Visitors' report

Name of education provider	Academy for Healthcare Science
Programme name	Certificate of Attainment
Mode of delivery	Full time
Relevant part of HPC Register	Clinical scientist
Date of visit	24 – 25 May 2012

Contents

Executive summary

The Health Professions Council (HPC) approve educational programmes in the UK which health professionals must complete before they can apply to be registered with us. The HPC is a health regulator and our main aim is to protect the public. The HPC currently regulates 15 professions. All of these professions have at least one professional title which is protected by law. This means that anyone using the title 'Clinical scientist' must be registered with us. The HPC keep a register of health professionals who meet our standards for their training, professional skills, behaviour and health.

The visitors' report which follows outlines the recommended outcome made by the visitors on the approval of the programme. The education provider has until 23 July 2012 to provide observations on this report. This is independent of meeting any conditions. The report and any observations received will be considered by the Education and Training Committee (Committee) on 23 August 2012. At this meeting, the Committee will accept the visitors' recommended outcome, including the conditions. If necessary, the Committee may decide to vary the conditions.

The education provider is due to redraft and resubmit documentary evidence in response to the conditions outlined in this report by 2 August 2012. The visitors will consider this response and make a separate recommendation to the Committee on the approval of the programme. It is anticipated that this recommendation will be made to the Committee on 13 September 2012.

Introduction

The HPC visited the programme at the education provider as it was a new programme which was seeking HPC approval for the first time. This visit assessed the programme against the standards of education and training (SETs) and considered whether those who complete the programme meet the standards of proficiency (SOPs) for their part of the Register.

This visit was an HPC only visit. The education provider did not validate or review the programmes at the visit and the professional body did not consider their accreditation of the programme. The education provider supplied an independent chair and secretary for the visit. The visit also considered a Certificate for Equivalence. A separate visitor report exists for this programme.

The Academy for Healthcare Science (AHCS) will award the Certificate of Attainment which they are seeking HPC approval for as a qualification which leads to eligibility to apply for registration and inclusion on the Register. The HPC therefore regard the AHCS as an education provider.

The AHCS will award the Certificate of Attainment to an individual who has successfully completed the Scientific Training Programme (STP).

Figure 1: Illustration of the organisations involved in the delivery and assessment of the Certificate of Attainment
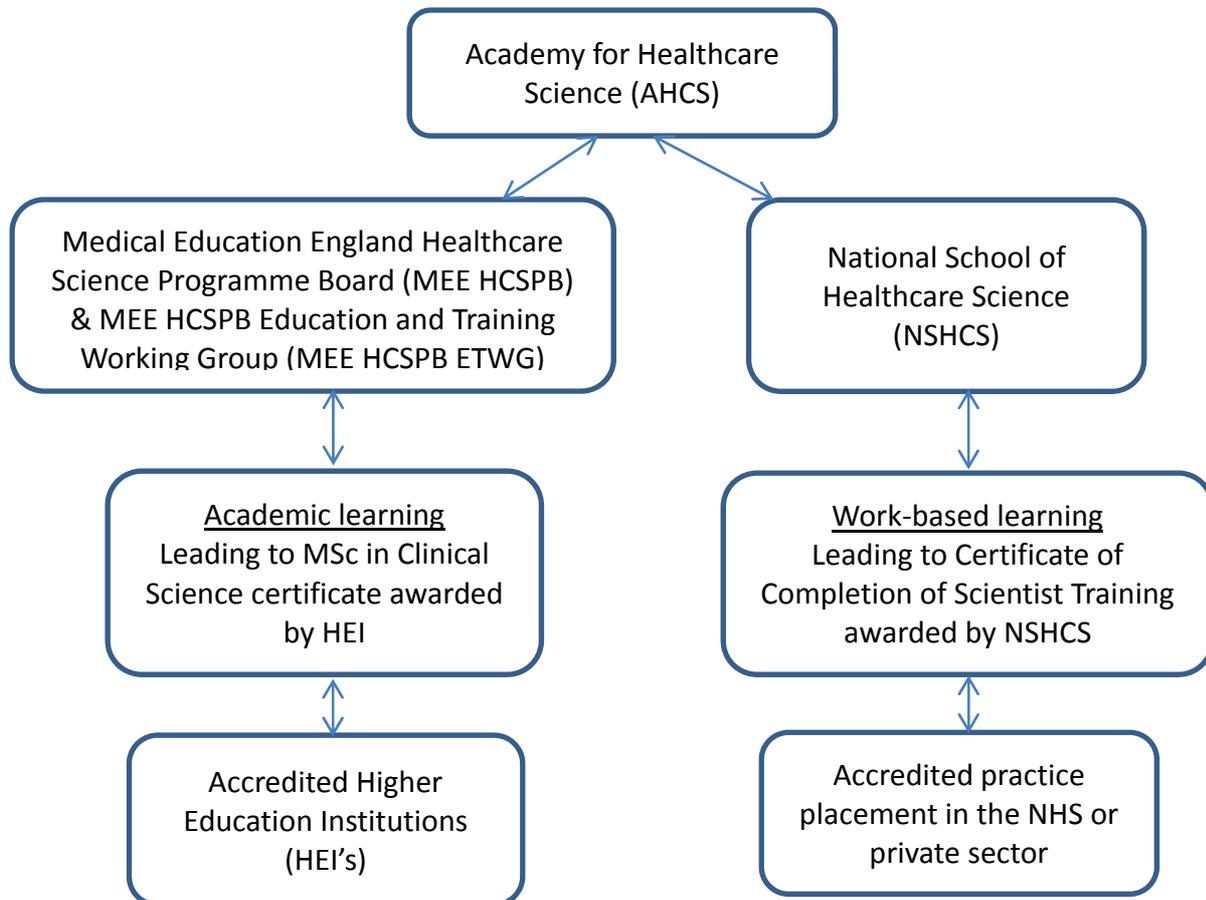
The STP has been developed as part of the Modernising Scientific Careers: The UK way forward policy and comprises of an academic award (MSc in Clinical Science) with a period of work-based learning. The academic element of the STP is quality assured through the MSc accreditation process undertaken by Department of Health MSC programme team, with advice given by the Medical Education England Healthcare Science Programme Board (MEE HCSPB) and its Training and Working Group (MEE HCSPB ETWG). For the purposes of this report the groups involved with the accreditation of the academic element of the programme will collectively be called the MSC Accreditation Team. The work-based learning element of the STP is quality assured by the accreditation process undertaken by the National School for Healthcare Science (NSHCS).

At the point of the visit, the STP and associated processes and procedures had been rolled out within England only.

The AHCS have mapped the learning outcomes and competencies of the STP against the HPC SOPs and the assessment process is quality assured through the accreditation processes undertaken by the MSC Accreditation Team and NSHCS for the academic learning and work-based learning elements respectively.

The role of the AHCS is to work with the MSC Accreditation Team and NSHCS to bring together the academic and work-based learning elements of the STP and award the Certificate of Attainment. Accordingly, the AHCS have expressed confidence that anyone receiving the Certificate of Attainment will have demonstrated an ability to meet the SOPs for the profession.

The approval process for the approval of the Certificate of Attainment was formed of two stages. The first stage of the approval process allowed HPC visitors to review the documentation related to the learning outcomes and competencies of the STP submitted by the AHCS. Visitors from each of the 11 modalities reviewed the competencies to ensure that they are linked to Clinical scientist SOPs in ways relevant to the modality. For this first stage, HPC visitors did not attend the AHCS offices. The outcomes of the stage 1 assessment are included as Appendix 1of this report.

Stage 1 reviewed documentation relating to the learning outcomes, indicative content and competences of the academic and work-based learning elements of the STP.

The second stage of the approval process took the form of a visit to meet with the stakeholders involved with the delivery of the STP and Certificate of Attainment. This visit reviewed how the standards of education and training (SETs) are met by the programme.

Visit details

Name of HPC visitors and profession	Roland Fleck (Cellular scientist) Andrew Philips (Clinical scientist) Robert Munro (Biomedical scientist)
HPC executive officer(s) (in attendance)	Tracey Samuel-Smith
HPC observer	Niall Lennon
Proposed student numbers	300
Proposed start date of programme approval	1 October 2012
Chair	Day 1 - Pat Oakley (Kings College London) Day 2 - Graham Beastall (Unaffiliated)
Secretary	Helen White (Academy for Healthcare Science)

Sources of evidence

Prior to the visit the HPC reviewed the documentation detailed below, sent by the education provider:

	Yes	No	N/A
Programme specification	☒	☐	☐
Descriptions of the modules	☒	☐	☐
Mapping document providing evidence of how the education provider has met the SETs	☒	☐	☐
Mapping document providing evidence of how the education provider has met the SOPs	☒	☐	☐
Practice placement handbook	☒	☐	☐
Student handbook	☒	☐	☐
Curriculum vitae for relevant staff	☐	☒	☐
External examiners' reports from the last two years	☐	☐	☒
Admissions documentation	☒	☐	☐
Higher Education Institution approval and monitoring processes	☒	☐	☐
Work-based learning approval and monitoring processes	☒	☐	☐
Good Scientific Practice	☒	☐	☐

The HPC did not review curriculum vitae for any relevant staff prior to the visit as the education provider did not submit it.

The HPC did not review external examiners' reports from the last two years prior to the visit as there is currently no external examiner as the programme is new.

During the visit the HPC saw the following groups or facilities:

	Yes	No	N/A
Senior managers of the education provider with responsibility for resources for the programme	☒	☐	☐
Programme team	☒	☐	☐
Placements providers and educators/mentors	☒	☐	☐
Students	☒	☐	☐
Learning resources	☐	☐	☒
Specialist teaching accommodation (eg specialist laboratories and teaching rooms)	☐	☐	☒

The HPC did not review learning resources or any specialist teaching accommodation as the training necessary to deliver the Certificate of Attainment is delivered by Higher Education Institutions and work-based learning providers.

Recommended outcome

To recommend a programme for approval, the visitors must be assured that the programme meets all of the standards of education and training (SETs) and that those who complete the programme meet our standards of proficiency (SOPs) for their part of the Register.

The visitors agreed to recommend to the Education and Training Committee that a number of conditions are set on the programme, all of which must be met before the programme can be approved.

The visitors agreed that 14 of the SETs have been met and that conditions should be set on the remaining 43 SETs.

Conditions are requirements that the education provider must meet before the programme can be recommended for approval. Conditions are set when certain standards of education and training have not been met or there is insufficient evidence of the standard being met.

The visitors did not make any recommendations for the programme. Recommendations are observations on the programme or education provider which do not need to be met before the programme is recommended for approval. Recommendations are normally set to encourage further enhancements to the programme and are normally set when it is felt that the particular standard of education and training has been met at, or just above the threshold level.

Conditions

2.1 The admissions procedures must give both the applicant and the education provider the information they require to make an informed choice about whether to take up or make an offer of a place on a programme.

Condition: The education provider must provide further evidence of the information that will be provided to all applicants prior to them applying or taking up a place on the programme.

Reason: From the documentation provided prior to the visit and discussions with the senior and programme teams, the visitors noted the online admissions process for applications to the STP was managed by the NSHCS, the NHS Institute of Innovation and the Department of Health MSC team. The visitors recognised the admissions process is made available on line to make it as widely available as possible. However, the visitors noted the admissions process is not available in an alternate format and they were concerned about how applicants without access to IT or those who require assistance in accessing IT facilities were able to find out about the programme in order to make an informed choice about whether to take up a place on the programme. The visitors therefore felt there must be information provided about how applicants can obtain assistance to complete the online forms.

As part of the admissions documentation for the STP, the visitors received a document outlining a series of frequently asked questions. The visitors recognise this document provides applicants with information about many areas of the programme and in particular about placements, funding and the accreditation of prior learning. However they were unclear whether this material was readily available online or in an alternate format to potential applicants. The visitors also noted that no materials had yet been produced to inform applicants about processes or requirements relating to the level of English language; criminal conviction checks; or compliance with any health requirements. However, the visitors were happy with the process for assessing English language as part of the admissions procedures.

The visitors were also unsure what information was made available as part of the application process to the STP about the Certificate of Attainment and the education providers application process once an individual had successfully completed both elements of the STP.

The visitors would therefore like to receive further information about how the STP and the Certificate of Attainment ensure applicants are provided with the information they require to make an informed decision about taking up a place on the programme.

2.3 The admissions procedures must apply selection and entry criteria, including criminal convictions checks.

Condition: The education provider must provide evidence of the criminal convictions checks applied through the admissions procedures.

Reason: From the documentation received prior to the visit and discussions with the senior and programme teams, the visitors noted the online admissions process for applicants to the STP was managed by the NSHCS, the NHS Institute of Innovation and the Department of Health MSC team. The visitors also noted an enhanced criminal conviction check was undertaken by the employer of the student prior to the student commencing employment. The visitors were uncertain about how this fitted into the admissions process in terms of when it happened or when a criminal conviction was declared how the various parties involved with the delivery of the STP programme would be informed.

From discussions with the NSHCS who accredit the work-based learning employers, the visitors learnt that within the accreditation process there is no mechanism to review the processes associated with criminal conviction checks. These could be for example to ensure the relevant criminal conviction checks have been undertaken or to check the processes used when an individual declares a criminal conviction. The visitors recognised the majority of employers were within the NHS and the well-established processes for undertaking criminal conviction checks. However, the visitors noted that some employers would be within the private sector and they felt it was possible that an employer might not have as well defined processes in place to check criminal convictions prior to the individual commencing employment. As there is no mechanism for checking whether an employer is doing so, the visitors were concerned that an individual who had a criminal conviction which may affect how they meet the HPC's standards could join the programme.

The visitors felt that checks should be undertaken of all practice placements to ensure criminal conviction checks are undertaken. The visitors therefore require further information about how the criminal conviction checks are undertaken as part of the admissions procedures.

2.4 The admissions procedures must apply selection and entry criteria, including compliance with any health requirements.

Condition: The education provider must provide evidence of how compliance with any heath requirements is applied through the admissions procedures.

Reason: From the documentation received prior to the visit and discussions with the senior and programme teams, the visitors noted the online admissions process for applicants to the STP was managed by the NSHCS, the NHS Institute of Innovation and the Department of Health MSC team. From discussions surrounding the admissions procedures, the visitors noted any relevant health requirement was undertaken by the employer of the student prior to the student commencing employment. The visitors were uncertain about how this fitted into the admissions process in terms of when it happened or when reasonable adjustments were identified how the various parties involved with the delivery of the STP programme would be informed.

From discussions with the NSHCS, who accredit the work-based learning employers, the visitors learnt that within the accreditation process there is no mechanism to review the processes associated with relevant health

requirements. This could be for example to check whether the relevant vaccinations or occupational health assessments have been undertaken or that all reasonable steps/adjustments had been undertaken in line with equality and diversity law. The visitors recognised the majority of employers were within the NHS and the well-established processes for undertaking any relevant health requirements. However, the visitors noted that some employers would be within the private sector and they felt it was therefore possible an employer may not have as well defined process in place to comply with any health requirements prior to an individual commencing employment. As there is no mechanism for checking whether an employer is doing so, the visitors were concerned that individuals may not receive the relevant vaccinations or that reasonable steps/adjustments may not be undertaken.

The visitors felt that checks should be undertaken of all practice placements to ensure compliance with any health requirement. The visitors therefore require further information about how the any relevant health requirements are undertaken as part of the admissions procedures.

2.6 The admissions procedures must apply selection and entry criteria, including accreditation of prior (experiential) learning and other inclusion mechanisms.

Condition: The education provider must provide evidence of the admissions procedures including accreditation of prior (experiential) learning and other inclusion mechanisms.

Reason: From discussions with the programme team, the visitors learnt the responsibility for accreditation of prior (experiential) learning and other inclusion mechanisms are the responsibility of the individual HEIs offering the MSc in Clinical Science. From discussions with students, the visitors learnt that a number had been unaware of any AP(E)L policies in place when applying to the STP programme.

Prior to the visit, the visitors received the document; Guidelines for Higher Education Institutions (HEIs) in Northern Ireland, Scotland and Wales and their health service partners commissioned to provide MSc degree programmes in clinical science for the Scientific Training Programme. This document outlines to the accreditation processes for the academic element of the STP. As part of this process there are clear standards, two of which are 'HPC Standards of Education and Training (or equivalent) are met' (standard 4) and 'Admissions mechanisms are in place to recognise Prior Learning' (standard 13). Due to unforeseen circumstances, no representatives from the MSC Accreditation Team were available during the visit. The visitors were therefore unable to clarify what expectations or parameters the MSC Accreditation Team used when reviewing AP(E)L at an HEI and what they considered to be appropriate in order for their standards to be met. The visitors felt it was important to receive further information outlining the MSC Accreditation Teams expectations or parameters relating to AP(E)L in order for them to determine whether the HPC standard of education and training (SET) has been met.

The visitors therefore require receive further information about how the accreditation process for the academic element of the STP ensures this standard is met.

2.7 The admissions procedures must ensure that the education provider has equality and diversity policies in relation to applicants and students, together with an indication of how these will be implemented and monitored.

Condition: The education provider must provide evidence of how equality and diversity policies are implemented and monitored through the admissions procedures.

Reason: From the documentation received prior to the visit and discussions with the senior and programme teams, the visitors noted the online admissions process for applicants to the STP was managed by the NSHCS, the NHS Institute of Innovation and the Department of Health MSC team. The visitors learnt that an equality and diversity policy was in place and this was monitored with reports being escalated to the board of the NSHCS. The visitors did not receive a copy of this policy or information about how the policy is monitored.

The visitors learnt from the documentation submitted prior to the visit of the application processes relating to direct entry students (commissioned places) and in-service students (employer funded). All individuals involved in the shortlisting of direct entry students (panel members) must have 'undertaken equality and diversity training with their employer within the last 2 years'. The visitors were unclear how this was monitored to ensure appropriate training was undertaken or how this was applied to applications through the in-service application process.

The visitors were also unsure of the equality and diversity policies which the education provider has in place for assessing the applications for and awarding the Certificate of Attainment.

The visitors would therefore like to receive further information about how the STP and the Certificate of Attainment ensure equality and diversity policies are implemented and monitored through the admissions procedures.

3.1 The programme must have a secure place in the education provider's business plan.

Condition: The programme team must provide evidence that the programme, including all aspects of the STP, have a secure place in the education provider's business plan.

Reason: From discussions with the senior and programme teams, the visitors learnt of the commitment from the four Senior Scientific Officers for the UK for the programme and that the programme has funding in place until April 2013. The NSHCS reinforced this by confirming they have received a commitment from Medical Education England to the continuation of their activities and are planning accreditation of work-based learning activities for the next 12-18 months. The

programme team also discussed their plans to move to self-funding for the programme as soon as is possible and that they are currently working on a business plan which outlines this.

The visitors received a revised draft organogram during the programme team meeting which outlined the relationship between the education provider; the NSHCS and the MSC team. From this and discussions during the visit, the visitors learnt of the inter-relationships between these organisations and the involvement of the professional bodies (ie in Structured Final Assessments within the work-based learning). The visitors recognise that the roles the MSC Accreditation Team, NSHCS and professional bodies play in the accreditation processes and assessment of work-based learning are key to the successful delivery of the programme. The visitors therefore believe it is vital to the security of the programme under consideration for approval that the other organisations involved in the delivery demonstrate they are also secure.

The visitors therefore require further evidence which demonstrates the security of the programme, including all aspects of the STP, through the education provider's business plan.

3.2 The programme must be effectively managed.

Condition: The education provider must demonstrate how the involvement of the professional bodies will be effectively managed.

Reason: From discussions with the programme and senior team, the visitors learnt about the role of the professional bodies in assessing the mid-programme Structured Final Assessment (SFA) and end of programme SFA within the work-based learning element of the STP. The visitors were unsure of the links between the education provider and professional bodies and how these relationships would be managed to; for example, ensure there were sufficient numbers of appropriately qualified and trained people from the professional bodies in place to undertake the SFAs. The visitors require further information which shows the education provider manages this relationship to demonstrate how the programme is effectively managed.

3.2 The programme must be effectively managed.

Condition: The education provider must provide evidence of the memorandums of understanding and governance arrangements in place with the MSC team and NSHCS to undertake the accreditation processes and assessment of work-based learning elements of the STP programme.

Reason: The visitors received a revised draft organogram during the programme team meeting which outlined the relationship between the education provider; the NSHCS and the MSC team. From this and discussions during the visit, the visitors learnt of the inter-relationships between these organisations and the involvement of the professional bodies (ie in Structured Final Assessments within the work-based learning). The visitors also learnt that memorandums of understanding and governance arrangements are being developed to ensure that the roles and responsibilities of all the organisations involved in the delivery of

the programme are clear and allow the education provider to retain overall responsibility for the programme under consideration for approval.

The visitors recognised that as the STP plays a key role in the programme under consideration for approval, there are a number of conditions within this report which relate to the accreditation of the academic and work-based elements of the STP. Above all of these conditions, the visitors felt there needed to be mechanisms in place which ensured the accreditation processes were being undertaken in an appropriate and timely manner. The visitors felt this was important as it would provide the education provider with the confidence that students completing the STP were eligible to apply for the Certificate of Attainment, the programme under consideration for approval.

The visitors therefore require further evidence of the memorandums of understanding and governance arrangements in place to demonstrate the effective management of the programme.

3.2 The programme must be effectively managed.

Condition: The education provider must demonstrate how the roll out of the programme, including all aspects of the STP, to the remaining modalities and three home countries will be managed.

Reason: The visitors received a revised draft organogram during the programme team meeting which outlined the relationship between the education provider; the NSHCS and the MSC team. From discussions at this meeting, the visitors learnt about the intention to roll out the programme, including all aspects of the STP, to the remaining modalities and three home countries by September 2012. The programme team clarified that when these were rolled out, there will be changes to the organogram and hence the reason it remained draft at the meeting.

The visitors recognise that when the programme is rolled out to the other countries within the UK, different organisations will be involved in the delivery and assessment of the work-based learning element of the STP. For example, in the programme handbook, page 14, it states under the process for quality assurance 'The NSHCS and its equivalents in the other countries of the UK will then review the information…'. The visitors learnt that the principles of work-based learning accreditation will be the same for the other STP themes/modalities. However, the visitors were concerned that memorandums of understanding and governance arrangements were not currently in place to demonstrate how the programme, including all aspects of the STP, will be managed by the other organisations.

The visitors were also concerned about the resources in place within the MSC Accreditation Team and education provider to be able to manage the increased number of HEIs seeking accreditation for their MSc in Clinical Science and projected numbers for the applications for the Certificate of Attainment.

The visitors therefore require further information to demonstrate how the roll out of the programme, including all aspects of the STP, to the remaining modalities and three home countries will be managed to ensure the programme is effectively managed.

3.3 The programme must have regular monitoring and evaluation systems in place.

Condition: The education provider must submit further evidence regarding the systems in place for programme monitoring and evaluation.

Reason: The documentation provided prior to the visit included brief details of how the elements of the STP were linked to the education provider's governance framework, for example in curriculum development, the accreditation processes and assessment strategy. From discussions with the programme team the visitors learnt that internal accountability processes and procedures would be contained within the governance documentation and the detail was in the process of being developed.

During the senior team meeting it was clarified that should the programme gain HPC approval, the education provider will be required to submit documentation from their monitoring and evaluation systems as part of HPC's monitoring processes (annual monitoring and major change) to ensure the programme continues to meet the SETs. As the programme includes the STP, the education providers monitoring and evaluation systems will also need to report on any changes which occur to the academic or work-based learning elements of the STP.

The visitors therefore require further information which shows how the monitoring and evaluation systems in place are appropriate to, and effective for, the programme and how any information gathered is acted upon.

3.4 There must be a named person who has overall professional responsibility for the programme who must be appropriately qualified and experienced and, unless other arrangements are agreed, be on the relevant part of the Register.

Condition: The education provider must ensure the individual with overall responsibility for the programme is appropriately qualified and experienced and, unless other arrangements are agreed, be on the relevant part of the Register.

Reason: Prior to the visit the visitors did not receive evidence relating to, whom within the education provider, holds overall professional responsibility for the programme. From discussions with the programme team, the visitors learnt the education provider is in the process of recruiting Professional Group Chairs to head up 8 professional themed groups. The professional groups will have a variety of responsibilities including moderation of assessment for the NSHCS and providing advice to the education providers Council. It is the education providers intention that the Professional Group Chairs are the equivalent of the person who has overall professional responsibility for the themed group. The education provider recognises that for the purposes of this standard, one individual should be named as having overall responsibility for the whole programme. The visitors therefore require evidence of who this individual is along with information about their qualifications and experience to ensure this standard is met.

3.5 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

Condition: The education provider must demonstrate there is an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

Reason: Prior to the visit the visitors did not receive evidence relating to the number of appropriately qualified and experienced staff in place to deliver an effective programme within the education provider. From the programme team meeting, the visitors learnt that Executive members of the education provider have been recruited but the permanent administrative support had not yet been recruited. It was confirmed that once the operational processes had been finalised, then the number and experience of the administrative staff would be determined and recruited.

Also from discussions with the programme team, the visitors learnt the education provider is in the process of recruiting Professional Group Chairs to head up 8 professional themed groups. Once the Professional Group Chairs have been recruited the education provider will recruit members to the groups. It is the education provider's intention that this will be completed by September 2012. The professional groups will have a variety of responsibilities including moderation of assessment for the NSHCS and providing advice to the education providers Council.

