hcpc health & care professions council

Visitors' report

Name of education provider	Institute of Biomedical Science
Programme name	Certificate of Competence by Equivalence (Clinical Scientists)
Mode of delivery	Flexible
Relevant part of the HCPC Register	Clinical scientist
Date of visit	15 – 16 July 2015

Contents

Executive summary

The Health and Care Professions Council (HCPC) approve educational programmes in the UK which health and care professionals must complete before they can apply to be registered with us. We are a statutory regulator and our main aim is to protect the public. We currently regulate 16 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 HCPC keep a register of health and care 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 10 September 2015 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 24 September 2015. At this meeting, the Committee will accept, reject or vary the visitors' recommended outcome. 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 23 October 2015. 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 3 December 2015.

Introduction

The HCPC visited the programme at the education provider as it was a new programme which was seeking HCPC 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.

Although they are regulated as a single profession, clinical scientists practise within discrete disciplines known as "modalities" and some requirements in the SOPs are modality-specific.

This visit was an HCPC only visit. The education provider did not validate or review the programme 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 approval process was formed of two stages. Outcomes from both stages of the process are contained within this report.

The first stage allowed HCPC visitors to review the documentation related to the curriculum and learning for each of the following modalities:
- Cellular science;
- Clinical biochemistry;
- Clinical immunology;
- Clinical microbiology; and
- Haematology.

Visitors from each of the modalities reviewed modality specific documentation to assess whether the programme is able to deliver clinical scientist SOPs in ways relevant to each modality. For this first stage, visitors did not attend the IBMS offices. The stage 1 assessment was undertaken on 15–16 June 2015.

The second stage took the form of a visit to meet with the stakeholders involved with the delivery of the programme. The visit reviewed how the programme meets the SETs.

Visit details

Name and role of HCPC visitors	**Stage one**
	Ruth Ashbee (Clinical microbiology)
	Ross Sadler (Clinical immunology)
	David Simms (Clinical biochemistry)
	David Stirling (Cellular science and Haematology)
	Stage two
	Ruth Ashbee (Clinical scientist)
	David Houliston (Biomedical scientist)
	Christine Morgan (Lay visitor)
HCPC executive officers (in attendance)	Hollie Latham
	Jamie Hunt
Proposed student numbers	20 per year
Proposed start date of programme approval	January 2016
Chair	Derek Bishop (Independent)
Secretary	Marie-Helen Jean (Institute of Biomedical Science)

Sources of evidence

Prior to the visit the HCPC 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	☐	☐	☒
Cellular science Modality Handbook	☒	☐	☐
Clinical biochemistry Modality Handbook	☒	☐	☐
Clinical immunology Modality Handbook	☒	☐	☐
Clinical microbiology Modality Handbook	☒	☐	☐
Haematology Modality Handbook	☒	☐	☐

The HCPC did not review the Practice placement handbook prior to the visit as the documentation does not exist.

The HCPC did not review the 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 HCPC 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	☒	☐	☐
Service users and carers	☒	☐	☐
Learning resources	☐	☐	☒
Specialist teaching accommodation (eg specialist laboratories and teaching rooms)	☐	☐	☒

The HCPC met with potential students for the proposed programme as the programme seeking approval currently does not have any students enrolled on it.

The HCPC did not see the learning resources and specialist teaching accommodation as the proposed model of delivery for the programme does not require learning resources or any specialist teaching or laboratories at the education provider.

The education provider recognised each applicant's employer, along with their nominated mentor, as practice placement providers and educators.

Recommended outcome

To recommend a programme for approval, the visitors must be satisfied 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 the relevant 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 32 of the SETs have been met and that conditions should be set on the remaining 26 SETs.

Conditions are requirements that the education provider must meet before the programme can be approved. 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 can be approved. Recommendations are made to encourage further enhancements to the programme, normally 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 clear information about the cost and entry requirements for the programme and how this will be communicated to potential applicants.

Reason: To evidence this standard, the visitors were directed to page 2 of the programme specification which states the entry requirements as "Minimum of an MSc or equivalent academic level of qualification". The visitors asked for clarification on the subject requirements for the MSc and were advised by the programme team that the MSc is expected to be in a subject relevant to the specialism the applicant is applying for. The visitors were satisfied with this requirement, but could not see where this would be communicated to potential applicants. Also, the visitors were unable to identify what would constitute as an "equivalent academic level of qualification" and were therefore also unable to identify how this would be communicated to potential applicants. Lastly, the visitors were unable to locate, within the documentation, a clear cost for the programme. The programme team stated that this is yet to be confirmed but is predicted to be around £300 per applicant. As this has not been confirmed and is not stated within the admissions material, the visitors were unable to locate where this would be communicated to potential applicants. The visitors therefore require the education provider to clarify all costs and entry requirements for the programme, and to confirm how this will be communicated to potential applicants. In this way the visitors can ensure that both the applicant and the education provider will have the information they need to make an informed choice about whether to take up or make an offer of a place on the programme.

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

Condition: The education provider must provide clear information about the subject specific requirements for the MSc as stated in the entry criteria, and clarification on the requirements of HCPC biomedical scientist registration for applicants.

