

ACADEMY FOR HEALTHCARE SCIENCE HIGHER SPECIALIST SCIENTIST REGISTER EQUIVALENCE ROUTE ASSESSOR TRAINING

Higher Specialist Scientist Equivalence
Assessor Training Day
21st October 2015

Doc ref #042



Introduction

Thank you for agreeing to join the assessor team for the Higher Specialist Scientist Register Equivalence Process

This slide set has been developed to provide an overview of the Professional Standards Authority Approved Higher Specialist Scientist (HSS) Register; the HSS Standards of Proficiency; the underpinning Quality Framework and the Principles of Equivalence. It should be used in conjunction with the Programme Handbook; Applicants Guide and Assessor Guide to provide you with information about the equivalence process prior to attending an assessor training day.

If you have any questions that arise from the information in this slide set you would like to ask before your training day please contact: Beth Dodson (beth.dodson@ahcs.ac.uk)

We look forward to meeting you at the assessor training day.

The Healthcare Science Workforce

- The non medical healthcare science workforce applies science, technology, engineering and mathematics in the fields of biology, microbiology, physiology, medical physics and clinical engineering specifically within the health sector (*inclusive of the NHS, Public Health England and National Blood and Transplant*) to deliver improved health outcomes and health protection for people and communities.
- The following two slides depict how the different specialisms are grouped into four divisions and;
- The four key stages in the career and training pathways:
 - Healthcare Science Assistants and Associates;
 - Healthcare Science Practitioners;
 - Clinical Scientists;
 - Consultant Clinical Scientist.

The Healthcare Science workforce spans 4 divisions and many specialisms

Physical Sciences and Biomedical Engineering

- Biomechanical engineering
- Clinical measurement and Development
- Clinical Pharmaceutical Science
- Diagnostic radiology and MR physics
- Equipment management and clinical engineering
- Medical electronics and instrumentation
- Medical engineering design
- Clinical photography
- Nuclear medicine
- Radiation protection and monitoring
- Radiotherapy physics
- Reconstructive Science
- Rehabilitation engineering
- Renal dialysis technology
- Ultrasound and non-ionising radiation

Physiological Sciences

- Audiology
- Autonomic neurovascular function
- Cardiac physiology
- Clinical perfusion science
- Critical care science
- Gastrointestinal physiology
- Neurophysiology
- Ophthalmic and vision science
- Respiratory physiology
- Urodynamic science
- Vascular science

Clinical Bioinformatics including

- Genomics
- Physical Sciences
- Health Informatics Science
- Pathology
- Physiological Informatics

