (1vi, 2i)

The University should consider creating a detailed risk assessment and risk mitigations plans, including staff employment and mitigation plan, specific to the new MOst programme in Bournemouth identifying the possible academic and clinical issues of setting up a new programme and the actions to be taken to assure successful programme implementation. (2i)

The University should consider how to implement appropriate and a variety of routes to collect and provide feedback anonymously from the future small initial cohorts of osteopathic students at Bournemouth, so they feel free and comfortable to raise concerns and/or complaints and students feel assured that their anonymous concerns or complaints are acted upon. (2iii)

The University should consider how a wider range of students can participate in roles in the SU at Bournemouth to establish a presence for the osteopathic and other AHP students within a chiropractic strong campus. (3i)

The University should consider how the historical resources in the London osteopathic library could be made more accessible to all students. (3iv)

The University should consider how to implement cross campus PALs support in order for the small initial cohorts of osteopathic students at Bournemouth to be supported in developing their sense of professional belonging. (3v, 7i)



The University should consider producing a detailed strategic plan outlining the necessary steps to provide the clinical experience needed in Bournemouth (including the access of Bournemouth students to London clinics) for the new osteopathic students and produce a contingency plan on which steps will be taken in the case that the patient recruitment is not what expected. (7ii)

Conditions

None reported.



Assessment of the Standards for Education and Training

1. Programme design, delivery and assessment

Education providers must ensure and be able to demonstrate that:

- i. they implement and keep under review an open, fair, transparent and inclusive admissions process, with appropriate entry requirements including competence in written and spoken English. MET NOT MET

Findings and evidence to support this

The 2023 visiting team found this standard to be met, with no areas of development or recommendations. Since the merger with HSU, the University has changed the UCO policies to the HSU admissions policies which are published on its website, effective from August 2024. Updated policies include the recruitment, selection, and admission policy and procedures.

These policies also set out the English language proficiency requirements, and the English Language entry criteria is set out in the course information forms, which will continue to be implemented for the MOst in Bournemouth. Responsibility and oversight of these policies will be that of the University's SRMG which is responsible for recommending the approval of any changes to this policy to the SRSG.

The intended new course in Bournemouth is the MOst full-time course whereby students will follow the standard UCAS route of application. The admissions team will review the information provided in relation to the requirements of the course and process each individual student application. The admissions team are responsible for the undergraduate applications and will be available to answer any questions from the prospective applicant.

The University states that for the new course in Bournemouth, online interviews will be offered to applicants and in-person interviews will take place if requested by the applicant. A meeting with student services will also be arranged if requested by the applicant. All applicants will need to meet the additional course requirements including DBS and occupational health checks prior to being offered a place.

The University states that due to the course being new they require a minimum of 15 students in the first cohort. In the case that the students have been offered a place and the course is cancelled due to a low number of applicants, the University will decide to notify the student of the cancellation of the course between January and June 6th. The University will offer an alternative course to the applicant, for example, the MOst London programme.

Based on the evidence seen, we are assured that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.



Areas for development and recommendations

None reported.

Conditions

None reported.

ii. there are equality and diversity policies in relation to applicants, and that these are effectively implemented and monitored. MET
 NOT MET

Findings and evidence to support this

The 2023 visiting team found this standard to be met, with no areas of development or recommendations.

Following the merger, the UCO equality, diversity and inclusivity policy has been replaced by the HSU equality, diversity, inclusivity and belonging policy which is published on the University website, and that applies to both London and Bournemouth campuses.

It is the wider management group's responsibility to evaluate and oversee the equality, diversity, inclusivity and belonging policy, and to embed a culture of diversity and inclusion across the University. The University's policies are normally reviewed every two to three years.

The EDI policies and other policies like the religion and belief policy demonstrates the University's aim to create an inclusive learning and working environment. Compassionate communications training has been provided for staff to support their interactions with students.

The clinical/academic staff, students at Bournemouth and at London we met with confirmed that a respectful, supportive environment is in place, with reasonable adjustments and additional provision provided.

The University EDI policies, the University inclusive activities and approach and stage holder's meetings assure us that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.



- iii. they implement a fair and appropriate process for assessing applicants' prior learning and experience. MET
 NOT MET

Findings and evidence to support this

The 2023 visiting team found this standard to be met, with recommendations regarding RPL processes and the MScPR course. However, this was not under revision in this visit and the programme to be implemented in Bournemouth is the MOst programme.

Following the merger, the University has aligned to HSU's RPL process which is set out in its recruitment, selection and admission policy and procedure for taught courses which are published on its website. The University has two processes in place for the recognition of a student's prior learning - RPCL and RPEL.

Following the merger, the London and Bournemouth admission and student support teams work in conjunction to offer continued support to prospective students in their applications. We are therefore assured that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

- iv. all staff involved in the design and delivery of programmes are trained in all policies in the institution (including policies to ensure equality, diversity and inclusion), and are supportive, accessible, and able to fulfil their roles effectively. MET
 NOT MET

Findings and evidence to support this

The 2023 visiting team found this standard to be met, with no recommendations or areas of improvement. This standard has been reviewed by the visiting team as new members of staff will be hired in Bournemouth by February 2026 to start preparing for the new MOst programme forecast to start in September 2026.

The University states that following the recent merger, it has reviewed and updated some of its policies, however, some historical UCO policies like the contractual policies have been continued during the transitional period. By September 2025 they envisage that only HSU policies will apply. Currently UCO staff policies are valid for UCO contracted staff and HSU policies are valid for HSU contracted staff. By September 2025 all University staff will be under HSU policies. For example, the HSU's staff development policy and procedure that will apply to the new hired staff in Bournemouth, as will the HSU's staff induction policy and procedure which ensures that new staff undertake appropriate induction activities for their role including mandatory training in safeguarding, Prevent duty, diversity and equality, GDPR, health & safety and personal resilience.



All educators at the University will be required to hold a postgraduate teaching qualification. If this is absent, they must complete an appropriate postgraduate teaching qualification within a year of joining the organisation.

The University indicates that, as with the London staff, all new Bournemouth staff will undertake a range of mandatory training during their induction and probation period and will be supported to identify development and training needs. These include more job specific training on the VLE system (Bone) and University teaching expectations, including University policies. The London staff that will teach online at the MOst programme in Bournemouth will require a more enhanced training on the new simulation centre that will be used for the online teaching. The technology simulation centre is planned to be launched by September 2025. The University has stated that, currently, some London staff have been trained in online teaching and the simulation centre. Further staff simulation centre training will be agreed by relevant line managers and would form part of an individual's professional self-development.

The University staff policies and induction, and the continuous training and development of staff assures us that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

v. curricula and assessments are developed and evaluated by appropriately experienced and qualified educators and practitioners.

MET

NOT MET

Findings and evidence to support this

The 2023 visiting team found this standard to be met, with no areas of development and/or recommendations.

The University has a quality structure with course leaders, deputy leaders and unit leaders, which works to monitor module developments within the University.

Regarding the new MOst programme in Bournemouth and the hiring of new members of staff for that course, the University has assured us that the course team will provide close support and supervision to manage the day-to-day running of the new MOst programme. The course team will oversee the day-to-day management of the course and reports to the University's ASQC.

We were assured that the University had recently added members of senior management to this course team to support course and unit leaders to conduct regular evaluations of the curricula and assessment to enhance alignment across Bournemouth and London course delivery. We are therefore assured that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice



None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

vi. they involve the participation of students, patients and, where possible and appropriate, the wider public in the design and development of programmes, and ensure that feedback from these groups is regularly taken into account and acted upon.

MET

NOT MET

Findings and evidence to support this

The 2023 visiting team found this standard to be met, with a recommendation that the University complete the periodic review process for the MOst programme to ensure the University's internal QA processes are met.

As part of the University course approval and modification processes, the UCO's AQF sections and HSU's quality assurance policies, curricula and assessment review processes involve consultation with appropriate stakeholders. This includes the relevant course team, relevant staff, students, EEs and PSRBs.

During the visit, different stakeholder groups (students, staff, patients) stated that no feedback or consultation was collected from stakeholders regarding the new MOst programme in Bournemouth. The SMT and the QA team explained that the new programme must first be submitted to the quality committee for approval by July 2025. Once the programme is approved, stakeholder meetings will follow and a structured implementation plan will be created. The meetings are forecast to start in September 2025.

The University policies and assurance from the SMT and the QA team that stakeholders will be involve in the in the design and development of the new MOst programme at Bournemouth, assures us that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

The University should consider creating a detailed plan on how students, staff, and patients and in which areas will be involved in the design and development of the new MOst programme at Bournemouth to ensure relevant stakeholders' feedback is utilised. (1vi, 2i)

Conditions

None reported.



vii. the programme designed and delivered reflects the skills, knowledge base, attitudes and values, set out in the Guidance for Pre-registration Osteopathic Education (including all outcomes including effectiveness in teaching students about health inequalities and the non-biased treatment of diverse patients).

MET

NOT MET

Findings and evidence to support this

The 2023 visiting team found this standard to be met, with recommendations that the University updates the original MOst course documentation which refers to the QAA Osteopathy Subject Benchmark Statement and that the University complete the periodic review process to ensure all areas meet the relevant standards set out in the GOPRE and OPS.

Regarding the new MOst in Bournemouth programme, the University assured us that it will mirror the existing MOst programme in London. Therefore, the new MOst programme in Bournemouth is mapped to the OPS and GOPRE outcomes. It is also benchmarked to the QAA Osteopathy Subject Benchmark Statement, QAA Master's Degree Characteristic Statement, the QAA Framework for Higher Education Qualifications, and the SEEC Credit Level Descriptors for Higher Education.

We are therefore assured that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

viii. assessment methods are reliable and valid, and provide a fair measure of students' achievement and progression for the relevant part of the programme.

MET

NOT MET

Findings and evidence to support this

The 2023 visiting team found this standard to be met, with recommendations made for the University to introduce clearer grade expectations, update marking grids, and ensure staff are aware, and trained, on the needs of the students within each class where there are mixed levels present.

During the visit, the University assured us that the assessment methods for the new MOst programme in Bournemouth are the same as the assessment methods for the MOst programme in London, and therefore, provide a fair measure of students' achievement and progression for the relevant part of the programme.

The University will continue applying the internal moderation processes set out in their academic quality framework and their double and second marking policy to ensure that assessments are fair, valid and reliable. The EEs will continue providing relevant feedback to module leaders and course leaders to ensure there is a high level of consistency across the course. As part of assessment scrutiny, the University will



continue engaging with the EE in their annual reports and also through the boards of examiners and student feedback.

Regarding the new MOst course in Bournemouth, we were assured by the University SMT that extra quality assurance measures will be added to the exams in Bournemouth to avoid possible bias due to potentially reduced numbers in the first cohorts for this programme. For example, practical examinations will be recorded for further moderation, extra examiners will be brought in from London for internal QA moderation, especially for practical exams, and – as with the exams in London – external moderation of assessments are marked, reviewed and fed-back by the EE to ensure that assessment processes and marking are fair, valid, and reliable.

In addition to the above, the University assured us that new Bournemouth staff will be provided with comprehensive training including training on assessments at the London site during the pre-course period (February 2026 to September 2026), to enable staff to effectively deliver academic and clinical assessments.

The University internal QA and assessment methods and the extra QA measures planned for the Bournemouth programme assure us that this standard is met and will continue to be met for the new MOst programme.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

ix. subject areas are delivered by educators with relevant and appropriate knowledge and expertise (teaching osteopathic content or supervising in teaching clinics, remote clinics or other clinical interactions must be registered with the GOsC or with another UK statutory health care regulator if appropriate to the provision of diverse education).

MET

NOT MET

Findings and evidence to support this

The 2023 visiting team found this standard to be met with no areas of improvement and/or recommendations.

Regarding the new MOst programme in Bournemouth planned to start September 2026, the University has assured us that they have the relevant plan in place to hire GOsC registered staff by February 2026 depending on student registration. For the Bournemouth programme, osteopathic educators will be recruited in line with the HSU's staff recruitment and selection policy and procedure with clear role descriptions, assuring that teaching staff and lecturers, and practice educators, have the required knowledge and skills for the role.

The newly hired staff will deliver practical and clinically relevant subjects. The University is planning to train their staff on time to start for the new MOst in Bournemouth by September 2026.



For the future osteopathic clinic, whereby students are engaging with patients, newly hired registered osteopaths will be supported to build up an osteopathic clinic within the existing Bournemouth multidisciplinary clinic. This will ensure that students will be supported during osteopathic observations of treatments and supervision when students get to treating patients.

The new Bournemouth staff will receive regular supervision and management as well as training in the London clinics. That way the University expects to ensure parity across the London and Bournemouth programmes.

The University policies, the staff recruitment plan, and the planned staff management and supervision, assures us that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

x. there is an effective process in place for receiving, responding to and learning from student complaints. **MET**

NOT MET

Findings and evidence to support this

The 2023 visiting team found this standard to be met with no areas of improvement and/or recommendations identified.

The student complaints policy and procedure is published on the University website, always accessible to students. Prospective students are made aware of this policy during the application stage and new students are introduced to this policy at induction. Returning students are also reminded about this policy at the beginning of each new academic year.

Student services staff at Bournemouth assured us that they provide a variety of routes to assist students wishing to make an informal or formal complaint with support and guidance. The student services office opens longer on Thursdays and students can attend without an appointment at any time. The office has been moved to the ground floor close to the main entrance where students can see it and access it easily. This approach is trying to improve the students' voice and break the barrier between the management and students. Student services state that policies for students have been reduced to just one page, so that they can easily access the information in the policy and then, if they want more information, can refer to the full policy.

At both meetings with London osteopathic students and Bournemouth chiropractic students, students came across as well informed on complaints processes and confident in raising any issues that may arise. Both groups stated that the complaints response is fed back to them and acted upon if suitable.



Current Bournemouth chiropractic students corroborated that they feel supported by student services, and they feel welcome in their offices anytime.

Student representatives are well informed of the support available and trained to provide appropriate signposting to students in a supportive manner. The SU holds a monthly meeting with student representatives to make the support inclusive to all students at the University.

The University policies, the University support services, and stakeholders' meetings assures us that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

xi. there is an effective process in place for students to make academic appeals. MET

NOT MET

Findings and evidence to support this

The 2023 visiting team found this standard to be met, with no areas of improvement and/or recommendations.

Following the merger, the UCO policy has been superseded by HSU's academic appeals policy and procedures.

The new HSU academic appeals policy for students is published on the University's website and is always accessible to students. The number and content of appeals is reported to the academic board on an annual basis to allow an analysis of themes to feedback into the programme and form part of a reflective QA process.

It is evidenced that the University continues to monitor academic appeals and works to reduce these in highlighted common areas.

As with student complaints, an annual summary of academic appeals is produced to record the number and nature of academic appeals received each year, enabling the University to identify themes or areas where practice or process could be enhanced.

The University states that students have been notified that policies and procedures have been updated since the merger in September 2024, which ensures that students have the relevant material information to make an academic appeal.

We are therefore assured that this standard is met and will continue to be met for the new MOst programme in Bournemouth.



Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.



