MODERNISING SCIENTIFIC CAREERS

DELIVERING
BSc (Hons) DEGREE PROGRAMMES
IN HEALTHCARE SCIENCE
FOR MODERNISING SCIENTIFIC CAREERS
HEALTHCARE SCIENCE PRACTITIONER TRAINING
PROGRAMME (PTP)

GUIDELINES

FOR HIGHER EDUCATION INSTITUTIONS
AND
THEIR NHS/HEALTH SERVICE PARTNERS

JANUARY 2013
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INTRODUCTION

This guide is intended to help clarify, for Higher Education Institutions (HEIs) and their National Health Service (NHS) partners including Strategic Health Authorities (SHAs) and their successor bodies in England, and the equivalent health service bodies in Northern Ireland, Scotland and Wales, the requirements for delivery of BSc (Hons) degree programmes in Healthcare Science which are accredited as meeting the requirements of Modernising Scientific Careers: The UK Way Forward\(^1\) which sets out the four UK Health Departments’ agreed policy.

The implementation of Bachelors degrees to deliver the Modernising Scientific Careers (MSC) Healthcare Science Practitioner Training Programme (PTP) curriculum requires a partnership between the HE sector and the NHS/health service. Integral to this is the recognition that HEIs are autonomous institutions that will be investing their own resources in MSC approved programmes. In order to achieve accreditation as meeting the requirements of MSC and fit for NHS/health service purpose, there are key principles and criteria which the new degree programmes need to demonstrate are fulfilled.

In producing this guide it is recognised that the NHS education and training landscape in England is undergoing significant change. The HE sector too is experiencing significant changes, with changes to student fees in England prompting a greater focus on employability and return on student investment, and long term repayments. For England, reference is made throughout this document to the NHS and the LETB/SHA, but this should be taken to refer to equivalent health service organisations in Northern Ireland, Scotland and Wales and to successor organisations/structures to English SHAs.

This guide should be read with the relevant BSc curricula and PTP learning guides for the work-based training. The latest versions can be found on NHS Networks at: http://www.networks.nhs.uk/nhs-networks/msc-framework-curricula. HEIs are encouraged to join the network to receive automatic alerts when any changes are made or new material is added.

READERSHIP

This guide is intended to be used by:

- Academic staff within Higher Education Institutions
- Administrative staff within Higher Education Institutions
- External examiners
- Expert reviewers and those involved in MSC accreditation events and reviews

\(^1\) Modernising Scientific Careers: The UK Way Forward, UK Department of Health, February 2010; Product number: 299980; Gateway reference:13494; Copyright holder: Crown
• LETBs/Strategic Health Authorities [or their successor bodies] and equivalent health service organisations in Northern Ireland, Scotland and Wales.
• Commissioners and planners of healthcare science education and training
• Directors of healthcare science training in the workplace
• Work-base trainers, coordinators and supervisors
• Managers of health services that employ healthcare science staff and the healthcare science workforce
• Patients, carers and members of the public
• Professional Bodies and the Academy for Healthcare Science
• Regulatory Bodies i.e. Health and Care Professions Council

BACKGROUND

The integrated BSc (Honours) degree in Healthcare Science combines and blends academic and work-based learning. Within the first year it is expected that the placement component will provide a broad experience including short ‘tasters’ of specialisms within the healthcare science division or theme. This will give the student a wide appreciation of the different specialisms within healthcare science and a more holistic view of the areas which contribute to high-quality care. On successful completion of the degree, the graduate will be able to fulfil the role of a healthcare science practitioner.

Figure 1 below depicts the high level framework around which all BSc (Hons) degree programmes must be structured. Each healthcare science division has interpreted and adapted this MSC framework. This is an indicative model and an HEI can organise these subjects into different modules as long as the proportion, subjects and level remain the same as the diagram.

Extended Academic Year *estimated duration. [XX] = number of credits

**Generic Modules**: common to all divisions of healthcare science
**Division/Theme Specific Modules**: Life Sciences; Physical Sciences and Biomedical Engineering; Cardiovascular, Respiratory & Sleep Sciences; Neurosensory Sciences

**Specialist Modules**: specific to a specialism
An accreditation process has been developed to confirm that HEIs provide students with a Bachelors degree programme that meets the requirements of the MSC Practitioner Training Programme outlined in *Modernising Scientific Careers: the UK Way Forward*\(^2\). This accreditation process is currently the responsibility of the Department of Health (DH) MSC programme team, with advice given by the Medical Education England Healthcare Science Programme Board (MEE HCSPB) and its Education and Training Working Group (MEE HCSPB ETWG).

The Modernising Scientific Careers BSc (Hons) in Healthcare Science has been approved by the MEE HCSPB ETWG as meeting the requirements of the NHS. The overall aim of accreditation is to establish and maintain a high quality education and training experience for students who, on graduation, are able to perform the role of a healthcare science practitioner in the NHS and meet the needs of patients and the public. It is based on adherence to a number of professional and educational and training standards (appendix 5), which apply across MSC healthcare science training programmes including those at undergraduate level.

**Objectives of Accreditation**

The objectives of accreditation are to ensure that each degree programme:

1. meets the requirements of the MSC ethos, framework, educational and training standards, curriculum and learning guides specifications;
2. involves NHS staff, patients and the public;
3. has sufficient academic and clinical expertise and resources;
4. continues to develop and evolve in response to NHS developments, curriculum changes and feedback from employers, students, lay people and other partners.

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\(^2\) Modernising Scientific Careers: The UK Way Forward, UK Department of Health, February 2010; Product number: 299980; Gateway reference:13494; Copyright holder: Crown
### Overview of Accreditation Process

1. **Department of Health (DH) MSC team** publishes guidance for HEIs.
2. **HEI** completes and submits Expression of Interest.
3. DH MSC team contacts HEI to confirm receipt and provide information on submission process including deadline for full submission together with the documentation including self assessment proforma.
4. **HEI** submits full submission by the given deadline.
5. DH MSC team confirms receipt, agrees potential visit date with the HEI and appoints a chair of the visiting panel and panel members.
6. Chair of the visiting panel leads a preliminary review of the submission to confirm that the submission/evidence is sufficient for the accreditation visit to take place.
7. **DH MSC team** confirms if accreditation visit will proceed.
8. Accreditation visit to the HEI.
9. DH MSC team informs the HEI of the visiting panel recommendations, usually within 2 weeks of the visit. When the recommendation is to accredit subject to meeting conditions, the HEI must respond to the conditions and provide further evidence within **ONE** month of the date of the letter.
10. Chair of the accreditation visiting panel reviews the response, drawing on the expertise of the panel as necessary and makes a recommendation to the MSC Practitioner Training Programme (PTP) Accreditation Panel.
11. Chair of the MSC PTP Accreditation Panel reports the Accreditation Panel’s recommendations to the Medical Education England Healthcare Science Programme Board (MEE HCSPB), through its Education and Training Working Group (ETWG).
12. Chair of the MSC PTP Accreditation Panel is advised of the MEE HCSPB’s decision in respect of its recommendation to accredit the degree programme as meeting the requirements of MSC.
13. **DH MSC team** communicates outcome to HEI.
14. Accreditation will normally be for four years. The MSC PTP Accreditation Panel, on the advice of the visiting panel, will recommend the timing of a review, which will normally be 2 years after accreditation, with a full review in 4 years.
Accreditation Standards

S.1 PROGRAMME CONTENT

S.1.1 The academic content of the degree complies with the Modernising Scientific Careers (MSC) curriculum; with the learning outcomes for each module and their relative credit ratings, including procedures for accreditation of Prior Learning and/or Prior Experiential achievements and maximum credit exemption allowed, clearly mapped to the MSC curriculum framework.