Reason: To evidence this standard, the visitors were directed to page 2 of the programme specification which states the entry requirements as "Minimum of an MSc or equivalent academic level of qualification". The visitors asked for clarification on the subject requirements for the MSc and were advised by the programme team that the MSc is expected to be in a subject relevant to the specialism the applicant is applying for. The visitors were satisfied with this requirement, but were unable to locate where this was stated within the programme documentation. The visitors note that without confirmation of this requirement within the programme documentation, they cannot be certain that this requirement will be consistently applied in the application process. In addition, the visitors heard contradicting statements on the requirements for an applicant to be an HCPC registered biomedical scientist before entering onto the programme. The senior team stated that this was not a requirement upon application, but practice placement educators stated that this was a requirement. For this programme, practice placement educators are likely to be the employers of applicants, and would therefore be committed to supporting them through the process. Due to the

role of practice placement educators, it is important that all parties are clear on the education provider's requirements of applicants' HCPC registration status.
The visitors therefore require the education provider to provide further evidence which clarifies that the MSc is expected to be in a subject relevant to the specialism the applicant is applying for, and further clarity on the requirements for HCPC registration before entering onto the programme. In this way the visitors can ensure that admissions procedures apply appropriate academic and / or professional entry standards.

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 a clear policy for equality and diversity to demonstrate that appropriate equality and diversity procedures are consistently applied throughout the admissions process

Reason: To evidence this standard, the visitors were directed to a number of different documents detailing information on the equality and diversity guidance for the admissions procedures. However, the visitors were unable to locate a clear policy for equality and diversity. The visitors note that without considering a policy, they cannot be sure that equality and diversity will be consistently applied in the application process for the future of the programme. The visitors therefore require the education provider to provide a copy of the equality and diversity policy for the admissions procedures and how this is appropriate to the programme. In this way the visitors can ensure that admissions procedures ensure that the education provider has appropriate equality and diversity policies in relation to applicants and students.

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

Condition: The education provider must provide further information on the proposed business plan for the programme, specifically the collection and allocation of funds.

Reason: To evidence this standard, the visitors were directed to a number of documents which provided an overview of the overarching funding and management structure for the IBMS as an organisation. However, within this documentation, the visitors were unable to identify a clear structure for the collection and allocation of funds specific to this programme. Specifically, the senior team stated that they have not yet agreed the application fee for the programme. In addition, the visitors were unable to identify how staff resources will be disseminated and managed from the IBMS specifically for this programme. The visitors note that without clarity on the specific funding and resources available for this programme they cannot be certain that the programme has, and will continue to have, a secure place in the education provider's business plan. The visitors therefore require further information on the funding and resources available specific to this programme and how these will be disseminated to ensure that the programme has a secure place in the education providers business plan.

3.2 The programme must be effectively managed

Condition: The education provider must provide further information to demonstrate an effective management structure for this programme.

Reason: To evidence this standard, the visitors were directed to a number of documents which provided an overview of the overarching management structure for the IBMS as an organisation. However, within this documentation, the visitors were unable to identify a clear management structure specific to this programme. Specifically, the visitors were unclear on how the structure of governing panels, such as the Education Committee, linked to individual roles and responsibilities. The visitors note that without clarity on the specific management structure for this programme they cannot be certain that the programme is effectively managed. The visitors therefore require further information on the management structure and lines of responsibility specific to this programme to ensure that the programme is effectively managed.

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

Condition: The education provider must provide documentary evidence to demonstrate that an effective monitoring and evaluation system is in place for the programme.

Reason: To evidence this standard, the visitors were directed to a number of documents which showed various forms of monitoring and evaluation for the programme. However, within this documentation, the visitors were unable to identify clear communication channels specific to this programme, to ensure that the monitoring and evaluation systems were maintained. The senior team articulated the communication channels for the programme and highlighted that monitoring and evaluation information initially comes into the Executive Head of Education and is then passed to the Education Committee who meet every three months. The visitors were satisfied with the information provided by the senior team, but were unable to locate this information within the programme documentation. The visitors note that without seeing a clear outline in the programme documentation they cannot be sure that the programme has regular monitoring and evaluation systems in place and will consistently apply them for the future of the programme. The visitors therefore require documentary evidence of the communication channels for monitoring and evaluation as stated by the programme team to ensure that 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 provide further evidence to demonstrate that the criteria, including the professional and academic qualifications, required to successfully apply and be appointed as one of the portfolio verifiers is appropriate to the programme

Reason: The education provider identified the staff in place to deliver the programme as the members of the assessment panel, known as portfolio verifiers. Portfolio verifiers make a recommendation about whether or not the student's portfolio demonstrates that they have meet the standards of proficiency (SOPs) for clinical scientists. The programme team stated that the assessment panel is made up of three portfolio reviewers and that panel members are selected from an existing pool of trained

assessors who are in place for other programmes. The assessment panel consists of three members; one HCPC registered biomedical scientist, one HCPC registered clinical scientist, and a lay representative. During the visit the visitors were presented with the role description of the lay representative and were satisfied with the recruitment criteria for this panel member position. However, the visitors were unable to identify a clear criteria or job specification for either the clinical scientist or the biomedical scientist panel members. Specifically, the visitors were unable to identify the criteria for specialist skills relating to each modality, and how the programme team would assess the qualifications and experience of panel members in this respect. In addition to this, the programme team stated that the modality specific knowledge could be covered by the biomedical scientist panel member. The visitors were therefore unclear how modality specific judgements could be made at a clinical science level. The visitors therefore require further evidence demonstrating the criteria, including the professional and academic qualifications required to apply and be appointed as a portfolio reviewer on the programme.