Life Sciences

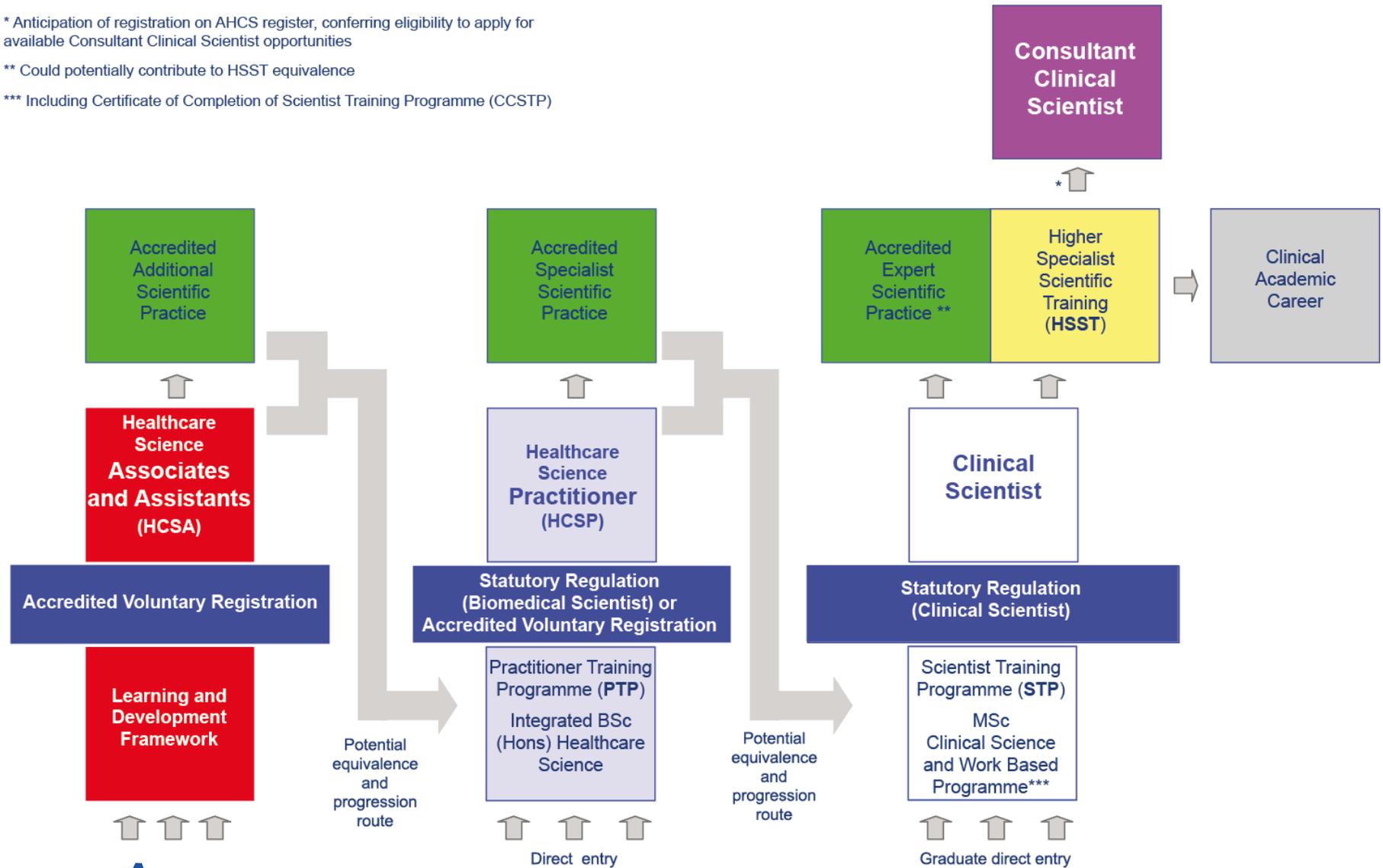
- Analytical Toxicology
- Anatomical pathology
- Blood transfusion science/transplantation
- Clinical biochemistry including paediatric metabolic biochemistry
- Clinical genetics/Genetic Science
- Clinical embryology and Reproductive Science
- Clinical immunology
- Cytopathology including cervical cytology
- Electron microscopy
- External quality assurance
- Haematology
- Haemostasis and thrombosis
- Clinical Immunology
- Histocompatibility and Immunogenetics
- Histopathology
- Microbiology
- Virology
- Molecular pathology of acquired disease
- Molecular pathology of Infection
- Phlebotomy
- Tissue banking

The MSC UK Model for Career and Training Pathways in Healthcare Science

* Anticipation of registration on AHCS register, conferring eligibility to apply for available Consultant Clinical Scientist opportunities

** Could potentially contribute to HSST equivalence

*** Including Certificate of Completion of Scientist Training Programme (CCSTP)



The Higher Specialist Scientist Register

The next set of slides provide an overview of the registers held by the Academy for Healthcare Science for the Healthcare Science workforce

The Higher Specialist Scientist Register

Session 1

Purpose: to provide knowledge and understanding of the:

1. structure and methodology for the AHCS equivalence process;
2. Early Implementers Programme

Dr Kerry Tinkler, Registrar and Director of Professional Standards

Why have registered healthcare scientists?

To protect the public.....