S.1.2 The content and timing of the work-based learning programme complies with the MSC curriculum and framework, educational and training standards, ensuring that theory and clinical placements and/or classroom practical components have synergy using a blended learning approach.

S.1.3 The degree programme aligns with, and is mapped to, the MSC educational and training standards (appendix 5) and those of the Health and Care Professions Council Standards of Education and Training and relevant QAA subject statements.

S.1.4 The degree programme content reflects the rights and pledges of the NHS Constitution.

S.1.5 The programme content is based upon current subject specific practice, regular contact with subject specialists, advances in technology and on-going internal/external institutional research/activity which contributes to the programme.

S.1.6 There is a commitment to ensuring continued compatibility with the evolving MSC strategy and communication with the MSC team (or successor body).

S.2 PROGRAMME DELIVERY AND ENVIRONMENT

S.2.1 Resources to support learning/ teaching and practical/clinical space, including IT and e-learning facilities must be appropriate to the curriculum; support student numbers and the subject specialism;

S.2.2 Rigorous Quality Assurance measures are in place across all systems including i) admissions procedures; ii) record keeping; iii) staff recruitment; iv) staff training and development; v) student progression and feedback; vi) programme maintenance and development; vii) internal and external institutional monitoring, audit and evaluation; viii) work-base placement centres, ix assessment

S.2.3 All assessment policies and procedures are valid, reliable, consistent and equitable utilising a spread of assessments; clear module mark descriptors, assessment criteria, credit weightings, module mark determination, deferrals, reassessments, failures and exit routes.
S.2.4 The programme team is appropriately staffed with an adequate number of qualified and experienced staff to deliver the programme. Delivery of specialist modules should have subject specialist knowledge and be members of the relevant professional register and/or professional body; where appropriate are undertaking continuing professional development (CPD);

S.2.5 The work-base placement plan has LETB/Strategic Health Authority (or and NHS partner approval\(^3\), providing high quality learning environments and where appropriate accredited by the National School of Healthcare Science, with an adequate number of qualified and subject experienced staff who are fully prepared for the placements;

S.2.6 The degree programme is taught in a research active academic environment, and is informed by recent research findings.

S.3 PUBLIC, PATIENT AND SERVICE USER INVOLVEMENT

S.3.1 There is an appropriate involvement/interface with patients, carers, NHS policy and the public in the design, delivery, quality assurance and development of the programme.

S.4 LIAISON WITH PROFESSIONAL BODIES

S.4.1 There is appropriate involvement/interface with professional bodies ensuring the programme requirements takes account of any subject registration requirements.

*Additionally the programme must have HEI validation at the point of accreditation. Whenever possible, the MSC accreditation visit will be arranged to coincide with the HEI validation event.

Submission

i. The time lines for submission will be published on NHS Networks.

ii. A separate Expression of Interest must be made for EACH programme i.e. Life Sciences; Physiological Sciences (Cardiovascular, Respiratory and Sleep); Physiological Sciences (Neurosensor); Physical Sciences and Biomedical Engineering (Medical Physics); Physical Sciences and Biomedical Engineering (Clinical Engineering) and submitted to the DH MSC team via mscenquiries@dh.gsi.gov.uk.

iii. On receipt of an Expression of Interest, the HEI will be sent a standard proforma (appendix 3) by the DH MSC team, which must be returned, along with the accompanying documentary evidence by the given deadline;
   a. Each item of documentary evidence must be given a unique reference number;

\(^3\) Or equivalent health service bodies in Northern Ireland, Scotland and Wales.
b. Documentary evidence should be clearly linked to each of the accreditation standards, be focused, relevant, up-to-date and accurate;

c. Documentary evidence should be submitted both electronically and in hard copy;

d. Each page of the documentary evidence should be numbered;

iv. The HEI must supply **four hard copies** of the documentary evidence, which the DH MSC team will arrange to be sent to the DH MSC Accreditation Visiting Panel members;

v. A full day visit may be required for **EACH** programme i.e. Life Sciences; Physiological Sciences (Cardiovascular, Respiratory and Sleep); Physiological Sciences (Neurosensory); Physical Sciences and Biomedical Engineering (Medical Physics); Physical Sciences and Biomedical Engineering (Clinical Engineering) and every attempt will be made to schedule this with a university validation event if appropriate and possible.

The DH MSC team will make the arrangements for travel and accommodation for the panel for the visit but will reclaim these costs from the HEI.

**Programme Delivery**

i. It is expected that the programme should be an integral part of the faculty/school and that opportunities for inter-professional learning are maximised

ii. There should be an appropriate balance between academic staff and visiting specialist staff to ensure teaching reflects current NHS practice

iii. Brief summary CVs should be provided for all academic and NHS teaching staff and should include:
   a. Name and title
   b. Present post
   c. Areas of specialist expertise
   d. Contribution to the programme
   e. Contribution to other HEI programmes
   f. Academic qualifications
   g. Professional qualifications and experience
   h. Teaching qualifications and experience
   i. Research profile, recent publications and other academic activities
   j. Membership of relevant professional register and/or professional bodies
   k. Continuing professional development activities

iv. There should be a written staff development plan for all staff involved in delivering the programme

v. Admission processes should be defined, encompassing selection criteria for the programme and subsequent selection of specialism

vi. Details of the processes for accreditation of prior learning should be provided

vii. Academic and pastoral mentoring/support systems must provide ongoing support, be responsive to urgent situations and have strong links to the work-base in case of difficulty during work-based placements.
These arrangements should link to university student support services and all academic and NHS staff should be fully aware of the support systems in place.