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 evidence demonstrating appropriate staff development requirements and opportunities for members of the portfolio review panel.

Reason: To evidence this standard, the visitors were directed to information regarding training opportunities for internal IBMS staff. However, the visitors were unable to locate any information on the staff development in place for portfolio reviewers. Specifically, the visitors were unable to locate any staff development opportunities and how the uptake of these opportunities would be monitored. The visitors note that without seeing a clear strategy in place for the staff development available to portfolio reviewers, they cannot be certain that a programme for staff development is in place to ensure continuing professional and research development. The visitors therefore require further information on the staff development opportunities in place for portfolio reviewers to ensure that reviewers have the opportunity to develop their professional skills.

3.17 Service users and carers must be involved in the programme.

Condition: The education provider must provide further evidence to support their choice of service user and carer representatives for the programme.

Reason: To evidence this standard the education provider provided information on two groups of people who would act as a service user and carer representatives on the programme.

Firstly, the education provider identified the lay panel member on the portfolio review panel as a service user and carer representative. The programme team stated that the lay panel member would act as a service user and carer representative as they would have background experience in this field. However, this visitors were unable to locate any information in the lay panel member job description or the person specification that identified service user and carer experience as a requirement. The visitors were satisfied that the lay panel member could be a suitable platform for service user and carer involvement, however due to this detail not being present in the job or person specification the visitors cannot currently see how this will be implemented and

monitored. The visitors note that without this clarification, they cannot be certain that the lay panel member appropriately represents service user and carer involvement in the programme.

Secondly, the education provider identified members of the advisory panel as service user and carer representatives for the programme. The visitors met with two of these panel members at the visit. The visitors were told that the panel members were not necessarily service users and / or carers themselves, but represented the views of service users and carers through patient interaction. Whilst the visitors could see that this could be a way of feeding service user and carer views into the programme, they could not clearly identify how the panel members themselves understood their role as service users and carer representatives. In addition to this, the visitors heard contradicting statements regarding the expectation of the panel members' role. For example, the programme team stated that the role of panel members was to represent their organisation whereas the panel members stated that their role was to represent the patient voice. The visitors note that without consistency in the expectations of the service user and carer role, they cannot be certain that service users and carers are involved with the programme, and, that there is a clear strategy for their involvement. The visitors therefore require further evidence to support the education provider's choice of service user and carer representatives for the programme, or, evidence of other mechanisms in place to ensure that service users and carers are involved in the programme.

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 clearly articulate how the curriculum and learning outcomes, as listed in the modality specific handbooks, ensure that the following standards of proficiency (SOPs) are delivered specific to the scope of practice of a clinical scientist.

Reason: To evidence how and where the programme delivers the SOPs, the visitors were directed to the module handbooks for each modality. In the Modality Handbooks, there was limited information on the level and scope of knowledge required for a clinical scientist in relation to the SOPs listed below. Applicants to the programme will likely be registered biomedical scientists, and there are parallels in wording between the biomedical scientist and clinical scientist SOPs, but the scope of practice for clinical scientists and biomedical scientists is different. Considering the information provided, the visitors noted that there is a risk that individuals could demonstrate that they meet a clinical scientist SOP because they meet the equivalent biomedical scientist SOP. The visitors were unclear how the education provider will ensure that the curriculum for this programme ensures the SOPs are considered as relevant to a clinical scientist, rather than a biomedical scientist. Therefore, further evidence is required to demonstrate how the curriculum ensures each SOP listed below is delivered specific to the scope of practice of a clinical scientist.

1   be able to practise safely and effectively within their scope of practice
   1.1   know the limits of their practice and when to seek advice or refer to another professional
   1.2   recognise the need to manage their own workload and resources effectively and be able to practise accordingly

4   be able to practise as an autonomous professional, exercising their own professional judgement

    4.1   be able to assess a professional situation, determine the nature and severity of the problem and call upon the required knowledge and experience to deal with the problem

9   be able to work appropriately with others

    9.4   be able to contribute effectively to work undertaken as part of a multi-disciplinary team
- Specifically for SOP 9.4, the visitors require clarity on the education provider's understanding of the role of the clinical scientist within the multi-disciplinary team

11   be able to reflect on and review practice

    11.2   recognise the value of case conferences and other methods of review
- Specifically for SOP 11.2, in the Modality Handbooks, there was limited evidence of the education provider's understanding of the wider clinical context and clinical scientists' role within case conferences

12   be able to assure the quality of their practice

    12.1   be able to engage in evidence-based practice, evaluate practice systematically and participate in audit procedures

    12.5   be aware of, and be able to participate in, quality assurance programmes, where appropriate

    12.7   be able to evaluate intervention plans using recognised outcome measures and revise the plans as necessary in conjunction with the service user

13   understand the key concepts of the knowledge base relevant to their profession

    13.1   understand the structure and function of the human body, together with knowledge of health, disease, disorder and dysfunction, relevant to their profession

    13.2   be aware of the principles and applications of scientific enquiry, including the evaluation of treatment efficacy and the research process

    13.6   understand the theoretical basis of, and the variety of approaches to, assessment and intervention

14   be able to draw on appropriate knowledge and skills to inform practice

    14.2   be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and effectively

    14.12 be able to select and use appropriate assessment techniques

    14.14 be able to undertake or arrange investigations as appropriate

    14.15 be able to analyse and critically evaluate the information collected

    14.16 be able to demonstrate a logical and systematic approach to problem solving

    14.17 be able to use research, reasoning and problem solving skills to determine appropriate actions

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 revisit the curriculum, as defined in the modality specific handbooks, to demonstrate the scope and depth of understanding and knowledge required by the programme regarding the clinical scientist standards of proficiency (SOPs) as listed below, as related to the profession and, where applicable, the modality.