The visitors also recognise the STP has been running a Genetics modality pilot only up until now. The senior and programme team confirmed that they intend to roll out the STP to all modalities by September 2012. The visitors were uncertain of the implications this roll out would have on the number of students undertaking the STP and therefore the impact this would have on the number of appropriately qualified and experienced staff required by the education provider to undertake the operational act ivies associated with the programme.

The visitors therefore require further information to contribute towards ensuring this standard is met.

3.5 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

Condition: The education provider must demonstrate how the accreditation process for the academic elements of the programme ensures there is an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

Reason: Prior to the visit, the visitors received the document; Guidelines for Higher Education Institutions (HEIs) in Northern Ireland, Scotland and Wales and their health service partners commissioned to provide MSc degree programmes in clinical science for the Scientific Training Programme. This document outlines the accreditation process for the academic element of the STP. As part of this process there are clear standards, two of which are 'HPC Standards of Education and Training (or equivalent) are met' (standard 4) and 'The majority of teaching in

the specialist modules is undertaken by clinically practicing experts who are members of the relevant professional register' (standard 5). Due to unforeseen circumstances, no representatives from the MSC Accreditation Team were available during the visit. The visitors were therefore unable to clarify what expectations or parameters the MSC Accreditation Team used when reviewing staffing levels and qualifications at an HEI and what they considered to be appropriate in order for their standards to be met. The visitors felt it was important to receive further information outlining the MSC Accreditation Teams expectations or parameters relating to staffing levels and qualifications in order for them to determine whether the HPC SET has been met.

As the accreditation processes for the academic element of the STP plays a key role in the delivery of the programme, the visitors therefore require further information about how the accreditation processes for the element of the programme to contribute towards ensuring this standard is met.

3.5 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

Condition: The education provider must demonstrate there are an adequate number of appropriately qualified and experienced individuals to undertake the activities of the STP within the MSC Accreditation Team and NSHCS.

Reason: Prior to the visit the visitors did not receive evidence relating to the number of appropriately qualified and experienced staff in place to undertake the accreditation processes for the academic and work-based elements of the programme. The visitors were cognisant that the STP programme has been running a Genetics modality pilot only. The senior and programme team confirmed that they intend to roll out the STP programme to all modalities by September 2012. The visitors were uncertain about the implications this roll out would have on the number of students undertaking the STP and therefore the impact this would have on the number of appropriately qualified and experienced staff needed to undertake the accreditation processes.

In addition the visitors learnt about the role of the NSHCS and professional bodies in assessing the mid-programme Structured Final Assessment (SFA) and end of programme SFA within the work-based environment. The visitors were unsure how the NSHCS ensured there were sufficient numbers of appropriately qualified people in place to undertake these assessments.

As the academic and work-based learning elements of the STP play a key role in the delivery of the programme, the visitors require further information to show there are an adequate number of appropriately qualified and experienced individuals to undertake the activities of the academic and work-based learning within the STP to contribute towards delivering an effective programme.

3.6 Subject areas must be taught by staff with relevant specialist expertise and knowledge.

Condition: The education provider must demonstrate how the accreditation process for the academic element of the programme ensures that subject areas are taught by staff with relevant specialist expertise and knowledge.

Reason: Prior to the visit, the visitors received the document; Guidelines for Higher Education Institutions (HEIs) in Northern Ireland, Scotland and Wales and their health service partners commissioned to provide MSc degree programmes in clinical science for the Scientific Training Programme. This document outlines the accreditation process for the academic element of the STP. As part of this process there are clear standards, two of which are 'HPC Standards of Education and Training (or equivalent) are met' (standard 4) and 'The majority of teaching in the specialist modules is undertaken by clinically practicing experts who are members of the relevant professional register' (standard 5). Due to unforeseen circumstances, no representatives from the MSC Accreditation Team were available during the visit. The visitors were therefore unable to clarify what expectations or parameters the MSC Accreditation Team used when reviewing staff qualifications and experience at an HEI and what they considered to be appropriate in order for their standards to be met. The visitors felt it was important to receive further information outlining the MSC Accreditation Teams expectations or parameters relating to staff qualifications and experience in order for them to determine whether the HPC SET has been met.

The visitors therefore require further information about how the accreditation process for the academic element of the programme ensures this standard is met.

3.7 A programme for staff development must be in place to ensure continuing professional and research development.

Condition: The education provider must provide further information about the programme for staff development related to the Professional Groups.

Reason: From discussions with the programme team, the visitors learnt the education provider is in the process of recruiting Professional Group Chairs to head up 8 professional themed groups. The professional groups will have a variety of responsibilities including moderation of assessment for the NSHCS; approving the Train the Trainer course; and providing advice to the education providers Council. Once the Professional Group Chairs have been recruited the education provider will recruit members to the themed groups. The visitors learnt that a programme for staff development was being developed for the professional groups but was not currently in place. The visitors felt it was important that members of this group, as part of their continuing professional development, continued to keep up to date with any developments within the role they are undertaking.

The visitors therefore require further information relating to a staff development policy which ensures these individuals keep up to date with continuing professional development.

3.7 A programme for staff development must be in place to ensure continuing professional and research development.

Condition: The education provider must provide further information about the programmes for staff development for those individuals undertaking the activities relating to the academic and work-based learning elements of the STP.

Reason: From the meeting with the NSHCS the visitors learnt there was a staff development policy in place. However, the visitors did not receive a copy of the policy and were unsure who the policy related to. For example the visitors were unsure whether it related to members of the Review Panel or the assessment of the SFAs.

Unfortunately as outlined elsewhere within this report, due to unforeseen circumstances no representatives from the MSC Accreditation Team were available during the visit. The visitors were therefore unable to gather further information about any staff development in place for members of the MSC Accreditation Team in terms of keeping up to date with the expectations or parameters of their accreditation process and any guidance from the relevant bodies which may impact on their role.

The visitors therefore require further information about the programme for staff development for those individuals undertaking the activities relating to the academic and work-based learning elements of the STP which ensures they keep up to date with continuing professional development, including guidance from the relevant bodies and the role they are undertaking.

3.7 A programme for staff development must be in place to ensure continuing professional and research development.

Condition: The programme team must demonstrate how the accreditation processes for the academic and work-based learning elements of the programme ensure programmes for staff development are in place to ensure continuing professional and research development within the academic and work-based learning environment.

Reason: Prior to the visit, the visitors received the document; Guidelines for Higher Education Institutions (HEIs) in Northern Ireland, Scotland and Wales and their health service partners commissioned to provide MSc degree programmes in clinical science for the Scientific Training Programme. This document outlines the accreditation process for the academic element of the STP. As part of this process there are clear standards, one of which is 'HPC Standards of Education and Training (or equivalent) are met' (standard 4). Due to unforeseen circumstances, no representatives from the MSC Accreditation Team were available during the visit. The visitors were therefore unable to clarify what expectations or parameters the MSC Accreditation Team used when reviewing resources at an HEI and what they considered to be appropriate in order for their standards to be met. The visitors felt it was important to receive further information outlining the MSC Accreditation Teams expectations or parameters relating to resources in order for them to determine whether the HPC SET has been met.

From the documentation and discussions with the NSHCS regarding the accreditation of work-based learning the visitors learnt of the mechanism in place to check that 'sufficient, appropriately trained and experienced trainers/supervisors/mentors are available to support the trainees(s)' (standard P5.2). However, the visitors were unable to locate any guidance provided to the practice placement providers or the members of the Review Panel which stated the expectations or parameters when reviewing the staff development policy to ensure supervisors remained appropriately trained and what the NSHCS considered to be appropriate in order for their standard to be met. The visitors felt it was important to receive further information outlining the NSHCS expectations or parameters relating to the staff development policy in order for them to determine whether the HPC SET has been met.

The visitors therefore require further information about how the accreditation processes for the academic and work-based learning elements of the programme ensure this standard is met.

3.8 The resources to support student learning in all settings must be effectively used.

Condition: The education provider must demonstrate how the accreditation processes for the academic and work-based learning elements of the programme ensure the resources to support student learning in all settings are effectively used.

Reason: Prior to the visit, the visitors received the document; Guidelines for Higher Education Institutions (HEIs) in Northern Ireland, Scotland and Wales and their health service partners commissioned to provide MSc degree programmes in clinical science for the Scientific Training Programme. This document outlines the accreditation process for the academic element of the STP. As part of this process there are clear standards, one of which is 'HPC Standards of Education and Training (or equivalent) are met' (standard 4). Due to unforeseen circumstances, no representatives from the MSC Accreditation Team were available during the visit. The visitors were therefore unable to clarify what expectations or parameters the MSC Accreditation Team used when reviewing resources at an HEI and what they considered to be appropriate in order for their standards to be met. The visitors felt it was important to receive further information outlining the MSC Accreditation Teams expectations or parameters relating to resources in order for them to determine whether the HPC SET has been met.

From the documentation and discussions with the NSHCS regarding the accreditation of work-based learning the visitors learnt of the mechanism in place to check that 'Provision of appropriate physical resources to support students/learners including access to IT facilities' (standard P3.3). However, the visitors were unable to locate any guidance provided to the practice placement providers or the members of the Review Panel which stated the expectations or parameters when reviewing the resources and what the NSHCS considered to be appropriate in order for their standard to be met. The visitors felt it was important to receive further information outlining the NSHCS expectations or parameters

relating to resources in order for them to determine whether the HPC SET has been met.

The visitors therefore require further information about how the accreditation processes for the academic and work-based learning elements of the programme ensure this standard is met.

3.9 The resources to support student learning in all settings must effectively support the required learning and teaching activities of the programme.

Condition: The education provider must demonstrate how the accreditation processes for the academic and work-based learning elements of the programme ensure the resources to support student learning in all settings effectively support the required learning and teaching activities of the programme.

Reason: Prior to the visit, the visitors received the document; Guidelines for Higher Education Institutions (HEIs) in Northern Ireland, Scotland and Wales and their health service partners commissioned to provide MSc degree programmes in clinical science for the Scientific Training Programme. This document outlines the accreditation process for the academic element of the STP. As part of this process there are clear standards, one of which is 'HPC Standards of Education and Training (or equivalent) are met' (standard 4). Due to unforeseen circumstances, no representatives from the MSC Accreditation Team were available during the visit. The visitors were therefore unable to clarify what expectations or parameters the MSC Accreditation Team used when reviewing resources at an HEI and what they considered to be appropriate in order for their standards to be met. The visitors felt it was important to receive further information outlining the MSC Accreditation Teams expectations or parameters relating to resources in order for them to determine whether the HPC SET has been met.

From the documentation and discussions with the NSHCS regarding the accreditation of work-based learning the visitors learnt of the mechanism in place to check that 'There are a range of learning opportunities that complement the students/learner's stage of learning and programme outcomes' (standard P4.2). However, the visitors were unable to locate any guidance provided to the practice placement providers or the members of the Review Panel which stated the expectations or parameters when reviewing the resources and what the NSHCS considered to be appropriate in order for their standard to be met. The visitors felt it was important to receive further information outlining the NSHCS expectations or parameters relating to resources in order for them to determine whether the HPC SET has been met.

The visitors therefore require further information about how the accreditation processes for the academic and work-based learning elements of the programme ensure this standard is met.

3.10 The learning resources, including IT facilities, must be appropriate to the curriculum and must be readily available to students and staff.

Condition: The education provider must demonstrate how the accreditation processes for the academic and work-based learning elements of the programme ensure the resources, including IT facilities, are appropriate to the curriculum and are readily available to students and staff.

Reason: Prior to the visit, the visitors received the document; Guidelines for Higher Education Institutions (HEIs) in Northern Ireland, Scotland and Wales and their health service partners commissioned to provide MSc degree programmes in clinical science for the Scientific Training Programme. This document outlines the accreditation process for the academic element of the STP. As part of this process there are clear standards, one of which is 'HPC Standards of Education and Training (or equivalent) are met' (standard 4). Due to unforeseen circumstances, no representatives from the MSC Accreditation Team were available during the visit. The visitors were therefore unable to clarify what expectations or parameters the MSC Accreditation Team used when reviewing resources at an HEI and what they considered to be appropriate in order for their standards to be met. The visitors felt it was important to receive further information outlining the MSC Accreditation Teams expectations or parameters relating to resources in order for them to determine whether the HPC SET has been met.

From the documentation and discussions with the NSHCS regarding the accreditation of work-based learning the visitors learnt of the mechanism in place to check that 'Provision of appropriate physical resources to support students/learners including access to IT facilities' (standard P3.3). However, the visitors were unable to locate any guidance provided to the practice placement providers or the members of the Review Panel which stated the expectations or parameters when reviewing the resources and what the NSHCS considered to be appropriate in order for their standard to be met. The visitors felt it was important to receive further information outlining the NSHCS expectations or parameters relating to resources in order for them to determine whether the HPC SET has been met.

The visitors would require further information about how the accreditation processes for the academic and work-based learning elements of the programme ensure this standard is met.

3.11 There must be adequate and accessible facilities to support the welfare and wellbeing of students in all settings.

Condition: The education provider must demonstrate how the accreditation processes for the academic and work-based learning elements of the programme ensure there are adequate and accessible facilities to support the welfare and wellbeing of students in all settings.

Reason: Prior to the visit, the visitors received the document; Guidelines for Higher Education Institutions (HEIs) in Northern Ireland, Scotland and Wales and their health service partners commissioned to provide MSc degree programmes in clinical science for the Scientific Training Programme. This document outlines

the accreditation process for the academic element of the STP. As part of this process there are clear standards, one of which is 'HPC Standards of Education and Training (or equivalent) are met' (standard 4). Due to unforeseen circumstances, no representatives from the MSC Accreditation Team were available during the visit. The visitors were therefore unable to clarify what expectations or parameters the MSC Accreditation Team used when reviewing resources at an HEI and what they considered to be appropriate in order for their standards to be met. The visitors felt it was important to receive further information outlining the MSC Accreditation Teams expectations or parameters relating to resources in order for them to determine whether the HPC SET has been met.

From the documentation and discussions with the NSHCS regarding the accreditation of work-based learning the visitors learnt of the mechanism in place to check that 'sufficient, appropriately trained and experienced trainers/supervisors/mentors are available to support the trainees(s)' (standard P5.2). However, the visitors were unable to locate any guidance provided to the practice placement providers or the members of the Review Panel which stated the expectations or parameters when reviewing the facilities for student support and what the NSHCS considered to be appropriate in order for their standard to be met. The visitors felt it was important to receive further information outlining the NSHCS expectations or parameters relating to the facilities for student support in order for them to determine whether the HPC SET has been met.

The visitors therefore require further information about how the accreditation processes for the academic and work-based learning elements of the programme ensure this standard is met.

3.12 There must be a system of academic and pastoral student support in place.

Condition: The education provider must demonstrate how the accreditation processes for the academic and work-based learning elements of the programme ensure there are adequate and accessible facilities to support the welfare and wellbeing of students in all settings.

Reason: Prior to the visit, the visitors received the document; Guidelines for Higher Education Institutions (HEIs) in Northern Ireland, Scotland and Wales and their health service partners commissioned to provide MSc degree programmes in clinical science for the Scientific Training Programme. This document outlines the accreditation process for the academic element of the STP. As part of this process there are clear standards, one of which is 'HPC Standards of Education and Training (or equivalent) are met' (standard 4). Due to unforeseen circumstances, no representatives from the MSC Accreditation Team were available during the visit. The visitors were therefore unable to clarify what expectations or parameters the MSC Accreditation Team used when reviewing resources at an HEI and what they considered to be appropriate in order for their standards to be met. The visitors felt it was important to receive further information outlining the MSC Accreditation Teams expectations or parameters relating to resources in order for them to determine whether the HPC SET has been met.

From the documentation and discussions with the NSHCS regarding the accreditation of work-based learning the visitors learnt of the mechanism in place to check that 'Student/learner safety is maintained at all times' (standard P1.2); 'Effective management of risk to/of students/learners in the Practice Learning Environment' (standard P1.3); and 'Appropriate training and promotion of equality and diversity and implementation of local policies' (standard P1.4). However, the visitors were unable to locate any guidance provided to the practice placement providers or the members of the Review Panel which stated the expectations or parameters when reviewing the academic and pastoral student support and what the NSHCS considered to be appropriate in order for their standard to be met. The visitors felt it was important to receive further information outlining the NSHCS expectations or parameters relating to resources/facilities in order for them to determine whether the HPC SET has been met.

The visitors therefore require further information about how the accreditation processes for the academic and work-based learning elements of the programme ensure this standard is met.

3.13 There must be a student complaints process in place.

Condition: The education provider must revise their documentation to provide information to students of the complaints process in place.

Reason: From the documentation provided prior to the visit and discussions with the programme team, the visitors were referred to the complaints processes within the academic and work-based learning elements of the STP. The visitors felt the complaints process or processes should apply to all aspects of the programme, and therefore the education provider must have a complaints process in place with relation to application processes and award of the Certificate of Attainment. The visitors would also like to see how they tell students about this. The visitors therefore require further information to ensure this standard is met.

3.13 There must be a student complaints process in place.

Condition: The education provider must provide further evidence of the student complaints processes in place within all aspects of the academic and work-based learning within the STP.

Reason: Prior to the visit, the visitors received the document; Guidelines for Higher Education Institutions (HEIs) in Northern Ireland, Scotland and Wales and their health service partners commissioned to provide MSc degree programmes in clinical science for the Scientific Training Programme. This document outlines the accreditation process for the academic element of the STP. As part of this process there are clear standards, one of which is 'HPC Standards of Education and Training (or equivalent) are met' (standard 4). Due to unforeseen circumstances, no representatives from the MSC Accreditation Team were available during the visit. The visitors were therefore unable to clarify what expectations or parameters the MSC Accreditation Team used when reviewing the student complaints process at an HEI and what they considered to be appropriate in order for their standards to be met. The visitors felt it was

important to receive further information outlining the MSC Accreditation Teams expectations or parameters relating to the student complaints process in order for them to determine whether the HPC SET has been met.

From discussions with the NSHCS the visitors learnt about the work-based learning element of the programme. The visitors were directed to the dispute management and resolution policy (Online Assessment and Personal Development Management System, page 14) in place for trainees as part of the Online Assessment Tool (OLAT). The visitors noted that this policy should be used 'In the event that a trainee is not in agreement with the outcome of an assessment'. The visitors felt this policy was more akin to an appeals policy and were concerned it did not relate to other areas of possible student concerns, such as those about the work place environment or related services, or allegations of harassment or discrimination. The visitors were also unsure whether the dispute management and resolution policy was also to be used should a trainee have a complaint about the SFA.

Also from discussions with the NSHCS, the visitors learnt that as the students would be employed within the NHS, then the NHS would be responsible for providing the on the ground complaints process. The visitors could not determine the mechanism within the accreditation process for work-based learning to check this. The visitors noted that some employers would be within the private sector and they felt it was therefore possible that an employer may not have as well defined processes in place for student complaints and there was a chance student concerns may be dealt with. The visitors felt that checks should be undertaken of all practice placements to ensure a student complaints process is in place.

The visitors therefore require further evidence of the student complaints processes in place within all aspects of the academic and work-based learning within the STP.

3.14 Where students participate as service users in practical and clinical teaching, appropriate protocols must be used to obtain their consent.

Condition: The education provider must demonstrate how the accreditation processes for the academic and work-based learning elements of the programme ensure that where students participate as service users in practical or clinical teaching, appropriate protocols are in place to obtain their consent.

Reason: Prior to the visit, the visitors received the document; Guidelines for Higher Education Institutions (HEIs) in Northern Ireland, Scotland and Wales and their health service partners commissioned to provide MSc degree programmes in clinical science for the Scientific Training Programme. This document outlines the accreditation process for the academic element of the STP. As part of this process there are clear standards, one of which is 'HPC Standards of Education and Training (or equivalent) are met' (standard 4). The visitors recognise that appropriate protocols for gaining informed consent may differ between the modalities. For example, during the discussions with students it was clear that those within medical imaging had undertaken ultrasound scans during their academic learning. However, those students within Genetics were very clear that

they were not able to take blood from each other. Due to unforeseen circumstances, no representatives from the MSC Accreditation Team were available during the visit. The visitors were therefore unable to clarify what expectations or parameters the MSC Accreditation Team used when reviewing the student consent protocols at an HEI and what they considered to be appropriate in order for their standards to be met. The visitors felt it was important to receive further information outlining the MSC Accreditation Teams expectations or parameters relating to the student consent protocols in order for them to determine whether the HPC SET has been met.

From the documentation regarding the accreditation of work-based learning the visitors learnt of the mechanism in place to check whether 'Student/learner safety is maintained at all times' (standard P1.2); 'Effective management of risk to/of students/learners in the Practice Learning Environment' (standard P1.3). From discussions with the NSHCS the visitors were informed there were no instances within the work-based learning where students would be required to participate as a service user. The visitors were concerned that the work-based learning model currently relates to Genetics and that when this is rolled out to the other modalities there may be differences in the work-based learning which mean that students may participate as service users. The visitors therefore felt that checks should be undertaken of all practice placements to ensure a student consent protocol is in place.

The visitors therefore require further information about how the accreditation processes for the academic and work-based learning elements of the programme ensure this standard is met.

3.15 Throughout the course of the programme, the education provider must have identified where attendance is mandatory and must have associated monitoring mechanisms in place.

Condition: The education provider must demonstrate through the accreditation process for the academic element of the programme where attendance is mandatory and the associated monitoring mechanisms in place.

Reason: Prior to the visit, the visitors received the document; Guidelines for Higher Education Institutions (HEIs) in Northern Ireland, Scotland and Wales and their health service partners commissioned to provide MSc degree programmes in clinical science for the Scientific Training Programme. This document outlines the accreditation process for the academic element of the STP. As part of this process there are clear standards, one of which is 'HPC Standards of Education and Training (or equivalent) are met' (standard 4). Due to unforeseen circumstances, no representatives from the MSC Accreditation Team were available during the visit. The visitors were therefore unable to clarify what expectations or parameters the MSC Accreditation Team used when reviewing the attendance policy at an HEI and what they considered to be appropriate in order for their standards to be met. The visitors felt it was important to receive further information outlining the MSC Accreditation Teams expectations or parameters relating to the attendance policy in order for them to determine whether the HPC SET has been met.

The visitors therefore require further information about how the accreditation process for the academic element of the programme ensures this standard is met.

3.15 Throughout the course of the programme, the education provider must have identified where attendance is mandatory and must have associated monitoring mechanisms in place.

Condition: The education provider must demonstrate for the work-based element of the programme how attendance is monitored and appropriate actions are taken within the work-based learning environment.

Reason: From the documentation and discussions with the NSHCS the visitors learnt that attendance would be monitored through the use of the 'Online Assessment and Personal Development Management System'. On page 6 of this document it states 'It is the responsibility of the trainee to ensure that all assessments are undertaken as required…' and 'The trainee is expected to attend and take an active part in any appraisal meetings..'. The visitors also learnt that the NSHCS will monitor the participation of all trainees with the system and will manage any issues should they arise.

The visitors recognise the trainees are employed by the NHS or in the private sector and that the employment regulations apply. However, the visitors were unsure about how the employment regulations and requirements implemented and monitored by the NSHCS fitted together. For example, the visitors were unsure how the NSHCS would know if a trainee had poor attendance at work and how and when the NSHCS would become involved to make sure that any follow up action is undertaken to ensure the student gains any required knowledge before they complete the work-based learning element of the STP.

The visitors therefore require further information about how attendance is monitored and appropriate actions are taken within the work-based learning environment to ensure this standard is met.

3.16 There must be a process in place throughout the programme for dealing with concerns about students' profession-related conduct.

Condition: The education provider must provide further evidence of the processes in place for dealing with concerns about students' profession-related conduct within all aspects of the academic and work-based learning within the STP.

Reason: Prior to the visit, the visitors received the document; Guidelines for Higher Education Institutions (HEIs) in Northern Ireland, Scotland and Wales and their health service partners commissioned to provide MSc degree programmes in clinical science for the Scientific Training Programme. This document outlines the accreditation process for the academic element of the STP. As part of this process there are clear standards, one of which is 'HPC Standards of Education and Training (or equivalent) are met' (standard 4). Due to unforeseen circumstances, no representatives from the MSC Accreditation Team were

available during the visit. The visitors were therefore unable to clarify what expectations or parameters the MSC Accreditation Team used when reviewing the process for dealing with concerns about students' profession-related conduct at an HEI and what they considered to be appropriate in order for their standards to be met. The visitors felt it was important to receive further information outlining the MSC Accreditation Teams expectations or parameters relating to the process for dealing with concerns about students' profession-related conduct in order for them to determine whether the HPC SET has been met.

Also from discussions with the NSHCS, the visitors learnt that as the students would be employed within the NHS, then the NHS would be responsible for dealing with concerns about a student's profession-related conduct. The visitors could not determine the mechanism within the accreditation process for work-based learning to check this. The visitors noted that some employers would be within the private sector and they felt it was therefore possible that an employer may not have as well defined processes in place for dealing with concerns about a student's profession-related conduct and there was a chance a student who may not be fit to practise is allowed to continue on the programme. The visitors felt that checks should be undertaken of all practice placements to ensure a process for dealing with concerns about a student's profession-related conduct is in place.