**Accreditation Process**

i. DH will appoint an accreditation visiting panel chair and DH secretariat and the following panel members will normally be included on each panel:

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<th>Member</th>
<th>Key Role</th>
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<tr>
<td>Accreditation Visiting Panel Chair</td>
<td>Leads the review of the submission prior to the visit, identifying any areas where information has not been provided and flagging up any major concerns. Leads the visit and approves the visit notes. The Chair also leads the review of the evidence to meet any conditions and attends the MSC PTP Accreditation Panel meeting to present the visit findings. The Chair may also contribute to the proportionate touch review/on-going monitoring.</td>
</tr>
<tr>
<td>MSC Professional Advisor</td>
<td>Provides advice with respect to alignment of the programme to the MSC division and specialism curricula frameworks and learning outcomes. Link with the professional body representatives.</td>
</tr>
<tr>
<td>Patient/Lay Representative</td>
<td>Advises on programme design, delivery, development and quality assurance and patient/lay involvement at all levels of the programme.</td>
</tr>
<tr>
<td>Professional Advisor from the National School of Healthcare Science (England only)</td>
<td>Advises on alignment with national workforce planning and work-based training including quality assurance of work-based training.</td>
</tr>
<tr>
<td>Representative from the Academy for Healthcare Science</td>
<td>Advises on Education and Training quality and standards.</td>
</tr>
<tr>
<td>Professional Body/ies representative</td>
<td>Provides specialist advice.</td>
</tr>
<tr>
<td>UK Health Department Advisor (except England)</td>
<td>Advises on alignment with Education and Training requirements for Northern Ireland, Scotland or Wales as applicable</td>
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ii. The Chair of the visiting panel will lead an initial review of the submission to ascertain if the submission is complete and identify any
further information needed prior to the visit. This will usually happen within two weeks of submission. If necessary a teleconference with the panel will be convened. The visit will be deferred if the submission is inadequate or incomplete.

iii. The accreditation visit agenda will be agreed between the MSC team and HEI, and if appropriate can be combined with the HEI validation agenda (see Appendix 1). It should provide time for discussions between the accreditation visit panel and HEI senior management, programme leaders and teams, external lecturers, work-based placement providers, lay/patient advisors and students.

iv. The University Registrar must provide a member of staff to take formal meeting notes of the visit.

Accreditation Visit Outcomes

At the end of the visit, the Chair of the accreditation visiting panel will indicate the recommendation which will be made to the MSC PTP Accreditation Panel. The possible outcomes are:

- Accreditation without conditions
- Accreditation subject to meeting conditions
- Accreditation declined, resubmission required

If the recommendation is to accredit subject to meeting conditions the response to the conditions must be received within one month of the date of the outcome letter. The Chair of the accreditation visiting panel will lead the review of the response, drawing on the expertise of the panel as necessary and will make a recommendation to the MSC PTP Accreditation Panel.

In the event of accreditation be declined, the HEI will be offered the opportunity to re-submit within 2 months and will be supplied with details of the reason for the decision.

The MSC PTP Accreditation Panel will be Chaired by the MSC Academic and Training Programme Director (or successor post, or designated nominee) with an independent member(s) to give external scrutiny. Following the MSC PTP Accreditation Panel meeting, the HEI will be notified of its decision.

The Chair of the MSC PTP Accreditation Panel reports the recommendations of the MSC PTP Accreditation Panel to the Medical Education England Healthcare Science Programme Board (MEE HCS PB), through its Education and Training Working Group (ETWG).

The HEI will be formally advised that accreditation is awarded when the MEE HCSPB has received and approved the advice in respect of accreditation.

Any appeals to the outcome must be made in writing within one month of notification of the MSC PTP Accreditation Panel’s decision and submitted to mscenquiries@dh.gsi.gov.uk.
Accreditation is for a period of 4 years, with a proportionate touch review, normally by the end of the second year. Exception reporting requires the HEI to notify DH of changes to the programme during the period of accreditation via mscenquiries@dh.gsi.gov.uk. The proposed changes will be reviewed and a judgement will be made as to whether re-accreditation is required.

Failure of the HEI to maintain compliance with the criteria for accreditation will trigger a review by the DH that may result in accreditation being withdrawn.

**On-going Review**

There will be a review during the period of accreditation, which will normally be towards the end of the second year of the period but could, on the advice of the Accreditation Visiting Panel or at the request of the MSC Team [or successor body], be earlier.

The review is proportionate in that the depth and breadth of the activity will depend upon the evidence provided since the degree was last accredited.

The review will be based upon the documentation and data described below, if the submission supports the view that the programme is being delivered to a high standard, then the review visit will focus on verification and recognition of good practice.

Where the documentation and data, including student or service user feedback indicate that there are, or have been, concerns and difficulties, the review visit will focus on how the HEI has dealt with such issues and whether they have been resolved.

The review will comprise of a paper based review of the submitted documentation followed by a visit (normally one day).

The aim of the paper review is to:

i. receive and review an evaluation of the information on student admissions, progression and attrition;

ii. receive and review annual monitoring reports, minutes of programme committees, external quality assurance reports, student feedback, assessor/supervisor feedback, work-based audits and patient/lay feedback and progress to implement the action plan for patient/lay involvement;

iii. receive and review documented changes to programme modules, delivery strategy, staffing, teaching resources and placement centres, previously approved via HEI regulation requirements and notified to MSC

iv. review progress towards achieving the recommendations of the Accreditation Visiting Panel

At the one-day visit the Panel will confirm the evidence submitted, discuss any issues seeking clarification and

v. meet with HEI students and staff;
vi. review of students’ work, assignments, examinations and training manuals etc;

vii. meet with NHS trainers within the HEI or in the work-base;

viii. meet with SHA (or successor body) staff;

ix. confirm that the programme continues to meet the accreditation criteria

The HEI will be notified of the planned date of the review at least 3 months in advance and the agenda will be agreed once the documentation has been received.

Documentation must be submitted at least 6 weeks in advance of the visit.

The DH visiting team will usually include:
- Chair
- Professional or Professional Body Advisor
- Lay representative
- MSC academic representative
- DH MSC secretariat
- Representative from Northern Ireland, Scotland or Wales as appropriate

The outcome of the review will be:

- Accredited status continues
- Accredited status continues subject to conditions

In the event of failure to meet the conditions set within a specified time period, a process of accreditation withdrawal will commence.

The HEI will be notified of the outcome and additional advice/recommendations shared with them.

DH reserves the right to undertake any further accreditation activity it deems necessary. It will always work in partnership wherever possible.

ACCREDITATION OF PRIOR LEARNING

Work is currently on-going to develop a framework for equivalence that encompasses equivalence of academic, professional and/or experiential attainments at any stage of the career pathway for healthcare science. HEIs should follow the Quality Assurance Agency guidelines. Learning should only be accredited if it is verified as valid, relevant, current and applicable to the particular programme to which the individual has applied. Good practice supports the view that such prior learning should only be used once, double counting is not recommended.

ASSESSMENT

Each HEI is responsible for the assessment programme within its degree programme and for ensuring that its assessment policies and procedures are consistent and equitable. Assessment programmes across the degree must
be fair, valid, equitable, reliable, and proportionate and should meet the 2006
Quality Assurance Agency Code of Practice for the Assurance for Academic
Quality and Standards in Higher Education (Section 6: Assessment of
Students). It is expected that such a programme will include formative and
summative assessment with an appropriate mix of assessment methods. It is
also expected that assessment within the work-based modules will use the
assessment tools detailed in the MSC Assessment Strategy/learning guides.

**Work-Based Assessment**

It is anticipated that programmes will use the assessment methods
recommended by the MSC team and included in the Assessment Strategy
published by the National School of Healthcare Science (NSHCS) to support
consistent national standards of training and assessment, underpinning the
ability for clear and coherent equivalence and quality assurance processes to
be established. It is expected that a suite of assessment methods will be
recommended for the work-based modules, together with a unified online
system tailored for each specialism.