Reason: Throughout the Modality Handbooks, there was insufficient detail of the scope and depth of knowledge and understanding required by the programme. Therefore the visitors were unclear how the education provider is able to make judgements that applicants have the knowledge and understanding required relevant to clinical science, and where applicable the modality, for the following SOPs:

2. **be able to practise within the legal and ethical boundaries of their profession**
    2.2 **understand what is required of them by the Health and Care Professions Council**
        - In the Modality Handbooks, there was no evidence to show how applicants will be made aware of the HCPC's requirements for professional indemnity insurance. In particular, how this is different for biomedical scientists and clinical scientists.
    2.5 **know about current legislation applicable to the work of their profession**
        - Further evidence is required in the referencing and understanding of the Human Tissue Act (2004), and the Human Tissue (Scotland) Act (2006), as appropriate to each modality. The UK act was referenced in the Cellular Science Modality Handbook, but does not feature in other Modality Handbooks.
    2.5 **know about current legislation applicable to the work of their profession**
        - **Clinical microbiology** – further evidence is required on the Advisory Committee on Dangerous Pathogens (ACDP) categorisation of the hazard group of micro-organisms and the appropriate containment levels relating to working with organisms in different hazard groups.

12 **be able to assure the quality of their practice**
    The handbooks did not clearly define what the education provider understands, relevant to the profession, of audit procedures.

13 **understand the key concepts of the knowledge base relevant to their profession**
    13.1 **understand the structure and function of the human body, together with knowledge of health, disease, disorder and dysfunction, relevant to their profession**
        - The handbooks for all modalities did not clearly define what the education provider understands, relevant to the profession, of:
            o the structure and function of the human body;
            o health;
            o disease;

o disorder; and
o dysfunction.

13.7 know the basic science underpinning the modality in which they practise, understand relevant basic clinical medicine and be aware of the fundamental principles of clinical practice

- The handbooks did not clearly define what the education provider understands of:
  - o the basic science underpinning each modality;
  - o relevant basic clinical medicine; and
  - o fundamental principles of clinical practice.

13.8 understand the wider clinical situation relevant to the service users presenting to the speciality

- The handbooks did not clearly define what the education provider understands of the wider clinical situation relevant to the service users presenting to the speciality.

13.9 understand the clinical applications of the speciality and the consequences of decisions made upon actions and advice

- The handbooks did not clearly define what the education provider understands of:
  - o the clinical applications of the speciality; and
  - o the consequences of decisions made upon actions and advice.

13.10 understand the evidence base that underpins the use of procedures employed by the service

- The handbooks did not clearly define what the education provider understands of:
  - o the evidence base that underpins the use of procedures employed by the service; and
  - o what the procedures are.

13.11 understand the principles associated with a range of techniques employed in the modality

- The documentation described a list of tests, rather than techniques. The handbooks did not clearly define what the education provider understands of the techniques employed. In addition to this, the visitors were unable to locate sufficient detail on the following modality specific areas:
  - o **Cellular science** – There is insufficient description of disease relevant to the profession and modality. In the Cellular Science Modality Handbook, there were very brief descriptions around pathological processes (page 15), but no reference to other diseases relevant to the modality or profession.
  - o **Haematology** – There is insufficient description of functions of the human body. In the Haematology Modality Handbook, there was no mention of knowledge of blood cell characteristics. There was also no mention of world health organisation classification of haematological malignancies.
  - o **Clinical microbiology** – There is insufficient description of disease, disorder, and dysfunction. In the Medical Microbiology Modality Handbook, there was no virology included in the overarching modality. This was instead split out for the sub modality. The HCPC needs to ensure that

individuals are not overspecialised, and that they can meet the standards as they relate to the modality, but also more broadly across the profession.

- o **Clinical immunology** – There is insufficient description of disease, disorder, and dysfunction. In the Clinical Immunology Modality Handbook, the curriculum did not reference all relevant areas within immunology. For example, there was no mention of the itemised basics of disease repertoire. The judgement that the visitors made for this modality were impacted by the lack of a logical systematic structure in the handbook.
- o **Clinical biochemistry** – There is insufficient description of disease, disorder, and dysfunction. In the Clinical Biochemistry Modality Handbook, there was mention of gastrointestinal inherited metabolic diseases and new born screening, however this could cause confusion as these areas are not always gastrointestinal.
- o For **cellular science** and **haematology**, some elements of the curriculum were split into the sub modalities, meaning that they were not always covered in the overarching modality. In these cases, it was not clear to the visitors whether key areas of the modality would be covered by all students.

13.12 know the standards of practice expected from techniques
- The handbooks did not clearly define what the education provider understands of:
  - o the standards of practice expected from techniques; and
  - o what the techniques are.

14 be able to draw on appropriate knowledge and skills to inform practice

14.2 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and effectively
- The handbooks did not clearly define what the education provider understands appropriate diagnostic or monitoring procedures, treatment, therapy or other actions to be.