2. Programme governance, leadership and management

- i. they effectively implement effective governance mechanisms that ensure compliance with all legal, regulatory and educational requirements, including policies for safeguarding, with clear lines of responsibility and accountability. This should include effective risk management and governance, information governance and GDPR requirements and equality, diversity and inclusion governance and governance over the design, delivery and award of qualifications.
- MET NOT MET

Findings and evidence to support this

The 2023 visiting team found this standard to be met, with recommendations made in relation to reporting the development and progress of the new strategic plan via the GOsC Annual Report and conducting a review of the committee remits.

This standard has been reviewed by the Bournemouth visiting team alongside the plans for the MOst in Bournemouth because, since the last visit, UCO has become a school within the University and as such their programme governance and leadership processes have changed.

The University has the governance mechanisms and management to comply with legal, regulatory, and educational requirements. The Vice-Chancellor's group is responsible with the board of governors for the strategic direction of the University. Parallel to that, the SMT is responsible for leading the daily operation and strategic direction of the School of Osteopathy and reporting on these to the board of governors.

Staff management and committee structures have been amended to enable compliance to continue alongside merger work started in September 2024. Several information governance policies were reviewed in 2023-2024 to ensure they reflected current legislation and remained fit for purpose. The University assured us that it is undergoing a review of its policies post-merger and therefore, all UCO and HSU policies will merge into a single University policy including the HSU information governance policies that will replace UCO's by September 2025.

In the same manner, there is not yet established a merged policy on risk management, and the University will continue to refer to the UCO risk management and the HSU risk management policies as needed, until a unified risk management policy has been implemented by September 2025.

With regards of the new MOst programme in Bournemouth, there is not an adapted risk assessment plan identifying possible academic and clinical issues. Likewise, there isn't a clear mitigating plan of actions or a risk management monitoring plan for this new programme. The SMT and the quality assurance team explained that the new programme must first be submitted to the quality committee for approval by July 2025. Once the programme is approved, stakeholder meetings will follow, and a structured implementation plan will be created; the meetings are forecast to start in September 2025.

On further enquiring, the SMT and QA teams provided a provisional strategic and operational plan on how they plan to review and monitor the possible academic and clinical issues regarding the new MOst programme in Bournemouth. This included monitoring and auditing the actual multidisciplinary clinic patient list to provide a sufficient variety of patients for the future osteopathic students. It also sets out the minimum number of students needed to run the course and a minimum number of staff to cover for all educational requirements. The online teaching and simulation centre in London will cover both sites, and the continuous conversations between sites to duplicate student services will make sure that the student experience is similar at both campuses.



Course approval, like the new MOst programme in Bournemouth, requires input from both internal stakeholders and external experts during the design phase, assuring academic quality and standards. Following the merger, new course development is undertaken in line with the University's course design framework and course approval policy and procedure. The new osteopathy course will be designed and approved consistently with appropriate stakeholder representation and external engagement. However, no student, staff representatives or EEs have been yet engaged in the new MOst programme in Bournemouth. The SMT has assured us that staff, students, and EE contributions are valued very highly, and that their representation will be included in the stakeholder meetings which are planned to be implemented for the new programme from September 2025.

The University's re-named equality, diversity and inclusivity committee, now the people and culture committee which has the responsibility for implementing the EDI and belonging policy, with oversight from the board of governors. During the merger discussions, this committee was tasked with safeguarding the unique identities of UCO and its predecessors; recognising and addressing the impact of organisational change; and ensuring appropriate support within reasonable constraints. During the staff meeting held as part of the visit, staff assured us that the merger has been better than they expected and that they have been able to give personal feedback to the University. They told us that they have been informed regularly by the University throughout the various steps taken as a result of the merger, and that their working environment has not been affected.

The Bournemouth and London student services office has merged and are jointly aiding students on any EDI matters. They have one person in each campus to assist students with any reasonable adjustment in advance before they start the course. They continue to support students throughout the course when needed. A student from London explained that when going through very difficult personal circumstances she received a great deal of support from the University which helped her to get her degree and manage personal life with study life. Students stated that they are well informed about the EDI policies and that they know where to go to get support if needed. The UCO's equality, diversity & inclusivity policy will be replaced by HSU's equality, diversity, inclusion and belonging policy by September 2025.

Based on the evidence seen across the visit, we are assured that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

The University should consider creating a detailed risk assessment and risk mitigations plans, including staff employment and mitigation plan, specific to the new MOst programme in Bournemouth identifying the possible academic and clinical issues of setting up a new programme and the actions to be taken to assure successful programme implementation.

The University should consider creating a detailed plan on how students, staff, and patients and in which areas will be involved in the design and development of the new MOst programme at Bournemouth to ensure relevant stakeholder feedback is utilised. (1vi, 2i)

Conditions

None reported.



ii. have in place and implement fair, effective and transparent fitness to practice procedures to address concerns about student conduct which might compromise public or patient safety, or call into question their ability to deliver the Osteopathic Practice Standards. MET NOT MET

Findings and evidence to support this

The 2023 visiting team found this standard to be met, with no recommendations or areas of improvement identified. This standard has been reviewed by the visiting team as the new MOst programme is planned to be implemented in the Bournemouth campus by September 2026.

Following the merger, the UCO's FtP policy has been replaced by HSU's student FtP policy and procedure and support to study policy respectively, which are both overseen by the University's academic board. The two policies are designed to address concerns regarding student conduct that could compromise patient safety or affect their ability to meet the OPS.

During the visit, the chiropractic Bournemouth students, the osteopathy London students, and the London clinical staff all stated they are well informed of any changes in the University policies and procedures as they receive regular emails with updates and training on current and changing policies. Staff training on the policies and updates are compulsory, and they must provide feedback after their training sessions. Staff also stated that they receive online training with mandatory videos on any changes to safeguarding or FtP policies with questions to be answered after the training.

The new Bournemouth MOst programme, in alignment with the MOst London programme, requires pre-admission health checks and DBS clearance, along with ongoing monitoring and referral mechanisms, ensuring compliance with professional standards. Students are required to self-declare any changes to their health or character status.

FtP cases are monitored by the SMT, academic standards and quality and committee, and academic board, and are reported accordingly to GOsC via annual reporting. The SMT assures us that if any FtP cases arise within the Bournemouth MOst students, these will be dealt with anonymously to ensure impartiality and fairness, as it is possible that the first cohorts will have a small number of students.

The policies in place, the FtP and safeguarding reporting, and the procedures and updates to students and staff, all assure us that this substandard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.



iii. there are accessible and effective channels in place to enable concerns and complaints to be raised and acted upon.

MET

NOT MET

Findings and evidence to support this

The 2023 visiting team found this standard was not met, with the condition that the University were required to have staff available for students to feel they can raise complaints and concerns in clinic, provide sufficient experiences, and to ensure that staff-student ratios provide a safe, accessible, and appropriate quality of learning, and an appropriate standard of patient safety within clinic. Additionally, there were recommendations made for the University to improve the student representative system, with clearer formal and informal channels for raising complaints, safeguarding procedures, and the triaging of complaints in clinic.

The University at their Bournemouth site provide formal and informal avenues for students, staff, and patients to raise concerns. The University encourages staff and students to raise concerns, and the policies and procedures are comprehensive and accessible including safeguarding, student complaint procedures, and patient complaints policy. The UCO complaints and concerns policies were superseded by HSU policies in August 2024 and have been published on the University website.

Staff publish office hours and students can make appointments as well as use the 'open door' policy to raise concerns or complaints. Staff stated that every three months all staff get together to discuss points of interest, concerns, and complaints received and to incorporate any changes when possible.

The student support office in Bournemouth works conjointly with the office in London and is open every day of the week. The office is easily accessible on the ground floor for students to speak to an adviser with or without an appointment. Student support staff stated that the two University sites are working in conjunction to try to increase the students' voice and break the barrier between management and students. They encourage students to contact student support with any concerns or complaints, and they are open later every Thursday in Bournemouth to facilitate student access to the students support office. Additionally, the University has created a one-page complaint policy for students so they can easily access the information and then if they want more information can refer to the full policy.

In a meeting with the Bournemouth chiropractic students, some of whom were members of the SU at the Bournemouth campus, it was evident that students feel supported and encouraged to raise any concerns. They advised that they are aware of the raising concerns and complaints procedures and policies, and that the student support office is always open for them to discuss any concern. The student representative system operates formal meetings every month with the class representatives to discuss any possible concerns. This is felt to ensure that every cohorts' feedback, concerns, and complaints can be fed back into the student union network.

Students from both University sites stated that they felt heard when they raised a concern, complaint, or shared any feedback because they felt their comments were acted upon. For example, students asked for the addition of professionalism assignments centred in future practice and how to be an independent practitioner, and the module leader modified the tasks accordingly.

Some students told us that they did not have confidence in the effectiveness of the process of raising concerns anonymously because they are not able to find out if the anonymous feedback has been acted upon.

Patients at the Bournemouth clinic are able to use the 'Compliments, Comments and Complaints' form to raise complaints, email, or speak to the clinic staff. In the Bournemouth patient meeting, patients stated that



they feel very comfortable raising concerns. They told us that in all cases where they raised a concern it was acted upon quickly and they were informed of the actions taken regarding the concern.

Patients are aware of the feedback forms available in the clinical rooms and they are aware that the feedback can be anonymous. Patients are also aware of the information in reception for safeguarding, and the policies up in the notice boards in the clinic.

The policies in place, the accessibility of student services, the previous action on complaints by the University and the accessibility of patients to reporting any concern or complaints, assure us that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

The University should consider how to implement appropriate and a variety of routes to collect and provide feedback anonymously from the future small initial cohorts of osteopathic students at Bournemouth, so they feel free and comfortable to raise concerns and/or complaints and students feel assure that their anonymous concerns or complaints are acted upon.

Conditions

None reported.

iv. the culture is one where it is safe for students, staff and patients to speak up about unacceptable and inappropriate behaviour, including bullying, (recognising that this may be more difficult for people who are being bullied or harassed or for people who have suffered a disadvantage due to a particular protected characteristic and that different avenues may need to be provided for different people to enable them to feel safe). External avenues of support and advice and for raising concerns should be signposted. For example, the General Osteopathic Council, Protect: a speaking up charity operating across the UK, the National Guardian in England, or resources for speaking up in Wales, resources for speaking up in Scotland, resources in Northern Ireland. MET NOT MET

Findings and evidence to support this

The 2023 visiting team found this standard to be met, with recommendations to review the effectiveness of the community groups and to review the triaged and recording of patient complaints.

At the Bournemouth site, student support services have developed a few strategies to create a safe and inclusive environment equal to all students. They run a Wednesday quiet space to help students in need of this type of environment: a project called 'residential life', whereby they host social events like cooking and caring for dogs; and a mental health project where senior advisers are available for consultations and to evaluate activities required to support students with mental health problems. They also run a companionate communications campaign, training for staff and students and encourage students to complete the mental health first aid course.



On meeting with students during the visit, they stated that they were able to speak up about concerns, and that they were aware and participate in the events run by the University. Students told us that the events help to create a community feeling. Students stated that the University 'open door' policy is effective in providing a safe space for them to raise issues.

Patients we met with as part of the visit stated that they feel very comfortable to raise concerns with any member of staff, all of whom are very approachable and happy to help. They are also happy to speak to clinic tutors who attend treatments on a regular basis. Additionally, every fourth treatment, patients fill out an online form where they are asked about any concerns, and also for good and bad treatment feedback to decide if it needs reviewing.

Since the University has grown in the last few years, patients stated that it took a while to get used to a bigger site, but they still feel as individually treated as before.

Patients explained that they have a patient group with 28 members called SPACE where they share patient and community experiences. SPACE members also participate in research, simulation teaching, and events within the University.

Patients consider that the University cares for people and its students. The University organises events to involve the community such as open evenings to inform on what the clinic offers. These events are run in the University grounds as well as outside of the University.

The University activities and their open door and support policies provides assurance that the culture is one where it is safe for all to speak up about unacceptable and inappropriate behaviour and assure us that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

The range of support available through the student services team with a particular emphasis on putting students first and supporting their mental wellbeing in all aspects of student life. (2iv, 3iii)

Areas for development and recommendations

None reported.

Conditions

None reported.

v. the culture is such that staff and students who make mistakes or who do not know how to approach a particular situation appropriately are welcomed, encouraged and supported to speak up and to seek advice.

MET

NOT MET

Findings and evidence to support this

The 2023 visiting team found this standard to be met, with no areas for development and/or recommendations.

We heard from the University that staff and students are encouraged to report mistakes to their line manager, HR (for staff) or course tutor (for students). We heard there is no formal recording of mistakes by HR, though line managers are encouraged to keep a record. The University provided a case study to illustrate how a mistake was identified, managed, and the learning that resulted. It was evidenced that



grievances and complaints are monitored and reported annually, and the University believes this to be evidence that mistakes are managed in a timely manner and without the need to escalate to formal procedures.

We heard from the University that students are encouraged to report mistakes (posters highlight what to do and that they will be supported) and tutors will support them to rectify them. Students reported that they knew where to seek support from tutors. This, along with the examples provided of how mistakes have been identified, managed, and learnt from, provides assurance that this standard is met, and will continue to be met for delivery of the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

vi. systems are in place to provide assurance, with supporting evidence, that students have fully demonstrated learning outcomes.

MET

NOT MET

Findings and evidence to support this

The 2023 visiting team found this standard to be met, with a recommendation to report on the implementation of the new Academic Standards and Quality Report in the next GOsC Annual Report.

We were assured that there are thorough and robust policies and processes in place to provide assurance that students have fully demonstrated learning outcomes. These procedures are set out in the AQF. This framework includes academic regulations including assessment and moderation of theoretical and practical examinations.

It was evidenced that EEs are appropriately qualified and create a team which is both academically and clinically competent to review the standards at the University. Their reports are in the main positive with endorsements that the standards achieved are in accordance with the higher education framework and the subject benchmarks as well as the OPS and GOPRE.

The three-tier board of examiner process is rigorous and thorough with the involvement of an external chair and with a summary performance report made to the academic board via a newly introduced academic standards and quality report. Overall, we were assured that that systems are in place to provide assurance that students are able to fully demonstrate learning outcomes.

We are therefore assured that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice



None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.



3. Learning Culture

i. there is a caring and compassionate culture within the institution that places emphasis on the safety and wellbeing of students, patients, educators and staff, and embodies the Osteopathic Practice Standards.

MET

NOT MET

Findings and evidence to support this

The report for the 2023 visit found this standard to be met. One area for development highlighted was for the University to conduct a review of the VLE and SharePoint to ensure it is clearer for staff and student to locate documents.

A range of policies including safeguarding, dignity, and FtP are in place relating to the safety and wellbeing of students, patients, and staff. Annual safeguarding summary reports include safeguarding incidents and how they were addressed. Recommendations, including for ongoing staff training in identifying, reporting, and escalating are made. HSU policies will be used primarily as these are the institutional policies covering all students and provides the primary regulatory framework. There are still a small number of legacy UCO policies in use with a September 2025 date set for update and consolidation of all policies.