The assessment tools (Direct Observation of Practical Skills, Case-Based
Discussions and Observed Clinical Events (formerly known as MiniCex) and
an online assessment system/student portfolio are recommended for use in
order to:

i. provide evidence of fitness to practice/registration/certification;
ii. provide a source of the evidence for applications for equivalence;
iii. enable and inform decisions about progression of individual students
   and provide a means of identifying students in need of support;
iv. maintain quality and consistency across the MSC PTP programme
v. inform quality assurance of work based training programmes and
   training environments;
vi. support continuing professional development.

The consequences of student failure to complete the work-based modules
successfully must be made clear: i.e. that the MSC accredited degree cannot
be awarded.

**COMPENSATION/CONDONATION**

Whilst it is recognised that HEIs are likely to have a wide portfolio of degree
programmes that fall under a single set of regulations (ordinances) the
conditions set out below are required as part of the MSC BSc (Hons) degree
programme accreditation process irrespective of the HEI's own academic
regulations. All modules are mandatory; no condonation/compensation/
extended re-sits of modules marks is permitted. Multiple assessment
components in any single module cannot be aggregated to reach a final
module mark, for clarification, each assessment within a module should be
mandatory and passed at the required level.
Where students do not achieve the module requirements for progression they must follow a ‘module retrieval plan’ which supports them to recover the failed module[s] as soon as possible so they can progress with minimum delay.

**CURRICULUM**

The current process for approving nationally agreed BSc (Hons) curricula begins with the Education and Training Working Group (ETWG) of the Health Education England (HEE) Healthcare Science Programme Board (HCSPB). The ETWG reviews indicative curricula to ensure that programmes meet the requirements of *Modernising Scientific Careers: The UK Way Forward*. The decisions of ETWG are reported to HEE through the HCSPB and advice is provided to all four of the UK Health Departments. A process will be agreed for approval of curricula in the other UK countries and the overall strategic approach is considered at the UK MSC scrutiny group.


Curriculum revisions will be posted onto this website. Updating and long term storage arrangements for the curriculum are under discussion.

**Curriculum Mapping**

The HEI should clearly structure and map its degree curriculum against the MSC learning outcomes, indicative content and balance of learning and credits specified in the MSC curriculum framework documents for the relevant BSc (Hons) in Healthcare Science. It is recognised that the credit and module structure may vary between HEIs and there is some flexibility but broadly, the structure defined by the MSC curriculum should be met. The programme structure should include the proportion of learning and credits set out in the generic, division and specialism curriculum content. It is for HEIs to deliver those learning outcomes and indicative content in a way that suits their local arrangements (including credits awarded per module and sharing of modules with other students as appropriate/efficient) but the balance of credits to learning outcomes should be retained.

**Curriculum Delivery**

HEIs are encouraged to develop innovative programmes which deliver the MSC curriculum. It is fully acknowledged that the degree programmes may complement and/or be delivered with other modules or degree programmes which the HEI offers. Key principles for delivery of the curriculum include:

- agreements with local and lead education commissioners with respect to which specialism(s) each HEI offers;
- good three-way relationships between the HEI, work base placement providers and education commissioners must be in place and
maintained over time which may be supported by an employer/HEI liaison group, or similar;

- programmes should meet current NHS quality metrics for non medical education and the equivalent of current Health and Care Professions Council and MSC Standards of Education and Training (appendix 5);
- programmes should deliver the MSC learning outcomes and indicative content, which the HEE HCSPB Education and Training Working Group has advised meets the requirements of *Modernising Scientific Careers: the UK Way Forward*;
- involvement of employers and patients in the design, implementation, delivery, review and quality assurance of each course;
- clarity as to where and how the generic curriculum is integrated and delivered, including all underpinning theory;
- a fair, valid and reliable assessment system that is clearly articulated for all modules;
- opportunities for shared learning, across healthcare science and with other health professions, should be provided;
- curricula that address equality and diversity issues, as locally appropriate;
- a timetable to ensure that wherever possible the principles and knowledge underpinning practice are delivered before the specialist application and practice-based modules;
- innovative methods of teaching and learning e.g. for teaching anatomy and pathology the use of web-based learning, 3-D anatomical packages, prosection and virtual prosection, virtual microscope and observation of dissection;
- clearly stated teaching and learning methods, which should maximise opportunities for blended learning;
- suitable teaching and learning facilities; students should have access to learning in clinical skills centres/simulation centres/teaching/research laboratories as appropriate;
- simulated clinical or laboratory environments to prepare students for the workplace can be used as part of a blended learning approach, particularly in Year 1. However, these learning experiences are not to be a substitute for work-based learning in a clinical/laboratory environment. Students must gain experience in the workplace for the majority of their work-based learning to enhance their learning for practice and prepare them for future career choices.

**Generic Curriculum**

A particular strength of the new MSC programmes is the generic curriculum that underpins MSC training programmes across the entire Career Framework. HEIs should ensure that the learning outcomes from the generic curriculum are clearly visible and integrated across the years of the programme with evidence of how they will be delivered. The relevant theory underpinning different aspects of the generic curriculum should be taught at the appropriate academic level.
Curriculum Revisions

HEIs are expected to ensure programme design and delivery takes account of up-to-date knowledge and technology, latest teaching/learning principles and quality assurance reviews. Modifications to the accredited programmes require notification to the MSC Accreditation team prior to the change being implemented, to ensure the programme continues to meet the Academic Curriculum and Training Manual /Learning Guide (change notification Appendix 4). A change is defined as, when the existing approved programme is to be modified which requires any module, programme design or delivery, to seek prior approval via the HEIs quality assurance processes, or approval of the External Examiner.

It is suggested that exception reporting is submitted annually or at the two-year on-going review prior to the academic changes being applied; the changes will be part of the on-going two-year review.

It is a requirement, even if there are no programme revisions, for HEIs to complete, sign and return the ‘annual monitoring declaration form’ (Appendix 2).

Independent Learning

The design and delivery of programmes should promote student-centered, independent adult learning. Students need to gain the skills necessary for them to manage their own learning and exercise initiative, develop critical thinking, personal and professional responsibility grounded in evidence-based practice.

Inter-professional Learning

Opportunities to enable inter-professional and interdisciplinary learning, within and outside healthcare science should be a fundamental part of each programme. Depending on the HEI’s overall curriculum offer, this may involve collaboration with other HEIs. HEIs are advised to consult section 2 of the QAA Code of Practice for the Assurance of Academic Quality and Standards in Higher Education.

DEGREE CLASSIFICATION

For the purposes of securing an MSC accredited degree, the Year 2 specialism-specific modules must contribute to the calculation that determines the final degree classification. This is irrespective of the HEI’s own academic regulations. It is expected that over time all HEIs will move to the European Credit Transfer (ECTs) system as the accepted module credit scheme.