14.4 be able to perform a range of techniques employed in the modality
- The handbooks did not clearly define what the education provider understands the range of techniques employed in each modality to be.

14.7 be able to solve problems that may arise during the routine application of techniques
- The visitors were not satisfied that the increased level of autonomy required of a clinical scientist (when compared to a biomedical scientists) was sufficiently reflected in the Modality Handbooks.

14.8 be able to formulate specific and appropriate management plans including the setting of timescales
- Further evidence is required for medical microbiology and clinical biochemistry only. The handbooks did not clearly define what the education provider understands, relevant to the modalities, of specific and appropriate management plans. For example:
  - o **Medical microbiology** – There was no mention of the management of antibiotics.

- o **Clinical biochemistry** – There was no mention of testing through pregnancy or of parathyroid disease.
- **14.9 be able to develop an investigation strategy which takes account of all the relevant clinical and other information available**
  - The handbooks did not clearly define what the education provider understands to be appropriate investigation strategies in the context of this standard.
- **14.11 be able to identify the clinical decision which the test or intervention will inform**
  - The handbooks did not clearly define the knowledge underpinning clinical decisions in the context of this standard.
- **14.12 be able to select and use appropriate assessment techniques**
  - The handbooks did not clearly define what the education provider understands to be appropriate assessment techniques in the context of this standard.
- **14.13 be able to undertake and record a thorough, sensitive and detailed assessment, using appropriate techniques and equipment**
  - The handbooks did not clearly define what the education provider understands to be appropriate techniques and equipment in the context of this standard.
- **14.14 be able to undertake or arrange investigations as appropriate**
  - The handbooks did not clearly define what the education provider understands of investigations in the context of this standard.
- **14.19 be aware of a range of research methodologies**
  - Modality Handbooks referenced "techniques" rather than "methodologies". The handbooks did not clearly define what the education provider understood as "techniques" in this context
- **14.22 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**
  - The handbooks did not clearly define what the education provider understands of data and diagnostic and therapeutic opinions in the context of this standard.

4.2 The programme must reflect the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance.

Condition: The education provider must demonstrate how the programme reflects the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance.

Reason: The visitors were directed to a number of documents to evidence this standard. However, they were unable to locate any information about how the programme reflects the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance. In addition to this, from a review of the module handbooks, the visitors identified a number of areas of the curriculum which were insufficient to ensure that students would meet the standards of proficiency (SOPs) on successful completion of the programme. The visitors were therefore unable to see how the programme had used relevant curriculum guidance to inform the programme. Therefore, the visitors require further evidence to show how the education provider uses relevant curriculum guidance to ensure that the programme reflects the philosophy, core values and knowledge base for the programme curriculum.

4.4 The curriculum must remain relevant to current practice.

Condition: The education provider must provide further evidence of the processes in place to ensure currency in the curriculum, with specific reference to each modality.

Reason: To evidence this standard, the visitors were directed to a number of documents including the modality specific handbooks. However, within this documentation, the visitors were unable to identify clear processes for ensuring the curriculum remained relevant to current practice. The programme team identified that the programme does not deliver any formal teaching and stated that it was therefore their intention to ensure currency of curriculum in the assessment of applicants. Specifically the education provider intends to assess whether the applicant's experience and prior learning is relevant to current practice in the face to face meeting that supports the portfolio assessment. However, the visitors could not identify any clear criteria, specific to each modality, which assessors would use to enable them to make an informed decision on whether an applicant's portfolio is relevant to current practice. The visitors note that it is the responsibility of the education provider to ensure that the curriculum remains relevant to current practice and it is therefore necessary for the education provider to demonstrate the internal mechanisms they have in place to support this. The visitors therefore require further evidence of the processes in place to ensure the curriculum remains relevant to current practice, and the criteria used to inform this assessment.

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 provide further clarity on which methods of learning would be considered appropriate to meet each learning outcome in the assessment of applicants' portfolios.

Reason: To evidence this standard, the visitors were directed to the evidence requirement in the IBMS Registration Equivalence Portfolio (Clinical Scientist). Within this document the visitors identified a number of learning outcomes that applicants are required to demonstrate. However the visitors could not locate any information on which methods of learning would be considered appropriate to meet each learning outcome. Further to this, the visitors could not identify where any such criteria would be communicated to assessors and potential applicants. The visitors note that some areas of learning and learning outcomes will require a specific learning and teaching approach to ensure effective delivery of the curriculum. For example, some practical requirements could not be demonstrated through a paper based or online learning platform. The visitors therefore require the programme team to revisit programme documentation to ensure that, where necessary, examples of appropriate learning and teaching methods are highlighted to both assessors and applicants. In this way the visitors can ensure that the range of learning and teaching approaches are appropriate to the effective delivery of the curriculum.

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

Condition: The education provider must provide further evidence of the audit process and criteria used to approve placements, to demonstrate the effective audit of the placement environment.