Safeguarding policies are in place, including HSU's online safeguarding policy. Students and staff confirm that all policies are available to them through the VLE and that they receive emails to alert them to any updates or amendments. Osteopathic students confirmed they had received notification of all updated policies and procedures following the merger. They told us they have input from the start of their first year on staying safe, for example on dealing with patients in the clinic. Within the Bournemouth Clinic – currently used for physiotherapy and chiropractic – we saw copies of the consent chaperone practice policy, complaints and safeguarding policies, which were displayed and accessible to patients.

Chiropractic and physiotherapy patients we met with told us that the University cares for the building, the community, and students. They told us that they are always asked for consent, they feel safe and are surveyed for feedback every fourth visit, with paper feedback forms and QR codes available in treatment rooms. Carers told us of a collaborative approach with good communication including working with support workers to enable them to undertake exercises at home, with constant feedback and reviews between clinicians.

Current AHP students we met told us lecturers treat them as peers and have an 'open door' policy to support them. All speak very highly of the range of services offered by the student support services team including academic study skills and mental health and wellbeing. As members of the SU, they confirmed the student engagement strategy with a lot of input from the University setting clear goals with defined roles to support the entire student body. Students vote for the SU representatives, and we noted the high number of chiropractic students may mean that other AHP cohorts are not represented at the Bournemouth campus. Although we were assured that the SU works extremely hard for all students across both campuses, including having osteopathic representatives in London, it was felt that consideration could be given to how opportunities for inclusion of the osteopath and other AHP students could be developed. Current London campus osteopathic students confirmed that the merger has significantly improved the SU impact.

The policies, procedures and guidance in place, as well as the case studies shared by stakeholders confirming review and development of the VLE and SharePoint, mean that we are confident that this standard is met and will continue to be met for delivery of the new MOst programme in Bournemouth.

Strengths and good practice



None reported.

Areas for development and recommendations

The University should consider how a wider range of students can participate in roles in the SU at Bournemouth to establish a presence for the osteopathic and other AHP students within a chiropractic strong campus.

Conditions

None reported.

ii. they cultivate and maintain a culture of openness, candour, inclusion and mutual respect between staff, students and patients. MET

NOT MET

Findings and evidence to support this

The report for the 2023 visit found this standard to be met with a strength noted on the regular changing of promotional material in the notice boards around the campus help to inform students how they can report issues and also get the help needed to assist their studies.

The EDI policy clearly sets out its responsibilities as an educational institution, employer and service provider. It details policies and procedures in place to not discriminate against applicants, students, staff and patients, in line with the Equality Act 2010. The policy sets out the equality, diversity and inclusion responsibilities of each individual at the University.

Bullying and harassment are a disciplinary offence covered by the harassment policy and procedure for students, and the code of conduct policies and disciplinary procedures for students and staff. If a student or staff member raises a complaint, the student complaints procedures or staff grievance procedures, or where appropriate the public interest disclosure (whistleblowing) policy, are followed. Complaints by a patient or any other service user will be investigated in accordance with the patient complaints procedures, or where appropriate the public interest disclosure (whistleblowing) policy. The EDI committee has a responsibility for ensuring that the University's aims for equality and diversity including monitoring its implementation and the equality scheme and action plan.

The dignity policy sets out the commitment to providing a safe, comfortable environment for all students, staff, service users, and visitors. It sets out the expectation that all stakeholders are treated, and treat others, with dignity and respect from all forms of discrimination, bullying, harassment and victimisation.

Patients, students, and alumni told us they were confident to be open and honest and would challenge anything they saw or experienced which concerned them. Current osteopathic students told us they cannot fault the learning culture with professionalism being developed throughout the course. They have a feeling of being free to be honest and are encouraged to be candid. They told us they follow the policies and procedures and know how to raise any complaint or concern. Bournemouth campus AHP students told us they access the VLE to share the three C's; concerns, complaints and compliments and are encouraged to be open and honest.



The policies and guidance in place, as well as the case studies shared by stakeholders, mean that we are confident that this standard is met and will continue to be met for delivery of the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

iii. the learning culture is fair, impartial, inclusive and transparent, and is based upon the principles of equality and diversity (including universal awareness of inclusion, reasonable adjustments and anticipating the needs of diverse individuals). It must meet the requirements of all relevant legislation and must be supportive and welcoming.

MET

NOT MET

Findings and evidence to support this

The report for the 2023 visit found this standard to be met. An area for development was recommended that the University should monitor the impact of the changes to the occupational health committee, ToRs and report on the progress in the next GOsC Annual Report.

Documentation, including the CIF, shares the view that higher education should be accessible to all, regardless of background or financial status. They are committed to widening participation and welcome applications from under-represented groups including: those with a seen or unseen disability; black, Asian and minority ethnic groups; those who have been in care; those who are carers and care for a friend or family member who could not cope without their support; mature students; and those from a low higher education participation, household income, and socioeconomic status.

The ASSC oversees the development, implementation, and review of strategy, policies, and procedures to support the access, success, and progression of students from groups under-represented in higher education.

The University is approved to run the LASER Access to HE Diploma programme until 31st July 2027. The access to HE is a pre-entry course and will be available to any eligible applicants applying to the University.

Chiropractic and physiotherapy patients we met with confirmed that the students are not just a number but are treated as individuals and they recognise the value of students learning with each other and interacting across disciplines.

SU representatives told us there are disability and neurodiversity champions and an inclusive community working group. The SSS team provide a range of services to all across study skills, student wellbeing and counselling, and finances and accommodation, with the aim to mirror the offering across both campuses. Their study skills advisors work closely with the library team, offering academic study skills, referencing, and organisation, including a writing café. They told us that the library is a safe space to all. Triage appointments



by wellbeing advisors are used to signpost to services and can also prompt a referral to counselling. Additional follow-up appointments to the local community counselling group are supported with access to the hardship fund for those on low incomes. Bursaries and hardship funds, including the international student hardship fund, are in place to support students in a range of ways.

Work to support students with disability begins at application to UCAS with the development of the student learning plans to ensure reasonable adjustments are made in time for students' enrolment. In line with other universities, evidence of health or learning diagnosis is not now a requirement before implementing the needed support services.

The policies and guidance in place, as well as the case studies shared by stakeholders, mean that we are confident that this standard is met and will continue to be met for delivery of the new M0st programme in Bournemouth.

Strengths and good practice

There is a range of support available through the student services team, with a particular emphasis on putting students first and supporting their mental wellbeing in all aspects of student life. (2iv, 3iii)

Areas for development and recommendations

None reported.

Conditions

None reported.

iv. processes are in place to identify and respond to issues that may affect the safety, accessibility or quality of the learning environment, and to reflect on and learn from things that go wrong.

MET

NOT MET

Findings and evidence to support this

The report for the 2023 visit found this standard to be met with the University having a robust and reflective quality enhancement programme in place. An area for development was for the University to reflect on the number of policies or guidance documents related to safety, accessibility, or quality of the learning environment and to consider combining some guides to make it easier for staff and students to access the relevant information.

The student complaints policy and procedures are in place to allow students to raise issues and concerns relating to the teaching and learning experience, including the quality of teaching, teaching facilities and personal tutor support, and academic services, including computing and library services and administrative services such as registry and finance. Complaints concerning student disciplinary matters are dealt with under the student code of conduct and disciplinary procedure or student FtP policy. Matters of public interest are dealt with under the public interest disclosure (whistleblowing) policy. Students can seek support from the SU and SSS to help them raise a complaint. A flowchart shows the process for stages 1 to 3 of the student complaints process.



Students (chiropractic in Bournemouth and osteopathic in London) told us their feedback is responded to. An example of this was that there was a lack of space to study at certain times of year and the University responded by providing additional spaces and utilising other spaces in the run up to exams.

Equity of experience across the campuses will be achieved through shared resources, standardised training for staff and the use of student voice. Clinic treatment room numbers are replicated at both campuses with a VR anatomy suite at London which can share resources with Bournemouth. The Bournemouth campus has a human cadaver lab and Anatomage table. Digital resources, including a digital osteopathic library, shared VLE, and practical handbooks allow for equity in resources. We were told that not all books would be available for inclusion on the digital osteopathic library, in particular historical books regarding the origins of the profession. Students we met expressed the view that access to these resources is important.

Leaders told us they intend to undertake early hiring of local educators who will receive in-depth inductions and ongoing support to prepare them for the students' arrival in September 2026. To support them with delivering online learning, all staff receive training from the learning tech team to upskill their digital capabilities. Any gaps are identified and tailored training is given where required. They also confirm that all policies will be reviewed and updated, and the implementation of the digital learning strategy will be in place for September 2025.

The same 3/2 timetable will be in place across the two campuses allowing flexibility and ability for focused learning at each campus with a 'flying faculty' from London for integration and support for staff, educators, and students. This allows for one day of shared online learning, one day of on-campus seminars, and one day of practical skills in Clinic, with two days of independent learning or flexible days for wellbeing or part-time work. An expanded course leadership in London will further oversee, monitor and support provision and quality of teaching and learning. We are told there is a strong QA team already in place at Bournemouth with the EE able to visit both campuses. The SSLCG is a school level group now working across the wider University.

Meetings with senior leaders told us that the proposal to add a new site of delivery to an already approved course is considered a modification and that outcomes from our RQ visit will be fed into the project plan.

Patient feedback is shared with senior managers and is also disseminated to clinic staff and educators and can be used as a learning point across the staff who work different shifts. Clinic staff told us that any complaints are entered onto an incident log and shared with the Clinical Lead who responds either by telephone or letter. The complaints log is discussed at the clinical governance meeting and wider management group. Safeguarding concerns are recorded on the significant event reporting form which is fed to the safeguarding lead for investigation.

The policies and guidance in place, as well as the case studies shared by stakeholders confirming a review and update of all policies following the merger, mean that we are confident that this standard is met and will continue to be met for delivery of the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

The University should consider how the historical resources in the London osteopathic library could be made more accessible to all students.

Conditions



None reported.

v. students are supported to develop as learners and as professionals during their education. **MET**

NOT MET

Findings and evidence to support this

The report for the 2023 visit found this standard to be met with the University providing a wide range of external clinical settings giving their students a breadth of clinical experiences during their time at the University. There were no areas for development.

Each courses' student induction schedule provides an introduction to the course with further sessions including 'your student voice', assessment feedback as an ongoing dialogue, introduction to using the computer systems (Outlook, SharePoint, Microsoft Teams, BONE), and registration and finance.

In their final year, students can elect to undertake CPD courses in a range of practice areas based on their career development planning and in line with GOsC CPD requirements. The courses cover themes from communication and patient partnership, knowledge, skills and performance, safety and quality in practice, and professionalism of the OPS.

Study skills are supported from induction throughout the course through the SSS and library services team. Skills of observation, feedback, and reflection are developed throughout.

Current London-based osteopathic students told us professionalism is developed throughout the course with the understanding of the need to uphold the reputation of the OPS at all times emphasised even before enrolment. They confirmed that the University is very focussed on the importance of the osteopathic profession and that the addition of the course at the Bournemouth campus is a good thing for students and the local community. We were told of an active PALs system where higher year students share their experience of learning from the previous year with the new cohort. The visit team considered this cross-campus opportunity would support students at Bournemouth who would be starting a new course without the established earlier cohorts in place.

The policies and guidance in place, the case studies shared by stakeholders including the commitment to deliver a range of Bournemouth and south-west clinical provision, mean that we are confident that this standard is met and will continue to be met for delivery of the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

The University should consider how to implement cross campus PALs support in order for the small initial cohorts of osteopathic students at Bournemouth to be supported in developing their sense of professional belonging. (3v, 7i)

Conditions

None reported.



vi. they promote a culture of lifelong learning in practice for students and staff, encouraging learning from each other, and ensuring that there is a right to challenge safely, and without recourse.

MET

NOT MET

Findings and evidence to support this

The report for the 2023 visit found this standard to be met. It was recommended that the University should monitor and evaluate the process of including level seven students within CPD as they are still within undergraduate training and may not have the experience which might be needed to fully engage with some CPD events.

The EE state that RAE units are well designed to scaffold student understanding and engagement with research throughout the programme and to develop an appreciation for the relevance of RAE to clinical practice and healthcare more generally. Bournemouth AHP students told us they are supported to undertake research throughout the course with a fantastic Head of Research in place.

All students and alumni told us lifelong learning is promoted. Peer to peer feedback and reflection is central to their course, with the opportunity to learn from others, including across other health disciplines. University leaders are excited at the opportunities that the Bournemouth campus offers for IPL with 11 health disciplines already in place. The multiuse Clinic with MRI scanner, ultrasound, and CT scanner allows for students to understand the MDT and the patient's journey.

Students tell us they are confident to challenge both in the academic and clinic space and are encouraged and enabled to do so, through policies and feedback opportunities.

The policies and guidance in place, as well as the case studies shared by stakeholders including osteopathic students feedback on the positive benefits of CPD, mean that we are confident that this standard is met and will continue to be met for delivery of the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.



4. Quality evaluation, review and assurance

- i. effective mechanisms are in place for the monitoring and review of the programme, to include information regarding student performance and progression (and information about protected characteristics), as part of a cycle of quality review. MET NOT MET

Findings and evidence to support this

The report for the 2023 visit found this standard to be met with extensive mechanisms in place for monitoring and reviewing programmes. Two areas for development were highlighted - one being that the process could be streamlined and the other seeking to increase response rates from students and external stakeholders.

Since 2023, and the subsequent merger with HSU, quality review policies and procedures have changed. The new process is documented in the course and unit monitoring and periodic review policy and procedure. This document states that unit monitoring is an ongoing process that aims to deal with issues that arise quickly and respond to learners following internal surveys. The purpose of annual review is to analyse, reflect on, and respond to core data on student outcomes (including progression and award data over the preceding 12 months). A course action plan is required to be drawn up as part of the review process and this remains a living document until the following review. The periodic review process is also documented. There are no timescales in place for periodic review. However, it is a requirement that a date for periodic review is identified when a course is approved.

On checking with management, they reported that this policy came into effect in August 2024. To date they have used the annual course and unit monitoring process once. This was a hybrid process where the documentation submitted for the review was UCO documentation, but the process followed was the HSU policy. This was necessary as up until the change data had to be collected using UCO processes. Management stated that the process worked well even with the hybrid approach as the data necessary for the review was similar in both cases.

The findings from the 2023 report, reviewing the new HSU documentation, and seeking assurance from management on how this process has worked so far provides us with assurance that the effective processes are in place to ensure ongoing monitoring and review of programmes that take into account student performance and progression and ensure courses are inclusive. To this end we are assured that this standard is met and will continue to be for delivery of the new MOst programme in Bournemouth

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.



ii. external expertise is used within the quality review of osteopathic pre-registration programmes.

MET

NOT MET

Findings and evidence to support this

The 2023 visiting team found that this standard had been met, with external expertise being used systematically as part of the review process. As stated, since 2023 there have been some updates to the documentation with HSU policies being introduced after the merger in August 2024. The new course and unit monitoring and periodic review policy and procedure states that one of the main purposes of the periodic review process is that courses have been kept up to date and current, plus continue to align with key external frames of reference, including relevant qualifications frameworks and the FHEQ descriptors, relevant subject benchmark statements, the QAA UK quality code, and any PSRB requirements. EE reports and any feedback from professional bodies (where applicable) over the preceding 12 months should be used in the annual review process and course leaders should make the final version of the course annual monitoring report and course action plan available to the relevant EEs. Course annual monitoring reports should be made available by the course leader to relevant PSRBs as required by each PSRB.