EQUALITY AND DIVERSITY

All degree programmes (both HEI and the work-based environments) should reference and be able to demonstrate evidence of adherence to the Disability Discrimination Act (DDA) 1995, which was extended to education in September 2002, following amendments introduced by the Special
Educational Needs and Disability Act (SENDA) 2001. Additionally evidence should be demonstrated to show adherence to the Disability Discrimination Act (DDA) (2005) which includes the Disability Equality Duty and the QAA Code of Practice on Students with Disabilities should be available. All degree programmes should also include evidence of adherence to the Equality Act (2010) and any superseding legislation with respect to equality.

PROFESSIONAL SUITABILITY

All programmes must contain explicit details of the requirements of professional practice in their admissions process. The HEI must have a clear policy with respect to Professional Suitability, which must clearly articulate how staff and students are made aware of the policy and how the policy is implemented. The educational provider either in the work base or the HEI must comply with the MSC professional and training and educational standards in order to be eligible for accredited degree status.

Alongside this must be a clear policy on how student whistleblowers are supported. Work-based supervisors/trainers must also be aware of the policy and how they can raise concerns about students through informal and formal means. This should be extended to all staff who may have contact with the student including administrative staff, those assessing the students in the work place, other health care professions and in some instances patients and the public. Breaches of professional practice and behaviour must be reported and investigated in accordance with this Professional Suitability policy and accurate records maintained within the HEI.

LIBRARY RESOURCES/READING LISTS

There should be an adequate stock of up-to-date learning resources to support each BSc (Hons) Healthcare Science degree programme. Up-to-date and appropriate reading lists for all modules, including the specialist modules need to be available. Learning materials should be available to students when they are in the workplace, normally via the HEI’s VLE.

MONITORING AND FEEDBACK

A monitoring and feedback system should be in place that enables HEI staff, students, SHAs/LETBSs and NHS work-based trainers, supervisors, assessors, patients and lay people to provide constructive feedback about the BSc (Hons) programme to the course organisers. A system to monitor the effective implementation of the programme and address any problems that may occur in a timely manner must also be in place.

The feedback and response documents would normally be available for review at accreditation visits, subject to issues of data protection and confidentiality where these may apply.
PATIENT AND PUBLIC INVOLVEMENT

The HEI programme team should have a formal strategy and action plan in place; this should include a set of objectives, systems for monitoring and evaluating the use of volunteers and patients in academic teaching and work-based learning. The plan should demonstrate how patients and public can contribute as part of a working partnership with academics and work-based supervisors. Degree programmes need to make clear and explicit links to new models of service delivery, care and patient pathways. The delivery of high quality, patient centered care should be an integral part of each degree programme, with the emphasis on the contribution of the healthcare science workforce.

It is expected that patients and the public will be represented on HEI programme teams; the aim of this working partnership should be to initiate and take forward training ideas to give a better understanding of the implications of the students work and the impact it has on the treatment of patients, irrespective of whether they have direct contact with patients. This should give the opportunity to meet a range of patients & carers, who will have a lot of knowledge and experience to impart and should increase the understanding and benefit to patients on their journey through the healthcare system. The requirement to do this is driven by the NHS which has learnt that this is a positive way of improving services and service need.

The responsibility of staff in the NHS to maximise quality, productivity, efficiency and to continually strive to improve services should be stressed. Equally important is the ability of graduates from these programmes to communicate with the general public with respect to healthcare science, leading to a better educated public which is encouraged to take responsibility for its own health and well-being and has a greater understanding of the role that evidenced-based science plays in society.

PROFESSIONAL BODY LINKS

It is expected that the HEI will have established links with the relevant members of each profession and where appropriate, professional body, and involve them in the design, delivery and development of all programmes.

PROGRAMME TITLES

The title of the degree programme should be consistent with MSC terminology. The award titles are:

Certificate in Higher Education in Healthcare Science  
Diploma in Higher Education in Healthcare Science  
BSc (Hons) Healthcare Science (Specialism)

If this presents an HEI with a specific difficulty they should contact the DH MSC team for further advice and guidance at mscenquiries@dh.gsi.gov.uk.
RECORD KEEPING AND REGISTRATION

HEIs will have a robust, but fair, non-discriminative and accurate system in place with respect to student registration, assessment, progress, graduation and attrition and record keeping that complies with the current Data Protection Act (DPA) 1998. This system must encompass the time students are on placement in the work-base.

RECRUITMENT AND ADMISSIONS

Marketing and promotion of these programmes is vital to attracting high calibre applicants. The Department of Health has on-going programmes to promote healthcare science in schools and to the public and works with NHS Careers to ensure the information available to prospective students is accurate and up-to-date. HEIs are also expected to engage with schools and the public to promote these programmes and healthcare science.

Whilst the regulations of individual HEIs will apply, it is expected that employers and lay people would usefully offer input to inform the selection and admission process for students for each BSc (Hons) programme in Healthcare Science which is accredited as meeting the MSC specification. Choice of specialism within each degree should be informed following discussions between the SHA/LETB and HEI. It should be made clear to students entering the programme how selection into specialist training is undertaken.

English Language

Figure 2 shows the recognised English language qualifications that international students whose first language is not English are usually required to have to be eligible for admission to the new MSC BSc (Hons) programmes in Healthcare Science, alongside the HEI’s academic requirements for entry. Admissions tutors are also advised to check current regulation/registration requirements.

<table>
<thead>
<tr>
<th>Qualification</th>
<th>Level required</th>
</tr>
</thead>
<tbody>
<tr>
<td>IELTS (International English Language Testing Score)</td>
<td>7.0 with no less than 6 in each element</td>
</tr>
<tr>
<td>Paper-based TOEFL (Test of English as a foreign language)</td>
<td>600 with a TWE (test of written English) of 4.5</td>
</tr>
<tr>
<td>Computer based TOEFL (Test of English as a Foreign language)</td>
<td>250 with no less than 4.5 in essay writing</td>
</tr>
<tr>
<td>IBT TOEFL (Test of English of a foreign language)</td>
<td>88 with no less than 19 in each element</td>
</tr>
</tbody>
</table>

Figure 2: Recognised English language qualifications for international students whose first language is not English
RESEARCH AND INNOVATION

HEIs will ensure that all teaching and learning is current and informed by research to ensure that at graduation the healthcare science practitioners meet the Framework for Higher Education Qualifications (FHEQ) descriptor at level 6 (http://www.qaa.ac.uk/). Each programme should make students aware of the potential contribution of the healthcare science workforce to research and innovation.

Research Project

The research project must link to the practice of healthcare science in the NHS and help students develop their awareness of and adherence to current ethical and research governance guidelines and legislation. The research project should enable students to apply the methods and techniques that they have learned to review, consolidate, extend and apply their knowledge and understanding by initiating, undertaking and disseminating the output from a research project. It is expected that many students will undertake their research project wholly or in part in the workplace and it is recognised that the research project may take the form of a well designed and executed audit project and/or service evaluation.