Reason: The education provider identifies the applicant's place of work as their placement setting. To evidence this standard, the visitors were directed to the Laboratory training self-assessment form. However, this form did not contain any information on the process used to assess placements, or criteria against which placements would be assessed. The programme team talked through the process and criteria that would be used to assess placement settings which included completing a placement audit, a visit to the placement setting, and placement review meetings every three months. The visitors were satisfied that the process communicated by the programme team was appropriate to audit placements, but the visitors were unable to locate this information within the programme documentation. The visitors note that without having a clear process and criteria identified within the programme documentation, they cannot be certain the processes will be consistently applied to assess all placement settings, for the duration of the programme. The visitors therefore require the education provider to provide documentary evidence of the placement audit process and criteria used to assess if placement settings 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 provide further evidence of the audit process and criteria used to demonstrate the effective approval and monitoring of placements.

Reason: The education provider identifies the applicant's place of work as their placement setting. To evidence this standard, the visitors were directed to the Admittance criteria (laboratory approval). However, this document did not contain any information on the process used to assess placements, or the monitoring processes used once a placement has been approved. The programme team talked through the process and criteria that would be used to assess placement settings which included completing a placement audit, a visit to the placement setting, and placement review meetings every three months. The visitors were satisfied that the process communicated by the programme team was appropriate to approve and monitor placements, but the visitors were unable to locate this information within the programme documentation. The visitors note that without having a clear process identified within the programme documentation, they cannot be certain the processes will be consistently applied to all placement settings, for the duration of the programme. The visitors therefore require the education provider to provide documentary evidence of the processes in place to approve and monitor 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 provide further evidence of the audit process and criteria used to demonstrate the effective approval of placements, specific to equality and diversity policies.

Reason: The education provider identifies the applicant's place of work as their placement setting. To evidence this standard, the visitors were directed to the Laboratory training self-assessment form. However, this form did not contain any information on the process used to assess placements, or clear criteria against which placements would be assessed. The programme team talked through the process and criteria that would be used to assess placement settings which included completing a placement audit, a visit to the placement setting, and placement review meetings every three months. The visitors were satisfied that the process communicated by the programme team was appropriate to audit placements, but the visitors were unable to locate this information within the programme documentation. The visitors note that without having a clear process and criteria identified within the programme documentation, they cannot be certain the processes will be consistently applied to assess all placement settings, for the duration of the programme. The visitors therefore require the education provider to provide documentary evidence of the placement audit process and criteria used to ensure that placement providers have equality and diversity policies in place in relation to students.

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

Condition: The education provider must provide further evidence of the audit process and criteria used to demonstrate the effective approval of placements, specific to the number of appropriately qualified and experienced staff.

Reason: The education provider identifies the applicant's place of work as their placement setting. To evidence this standard, the visitors were directed to the Laboratory training self-assessment form. However, this form did not contain any information on the process used to assess placements, or clear criteria against which placements would be assessed. The programme team talked through the process and criteria that would be used to assess placement settings which included completing a placement audit, a visit to the placement setting, and placement review meetings every three months. The visitors were satisfied that the process communicated by the programme team was appropriate to audit placements, but the visitors were unable to locate this information within the programme documentation. The visitors note that without having a clear process and criteria identified within the programme documentation, they cannot be certain the processes will be consistently applied to assess all placement settings, for the duration of the programme. The visitors therefore require the education provider to provide documentary evidence of the placement audit process and criteria used to ensure that there is an adequate number of appropriately qualified and experienced staff at the practice placement setting.

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

Condition: The education provider must provide further evidence of the audit process and criteria used to demonstrate the effective approval of placements, specific to staff knowledge, skills and experience.

Reason: The education provider identifies the applicant's place of work as their placement setting. To evidence this standard, the visitors were directed to the Laboratory training self-assessment form. However, this form did not contain any information on the process used to assess placements, or clear criteria against which placements would be assessed. The programme team talked through the process and criteria that would be used to assess placement settings which included completing a placement audit, a visit to the placement setting, and placement review meetings every three months. The visitors were satisfied that the process communicated by the programme team was appropriate to audit placements, but the visitors were unable to locate this information within the programme documentation. The visitors note that without having a clear process and criteria identified within the programme documentation, they cannot be certain the processes will be consistently applied to assess all placement settings, for the duration of the programme. The visitors therefore require the education provider to provide documentary evidence of the placement audit process and criteria used to ensure that practice placement educators have relevant knowledge, skills and experience.

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

Condition: The education provider must provide further evidence of the requirements for practice educators to undertake initial and refresher training.

Reason: To evidence this standard, the visitors were directed to the laboratory training self-assessment form. However, this form did not contain any information on the initial or ongoing training requirements for practice placement educators. The programme team stated that training is currently being developed. The visitors note that without seeing content and a process for the delivery of practice educator training, they cannot be certain that training will be appropriate and consistently applied, for the duration of the programme. The visitors therefore require the education provider to provide evidence of the initial and refresher training content and delivery for practice educators and how this will be monitored.

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

Condition: The education provider must provide further evidence of the audit process and criteria used to demonstrate the effective approval of placements, specific to the assessment of HCPC registration.

Reason: The education provider identifies the applicant's place of work as their placement setting. To evidence this standard, the visitors were directed to the application form where potential applicants are required to state the name of their chosen mentor and their HCPC registration number. The visitors were satisfied that this form was a way of capturing information on proposed mentors, but they could not see

how this information would be monitored alongside the audit process for practice placements. The visitors note that without having a clear process and criteria identified within the programme documentation, they cannot be certain the information gathered will be fed into the audit process. The visitors also noted that that the education provider has not submitted a clear audit process for practice placements. The visitors therefore require the education provider to provide further evidence of the monitoring of practice placement educator registration and how this feeds into the placement audit process.