The visitors therefore require further evidence of the processes in place for dealing with students' profession-related conduct within all aspects of the academic and work-based learning within the STP.

4.1 The learning outcomes must ensure that those who successfully complete the programme meet the standards of proficiency for their part of the Register.

Condition: The education provider must ensure those who successfully complete the programme meet the standards of proficiency (SOPs) for their part of the Register.

Reason: The stage 1 assessment of the SOPs reviewed documentation submitted by the programme team in relation to the learning outcomes, indicative content and competences of the academic and work-based learning elements of the STP. The visitors also received a small amount of information relating to how the policies and processes attached to the Certificate of Attainment contributed to the achievement of the SOPs. This assessment was conducted in April 2012 and the feedback/queries submitted to the programme team prior to the visit. The information submitted to the programme team consisted of generic (across the modalities) and modality specific feedback/queries. Unfortunately at the visit it was not possible to discuss the SOPs in more detail as profession/modality specific representatives were unable to attend. It was agreed with the programme team at the visit to incorporate the feedback/queries relating to stage 1 into the visitors' report and the programme team would respond upon receipt of the report.

The full outcomes from the stage 1 assessment can be found in Appendix 1 to this report. The visitors therefore require further information about how the

academic and work-based elements of the STP and/or the policies and processes attached to the Certificate of Attainment ensure that an individual meets the SOPs for clinical science.

4.4 The curriculum must remain relevant to current practice.

Condition: The education provider must demonstrate the curriculum remains relevant to current practice.

Reason: The visitors noted that in the documentation provided prior to the visit 'The process for formal review and governance of the curricula change is currently under development' (Programme Handbook, page 8). From the meeting with the senior team the visitors noted that the curricula would be reviewed on a three yearly cycle and that all parties (including the education provider) would be involved with these changes. The visitors also noted the management policies and processes were being developed to manage the relationship between the education provider, the NSHCS and the MSC Accreditation Team. The visitors were therefore unable to determine the internal mechanisms utilised by the education provider or the mechanisms which the provider was involved in to ensure the curriculum remains relevant to current practice. The visitors therefore require further information to ensure this standard is met.

4.5 The curriculum must make sure that students understand the implications of the HPC's standards of conduct, performance and ethics.

Condition: The education provider must demonstrate how the curriculum ensures students understand the implications of the HPC's standards of conduct, performance and ethics.

Reason: Within the documentation submitted prior to the visit, the visitors were directed to the generic MSc curriculum and practice placement documentation relating to the academic and work-based learning elements respectively of the STP. From their review of these documents the visitors could find no reference to the HPC's standards of conduct, performance and ethics.

The visitors were unable to determine where the curriculum refers specifically to the standards of conduct, performance and ethics, and that students understand these standards, including how and when they apply. The visitors therefore require further information about how the curriculum ensures students understand the implications of the HPC's standards of conduct, performance and ethics.

5.3 The practice placement settings must provide a safe and supportive environment.

Condition: The education provider must demonstrate how the accreditation process for the work-based learning element of the programme ensures the practice placement settings provide a safe and supportive environment.

Reason: From the documentation and discussions with the NSHCS regarding the accreditation of work-based learning the visitors learnt of the mechanism in place to check that 'Student/learner safety is maintained at all times' (standard P1.2) and 'Effective management of risk to/of students/learners in the Practice Learning Environment' (standard P1.3). From discussions with the NSHCS the visitors learnt that all members of the Review Panel would receive training to interpret the standards. However, the visitors were unable to locate any guidance provided to the practice placement providers or the members of the Review Panel which stated the expectations or parameters when reviewing whether there were any risks within the placement and what the NSHCS considered to be appropriate in order for their standard to be met. The visitors felt it was important to receive further information outlining the NSHCS expectations or parameters relating to the evaluation of any risks within the placement in order for them to determine whether the HPC SET has been met.

The visitors therefore require further information about how the accreditation process for the work-based learning element of the programme ensures this standard is met.

5.4 The education provider must maintain a thorough and effective system for approving and monitoring all placements.

Condition: The education provider must demonstrate how, across the four home countries and all the modalities, the accreditation processes for the work-based learning element of the programme maintain a thorough and effective system for approving and monitoring all placements.

Reason: From the documentation regarding the accreditation of work-based learning the visitors learnt of the mechanism to approve and monitor practice placements. The visitors recognise these approval and monitoring mechanisms currently relate to England and the Genetics modality only and from discussions with the NSHCS they intend to roll the accreditation of work-based learning out to the other modalities and to the remain three home countries shortly. The visitors were concerned that when this is rolled out to the other modalities and other home countries, while the principals will remain the same, there may be differences in these processes due to the involvement of different organisations and they were unclear about how these changes would impact on the current processes. The visitors therefore require further information to ensure the accreditation of work-based learning across the modalities and four home countries maintains a thorough and effective system.

5.5 The placement providers must have equality and diversity policies in relation to students, together with an indication of how these will be implemented and monitored.

Condition: The education provider must demonstrate how the accreditation process for the work-based learning element of the programme ensures equality and diversity policies are in place and how they are implemented and monitored.

Reason: From the documentation and discussions with the NSHCS regarding the accreditation of work-based learning the visitors learnt of the mechanism in

place to check that 'Appropriate training and promotion of equality and diversity and implementation of local policies' (standard P1.4). From discussions with the NSHCS the visitors learnt that all members of the Review Panel would receive training to interpret the standards. However, the visitors were unable to locate any guidance provided to the practice placement providers or the members of the Review Panel which stated the expectations or parameters when reviewing the equality and diversity policies and what the NSHCS considered to be appropriate in order for their standard to be met. The visitors felt it was important to receive further information outlining the NSHCS expectations or parameters relating to equality and diversity policies in order for them to determine whether the HPC SET has been met.

The visitors would therefore like to receive further information about how the accreditation process for the work-based learning element of the programme ensures this standard is met.

5.6 There must be an adequate number of appropriately qualified and experienced staff at the practice placement setting.

Condition: The education provider must demonstrate how the accreditation process for the work-based learning element of the programme ensures there is an adequate number of appropriately qualified and experienced staff at the practice placement setting.

Reason: From the documentation and discussions with the NSHCS regarding the accreditation of work-based learning the visitors learnt of the mechanism in place to check that 'Sufficient, appropriately trained and experienced trainers / supervisors / mentors are available to the trainee(s)' (standard P5.2). From discussions with the NSHCS the visitors learnt that all members of the Review Panel would receive training to interpret the standards. However, the visitors were unable to locate any guidance provided to the practice placement providers or the members of the Review Panel which stated the expectations or parameters when reviewing the staffing levels and qualifications and what the NSHCS considered to be appropriate in order for their standard to be met. The visitors felt it was important to receive further information outlining the NSHCS expectations or parameters relating to staffing levels and qualifications in order for them to determine whether the HPC SET has been met.

The visitors would therefore like to receive further information about how the accreditation process for the work-based learning element of the programme ensures this standard is met.

5.7 Practice placement educators must have relevant knowledge, skills and experience.

Condition: The education provider must demonstrate how the accreditation process for the work-based learning element of the programme ensures practice placement educators have the relevant knowledge, skills and experience.

Reason: From the documentation and discussions with the NSHCS regarding the accreditation of work-based learning the visitors learnt of the mechanism in place to check that 'Sufficient, appropriately trained and experienced trainers / supervisors / mentors are available to the trainee(s)' (standard P5.2). From discussions with the NSHCS the visitors learnt that all members of the Review Panel would receive training to interpret the standards. However, the visitors were unable to locate any guidance provided to the practice placement providers or the members of the Review Panel which stated the expectations or parameters when reviewing staff knowledge, skills and experience and what the NSHCS considered to be appropriate in order for their standard to be met. The visitors felt it was important to receive further information outlining the NSHCS expectations or parameters relating to staff knowledge, skills and experience in order for them to determine whether the HPC SET has been met.

The visitors would therefore like to receive further information about how the accreditation process for the work-based learning element of the programme ensures this standard is met.

5.8 Practice placement educators must undertake appropriate practice placement educator training.

Condition: The education provider must demonstrate how the accreditation process for the work-based learning element of the programme ensures the practice placement educators have undertaken appropriate practice placement educator training.

Reason: From the documentation and discussions with the NSHCS regarding the accreditation of work-based learning the visitors learnt of the mechanism in place to check that 'Sufficient, appropriately trained and experienced trainers / supervisors / mentors are available to the trainee(s)' (standard P5.2). From discussions with the NSHCS the visitors learnt that all members of the Review Panel would receive training to interpret the standards. However, the visitors were unable to locate any guidance provided to the practice placement providers or the members of the Review Panel which stated the expectations or parameters when reviewing practice placement educator training and what the NSHCS considered to be appropriate in order for their standard to be met. The visitors felt it was important to receive further information outlining the NSHCS expectations or parameters relating to practice placement educator training in order for them to determine whether the HPC SET has been met.

The visitors would therefore like to receive further information about how the accreditation process for the work-based learning element of the programme ensures this standard is met.

5.8 Practice placement educators must undertake appropriate practice placement educator training.

Condition: The education provider must submit information about the practice placement educator training undertaken by new and existing supervisors and how the training is administered.

Reason: From the meeting with the programme team, the visitors learnt of the three day Train the Trainer course which has been developed and which must be undertaken before an individual can supervise a trainee. From the senior team meeting the visitors learnt that the education provider was involved in the approval of the Train the Trainer course which is administered by the NSHCS. The visitors were uncertain whether the Train the Trainer course discussed would also be applicable for existing supervisors undergoing refresher training.

The visitors did not receive further information about the Train the Trainer course. For example in terms of the content, broad learning outcomes or any assessments or qualifications provided upon completion of the course or how the NSHCS administered the course to ensure that all supervisors had undertaken appropriate training prior to supervising a trainee.

The visitors therefore require further information about the training for new and existing supervisors, to ensure that it is appropriate to the delivery and assessment of the work-based learning competencies.

5.9 Practice placement educators must be appropriately registered, unless other arrangements are agreed.

Condition: The education provider must demonstrate how the accreditation process for the work-based learning element of the programme ensures the practice placement educators are appropriately registered, unless other arrangements are agreed.

Reason: From the documentation and discussions with the NSHCS regarding the accreditation of work-based learning the visitors learnt of the mechanism in place to check that 'Provision of appropriate supervision of students/learners and where relevant meet any Regulatory Body or Award requirements' (standard P3.3). From discussions with the NSHCS the visitors learnt that all members of the Review Panel would receive training to interpret the standards. However, the visitors were unable to locate any guidance provided to the practice placement providers or the members of the Review Panel which stated the expectations or parameters when reviewing staff registration statuses and what the NSHCS considered to be appropriate in order for their standard to be met. The visitors felt it was important to receive further information outlining the NSHCS expectations or parameters relating to staff registration statuses in order for them to determine whether the HPC SET has been met.

The visitors would therefore like to receive further information about how the accreditation process for the work-based learning element of the programme ensures this standard is met.

5.10 There must be regular and effective collaboration between the education provider and the practice placement provider.

Condition: The education provider must clearly articulate how regular and effective collaboration between the education provider, the NSHCS and the practice placement providers occurs.

Reason: During the meeting with the programme team the visitors were provided with a revised organogram outlining the relationship between the education provider, the NSHCS and the workplace training environment (practice placements). From this organogram, the visitors could see the link between the NSHCS and practice placements through the accreditation processes. However, the visitors could not clearly see how feedback from the practice placements would be communicated to the education provider or if any changes to the accreditation processes should occur, how these would be reported to the education provider. From discussions with the senior and programme teams, it was clear that memorandums of understanding or agreements are being developed to ensure there was regular and effective collaboration between these parties. The visitors therefore require further information to ensure this standard is met.

5.11 Students, practice placement providers and practice placement educators must be fully prepared for placement which will include information about an understanding of:
- **the learning outcomes to be achieved;**
- **the timings and the duration of any placement experience and associated records to be maintained;**
- **expectations of professional conduct;**
- **the assessment procedures including the implications of, and any action to be taken in the case of, failure to progress; and**
- **communication and lines of responsibility.**

Condition: The education provider must demonstrate how practice placement educators and trainees are fully prepared for placement.

Reason: From the documentation provided prior to the visit and discussions with the programme team and the NSHCS the visitors learnt about the OLAT and the guidelines produced for trainees and practice placement educators. This document included detailed information about the type of assessments which should be undertaken while a trainee is on placement and the roles and responsibilities for all involved. However, it did not provide information about the marking criteria which should be used for these assessments. The visitors felt it was important that trainees and practice placement educators were aware of these criteria to ensure consistency in marking across placements.

The visitors also received a copy of the learning guide produced for practice placement providers and trainees for the first rotational phase of work-based learning for Cardiac Science. From this document the visitors could clearly see the learning outcomes to be undertaken within this rotational module. From the meeting with the programme team and NSHCS the visitors learnt that learning guides are being developed for all the modalities to provide more detail to providers and trainees about the learning outcomes to be achieved in each placement. The MSC team is leading on the development of these with involvement from the NSHCS and professional bodies. The visitors were satisfied that should the learning guides in development follow the same or similar format, the trainees and practice placement educators will have the information they need about learning outcomes. However, the visitors would like to receive

confirmation of when these will be finalised and available to trainees and practice placement educators.

From discussions and the documentation, the visitors were unable to determine how trainees and practice placement educators would receive an understanding of the assessment procedures including any action to be taken in case of failure, expectations of professional conduct, or lines of communication.

The visitors therefore require further information to demonstrate how trainees and practice placement educators are fully prepared for placement.

5.13 A range of learning and teaching methods that respect the rights and needs of service users and colleagues must be in place throughout practice placements.

Condition: The education provider must demonstrate how the accreditation process for the work-based learning element of the programme ensures a range of learning and teaching methods, which respect the rights and needs of service users and colleagues, is in place throughout practice placements.

Reason: From the documentation and discussions with the NSHCS regarding the accreditation of work-based learning the visitors learnt of the mechanism in place to check that 'It is possible to demonstrate that curricula, supporting processes and learning, assessment and teaching methods: are student/learner centred, are patient/service user focused, embed the approaches of inter-professional learning appropriately, meet the needs of employers and commissioners, regulatory bodies and academic organisations' (standard P4). From discussions with the NSHCS the visitors learnt that all members of the Review Panel would receive training to interpret the standards. However, the visitors were unable to locate any guidance provided to the practice placement providers or the members of the Review Panel which stated the expectations or parameters when reviewing the learning and teaching methods and what the NSHCS considered to be appropriate in order for their standard to be met. The visitors felt it was important to receive further information outlining the NSHCS expectations or parameters relating to the learning and teaching methods within the placement in order for them to determine whether the HPC SET has been met.

The visitors would therefore like to receive further information about how the accreditation process for the work-based learning element of the programme ensure this standard is met.

6.1 The assessment strategy and design must ensure that the student who successfully completes the programme has met the standards of proficiency for their part of the Register.

Condition: The education provider must ensure the assessment strategy and design ensures those students who successfully complete the programme meet the standards of proficiency (SOPs) for their part of the Register.

Reason: The stage 1 assessment of the SOPs reviewed documentation submitted by the programme team in relation to the learning outcomes, indicative content and competences of the academic and work-based learning elements of the STP. This assessment was conducted in April 2012 and the feedback/queries submitted to the programme team prior to the visit. The information submitted to the programme team consisted of generic (across the modalities) and modality specific feedback/queries. Unfortunately at the visit it was not possible to discuss the SOPs in more detail as profession/modality specific representatives were unable to attend. It was agreed with the programme team that the feedback/queries relating to stage 1 would be incorporated into the visitors' report and the programme team would respond upon receipt of the report. As the visitors were not able to discuss the learning outcomes in more detail and as these should have a direct link to the assessment strategy they felt unable to discuss the assessment strategy in more detail relating to the learning outcomes and associated assessment methods.

The visitors therefore require further information about how the assessment strategy and design for the academic and work-based elements of the STP and/or the policies and procedures attached to the Certificate of Attainment ensure that an individual who successfully completes the programme meets the SOPs for clinical science.

6.1 The assessment strategy and design must ensure that the student who successfully completes the programme has met the standards of proficiency for their part of the Register.

Condition: The education provider must ensure the assessment strategy and design ensures those students who successfully complete the programme meet the standards of proficiency (SOPs) for their part of the Register.

Reason: Prior to the visit, the visitors received the assessment strategy as part of the programme handbook which stated the HEIs are responsible for the assessment of the academic elements of the STP. No further information was provided about the assessment strategy for the academic element of the STP. Due to unforeseen circumstances, no representatives from the MSC Accreditation Team were available during the visit. The visitors were therefore unable to clarify what expectations or parameters the MSC Accreditation Team considered when reviewing assessment strategies and design at an HEI and what they considered to be appropriate in order for their standard to be met. For example any individual module pass marks, the maximum number of resits allowed, the maximum number of resits allowed in any one year, the maximum length of the programme or the types of assessment to be used and how these might differ from year to year and across specialisms. The visitors felt it was important to receive further information outlining the MSC Accreditation Teams expectations or parameters relating to assessment strategies and design in order for them to determine whether the HPC SET has been met.

From the programme documentation and discussions with the programme team and NSHCS the visitors learnt of the assessment strategy for the work-based learning which includes assessment tools for each curricula, the OLAT and personal learning management system, and mid-programme and end of programme Structured Final Assessments (SFA). This documentation included

detailed information about the type of assessments which should be undertaken while a trainee is on placement. However, it did not provide information about the marking criteria which should be used for these assessments. The visitors were not provided with detailed information about the assessment of the learning outcomes for example – individual module pass marks, the maximum number of resits allowed every year for practice placement modules, compulsory and optional modules or the maximum length of the programme. The visitors felt it was important that information was available as part of the assessment strategy and design for work-based learning to ensure consistency across practice placements.

The visitors were therefore unclear of the assessment strategy and design for all aspects of the STP and therefore how they ensured that a successful student met all the SOPs for clinical science. The visitors therefore require further information to demonstrate how this SET is met.

6.2 All assessments must provide a rigorous and effective process by which compliance with external-reference frameworks can be measured.

Condition: The education provider must articulate how assessments provide a rigorous and effective process by which compliance with external-reference frameworks can be measured.

Reason: From the documentation received prior to the visit and in discussions with the programme team and NSHCS, the visitors noted in the description of the learning outcomes some elements of the programme did not reflect the level stated by the Quality Assurance Agency for Higher Education guidelines for Masters programmes. For example the visitors felt that learning outcomes which started with 'know' or 'understand' did not clearly articulate that a student would be assessed at a Masters level. The pre-fixes 'know' and 'understand' do not appear in the QAA framework, rather the pre-fixes 'critically reflect on' or 'show a deep understanding of' appear. The visitors recognise that the standards of proficiency are set at a threshold level and start often with 'know how to' or 'understand' but they felt that as the programme is set at a Masters level there is not a clear link to show the expectation that thee assessment of the learning outcomes will be undertaken at that level within the learning outcomes.

The visitors therefore require further information which shows how the assessments within the academic and work-based learning elements of the programme provide a rigorous and effective process by which compliance with external reference framework for Masters level can be measured.

6.4 Assessment methods must be employed that measure the learning outcomes.

Condition: The education provider must demonstrate how the accreditation process for the academic learning element of the programme ensures that the assessment methods employed measure the learning outcomes.

Reason: Prior to the visit, the visitors received the assessment strategy as part of the programme handbook which stated the HEIs are responsible for the assessment of the academic elements of the STP. No further information was provided about the assessment strategy for the academic element of the STP. Due to unforeseen circumstances, no representatives from the MSC Accreditation Team were available during the visit. The visitors were therefore unable to clarify what expectations or parameters the MSC Accreditation Team considered when reviewing assessment strategies and design at an HEI and what they considered to be appropriate in order for their standard to be met. The visitors felt it was important to receive further information outlining the MSC Accreditation Teams expectations or parameters relating to assessment strategies and design in order for them to determine whether the HPC SET has been met.

The visitors therefore require further information which shows how the assessment methods in the academic learning environments measure the learning outcomes to ensure that a student who successfully completes the programme meets the standards of proficiency.

6.5 The measurement of student performance must be objective and ensure fitness to practise.

Condition: The education provider must demonstrate how the measurement of student performance is objective and ensures fitness to practice.

Reason: Prior to the visit, the visitors received the assessment strategy as part of the programme handbook which stated the HEIs are responsible for the assessment of the academic elements of the STP. No further information was provided about the assessment strategy for the academic element of the STP. Due to unforeseen circumstances, no representatives from the MSC Accreditation Team were available during the visit. The visitors were therefore unable to clarify what expectations or parameters the MSC Accreditation Team considered when measuring student performance at an HEI and what they considered to be appropriate in order for their standard to be met. The visitors felt it was important to receive further information outlining the MSC Accreditation Teams expectations or parameters measuring student performance in order for them to determine whether the HPC SET has been met.

From the programme handbook and discussions with the programme team and NSHCS the visitors learnt of the assessment strategy for the work-based learning which includes assessment tools for each curricula, the OLAT and personal learning management system, and mid-programme and end of programme SFA. The visitors were unsure of the assessment criteria to be used for these assessment tools, for example, they received no guidance which provided practice placement educators with information on marking the trainees objectively or the criteria against what a trainee should be marked and assessed on. It was therefore unclear to the visitors if the practice placement educators would be marking equally and consistently across all students.

The visitors therefore require further information which shows how the measurement of student performance is objective and ensures fitness to practise.

6.6 There must be effective monitoring and evaluation mechanisms in place to ensure appropriate standards in the assessment.

Condition: The education provider must demonstrate there are effective monitoring and evaluation mechanisms in place to ensure appropriate standards in the assessment.

Reason: From the documentation received prior to the visit the visitors were directed to the assessment strategy outlined within the programme handbook. From this document, the visitors learnt the HEIs are responsible for the assessment of the academic elements of the STP. No further information was provided about the assessment strategy for the academic element of the STP. Due to unforeseen circumstances, no representatives from the MSC Accreditation Team were available during the visit. The visitors were therefore unable to clarify what expectations or parameters the MSC Accreditation Team considered when measuring the effective mechanisms for appropriate standards in assessment at an HEI and what they considered to be appropriate in order for their standard to be met. The visitors felt it was important to receive further information outlining the MSC Accreditation Teams expectations or parameters measuring appropriate standards in assessment in order for them to determine whether the HPC SET has been met.

The programme handbook also outlined the NSHCS, in partnership with the education provider and the professional bodies will oversee the work-based elements. From discussions with the programme team and the NSHCS the visitors learnt that the professional bodies would be acting in the role of an external examiner for the work-based element of the programme. The visitors did not receive any further information about the role and responsibilities of the professional body while undertaking the role of external examiner for the work-based element.

The role of an external examiner is to monitor the assessment for both the academic and work-based learning elements of the programme and to make sure that both elements are meeting professional and academic standards. The visitors were unsure about how the external examination arrangements of the two elements of the STP combine to ensure appropriate in assessments for the whole STP.

The documentation provided prior to the visit included brief details of how the elements of the STP were linked to the education provider's governance framework, for example in curriculum development, the accreditation processes and assessment strategy. From discussions with the programme team the visitors learnt that internal accountability processes and procedures would be contained within the governance documentation and the detail was in the process of being developed. However, the visitors were unsure whether the professional bodies or other organisations/individuals would undertake external examination of the education providers processes in assessing the applications for and awarding the Certificate of Attainment.

The visitors therefore require further documentation in order to demonstrate this standard is met.

6.7 Assessment regulations must clearly specify requirements for student progression and achievement within the programme.

Condition: The education provider must demonstrate the assessment regulations for the academic and work-based learning elements of the programme clearly specific requirements for student progression and achievement.

Reason: From the documentation received prior to the visit the visitors were directed to the assessment strategy outlined within the programme handbook. From this document, the visitors learnt the HEIs are responsible for the assessment of the academic elements of the STP. No further information was provided about the assessment strategy for the academic element of the STP. Due to unforeseen circumstances, no representatives from the MSC Accreditation Team were available during the visit. The visitors were therefore unable to clarify what expectations or parameters the MSC Accreditation Team considered when measuring appropriate standards in assessment at an HEI and what they considered to be appropriate in order for their standard to be met. The visitors felt it was important to receive further information outlining the MSC Accreditation Teams expectations or parameters measuring appropriate standards in assessment in order for them to determine whether the HPC SET has been met.

From the documentation and discussions with the NSHCS regarding the accreditation of work-based learning the visitors learnt of the mechanism in place to check that 'Supervision and assessment of students/learners is provided in line with best practice. Including a learning agreement, a process/meetings to review progress and achievement' (standard P7.1) and 'Assessments are undertaken by an appropriate range of staff, meetings take place to complete assessment tools and to review progress and achievement' (standard P7.2). From discussions with the NSHCS the visitors learnt that all members of the Review Panel would receive training to interpret the standards. However, the visitors were unable to locate any guidance provided to the practice placement providers or the members of the Review Panel which stated the expectations or parameters when reviewing student progression and achievement and what the NSHCS considered to be appropriate in order for their standards to be met. The visitors felt it was important to receive further information outlining the NSHCS expectations or parameters relating to student progression and achievement in order for them to determine whether the HPC SET has been met.