- Registration of professionals protects patients and is increasingly viewed as essential by employers, providers, commissioners and patients themselves
- Through registration, an individual shows commitment to upholding high professional standards and to keeping their knowledge, skills and experience up-to-date through ongoing professional development

Registration Arrangements for the four levels of HCS registration (Attainment or Equivalence)

MSC Career Framework level/programme	Registration (Health and Care Professions Council (HCPC) or Academy for Healthcare Science (AHCS)) in the context of Enabling Excellence	
Healthcare Science Assistants and Associates	Hearing Aid Audiologists. Health and Care Professions Council (HCPC): Hearing Aid Dispensers	All other specialisms . AHCS Accredited Register/directory(to be agreed)
Healthcare Science Practitioner (PTP)	Life Sciences: HCPC: Biomedical Scientists	Other specialties: AHCS Accredited Register: HCS Practitioners
Clinical Scientist (STP)	All specialisms: HCPC	
Higher Specialist Scientists (HSST)	All specialisms. AHCS Register: Higher Specialist Scientists	

Equivalence supports routes to registration

- Work to develop a system of registration for Assistants and Associates (Career Framework 2 – 4) is in progress
- The Professional Standards Authority (PSA)approved the AHCS application to hold a register at Practitioner level in December 2014
- The HCPC reapproved the AHCS as an organisation allowed to award STP equivalence in June 2014
- The PSA approved the AHCS application to hold a register for Higher Specialist Scientists in October 2015



The Professional Standards Authority (PSA)

Oversee the following statutory regulators:

- Health and Care Professions Council,
- General Chiropractic Council,
- General Dental Council,
- General Medical Council,
- General Optical Council,
- General Osteopathic Council,
- General Pharmaceutical Council,
- Nursing and Midwifery Council,
- Pharmaceutical Society of Northern Ireland.

The Higher Specialist Scientist Register

The next set of slides provides detailed information on the Higher Specialist Scientist Register

Higher Specialist Scientist Register (HSSR)

- The HSSR rules, processes and procedures have been finalised including Fitness to Practice rules (HCPC)
- The HSSR standards of proficiency have been developed consulted upon and published
- Since the HSST programme takes five years to complete, in the immediate future Equivalence will be the sole route onto the HSSR

What is equivalence

Equivalence

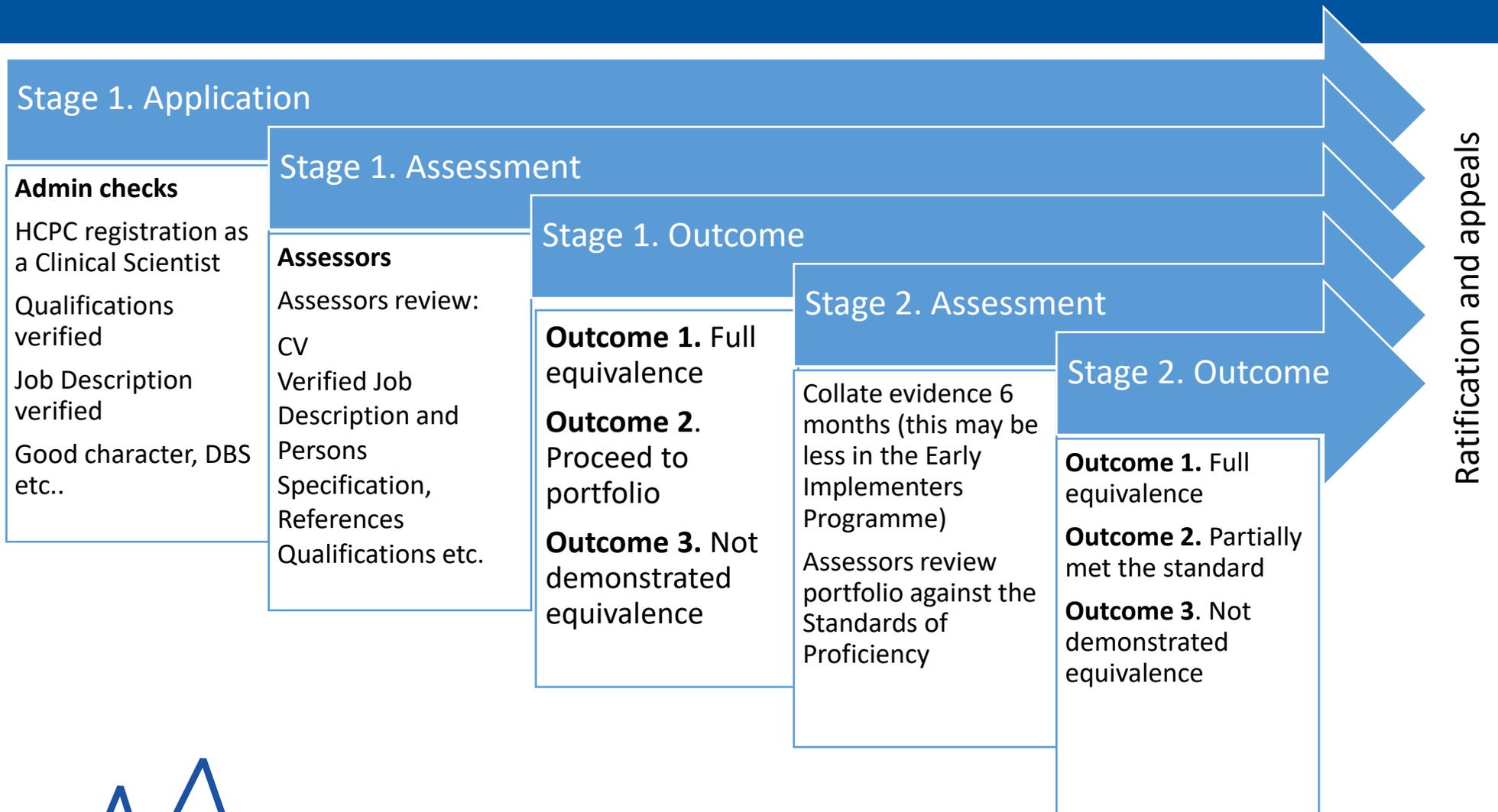
‘Having an equity of worth,
value, significance’