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

Condition: The education provider must provide evidence to demonstrate the regular and effective communication with practice placement providers.

Reason: To evidence this standard the visitors were provided with the statement "IBMS Education Team" in the SETs mapping document. The visitors were not provided with any additional evidence to support how the programme meets this standard. The programme team communicated a number of processes that would be used to collaborate with practice placement providers which included completing a placement audit, a visit to the placement setting, and placement review meetings every three months. The visitors were satisfied that the process communicated by the programme team was appropriate to ensure regular and effective collaboration with the placement providers, but the visitors were unable to locate this information within the programme documentation. The visitors note that without having a clear process and criteria identified within the programme documentation, they cannot be certain the process will be consistently applied to all placements, for the duration of the programme. The visitors therefore require the education provider to provide documentary evidence of the regular and effective collaboration between the education provider and the practice placement provider.

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

Condition: The education provider must provide the training approval standards as referenced in the SETs mapping document, or alternative evidence of how this standard is met, which effectively demonstrates that learning, teaching and supervision encourage safe and effective practice, independent learning and professional conduct.

Reason: To evidence this standard, the visitors were directed to the training approval standards. However, the visitors were unable to locate this information within the programme documentation. Further to this, the visitors were unable to see how the training approval standards would be applied throughout the placement audit process. The visitors were therefore unable to make a judgement on this standard being met. The visitors require the education provider to provide the training approval standards as articulated in the SETs mapping document, or, alternative evidence of how this standard is met, which effectively demonstrates that learning, teaching and supervision encourage 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 provide the training approval standards as referenced in the SETs mapping document, or alternative evidence of how this standard is met, which effectively demonstrates that a range of learning and teaching methods that respect the rights and needs of service users and colleagues is in place throughout practice placements.

Reason: To evidence this standard, the visitors were directed to the training approval standards. However, the visitors were unable to locate this information within the programme documentation. Further to this, the visitors were unable to see how the training approval standards would be applied throughout the placement audit process. The visitors were therefore unable to make a judgement on this standard being met. The visitors require the education provider to provide the training approval standards as articulated in the SETs mapping document, or, alternative evidence of how this standard is met, which effectively demonstrates that a range of learning and teaching methods that respect the rights and needs of service users and colleagues is 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: Considering the conditions applied to SET 4.1 for this programme, the education provider must articulate how the assessment strategy and design ensures that the student who successfully completes the programme is able to demonstrate that they meet the standards of proficiency (SOPs) for clinical scientists.

Reason: To evidence how and where the programme assesses whether students meet the SOPs, the visitors were directed to the module handbooks for each modality. In the Modality Handbooks, there was limited information on the level and scope of knowledge required for a clinical scientist in relation to the particular SOPs mentioned in the conditions for SET 4.1. The visitors note that without clarification on the level and scope of knowledge required in the delivery, they cannot be satisfied that the assessment strategy and design is appropriate to assess the learning outcomes, and therefore ensures that a student who successfully completes the programme has met the SOPs for clinical scientists. Therefore further evidence is required to demonstrate how each of the SOPs listed in each condition under SET 4.1 of this report are assessed specific to the scope of practice of a clinical scientist, and where relevant, of the specific modality.

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 provide evidence to demonstrate that the assessment criteria to be used by portfolio assessors is appropriate to ensure that a student who successfully completes the programme has met the standards of proficiency (SOPs) for clinical scientists, and, how this will be communicated to both assessors and applicants.

Reason: To evidence this standard, the visitors were directed to a number of documents, including the assessor guidance. However, the visitors were unable to locate any information within this documentation which outlined the criteria against which an applicant would be assessed. Specifically, the visitors were unable to identify guidance or criteria on what would be considered as appropriate evidence and therefore enable an applicant to meet each of the SOPs for clinical science. Further to this, the visitors were unable to locate where this information would be made available to applicants. The visitors note that due to the proposed model of delivery for this programme, the assessment criteria for portfolios is imperative in ensuring that applicants are able to meet the SOPs and also to ensure parity in the assessment process. The visitors therefore require further evidence of the guidance and criteria for the assessment of SOPs within the applicant's portfolio. In addition to this the visitors require evidence to show how this information will be made available to both portfolio assessors and applicants.

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

Condition: The education provider must provide evidence to demonstrate that the assessment criteria to be used by portfolio assessors is appropriate to measure the learning outcomes, and, how this will be communicated to both assessors and applicants.

Reason: To evidence this standard, the visitors were provided with a statement that "Portfolio evidence must demonstrate individual standards of proficiency have been met." The visitors were not provided with any supporting documentation for this standard. The visitors considered the assessor guidance, but were unable to locate any information within this document that outlined the criteria against which an applicant would be assessed. Specifically, the visitors were unable to identify guidance or criteria on what would be considered as appropriate evidence for each learning outcome. Further to this, the visitors were unable to locate where this information would be made available to applicants. The visitors note that due to the proposed model of delivery for this programme, the assessment criteria for portfolios is imperative in ensuring that applicants are able to meet the learning outcomes and also to ensure parity in the assessment process. The visitors therefore require further evidence of the guidance and criteria for the assessment of learning outcomes within the applicant's portfolio. In addition to this the visitors require evidence to show how this information will be made available to both portfolio assessors and applicants.

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

Condition: The education provider must provide evidence of the mechanisms for the moderation of the portfolio assessment panel.