The visitors were therefore unable to determine the assessment regulations relating to student progression and achievement and therefore require further information in order to demonstrate this SET is met.

6.8 Assessment regulations, or other relevant policies, must clearly specify requirements for approved programmes being the only programmes which contain any reference to an HPC protected title or part of the Register in their named award.

Condition: The education provider must revisit the programme documentation to clearly articulate that there are no exit awards from the programme which provide eligibility for admission to the HPC Register.

Reason: From discussions with the programme team the visitors were satisfied there were no exit awards from the programme and the only programme which would provide eligibility to apply to the Register would be the Certificate of Attainment. The academic and work-based elements of the STP also confer certificates (MSc in Clinical Science and Certificate of Completion of Scientist Training respectively). The visitors felt there was a possibility for confusion by students as the assessment regulations did not clearly state there were no exit awards and the Certificate of Attainment was the only programme which would provide eligibility to the HPC Register. The visitors therefore require updated information to ensure this standard is met.

6.10 Assessment regulations must clearly specify requirements for a procedure for the right of appeal for students.

Condition: The education provider must provide further evidence to illustrate the procedures for the right of appeal through the programme.

Reason: Prior to the visit, the visitors received the document; Guidelines for Higher Education Institutions (HEIs) in Northern Ireland, Scotland and Wales and their health service partners commissioned to provide MSc degree programmes in clinical science for the Scientific Training Programme. This document outlines the accreditation process for the academic element of the STP. As part of this process there are clear standards, one of which is 'HPC Standards of Education and Training (or equivalent) are met' (standard 4). Due to unforeseen circumstances, no representatives from the MSC Accreditation Team were available during the visit. The visitors were therefore unable to clarify what expectations or parameters the MSC Accreditation Team used when reviewing the right of appeal procedures at an HEI and what they considered to be appropriate in order for their standards to be met. The visitors felt it was important to receive further information outlining the MSC Accreditation Teams expectations or parameters relating to right of appeal procedures in order for them to determine whether the HPC SET has been met.

The visitors were also unsure about the procedure for the right of appeal which a student should utilise should they wish to ask for a review of a decision made on their progression or achievement as part of the education providers processes in assessing the applications for and awarding the Certificate of Attainment.

The visitors therefore require further documentation in order to demonstrate this standard is met.

6.11 Assessment regulations must clearly specify requirements for the appointment of at least one external examiner who must be appropriately experienced and qualified and, unless other arrangements are agreed, be from the relevant part of the Register.

Condition: The education provider must include a clear statement in the programme documentation that at least one external examiner for the programme will be from the relevant part of the register unless other arrangements are agreed.

Reason: From the documentation received prior to the visit the visitors were directed to the assessment strategy outlined within the programme handbook. The visitors could locate information about external examination for the work-based element of the STP but could not locate any information regarding the external examination of the academic element of the STP or the education providers processes in assessing the applications for and awarding the Certificate of Attainment. The visitors therefore require further information which shows information about the external examining arrangements for all aspects of the programme and which include information about HPC's requirements that for the appointment of at least one external examiner who must be appropriately experienced and qualified, and unless other arrangements are agreed, be from the relevant part of the Register.

Roland Fleck
Andrew Philips
Robert Munro

Visitors' report

Name of education provider	Academy for Healthcare Science
Programme name	Certificate of Equivalence
Mode of delivery	Full time
Relevant part of HPC Register	Clinical scientist
Date of visit	24 – 25 May 2012

Contents

Executive summary

The Health Professions Council (HPC) approve educational programmes in the UK which health professionals must complete before they can apply to be registered with us. The HPC is a health regulator and our main aim is to protect the public. The HPC currently regulates 15 professions. All of these professions have at least one professional title which is protected by law. This means that anyone using the title 'Clinical scientist' must be registered with us. The HPC keep a register of health professionals who meet our standards for their training, professional skills, behaviour and health.

The visitors' report which follows outlines the recommended outcome made by the visitors on the approval of the programme. The education provider has until 23 July 2012 to provide observations on this report. This is independent of meeting any conditions. The report and any observations received will be considered by the Education and Training Committee (Committee) on 23 August 2012. At this meeting, the Committee will accept the visitors' recommended outcome, including the conditions. If necessary, the Committee may decide to vary the conditions.

The education provider is due to redraft and resubmit documentary evidence in response to the conditions outlined in this report by 2 August 2012. The visitors will consider this response and make a separate recommendation to the Committee on the approval of the programme. It is anticipated that this recommendation will be made to the Committee on 13 September 2012.

Introduction

The HPC visited the programme at the education provider as it was a new programme which was seeking HPC approval for the first time. This visit assessed the programme against the standards of education and training (SETs) and considered whether those who complete the programme meet the standards of proficiency (SOPs) for their part of the Register.

This visit was an HPC only visit. The education provider did not validate or review the programmes at the visit and the professional body did not consider their accreditation of the programmes. The education provider supplied an independent chair and secretary for the visit. The visit also considered a different programme – Certificate of Attainment. A separate visitor report exists for this programme.

The Academy for Healthcare Science (AHCS) will award the Certificate of Equivalence which they are seeking HPC approval for a qualification which leads to eligibility to apply for registration and inclusion on the Register. The HPC therefore regard the AHCS as an education provider.

The Modernising Scientific Careers (MSC) framework 'Modernising Scientific Careers: The UK way forward' sets out the need for equivalence arrangements to be clearly articulated as part of the MSC framework.

The AHCS will award the Certificate of Equivalence to individuals who have worked in healthcare or science seeking recognition and clarification that their previous training, qualifications and experience meets the specified programme outcomes for the Scientific Training Programme (STP) in their chosen modality. Thus avoiding the need to repeat education or training unnecessarily.

The STP comprises of an academic award (MSc in Clinical Science) with a period of work-based learning. The AHCS have mapped the learning outcomes and competencies of the STP against the HPC SOPs.

The approval process for the approval of the Certificate of Equivalence was formed of two stages. The first stage of the approval process allowed HPC visitors to review the documentation related to the learning outcomes and competencies of the STP submitted by the AHCS. Visitors from each of the 11 modalities reviewed the competencies to ensure that they are linked to Clinical scientist SOPs in ways relevant to the modality. For this first stage, HPC visitors did not attend the AHCS offices. The outcomes of the stage 1 assessment are included as Appendix 1 of this report.

Stage 1 reviewed documentation relating to the learning outcomes, indicative content and competences of the academic and work-based learning elements of the STP.

The second stage of the approval process took the form of a visit to meet with the stakeholders involved with the delivery of the Certificate of Equivalence. This visit reviewed how the standards of education and training (SETs) are met by the programme.

Visit details

Name of HPC visitors and profession	Roland Fleck (Clinical scientist) Andrew Phillips (Clinical scientist) Robert Munro (Biomedical scientist)
HPC executive officer(s) (in attendance)	Tracey Samuel-Smith
HPC observer	Niall Lennon
Proposed student numbers	100
Proposed start date of programme approval	1 October 2012
Chair	Day 1 - Pat Oakley (Kings College London) Day 2 - Graham Beastall (Unaffiliated)
Secretary	Helen White (Academy for Healthcare Science)

Sources of evidence

Prior to the visit the HPC reviewed the documentation detailed below, sent by the education provider:

	Yes	No	N/A
Programme specification	☒	☐	☐
Descriptions of the modules	☒	☐	☐
Mapping document providing evidence of how the education provider has met the SETs	☒	☐	☐
Mapping document providing evidence of how the education provider has met the SOPs	☒	☐	☐
Practice placement handbook	☐	☐	☒
Student handbook	☐	☐	☒
Curriculum vitae for relevant staff	☐	☒	☐
External examiners' reports from the last two years	☐	☐	☒
Information for applicants to the programme	☒	☐	☐
Programme application form	☒	☐	☐

The HPC did not review curriculum vitae for any relevant staff prior to the visit as the education provider did not submit it.

The HPC did not review external examiners' reports from the last two years prior to the visit as there is currently no external examiner as the programme is new.

The HPC did not review a practice placement handbook or student handbook prior to the visit as the nature of the programme means that this documentation does not exist.

During the visit the HPC saw the following groups or facilities:

	Yes	No	N/A
Senior managers of the education provider with responsibility for resources for the programme	☒	☐	☐
Programme team	☒	☐	☐
Placements providers and educators/mentors	☐	☐	☒
Students	☐	☐	☒
Learning resources	☐	☐	☒
Specialist teaching accommodation (eg specialist laboratories and teaching rooms)	☐	☐	☒

The HPC did not meet with the students as the programme was new so there were no current or past students to meet. The HPC did not meet with the practice placement educators as the nature of the programme means that applicants will have already completed their academic and work-based learning.

The HPC did not see the learning resources or specialist teaching accommodation as the nature of the programme does not require any specialist laboratories or teaching rooms.

Recommended outcome

To recommend a programme for approval, the visitors must be assured that the programme meets all of the standards of education and training (SETs) and that those who complete the programme meet our standards of proficiency (SOPs) for their part of the Register.

The visitors agreed to recommend to the Education and Training Committee that a number of conditions are set on the programme, all of which must be met before the programme can be approved.

The visitors agreed that 3 of the SETs have been met and that conditions should be set on the remaining 54 SETs.

Conditions are requirements that the education provider must meet before the programme can be recommended for approval. Conditions are set when certain standards of education and training have not been met or there is insufficient evidence of the standard being met.

The visitors did not make any recommendations for the programme. Recommendations are observations on the programme or education provider which do not need to be met before the programme is recommended for approval. Recommendations are normally set to encourage further enhancements to the programme and are normally set when it is felt that the particular standard of education and training has been met at, or just above the threshold level.

Conditions

2.1 The admissions procedures must give both the applicant and the education provider the information they require to make an informed choice about whether to take up or make an offer of a place on a programme.

Condition: The education provider must provide further evidence of the information that will be provided to all applicants prior to them applying or taking up a place on the programme.

Reason: From the programme team meeting, the visitors identified three groups of students who will be using the programme as a route to the HPC Register. The first group will be individuals who have obtained their qualifications and experience either internationally or in the UK. The second group will be the students who are currently on the pilot STP and working towards the Certificate of Attainment. As these students started the STP before the Certificate of Attainment gained HPC approval, their qualification will not allow them to apply to the HPC Register upon successful completion. The third group will be individuals for whom it is identified, during the assessment of their qualifications and experience, they have not meet the specified programme outcomes for the STP in their chosen modality and are required to gain further training or experience before reapplying to the programme.

From the documentation provided to applicants prior to taking up a place on the programme, the visitors learnt of the three stages to the programme (Application; Applicant evidence gathering; Assessment and statement of outcomes). The visitors felt it was important to tell applicants about the three stages to the programme but they felt the information currently only reflected those applicants who had gained their experience either internationally or in the UK. The visitors could foresee there may be different processes applicable to those students who had completed the STP or were reapplying after gaining additional training or experience. For example, the visitors felt the requirements for criminal conviction checks, health, the level of English language or the costs associated with applying to the programme might not be the same for the three groups and therefore information needed to be provided to students to ensure they can make an informed choice about whether to apply to the programme. The visitors therefore require further information to demonstrate this standard is met.

2.2 The admissions procedures must apply selection and entry criteria, including evidence of a good command of reading, writing and spoken English.

Condition: The education provider must apply selection and entry criteria including evidence of a good command of reading, writing and spoken English for all applicants.

Reason: From the documentation received prior to the visit, the visitors learnt about the three stages to the programme – Application; Applicant evidence gathering; Assessment and statement of outcomes. The visitors felt that the Application stage of the programme was the equivalent of HPC's programme admissions.

From the Healthcare Scientist (Clinical Scientist) Equivalence application form the visitors noted that applicants who were not UK citizens were required to submit 'a photocopy of an IELTS certificate or declaration that English is your first language or proof of exemption by virtue of being an EEA citizen' (page 1). However, the visitor could not determine from the documentation whether there were any admissions procedures relating to English language for applicants who were English citizens. From the meeting with the programme team, the visitors learnt the minimum level of English language required for applicants to the programme would be International English Language Testing System (IELTS) level 7.0 with no element below 6.5. They also learnt of the possibility to interview an applicant should the need arise. However, they could not determine the criteria which would mean an applicant would be required to attend an interview to determine their level of English language.

The visitors recognise there may be differences for those who do not have English as their first language and felt that in order to meet this standard, the admissions procedures relating to English language must be applicable to and outlined for all applicants.

2.3 The admissions procedures must apply selection and entry criteria, including criminal convictions checks.

Condition: The education provider must apply selection and entry criteria including criminal conviction checks for all applicants.

Reason: From the documentation received prior to the visit, the visitors learnt about the three stages to the programme – 'Application'; 'Applicant evidence gathering'; 'Assessment and statement of outcomes'. The visitors felt that the Application stage of the programme was the equivalent of HPC's programme admissions.

During the programme team meeting, the visitors learnt that expert panels would be used to determine the suitability of any qualifications, criminal convictions or health requirements as part of the admissions procedures for the programme. However from the documentation submitted prior to the visit, the visitors could not identify any information provided to applicants about the requirement for criminal conviction checks to be undertaken, the level of disclosure expected or the admissions procedures to deal with any declared criminal convictions.

The visitors therefore require further information about the admissions procedures relating to criminal conviction checks for all applicants to the programme in order to determine whether this standard is met.

2.4 The admissions procedures must apply selection and entry criteria, including compliance with any health requirements.

Condition: The education provider must apply selection and entry criteria including compliance with any health requirements for all applicants.

Reason: From the documentation received prior to the visit, the visitors learnt about the three stages to the programme – Application; Applicant evidence gathering; Assessment and statement of outcomes. The visitors felt that the Application stage of the programme was the equivalent of HPC's programme admissions.

During the programme team meeting, the visitors learnt that expert panels would be used to determine the suitability of any qualifications, criminal convictions or health requirements as part of the admissions procedures for the programme. However from the documentation submitted prior to the visit, the visitors could not identify any information provided to applicants about compliance with any health requirements. For example the visitors were uncertain of the processes to ensure the relevant vaccinations or occupational health assessments have been undertaken or that all reasonable steps/adjustments have been undertaken in line with equality and diversity law.

The visitors therefore require further information about the admissions procedures relating to compliance with any health requirements for all applicants to the programme in order to determine whether this standard is met.

2.5 The admissions procedures must apply selection and entry criteria, including appropriate academic and/or professional entry standards.

Condition: The education provider must apply selection and entry criteria including appropriate academic and/or professional entry standards for all applicants.

Reason: From the documentation received prior to the visit, the visitors learnt about the three stages to the programme – 'Application'; 'Applicant evidence gathering'; 'Assessment and statement of outcomes'. The visitors felt that the 'Application' stage of the programme was the equivalent of HPC's programme admissions.

During the programme team meeting, the visitors learnt that expert panels would be used to determine the suitability of any qualifications, criminal convictions or health requirements as part of the admissions procedures for the programme. From the Healthcare Scientist (Clinical Scientist) Equivalence application form the visitors noted that applicants were required to submit copies of their qualification certificates and professional references. However, the visitors could not locate further guidance for applicants to the programme or the expert panel as to what may be acceptable in terms of academic and/or professional entry for example, in terms of literacy or numeracy.

The visitors therefore require further information about the admissions procedures relating to academic and/or professional entry standards for all applicants to the programme in order to determine whether this standard is met.

2.6 The admissions procedures must apply selection and entry criteria, including accreditation of prior (experiential) learning and other inclusion mechanisms.

Condition: The education provider must apply selection and entry criteria including accreditation of prior (experiential) learning and other inclusion mechanisms for all applicants.

Reason: From the documentation received prior to the visit, the visitors learnt about the three stages to the programme – Application; Applicant evidence gathering; Assessment and statement of outcomes. The visitors felt that the Application stage of the programme was the equivalent of HPC's programme admissions.

During the programme team meeting, the visitors learnt that expert panels would be used to determine the suitability of any qualifications, criminal convictions or health requirements as part of the admissions procedures for the programme. From the Healthcare Scientist (Clinical Scientist) Equivalence application form the visitors noted that applicants were required to submit copies of their qualification certificates and professional references. However from their review of the application form the visitors could not determine whether these requirements related to an APEL policy or other inclusion. The visitors therefore require further information about the admissions procedures relating to accreditation of prior (experiential) learning and other inclusion mechanisms for all applicants to the programme in order to determine whether this standard is met.

2.7 The admissions procedures must ensure that the education provider has equality and diversity policies in relation to applicants and students, together with an indication of how these will be implemented and monitored.

Condition: The education provider must submit information outlining the equality and diversity policies in relation to applicants and students, together with an indication of how these will be implemented and monitored.

Reason: From the documentation received prior to the visit, the visitors could not determine the equality and diversity policies in place to monitor the applicants to the programme or the students undertaking the programme. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors require evidence of the equality and diversity policies in place together with an indication of how they are implemented and monitored in order to determine whether this standard has been met.

3.1 The programme must have a secure place in the education provider's business plan.

Condition: The programme team must provide evidence that the programme has a secure place in the education provider's business plan.

Reason: From discussions with the senior and programme teams, the visitors learnt of the commitment from the four Senior Scientific Officers for the UK for the programme and that the programme has funding in place until April 2013. The programme team also discussed their plans to move to self-funding for the programme as soon as is possible and that they are currently working on a business plan which outlines this. To ensure the programme has enough resources to deliver the programme, any risks or threats to the programme are very limited, and there is a future for the programme, the visitors require information which demonstrates the security of the programme for this standard to be met.

3.2 The programme must be effectively managed.

Condition: The education provider must demonstrate there are effective systems in place to manage the programme.

Reason: From the documentation received prior to the visit, the visitors learnt that 'Decisions on equivalence are based on programme and learning outcomes articulated in the MSC curricula, and the work-based specific outcomes/competencies set out in the Learning Guides as well as in the academic component of the curricula' (Programme handbook, page 21). The visitors therefore felt the programme and learning outcomes of the STP played a key role in the 'Assessment and statement of outcomes stage' of the programme. The visitors were uncertain of the processes in place for the programme to keep up to date with any changes to the programme or learning outcomes of the STP and how these would then be incorporated into the 'Assessment and statement of outcomes' stage of the programme.

From the discussions with the programme team, the visitors identified three groups of students who will be using the programme as a route to the HPC Register from discussions with the programme team. The first group will be individuals who had obtained their qualifications and/or experience either internationally or in the UK. The second group will be the students who are currently on the pilot STP and working towards the Certificate of Attainment. As these students started the STP before the Certificate of Attainment gained HPC approval, their qualification will not allow them to apply to the HPC Register upon successful completion. The third group will be individuals for whom it is identified, during the assessment of their qualifications and experience, they have not met the specified programme outcomes for the STP in their chosen modality and are required to gain further training or experience. When looking across the standards, the visitors felt that a number of them could be met in a different way for each group they had identified. For example, the visitors could envisage different processes within the 'Application' and 'Assessment and statement of outcomes' stages for those students applying with international qualifications/experience and someone who has undertaken the STP. Where this leads to differences in the processes for the three stages of the programme, the

visitors require further evidence applicable to the relevant SET so that ultimately they can be confident the programme is effectively managed.

The visitors therefore require further evidence demonstrating how the programme is effectively managed.

3.3 The programme must have regular monitoring and evaluation systems in place.

Condition: The education provider must submit further evidence regarding the systems in place for monitoring and evaluation of the programme.

Reason: From the programme handbook (page 14) the visitors learnt of the governance processes in place for the programme. For example, 'National as well as local oversight of the Certificate of Equivalence to allow readjustment of national standards where necessary' and 'Feedback loops into the bodies responsible for curricula and assessment system development through the Specialist Advisory Group structure within the AHCS'. From the programme team meeting the visitors learnt that the detail within the governance documentation was in the process of being developed.

During the visit it was clarified that should the programme gain HPC approval, the education provider will be required to submit documentation from their monitoring and evaluation systems as part of HPC's monitoring processes (annual monitoring and major change) to ensure the programme continues to meet the SETs.

The visitors therefore require further information which shows how the monitoring and evaluation systems in place are appropriate to, and effective for, the programme and how any information gathered is acted upon.

3.4 There must be a named person who has overall professional responsibility for the programme who must be appropriately qualified and experienced and, unless other arrangements are agreed, be on the relevant part of the Register.

Condition: The education provider must ensure the individual with overall responsibility for the programme is appropriately qualified and experienced and, unless other arrangements are agreed, be on the relevant part of the Register.

Reason: Prior to the visit the visitors did not receive evidence relating to whom the education provider considers to hold overall professional responsibility for the programme. From discussions with the programme team, the visitors learnt the education provider is in the process of recruiting Professional Group Chairs to head up 8 professional themed groups. The professional groups will have a variety of responsibilities within the 'Assessment and statement of outcomes' stage (Assessors) and providing advice to the Council. It is the education providers intention that the Professional Group Chairs are the equivalent of the person who has overall professional responsibility for the themed group. The education provider recognises that for the purposes of this standard, one individual should be named as having overall responsibility for the whole

programme. The visitors therefore require evidence of who this individual is along with information about their qualifications and experience to ensure this standard is met.

3.5 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

Condition: The education provider must demonstrate there is an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

Reason: Prior to the visit the visitors did not receive evidence relating to the number of appropriately qualified and experienced staff in place to deliver an effective programme. From the programme team meeting, the visitors learnt that Executive members of the education provider have been recruited but the permanent administrative support had not yet been recruited. It was confirmed that once the operational processes had been finalised, then the number and experience of the administrative staff would be determined and recruited. The visitors were unsure of the role the administrative staff would play within the three stages of the programme.

Also from discussions with the programme team, the visitors learnt the education provider is in the process of recruiting Professional Group Chairs to head up 8 professional themed groups. Once the Professional Group Chairs have been recruited the education provider will recruit members to the groups. It is the education provider's intention that this will be completed by September 2012. The professional groups will have a variety of responsibilities within the 'Assessment and statement of outcomes' stage (Assessors) and providing advice to the Council.

The visitors therefore require further information in order to determine whether this standard has been met.

3.6 Subject areas must be taught by staff with relevant specialist expertise and knowledge.

Condition: The education provider must demonstrate that staff with specialist expertise and knowledge deliver the programme.

Reason: Prior to the visit the visitors did not receive evidence relating to who was delivering the programme. From discussions with the programme team, the visitors learnt the education provider is in the process of recruiting Professional Group Chairs to head up 8 professional themed groups. Once the Professional Group Chairs have been recruited the education provider will recruit members to the groups. It is the education provider's intention that this will be completed by September 2012. The professional groups will be the subject experts and will have a variety of responsibilities within the 'Assessment and statement of outcomes' stage and providing advice to the Council. The visitors therefore require further information in order to determine whether this standard has been met.

3.7 A programme for staff development must be in place to ensure continuing professional and research development.

Condition: The education provider must provide further information about the programme for staff development related to the Professional Groups.

Reason: From discussions with the programme team, the visitors learnt the education provider is in the process of recruiting Professional Group Chairs to head up 8 professional themed groups. The professional groups will have a variety of responsibilities within the 'Assessment and statement of outcomes' stage (Assessors) and providing advice to the education providers Council. Once the Professional Group Chairs have been recruited the education provider will recruit members to the themed groups. The visitors learnt that a programme for staff development was being developed for the professional groups but was not currently in place. The visitors felt it was important that members of this group, as part of their continuing professional development, continued to keep up to date with any developments within the role they are undertaking. The visitors therefore require further information relating to a staff development policy which ensures these individuals keep up to date with continuing professional development.

3.8 The resources to support student learning in all settings must be effectively used.

Condition: The education provider must submit evidence which shows how they ensure the resources to support student learning in all settings are effectively used.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensures the resources to support student learning in all settings are effectively used. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met.

The visitors therefore require information relating to how the education provider ensures the resources to support student learning in all settings are effectively used.

3.9 The resources to support student learning in all settings must effectively support the required learning and teaching activities of the programme.

Condition: The education provider must submit evidence to show how they ensure the resources to support student learning in all settings effectively support the required learning and teaching activities of the programme.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensured the resources to support student learning in all settings effectively support the required learning and teaching activities. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met.

The visitors therefore require information relating to how the education provider ensures the resources to support student learning in all settings effectively support the required learning and teaching activities.

3.10 The learning resources, including IT facilities, must be appropriate to the curriculum and must be readily available to students and staff.

Condition: The education provider must submit evidence which shows how they ensure the resources, including IT facilities, are appropriate to the curriculum and are readily available to students and staff.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensured the resources, including IT facilities, are appropriate to the curriculum and are readily available to students and staff. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met.

The visitors therefore require information relating to how the education provider ensures the resources, including IT facilities, are appropriate to the curriculum and are readily available to students and staff.

3.11 There must be adequate and accessible facilities to support the welfare and wellbeing of students in all settings.

Condition: The education provider must submit evidence which shows how they ensure that the facilities to support the welfare and wellbeing of students in all settings are adequate and accessible.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensured the facilities to support the welfare and wellbeing of students in all settings are adequate and accessible. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met.

The visitors therefore require information relating to how the education provider ensures the facilities to support the welfare and wellbeing of students in all settings are adequate and accessible.