Given the findings of the 2023 visit and a review of the updated documentation we feel assured that this standard is met and will continue to be met for delivery of the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

iii. there is an effective management structure, and that relevant and appropriate policies and procedures are in place and are reviewed regularly to ensure they are kept up to date.

MET

NOT MET

Findings and evidence to support this

The management structure that was in place in UCO when the 2023 visiting team carried out their review is no longer in place. The management structure that is now in place has been shared with us. There are clear lines of responsibility and areas of oversight are highlighted. This includes detailing who is responsible for quality, review, and performance.

The visitor report of 2023 found this standard was not met as some policies were past their review period. Since then, the UCO made efforts to bring these up to date. However, due to the merger and its incorporation into the HSU, many of the identified UCO policies were due for replacement at the merge point in August 2024. As a result, 105 of the 240 policies subsequently went past their review date. In discussion with management, they reported that this was ongoing and being managed effectively by HSU and UCO with



policies being reviewed side by side and updates being made to the new HSU policy if it was found that the UCO policy contained better practice or ways of doing things. They report that this process will be complete by September 2025. All policies will now be reviewed using HSU policies.

Contractual policies and especially those that involve staff employment are currently being replaced by HSU policies. Management report that this process is underway but necessitates more time as they need to heavily involve staff and ensure fairness to all involved.

We feel that these processes are being handled well and as a result that there is an effective management structure with the necessary policies and procedures in place to provide assurance that this standard is met and we believe will continue to be met for delivery of the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

iv. they demonstrate an ability to embrace and implement innovation in osteopathic practice and education, where appropriate. **MET**

NOT MET

Findings and evidence to support this

The visiting team of 2023 found that this standard had been met and cited it as a strength noting that the response to external examiner feedback was of a very high standard.

The course leader and the virtual learning team shared with us their plans to use VR at the Bournemouth campus to facilitate learning by simulating patient encounters with the aim of providing better quality, more relevant, and detailed feedback to students. They plan to use their new digital suite at the London campus to teach across subjects in the new course that lend themselves to this modality and provide both synchronous and asynchronous learning to students at both campuses.

The clinic team shared with us their plans to install cameras in clinic rooms with appropriate safeguards that can be used for supervision and teaching.

Given the findings of the visiting team from 2023 and our findings at this visit we feel assured that the University is able to embrace and implement innovation in osteopathic practice and education. As a result, we feel this standard is met and will continue to be met for delivery of the new MOst programme in Bournemouth.

Strengths and good practice

The planned use of VR to simulate patient encounters with the aim to provide more detailed, relevant and quality feedback to students is an excellent example of how technology can enhance learning.



Areas for development and recommendations

None reported.

Conditions

None reported.



5. Resources

- i. they provide adequate, accessible and sufficient resources across all aspects of the programme, including clinical provision, to ensure that all learning outcomes are delivered effectively and efficiently. MET NOT MET

Findings and evidence to support this

The report for the 2023 visit found this standard to be met with a number of strengths including the Learning Hub, the VR suite and providing the facilities and support to encourage students to create digital media. There were no areas for development.

CIF confirms students' practical skills will be developed by an expert and diverse team of osteopathic educators working together across a range of osteopathic and supporting techniques.

Documentation states that the University's Learning Hub is the most extensive osteopathic library outside of the USA, with a unique collection of osteopathic texts, audio visual materials, anatomical models, and flexi-spines which is staffed by an experienced team of learning advisors. There is space for private study and group work and computers with internet access to academic resources and medical databases. Leaders confirm that Bournemouth students will have access to the Hub if they choose to visit the London campus, but that a digital osteopathic resource will be in place to allow equitable access to all.

The University VLE provides policies and procedures, study materials, lecture notes and other learning resources.

The VR anatomy suite specifically for osteopathic students focusing on the development of anatomy, histology, and physiology relevant to osteopathic practice allows osteopathic students to engage in VR self-directed learning guided tutorials. The Anatomage table and Human Cadaver lab is available at the Bournemouth site.

We are assured that Bournemouth students will have equity and opportunity of experience with regards to their learning. Simulation is available at Bournemouth with a dedicated team of facilitators to support both educators and students. In line with the GOPRE, simulation will be no more than 30% of the schedule. In the NSS students score, the provision and learning resources including IT access, library, access to textbooks and online resources score highly in line with national which gives us assurance of the University's commitment to access to quality resources.

EEs confirm that students have the necessary access to relevant information and knowledgeable staff to produce high quality work. They state that RAE units are well designed to scaffold student understanding and engagement with research throughout the programme and to develop an appreciation for the relevance of RAE to clinical practice and healthcare more generally. One EE found the clinical audit assessment to be highly relevant to clinical practice, offering students an opportunity to practise conducting statistical analyses, rather than simply learning theory. Leaders confirm that EEs will have the opportunity to visit both campuses.

One EE raised concerns over not knowing how the merger influences the resourcing and therefore the day-to-day life of the student, however London osteopathic students told us they were promised a 'frictionless merger' which they said has been achieved. Educators told us they were confident that with standardised ways of doing things, with teaching sessions recorded and shared with staff, students would have equity of provision.

The scheduling of teaching should allow for adequate access to the new students. The school recognise that there is extra pressure on room space in Bournemouth during exam times but work to mitigate this through



the library which displays the available rooms for students. The clinic and rehabilitation centre offer a range of treatment rooms, student rooms with computers, and breakout rooms. Physiotherapy students undertake external clinic sessions and chiropractic students do not undertake treatments with patients until their fourth year and so there is significant availability of clinic rooms for the addition of the osteopathy course. Room use statistics suggest they are currently at less than 60% capacity. Clinic staff, librarians, SSS and educators are confident that they can easily meet the needs of the incoming students in September 2026. They are experienced in this as they already have 11 health disciplines at the campus.

The policies, procedures and guidance in place, tour of facilities, and digital learning demonstrations as well as the case studies shared by stakeholders, mean that we are confident that this standard is met and will continue to be met for delivery of the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

ii. the staff-student ratio is sufficient to provide education and training that is safe, accessible and of the appropriate quality within the acquisition of practical osteopathic skills, and in the teaching clinic and other interactions with patients. MET NOT MET

Findings and evidence to support this

The report for the 2023 visit found this standard was not met, with a condition to provide assurance that the University has: staff available for students to feel able to raise complaints and concerns in clinic; sufficient staff-student ratios that provide safe, accessible, and appropriate quality of learning; sufficient number of experienced educators; and an appropriate standard of patient safety within clinic. The University were required to conduct a review of staff-student ratios in clinic and provide evidence of sufficient staff-student ratios.

EEs confirm that due to the available resources and guidance on BONE, the University's VLE, students have the necessary access to relevant information and knowledgeable staff to produce high quality work.

There is a plan to recruit local osteopaths as educators who would be able to support the development of the osteopathy course and osteopathic clinic in Bournemouth. We are told that two to four staff will be appointed dependant on the number of students enrolling, with staff receiving an enhanced induction process and appointed in February 2026 in order to be prepared for the September 2026 intake.

The CIF confirm that students' clinical practice will give them opportunities to care for a wide range of patients from a diverse range of backgrounds and different demographics. In the final year of the course there are opportunities to study practice specialisms at a more advanced level. These specialisms might include sports injury and rehabilitation, paediatrics, women's health, positive ageing, headache, GP clinics and specialist clinics or hospital outpatients. The leaders are committed to giving students at both sites equity of learning opportunities including the use of simulated patient sessions and live streaming patient



sessions and an aim to use the existing well-established links already in place for physiotherapy and chiropractic through the Clinic for developing networks and opportunities for osteopathy.

They hope that there will be opportunities for IPL across the Bournemouth campus and in time, at the London campus. This is one of the strengths of the University with the range of healthcare students. Through the Clinic and rehabilitation centre there are a range of ways of learning as part of a MDT.

The policies and guidance in place, meetings with senior leaders as well as the case studies shared by stakeholders, mean that we are confident that this standard is met and will continue to be met for delivery of the new M^Ost programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

iii. in relation to clinical outcomes, educational providers should ensure that the resources available take account, proactively, of the diverse needs of students. For example, the provision of plinths that can be operated electronically, the use of electronic notes as standard, rather than paper notes which are more difficult for students with visual impairments, availability of text to speech software, adaptations to clothing and shoe requirements to take account of the needs of students, published opportunities to adapt the timings of clinical sessions to take account of students' needs.

MET
 NOT MET

Findings and evidence to support this

The report for the 2023 visit found this standard to be met with a recommendation that the University produce a comprehensive project plan for the implementation of the new clinic management system.

The managed support plan and student learning plan are in place to provide a framework to enable staff to support students that may be affected by physical, mental ill-health, or disability which can impact on their health, wellbeing, or safety. In addition to referral by staff members, students can self-refer. Initial interaction may be informal with staff able to signpost students to support services available. The staff member will discuss their concerns and outcome of the discussion with SSS who record the event and ensure follow up actions are appropriate. The policy details formal processes and links to the FtP policy.

During the tour of the Clinic, it was confirmed that current AHP students have access to plinths which can be operated electronically, and electronic notes are used as standard. Where needed, talk to text to speech software is available. We were assured that osteopathic students will have access to the necessary equipment.



The 3/2 timetable which will be followed at Bournemouth, in-line with the London campus, allows for flexibility. Leaders told us that when surveyed, 90% of the London students liked the timetable. For example, day five is given to student wellbeing or part-time work.

The policies and guidance in place, as well as the case studies shared by stakeholders and tour of the Bournemouth clinic, mean that we are confident that this standard is met and will continue to be met for delivery of the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

iv. there is sufficient provision in the institution to account for the diverse needs of students, for example, there should be arrangements for mothers to express and store breastmilk and space to pray in private areas and places for students to meet privately. **MET** **NOT MET**

Findings and evidence to support this

The report for the 2023 visit found this standard to be met with no recommendations or conditions identified.

The HSU religion and belief policy demonstrates the University's aim to create an inclusive learning and working environment. It sets out the expectation that students and staff of all religions, beliefs, or no belief are all respected and tolerance is actively promoted.

The student registration pack includes a wide range of resources designed to support students in their transition to life as a student. The child and infants on premises policy confirms that students who wish to breastfeed babies on the premises are supported and the school is committed to creating an environment where this is easily possible. They will make reasonable efforts to provide suitable facilities for breastfeeding on premises for nursing mothers. If a space is not available where staff and students feel comfortable breastfeeding, they can contact SSS in order to arrange a suitable space on an individual basis. Current AHP students told us they were aware of the policy.

Breakout rooms for students to meet privately are provided. The faith room is in the library building on the ground floor.

The policies, procedures, and guidance in place, as well as the case studies shared by stakeholders, mean that we are confident that this standard is met and will continue to be met for delivery of the new MOst programme in Bournemouth.

Strengths and good practice

None reported.



Areas for development and recommendations

None reported.

Conditions

None reported.

v. that buildings are accessible for patients, students and osteopaths.

MET

NOT MET

Findings and evidence to support this

The report for the 2023 visit found this standard to be met with no recommendations or conditions identified.

The rehabilitation suite, clinic, and most buildings are completely accessible with lifts to all floors and automatic opening doors. There are some limitations due to three of the buildings being designated as Grade 2 listed and with tree preservation orders in place across more than 30 trees on campus. The library building which includes the library, faith room, and SSS offices has been granted listed building status to be adapted to include a lift. The lower floor of the library, SSS, and faith room are all located on the ground floor and so are accessible.

The policies and guidance in place and tour of facilities at the Bournemouth campus mean we are confident that this standard is met and will continue to be met for delivery of the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.



6. Students

- i. are provided with clear and accurate information regarding the curriculum, approaches to teaching, learning and assessment and the policies and processes relevant to their programme. MET NOT MET

Findings and evidence to support this

The report for the 2023 visit found this standard to be met with no recommendations or conditions identified.

Unit information forms provide students with clear and accurate information regarding the curriculum, approaches to teaching, learning, and assessment, and the policies and processes relevant to their programme. Assessment criteria are given for each learning outcome. Details of scheduled learning hours are broken down including lectures, seminars, tutorials, practical classes, and project supervision.

Each course has its own course handbook, revised annually to provide students with the essential information about their course. Bournemouth chiropractic and London osteopathic students told us that Moodle, an online learning platform, contains all the information they need and that they are also alerted to any amendments to policies and procedures. The University confirms that most policies are now HSU rather than UCO policies, with all to be reviewed and updated by the quality team by September 2025. All information regarding modules is detailed on BONE showing a week-by-week breakdown of the unit provided prior to the start of the term. Timetable and assessment schedules are shared a few months in advance, allowing students to plan ahead. For existing students, the timetables and assessment schedules are available in May or June prior to the new year commencing in September.

An EE has set the effect of the merger on the future teaching and learning as a key point of their next external examination.

The policies and guidance in place, as well as meetings with stakeholders, mean that we are confident that this standard is met and will continue to be met for delivery of the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

- ii. have access to effective support for their academic and welfare needs to support their development as autonomous reflective and caring Allied Health Professionals. MET NOT MET

Findings and evidence to support this



The report for the 2023 visit found this standard to be met with no recommendations or conditions identified.

The support to study policy clearly sets out responsibilities across the organisation to support students. It details their duty of care and includes the student services referral framework. This signposts staff in managing concerns regarding the wellbeing and mental health of students. There are three stages of emerging, continued, and acute concern.

The disability policy for students details a range of support and guidance for students. General advice and support are available for all students from the course lecturers, clinic tutors, and SU. Academic tutors help with personal and academic problems, including overseeing the development of the learning portfolio. HSU policies and procedures with regards to disability support have been rolled out post-merger and the students and staff have full access to them.

Wellbeing support is available, including a counsellor through the student counselling service. The Student Support Officer provides welfare and disability support and advice. They can assist students through the initial induction period to the University, liaising with other staff to help meet student needs. They can support with the DSA process including the co-ordination and ongoing monitoring of the support provided. Dyslexia screening can be provided with funding through the Access to Learning Funds for those screened as moderate to high possibility of dyslexia. 1:1 tuition with a dyslexia tutor may be available. A student we met told us of excellent support through a difficult time during the pandemic, with dyslexic screening provided and reasonable adjustments, such as additional time, provided.

The Student Learning Advisor offers study skills and learning support workshops and can offer 1:1 general advice or support. The library team and SSS work closely together to support academic skills. They told us they have no concerns about adding an additional course at the Bournemouth campus. Study skills tutors will liaise in advance with the lecturers prior to the first cohort's arrival to be properly prepared with knowledge of the course units and practice in order to support students from their first assessment. Accessibility options are available online, including eBooks with an accessibility bar to allow read out of text and the capacity to change background colour.

Research skills are supported through the library with two library services advisers available to help with research skills, such as sourcing materials and referencing. Students told us that different career pathways are highlighted through careers days, including visits from private clinicians and representatives from the NHS. Preparing for independent practice involves business planning, attending external CPD events, and follow-up reflections on these experiences. This is guided by the development of a revised CPD schedule and includes writing a reflective essay.