‘Two objects are
comparable but not the
same’

Promoting fairness and
equity



Overview of the HSST Equivalence Process



The Initial Application: Administrative Checks

In the first instance a series of Administrative Checks will be undertaken including:

- HCPC registration number as a clinical scientist
- A valid DBS check (within three years)
- Verified copies of Job Description and Persons Specification
- Two professional references on headed paper
- Applicants from outside the European Economic Area are also required to provide evidence of English language skills
- Complete good character and health declaration
- Pay

Stage 1. Assessment

Assessors review the information provided in the submission against the Standards of Proficiency and make a professional judgement. The information provided is:

- Up-to-date Curriculum Vitae
- Verified Job description and Persons Specification
- Two references
- Qualifications

HSST - Possible Outcomes, Stage 1

Outcome 1: Applicant has demonstrated full equivalence and should be awarded a Certificate of Equivalence.

Outcome 2: Applicant has demonstrated that they may meet the Standards of Proficiency – proceed to portfolio

Outcome 3: Applicant has not demonstrated equivalence and should be advised to undertake further training before resubmitting an application.

Stage 2. Portfolio

Applicants moving into Stage 2 will be required to submit:

- Summary report of training and experience <5000 words
- A map showing how the evidence they are presenting aligns to the Standards of Proficiency but must also consider the relevant and current HSST programme outcomes
- Portfolios should not be longer than 200 pages (>50)

HSST - The Assessment Panel

- Each applicant will be assigned to an assessment panel
- The assessment panel will comprise three trained assessors (1 lay chair and 2 professional assessors)
- Professional assessors will be Consultant Clinical Scientists , Medical Consultants or Academic Senior Lecturers/Readers/Professors
- At least one of the professional assessors must be a specialism expert

HSST - Possible Outcomes, Stage 2

Outcome 1: Applicant has demonstrated full equivalence and should be awarded a Certificate of Equivalence.

Outcome 2: Applicant has demonstrated that they partially meet the Standards required for equivalence and should be advised to undertake action to address specific outcomes and then resubmit the application.

Outcome 3: Applicant has not demonstrated equivalence and should be advised to undertake further training before resubmitting an application.

Ratification and Appeals

- All decisions are ratified by the Education, Training and Professional Standards Committee
- There is a 28 day window for appeals (process not decision)

Next Steps for the AHCS will include:

- Evaluation of the Early Implementers Programme spanning:
 - Analysis of the feedback from applicants, assessors;
 - Review of the process, documentation, IT system training
 - Economic evaluation
 - Generation of a report and recommendations for the AHCS Board
- A series of Frequently Asked Questions will be developed and published
- A revised Programme Handbook, Applicant Guide and Assessor Guide will be published
- Full implementation of the HSSR Equivalence route in April 2016
- Recruitment and training of more assessors across STP, PTP and HSST, potentially with the Association of Clinical Scientists in 2016

Where is the information?