3.12 There must be a system of academic and pastoral student support in place.

Condition: The education provider must demonstrate the system of academic and pastoral student support in place.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensured a system of academic and pastoral student support is in place. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met.

The visitors therefore require information relating to how the education provider ensures a system of academic and pastoral student support is in place.

3.13 There must be a student complaints process in place.

Condition: The education provider must submit evidence of the student complaints process in place.

Reason: From the documentation received prior to the visit, the visitors could not determine the student complaints process in place. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met.

The visitors therefore require information relating to the student complaints to be submitted in order to determine whether this standard is met.

3.14 Where students participate as service users in practical and clinical teaching, appropriate protocols must be used to obtain their consent.

Condition: The education provider must submit evidence which shows how they ensure that where students participate as service users in practical or clinical teaching, appropriate protocols are in place to obtain their consent.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensured appropriate protocols are in place when student participate as service users. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met.

The visitors therefore require information relating to how the education provider ensures appropriate protocols are in place when student participate as service users.

3.15 Throughout the course of the programme, the education provider must have identified where attendance is mandatory and must have associated monitoring mechanisms in place.

Condition: The education provider must submit evidence which shows how they ensure that where attendance is mandatory it is identified and associated monitoring mechanisms are in place.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensured where attendance is mandatory it is identified and that associated monitoring mechanisms are in place. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met.

The visitors therefore require information relating to how the education provider ensures where attendance is mandatory it is identified and that associated monitoring mechanisms are in place.

3.16 There must be a process in place throughout the programme for dealing with concerns about students' profession-related conduct.

Condition: The education provider must submit evidence which shows how they ensure a process for dealing with concerns about students' profession-related conduct is in place.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensured a process for dealing with concerns about students' profession-related conduct is in place. From the programme team meeting the visitors identified three groups of students who would be using the programme as a route to the HPC Register. The first group would be individuals who had obtained their qualifications and/or experience either internationally or in the UK. The second group would be the students who are currently on the pilot STP and working towards the Certificate of Attainment. As these students started the STP before the Certificate of Attainment gained HPC approval, they will not be eligible to apply to the HPC Register upon successful completion. The third group would be individuals for whom it is identified, during the assessment of their qualifications and experience, they had not met the specified programme outcomes for the STP in their chosen modality and are required to gain further training or experience.

Also within the programme team meeting the visitors learnt that a concern about a student's profession-related conduct would be picked up through the character reference which was required upon application to the programme. For those

individuals who were required to undertake additional training or experience, any concerns would be identified as part of the additional training within the STP.

The visitors felt it was important to document these processes so that all involved know about and can identify an individual who may not be fit to practise and help them address any concerns about their conduct. The visitors therefore require information relating to how the education provider ensures processes for dealing with concerns about students' profession-related conduct are in place.

4.1 The learning outcomes must ensure that those who successfully complete the programme meet the standards of proficiency for their part of the Register.

Condition: The education provider must ensure those who successfully complete the programme meet the standards of proficiency (SOPs) for Clinical science.

Reason: From the documentation received prior to the visit, the visitors learnt that 'Decisions on equivalence are based on programme and learning outcomes articulated in the MSC curricula, and the work-based specific outcomes/competencies set out in the Learning Guides as well as in the academic component of the curricula' (Programme handbook, page 21). This was reconfirmed during the programme team meeting. The visitors therefore felt that as the programme uses the programme and learning outcomes of the STP to determine whether the learning outcomes of the programme have been met, it was important to demonstrate the programme and learning outcomes of the STP meet the SOPs.

The learning outcomes for the STP were reviewed as part of the stage 1 assessment of the SOPs. Documentation submitted by the programme team in relation to the learning outcomes, indicative content and competences of the academic and work-based learning elements of the STP was reviewed. The visitors also received a small amount of information relating to how education provider contributed to the achievement of the SOPs. This assessment was conducted in April 2012 and the feedback/queries submitted to the programme team prior to the visit. The information submitted to the programme team consisted of generic (across the modalities) and modality specific feedback/queries. Unfortunately at the visit it was not possible to discuss the SOPs in more detail as profession/modality specific representatives were unable to attend. It was agreed with the programme team at the visit to incorporate the feedback/queries relating to stage 1 into the visitors' report and the programme team would respond upon receipt of the report. The full outcomes from the stage 1 assessment can be found in Appendix 1 to this report.

The visitors would also like to clarify the processes used in the 'Assessment and statement of outcomes' stage of the programme. For example, what expectations or parameters do the Assessors use when reviewing an individual's qualifications and experience and what do they consider to be appropriate in order for the learning outcomes to be met. The visitors felt it was important to receive further information outlining the expectations or parameters relating to the learning outcomes in order for them to determine whether the HPC SET has been met.

The visitors therefore require further information which demonstrates how someone who successfully completes the programme can meet the SOPs for Clinical science.

4.3 Integration of theory and practice must be central to the curriculum.

Condition: The education provider must submit evidence which shows how they ensure the integration of theory and practice is central to the curriculum.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensures theory and practice is central to the curriculum. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met.

The visitors therefore require information relating to how the education provider ensures integration of theory and practice is central to the curriculum.

4.4 The curriculum must remain relevant to current practice.

Condition: The education provider must demonstrate the curriculum remains relevant to current practice.

Reason: From the documentation received prior to the visit, the visitors learnt that 'Decisions on equivalence are based on programme and learning outcomes articulated in the MSC curricula, and the work-based specific outcomes/competencies set out in the Learning Guides as well as in the academic component of the curricula' (Programme handbook, page 21). The visitors therefore felt that as the programme uses the programme and learning outcomes of the STP to determine whether the learning outcomes of the programme have been met, it was important to demonstrate the programme and learning outcomes of the STP remain relevant to the current practice.

The visitors noted that in the documentation provided prior to the visit 'The process for formal review and governance of the curricula change is currently under development' (Programme Handbook, page 8) in relation to the STP. From the meeting with the senior team the visitors heard that the curricula would be reviewed on a three yearly cycle and that all parties (including the education provider) would be involved with these changes.

The visitors also learnt from the programme documentation of the governance arrangement; 'Feedback loops into the bodies responsible for curricula and

assessment system development through the Specialist Advisory Groups structure within the AHCS' (Programme handbook, page 21). However, the visitors did not receive any further information as to how this worked to ensure any changes within the programme or learning outcomes of the STP were reflected within the 'Assessment and statement of outcomes' stage of the programme. The visitors were therefore unsure how the programme remained relevant to current practice and require further information to demonstrate this standard is met.

4.5 The curriculum must make sure that students understand the implications of the HPC's standards of conduct, performance and ethics.

Conduct: The education provider must submit evidence of how they ensure students understand the implications of the HPC's standards of conduct, performance and ethics.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensures students understand the implications of the HPC's standards of conduct, performance and ethics. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met.
The visitors therefore require information which demonstrates how students understand the implications of the HPC's standards of conduct, performance and ethics.

4.6 The delivery of the programme must support and develop autonomous and reflective thinking.

Condition: The education provider must submit evidence which show how they ensure the delivery of the programme supports and develops autonomous and reflective thinking.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensured the delivery of the programme supports and develops autonomous and reflective thinking. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs

have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met. The visitors therefore require information which ensures the delivery of the programme supports and develops autonomous and reflective thinking.

4.7 The delivery of the programme must encourage evidence based practice.

Condition: The education provider must submit evidence which shows how they ensure evidence based practice has been encouraged.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensured evidence based practice has been encouraged. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met. The visitors therefore require information which demonstrates how the programme ensures evidence based practice has been encouraged.

4.8 The range of learning and teaching approaches used must be appropriate to the effective delivery of the curriculum.

Condition: The education provider must submit evidence which shows how they ensure the range of learning and teaching approaches used are appropriate to the effective delivery of the curriculum.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensures the range of learning and teaching approaches used are appropriate to the effective delivery of the curriculum. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. The visitors also learnt that due to the nature of the programme, an assessment of an individual's prior qualifications and experience, some of the processes or mechanisms to be developed may ensure the evidence under review meets the standard. If this is the case the visitors will want to receive information about the expectations or parameters used during the assessment in order for them to determine whether the HPC SET has been met.

The visitors therefore require information which shows how the education provider ensures the range of learning and teaching approaches used are appropriate to the effective delivery of the curriculum.

4.9 When there is interprofessional learning the profession-specific skills and knowledge of each professional group must be adequately addressed.

Condition: The education provider must submit evidence which shows how they ensure where there is interpofessional learning, the profession-specific skills and knowledge of each professional group are adequately addressed.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensures where there is interpofessional learning, the profession-specific skills and knowledge of each professional group are adequately addressed. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met.

The visitors therefore require information which ensures where there is interpofessional learning, the profession-specific skills and knowledge of each professional group must be adequately addressed.

5.1 Practice placements must be integral to the programme.

Condition: The education provider must submit evidence which shows how they ensure practice placements are integral to the programme.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensures practice placements are integral to the programme. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them

to determine whether the HPC SET has been met. The visitors therefore require information which ensures practice placements are integral to the programme.

5.2 The number, duration and range of practice placements must be appropriate to support the delivery of the programme and the achievement of the learning outcomes.

Condition: The education provider must submit evidence which shows how they ensure the number, duration and range of practice placements are appropriate to support the delivery of the programme and the achievement of the learning outcomes.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensured the number, duration and range of practice placements are appropriate to support the delivery of the programme and the achievement of the learning outcomes. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met.

The visitors therefore require information which demonstrates how the education provider ensures the number, duration and range of practice placements are appropriate to support the delivery of the programme and the achievement of the learning outcomes.

5.3 The practice placement settings must provide a safe and supportive environment.

Condition: The education provider must submit evidence which shows how they ensure practice placements provide a safe and supportive environment.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensures practice placements provide a safe and supportive environment. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information

about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met. The visitors therefore require information which ensures practice placements provide a safe and supportive environment.

5.4 The education provider must maintain a thorough and effective system for approving and monitoring all placements.

Condition: The education provider must submit evidence which shows how they ensure a thorough and effective system for approving and monitoring all placements.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensured a thorough and effective system was in place for approving and monitoring all placements. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met. The visitors therefore require information which demonstrates how the education provider ensures a thorough and effective system is in place for approving and monitoring all placements.

5.5 The placement providers must have equality and diversity policies in relation to students, together with an indication of how these will be implemented and monitored.

Condition: The education provider must submit evidence which shows how they ensure practice placements have equality and diversity policies in place, and how these are implemented and monitored.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensured practice placements have equality and diversity policies in place, and how these are implemented and monitored. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them

to determine whether the HPC SET has been met. The visitors therefore require information which demonstrates how the education provider ensures practice placements have equality and diversity policies in place, together with how these are implemented and monitored.

5.6 There must be an adequate number of appropriately qualified and experienced staff at the practice placement setting.

Condition: The education provider must submit evidence which shows how they ensure practice placements have an adequate number of appropriately qualified and experienced staff.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensured practice placements have an adequate number of appropriately qualified and experienced staff. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met. The visitors therefore require information which demonstrates how the education provider ensures practice placements have an adequate number of appropriately qualified and experienced staff.

5.7 Practice placement educators must have relevant knowledge, skills and experience.

Condition: The education provider must submit evidence which shows how they ensure practice placement educators have the relevant knowledge, skills and experience.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensures practice placements educators have the relevant knowledge, skills and experience. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the

HPC SET has been met. The visitors therefore require information which demonstrates how the education provider ensures educators have the relevant knowledge, skills and experience.

5.8 Practice placement educators must undertake appropriate practice placement educator training.

Condition: The education provider must submit evidence which shows how they ensure practice placement educators have undertaken appropriate practice placement educator training.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensured placement educators have undertaken appropriate practice placement educator training. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met. The visitors therefore require information which demonstrates how the education provider ensures placement educators have undertaken appropriate practice placement educator training.

5.9 Practice placement educators must be appropriately registered, unless other arrangements are agreed.

Condition: The education provider must submit evidence which shows how they ensure practice placement educators are appropriately registered, unless other arrangements are agreed.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensured practice placements educators are appropriately registered, unless other arrangements are agreed. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met. The visitors therefore require information which demonstrates how the education provider ensures practice

placement educators are appropriately registered, unless other arrangements are agreed.

5.10 There must be regular and effective collaboration between the education provider and the practice placement provider.

Condition: The education provider must submit evidence which shows how they ensure there is regular and effective collaboration between the academic and practice placement environment.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensures there is regular and effective collaboration between the academic and practice placement environment. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met. The visitors therefore require information which demonstrates how the education provider ensures there is regular and effective collaboration between the academic and practice placement environment.

5.11 Students, practice placement providers and practice placement educators must be fully prepared for placement which will include information about an understanding of:
  - **the learning outcomes to be achieved;**
  - **the timings and the duration of any placement experience and associated records to be maintained;**
  - **expectations of professional conduct;**
  - **the assessment procedures including the implications of, and any action to be taken in the case of, failure to progress; and**
  - **communication and lines of responsibility.**

Condition: The education provider must submit evidence which shows how they ensure students, practice placement providers and educators are fully prepared for placement.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensured students, practice placement providers and educators are fully prepared for placement. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is

a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met. The visitors therefore require information which demonstrates how the education provider ensures students, practice placement providers and educators are fully prepared for placement.

5.12 Learning, teaching and supervision must encourage safe and effective practice, independent learning and professional conduct.

Condition: The education provider must submit evidence which shows how they ensure learning, teaching and supervision encouraged safe and effective practice, independent learning and professional conduct.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensured learning, teaching and supervision encouraged safe and effective practice, independent learning and professional conduct. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met. The visitors therefore require information which demonstrates how the education provider ensures learning, teaching and supervision encouraged safe and effective practice, independent learning and professional conduct.

5.13 A range of learning and teaching methods that respect the rights and needs of service users and colleagues must be in place throughout practice placements.

Condition: The education provider must submit evidence which shows how they ensure a range of learning and teaching methods that respects the rights and needs of service users and colleagues are in place throughout practice placements.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensured a range of learning and teaching methods that respected the rights and needs of service users and colleagues were in place throughout practice placements. Within the programme team meeting, the visitors were made aware that some policies and procedures were

in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met. The visitors therefore require information which demonstrates how the education provider ensures a range of learning and teaching methods that respects the rights and needs of service users and colleagues were in place throughout practice placements.

6.1 The assessment strategy and design must ensure that the student who successfully completes the programme has met the standards of proficiency for their part of the Register.

Condition: The education provider must submit evidence which shows how the assessment strategy and design ensures that a student who successfully completes the programme has met all the standards of proficiency for Clinical science.

Reason: From the documentation received prior to the visit, the visitors learnt about the assessment processes to be undertaken as part of the 'Assessment and statement of outcomes' stage once an individual 'has confirmed completion of compilation of evidence for the outcomes from the relevant MSC curriculum' (Guidance on the equivalence process, page 10). However, from this documentation the visitors could not identify the assessment criteria the Assessors were to use when undertaking the assessment to ensure a consistent approach to the assessment across the different Assessors and Professional Groups. For example, the visitors were unable to identify the compulsory learning outcomes; the number of times an individual's evidence can be granted an opportunity for further assessment; or the number of times an individual can apply to the programme and be rejected.

Within the programme team meeting the visitors learnt that due to the nature of the programme, an assessment of an individual's prior qualifications and experience, some of the processes or mechanisms to be developed may ensure the evidence under review meets the standard. If for example these mechanisms will check to see how may resits an individual was allowed or the maximum length of the qualification undertake, visitors will want to receive information about the expectations or parameters used during the assessment in order for them to determine whether the HPC SET has been met.

The visitors therefore require information which shows how the assessment strategy and design ensures that a student who successfully completes the programme has met all the standards of proficiency for Clinical science.

6.2 All assessments must provide a rigorous and effective process by which compliance with external-reference frameworks can be measured.

Condition: The education provider must articulate how assessments provide a rigorous and effective process by which compliance with external-reference frameworks can be measured.

Reason: From the documentation received prior to the visit, the visitors learnt that 'Decisions on equivalence are based on programme and learning outcomes articulated in the MSC curricula, and the work-based specific outcomes/competencies set out in the Learning Guides as well as in the academic component of the curricula' (Programme handbook, page 21). This was reconfirmed during the programme team meeting. From the documentation received prior to the visit and in discussions with the programme team, the visitors noted in the description of the learning outcomes some elements of the STP did not reflect the level stated by the Quality Assurance Agency for Higher Education guidelines for Masters programmes. For example the visitors felt that learning outcomes which started with 'know' or 'understand' did not clearly article that a student would be assessed at a Masters level. The pre-fixes 'know' and 'understand' do not appear in the QAA framework, rather the pre-fixes 'critically reflect on' or 'show a deep understanding of' appear. The visitors recognise that the standards of proficiency are set at a threshold level and often start with 'know how to' or 'understand'. However, as the 'Assessment and statement of outcomes' stage of the programme utilises the programme and learning outcomes of the STP and this is set at a Masters level, the visitors were concerned they may not be assessed at Masters level as the outcomes do not provide clear statements about the level of assessment expected.

The visitors therefore require further information which shows how the assessments within the programme provide a rigorous and effective process by which compliance with external reference framework for Masters level can be measured.

6.3 Professional aspects of practice must be integral to the assessment procedures in both the education setting and practice placement setting.

Condition: The education provider must submit evidence which shows how they ensure professional aspects of practice are integral to the assessment procedures within the academic and practice placement environment.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensures professional aspects of practice are integral to the assessment procedures within the academic and practice placement environment. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors also learnt that as the design of the programme is a review of qualifications and experience already undertaken, the education provider may design policies/mechanisms to ensure the SETs have been evidenced within the

individual submissions and therefore demonstrate that they have been met retrospectively. If this is the case, the visitors will want to receive information about the expectations or parameters used during the 'Assessment and statement of outcomes' stage in order for them to determine whether the HPC SET has been met. The visitors therefore require information which demonstrates how the education provider ensures professional aspects of practice are integral to the assessment procedures within the academic and practice placement environment.

6.4 Assessment methods must be employed that measure the learning outcomes.

Condition: The education provider must submit evidence which demonstrates how the assessment methods employed measure the learning outcomes.

Reason: From the documentation received prior to the visit, the visitors learnt that 'Decisions on equivalence are based on programme and learning outcomes articulated in the MSC curricula, and the work-based specific outcomes/competencies set out in the Learning Guides as well as in the academic component of the curricula' (Programme handbook, page 21). The visitors also learnt from the programme team meeting that this would be undertaken by appropriately trained Assessors who are experts from the Professional Groups. However, the visitors were unable to determine as part of the assessment methods what expectations or parameters the Assessors would use when reviewing the learning outcomes and what the education provider considered to be appropriate in order for the Assessors to determine they had been met. The visitors felt it was important to receive further information outlining the assessment methods, including the expectations and parameters relating to the learning outcomes, in order for them to determine whether the HPC SET has been met.

The visitors therefore require evidence which demonstrates how the assessment methods employed measure the learning outcomes.

6.5 The measurement of student performance must be objective and ensure fitness to practise.

Condition: The education provider must submit evidence which shows how they ensure the measurement of student performance is objective and ensures fitness to practise.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensures the measurement of student performance is objective and ensures fitness to practise. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors therefore require information which demonstrates how they ensure the measurement of student performance is objective and ensures fitness to practise.

6.6 There must be effective monitoring and evaluation mechanisms in place to ensure appropriate standards in the assessment.

Condition: The education provider must submit evidence which shows how they ensure there are effective monitoring and evaluation mechanisms in place to ensure appropriate standards in assessment.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensured there are effective monitoring and evaluation mechanisms in place to ensure appropriate standards in assessment. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit.

The visitors could also not determine any external examining arrangements in place for the programme. The role of an external examiner is to monitor the assessment for all aspects of a programme to ensure they are meeting professional and academic standards.

The visitors therefore require information which demonstrates how they ensure effective monitoring and evaluation mechanisms are in place to ensure appropriate standards in assessment.

6.7 Assessment regulations must clearly specify requirements for student progression and achievement within the programme.

Condition: The education provider must submit evidence which shows how they ensure assessment regulations clearly specify requirements for student progression and achievement.

Reason: From the documentation received prior to the visit, the visitors could not determine how the education provider ensures assessment regulations clearly specified requirements for student progression and achievement. Within the programme team meeting, the visitors were made aware that some policies and procedures were in the process of being developed or had been developed subsequent to the submission of documentation to the HPC. These were not provided to the visitors at the visit. The visitors therefore require information which demonstrates how they ensure assessment regulations clearly specify requirements for student progression and achievement.

6.8 Assessment regulations, or other relevant policies, must clearly specify requirements for approved programmes being the only programmes which contain any reference to an HPC protected title or part of the Register in their named award.

Condition: The education provider must revisit the programme documentation to clearly articulate there are no exit awards from the programme which provide eligibility for admission to the HPC Register.

Reason: From discussions with the programme team the visitors were satisfied there are no exit awards from the programme and the only programme which provides eligibility to apply to the Register would be the Certificate of Equivalence. However, the visitors could not determine where within the assessment regulations or other documentation this was clearly stated. The visitors felt there was a possibility for confusion by students as the assessment regulations did not clearly state there were no exit awards and the Certificate of Equivalence was the only programme which would provide eligibility to the HPC Register. The visitors therefore require updated information to ensure this standard is met.

6.9 Assessment regulations must clearly specify requirements for an aegrotat award not to provide eligibility for admission to the Register.

Condition: The education provider must revisit the programme documentation to clearly articulate that any aegrotat awards do not provide eligibility to apply to the Register.

Reason: From the documentation received prior to the visit, the visitors could not determine where within the assessment regulations or other documentation where it was clearly stated that any aegrotat awards do not provide eligibility to apply to the HPC Register. The visitors felt that to provide all with clear information about whether it was possible to receive an aegrotat award from this programme and if possible, that it did not provide eligibility to apply to the Register, the visitors therefore require updated information to ensure this standard is met.

6.11 Assessment regulations must clearly specify requirements for the appointment of at least one external examiner who must be appropriately experienced and qualified and, unless other arrangements are agreed, be from the relevant part of the Register.

Condition: The education provider must include a clear statement in the programme documentation that at least one external examiner for the programme will be from the relevant part of the register unless other arrangements are agreed.

Reason: From the documentation received prior to the visit the visitors learnt that 'A random sample of assessments will be moderated by independent assessors' (Programme handbook, page 22). The visitors did not receive further information about this aspect of the equivalence process in order to determine whether this role equated to the role of an external examiner. The visitors therefore require further information which provides information about the external examining arrangements for the programme and which includes information about HPC's requirements for the appointment of at least one external examiner who must be appropriately experienced and qualified, and unless other arrangements are agreed, be from the relevant part of the Register.

Roland Fleck
Andrew Philips
Robert Munro

Appendix 1 - Academy for Healthcare Science

Certificate of Attainment, full time
Certificate of Equivalence, full time

Outcomes of the Stage 1 Assessment

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Audiology	1a.1 be able to practise within the legal and ethical boundaries of their profession	understand what is required of them by the Health Professions Council	The documentation refers to Programme Outcome 8 '…NHS values meets the professional standards defined by Good Scientific Practice' and Generic MSc curriculum p2, 8 - 'know the current structure, management, legal framework …. within the NHS.' This does not specifically relate to what is required of them by the HPC.

No mention of HPC requirements, need to maintain registration, what to report to HPC, etc. |

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Audiology	**1a.8 understand the obligation to maintain fitness to practise**	understand the importance of maintaining their own health	The programme handbook referred to employers undertaking an Occupational Health assessment but these did not demonstrate how an individual would understand the importance of maintaining their own health.
Audiology	**1b.1 be able to work, where appropriate, in partnership with other professionals, support staff, service users, and their relatives and carers**	understand the need to engage service users and carers in planning and evaluating diagnostics, treatments and interventions to meet their needs and goals	Can find information about developing plans for service users but unable to find information about engaging service users in the development of their plans.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
		be able to make appropriate referrals	Able to find information about referrals being received by an individual but unable to find information about the individual being able to make referrals.
Audiology	1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users, their relatives and carers	be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5	The programme handbook mentions that the Academy will undertake an English language test upon submission of an individual's evidence, if necessary. No information was provided about when this would be necessary and how it would be tested.
		understand how communications skills affect the assessment of service users and how the means of communication should be modified to address and take account of factors such as age, physical ability and learning ability	Unable to find information about '…how the means of communication should be modified to address and take account of factors such as age, physical ability and learning ability' for example, for individuals with hearing, visual and neurological disabilities.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
		be able to select, move between and use appropriate forms of verbal and non-verbal communication with service users and others	'Moving' between communication types is not fully developed
		be aware of characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status	Can find information about non-verbal communication but unable to find '…how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio economic status.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
		understand the need to provide service users (or people acting on their behalf) with the information necessary to enable them to make informed decisions	Can find evidence about communicating sensitively and effectively but unable to find evidence about 'understand the need to provide….enabling service users to make informed decisions'.
		understand the need to use an appropriate interpreter to assist patients whose first language is not English, wherever possible	The specific use of an interpreter is not stated. Engaging relatives is mentioned but in the interests of confidentiality may not always be appropriate.
		recognise that relationships with service users should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility	Satisfied that individuals would be able to recognise that relationships with service users should be based on mutual respect and trust…'. Unable to find eference to 'be able to maintain high standards of care even in situations of personal incompatibility'.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Audiology	2a.2 be able to select and use appropriate assessment techniques	be able to undertake and record a thorough, sensitive and detailed assessment, using appropriate techniques and equipment	Able to find subjective and objective hearing tests but not subjective and objective balance tests. Assessment of children's hearing – competences allow an individual to assist in this but unable to find information about an individual being able to undertake and record ….'.
Audiology	2a.3 be able to undertake or arrange investigations as appropriate	N/A	Balanced assessment – able to find information relating to hearing tests but not about balance tests. Assessment of children's hearing – competences allow an individual to assist in this but unable to find information about an individual being '…able to undertake or arrange….'.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Audiology	**2a.4 be able to analyse and critically evaluate the information collected**	N/A	Unable to find information about being able to analyse and critically evaluation the information collected from a balance assessment.
Audiology	**2b.1 be able to use research, reasoning and problem solving skills to determine appropriate actions**	be able to interpret data and provide diagnostic and therapeutic opinions, including any further action which the individual directly responsible for the care of the patient or service user should take	Unable to find how this relates to Balance assessment.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Audiology	2b.3 be able to formulate specific and appropriate management plans including the setting of timescales	understand the requirement to adapt practice to meet the needs of different groups distinguished by, for example, physical, psychological, environmental, cultural or socio-economic factors	Unable to find information about how individuals 'Understand the requirement to adapt practice… of different groups..' for example, for individuals with hearing, visual and neurological disabilities.
		be able to develop an investigation strategy which takes account of all the relevant clinical and other information available	Unable to find how this relates to Balance assessment.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Audiology	2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully	be able to perform a range of techniques employed in the modality	Unable to find how this relates to Balance assessment. Assessment of children's hearing – competences allow an individual to assist in this but unable to find information about an individual being '…able to perform….'.
		understand the need to conform to standard operating procedures and conditions	Able to find information about an individual demonstrating use of a Standard Operating Procedure. Does use of a procedure mean someone understands the need to conform to them?