The student registration pack includes the Students Minds charity's transitioning to university document.

The policies, procedures, and guidance in place, as well as the case studies shared by stakeholders, mean that we are confident that this standard is met and will continue to be met for delivery of the new MOSt programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions



None reported.

iii. have their diverse needs respected and taken into account across all aspects of the programme. (Consider the GOsC Guidance about the Management of Health and Disability). MET NOT MET

Findings and evidence to support this

The report for the 2023 visit found this standard to be met with no recommendations or conditions identified.

NSS scores for Bournemouth and London campuses for mental health, wellbeing and freedom of expression are all at national average, with support for mental wellbeing 10% above national.

A range of policies ensures EDI requirements are met. HSU's religion and belief policy demonstrates the University's aim to create an inclusive learning and working environment. It sets out the expectation that students and staff of all religions, beliefs, or no belief are all respected and tolerance is actively promoted.

The student engagement strategy aims to put students first. The DVC has a student engagement focus with an emphasis on student voice. Compassionate communications training has been provided for staff to support them in their interactions with all students. The SSS provides a range of support and activities throughout the year, including a resilience workshop, writing cafes, drop-ins, a Wednesday afternoon quiet classroom space and in response to need, specific sessions are provided, such as to support dealing with exam stress and anxiety.

Social days are held through ResLife and with student ambassadors holding events at accommodation sites to support a feeling of community.

All students and alumni we met with confirmed that a respectful, supportive environment is in place, with reasonable adjustments and additional provision provided.

The policies and guidance in place, as well as meetings with stakeholders, mean that we are confident that this standard is met and will continue to be met for delivery of the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

iv. receive regular and constructive feedback to support their progression through the programme, and to facilitate and encourage reflective practice. MET NOT MET



Findings and evidence to support this

The report for the 2023 visit found this standard to be met with one recommendation for the University to revisit their risk management strategies to ensure that they are effective, and to ensure that risks have been appropriately mitigated prior to downgrading the risk.

Examples of end of year assessment sheets and group presentations provide concise, supportive, and constructive feedback to students, identifying good practice and suggesting how performance could be enhanced further. Case study assessments and critical literature reviews are very detailed, directly referencing a range of areas across the piece so that the student can understand the reason behind their grade. Second marker is referred to. Examples seen show second markers adding to the recommendations made by the first marker and providing signposting, for example, using student support or the Learning Hub for proofreading. The EE highlights good practice with clear marking criteria in line with various learning outcomes. They note feedback given to students is clear and constructive, highlighting areas of good practice as well as areas for further improvement. They state materials available on the online platform are of very good quality too and in line with learning outcomes of the respective courses.

University responses to the EE's recommendations include, for example, exploring incorporating Turnitin's voice feedback feature into feedback processes to students with learning difficulties, providing an alternative to written feedback for improved accessibility and engagement.

NSS scores are lower than national for marking and assessment being fair with clear marking criteria. Scores are particularly low at Bournemouth as the University's London site worked to address their own lower scores in this area over the past few years. The transfer of BONE to both campuses will allow for the sharing of the week-by-week units and assessment schedule a term in advance. Students at Bournemouth confirmed they received marking rubrics and assessment feedback although this could be inconsistent across lecturers. Alumni we spoke to confirmed that everything they needed, including assessment criteria, was on Moodle but that there was sometimes difficulty experienced by staff with the method of uploading.'

Simulation provides learning activities followed by debrief and reflection. Larger groups can watch simulation live streams to enable note taking and reflection in larger seminar rooms. AI enabled learning is being delivered, supporting staff and students as a teaching and learning tool.

The policies and guidance in place, as well as the case studies shared by stakeholders, mean that we are confident that this standard is met and will continue to be met for delivery of the new M0st programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.



v. have the opportunity to provide regular feedback on all aspects of their programme, and to respond effectively to this feedback.

MET

NOT MET

Findings and evidence to support this

The report for the 2023 visit found this standard to be met with one recommendation for the University to review the efficacy of the student communications plan, including reviewing the mechanisms for monitoring the impact of its introduction into practice.

The student experience committee oversees student feedback with responsibility to consider and respond to the outcomes of internal and external student surveys and evaluations.

Students can raise matters of concern, via their course representatives at course steering committees which are the main formal channel of communication between students and staff in academic and related matters.

Student feedback is sought through a range of surveys. Students have the opportunity to provide anonymous feedback for each course unit. Final years can complete the NSS. In addition, specific surveys may be undertaken to obtain feedback.

The University's S.O.C.I.A.L. series demonstrates their response to student feedback. Analysis of feedback showed students wanted more hands-on practise to feel fully confident for assessment. A series of technique workshops, specialist sessions such as 'using AI to enhance your studies' and integrated assessment question and answer sessions with tutors were provided. The course leader update letter to students thanks them for giving feedback, demonstrating the value placed on it by the University. Changes have been made, in direct response to student feedback given, such as later Sunday start time for part-time students at the London campus.

All students we met confirmed that feedback is actively sought, and student voice encouraged. AHP students we met with told us of requests for feedback by their lecturers in order for the University 'to do better'. A traffic light system presentation shared the University's response, highlighting action now, action in the future or where no change can be actioned and the reasons for this.

Current students told us of monthly cross-campus SU meetings with the post-merger SU having a much bigger impact for student experience. An SU representative interviewed the DVP for a 'Meet the Exec' session as part of their 'putting students first' initiative.

Through the SSLCG students give feedback and make requests for changes. Through the SSLCG students have requested additional online learning which has fed into the University's digital learning plan.

The policies and guidance in place, as well as the case studies shared by stakeholders, mean that we are confident that this standard is met and will continue to be met for delivery of the new M0st programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions



None reported.

vi. are supported and encouraged in having an active voice within the education provider. **MET**
 NOT MET

Findings and evidence to support this

The report for the 2023 visit found this standard to be met with no recommendations or conditions identified.

The HSU student engagement and feedback policy and procedures sets out the ways that students have a voice within the University. There is student representation at the board of governors, academic board, research and innovation committee, access and student success committee, course teams committee. NSS scores are broadly in line with national benchmarks for student voice.

Students are also represented through the SU with all students we met with confirming a strengthened SU body since the merger. The student champions scheme is designed to ensure that students from underrepresented areas voices are heard.

Student representatives undertake quality and enhancement activities in designing, developing, and approving new courses, reviewing existing courses and as part of professional body accreditation.

The policies and guidance in place, as well as the case studies shared by stakeholders, mean that we are confident that this standard is met and will continue to be met for delivery of the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.



7. Clinical experience

i. clinical experience is provided through a variety of mechanisms to ensure that students are able to meet the clinical outcomes set out in the Guidance on Pre-registration Osteopathic Education.

MET

NOT MET

Findings and evidence to support this

The report for the 2023 visit found this standard to be met with no recommendations or areas of improvement identified.

Students for the new MOst programme at Bournemouth must complete the minimum clinical hours per year as a regulatory requirement in accordance with SET and GOPRE guidance and as recommended in the QAA Osteopathy Subject Benchmark Statement to achieve at least 1000 hours of clinical training/experience and see a minimum of 50 new patients by the end of the course.

With regards to the new MOst Bournemouth programme, the student osteopathic clinic is not yet set up. The SMT has assured us that they are in discussions with the relevant teams in Bournemouth about the space and facility requirements, dependent on cohort sizes. The SMT also told us that they are working towards a planned start date of February 2026, which will allow osteopathic students starting at Bournemouth in September 2026 to observe from year 1.

Regarding clinical practice and learning, osteopathic tuition will mirror that in London, with students starting as observers in the student clinic. As the Bournemouth clinic will not have senior osteopathic students that junior students can observe, the SMT explained to us that new osteopathic clinicians will be hired in February 2026 and will develop the osteopathic clinic until students are at the right level to treat patients. Therefore, the aim is to build up an appropriate number of patients in the student clinic and to treat those patients for the first- and second-year students to observe.

As the programme develops, students will progressively increase their involvement in the Clinic and take more responsibility for patient care. The osteopathic clinicians as clinic tutors will help students to develop their skills in the osteopathic clinic. During the final phases students are expected to take responsibility for all aspects of patient care and also take responsibility for providing mentoring and leadership to junior students within their team. By the time students are in their final years, they will have junior students in the clinic to provide mentoring and leadership.

For the MOst programme at the Bournemouth campus as for the MOst programme in London, the board of examiners determine whether they have achieved the required level of clinical hours to progress to the next year of their course. Practice educators and senior practice educators also have a role in the monitoring of student attendance and, where necessary, to take appropriate actions such as contacting the student support team.

Patient numbers will be monitored at University's monthly clinic team lead meetings and marketing strategies will be reviewed to raise public awareness of the benefits of osteopathic treatment and the services of the Clinic to ensure that patient numbers remain sufficient for student intakes. The marketing team is confident they will be able to advertise and recruit enough patients for the osteopathic clinic as they have done this before with other disciplines at the Bournemouth clinic.

The marketing team has also developed in Bournemouth a new website for patients with different pathway options so that patients can find information about any type of therapy treatment available in the clinic including osteopathy. There is also a triage system carried out by the Director of Clinical Services and his



team to decide which therapy is best for the new patients in the clinic. The SMT stated that this system will ensure that osteopathic students get allocated enough patients to meet the clinical outcomes set out in the GOPRE.

The existing chiropractic and physiotherapy clinic space seen, the plan to hire new osteopathic clinicians, the marketing plan to provide students with their required number of patients, and clinical education gives us confidence that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

The University should consider how to implement cross campus PALs support in order for the small initial cohorts of osteopathic students at Bournemouth to be supported in developing their sense of professional belonging. (3v, 7i)

Conditions

None reported.

ii. there are effective means of ensuring that students gain sufficient access to the clinical experience required to develop and integrate their knowledge and skills, and meet the programme outcomes, in order to sufficiently be able to deliver the Osteopathic Practice Standards. **MET** **NOT MET**

Findings and evidence to support this

The report for the 2023 visit found this standard to be not met, with a condition for the University to develop appropriate protocols for the management of students who are gaining clinical experience at external sites which contribute to their total clinic hours, in order to ensure student safety and to ensure the quality of the student learning experience.

This standard has been reviewed by the visiting team however there are no plans for osteopathic students at the Bournemouth campus to gain clinical experience at external sites to contribute to their clinical hours.

The new osteopathic clinic in Bournemouth is yet to be developed in a way that ensures that students are exposed to a diverse patient demographic. The University needs be able to explore a system which assures that students see a variety of existing and new patients with a range of presentations required to meet the course outcomes, develop and integrate their knowledge and meet the OPS.

The marketing team assured us that they are used to developing strategies to gain patients for the already established students' clinic at the Bournemouth site. They collaborate in conjunction with the clinical team and engage with students and staff to support marketing and promotion. The marketing team works with the clinical team and each quarter they decide different channels to promote the clinic, for example: Google advertising, Facebook campaigns, pamphlets in GP surgeries to target older populations, free treatment for students, and discount rates for the University staff. They develop a different marketing strategy depending on the group they are targeting, while the clinical team continue to focus on a high-quality patient experience to ensure a high levels of patient retention.



One of the University's strengths in the London campus has been the diversity and range of our clinical experience, through specialist and community clinics, as well as the diverse patient population to support the student experience. However, that presents a challenge to mirror the experiences of students in London with the students in Bournemouth.

The London site has a range of specialist clinics, including a sport and performing arts clinic, expectant mothers and women's health clinic, a paediatric clinic, and community clinics. The SMT told us that there is a need to explore how they might enable students at both sites to have similar opportunities of specialist knowledge and experience. Therefore, the University is exploring a plan that might include the use of simulated patient sessions and live streaming patient sessions, as well as the potential in the future for placements at both sites. These will expose students to a wider range of patient settings, presentations, needs and experiences.

The existing chiropractic and physiotherapy clinic space seen, the marketing plans, and the University's ideas for students to be exposed to a variety of patients presentation, assure us that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

The University should consider producing a detailed strategic plan outlining the necessary steps to provide the clinical experience needed in Bournemouth (including the access of Bournemouth students to London clinics) for the new osteopathic students and produce a contingency plan on which steps will be taken in the case that the patient recruitment is not what expected.

Conditions

None reported.



8. Staff support and development

- i. educators are appropriately and fairly recruited, inducted, trained (including in relation to equality, diversity and inclusion and the inclusive culture and expectations of the institution and to make non-biased assessments), managed in their roles, and provided with opportunities for development. MET NOT MET

Findings and evidence to support this

The visiting team of 2023 found this standard to be met with one recommendation and one area of good practice. The area of good practice noted was in the preparation for the annual review. The form that is required for staff to fill out in preparation for their annual review was shared with us. We found this to be appropriate for this purpose.

The recommendation was that the University should review the PDR implementation as it was a new process and to monitor the take up of online training. This process has now been superseded by their HSU annual review process and annual training is mandatory.

Since the merger, the HSU recruitment policy has replaced previous policies. The policy outlines the process by which educators and others are recruited. It sets out how vacancies are agreed, how job descriptions and person specifications are set out and the information that should be provided to candidates in any advertising. It refers to EDI at numerous points, reminding those involved in recruitment to be mindful of these issues at all stages of the process. The policy requires the monitoring of protected characteristics such as age, disability, and ethnic origin. It does not require blind shortlisting, but shortlisting is done against pre-determined criteria. It states that the university is a two-tick employer and as such will interview all candidates who declare a disability that meet the essential criteria.

Employers who use the two-tick symbol have agreed with Jobcentre Plus that they undertake a number of processes to ensure they are disability positive.

The policy states that if an appointee to a vacancy will be working in a regulated position, they will require an enhanced criminal records check.

All new staff will now be inducted using the HSU staff induction policy and procedure. This policy sets out what should happen at induction whilst acknowledging that there may be individual factors that are identified that are necessary for some roles and that this should be designed by the appointee's line manager. It states that mandatory eLearning is necessary but does not state what this eLearning is. Speaking with management and staff, the induction and annual training includes safeguarding, GDPR, data protection, and health and safety.

Staff are then managed according to the HSU annual review policy, academic framework and the staff development policy and procedure. Line managers have responsibility to ensure staff are appropriately supported in their personal and professional development. The development process is facilitated through various activities including induction, probation, mentoring, peer observation, staff development lectures, and workshops. All academic staff are supported to complete a HESA eligible teaching qualification normally within three years of joining the University.

The academic framework seeks to align staff to a set of expectations and thus make it clear how staff progress from lecturer, senior lecturer, associate professor, and professor. When speaking to UCO staff they were aware that the framework existed, how to access it and would use it if they wished to progress in that manner.



When speaking with staff who worked first for UCO and now HSU they were happy with the transition and spoke favourably about their online learning. They reported that they were happy with how they were being managed and stated that in many ways, the new processes were more streamlined. They were aware of the policy changes that affect their ongoing development, knew where to find them and felt happy to approach such matters if they felt it was necessary. Given that new staff will need to be recruited to the Bournemouth campus within the next year it was reassuring to hear how well this process has gone and how the new policies and procedures and training are more accessible.

We feel that, given the information supplied and in conversation with management and staff, that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

The transition to new processes for staff management and training was managed well. New processes are clear and easy to follow.