01543 442150

registration@ahcs.ac.uk

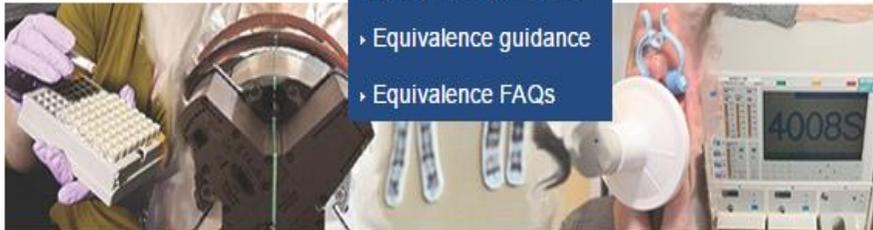
search here...

Go

Sign In

Home News The Register Equivalence Service Accreditation Education & Training About Us Contact Us

- Apply for Equivalence
- Equivalence guidance
- Equivalence FAQs



Academy for Healthcare Science

The Academy for Healthcare Science is the overarching body for the whole of the Healthcare Science Profession, working alongside the specialist professional societies. We work to ensure that Healthcare Science is recognised and respected as one of the key clinical professions in the health and care system, including working towards statutory regulation of all our staff groups to ensure protection for the patients we serve.

Latest News

[All News Articles](#)

Importance of Biomedical Engineers highlighted in New Scientist Article

Academy Chief Executive's November blog for NHS Employers

November e-Bulletin from the National School for Healthcare Science

32 extra HSST training posts announced as part of HEE Genomics programme

The Higher Specialist Scientist Register

The next set of slides provide an overview of the Standards of Proficiency for the Higher Specialist Scientist Register

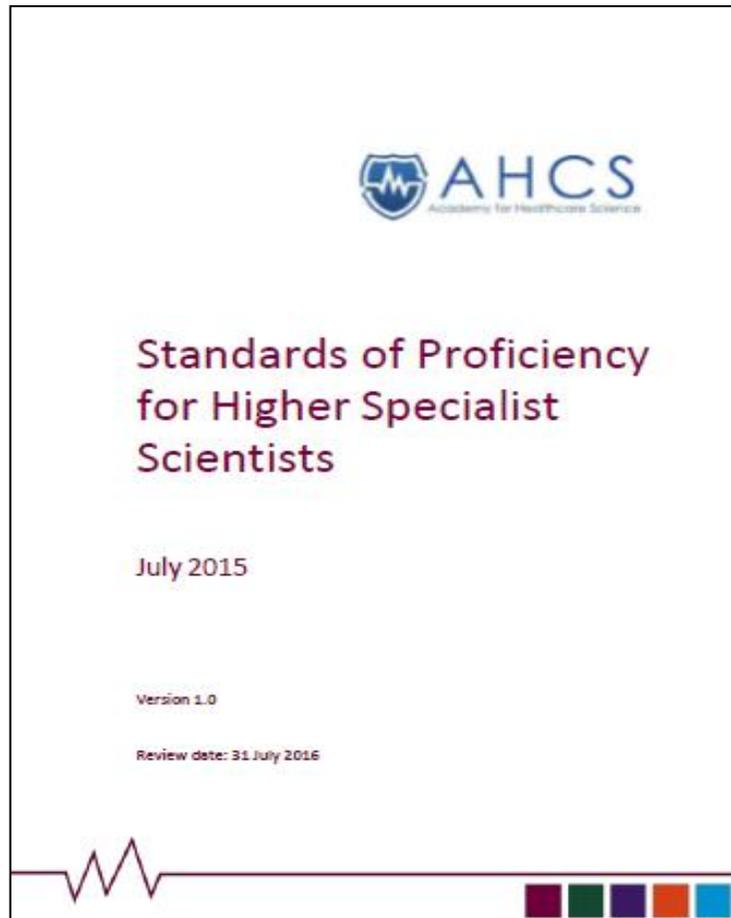
The Higher Specialist Scientist Register

Session 2

Purpose: to provide knowledge and understanding of the Academy of Healthcare Science standards for entry to the HSSR and highlight specific requirements of the equivalence route