STAFF EXPERIENCE AND QUALIFICATIONS

- Staff delivering the BSc (Hons) in Healthcare Science must have appropriate qualifications and demonstrate a commitment to their own continuing professional development. They must also be aware of the role of the healthcare science workforce and current priorities in the NHS.
- Teachers of all curricula must have the requisite knowledge, skills and experience including those teaching the specialist curriculum, this includes the subject areas. This teaching should be delivered using up-to-date teaching and learning methods.
- Teaching staff delivering specialist modules and supervising work-based training should normally be a member of the relevant professional register and/or professional body.
- Academic staff and visiting teachers delivering the MSC programmes must be qualified to do so as evidenced by appropriate academic and teaching and learning qualifications and/or experience in higher education.
- Recent experience in a relevant clinical area is considered to be a substitute for a formal teaching and learning qualification if the experience is accompanied by evidence of recent continuing professional development (CPD) aligned to current teaching, learning and assessment methods and research evidence.
- Each HEI must have a robust CPD strategy and implementation plan in place for all staff delivering MSC accredited programmes and staff should keep a record of their activities in this regard.
• Work-based departments/laboratories should have an accredited or designated training officer.

STUDENT SUPPORT

HEIs must have in place systems to monitor student progress support and mentor students during their degree. This should include systems to identify and support students in difficulty including whilst on work-based placements.

TRAINING WORK-BASED TRAINERS

A train the trainers programme should be in place for academic and workplace-based staff and participating lay people. All HEI staff contributing to the degree programme need to be aware of the requirements of the new MSC programmes and understand the fundamental differences between these new programmes and previous programmes. This will include an appreciation of lay/patient perspectives, the current and future role of the healthcare science workforce and the contribution that this workforce can make to research, innovation and quality within the NHS.

Staff training should ensure that all staff involved in the assessment of work-based training are aware of the principles of assessment, the assessment tools/methods and their use. Staff supervising and teaching students in the workplace would be expected to demonstrate recent training and/or experience in student support and feedback and be conversant with the range of student support services available in the HEI.

The work base training environments must adhere to the MSC professional and education and training standards (appendix 5).

WORK-BASED LEARNING

The BSc (Hons) curriculum and full time programme structure approved by the four UK Health Departments as meeting the requirements of the MSC Practitioner Training Programme comprises approximately two thirds of learning in an academic setting and one third (50 weeks) of work-based learning.

The timing of the academic and work-base learning should promote the integration of knowledge, skills and experience including professional practice and ensure that students, wherever possible, are enabled to gain the necessary underpinning knowledge and skills prior to their work-based training. It is expected that in Year 1 the work-based learning will consist of shorter, more frequent time periods in the workplace, with longer blocks of work-based learning in Year 2 and Year 3.

DH guidance indicates that the work-based learning should embrace ten weeks in Year 1, fifteen weeks in Year 2 and twenty-five weeks in Year 3 [see Figure 1 page 4], it is accepted that for timetabling reasons or work-based placement centre work-loads it may be necessary to make minor variations to
this guidance, especially in Years 2 and 3. However, each programme must deliver 50 weeks of work-based learning across the three years. Work-based learning, wherever possible, should be the placement’s normal working day to give maximum learning opportunity and experience of the NHS work culture. Where the work-based learning is timetabled as ‘a week’ this should be Monday to Friday or equivalent, to ensure that the total work-based learning equates to the 50 weeks work-based days over the three years for each student on the programme.

Whilst it is expected that the work-based learning will take place in the workplace, HEIs may wish to make a case for some learning to take place in ‘simulated’ laboratories within an HEI or other suitable organisational setting; this may be relevant particularly in Year 1. Where some work-based learning in Year 1 takes place in an HEI environment or other setting outside the work-base, the HEI must be able to demonstrate equivalent learning including the professional practice outcomes to that which would be delivered in an NHS workplace training provider.

Wherever possible, the academic and work-based learning should be synchronised and interwoven in blocks to enable synergies between the academic and work-based components using a blended learning approach.

The learning outcomes and indicative content that must be achieved in the workplace are contained within the MSC BSc (Hons) curriculum. These are expanded in the PTP learning guides and have a number of associated competencies. Each HEI should have in place a well designed workplace placement plan, which has approval from the LETB/SHA (or its successor bodies) and is the result of engagement with local service providers in and for the NHS. This workplace placement plan should ensure a suitable mix of high quality learning environments and must be clearly articulated in a written format, to reflect the workplace training requirements outlined in the MSC training manuals/learning guides. The PTP training manuals are available at: http://www.networks.nhs.uk/nhs-networks/msc-framework-curricula

The work base environments must comply with the MSC standards for education and training (appendix 5).

**Year 1**

The work-base learning in Year 1 has been designed to orientate the student to the work of the wider healthcare science workforce in the NHS to inform their eventual specialism in Years 2 and 3 of the programme. It is expected that students will have the opportunity to gain a wider appreciation of the NHS across primary, secondary and tertiary care by visiting and observing patient care in a range of healthcare settings and hearing feedback from patients and lay people. Students should also have the opportunity to observe how the work of healthcare science impacts on patients, the patient care pathway and the work of multi-disciplinary teams, including in social care where relevant.

This first year of work-based education will enable the student to integrate learning from the HEI setting with the work undertaken within a healthcare science setting. In addition it will promote learning in context, encourage and
motivate students and provide an opportunity for them to apply and recognise the importance of the basic science they are learning and the professional practice they are developing.

It is envisaged that in the first semester/term, students could undertake a small number of workplace visits and begin to gain some basic practical skills, for example basic life support and hand washing. As the year progresses it is expected that students will spend blocks of time in the workplace up to a total of 10 weeks.

Year 2 and Year 3

As the student progresses through the degree, there will be increasing specialization, although the point at which this occurs will vary among the three divisions of healthcare science (Life Sciences, Physical Sciences and Biomedical Engineering and Physiological Sciences). Students will be working to gain the knowledge, skills and experience needed by a healthcare science practitioner immediately upon commencement of employment. The MSC framework does not allow the Year 2 and 3 work-based learning to be delivered as a sandwich year, or back to back.

Supervision of Workplace-based Learning

The duties, working hours and supervision of students in the workplace must be consistent with the delivery of high quality and safe patient care. Each placement provider must have an appropriately qualified (both professional and with respect to teaching, learning, assessment and supervision) training officer.

Attendance at Workplace-based Placements

Normally, students should achieve and record 100% attendance at work-base placements and will be expected to make up any time lost due to illness or other extenuating circumstances. The responsibility for monitoring lies with the HEI but this will need to follow a process agreed with each work-base supervisor. Decisions as to how any lost time is made up will need to be taken on an individual basis by an HEI in discussion with the student and work-base.

Attainment of Workplace-based Learning Outcomes

Students must pass all elements of the workplace-based modules and complete the workplace assessments.

Quality Assurance of Workplace-based Placements

The quality assurance of workplace-based training will be defined in a formal written agreement between the HEI and NHS service provider and the LETB/SHA and NHS service provider.
The training provider must comply with the MSC educational and training standards (appendix 5).

The type of placement provision may vary dependent upon the specialism and the area of the curriculum being studied. Programme management teams will update their specifications annually and inform workplace-based placement providers well in advance of any changes needed.

It is expected that placement providers will provide high quality placements following generic quality requirements and each HEI will evaluate and monitor the quality of each placement centre.