Areas for development and recommendations

None reported.

Conditions

None reported.

ii. educators are able to ask for and receive the support and resources required to effectively meet their responsibilities and develop in their role as an educator. **MET**
 NOT MET

Findings and evidence to support this

The visiting team of 2023 found that this standard had been met. They highlighted the need for good communication and to monitor the transition towards more formal ways of working. In discussion with staff, we found that they preferred the new, more formal ways of working.

The staff development policy states that resources for staff development are specifically identified as a heading in departmental budgets which ensures funds are available for development. Staff can apply for funding on an individual basis which is considered against set criteria. Staff are required to record their development for the year which they then take to their annual review and which includes the production of a personal development plan for the next year. They commented that many of the processes were clearer and more streamlined under the new policies and management structure.

The University provides in house courses and other staff development activities such as using AI and IT in education and all staff who require it will be provided with education in teaching online.

Educators undergo their annual review process in which they set their development needs. This offers them the opportunity to raise any issues at that time. There is a clearly written process within the HSU staff development process document which was supplied to the visiting team. This sets out how staff access additional learning and development. When speaking with UCO staff who transitioned to the new HSU policies they felt well supported in their roles and felt they could approach their managers for resources or training.



The policies we have reviewed, meetings with staff and management at this visit would indicate that the processes currently in use continue to support staff to meet their responsibilities as an educator and thus we feel this standard is met and we believe it will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

iii. educators comply with and meet all relevant standards and requirements, and act as appropriate professional role models.

MET

NOT MET

Findings and evidence to support this

The visiting team from 2023 found that this standard was met at the time with no recommendations. The staff handbook that was in development at the time is now live on the VLE and has been populated with the University policies.

Educators who work in the Clinic and in technique classes are required to be registered with the GOsC. All staff are required to undertake a teaching in higher education qualification within three years of joining the University. The previous visit findings were that all staff either held or were working towards this goal at the time. The University report that their registration is checked yearly.

The HSU code of conduct policy is now in place which staff are required to adhere to. Staff reported that they were aware of the new policy and where to find them if they need to. Staff are required to be supportive and demonstrate the behaviours and qualities expected of a primary contact healthcare practitioner.

When speaking with staff they appeared to act in appropriately professional ways and current and past students reported feeling supported and stated their educators were professional and approachable.

Given the finding of the 2023 report and our findings at this visit it provides us with assurance that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions



None reported.

iv. there are sufficient numbers of experienced educators with the capacity to teach, assess and support the delivery of the recognised qualification. Those teaching practical osteopathic skills and theory, or acting as clinical or practice educators, must be registered with the General Osteopathic Council, or with another UK statutory health care regulator if appropriate to the provision of diverse education opportunities.

MET

NOT MET

Findings and evidence to support this

Concerns were raised by the 2023 visiting team regarding the numbers of educators especially in clinical areas which resulted in a condition being imposed around staff to student ratios and numbers of educators.

Since then, the University has increased the number of educators it employs. It stated that 28.1 FTE educators are now employed to teach across the University pre-registration osteopathic courses. 12.3 FTE who teach theory and practical classes are registered osteopaths. 11.2 are clinic tutors and 3.8 have dual roles. This is an increase on the numbers who were employed in 2023.

In discussion with management, we heard that new staff will be recruited to the Bournemouth campus in February 2026 in preparation for the launch in September 2026. The number of educators recruited will depend on the number of applicants which they estimate to be 15 in the first year. The number recruited will be in line with PRSB expectations and will be managed by a central team. Those recruited will be registered osteopaths and employed under the same terms as London-based staff. Furthermore, existing experienced staff from the London campus will be upskilled to deliver both synchronous and asynchronous teaching online in those subjects that lend themselves to delivery in that format. This should ensure that there are sufficient numbers of registered osteopaths available with the right skills and the capacity to support student learning.

The documentary information provided prior to the visit and the discussion with the course leader and senior management, has provided sufficient assurance to say that we feel this standard is met and will continue to be met for the new MSt programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

v. educators either have a teaching qualification, or are working towards this, or have relevant and recent teaching experience.

MET



NOT MET

Findings and evidence to support this

The new HSU staff development policy states that all academic staff will be supported to complete a HESA eligible teaching qualification normally within three years of appointment and after successful completion of a probationary period. This is now the default process for all new staff. The 2023 report found that all staff had, or were working towards, a teaching qualification and the new policy will continue to ensure that this standard is met.

When speaking with staff it was clear that support was given to junior colleagues by their senior colleagues, and they reported feeling supported by the University to develop in their roles.

Given the findings of the 2023 visit, the documentary evidence supplied, and in speaking with staff we feel assured that current staff and new staff recruited to the new teaching site in Bournemouth will either have, or be required to have, a teaching qualification and as such we feel this standard is met.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.



9. Patients

i. patient safety within their teaching clinics, remote clinics, simulated clinics and other interactions is paramount, and that care of patients and the supervision of this, is of an appropriate standard and based on effective shared decision making. **MET** **NOT MET**

Findings and evidence to support this

The visiting team of 2023 found that the University suitably considered patient safety, that student supervision continues to the expected standard outside of the University Clinic. However, they did attach a condition regarding the number educators which has been addressed.

On the current visit we did not have the opportunity to observe clinical interactions as no osteopathic clinic currently exists on the Bournemouth site. However, we did speak with current patients of the chiropractic clinic, current chiropractic and osteopathy students, past chiropractic and osteopathy students, and current osteopathic practice educators at the London campus.

The University currently has a number of educator roles that oversee student to patient interactions in their clinics. There are senior practice educators, practice educators, and assistant practice educators. Role descriptors were supplied which highlighted their role in patient care as a priority. Management stated that all practice educators are required to be registered with the GOsC and are required to comply with the OPS. Practice educators were spoken to and confirmed these priorities. When speaking with current patients of the chiropractic and physiotherapy clinics they stated that they felt safe with the clinical environment and felt the level of supervision was appropriate. Both past and current osteopathy students felt that they received a good level of support in order to keep patients safe.

If students, staff, or patients need to raise a concern it can be raised through a number of mechanisms. There is an online clinic incident reporting form which can be submitted anonymously.

We met with clinic and University management who stated that patient safety is paramount, and this is monitored through monthly clinical governance group meetings where all service team leads are invited.

We were given a tour of the proposed clinic site by clinic management, and we met with clinic staff. The facilities were exemplary, and we were impressed with the professionalism and knowledge of staff and management.

Physical safety measures at the proposed clinic site include: first aiders being available at all times; first aid equipment clearly displayed and easily accessible; and a defibrillator on site.

They have an infection prevention and control measures in place with hand wash facilities, non-porous flooring materials, and clear signage in each room. The proposed clinic facility was in an excellent state of repair.

There are no off-site clinics currently proposed at the Bournemouth site. Management stated that they do wish to start community clinics in the locality but that this would be based on local need. The findings of the 2023 report states that their current off-site clinics are run well and provide safety to patients and the experienced team involved. We feel it is likely that this good practice will be replicated at the Bournemouth site when they develop to the point where off-site clinics are required.

Given that the concerns of the 2023 visit have been addressed, and the findings from this visit would indicate that opening an onsite clinic with appropriately trained clinical supervisors would maintain patient safety, we



are assured that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

The facilities at the proposed new clinic in Bournemouth, as well as professionalism and knowledge of the staff and management, were exemplary.

Areas for development and recommendations

None reported.

Conditions

None reported.

ii. Effective safeguarding policies are developed and implemented to ensure that action is taken when necessary to keep patients from harm, and that staff and students are aware of these and supported in taking action when necessary. **MET**
 NOT MET

Findings and evidence to support this

The visiting team from 2023 found that this standard was met. Since that visit UCO has become a school within HSU and all policies are or have been changed to HSU policies.

We were supplied with the new policies prior to and during the visit and had the opportunity to speak with students, patients at the chiropractic college, and visited the clinic where the osteopathic students will be gaining their clinical experience.

The HSU safeguarding policy contains all the elements you would expect to see in such a policy. It names the safeguarding team with a safeguarding lead and safeguarding officers. Under the new policy there is now a principal safeguarding lead for patients. The policy documents how safeguarding concerns are raised, the process which is followed, and what and who it covers. It states that training is carried out on induction but does not specify if this is student or staff induction or both. On checking with management, staff, and students, it was confirmed that they undertake yearly safeguarding training.

The policy provides examples of safeguarding report forms and states that an annual safeguarding report is produced by the safeguarding team each year, this is presented to the SMG and the board on an annual basis.

The safeguarding policy is displayed clearly in the proposed clinic, staff at the clinic are aware of it and knew what to do in the event of a safeguarding concern being raised. One patient was aware of the policy; this patient was the chair of their patient feedback group. The other patient was not aware. It is usual for patients not to be aware of specific policies but to trust that they are there if needed. Students and staff were all aware of their safeguarding duty, the introduction of the new policy, how to find it and stated that they received annual safeguarding training.

We feel assured that this standard is met and, given that these processes are already being carried out at the proposed clinical site in Bournemouth, this standard will continue to be met in the delivery of the new MOst.



Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

iii. the staff student ratio is sufficient to provide safe and accessible education of an appropriate quality. MET

NOT MET

Findings and evidence to support this

The visiting team of 2023 stated that staff, student, and patient consultation numbers exceeded expectations but that students at times felt vulnerable. They applied a condition to this standard regarding the number of educators available to help and supervise students. Since then, the University has employed more educators.

As stated, we were not able to observe in Clinic. Management are aware of how many educators are required in clinic and technique classes. They assured us that the requisite number of staff would be recruited based on the number of applications they receive in February 2026 to start in September 2026.

Past and present students stated that they felt there were enough educators to ensure they received the standard of supervision necessary to be safe. They felt that their educators were approachable and available for them when they needed and spoke enthusiastically about the levels of support they were given.

Based on student feedback and the increase in educator numbers, we feel that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.



iv. they manage concerns about a student's fitness to practice, or the fitness to practice of a member of staff in accordance with procedures referring appropriately to GOsC. **MET**
 NOT MET

Findings and evidence to support this

The 2023 review found this standard to have been met. Since then, the new University-wide FtP procedures have come into effect. The University provided us with the new HSU FtP policy and procedure and their support to study policy, and we met with management, staff, and students.

The FtP policy states the purpose and scope of the policy, and that the policy is related to both staff and students. It states that professional codes of conduct are used as the reference point in the FtP process to determine if a student's FtP is impaired and the PRSB should be informed of the outcome when appropriate.

The new HSU policies have only been in place since August 2024 so have not run for a full year cycle. However, the policies and processes seem to be robust and have been in place at the University for several years, so staff are familiar with the processes. UCO School of Osteopathy staff and students are aware of the changes and how to find the policies if necessary. They are aware of how to raise concerns if necessary. Feedback mechanisms exist to look for trends or weaknesses within the process by annual reporting.

Given the new policy, that students and staff are aware of the change and how to find the policy, and that the policy has been embedded in the wider University for a number of years, we feel assured that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

v. appropriate fitness to practise policies and fitness to study policies are developed, implemented and monitored to manage situations where the behaviour or health of students poses a risk to the safety of patients or colleagues. **MET**
 NOT MET

Findings and evidence to support this

The visiting team of 2023 found this standard to have been met. However, after the merger in August 2024 the University wide FtP processes came into effect. We were provided with this policy as well as their support to study policy. We also met with staff, students and management. Complaints and concerns about a student's conduct are usually initially investigated under the relevant general policy or procedure. These include the student disciplinary policy, sexual violence and misconduct policy, academic misconduct policy, or support to study policy. The outcomes of these procedures are referred to Stage 3 of the FtP procedures when the outcome is determined to be a major offence, or when the panel considers a non-major offence has implications on FtP.



The Academic Registrar prepares an annual review of student FtP cases across all awards. This is considered by the academic standards and quality committee and academic board, with a view to identifying trends and whether the policy needs updating.

The University state they are committed to ensuring that employees are fit to practice in their relevant profession and meet the professional standards of their professional body. They state that any concerns with FtP are raised with the employee and managed through relevant staff policies and then onto the FtP policy if there is a FtP issue.

Staff were informed of the change and were aware of how to find the new policy. They are aware of their duties in FtP and safeguarding when supervising students and were aware of how to raise concerns under the new policy.

Given the above we feel that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.

vi. the needs of patients outweigh all aspects of teaching and research.

MET

NOT MET

Findings and evidence to support this

The 2023 report found that this standard had been met.

It was reported to us that students do not undertake research on patients.

Patients who currently attend the chiropractic clinic felt that they were treated well and stated that they felt safe and cared for at all times.

When speaking with clinical staff, they took seriously their role in supervision and patient safety and students felt well supervised and safe. The measures in place at the clinic regarding health and safety, first aid and safeguarding all attest to their desire to look after patients.

Given the above we feel that this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.



Areas for development and recommendations

None reported.

Conditions

None reported.

vii. patients are able to access and discuss advice, guidance, psychological support, self-management, exercise, rehabilitation and lifestyle guidance in osteopathic care which takes into account their particular needs and preferences. MET NOT MET

Findings and evidence to support this

The University state that they value and promote a patient centred care model that aligns with biopsychosocial principles, and that this often equates to patients being offered health and wellbeing advice. They further state that where patients declare something that would benefit from onward referral, this is done.

We were unable to speak with any osteopathic patients at the Bournemouth site, since this Clinic is not yet established. However, the review of 2023 found this standard to have been met and when we spoke with current UCO School of Osteopathy students, they stated they did give advice and had access to a digital patient exercise programme that they could use to prescribe exercises. Students at the Bournemouth campus will be afforded access to the same programme.

Overall, we feel that due to the above findings this standard is met and will continue to be met for the new MOst programme in Bournemouth.

Strengths and good practice

None reported.

Areas for development and recommendations

None reported.

Conditions

None reported.