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
		understand the need to work with accuracy and precision	Accuracy and precision is implied. For example Internal Quality Control (IQC) and External Quality Assessment (EQA) are mentioned and cited and to do this, individuals would need to understand the need to work with accuracy and precision. However as this is implied, then there is a need to clarify need for accuracy and precision.
Audiology	2c.1 be able to monitor and review the ongoing effectiveness of planned activity and modify it accordingly	be able to gather information, including qualitative and quantitative data, that helps to evaluate the responses of service users to their care	Able to find information about gathering information but unable to find information about '..that helps to evaluate the responses of service users to their care'.
		be able to evaluate intervention plans using recognised outcome measures and revise the plans as necessary in conjunction with the service user	Unable to find information about the outcome measures associated with Balance assessment or assessment of children's hearing.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
		recognise the need to monitor and evaluate the quality of practice and the value of contributing to the generation of data for quality assurance and improvement programmes	Unable to find information about the outcome measures associated with Balance assessment or assessment of children's hearing.
		be able to make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately	Unable to find information about the outcome measures associated with Balance assessment or assessment of children's hearing.
		be able to make judgements on the effectiveness of procedures	Unable to find information about the outcome measures associated with Balance assessment or assessment of children's hearing.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Audiology	2c.2 be able to audit, reflect on and review practice	recognise the value of case conferences and other methods of review	Unable to find information about case conferences etc.
		understand the importance of participating in accreditation systems related to the modality	Could not find reference to accreditation systems relating to modality.
Audiology	3a.1 know and understand the key concepts of the bodies of knowledge which are relevant to their profession-specific practice	understand the structure and function of the human body, relevant to their practice, together with a knowledge of health, disease, disorder and dysfunction	The detail and depth of knowledge relating to central and peripheral nerve function does not provide the detail and depth about brain function ie auditory processes disorders to meet this SOP.
		know the basic science underpinning the modality in which the registrant practises, understand relevant basic clinical medicine and be aware of the fundamental principles of clinical practice	The detail and depth of knowledge relating to central and peripheral nerve function does not provide the detail and depth about brain function ie auditory processes disorders to meet this SOP.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
		understand the wider clinical situation relevant to the patients presenting to the specialty	Unable to find information about how individuals would understand this in relation to factors such as age, physical ability and learning ability for example, for individuals with hearing, visual and neurological disabilities.
Audiology	**3a.2 know how professional principles are expressed and translated into action through a number of different approaches to practice, and how to select or modify approaches to meet the needs of an individual, groups or communities**	understand the clinical applications of the speciality and the consequences of decisions made upon actions and advice	Unable to find information about consequences of decisions associated with Balance assessment.
		understand the principles associated with a range of techniques employed in the modality	Unable to find information about this SOP in relation to Balance assessment.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
		know the standards of practice expected from techniques	Unable to find information about this SOP in relation to Balance assessment.
Audiology	**3a.3 understand the need to establish and maintain a safe practice environment**	be able to work safely, including being able to select appropriate hazard control and risk management, reduction or elimination techniques in a safe manner in accordance with health and safety legislation	H&S legislation covered. Unable to find mention of risk management, reduction or elimination techniques.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
		be able to select appropriate personal protective equipment and use it correctly	Can find references about Health & Safety at work but unable to find information about how to select appropriate personal protective equipment and use it correctly.
		be able to establish safe environments for practice, which minimise risks to service users, those treating them, and others, including the use of hazard control and particularly infection control	Able to find information about establishing a safe environment but unable to find information about how someone would minimise risk.
		be aware of immunisation requirements and the role of occupational health	The professional practice document talks about Health & Safety (COSHH, RIDDOR etc) but did not illustrate immunisation or the role of Occupational Health specifically.
		know the correct principles and applications of disinfectants, methods for sterilisation and decontamination, and for dealing with waste and spillages correctly	Refers to infection control but no direct reference to these factors.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Clinical Biochemistry	1.a.1 be able to practise within the legal and ethical boundaries of their profession	understand what is required of them by the Health Professions Council	The documentation refers to Programme Outcome 8 '…NHS values meets the professional standards defined by Good Scientific Practice' and Generic MSc urriculum p2, 8 - 'know the current structure, management, legal framework …. within the NHS.' This does not specifically relate to what is required of them by the HPC. No mention of HPC requirements, need to maintain registration, what to report to HPC, etc.
		be aware of current UK legislation applicable to work of their profession	Yes, but not complete eg Ionising radiation regulations not included.
Clinical Biochemistry	1a.8 understand the obligation to maintain fitness to practise	understand the need to maintain high standards of personal conduct	Paragraph cited does not specifically relate to this
		understand the importance of maintaining their own health	The programme handbook referred to employers undertaking an Occupational Health assessment but these did not demonstrate how an individual would understand the importance of maintaining their own health.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Clinical Biochemistry	1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users, their relatives and carers	be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5	The programme handbook mentions that the Academy will undertake an English language test upon submission of an individual's evidence, if necessary. No information was provided about when this would be necessary and how it would be tested.
		understand how communications skills affect the assessment of service users and how the means of communication should be modified to address and take account of factors such as age, physical ability and learning ability	The mapping document refers to the Professional Practice document, pages 4 & 5. On page 4 one of the competencies is 'Communicate effectively and sensitively with patients, relatives and carers across the age spectrum adapting communication style and language to the needs of listeners'. This contributes towards this SOP and there is a similar competence on Page 9 of the Generic curriculum, but this does not have 'adapting communication style and language to the needs of the listeners' included. Diversity seems to be covered in the curriculum; it just does not seem to be related to any specific competence.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
		understand the need to use an appropriate interpreter to assist patients whose first language is not English, wherever possible	The specific use of an interpreter is not stated. Engaging relatives is mentioned but in the interests of confidentiality may not always be appropriate.
Clinical Biochemistry	2b.1 be able to use research, reasoning and problem solving skills to determine appropriate actions	be able to perform the required experimental work and be able to produce and present the results (including statistical analysis)	I am unable to find evidence that there is a requirement to perform the experimental work. One can undertake a research project, assemble data and prepare the report, but other people may actually do the hands-on scientific work (in relation to clinical laboratory disciplines, this would mean actually working at the bench, performing the scientific analyses. My interpretation of this bullet point is that the registrant should actually be able to do this.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Clinical Biochemistry	2b.3 be able to formulate specific and appropriate management plans including the setting of timescales	be able to develop an investigation strategy which takes account of all the relevant clinical and other information available	Unable to find evidence of training or experience in developing such a strategy in the individual patient. One can undertake a research project, assemble data and prepare the report, but other people may actually do the hands-on scientific work (in relation to clinical laboratory disciplines), this would mean actually working at the bench, performing the scientific analyses. My interpretation of this bullet point is that the registrant should actually be able to do this.
Clinical Biochemistry	2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully	understand the need to work with accuracy and precision	Accuracy and precision is implied. For example Internal Quality Control (IQC) and External Quality Assessment (EQA) are mentioned and cited and to do this, individuals would need to understand the need to work with accuracy and precision. However as this is implied, then there is a need to clarify need for accuracy and precision.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Genetics	1.a.1 be able to practise within the legal and ethical boundaries of their profession	understand what is required of them by the Health Professions Council	The documentation refers to Programme Outcome 8 '…NHS values meets the professional standards defined by Good Scientific Practice' and Generic MSc curriculum p2, 8 - 'know the current structure, management, legal framework …. within the NHS.' This does not specifically relate to what is required of them by the HPC. No mention of HPC requirements, need to maintain registration, what to report to HPC, etc.
Genetics	1a.6 be able to practise as an autonomous professional, exercising their own professional judgement	know the limits of their practice and when to seek advice or refer to another professional	the documentation does not clearly show how individuals know their own practice or when individual's should refer to another professional. Page 5 of professional Practice document states 'Demonstrate effective negotiation skills including influencing colleagues' but feel this should be extended to cover when referring to another professional when necessary.
		recognise that they are personally responsible for and must be able to justify their decisions	Evidence does not clearly show how individuals are able to justify their own decisions.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
	1a.8 understand the obligation to maintain fitness to practise	understand the importance of maintaining their own health	The programme handbook referred to employers undertaking an Occupational Health assessment but these did not demonstrate how an individual would understand the importance of maintaining their own health.
Genetics	**1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users, their relatives and carers**	be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5	The programme handbook mentions that the Academy will undertake an English language test upon submission of an individual's evidence, if necessary. No information was provided about when this would be necessary and how it would be tested.
		understand the need to use an appropriate interpreter to assist patients whose first language is not English, wherever possible	The specific use of an interpreter is not stated. Engaging relatives is mentioned but in the interests of confidentiality may not always be appropriate.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
	2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully	ensure service users are positioned (and if necessary immobilised) for safe and effective interventions	Not applicable
		understand the need to work with accuracy and precision	Accuracy and precision is implied. For example Internal Quality Control (IQC) and External Quality Assessment (EQA) are mentioned and cited and to do this, individuals would need to understand the need to work with accuracy and precision. However as this is implied, then there is a need to clarify need for accuracy and precision.
Genetics	**3a.3 understand the need to establish and maintain a safe practice environment**	be able to work safely, including being able to select appropriate hazard control and risk management, reduction or elimination techniques in a safe manner in accordance with health and safety legislation	H&S legislation covered. Unable to find mention of risk management, reduction or elimination techniques.
		know the correct principles and applications of disinfectants, methods for sterilisation and decontamination, and for dealing with waste and spillages correctly	Information about 'dealing with waste' was required.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Clinical Immunology	1.a.1 be able to practise within the legal and ethical boundaries of their profession	understand what is required of them by the Health Professions Council	The documentation refers to Programme Outcome 8 '…NHS values meets the professional standards defined by Good Scientific Practice' and Generic MSc curriculum p2, 8 - 'know the current structure, management, legal framework …. within the NHS.' This does not specifically relate to what is required of them by the HPC. No mention of HPC requirements, need to maintain registration, what to report to HPC, etc.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Clinical Immunology	1a.3 understand the importance of and be able to maintain confidentiality	N/A	Page 11 of the MSc Generic Curriculum document states 'Principles, guidance and law with respect to … Confidentiality'. Someone will understand the importance of confidentiality but unable to find how someone will be able to maintain confidentiality.
Clinical Immunology	1a.6 be able to practise as an autonomous professional, exercising their own professional judgement	recognise that they are personally responsible for and must be able to justify their decisions	I can see that an individual would know about being personally responsible but can't see how someone would be able to justify their decisions.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Clinical Immunology	1a.8 understand the obligation to maintain fitness to practise	understand the need to maintain high standards of personal conduct	Unable to find references to areas of personal conduct outside of work ie anything which could be seen to be bringing the profession
		understand the importance of maintaining their own health	The programme handbook referred to employers undertaking an Occupational Health assessment but these did not demonstrate how an individual would understand the importance of maintaining their own health.
Clinical Immunology	1b.1 be able to work, where appropriate, in partnership with other professionals, support staff, service users, and their relatives and carers	be able to make appropriate referrals	Programme outcome 3 states '… a range of situations' could incorporate referrals but it is not clear and further clarification is needed. Does '…a range of situations' incorporate referrals and if so, what type of referrals does it cover?

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Clinical Immunology	1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users, their relatives and carers	be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5	The programme handbook mentions that the Academy will undertake an English language test upon submission of an individual's evidence, if necessary. No information was provided about when this would be necessary and how it would be tested.
		understand the need to provide service users (or people acting on their behalf) with the information necessary to enable them to make informed decisions	Can find evidence about communicating sensitively and effectively but unable to find evidence about 'understand the need to provide….enabling service users to make informed decisions'.
		understand the need to use an appropriate interpreter to assist patients whose first language is not English, wherever possible	The specific use of an interpreter is not stated. Engaging relatives is mentioned but in the interests of confidentiality may not always be appropriate.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Clinical Immunology	**1b.4 understand the need for effective communication throughout the care of the service user**	recognise the need to use interpersonal skills to encourage the active participation of service users	Can find information about communication with patients and other health care professionals. Unable to find information about how someone recognise the need to use interpersonal skills to encourage active participation of the service users.
Clinical Immunology	**2b.1 be able to use research, reasoning and problem solving skills to determine appropriate actions**	be able to interpret results in the light of existing knowledge and the hypothesis developed, and be able to formulate further research questions	Unable to find evidence of how someone would be able to formulate further research questions.
Clinical Immunology	**2b.2 be able to draw on appropriate knowledge and skills in order to make professional judgements**	be able to change their practice as needed to take account of new developments	Programme outcome 2 is 'a comprehensive understanding … which either indirectly or directly lead to improvement'. This may or may not mean that the individual needs to change their practice. The SOP says that the individual is 'able to change their practice'.
Clinical Immunology	**2b.3 be able to formulate specific and appropriate management plans including the setting of timescales**	understand the requirement to adapt practice to meet the needs of different groups distinguished by, for example, physical, psychological, environmental, cultural or socio-economic factors	Can find information about the different groups but can't find information about formulating different management plans.

		be able to develop an investigation strategy which takes account of all the relevant clinical and other information available	All references concern the individual in terms of time scales. Nothing about being able to develop an investigation strategy or management plans.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Clinical Immunology	2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully	understand the need to work with accuracy and precision	Accuracy and precision is implied. For example Internal Quality Control (IQC) and External Quality Assessment (EQA) are mentioned and cited and to do this, individuals would need to understand the need to work with accuracy and precision. However as this is implied, then there is a need to clarify need for accuracy and precision.
Clinical Immunology	2c.1 be able to monitor and review the ongoing effectiveness of planned activity and modify it accordingly	be able to evaluate intervention plans using recognised outcome measures and revise the plans as necessary in conjunction with the service user	The evidence mentions multi-disciplinary teams, but unable to find more detail about how this standard will be met in conjunction with all service users.
Clinical Immunology	3a.1 know and understand the key concepts of the bodies of knowledge which are relevant to their profession-specific practice	understand the wider clinical situation relevant to the patients presenting to the specialty	Immunology and other immunological problems are covered but I am unable to find the other problems impacting on the patient from other disciplines and the ability to understand the wider clinical situation.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Clinical Immunology	3a.2 know how professional principles are expressed and translated into action through a number of different approaches to practice, and how to select or modify approaches to meet the needs of an individual, groups or communities	understand the clinical applications of the speciality and the consequences of decisions made upon actions and advice	Can find information about understanding the clinical applications. Could not find any information about the consequences of decisions made upon actions and advice.
Clinical Immunology	3a.3 understand the need to establish and maintain a safe practice environment	be able to select appropriate personal protective equipment and use it correctly	Can find references about Health & Safety at work but unable to find information about how to select appropriate personal protective equipment and use it correctly.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Cellular Science	**1.a.1 be able to practise within the legal and ethical boundaries of their profession**	understand what is required of them by the Health Professions Council	The documentation refers to Programme Outcome 8 '…NHS values meets the professional standards defined by Good Scientific Practice' and Generic MSc curriculum p2, 8 - 'know the current structure, management, legal framework …. within the NHS.' This does not specifically relate to what is required of them by the HPC. No mention of HPC requirements, need to maintain registration, what to report to HPC, etc.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Cellular Science	1a.6 be able to practise as an autonomous professional, exercising their own professional judgement	recognise that they are personally responsible for and must be able to justify their decisions	Generic MSC curriculum page 12/13 I feel an added point regarding personal responsibility and ability to justify any decisions made by the scientist would clarify matters. Cellular Science Curriculum page 83, point 18 '...act autonomously in planning and implementing tasks at a professional level'. This could be clarified by adding 'and be able to take personal responsibility and justify any decisions made'.
Cellular Science	1a.8 understand the obligation to maintain fitness to practise	understand the need to practise safely and effectively within their scope of practice	This is broad - I do not feel the current curriculum or documents provide a true measure of this standard of proficiency.
		understand the importance of maintaining their own health	The programme handbook referred to employers undertaking an Occupational Health assessment but these did not demonstrate how an individual would understand the importance of maintaining their own health.
		understand the importance of maintaining their own health	COSHH is not identified specifically in learning outcomes. The COSHH regulations specifically make the point that the individual carries responsibility for their actions and health.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Cellular Science	**1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users, their relatives and carers**	be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5	The programme handbook mentions that the Academy will undertake an English language test upon submission of an individual's evidence, if necessary. No information was provided about when this would be necessary and how it would be tested.
		be able to select, move between and use appropriate forms of verbal and non-verbal communication with service users and others	'Moving' between communication types is not fully developed.
		be able to select, move between and use appropriate forms of verbal and non-verbal communication with service users and others	Much of the focus is on verbal communication.
		be aware of characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status	The focus of training is on verbal communication. There are critical points where "patient consent" may be required and there will be both verbal communication, discussion, questions answering and written documentation and sign off. Need to explore more how this will be developed.
		understand the need to use an appropriate interpreter to assist patients whose first language is not English, wherever possible	The specific use of an interpreter is not stated. Engaging relatives is mentioned but in the interests of confidentiality may not always be appropriate.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Cellular Science	**1b.4 understand the need for effective communication throughout the care of the service user**	recognise the need to use interpersonal skills to encourage the active participation of service users	Felt the document may not reflect the balance of activity / interaction with professional colleagues as opposed to patients / relatives.
Cellular Science	**2b.1 be able to use research, reasoning and problem solving skills to determine appropriate actions**	be able to conduct fundamental research	The structure of the curriculum and skills being developed and time available only support simplistic experimental design. Where data will be collected to support a basic question or is directed by others – in effect technical development. To undertake fundamental research requires a detailed theoretical understanding of a complex system to enable novel hypotheses to be developed, experimental design and testing. Research & Development is a term covering three activities: basic research, applied research and experimental development. Basic research is experimental or theoretical work undertaken primarily to acquire new knowledge of the underlying foundation of phenomena and observable facts, without any particular application or use in view. Applied research is also original investigation undertaken in order to acquire new knowledge. It is, however, directed primarily towards a practical aim or objective. Experimental development is systematic work, drawing on existing knowledge gained from research and/or practical experience that is directed to producing new materials, products or devices, to installing new processes, systems and services, or to improving substantially those already produced or installed (OECD 1981: 25).

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Cellular Science	**2b.2 be able to draw on appropriate knowledge and skills in order to make professional judgements**	be able to demonstrate a level of skill in the use of information technology appropriate to their practice	Basic understanding of the use of information technology (IT) systems in cytology laboratories and the interface with laboratory computer systems. Page 19 – use IT systems - Demonstrate the ability to use laboratory IT systems for handling, processing and storage of patient data. This is not an 'appropriate' level of information for practice data base, data mining, digital imaging.
Cellular Science	**2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully**	ensure service users are positioned (and if necessary immobilised) for safe and effective interventions	No reference was provided within the mapping document.
		understand the need to work with accuracy and precision	Accuracy and precision is implied. For example Internal Quality Control (IQC) and External Quality Assessment (EQA) are mentioned and cited and to do this, individuals would need to understand the need to work with accuracy and precision. However as this is implied, then there is a need to clarify need for accuracy and precision.
Cellular Science	**2c.1 be able to monitor and review the ongoing effectiveness of planned activity and modify it accordingly**	be able to gather information, including qualitative and quantitative data, that helps to evaluate the responses of service users to their care	Unable to determine whether the curriculum addresses quantitative data analysis / generation from imaging platforms. This relates to the roles these graduates are expected to be suitable for, where HSST will fit etc.
		be able to use quality control and quality assurance techniques, including restorative action	Knowledge is largely theoretical. Would like to explore how someone is '… able to use…' practical knowledge of implementing a QA/QC process, managing it and working within in it.
Cellular Science	**2c.2 be able to audit, reflect on and review practice**	understand the importance of participating in accreditation systems related to the modality	Role / interaction with professional bodies is not identified.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met
Embryology	1.a.1 be able to practise within the legal and ethical boundaries of their profession	understand what is required of them by the Health Professions Council
Embryology	1a.8 understand the obligation to maintain fitness to practise	understand the importance of maintaining their own health

Modality	Overall Standard of Proficiency not met	Component Standard Not Met
Embryology	1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users, their relatives and carers	be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
		be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
		understand the need to use an appropriate interpreter to assist patients whose first language is not English, wherever possible

Modality	Overall Standard of Proficiency not met	Component Standard Not Met
Embryology	2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully	understand the need to work with accuracy and precision
Embryology	2c.2 be able to audit, reflect on and review practice	understand the importance of participating in accreditation systems related to the modality
Embryology	3a.3 understand the need to establish and maintain a safe practice environment	be able to work safely, including being able to select appropriate hazard control and risk management, reduction or elimination
		understand sources of hazard in the workplace, including specimens, raw materials, clinical and special waste and equipment
		know the correct principles and applications of disinfectants, methods for sterilisation and decontamination, and for dealing with waste and spillages correctly
		know the correct principles and applications of disinfectants, methods for sterilisation and decontamination, and for dealing with waste and spillages correctly

Stage 1 Visitor Reason
The documentation refers to Programme Outcome 8 '…NHS values meets the professional standards defined by Good Scientific Practice' and Generic MSc curriculum p2, 8 - 'know the current structure, management, legal framework …. within the NHS.' This does not specifically relate to what is required of them by the HPC. No mention of HPC requirements, need to maintain registration, what to report to HPC, etc.
The programme handbook referred to employers undertaking an Occupational Health assessment but these did not demonstrate how an individual would understand the importance of maintaining their own health.

Stage 1 Visitor Reason
Documentation specifies 'communicate succinctly and effectively' but does not mention a level of English language.
The programme handbook mentions that the Academy will undertake an English language test upon submission of an individual's evidence, if necessary. No information was provided about when this would be necessary and how it would be tested.
The specific use of an interpreter is not stated. Engaging relatives is mentioned but in the interests of confidentiality may not always be appropriate.

Stage 1 Visitor Reason
Accuracy and precision is implied. For example Internal Quality Control (IQC) and External Quality Assessment (EQA) are mentioned and cited and to do this, individuals would need to understand the need to work with accuracy and precision. However as this is implied, then there is a
Could not find reference to accreditation systems relating to modality.
H&S legislation covered. Unable to find mention of risk management, reduction or elimination techniques.
Refers to specimen handling but unable to find reference to clinical / special waste.
Refers to infection control but no direct reference to these factors. Information about 'dealing with waste' was required.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Haemataology	1a.1 be able to practise within the legal and ethical boundaries of their profession	understand what is required of them by the Health Professions Council	The documentation refers to Programme Outcome 8 '…NHS values meets the professional standards defined by Good Scientific Practice' and Generic MSc curriculum p2, 8 - 'know the current structure, management, legal framework …. within the NHS.' This does not specifically relate to what is required of them by the HPC. No mention of HPC requirements, need to maintain registration, what to report to HPC, etc.
		be aware of current UK legislation applicable to work of their profession	Restrictions to blood / organ donation for certain groups not covered.
Haemataology	1a.6 be able to practise as an autonomous professional, exercising their own professional judgement	know the limits of their practice and when to seek advice or refer to another professional	I am unable to find mention of self-management of work load.
Haemataology	1a.8 understand the obligation to maintain fitness to practise	understand the importance of maintaining their own health	The programme handbook referred to employers undertaking an Occupational Health assessment but these did not demonstrate how an individual would understand the importance of maintaining their own health.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Haemataology	**1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users, their relatives and carers**	be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5	The programme handbook mentions that the Academy will undertake an English language test upon submission of an individual's evidence, if necessary. No information was provided about when this would be necessary and how it would be tested.
		understand the need to use an appropriate interpreter to assist patients whose first language is not English, wherever possible	The specific use of an interpreter is not stated. Engaging relatives is mentioned but in the interests of confidentiality may not always be appropriate.
Haemataology	**2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully**	understand the need to work with accuracy and precision	Accuracy and precision is implied. For example Internal Quality Control (IQC) and External Quality Assessment (EQA) are mentioned and cited and to do this, individuals would need to understand the need to work with accuracy and precision. However as this is implied, then there is a need to clarify need for accuracy and precision.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Medical Physics & Clinical Engineering	**1a.1 be able to practise within the legal and ethical boundaries of their profession**	understand what is required of them by the Health Professions Council	The documentation refers to Programme Outcome 8 '…NHS values meets the professional standards defined by Good Scientific Practice' and Generic MSc curriculum p2, 8 - 'know the current structure, management, legal framework …. within the NHS.' This does not specifically relate to what is required of them by the HPC.