Dr Derek Pearson, Professional Adviser and Head of Programmes, Scientist Training Programmes

Higher Specialist Scientist Standards of Proficiency



The Academy's **Standards of Proficiency for Higher Specialist Scientist** (HSS SoP) set out the minimum standard that a person must meet in order to register with the AHCS at this level:

<http://www.ahcs.ac.uk/the-register/register-standards/>

Good Scientific Practice

Good Scientific Practice (GSP) sets out the AHCS overarching standards for the Healthcare Science Workforce covering:

1. Professional Practice
2. Scientific Practice
3. Clinical Practice
4. Research, Development and Innovation
5. Clinical Leadership



Good Scientific Practice



Higher Specialist Scientist (HSS) Standards of Proficiency (SoP)

- Based on Good Scientific Practice (GSP) interpreted at HSS level
- HSST Curriculum mapped to the SoPs and GSP
- Build on HCPC Clinical Scientist SoPs
- HSS will still have to be able to demonstrate that they meet HCPC SoPs to maintain statutory registration
- Demonstrate “fitness to practice” as HSS – skills, knowledge and capacity to practice safely
- Used to approve education programmes leading to eligibility to apply to the HSSR

Higher Specialist Scientist (HSS) Standards of Proficiency (SoP)

- SoP is not the same as Scope of Practice
- Applicants coming forwards for equivalence may have highly specialist roles or moved into management, education or research
- They may not be able to demonstrate that they meet each and every one of the SoPs as long as they are practising effectively and safely within their scope of practice
- Evidence for equivalence must demonstrate compliance with SoPs in the context of their specialism

Domain One: Professional Practice

- Standard 1 – Practise with the professionalism expected of a Consultant Clinical Scientist
- Standard 2 – Ensure professionalism in working with peers and with service users
- Standard 3 – Ensure professionalism in areas of governance and service accreditation
- Standard 4 – Direct the education and training of others

Domain Two: Scientific Practice

- Standard 5 – Lead scientific services
- Standard 6 – Direct scientific validation and evaluation
- Standard 7 – Assure safety in the scientific setting

Domain Three: Clinical Practice

- Standard 8 – Ensure clinical relevance of scientific services provided
 - 8.1 Ensure the provision of highly developed and advanced clinical scientific expertise, advice and interpretation to the multi-professional clinical team and to patients, undertaking scientific responsibilities at a level of accountability similar to that of consultant doctors
- Standard 9 – Deliver effective clinical services
 - 9.1 Play a direct role in the management of complex patients, as part of a multi- professional team

Domain Four: Research, Development and Innovation

- Standard 10 – Lead research, development and innovation in clinical priority areas
 - May have to relate to service development and innovation rather than traditional, academic R&D
- Standard 11 – Evaluate research, development and innovation outcomes to improve scientific service provision
- Standard 12 – Promote a culture of innovation
- Standard 13 – Assure research governance

Domain Five: Clinical Leadership

- Standard 14 – Ensure strategic leadership
 - Leadership across a ‘broad service’
 - Commitment to continual improvement
- Standard 15 – Ensure clinical scientific leadership
 - Engage the patient
 - Be engaged at a professional level nationally
- Standard 16 – Assure effective management of resources

The Higher Specialist Scientist Register

Session 3

Purpose: to provide knowledge and understanding of the AHCS Quality Framework and specific requirements/identified risks

David Bennett, Head of Quality Assurance

AHCS Strategy

Quality Assurance is one of the Academy's **six Strategic Objectives**.

Our overall quality assurance **aim** is to provide wider support and assurance for education and training processes and standards across Healthcare Science by:

- Quality assuring the work of the National School of Healthcare Science
- Supporting the development of new education and training curricula
- Supporting service improvement and accreditation initiatives

Our Quality Assurance Mission

- The Academy's **mission** is to establish, implement and develop Education and Training Standards for the professional accreditation of education and training for all the major career stages of the healthcare science workforce
- The Academy's Quality Assurance Framework sets out our strategic approach to Quality Assurance and the detail of how we deliver our Quality Assurance processes:
<http://www.ahcs.ac.uk/education-training/quality-assurance/>