Workplace-based placements should comply with the MSC educational and training standards and provide:

- a well organised and appropriate programme of education and training;
- an appropriate balance and reliability of teaching;
- appropriate contact with patients;
- regular and constructive feedback on student performance;
- trained staff and systems to assess student competence using the MSC recommended assessment methods;
- clear information in respect of who in the HEI is responsible for the placement and who should be contacted in the event of any difficulties;
- a supportive student centred learning environment;
- the student with access to appropriate facilities;
- clinical supervision and mentoring from appropriately qualified staff.

Workplace-based placements should ensure the student has the opportunity to:

- integrate their underpinning knowledge and practical experience;
- build on and develop their professional practice;
- observe and take part in multi-disciplinary meetings/activities;
- become a member of the department team;
- achieve all of the learning outcomes in the work-based modules.

**CONCLUSION AND FEEDBACK**

This guide provides an overview of the key underpinning principles of the delivery of the new BSc (Hons) degree programmes in Healthcare Science for Modernising Scientific Careers. If you identify any errors or omissions, or would like to suggest additional information that could usefully be included, please email:

mscenquiries@dh.gsi.gov.uk

This guide will be subject to regular review, modification and updating

January 2013
Version 1.6 for 2013
Appendix 1: Typical Agenda for Accreditation Visit

**Meeting title:** XX University BSc (Hons) Healthcare Science (XXXX) Modernising Scientific Careers Accreditation Visit

**Date:**

**Time:**

**Location:**

Please note the MSC team require a private room, separate to the main meeting room for the duration of the visit

**Agenda items:**

<table>
<thead>
<tr>
<th></th>
<th>Agenda Item</th>
<th>Time</th>
<th>Locations</th>
<th>MSC Accreditation Team</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Private Meeting of the MSC accreditation team – This assumes the MSC team have been able to meet the evening before</td>
<td>09.00 - 09.30</td>
<td>Locations</td>
<td>MSC Accreditation Team</td>
</tr>
<tr>
<td>2.</td>
<td>Welcome and Introductions</td>
<td>09.30 – 09.45</td>
<td>Chair and Panel</td>
<td></td>
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<tr>
<td>3.</td>
<td>Brief presentation of the programme</td>
<td>09.45 - 10.00</td>
<td>Programme Director</td>
<td></td>
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<tr>
<td>4.</td>
<td>Open agenda discussion, questions and answers with the University senior management team</td>
<td>10.00 – 10.30</td>
<td>Chair, Panel, University Senior Management</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Open agenda discussion, questions and answers with the programme team including programme director, module leaders, subject/programme librarian</td>
<td>10.30 -11.15</td>
<td>Chair, Panel, Programme Team</td>
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<td></td>
<td>COFFEE</td>
<td>11.15 - 11.30</td>
<td>ALL</td>
<td></td>
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<tr>
<td>6.</td>
<td>Open agenda discussion, questions and answers with the programme team including programme director, module leaders, subject/programme librarian</td>
<td>11.15 -12.30</td>
<td>Chair, Panel, Programme Team</td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>Meeting with current students</td>
<td>12.30 – 13.00</td>
<td>MSC Panel and current students</td>
<td></td>
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<tr>
<td></td>
<td>LUNCH</td>
<td>13.00-13.45</td>
<td>The MSC team</td>
<td></td>
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</table>
require a separate room for a private discussion over lunch

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<tr>
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<tbody>
<tr>
<td></td>
<td>Meeting with NHS Trust/Workplace Supervisors and SHA colleagues</td>
<td>13.45-14.30</td>
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<tr>
<td></td>
<td>Chair, Panel, Programme Team, NHS and SHA colleagues</td>
<td></td>
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<tr>
<td></td>
<td>Final question and answer session with programme team – <em>if required</em></td>
<td>14.30 – 15.00</td>
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<tr>
<td></td>
<td>Chair, Panel, Programme Team</td>
<td></td>
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<tr>
<td></td>
<td>MSC accreditation panel feedback</td>
<td>15.00 -15.15</td>
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<tr>
<td></td>
<td>MSC Accreditation Panel</td>
<td></td>
</tr>
</tbody>
</table>

*The panel may also wish to visit the teaching and learning facilities.*
MODERNISING SCIENTIFIC CAREERS

Annual monitoring declaration form

A separate form must be completed for each MSC accredited programme.

There are two sections of this form which need to be completed.

Section 1  About the education provider
Section 2  Declaration

<table>
<thead>
<tr>
<th>Section 1 – About the education provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of education provider</td>
</tr>
<tr>
<td>Name of awarding / validating body</td>
</tr>
<tr>
<td>(if different from education provider)</td>
</tr>
<tr>
<td>Programme title</td>
</tr>
<tr>
<td>Name of Department, School or Faculty</td>
</tr>
<tr>
<td>(to which the programme belongs)</td>
</tr>
<tr>
<td>Mode of delivery</td>
</tr>
<tr>
<td>☐ Full time</td>
</tr>
<tr>
<td>☐ Part time</td>
</tr>
<tr>
<td>☐ Other (please provide details)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Contact details for person responsible for submitting the form to the MSC Accreditation Team</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
</tr>
<tr>
<td>Job title</td>
</tr>
<tr>
<td>Telephone number</td>
</tr>
<tr>
<td>Email address</td>
</tr>
</tbody>
</table>
Section 2 – Declaration

Declaration to be completed by Head of School / Dean of Faculty or Programme Leader

I confirm that the programme continues to meet the MSC accreditation criteria.

I confirm there have been no unapproved changes to the programme either since initial accreditation was awarded or approved changes have been made.

I confirm the information given on this annual monitoring form is correct and failure to disclose relevant information could result in the programme no longer being accredited.

I confirm that any future significant changes to the programme will be reported to the MSC accreditation team via the major change process and failure to disclose relevant information could result in the programme no longer being accredited.

Name: _______________________________________

Date: ________________________________________

Please return this form to mscenquiries@dh.gsi.gov.uk
Appendix 3: Accreditation Proforma for BSc (Hons)

Accreditation Proforma for BSc (Hons)

The information you supply in this proforma and the supporting information will be used by the Modernising Scientific Careers (MSC) accreditation panel. This information provides the starting point for the accreditation of your undergraduate healthcare science programme.