No mention of HPC requirements, need to maintain registration, what to report to HPC, etc. |
| | | be aware of current UK legislation applicable to work of their profession | Can find no mention of general work with ionising radiation (though 'radioactivity' is included) in general as with x- ray and CT imaging. Although the category of radioactivity is mentioned, work (and presumably the legislation associated) with other forms of ionising radiations such as x-rays and, by extension, CT is omitted. Reference should be made to e.g. The Ionising Radiations Regulations 1999, Medicines (Administration of Radioactive Substances) Regulations 1978/1995, and Ionising Radiation (Medical Exposure) Regulations 2000. |
| **Medical Physics & Clinical Engineering** | **1a.8 understand the obligation to maintain fitness to practise** | understand the importance of maintaining their own health | The programme handbook referred to employers undertaking an Occupational Health assessment but these did not demonstrate how an individual would understand the importance of maintaining their own health. |

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Medical Physics & Clinical Engineering	**1b.1 be able to work, where appropriate, in partnership with other professionals, support staff, service users, and their relatives and carers**	be able to make appropriate referrals	From the evidence submitted, the student would not have the direct authority to be able to make referrals. This would probably be left to a more senior colleague perhaps based on the judgement of the student even though the student might have knowledge of the clinical options and could work in partnership with the other professionals etc.
Medical Physics & Clinical Engineering	**1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users, their relatives and carers**	be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5	The programme handbook mentions that the Academy will undertake an English language test upon submission of an individual's evidence, if necessary. No information was provided about when this would be necessary and how it would be tested.
		understand the need to use an appropriate interpreter to assist patients whose first language is not English, wherever possible	The specific use of an interpreter is not stated. Engaging relatives is mentioned but in the interests of confidentiality may not always be appropriate.
		recognise that relationships with service users should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility	Satisfied that individuals would be able to recognise that relationships with service users should be based on mutual respect and trust…'. Unable to find reference to 'be able to maintain high standards of care even in situations of personal incompatibility'.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Medical Physics & Clinical Engineering	**2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully**	understand the need to work with accuracy and precision	Accuracy and precision is implied. For example Internal Quality Control (IQC) and External Quality Assessment (EQA) are mentioned and cited and to do this, individuals would need to understand the need to work with accuracy and precision. However as this is implied, then there is a need to clarify need for
Medical Physics & Clinical Engineering	**2c.1 be able to monitor and review the ongoing effectiveness of planned activity and modify it accordingly**	be able to evaluate intervention plans using recognised outcome measures and revise the plans as necessary in conjunction with the service user	The mapping document refers to Programme Outcome 3 – the ability to define and choose investigative and scientific and/or clinical options, and make key judgements about complex facts in a range of situations. Could find no reference to this specific SOP.
Medical Physics & Clinical Engineering	**2c.2 be able to audit, reflect on and review practice**	recognise the value of case conferences and other methods of review	Unable to find information about case conferences etc.
		understand the importance of participating in accreditation systems related to the modality	There are a number of accreditation bodies relevant to a discipline and these might have been mentioned. Examples in radiation Medical Physics might include the actions of the European Society of Radiology (ESR), the European Society for Therapeutic Radiology and Oncology (ESTRO), the European Federation of Organisations for Medical Physics (EFOMP), the European Association of Nuclear Medicine (EANM) and the International Society of Radiographers and Radiological Technologists (ISRRT), the Institute of Physics, the Institute of Physicists and Engineers in Medicine.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
GI & UR	1a.1 be able to practise within the legal and ethical boundaries of their profession	understand what is required of them by the Health Professions Council	The documentation refers to Programme Outcome 8 '…NHS values meets the professional standards defined by Good Scientific Practice' and Generic MSc curriculum p2, 8 - 'know the current structure, management, legal framework …. within the NHS.' This does not specifically relate to what is required of them by the HPC.

No mention of HPC requirements, need to maintain registration, what to report to HPC, etc. |

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
GI & UR	1a.6 be able to practise as an autonomous professional, exercising their own professional judgement	recognise that they are personally responsible for and must be able to justify their decisions	Felt implied within Generic MSc Curriculum, page 12 under the leadership heading. However I feel it needs to be strengthened to emphasise that the person actually in contact with the patient will be asked by law account for their actions.
GI & UR	1a.8 understand the obligation to maintain fitness to practise	understand the importance of maintaining their own health	The programme handbook referred to employers undertaking an Occupational Health assessment but these did not demonstrate how an individual would understand the importance of maintaining their own health.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
GI & UR	1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users, their relatives and carers	be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5	Clinical Physiology often has direct and intimate patient contact. As such it is often not written English which is the prime factor but spoken English. Is there something while on placement to support students?
		be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5	The programme handbook mentions that the Academy will undertake an English language test upon submission of an individual's evidence, if necessary. No information was provided about when this would be necessary and how it would be tested.
		understand the need to use an appropriate interpreter to assist patients whose first language is not English, wherever possible	The specific use of an interpreter is not stated. Engaging relatives is mentioned but in the interests of confidentiality may not always be appropriate.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
GI & UR	2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully	understand the need to work with accuracy and precision	Accuracy and precision is implied. For example Internal Quality Control (IQC) and External Quality Assessment (EQA) are mentioned and cited and to do this, individuals would need to understand the need to work with accuracy and precision. However as this is implied, then there is a need to clarify need for accuracy and precision.
GI & UR	2c.2 be able to audit, reflect on and review practice	understand the importance of participating in accreditation systems related to the modality	Unable to find evidence eg Association of Gastrointestinal Physiologists (AGIP) Personal and unit Accreditation Scheme Pilot schemes have been done to conform to Improving Quality in Physiological Diagnostic Services (IQUIPS).

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
GI & UR	3a.2 know how professional principles are expressed and translated into action through a number of different approaches to practice, and how to select or modify approaches to meet the needs of an individual, groups or communities	understand the clinical applications of the speciality and the consequences of decisions made upon actions and advices	Would like to receive more information about how students understand the '…consequences of decisions upon actions and advice'.
GI & UR	3a.3 understand the need to establish and maintain a safe practice environment	be aware of immunisation requirements and the role of occupational health	The professional practice document talks about Health & Safety (COSHH, RIDDOR etc) but did not illustrate immunisation or the role of Occupational Health specifically.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met
Histocompatibility & Immunogenetics	**1a.1 be able to practise within the legal and ethical boundaries of their profession**	understand what is required of them by the Health Professions Council
Histocompatibility & Immunogenetics	**1a.8 understand the obligation to maintain fitness to practise**	understand the importance of maintaining their own health

Modality	Overall Standard of Proficiency not met	Component Standard Not Met
Histocompatibility & Immunogenetics	1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users, their relatives and carers	be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
		understand the need to use an appropriate interpreter to assist patients whose first language is not English, wherever possible
Histocompatibility & Immunogenetics	2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully	ensure service users are positioned (and if necessary immobilised) for safe and effective interventions
		understand the need to work with accuracy and precision

Modality	Overall Standard of Proficiency not met	Component Standard Not Met
Histocompatibility & Immunogenetics	**3a.3 understand the need to establish and maintain a safe practice environment**	be able to work safely, including being able to select appropriate hazard control and risk management, reduction or elimination techniques in a safe manner in accordance with health and safety legislation
		understand sources of hazard in the workplace, including specimens, raw materials, clinical and special waste and equipment
		know the correct principles and applications of disinfectants, methods for sterilisation and decontamination, and for dealing with waste and spillages correctly

Stage 1 Visitor Reason
The documentation refers to Programme Outcome 8 '…NHS values meets the professional standards defined by Good Scientific Practice' and Generic MSc curriculum p2, 8 - 'know the current structure, management, legal framework …. within the NHS.' This does not specifically relate to what is required of them by the HPC. No mention of HPC requirements, need to maintain registration, what to report to HPC, etc.
The programme handbook referred to employers undertaking an Occupational Health assessment but these did not demonstrate how an individual would understand the importance of maintaining their own health.

Stage 1 Visitor Reason
The programme handbook mentions that the Academy will undertake an English language test upon submission of an individual's evidence, if necessary. No information was provided about when this would be necessary and how it would be tested.
The specific use of an interpreter is not stated. Engaging relatives is mentioned but in the interests of confidentiality may not always be appropriate.
Not applicable
Accuracy and precision is implied. For example Internal Quality Control (IQC) and External Quality Assessment (EQA) are mentioned and cited and to do this, individuals would need to understand the need to work with accuracy and precision. However as this is implied, then there is a need to clarify need for accuracy and precision.

Stage 1 Visitor Reason
H&S legislation covered. Unable to find mention of risk management, reduction or elimination techniques.
Unable to find legislation relating to clinical waste management
Information about 'dealing with waste' was required.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met
Cardiac	**1a.1 be able to practise within the legal and ethical boundaries of their profession**	understand what is required of them by the Health Professions Council
Cardiac	**1a.6 be able to practise as an autonomous professional, exercising their own professional judgement**	recognise that they are personally responsible for and must be able to justify their decisions

Modality	Overall Standard of Proficiency not met	Component Standard Not Met
Cardiac	**1a.8 understand the obligation to maintain fitness to practise**	understand the importance of maintaining their own health
Cardiac	**1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users, their relatives and carers**	be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
		be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
		understand the need to use an appropriate interpreter to assist patients whose first language is not English, wherever possible

Modality	Overall Standard of Proficiency not met	Component Standard Not Met
Cardiac	**2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully**	understand the need to work with accuracy and precision
Cardiac	**2c.2 be able to audit, reflect on and review practice**	understand the importance of participating in accreditation systems related to the modality
Cardiac	**3a.2 know how professional principles are expressed and translated into action through a number of different approaches to practice, and how to select or modify approaches to meet the needs of an individual, groups or communities**	understand the clinical applications of the speciality and the consequences of decisions made upon actions and advice

Modality	Overall Standard of Proficiency not met	Component Standard Not Met
Cardiac	3a.3 understand the need to establish and maintain a safe practice environment	be aware of immunisation requirements and the role of occupational health

Stage 1 Visitor Reason
The documentation refers to Programme Outcome 8 '…NHS values meets the professional standards defined by Good Scientific Practice' and Generic MSc curriculum p2, 8 - 'know the current structure, management, legal framework …. within the NHS.' This does not specifically relate to what is required of them by the HPC. No mention of HPC requirements, need to maintain registration, what to report to HPC, etc.
Felt implied within Generic MSc Curriculum, page 12 under the leadership heading. However I feel it needs to be strengthened to emphasise that the person actually in contact with the patient will be asked by law account for their actions.

Stage 1 Visitor Reason
The programme handbook referred to employers undertaking an Occupational Health assessment but these did not demonstrate how an individual would understand the importance of maintaining their own health.
Clinical Physiology often has direct and intimate patient contact. As such it is often not written English which is the prime factor but spoken English. Is there something while on placement to support students?
The programme handbook mentions that the Academy will undertake an English language test upon submission of an individual's evidence, if necessary. No information was provided about when this would be necessary and how it would be tested.
The specific use of an interpreter is not stated. Engaging relatives is mentioned but in the interests of confidentiality may not always be appropriate.

Stage 1 Visitor Reason
Accuracy and precision is implied. For example Internal Quality Control (IQC) and External Quality Assessment (EQA) are mentioned and cited and to do this, individuals would need to understand the need to work with accuracy and precision. However as this is implied, then there is a need to clarify need for accuracy and precision.
Could not find reference to accreditation systems relating to modality.
Would like to receive more information about how students understand the '..consequences of decisions made upon actions and advice'.

Stage 1 Visitor Reason
The professional practice document talks about Health & Safety (COSHH, RIDDOR etc) but did not illustrate immunisation or the role of Occupational Health specifically.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met
Respiratory & Sleep Physiology	**1a.1 be able to practise within the legal and ethical boundaries of their profession**	understand what is required of them by the Health Professions Council
Respiratory & Sleep Physiology	**1a.6 be able to practise as an autonomous professional, exercising their own professional judgement**	recognise that they are personally responsible for and must be able to justify their decisions

Modality	Overall Standard of Proficiency not met	Component Standard Not Met
Respiratory & Sleep Physiology	1a.8 understand the obligation to maintain fitness to practise	understand the importance of maintaining their own health
Respiratory & Sleep Physiology	1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users, their relatives and carers	be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
		be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
		understand the need to use an appropriate interpreter to assist patients whose first language is not English, wherever possible

Modality	Overall Standard of Proficiency not met	Component Standard Not Met
Respiratory & Sleep Physiology	**2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully**	understand the need to work with accuracy and precision
Respiratory & Sleep Physiology	**2c.2 be able to audit, reflect on and review practice**	understand the importance of participating in accreditation systems related to the modality

Stage 1 Visitor Reason
The documentation refers to Programme Outcome 8 '…NHS values meets the professional standards defined by Good Scientific Practice' and Generic MSc curriculum p2, 8 - 'know the current structure, management, legal framework …. within the NHS.' This does not specifically relate to what is required of them by the HPC. No mention of HPC requirements, need to maintain registration, what to report to HPC, etc.
Felt implied within Generic MSc Curriculum, page 12 under the leadership heading. However I feel it needs to be strengthened to emphasise that the person actually in contact with the patient will be asked by law account for their actions.

Stage 1 Visitor Reason
The programme handbook referred to employers undertaking an Occupational Health assessment but these did not demonstrate how an individual would understand the importance of maintaining their own health.
Clinical Physiology often has direct and intimate patient contact. As such it is often not written English which is the prime factor but spoken English. Is there something while on placement to support students?
The programme handbook mentions that the Academy will undertake an English language test upon submission of an individual's evidence, if necessary. No information was provided about when this would be necessary and how it would be
The specific use of an interpreter is not stated. Engaging relatives is mentioned but in the interests of confidentiality may not always be appropriate.

Stage 1 Visitor Reason
Accuracy and precision is implied. For example Internal Quality Control (IQC) and External Quality Assessment (EQA) are mentioned and cited and to do this, individuals would need to understand the need to work with accuracy and precision. However as this is implied, then there is a need to clarify need for accuracy and precision.
Could not find reference to accreditation systems relating to modality.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Neurophysiology, Ophthalmic & Vision	**1a.1 be able to practise within the legal and ethical boundaries of their profession**	understand what is required of them by the Health Professions Council	The documentation refers to Programme Outcome 8 '…NHS values meets the professional standards defined by Good Scientific Practice' and Generic MSc curriculum p2, 8 - 'know the current structure, management, legal framework …. within the NHS.' This does not specifically relate to what is required of them by the HPC. No mention of HPC requirements, need to maintain registration, what to report to HPC, etc.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Neurophysiology, Ophthalmic & Vision	**1a.8 understand the obligation to maintain fitness to practise**	understand the importance of maintaining their own health	The programme handbook referred to employers undertaking an Occupational Health assessment but these did not demonstrate how an individual would understand the importance of maintaining their own health.
Neurophysiology, Ophthalmic & Vision	**1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users, their relatives and carers**	be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5	Clinical Physiology often has direct and intimate patient contact. As such it is often not written English which is the prime factor but spoken English. Is there something while on placement to support students?
		be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5	The programme handbook mentions that the Academy will undertake an English language test upon submission of an individual's evidence, if necessary. No information was provided about when this would be necessary and how it would be
		understand the need to use an appropriate interpreter to assist patients whose first language is not English, wherever possible	The specific use of an interpreter is not stated. Engaging relatives is mentioned but in the interests of confidentiality may not always be appropriate.

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Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Neurophysiology, Ophthalmic & Vision	**2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully**	understand the need to work with accuracy and precision	Accuracy and precision is implied. For example Internal Quality Control (IQC) and External Quality Assessment (EQA) are mentioned and cited and to do this, individuals would need to understand the need to work with accuracy and precision. However as this is implied, then there is a need to clarify need for accuracy and precision.
Neurophysiology, Ophthalmic & Vision	**2c.2 be able to audit, reflect on and review practice**	understand the importance of participating in accreditation systems related to the modality	I did not interpret the evidence provided as a reference to an Accreditation system. Unless the phrase on p16, 18, 20 "apply non NHS" etc refers to external accreditation schemes but this is not made clear. If no scheme exists then presumably the phrase on these pages is intimating that they must be aware of the standards expected of them by external bodies dealing with their patients but this is not accreditation systems as I understand it.
Neurophysiology, Ophthalmic & Vision	**3a.3 understand the need to establish and maintain a safe practice environment**	be aware of immunisation requirements and the role of occupational health	The professional practice document talks about Health & Safety (COSHH, RIDDOR etc) but did not illustrate immunisation or the role of Occupational Health specifically.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Vascular	1a.1 be able to practise within the legal and ethical boundaries of their profession	understand what is required of them by the Health Professions Council	The documentation refers to Programme Outcome 8 '…NHS values meets the professional standards defined by Good Scientific Practice' and Generic MSc curriculum p2, 8 - 'know the current structure, management, legal framework …. within the NHS.' This does not specifically relate to what is required of them by the HPC. No mention of HPC requirements, need to maintain registration, what to report to HPC, etc.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Vascular	1a.8 understand the obligation to maintain fitness to practise	understand the importance of maintaining their own health	The programme handbook referred to employers undertaking an Occupational Health assessment but these did not demonstrate how an individual would understand the importance of maintaining their own health.
Vascular	1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users, their relatives and carers	be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5	Clinical Physiology often has direct and intimate patient contact. As such it is often not written English which is the prime factor but spoken English. Is there something while on placement to support students?
		be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5	The programme handbook mentions that the Academy will undertake an English language test upon submission of an individual's evidence, if necessary. No information was provided about when this would be necessary and how it would be
		understand the need to use an appropriate interpreter to assist patients whose first language is not English, wherever possible	The specific use of an interpreter is not stated. Engaging relatives is mentioned but in the interests of confidentiality may not always be appropriate.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason
Vascular	**2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully**	understand the need to work with accuracy and precision	Accuracy and precision is implied. For example Internal Quality Control (IQC) and External Quality Assessment (EQA) are mentioned and cited and to do this, individuals would need to understand the need to work with accuracy and precision. However as this is implied, then there is a need to clarify need for accuracy and precision.
Vascular	**3a.3 understand the need to establish and maintain a safe practice environment**	be aware of immunisation requirements and the role of occupational health	The professional practice document talks about Health & Safety (COSHH, RIDDOR etc) but did not illustrate immunisation or the role of Occupational Health

Observations on HPC Approval Visit Reports for the Certificate of Equivalence and Certificate of Attainment

The Academy for Healthcare Science welcomes the opportunity to provide observations on the reports provided following the visit undertaken on 24-25 May 2012. The observations have been summarised in this document. There are some generic observations that run across all of the conditions and both reports which have been summarised in the first section of the document. There are also a number of specific observations on a number of the conditions which have been provided in the second section of the document in the form of a table. There are also a number of observations we wish to make in relation to the appendix to the reports which map the comments the visitors had in relation to the standards of proficiency which are contained in section three.

Please note, that a response is being made to all conditions on approval to ensure that approval of the programme is achieved at the September meeting of the Education and Training Committee. These observations are intended to amend the final public version of the approval visit reports as there are a number of factual inaccuracies and unreasonable expectations in the underpinning reasons for conditions.

1.0 SECTION ONE – GENERAL OBSERVATIONS

1.1 Unreasonable or unclear requirements for evidence related to standards of proficiency

The HPC conducted a separate assessment of the standards of proficiency which is summarised as an appendix to the approval visit report. From the appendix and associated conditions on SETs 4.1 and 6.1 it is apparent that in learning outcomes we are being expected to mirror exactly the language of the standards of proficiency or in some cases include specialist language which may cause confusion across the diversity of the scientific specialisms or in some cases we are asked to provide information explicitly contained within the programme documentation. We understand the HPC process to be based on reasonable interpretation of the same or similar outcomes rather than direct replication of language. We also believe that we are being asked to provide a level of detail related to how outcomes will be measured which is not required of higher education providers or other similar assessment-only bodies based on the reasons indicated in the standards of proficiency mapping document. Additionally, in places the reasons provided do not indicate that standards of proficiency are not met, merely that visitors made comments about specialist detail they wish to have included in generic outcomes.

We ask that in relation to these issues of interpretation that the visitors are reminded of their role as being to assess the programmes we have presented on a case by case basis through reasonable interpretation of HPC standards and not through comparison to other standards, types of training or specific programmes being offered by competitor organisations. Where the Education and Training Committee

feels the demands of the visitors are outside of the normal expectations of the approval visit process, we ask that conditions are amended appropriately.

1.2 Conditions applied to generic information with no specific rationale
We are concerned that in many places related to standards of proficiency mapping, more information has been requested for generic parts of the curriculum that have been accepted elsewhere with no rationale given for the specialist reasons for a condition being placed. We would ask that specialist rationales are provided where this occurs or the generic information is accepted across the breadth of specialisms.

1.3 Certificate of Equivalence: interpretation of the standards of education and training for a non-higher education programme
HPC indicates that its processes and standards are applicable across a diversity of approaches to education and training. However the nature of the conditions applied on approval for the Certificate of Equivalence it is clear that there is an expectation that the programme is compliant with the structures of a higher education programme. As indicated in the initial communications related to the visit, programme documentation submitted prior to the visit and in conversations conducted during visit, the Certificate of Equivalence is awarded upon completion of an individual assessment process similar to that of the Association of Clinical Scientists. There were a number of adaptations made to the HPC approval process and interpretation of standards of education and training recorded publicly in relation to the Association of Clinical Scientists approval visit in 2009. Whilst similar process changes have been adhered to, the visiting panel in the application of its conditions does not appear to be offering the same level of interpretation of the standards of education and training for this type of individual assessment. We have provided and plan to continue to provide evidence in relation to all standards of education and training, but it was expected there would be a level of reasonable interpretation based on the assessment only model of the programme being offered leading to the Certificate of Equivalence.

1.4 Misleading statements related to periods of notice of feedback and reasons for absent members of the programme team
Feedback on the standards of proficiency was provided one week prior to the event. Feedback is expected in HPC processes normally six weeks prior to the visit to ensure there is sufficient time to respond. The insufficient notice period of feedback prior to the event made it difficult to respond adequately to the detailed queries relating to specialist areas before or during the visit as individuals involved with development of curricula were already engaged in activities related to accreditation of training and the individual arranged to attend was unfortunately hospitalised. The visitors report implies that more notice was provided of feedback and that the only reason for lack of attendance of members was the illness of one individual which is misleading. We ask the report to be changed to reflect the events accurately.

1.5 Unreasonable burden of evidence
Throughout the conditions there are indications that documentation or information was not received by the visitors. However, appropriate documentation for a new programme was provided. The only omissions were:

- staff CVs as the substantive roles were still being appointed,

- a tripartite memorandum of understanding outlining the inter-related roles of the Academy for Healthcare Science and two partner organisations, and
- advertising materials for the programme.

Otherwise, the visitors received complete documentation on the individual organisations and how they undertake their quality assurance roles which included information about the standards used to make quality assurance decisions. It is unclear from the conditions how the documentation provided is inadequate in meeting the standards of education and training. We are often required in conditions to provide detail on the "expectations or parameters" to make decisions. These expectations or parameters are the standards which have been provided and explained in the programme documentation. If the visitors require evidence of how decisions are made it is unclear what reasonable further evidence can be provided and it has not been made clear in the conditions what work is required. In response to these conditions we have resubmitted programme documentation and attempted to explain again how standards / learning outcomes will be used to make judgements.

1.6 Sharing of information in relation to the visit
It has come to our attention that information related to the draft outcomes of the visit have been shared by one of the visiting panel with individuals not involved with the process. We received accurate verbal information about the outcomes of the visit from individuals unrelated to the HPC visit or any of the organisations involved in the application before receiving the reports. We do not have documentary evidence to support this or know which member of the panel provided information, but we would ask that the visitors are reminded that their recommendations were not in the public domain as they were draft and required ratification from the Education and Training Committee in the context of these observations.