AHCS Education, Training and Professional Standards Committee

- **Independent** Interim Chair: Professor Ed Peile, Emeritus Professor of Medical Education, University of Warwick
- **Responsible for Standards and Quality Assurance**
- **Close working relationship** with the AHCS Regulation Council
- **Lay representatives** contribute to all the work of the Committee, including for Patient and Public Involvement issues

The HCS Quality Assurance Framework

The three Levels of Quality Assurance: roles and responsibilities

- Level 1: Quality Assurance of the whole HCS system, carried out by the Academy
- Level 2: Quality Management carried out by the Lead LETB for Healthcare Science (Health Education West Midlands), via the National School of Healthcare Science and the National Commissioner for Healthcare Science education
- Level 3: Quality Control, carried out by education and training providers in conjunction with employers.

Standards that the Academy endorses



Professional Standards for the healthcare science workforce exist in the form of *Good Scientific Practice*



The Academy's **Higher Specialist Scientist SOPs**

- *fitness for practise*



Standards of Education and Training (SETs) ensure not only:

- *fitness for practise, but also*
- *fitness for purpose*



'Modernising Scientific Careers' curricula embed *Good Scientific Practice* into all MSC healthcare science courses

How do we Quality Assure?

- By ensuring curricula meet our Standards of Proficiency before approval
- By ensuring the NSHCS follow due process in accrediting the academic and workplace environments and that they meet out SETs. Includes observation of accreditation visits
- By sampling and observing assessments and exam boards
- Quarterly QA meetings with the NSHCS to receive reports, discuss matters of concern, make recommendations and agree actions
- External examiner / scrutineer appointed for each programme
- By producing annual quality assurance reports on AHCS education programmes

Additional Information

- The next slides provide some additional information with respect to:
 - Criteria for Selection of Assessors

CRITERIA FOR APPOINTMENT AS A LAY

Will be specifically appointed to their roles. Lay assessors must not hold or have held registration with a regulator for health and social care, but are expected to have relevant qualifications and experience to make assessment judgements

Assessors will be asked to submit a short CV. The suitability of assessors will be assessed by the Director of Professional Standards and the Chair of the appropriate Professional Group. They will undertake an initial training session and annual refresher training. The AHCS will maintain register of assessors and assessor development.

CRITERIA FOR APPOINTMENT AS A CLINICAL SCIENTIST PROFESSIONAL ASSESSOR

- Normally on the HCPC Clinical Scientist register;
- From an appropriate HSST specialism;
- In good standing with their regulator;
- Currently working as a Consultant Clinical Scientist or at the level of a consultant clinical scientist (or recently retired <2 years);
- Academic (Senior Lecturer/Reader/Professor) with senior level research or education expertise at national level aligned to the HSST specialism;
- Willing to attend initial and annual assessor training

This criteria recognises that there may not previously have been routes to clinical scientist or consultant clinical scientist for many specialisms of Healthcare Science

CRITERIA FOR APPOINTMENT AS A MEDICAL PROFESSIONAL ASSESSOR

- On the GMC register;
- Working in an area that aligns to an HSST specialism;
- In good standing with their regulator.
- Currently working as a medical/surgical consultant, GP or equivalent (or recently retired <2 years);
- Academic (Senior Lecturer/Reader/Professor) with senior level research or education expertise at national level aligned to the HSST specialism;
- Willing to attend initial and annual assessor training

Stage 1 Assessment Process (1)

- Assessment panels will be assigned to each applicant
- The IT system automatically emails each assessor to inform them that they have been assigned
- Assessors can then log on and review the information supplied, ideally within 2-weeks of assignment
- Each assessor completes an assessment form independently which includes:
 - The evidence against which the judgement is being made
 - Feedback for the applicant
- The lay Chair reviews the three independent assessment

Stage 1 Assessment Process (2)

- If all assessors allocate the same outcome the Lay Chair would usually complete the summary assessment form, including the evidence and feedback for the applicant
- If there is a variance of views the Lay Chair convenes a discussion using WebEx which the AHCS Development Co-ordinator can assist in setting up
- Following the discussion if agreement is reached the summary assessment form is completed
- If agreement cannot be reached it would be usual, in this Early Implementers Programme, to move the applicant into Stage 2 and require further evidence

Assessor Training Day