A. Evidence

A.1 Evidence seen as part of the review

1st Place Community Clinic Information.pdf
23 24 Autumn Term Student Feedback.pdf
23 24 Spring Term Student Feedback.pdf
Academic Framework Application Form.docx
5 Top Tips for Mental Wellbeing.pdf
5th January 2024. Course Team Meeting Minutes - Final.pdf
Absence Categories - Guidance.pdf
AC-23-03-05di Access Course Modifications Summary.docx
Accommodation help sheet.pdf
Adding a Timesheet - Daily Rate.pdf
Adding a Timesheet.pdf
Adding Personal Learning.pdf
Adding Sickness or Other Absence - Manager's Guide.pdf
Additional Resources - Technique Video Library.pdf
Advert Template.docx
Annual Review Form (UCO values).docx
Annual Review Form 2023-2024.docx
Annual Summary 2023-2024 Staff Disciplinary Capability.docx
Annual Summary 2023-2024 Staff Grievance Procedure.docx
Appropriate_Policy_Document_UCO_V2_Nov2023_FINAL.pdf
Assistant Practice Educator Role Description.docx
ATR Business Case template.docx
ATR Process.docx
Attendance_Policy_Students_UCO_V8_Jun2023_FINAL.pdf
Audit & Risk Committee ToR V8 Oct2022.pdf
Bank Details form.docx
BCP Area Cycle Routes Map.pdf
Board Nominations Committee ToR V6 Oct2022.pdf
Board of Directors ToR V5 Jun2021.pdf
Booking onto Learning Event.pdf
Capability Policy and Procedure.pdf
Career Break Application Form.docx
Career Break Application Form.pdf
Career Break Policy and Procedure.pdf
Casual ATR Process.docx
Change to Terms Form.docx
Children_Infants_UCO_Premises_Policy_UCO_V2_Mar2023_FINAL.pdf



Clinic Emergency Patient Referral Form V3 Jul2022 FINAL_2023.pdf
Closing Sickness & Adding Other Absence - Employee's guide.pdf
Code of Conduct for Staff.pdf
Combined NSS 2024 Analysis Annual Report.docx
Communication on VLE Updates Changes.pdf
Community Groups Activity 1.pdf
Community Groups Activity 2.pdf
Community Groups Activity 3.pdf
Community Groups Activity 4.pdf
Community Groups Activity 5.pdf
Community Groups Activity 6.pdf
Community Groups Activity 7.pdf
Community Groups Activity 8.pdf
Complaints_Policy_Procedures_Students_UCO_V8_Nov2021_FINAL.pdf
Conflict of Interest - Register of Interests Form.docx
Conflict of Interest Policy and Procedure.pdf
Conversion Table - Minutes to Decimal Hours.pdf
Corporate Social Responsibility Policy.pdf
Course Leader Talk Autumn Term.pdf
Course Leader update on responding to feedback.pdf
Course_Fee_Policy_2023-24 (1).pdf
Criminal record statement form.docx
Cycle to Work Scheme.pdf
Data_Protection_Policy_UCO_V3_Oct2022.pdf
DBS - Application Flow Chart.pdf
DBS - Recruitment of Ex-Offenders.pdf
DBS application form guidance for applicants (1).doc
DBS Policy and Procedure.pdf
Death in Service - Guide.pdf
Destressing Daily Planner.pdf
Digital Learning Suite Plan.pptx
Direct Debit Form.pdf
Disability Confident - Guidance Notes for Managers.pdf
Disability Confident - Guide for Line Managers.pdf
Disability Policy.pdf
DPIA_Policy_UCO_V3_May2021_FINAL.pdf
ELG Terms of Reference.pdf
EMPLOYEE SELF SERVICE Guide.pdf
Engaging Extended Workforce (IR35 and Employment Status Guidance).pdf
Equality, Diversity, Inclusion and Belonging Policy.pdf
ESS attach receipt to claim.pdf



ESS E-signature guidelines.pdf
Family Friendly Rights Policy.pdf
Feedback Student Q&A session Dec23 Jan24.pdf
Feedback Student Q&A session Nov23.pdf
FH Unit Blended Learning Resources.png
FileNoteMOst2026.docx
Finance & Estates Committee ToR V6 Mar2021.pdf
Fitness_Practise_Policy_UCO_V6_March2022_FINAL.pdf
Flexible Working Policy and Procedure.pdf
Flexible Working Request Form.docx
Framework For Organisational Change.pdf
Freedom_Information_Policy_UCO_V4_Nov2023_FINAL.pdf
FT2 FH PMP Written Exam_Redacted.pdf
FT3 Prof CDP Essay_Redacted.pdf
Fundraising Committee ToR V6 Nov2021.pdf
Fwd_ Appointment time and Directions - DO NOT DELETE __UPDATED__.msg
Gender Policy.pdf
Getting Help in a Crisis Factsheet.pdf
Getting Pensions Advice.pdf
GOsC RQ Annual Report 2024 Evidence List.xlsx
gosc-student-disability-and-health-student-guidance (5).pdf
Grievance Policy & Procedure.pdf
Health_Policy_Students_UCO_V3_July2022_FINAL.pdf
Help@Hand Employee Guide.pdf
Help@Hand Employee Poster.pdf
Help@Hand Employee Support.pdf
Help@Hand Presentation.pdf
Help@Hand Webinar Recording.mp4
Help-at-Hand - Savings and Discounts.pdf
HESA Staff Collection Notice 2024-25.pdf
Holiday & TOIL booking and calculation.pdf
Honorary Visiting Positions Procedure.pdf
Honorary Visiting Positions Request Form.docx
Hospitality and Gifts Policy (002).pdf
How to Increase Energy and Productivity in Your Team - BUPA.pdf
How to Manage Stress at Work.pdf
How to Support Mental Health at Work.pdf
How to Support Staff who are Experiencing Mental Health Problems - Mind.pdf
How to Support Your Team with Social Anxiety - BUPA.pdf
How to write SMART Goals.pdf
How-to-exercise.pdf



HSU - Simulation Solutions Proposal - 01.04.25 (1).pdf
HSU Academic Appeals Policy and Procedure V3.2 2024.25 onwards.pdf
HSU Academic Board Committees Membership and ToR v7.0 Aug2024.pdf
HSU Academic Framework FAQs.pdf
HSU Academic Framework Mapping Flowchart.pdf
HSU Academic Framework Matrix for Assoc Professor.pdf
HSU Academic Framework Matrix for Lecturer.pdf
HSU Academic Framework Matrix for Professor.pdf
HSU Academic Framework Matrix for Senior Lecturer.pdf
HSU Academic Framework matrix v1.0 2022.xlsx
HSU ALS-Assessment-Policy-and-Procedure_v2.2 Sep2024.pdf
HSU Assessment Board Policy v2.4 Aug2024.pdf
HSU Assessment-Feedback-Policy-v1.4.pdf
HSU Assessment-Feedback-Policy-v1.4.pdf
HSU Audit & Risk Assurance Terms of Reference.pdf
HSU Clarifications GOsC Annual Report Baseline- 2023-24 COMPLETED.docx
HSU Code of Conduct for Staff.pdf
HSU Course and Unit Monitoring and PR Policy v2.3 Sep2024.pdf
HSU Course Approval Policy and Procedure v3.0.pdf
HSU Course Design Framework (Combined) v2.0 Sep2024.pdf
HSU Course Unit Modification Policy and Procedure v3.2 Sep2024.pdf
HSU education_strategy-final_march2019.pdf
HSU Equality, Diversity, Inclusion and Belonging Policy v3 Jun2023.pdf
HSU Exceptional Personal Circumstances Policy v3.2 Aug2024.pdf
HSU Executive Leadership Group Terms of Reference.pdf
HSU External Examiner Annual Report Form Sep2023.docx
HSU External Examining Policy and Procedure v3.0 Sep2023.pdf
HSU Fitness-to-Practise-Policy-and-Procedures-v3.2 Aug2024.pdf
HSU Flexible Working Policy and Procedure.pdf
HSU Harassment-Policy-and-Procedure-v2.2 Aug2024.pdf
HSU IT Acceptable Use Policy.pdf
HSU London Annual Summary Patient Complaints V2 Nov 2024.docx
HSU Management and Academic Governance Structure 2024.pdf
HSU Marking-and-Moderation-Policy-and-Procedure-v1.6 Aug2024.pdf
HSU online-safeguarding-v20-1.pdf
HSU Recruitment-Selection-and-Admissions-Policy-Taught-Courses-v5.1 Aug2024.pdf
HSU religion-and-belief-policy-v1-1.pdf
HSU Research Ethics Policy v2.1.pdf
HSU Staff Development Policy and Procedure v4 Jan2024.pdf
HSU Staff Induction and Probation Policy and Procedures v2 Sep2023.pdf
HSU Staff Recruitment Policy and Procedure.pdf



HSU Student Recruitment Committees ToR v2.2 Sep2024.pdf
HSU Student-Complaints-Policy-v3.2 Sep2024.pdf
HSU Student-Disciplinary-Procedures_V2.2.pdf
HSU Student-Engagement-Feedback-Policy-v1.2.pdf
HSU Study-Break-Procedure-v2.4 Aug2024.pdf
HSU Support-to-Study-Policy-v1.1 Sep2024.pdf
HSU whistleblowing-policy-v31-may-2022.pdf
HSU Wider Management Group Terms of Reference Oct2024.pdf
HSU-Clinic-Handbook-Osteo-Students-V6_Aug2024.pdf
HSU-Clinic-Osteopathy-Faculty-Handbook-V6-Aug2024.pdf
HSU-Prevent-Policy v2.2.pdf
HSU-safeguarding-policy-v21-1.pdf
HUS Sexual-Misconduct-Policy-v2.2.pdf
Induction checklist for Agency Worker, IR35, External, Volunteer.docx
Induction Process & Template.docx
Induction Programme Schedule 2023 v7.pdf
Induction Schedule_M.OstFT_18September2023.pdf
Information Gov & Security Steering Grp ToR V11 Sep2023.pdf
Interview Questions Guidance.pdf
ITGovPolicy-Acceptable-Use-Policy-UCO_V5_Jan2024_FINAL.pdf
ITGovPolicy-Password-Policy-UCO_V1_Jan2024_FINAL.pdf
iTrent ATR Guide for Recruiting Managers.docx
Job Description and Specification Template.docx
Laser Learning Awards Reapproval Confirmation Letter UCO Jun22.doc
Leaver checklist for Agency Worker, IR35, External, Volunteer.docx
Leaver checklist for Line Managers.docx
Lecturer Role Description.docx
Line Managers Viewing Holiday and TOIL Balances.pdf
Little by Little Journal.pdf
Live Your Best Working Life Poster.pdf
M.Ost FT email.docx
Managing Stress and Building Resilience in the Workplace.pdf
Managing Your Menopause for Staff.pdf
Market Supplement Policy.pdf
Menopause Awareness Manager Information Pack - Jan 2024.pdf
Menopause Guidelines.pdf
Mental Health - Useful Links.pdf
Mental Health First Aiders - Bournemouth Campus.pdf
Mental Health First Aiders - London Campus.pdf
mental-health-at-work-commitment-guidance-for-the-higher-education-sector.pdf
MHUK-My-Wellbeing-plan.pdf



Mind - Accept Yourself.pdf
Mind - I will tackle MH Stigma by.pdf
Mind - Take care of your wellbeing.pdf
Mindful Employer - Line Managers Resource.pdf
Mindful Walking Activity Sheet.pdf
Mind-Wellness Action Plan.pdf
MOST External Benchmark Mapping Feb 2023.xlsx
MOST FT1 BAO Group Presentation Feedback 2023-2024_Redacted.pdf
MOST FT2 FH OSCPE Feedback 2023-2024_Redacted.pdf
MOST PT4 PC5 CaseStudy Feedback 2023-2024_Redacted.pdf
MOSTFT Additional Course Costs V5 Sep 2022.pdf
MOSTFT Induction Schedule 2023-2024.docx
MOSTFT_CIF_2023-2024_V1_Jun2023_FINAL.pdf
MOSTFT_CourseHandbook_2023-2024_Yr1_V1_Jun2023_FINAL.pdf
MOSTFT_CourseHandbook_2023-2024_Yr2-Yr4_V1_Aug2023.pdf
MOSTFTYr1_UIF_BAO1_Level 4_2023-2024_V1_Jun2023_FINAL.pdf
MOSTFTYr1_UIF_FH1_Level 4_2023-2024_V1_Jun2023_FINAL.pdf
MOSTFTYr1_UIF_PC1_Level 4_2023-2024_V1_Jun2023_FINAL.pdf
MOSTFTYr1_UIF_RAE1_Level 4_2023-2024_V1_Jun2023_FINAL.pdf
MOSTFTYr2_UIF_BAO2_2023-2024_V6_Sep2023.pdf
MOSTFTYr2_UIF_FH2_2023-2024_V3_Aug2022.pdf
MOSTFTYr2_UIF_P2_2023-2024_V3_Aug2022.pdf
MOSTFTYr2_UIF_PC2_2023-2024_V8_Sep2023.pdf
MOSTFTYr2_UIF_RAE2_2023-2024_V4_Sep2019.pdf
MOSTFTYr3_UIF_BAO3_2023-2024_V4_Sep2021.pdf
MOSTFTYr3_UIF_FH3_2023-2024_V3_Aug2022.pdf
MOSTFTYr3_UIF_P3_2023-2024_V4_Jun2023.pdf
MOSTFTYr3_UIF_PC3_2023-2024_V6_Sep2023.pdf
MOSTFTYr3_UIF_RAE3_2023-2024_V4_Aug2022.pdf
MOSTFTYr4_UIF_BAO4_2023-2024_V5_Aug2022.pdf
MOSTFTYr4_UIF_P4_2023-2024_V2_Aug2022.pdf
MOSTFTYr4_UIF_P4_2023-2024_V3_Oct2023.pdf
MOSTFTYr4_UIF_RAE4_2023-2024_V2_Sep2019.pdf
MOSTPT Induction Schedule 2023-2024.doc
MOSTPT_CIF_2023-2024_V1_Jun2023_FINAL.pdf
MOSTPT_Course_Handbook_2023-2024_Yr2-Yr5_V1_Aug2023.pdf
MOSTPT_CourseHandbook_2023-2024_Yr1_V1_Jun2023_FINAL.pdf
MOSTPTYr1_UIF_BAO1_Level 4_2023-2024_V1_Jun2023_FINAL.pdf
MOSTPTYr1_UIF_FH1_Level 4_2023-2024_V1_Jun2023_FINAL.pdf
MOSTPTYr1_UIF_PC1_Level 4_2023-2024_V1_Jun2023_FINAL.pdf
MOSTPTYr1_UIF_RAE1_Level 4_2023-2024_V1_Jun2023_FINAL.pdf



MOstPTYr2_UIF_BAO2_2023-2024_V5_Sep2023.pdf
MOstPTYr2_UIF_FH2_L4_2023-2024_V2_Aug2022.pdf
MOstPTYr2_UIF_FH3_L5_2023-2024_V3_Aug2022.pdf
MOstPTYr2_UIF_P1_2023-2024_V3_Aug2022.pdf
MOstPTYr2_UIF_P1_2023-2024_V4_Oct2023.pdf
MOstPTYr2_UIF_PC2_2023-2024_V7_Sep2023.pdf
MOstPTYr2_UIF_RAE2_2023-2024_V4_Sep2019.pdf
MOstPTYr3_UIF_BAO3_2023-2024_V7_Sep2023.pdf
MOstPTYr3_UIF_FH4_2023-2024_V3_Aug2022.pdf
MOstPTYr3_UIF_P2_L6_2023-2024_V5_Oct2023.pdf
MOstPTYr3_UIF_PC3_L5_2023-2024_V7_Sep2023.pdf
MOstPTYr3_UIF_PC4_L6_2023-2024_V6_Jun2022.pdf
MOstPTYr3_UIF_RAE3_2023-2024_V4_Aug2022.pdf
MOstPTYr4_UIF_BAO4_2023-2024_V3_Sep2021.pdf
MOstPTYr4_UIF_FH5_2023-2024_V2_Aug2022.pdf
MOstPTYr4_UIF_P3_L7_2023-2024_V2_Aug2022.pdf
MOstPTYr4_UIF_PC5_2023-2024_V3_Sep2023.pdf
MOstPTYr4_UIF_RAE4_2023-2024_V2_Sept2019.pdf
MOstPTYr5_UIF_BAO5_2023-2024_V5_Sep2023.pdf
MOstPTYr5_UIF_P4_2023_2024_V2_Aug2022.pdf
MOstPTYr5_UIF_RAE5_2023-2024_V2_Sep2019.pdf
Movement Tips - Mental Health Foundation.pdf
MSc PR1 RAE CLR Feedback 2023-2024_Redacted.pdf
MSc PR2 RAE Presentation Feedback 2023-2024_Redacted.pdf
MScPR 4 Week Induction Schedule 2022-2023.docx
MScPR_CIF_2023-2024_V7_Jul2023_FINAL.pdf
MScPR_CourseHandbook_2023-2024_V1_FINAL.pdf
MScPR_UIF_Yr1_BAO1_2023-2024_V6_Jul2023_FINAL.pdf
MScPR_UIF_Yr1_FH1_2023-2024_V4_Jul2023_FINAL.pdf
MScPR_UIF_Yr1_RAE1_2023-2024_V2_Jul2023_FINAL.pdf
MScPR_UIF_Yr2_BAO2_2023-2024_V3_FINAL.pdf
MScPR_UIF_Yr2_RAE2_2023-2024_V1_FINAL.pdf
MSPR External Benchmark Mapping Feb 2023.xlsx
My Whole Self Manager's Toolkit.pdf
Neurodiversity in the Workplace.pdf
New Starter Appointment Details.docx
NSS Information Sessions.pdf
Online Staff Handbook Screenshot of Contents.pdf
Online Student Handbook Downloadable Student Policies and Procedures Summary.pdf
Ordering your scrubs.pdf
Orthopaedic_Neil Langridge_RESEARCH.pdf