SECTION TWO: SPECIFIC OBSERVATIONS ON CONDITIONS

2.1 Observations on the Certification of Equivalence report

SET	Observation	Indication of action in response to condition
2.1	Visitors have assumed the process is different dependent on the applicant type which is incorrect and no part of the documentation or discussion at the visit suggested this.	Make entry requirements for equivalence applicants clear in advertising materials. Amend the programme handbook to make it clear the equivalence process is the same for all types of applicant.
2.6	Equivalence does not offer AP(E)L as the process is in effect accreditation of prior experience and learning.	Provide explanation
3.2	Visitors have assumed the process is different dependent on the applicant type which is incorrect and no part of the documentation or discussion at the visit suggested this.	Amend documentation to make it clearer how the Academy will stay up to date with curriculum development. Amend documentation to make it clear that the equivalence process is the same for all applicant types.
3.3	Condition is unclear	Amend the programme handbook to make the governance of the equivalence process clear
3.7	Academy is assessing retrospectively only and so we train and support our assessors but are not actively developing them beyond that role.	Provide outline of training and updating for Management Board, Professional Group Chairs, and Professional Group Members
3.8	Academy is assessing retrospectively only so resources only require confirmation if top up is required.	Provide, in programme handbook, outline of requirements for top-up education and training or work based experience (with home country specific information)
3.9	Academy is assessing retrospectively only so resources only require confirmation if top up is required.	Provide, in programme handbook, outline of requirements for top-up education and training or work based experience (with home country specific information)
3.10	Academy is assessing retrospectively only so resources only require confirmation if top up is required.	Provide, in programme handbook, outline of requirements for top-up education and training or work based experience (with home country specific information)

3.11	Academy is assessing retrospectively only so resources only require confirmation if top up is required.	Provide, in programme handbook, outline of requirements for top-up education and training or work based experience (with home country specific information)
3.12	Academy is assessing retrospectively only so resources only require confirmation if top up is required.	Provide, in programme handbook, outline of requirements for top-up education and training or work based experience (with home country specific information)
3.14	Academy is assessing retrospectively only so resources only require confirmation if top up is required.	Provide, in programme handbook, outline of requirements for top-up education and training or work based experience (with home country specific information)
3.15	Academy is assessing retrospectively only so resources only require confirmation if top up is required.	Attendance requirements to be clearly stated in programme handbook (interviews only)
3.16	Equivalence is a system of assessing professional suitability. There is no separation of this judgement from the assessment process.	Provide clarity of the embedding of professional suitability standards in assessment process.
4.1	The mapping document implies that we must match exactly the language of HPC SOPs or professional body curricula which is unnecessary. The outcomes are in places generic and we have provided lower level detail to assist the visitors understanding.	Review of mapping outcomes and provision of further references or explanation of current references.
4.3	Academy is assessing retrospectively the integration of theory and practice in the applicant's evidence	Reference the information types coming from both academic and practice based sources.
4.6	Academy is assessing retrospectively autonomy and reflective thinking.	Assessment will ensure the applicant is capable of autonomy and reflective thinking using Good Scientific Practice
4.7	Academy is assessing retrospectively evidence based practice skills.	Assessment will ensure the applicant is capable of evidence based practice using Good Scientific Practice.
4.8	Academy is assessing retrospectively only and so we only ensure learning and teaching are appropriate if an applicant needs to top-up.	Provide, in programme handbook, outline of requirements for top-up education and training or work based experience (with home country specific information)
4.9	There is no interprofessional learning. The Academy is assessing retrospectively only.	N/A
5.1	Academy is assessing retrospectively only and so placement	Provide, in programme handbook, outline of requirements

	is only required if an applicant needs to top-up.	for top-up education and training or work based experience
5.2	Academy is assessing retrospectively only and so placement is only required if an applicant needs to top-up.	Provide, in programme handbook, outline of requirements for top-up education and training or work based experience
5.3	Academy is assessing retrospectively only and so placement is only required if an applicant needs to top-up.	Provide, in programme handbook, outline of requirements for top-up education and training or work based experience
5.4	Academy is assessing retrospectively only and so placement is only required if an applicant needs to top-up.	Provide, in programme handbook, outline of requirements for top-up education and training or work based experience
5.5	Academy is assessing retrospectively only and so placement is only required if an applicant needs to top-up.	Provide, in programme handbook, outline of requirements for top-up education and training or work based experience
5.6	Academy is assessing retrospectively only and so placement is only required if an applicant needs to top-up.	Provide, in programme handbook, outline of requirements for top-up education and training or work based experience
5.7	Academy is assessing retrospectively only and so placement is only required if an applicant needs to top-up.	Provide, in programme handbook, outline of requirements for top-up education and training or work based experience
5.8	Academy is assessing retrospectively only and so placement is only required if an applicant needs to top-up.	Provide, in programme handbook, outline of requirements for top-up education and training or work based experience
5.9	Academy is assessing retrospectively only and so placement is only required if an applicant needs to top-up.	Provide, in programme handbook, outline of requirements for top-up education and training or work based experience
5.10	Academy is assessing retrospectively only and so placement is only required if an applicant needs to top-up.	Provide, in programme handbook, outline of requirements for top-up education and training or work based experience
5.11	Academy is assessing retrospectively only and so placement is only required if an applicant needs to top-up.	Provide, in programme handbook, outline of requirements for top-up education and training or work based experience
5.12	Academy is assessing retrospectively only and so placement is only required if an applicant needs to top-up.	Provide, in programme handbook, outline of requirements for top-up education and training or work based experience
5.13	Academy is assessing retrospectively only and so placement is only required if an applicant needs to top-up.	Provide, in programme handbook, outline of requirements for top-up education and training or work based experience
6.1	The mapping document implies that we must match exactly the language of HPC SOPs which is unnecessary. The outcomes are in places generic and we have provided lower level detail to assist the visitors understanding.	All specialisms – Review of mapping outcomes and provision of further references or explanation of current references. Provide information in programme handbook related to assessment regulations stipulated in equivalence policy and implementation policy.

6.2	This condition is asking us to amend professional standards to make them comply with QAA benchmark statements which is outside of the authority of HPC. We also have externally commissioned the Institute of Education to review the curricula and it has been confirmed the curricula are appropriate for a Masters level programme.	Provide evidence of how the equivalence process considers academic level of the Masters programme.
6.4	The assessment process is based on appropriately qualified professionals making judgements based on the submitted evidence using MSC curricula and Good Scientific Practice as references.	Provide evidence of Good Scientific Practice and the evidence required for assessment

2.2 Observations on the Certificate of Attainment Report

SET	Observation	Action
2.1	The condition states that education providers apply for certification which they do not.	Update and submit advertising materials for the STP application process to include full information on entry requirements and also routes to registration
2.3	The condition requires that criminal convictions checks are undertaken for all practice placements. This is not a reasonable requirement.	Update programme handbook and advertising materials to state that enhanced level CRB checks are required upon entry to the programme either through employers or individual applicants.
2.4	The condition requires that health checks are undertaken for all practice placements. This is not a reasonable requirement.	Update programme handbook and advertising materials to state that health checks and appropriate vaccinations are required upon entry through employers or individual applicants.
3.5	The condition indicates there are plans to recruit permanent administration employees. This is incorrect and directly contradicts discussion at the visit. Administration is provided via and established contract which was explained at the visit.	Provide CVs for Academy Management Board and Professional Group Chairs, School Professional Leads, and Requirements for constitution of panels
3.6	This condition is unreasonable and requires that we explain how we review information provided by education providers. This was provided in the documentation and has been resubmitted.	Resubmit programme documentation related to accreditation of HEIs
3.7	There are three conditions on this one area which is unnecessary. We are also being asked to provide a great level of detail on how we will make case by case decisions on the appropriateness of staff resources in HEIs and placements which is through standards that were provided.	Provide outline of training and updating for Management Board, Professional Group Chairs, and Professional Group Members Provide copy of similar documentation for NSHCS and MSC
3.8	This information was provided in the programme documentation. It is unclear what further expectations or parameters are required beyond the standards that are used to make judgements	Resubmit updated documentation related to MSC and School QA processes and standards

	about the appropriateness of environments	
3.9	This information was provided in the programme documentation. It is unclear what further expectations or parameters are required beyond the standards that are used to make judgements about the appropriateness of environments	Resubmit updated documentation related to MSC and School QA processes and standards
3.10	This information was provided in the programme documentation. It is unclear what further expectations or parameters are required beyond the standards that are used to make judgements about the appropriateness of environments	Resubmit updated documentation related to MSC and School QA processes and standards
3.11	This information was provided in the programme documentation. It is unclear what further expectations or parameters are required beyond the standards that are used to make judgements about the appropriateness of environments	Resubmit updated documentation related to MSC and School QA processes and standards
3.12	This information was provided in the programme documentation. It is unclear what further expectations or parameters are required beyond the standards that are used to make judgements about the appropriateness of environments	Resubmit updated documentation related to MSC and School QA processes and standards
4.1	The mapping document implies that we must match exactly the language of HPC SOPs which is unnecessary. The outcomes are in places generic and we have provided lower level detail to assist the visitors understanding.	All specialisms – Review of mapping outcomes and provision of further references or explanation of current references.
5.3	This information was provided in the programme documentation. It is unclear what further expectations or parameters are required beyond the standards that are used to make judgements about the appropriateness of environments	Resubmit updated documentation related to MSC and School QA processes and standards
5.4	There are no differences to the process or the	Resubmit updated documentation related to MSC and School QA

	standards. They are interpreted by members of the profession for the specific environments	processes and standards
5.5	This information was provided in the programme documentation. It is unclear what further expectations or parameters are required beyond the standards that are used to make judgements	Resubmit updated documentation related to MSC and School QA processes and standards
5.6	This information was provided in the programme documentation. It is unclear what further expectations or parameters are required beyond the standards that are used to make judgements	Resubmit updated documentation related to MSC and School QA processes and standards
5.7	This information was provided in the programme documentation. It is unclear what further expectations or parameters are required beyond the standards that are used to make judgements	Resubmit updated documentation related to MSC and School QA processes and standards
5.8	This information was provided in the programme documentation. It is unclear what further expectations or parameters are required beyond the standards that are used to make judgements	Resubmit updated documentation related to MSC and School QA processes and standards Submit Train the Trainer information and updating arrangements to be provided
5.9	This information was provided in the programme documentation. It is unclear what further expectations or parameters are required beyond the standards that are used to make judgements	Resubmit updated documentation related to MSC and School QA processes and standards
5.11	This information was provided in the programme documentation. It is unclear what further expectations or parameters are required beyond the standards that are used to make judgements	Resubmit sample learning guide
5.13	This information was provided in the programme documentation. It is unclear what further expectations or parameters are required beyond the standards that are used to make judgements	Resubmit updated documentation related to MSC and School QA processes and standards Generic introduction to Learning Guides
6.1	The mapping document implies that we must	All specialisms – Review of mapping outcomes and provision of

	match exactly the language of HPC SOPs which is unnecessary. The outcomes are in places generic and we have provided lower level detail to assist the visitors understanding.	further references or explanation of current references. Provide information in programme handbook related to assessment regulations and strategy expected from HEIs.
6.2	This condition is asking us to amend professional standards to make them comply with QAA benchmark statements which is outside of the authority of HPC. We also have externally commissioned the Institute of Education to review the curricula and it has been confirmed the curricula are appropriate for a Masters level programme.	Provide evidence of how the accreditation process considers academic level of the Masters programme.
6.4	This information was provided in the programme documentation. It is unclear what further expectations or parameters are required beyond the standards that are used to make judgements	Resubmit updated documentation related to MSC and School QA processes and standards
6.5	This information was provided in the programme documentation. It is unclear what further expectations or parameters are required beyond the standards that are used to make judgements	Resubmit updated documentation related to MSC and School QA processes and standards
6.6	This information was provided in the programme documentation. It is unclear what further expectations or parameters are required beyond the standards that are used to make judgements	Resubmit updated documentation related to MSC and School QA processes and standards Draw out the expectations for assessment in the HEI (including use of external examiners) through HPC standards.
6.7	This information was provided in the programme documentation. It is unclear what further expectations or parameters are required beyond the standards that are used to make judgements	Resubmit updated documentation related to MSC and School QA processes and standards Draw out information related to student progression and achievement.

SECTION THREE – OBSERVATIONS ON THE STANDARDS OF PROFICIENCY MAPPING

The table below is an example of the feedback related to the standards of proficiency received for audiology. There are a number of similar tables for each modality of Clinical Science which contain similar requirements. As can be seen from the observations in the final column there are explicit references throughout the curricula to the areas highlighted as being absent from the documentation. We will be providing a complete response to these areas to help the visitors find these explicit references, but we feel it is important to highlight to the Education and Training Committee the extent to which information was explicitly made available but not accepted. We ask that the visitors review the curriculum documentation in detail using both the original documentation, which included a detailed mapping exercise to the specific pages in the curricula where this information could be found, and the further direction provided in the response to conditions. A copy of the neurosensory curriculum (which contains audiology within it) has been provided for the Education and Training Committee to review to verify the production of evidence in the first submission of documentation.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason	Observation
Audiology	**1a.1 be able to practise within the legal and ethical boundaries of their profession**	understand what is required of them by the Health Professions Council	The documentation refers to Programme Outcome 8 '…NHS values meets the professional standards defined by Good Scientific Practice' and Generic MSc curriculum p2, 8 - 'know the current structure, management, legal framework …. within the NHS.' This does not specifically relate to what is required of them by the HPC. No mention of HPC requirements, need to maintain registration, what to report to HPC, etc.	References made to the HPC standards throughout the programme and in particular Good Scientific Practice, the underpinning standards for all curricula, make it explicit that individuals must comply with appropriate Codes of Conduct.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason	Observation
Audiology	1a.8 understand the obligation to maintain fitness to practise	understand the importance of maintaining their own health	The programme handbook referred to employers undertaking an Occupational Health assessment but these did not demonstrate how an individual would understand the importance of maintaining their own health.	Issues of health, including personal health are addressed in public health contexts
Audiology	1b.1 be able to work, where appropriate, in partnership with other professionals, support staff, service users, and their relatives and carers	understand the need to engage service users and carers in planning and evaluating diagnostics, treatments and interventions to meet their needs and goals	Can find information about developing plans for service users but unable to find information about engaging service users in the development of their plans.	Included in the curricula in professional practice related to self-care and appropriate involvement of patients in their care.
Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason	Observation
		be able to make appropriate referrals	Able to find information about referrals being received by an individual but unable to find information about the individual being able to make referrals.	The ability to make referrals is explicitly included in the curriculum.

Audiology	1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users, their relatives and carers	be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5	The programme handbook mentions that the Academy will undertake an English language test upon submission of an individual's evidence, if necessary.	Entry to the programme is dependent on interview and if necessary an English language test. Entry to the programme is set at IELTS 7.0 with no element below 6.5.
		understand how communications skills affect the assessment of service users and how the means of communication should be modified to address and take account of factors such as age, physical ability and learning ability	Unable to find information about '…how the means of communication should be modified to address and take account of factors such as age, physical ability and learning ability' for example, for individuals with hearing, visual and neurological disabilities.	Included in the curricula throughout with explicit references to individuals with additional needs.
Modality	**Overall Standard of Proficiency not met**	**Component Standard Not Met**	**Stage 1 Visitor Reason**	**Observation**
		be able to select, move between and use appropriate forms of verbal and non-verbal communication with service users and others	'Moving' between communication types is not fully developed	Included in the curricula throughout with explicit references to individuals with additional needs.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason	Observation
		be aware of characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status	Can find information about non-verbal communication but unable to find '…how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio economic status.	Included in the curricula throughout with explicit references to individuals with additional needs.
		understand the need to provide service users (or people acting on their behalf) with the information necessary to enable them to make informed decisions	Can find evidence about communicating sensitively and effectively but unable to find evidence about 'understand the need to provide….enabling service users to make informed decisions'.	Included throughout the curriculum with specific references for particular groups and challenges specific to audiology
		understand the need to use an appropriate interpreter to assist patients whose first language is not English, wherever possible	The specific use of an interpreter is not stated. Engaging relatives is mentioned but in the interests of confidentiality may not always be appropriate.	Included throughout the curriculum with specific references for particular groups and challenges specific to audiology
		recognise that relationships with service users should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility	Satisfied that individuals would be able to recognise that relationships with service users should be based on mutual respect and trust…'. Unable to find eference to 'be able to maintain high standards of care even in situations of personal incompatibility'.	Included in professional practice module in relation to professional behaviours.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason	Observation
Audiology	**2a.2 be able to select and use appropriate assessment techniques**	be able to undertake and record a thorough, sensitive and detailed assessment, using appropriate techniques and equipment	Able to find subjective and objective hearing tests but not subjective and objective balance tests. Assessment of children's hearing – competences allow an individual to assist in this but unable to find information about an individual being able to undertake and record ….'.	The Curricula have multiple references to balance assessment and assessment of children's hearing. This was mapped accordingly and submitted to HPC
Audiology	**2a.3 be able to undertake or arrange investigations as appropriate**	N/A	Balanced assessment – able to find information relating to hearing tests but not about balance tests. Assessment of children's hearing – competences allow an individual to assist in this but unable to find information about an individual being '…able to undertake or arrange….'.	The Curricula have multiple references to balance assessment and assessment of children's hearing. This was mapped accordingly and submitted to HPC
Modality	**Overall Standard of Proficiency not met**	**Component Standard Not Met**	**Stage 1 Visitor Reason**	**Observation**
Audiology	**2a.4 be able to analyse and critically evaluate the information collected**	N/A	Unable to find information about being able to analyse and critically evaluation the information collected from a balance assessment.	Critical evaluation skills are embedded throughout the programme. This standard applied across critical evaluation skills but the visitor is requiring specific evidence related to a form of assessment.

Audiology	2b.1 be able to use research, reasoning and problem solving skills to determine appropriate actions	be able to interpret data and provide diagnostic and therapeutic opinions, including any further action which the individual directly responsible for the care of the patient or service user should take	Unable to find how this relates to Balance assessment.	Critical evaluation skills are embedded throughout the programme. This standard applied across critical evaluation skills but the visitor is requiring specific evidence related to a form of assessment.
Modality	**Overall Standard of Proficiency not met**	**Component Standard Not Met**	**Stage 1 Visitor Reason**	**Observation**
Audiology	2b.3 be able to formulate specific and appropriate management plans including the setting of timescales	understand the requirement to adapt practice to meet the needs of different groups distinguished by, for example, physical, psychological, environmental, cultural or socio-economic factors	Unable to find information about how individuals 'Understand the requirement to adapt practice… of different groups..' for example, for individuals with hearing, visual and neurological disabilities.	Included throughout the curriculum with specific references for particular groups and challenges specific to audiology
		be able to develop an investigation strategy which takes account of all the relevant clinical and other information available	Unable to find how this relates to Balance assessment.	The Curricula have multiple references to balance assessment and assessment of children's hearing. This was mapped accordingly and submitted to HPC
Modality	**Overall Standard of Proficiency not met**	**Component Standard Not Met**	**Stage 1 Visitor Reason**	**Observation**
Audiology	2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully	be able to perform a range of techniques employed in the modality	Unable to find how this relates to Balance assessment. Assessment of children's hearing – competences allow an individual to assist in this but unable to find information about an individual being '…able to perform….'.	The Curricula have multiple references to balance assessment and assessment of children's hearing. This was mapped accordingly and submitted to HPC

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason	Response
		understand the need to conform to standard operating procedures and conditions	Able to find information about an individual demonstrating use of a Standard Operating Procedure. Does use of a procedure mean someone understands the need to conform to them?	Understanding of Standard operating procedures are an explicit part of the curriculum. The learning outcomes associated to them require learners to contextualise them across other forms of practice requirements or guidance.
		understand the need to work with accuracy and precision	Accuracy and precision is implied. For example Internal Quality Control (IQC) and External Quality Assessment (EQA) are mentioned and cited and to do this, individuals would need to understand the need to work with accuracy and precision. However as this is implied, then there is a need to clarify need for accuracy and precision.	Whilst this is implied in places in the curricula there are also explicit requirements for trainees to understand the importance of accuracy in their work and evaluation and interpretation of information.
Audiology	2c.1 be able to monitor and review the ongoing effectiveness of planned activity and modify it accordingly	be able to gather information, including qualitative and quantitative data, that helps to evaluate the responses of service users to their care	Able to find information about gathering information but unable to find information about '..that helps to evaluate the responses of service users to their care'.	Explicit outcomes are contained within the curricula: eg. "Patients' responses to illness and treatment including the impact of psychological, social factors and culture"

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason	Observation
		be able to evaluate intervention plans using recognised outcome measures and revise the plans as necessary in conjunction with the service user	Unable to find information about the outcome measures associated with Balance assessment or assessment of children's hearing.	Outcome measures are explicitly mentioned in the curricula as are balance assessment and assessment of children's hearing.
Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason	Observation
		recognise the need to monitor and evaluate the quality of practice and the value of contributing to the generation of data for quality assurance and improvement programmes	Unable to find information about the outcome measures associated with Balance assessment or assessment of children's hearing.	The Curricula have multiple references to balance assessment and assessment of children's hearing. This was mapped accordingly and submitted to HPC
		be able to make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately	Unable to find information about the outcome measures associated with Balance assessment or assessment of children's hearing.	The Curricula have multiple references to balance assessment and assessment of children's hearing. This was mapped accordingly and submitted to HPC
		be able to make judgements on the effectiveness of procedures	Unable to find information about the outcome measures associated with Balance assessment or assessment of children's hearing.	The Curricula have multiple references to balance assessment and assessment of children's hearing. This was mapped accordingly and submitted to HPC
Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason	Observation
Audiology	2c.2 be able to audit, reflect on and review practice	recognise the value of case conferences and other methods of review	Unable to find information about case conferences etc.	The curricular refers to multi-disciplinary management of patient care.

Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason	Observation
		understand the importance of participating in accreditation systems related to the modality	Could not find reference to accreditation systems relating to modality.	Accreditation of environments is not common language across all specialisms. References to Quality Assurance are inclusive of principles of accreditation.
Audiology	3a.1 know and understand the key concepts of the bodies of knowledge which are relevant to their profession-specific practice	understand the structure and function of the human body, relevant to their practice, together with a knowledge of health, disease, disorder and dysfunction	The detail and depth of knowledge relating to central and peripheral nerve function does not provide the detail and depth about brain function ie auditory processes disorders to meet this SOP.	It is unclear what further information can be provided here as central and peripheral nerve function is explicitly included in the curriculum
		know the basic science underpinning the modality in which the registrant practises, understand relevant basic clinical medicine and be aware of the fundamental principles of clinical practice	The detail and depth of knowledge relating to central and peripheral nerve function does not provide the detail and depth about brain function ie auditory processes disorders to meet this SOP.	It is unclear what further information can be provided here as central and peripheral nerve function is explicitly included in the curriculum
Modality	Overall Standard of Proficiency not met	Component Standard Not Met	Stage 1 Visitor Reason	Observation
		understand the wider clinical situation relevant to the patients presenting to the specialty	Unable to find information about how individuals would understand this in relation to factors such as age, physical ability and learning ability for example, for individuals with hearing, visual and neurological disabilities.	There are specific learning outcomes associated with diversity of presenting patients. It is unclear what further information is required.

Audiology	3a.2 know how professional principles are expressed and translated into action through a number of different approaches to practice, and how to select or modify approaches to meet the needs of an individual, groups or communities	understand the clinical applications of the speciality and the consequences of decisions made upon actions and advice	Unable to find information about consequences of decisions associated with Balance assessment.	The Curricula have multiple references to balance assessment.
		understand the principles associated with a range of techniques employed in the modality	Unable to find information about this SOP in relation to Balance assessment.	The Curricula have multiple references to balance assessment.
Modality	**Overall Standard of Proficiency not met**	**Component Standard Not Met**	**Stage 1 Visitor Reason**	**Observation**
		know the standards of practice expected from techniques	Unable to find information about this SOP in relation to Balance assessment.	The Curricula have multiple references to balance assessment.
Audiology	**3a.3 understand the need to establish and maintain a safe practice environment**	be able to work safely, including being able to select appropriate hazard control and risk management, reduction or elimination techniques in a safe manner in accordance with health and safety legislation	H&S legislation covered. Unable to find mention of risk management, reduction or elimination techniques.	The curricula makes reference to quality improvement / control and risk management throughout.
Modality	**Overall Standard of Proficiency not met**	**Component Standard Not Met**	**Stage 1 Visitor Reason**	**Observation**

		be able to select appropriate personal protective equipment and use it correctly	Can find references about Health & Safety at work but unable to find information about how to select appropriate personal protective equipment and use it correctly.	We are being required to use the exact language of the standard of proficiency. Safety equipment is included in generic modules and in specialist modules.
		be able to establish safe environments for practice, which minimise risks to service users, those treating them, and others, including the use of hazard control and particularly infection control	Able to find information about establishing a safe environment but unable to find information about how someone would minimise risk.	The curricula makes reference to quality improvement / control and risk management throughout.
		be aware of immunisation requirements and the role of occupational health	The professional practice document talks about Health & Safety (COSHH, RIDDOR etc) but did not illustrate immunisation or the role of Occupational Health specifically.	Trainees are in employed posts so immunisation is part of the employment contract. Local health and safety issues are addressed including immunisation.
		know the correct principles and applications of disinfectants, methods for sterilisation and decontamination, and for dealing with waste and spillages correctly	Refers to infection control but no direct reference to these factors.	Infection control is referred to in terms of national guidelines which include all these areas.