Reason: To evidence this standard, the visitors were directed to a number of documents which evidenced the monitoring and evaluation mechanisms in place for the overall assessment process. However, the visitors were unable to locate any information on the monitoring and evaluation of the portfolio assessment panel. Specifically, they were unable to identify any clear moderation of panel decisions that would ensure appropriate standards and parity in the assessment of portfolios. The visitors therefore require further evidence to show how the portfolio assessment panel will be moderated to ensure parity and appropriate standards in the assessment of each applicant's portfolio.

Ruth Ashbee
David Houliston
Christine Morgan
Ross Sadler
David Simms
David Stirling

Visitors' report

Name of education provider	London Metropolitan University
Programme name	Professional Doctorate in Forensic Psychology
Mode of delivery	Full time Part time Flexible
Relevant part of the HCPC Register	Practitioner psychologist
Relevant modality / domain	Forensic psychologist
Date of visit	11 – 12 August 2015

Contents

Executive summary

The Health and Care Professions Council (HCPC) approve educational programmes in the UK which health and care professionals must complete before they can apply to be registered with us. We are a statutory regulator and our main aim is to protect the public. We currently regulate 16 professions. All of these professions have at least one professional title which is protected by law. This means that anyone using the title 'practitioner psychologist' or 'forensic psychologist' must be registered with us. The HCPC keep a register of health and care 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 14 September 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 24 September 2015. At this meeting, the Committee will accept, reject or vary the visitors' recommended outcome. 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 1 September 2015. 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 24 September 2015.

Introduction

The HCPC visited the programme at the education provider as it was a new programme which was seeking HCPC 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 HCPC only visit. The education provider and validating body did not validate or review the programme 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.

Visit details

Name and role of HCPC visitors	Frances Ashworth (Lay visitor)
	Emcee Chekwas (Forensic psychologist)
	George Delafield (Forensic psychologist)
HCPC executive officer (in attendance)	Alex Urquhart
Proposed student numbers	Four per cohort, one cohort per year
Proposed start date of programme approval	1 February 2016
Chair	Richard Skues (London Metropolitan University)
Secretary	Nikki Szaeo (London Metropolitan University)

Sources of evidence

Prior to the visit the HCPC 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	☐	☐	☒

The HCPC did not review descriptions of the modules prior to the visit as the documentation does not exist as this is not a taught programme.

The HCPC 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 HCPC 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	☒	☐	☐
Service users and carers	☒	☐	☐
Learning resources	☒	☐	☐
Specialist teaching accommodation (eg specialist laboratories and teaching rooms)	☒	☐	☐

The HCPC met with a student from the MSc Forensic Psychology programme, as the programme seeking approval currently does not have any students enrolled on it.

The HCPC did not meet with the placement providers and educators as the programme is currently seeking approval and for the proposed programme students organise their own placement providers prior to the application process.

Recommended outcome

To recommend a programme for approval, the visitors must be satisfied 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 the relevant part of the Register.

The visitors agreed to recommend to the Education and Training Committee that a condition is set on the programme, which must be met before the programme can be approved.

The visitors agreed that 57 of the SETs have been met and that conditions should be set on the remaining SET.

Conditions are requirements that the education provider must meet before the programme can be approved. 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 have also made a recommendation for the programme.

Recommendations are observations on the programme or education provider which do not need to be met before the programme can be approved. Recommendations are made to encourage further enhancements to the programme, normally when it is felt that the particular standard of education and training has been met at, or just above the threshold level.

Conditions

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

Condition: The education provider must revise the documentation to ensure that the expectations and requirements for practice placement supervisors are clear to applicants and placement staff.

Reason: For this standard the visitors were directed to the placement handbook, where on page 8 it states that "It is a requirement of the HCPC that all placement supervisors are registered with their professional body" the visitors noted that this is an incorrect statement and should be removed from the documentation. The HCPC does not stipulate that practice placement educators are required to be registered with the professional body, however the HCPC does state that they must be appropriately registered, unless other arrangements are agreed. The programme team explained that applicants are responsible for arranging their placement and agreeing a placement supervisor as part of the application process. The programme team than stated that they would expect a practice supervisor to be an HCPC registered forensic psychologist. The visitors noted that this was not clear in the documentation and therefore require the education provider to revise the documentation to accurately reflect the education providers expectations and requirements about the level of qualification and registration of placement supervisors clear to students and placement staff.

Recommendations

3.17 Service users and carers must be involved in the programme.

Recommendation: It is recommended that the education provider develops the involvement of service users and carers to broaden the range of service user and carer involvement with particular focus on the patient voice.

Reason: In meeting this standard the education provider defined their service users and carers as Her Majesty's Prison Service (HMPS), as such, in designing the programme the education provider consulted with a representative from HMPS. During the validation process the education provider included a representative from London HMPS on the validation panel to represent the needs of service users. The visitors met with a representative from London HMPS who described how her team were involved with the design and validation of the programme, along with plans to be involved in the revalidation process. The visitors agreed that the education provider had defined their service users and have involved them in the programme and are therefore satisfied that this standard is met. However they noted that the current involvement was narrow and did not include the patient voice. Therefore they recommend that the education provider develops the involvement of service users and carers to broaden the range of service user and carer involvement with particular focus on the patient voice.

<div align="right">

Frances Ashworth
Emcee Chekwas
George Delafield

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