Osteopathic_Technique_Practice_Policy_UCO_V7_Jun2023_FINAL.pdf
Overtime and TOIL Policy.pdf
Patient info - How to find us.pdf
Pay Band Ranges - April 2024.pdf
Pensions - Guide to Schemes (from 1 Apr 2022).pdf
People Manager Claims Guide.pdf
PEOPLE MANAGER Guide.pdf
people managers'guide to mental health at work.pdf
Personal Professional Practice Template v1.docx
Personal Relationships at Work Policy.pdf
Personal Research Plan template v1.docx
Personal_Data_Breach_Management_Policy_UCO_V3_Nov2023_FINAL.pdf
Postdoctoral Research Fellow JD.docx
Practice Educator Role Description.docx
Prevention of Sexual Harrassment Policy and Procedure.pdf
Privacy_Notice_Patients_UCO_V2_Nov2020_FINAL.pdf
Privacy_Notice_Staff_Board_Members_FINAL_V5_UCO_Jan 2023.pdf
Privacy_Notice_Students_Applicants_FINAL_UCO_V4_Sep2020 (1).pdf
Privacy_Notice_Students_Applicants_FINAL_UCO_V4_Sep2020.pdf
Privacy_Notice_Supporters_UCO_V2_Sep2020.pdf
Privacy_Notice_UCO_Learning_Exchange_V1_Dec2023_FINAL.pdf
Probationary Review Form.docx
PT3 PC OSCPE_Redacted.pdf
PT4 BAO Presentations_Redacted.pdf
Qualification Agreement Policy.pdf
Qualification Request Form.docx
RAE Unit Blended Learning Resources.png
Recognising signs of Stress.pdf
Recording_Teaching_Policy_UCO_V3_Jun2023_FINAL.pdf
Records_Information_Management_Policy_UCO_V2_Nov2022_FINAL.pdf
Records_Information_Retention_Schedule_UCO_V2_Nov2022_FINAL.xlsx
Recruitment Guide for MANAGERS on iTrent.pdf
Recruitment Policy and Procedure.pdf
Redaction_Policy_Procedure_V2_Apr2023_FINAL.pdf
Redundancy Policy and Procedure.pdf
Religion and Belief Policy.pdf
Relocation Policy.pdf
Remuneration Committee ToR V1 Oct2022.pdf
Research Assistant JD.docx
Return to Work Interview Form.docx
RQ Initial Presentation.pptx



Safeguarding at UCO Notification 01.pdf
Safeguarding at UCO Notification 02.pdf
Safeguarding Reporting Form.pdf
Salary and Salary Bandings Policy.pdf
Sickness Absence Policy and Procedure.pdf
Small Actions To Make Big Changes.pdf
SOCIAL Series Re More PC Technique Opportunities.pdf
SOCIALs- Assessments, Feedback, and Q&As.pdf
SOCIALs Timetable 2023-2024.xlsx
SOCIALs-Assessments Q&A.pdf
SOCIALs-Student Led Practice Sessions.pdf
Staff Benefits 2025 003.pdf
Staff Development Policy.pdf
Staff Disciplinary Policy and Procedure.pdf
Staff Induction and Probation Policy and Procedures.pdf
Staff Mental Health Policy.pdf
Stress-Bucket-Template.pdf
Student Minds_Transitioning to University.pdf
Student Recruitment Steering Group 2.12.24 up to date.docx
Student Reference Policy.pdf
Student Services Support.pdf
Student Staff Death, Serious Injury or Serious Illness Policy.pdf
Student_TCs_UCO_V4_May2022_FINAL - 2022 Intake Onwards.pdf
The Organisation Chart on ESS.pdf
The-SMS-Branded-Stress-Guide.pdf
Timetable_M.Ost FT_Year 1_Term 1.docx
Tips for Managing Stress - BUPA.pdf
TOIL Accrued Form.docx
Travel Request Form for Staff.docx
UCO 2024-25 M0stFT_PC1_Reflective_Essay_Assessment_Brief V1.0 FINAL VC.pdf
UCO AC-23-01-11a ASQ Annual Report 2022-2023 FINAL V2.docx
UCO Academic_Appeals_Policy_UCO_V9_Jul2022_FINAL.pdf
UCO Admissions_Policy_Procedure_V7_Dec2022_UCO_FINAL.pdf
UCO ALL@UCO ToR V1 Jun2023.pdf
UCO Annual Summary Criminal Convictions 2023-4.docx
UCO Annual Summary of Safeguarding Cases 2023-2024.docx
UCO Annual Summary Student Academic Appeals 2023-24.docx
UCO Annual Summary Student Academic Discipline 2023-4.doc
UCO Annual Summary Student Complaints 2023-24.doc
UCO Annual Summary Student Fitness Practise 2023-24.doc
UCO Annual Summary Student Misconduct 2023-24.doc



UCO Annual Summary Whistleblowing_2023_2024.doc
UCO Appraisal_PDR_Policy_UCO_V5_Jan2019_FINAL.pdf
UCO AQF04_2023-2024_Approval_Mods_UCO_V9_at_Jun2023.pdf
UCO AQF05_2023-2024_EMR_UCO_V9_Jun2023.pdf
UCO AQF06_2023-2024_PR_UCO_V9_Jun2023.pdf
UCO AQF07_2023-2024_AcademicRegs_UCO_V10_Jun2023_FINAL.pdf
UCO AQF09_2023-2024_LearnerSupport_UCO_V9_Jun2023.pdf
UCO AQF10_2023-2024_Student_Voice_UCO_V9_Jun2023.pdf
UCO AQF11_2023-2024_External_Examining_UCO_V9_Jun2023.pdf
UCO ASQ Annual Report 2023-2024 DRAFT.docx
UCO Attendance_Policy_Students_UCO_V8_Jun2023_FINAL.pdf
UCO Boards of Examiners ToR V5 Apr2021 (1).pdf
UCO Capability_Policy_Procedure.pdf
UCO Clinic Incident Report Form.docx
UCO Clinic_Consent_Intimate_Area_Form_Feb_2023.pdf
UCO Clinic-Monitoring-Data-2023-2024.xlsx
UCO Code_Conduct_Policy_Staff_UCO_May2018_FINAL.pdf
UCO Committee Structure Diagram 2023-2024.pptx
UCO Community Groups ToR V1 Feb 2022.pdf
UCO Complaints_Policy_Procedures_Students_UCO_V8_Nov2021_FINAL.pdf
UCO Conduct_Disciplinary_Policy_Students_UCO_May2018_FINAL.pdf
UCO Consent_Guidance_V4_Mar2023_FINAL.pdf
UCO Core_Doc_Management_Development_Review_Policy_UCO_V1_Jun2022.pdf
UCO Course Leader Role Description.doc
UCO Course Modification Form V5 Jul2022.docx
UCO Course Team ToR V8 Nov2023.pdf
UCO Critical Incident Report Form.docx
UCO Dignity_UCO_Policy_UCO_V4_Jan2021_FINAL.pdf
UCO Disability_Policy_Students_UCO_V4_Jun2019_FINAL.pdf
UCO Disciplinary_Policy_Procedure for Staff.pdf
UCO Disciplinary_Policy_Procedure V1 Nov2023.pdf
UCO Disciplinary_Policy_Procedure.pdf
UCO EEAR Form 2023-2024 V8 Jul2023.docx
UCO Enhancement of TLA Sub-Committee ToR V3 Nov2023.pdf
UCO Equality_Diversity_Inclusivity_Policy_UCO_V3_Feb2021_FINAL.pdf
UCO Equality_Impact_Assessment_Guidance_UCO_V1_Dec2017_FINAL.pdf
UCO Family_Leave_Policy_Procedure.pdf
UCO Fitness_Practise_Policy_UCO_V6_March2022_FINAL.pdf
UCO Flexible_Working_Request_Policy_Procedure_UCO_V1_Dec2017_FINAL.pdf
UCO GOsC RQ Visit Conditions Action Plan Monitoring Mar2024 FINAL.docx
UCO Grievance_Procedure.pdf



UCO Health_Policy_Students_UCO_V3_July2022_FINAL.pdf
UCO Inclusive Curriculum Training Day Agenda.pdf
UCO Inclusive Curriculum Training Presentation Sep2023.pdf
UCO Infection_Control_Policy_UCO_V6_Feb2023_FINAL.pdf
UCO Infection_Control_Policy_UCO_V6_Feb2023_FINAL.pdf
UCO Managed_Support_Plan_V3_Jul2022_FINAL.pdf
UCO Managing_Health_Absence_Policy.pdf
UCO MOst FT and PT Annual Report 2023-2024.docx
UCO MOst FT-PT EEAR 2023-2024 BAO PC Units DB Report.pdf
UCO MOst FT-PT EEAR 2023-2024 BAO PC Units PG Response.docx
UCO MOst FT-PT EEAR 2023-2024 FH Prof Units CC Report.pdf
UCO MOst FT-PT EEAR 2023-2024 FH Prof Units PG Response.docx
UCO MOst FT-PT EEAR 2023-2024 RAE Units EG Report.pdf
UCO MOst FT-PT EEAR 2023-2024 RAE Units EG Response.docx
UCO MOst PT Induction Presentation.pdf
UCO MOst PT Induction Schedule.pdf
UCO MOstFTYr1_UIF_BAO1_Level 4_2023-2024_V1_Jun2023_FINAL.pdf
UCO MScPR Annual Report 2023 2024.docx
UCO MScPR EEAR 2023-2024 MT Report.pdf
UCO MScPR EEAR 2023-2024 MT Response.docx
UCO New Course AMR Form V4 Aug 2023.docx
UCO NSS Data Results 2024 vs 2023 vs Benchmarks.xlsx
UCO Occupational Health Committee ToR V11 Oct2023.pdf
UCO Online Student Handbook Screenshot.pdf
UCO Organisational Structure 2023-2024.pptx
UCO Osteopathic_Technique_Practice_Policy_UCO_V7_Jun2023_FINAL.pdf
UCO Patient_Complaint_Policy_GeneralClinic_UCO_Mar_2021_FW_Final (3).pdf
UCO People and Culture Committee ToR V1 Oct2023 FINAL.pdf
UCO Policy & Regulations Group ToR V13 Nov2023.pdf
UCO PRG Report to AC & SMT May2024.docx
UCO Public & Patient Involvement Group ToR V2 Apr2023.pdf
UCO Public_Interest_Disclosure_Whistleblowing_Policy_UCO_V7_October2022_FINAL.pdf
UCO Recruitment_Selection_Policy_Procedure_Staff_UCO_V3_Aug2017_FINAL.pdf
UCO Research Ethics Committee ToR V5 Dec2019.pdf
UCO Risk_Management_Policy_UCO_V6_May2021_FINAL.pdf
UCO RPL_Policy_MOstPT_RPL_Handbook_UCO_V7_Jan2024_FINAL.pdf
UCO RPL_Policy_UCO_V7_Mar2023_FINAL.pdf
UCO RQ Visit Condition Responses March 2024.docx
UCO Safeguarding_Policy_UCO_V9_Nov2021_FINAL.pdf
UCO Senior Management Team ToR V9 Nov 2023.pdf
UCO Senior Practice Educator Role Description.docx



UCO SOCIAL Beyond UCO Career Day Nov2023.pdf
UCO Social_Media_Policy_UCO_V4_May2018_FINAL.pdf
UCO Special_Circumstances_Policy_UCO_V6_Mar2023_FINAL.pdf
UCO SSLCG Minutes Full-Time of 14th May 2024 DRAFT.docx
UCO SSLCG Minutes Part-Time of 11 May 2024 DRAFT.docx
UCO Staff Conference Agenda 2022.docx
UCO Staff Conference Agenda 2022-2023.pdf
UCO Staff Conference Agenda 2023-2024.docx
UCO Staff_Induction_Procedure_UCO_V2_Aug2017_FINAL.pdf
UCO Strategic Plan 2018-2023 FINAL.pdf
UCO Student Communication Plan.pdf
UCO Student Rep Handbook V9 Aug2023.pdf
UCO Student Rep Role Description V1 April 2021.doc
UCO Student Staff Liaison Consultation Groups ToR V14 Oct2023.pdf
UCO Suspension_Studies_Withdrawal_Policy_UCO_V5_Nov2020_FINAL.pdf
UCO Timetable_Adjustments_Policy_UCO_V4_September2022_FINAL.pdf
UCO ToR Academic Council V10 Nov 2023.pdf
UCO ToR Access Student Success Committee V4 Dec2022.pdf
UCO ToR Course Recruitment Groups V5 Mar2023.pdf
UCO ToR Engagement Monitoring Group_V8.0_Oct2023.pdf
UCO_General_Clinic_Patient_Information_Sheet_2023-2024.pdf
UCO_TLA_Strategy_2023-2025_V1_Mar2023_FINAL (1).pdf
UCOSO Annual Summary Clinic Incidents 2023-2024.docx
Unit Leader Role Description.docx
Unlock your Happy.pdf
Unum support and benefits.pdf
USO AQF12_2023-2024_Boards_Examiners_UCO_V9_Jun2023.pdf
Vice-Chancellors Group ToR V5 Mar2021.pdf
Virtual Appreciation Wall.url
VLE - New Topics Schedule Guidance - UCO FH Learning Objectives FT Level 5.docx
VLE Topics Format.png
VLE Weekly Format.png
VLE-New Topics Format 1.pdf
VLE-New Topics Format 2.pdf
VLE-New Weekly Format.pdf
Volunteer Policy & Procedure.pdf
Weekly Schedule.url
Whistleblowing Policy v4.0.pdf
Work Experience Policy and Procedure.pdf
Work Through Your Worries - BUPA.pdf