*For completion by the Course Director*

Please return completed form to mscenquiries@dh.gsi.gov.uk by Monday 18\textsuperscript{th} February 2013

<table>
<thead>
<tr>
<th>HIGHER EDUCATION INSTITUTION</th>
<th>FACULTY</th>
<th>SCHOOL</th>
<th>TITLE OF PROGRAMME</th>
<th>SPECIALISM (S) (Please list each of the specialisms your programme will offer)</th>
</tr>
</thead>
</table>

We are looking for focussed, direct information

* Aligned to Liberating the NHS: Developing the Healthcare Workforce: Education Outcomes Framework

<table>
<thead>
<tr>
<th>Key Domains</th>
<th>Excellent Education = 1</th>
<th>Competent and Capable Staff = 2</th>
<th>Adaptable and flexible workforce = 3</th>
<th>NHS values and behaviours = 4</th>
<th>Widening participation = 5</th>
</tr>
</thead>
</table>
**Overarching requirement**
The degree programme aligns with, and is mapped to, the MSC educational and training standards (appendix 5) and those of the Health and Care Professions Council Standards of Education and Training and relevant QAA subject statements. (See S.1.3)

<table>
<thead>
<tr>
<th>Domain(s)</th>
<th>Accreditation Standard</th>
<th>Documentary Evidence Required</th>
<th>Please provide evidence to demonstrate the programme meets each of the Accreditation Standards</th>
</tr>
</thead>
</table>
| S.1 PROGRAMME CONTENT | **S.1.1** The academic content of the degree complies with the Modernising Scientific Careers (MSC) curriculum; with the learning outcomes for each module and their relative credit ratings, including procedures for accreditation of Prior Learning and/or Prior Experiential achievements and maximum credit exemption allowed, clearly mapped to the MSC curriculum framework | • A high level map clearly showing how the programme maps to the MSC framework  
• A clear delivery plan that demonstrates the timing of module delivery and shows that the underpinning knowledge is delivered before practice  
• Programme specification  
• All module specifications  
• Programme, module and student handbooks |
<table>
<thead>
<tr>
<th>Competent and capable staff (2)</th>
<th>Plan for research projects including location, research topic areas, research environments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adaptable and flexible workforce (3)</td>
<td>Details of the infrastructure supporting the programme</td>
</tr>
<tr>
<td>NHS values and behaviours (4)</td>
<td>Up-to-date reading list</td>
</tr>
<tr>
<td></td>
<td>Details of Prior Learning / Experiential achievements credit exemptions guidance</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>S.1.2</strong> The content and timing of the work-based learning programme complies with the MSC curriculum and framework, educational and training standards, ensuring that theory and clinical placements and/or classroom practical components have synergy using a blended learning approach.</th>
<th><strong>Placement plan for each year of the programme</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Map of module learning, and work-based learning</strong></td>
</tr>
<tr>
<td></td>
<td><strong>List of work-based centres</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Details of how the professional practice aspects of the programme will be delivered and assessed</strong></td>
</tr>
</tbody>
</table>

<p>| <strong>S.1.3</strong> The degree programme aligns with, and is mapped to, the MSC educational and training standards (appendix 5) and those of the Health and Care Professions Council | <strong>Map showing alignment to MSC Professional and Education Standards which reflect the Health and Care Professions Council Standards of Education</strong> |</p>
<table>
<thead>
<tr>
<th>Standards of Education and Training and relevant QAA subject statements.</th>
<th>and Training Map showing alignment with relevant QAA subject statements</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Competent and capable staff (2)</strong></td>
<td>S.1.4 The degree programme content reflects the rights and pledges of the NHS Constitution</td>
</tr>
<tr>
<td><strong>Adaptable and flexible workforce (3)</strong></td>
<td>• Map showing alignment of programme content to the rights and pledges of the NHS Constitution</td>
</tr>
<tr>
<td><strong>NHS values and behaviours (4)</strong></td>
<td><strong>S.1.5</strong> The programme content is based upon current subject specific practice, regular contact with subject specialists, advances in technology and on-going internal/external institutional research/activity which contributes to the programme.</td>
</tr>
<tr>
<td><strong>Competent and capable staff (2)</strong></td>
<td>• Evidence of contact with Service</td>
</tr>
<tr>
<td><strong>Adaptable and flexible workforce (3)</strong></td>
<td>• Evidence of on-going or collaborative research</td>
</tr>
<tr>
<td><strong>NHS values and behaviours (4)</strong></td>
<td>• Evidence that the delivery of the curricula must be relevant to the needs of service commissioners, employers and patients</td>
</tr>
<tr>
<td><strong>Adaptable and</strong></td>
<td><strong>S.1.6</strong> There is a commitment to ensuring continued compatibility with the evolving MSC strategy and</td>
</tr>
<tr>
<td><strong>NHS values and behaviours (4)</strong></td>
<td>• Attendance at local and national MSC meetings</td>
</tr>
<tr>
<td><strong>Adaptable and</strong></td>
<td>Responding to requests for</td>
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<tr>
<td>Flexible Workforce (3)</td>
<td>Communication with the MSC team (or successor body).</td>
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<thead>
<tr>
<th>S.2 Programme Delivery and Environment</th>
<th>Evidence Required</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Excellent Education (1)</strong></td>
<td><strong>S.2.1</strong> Resources to support learning/teaching and practical/clinical space, including IT and e-learning facilities must be appropriate to the curriculum; support student numbers and the subject specialism;</td>
</tr>
<tr>
<td></td>
<td>• Programme resources</td>
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<td></td>
<td>• Student learning facilities</td>
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<td></td>
<td>• Details of teaching and learning in other areas such as Clinical and/or Laboratory Skills Labs that contribute to work-based learning</td>
</tr>
</tbody>
</table>

| Excellent Education (1) | **S.2.2** Rigorous Quality Assurance measures are in place across all systems including:  
  i) admissions procedures  
  ii) record keeping  
  iii) staff recruitment  
  iv) staff training and development  
  v) student progression and feedback  
  vi) programme maintenance and development  
  vii) internal and external monitoring and development |
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<tr>
<td></td>
<td>• admissions (entry requirement and selection criteria)</td>
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<td></td>
<td>• accreditation of prior learning</td>
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<td></td>
<td>• attendance monitoring</td>
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<td>• student support</td>
</tr>
</tbody>
</table>
| external institutional monitoring, audit and evaluation; viii) work-base placement centres, ix assessment | • student progression  
• quality assurance/audits of work-based placements  
• staff development (HEI, NHS specialist teachers, NHS work-based trainers)  
• internal and external annual monitoring reports should be provided (not applicable to new programmes)  
• student support and mentoring processes including information on the links between the HEI and work-base  
• collection of, and response to, student feedback including staff/student consultative committees and student representation on programme and faculty committees  
• employer liaison meeting minutes (with membership list and terms of reference)  
• disability policies  
• equal opportunity policies  
• university academic regulations covering progression, appeals and award  
• pastoral care |

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| | |</p>
<table>
<thead>
<tr>
<th>Excellent education (1)</th>
<th>S.2.3 All assessment policies and procedures are valid, reliable, consistent and equitable utilising a spread of assessments; clear module mark descriptors, assessment criteria, credit weightings, module mark determination, deferrals, reassessments, failures and exit routes</th>
<th>programme evaluation reports</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• School/Faculty overarching assessment strategy</td>
<td>• Summary of the assessment programme for the degree</td>
</tr>
<tr>
<td></td>
<td>• Details of each assessment within each module</td>
<td>• Details of each assessment within each module</td>
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<td></td>
<td>• Mapping of assessments against learning outcomes</td>
<td>• Mapping of assessments against learning outcomes</td>
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<td></td>
<td>• Training of HEI and NHS/health service staff to undertake work-based assessment</td>
<td>• Training of HEI and NHS/health service staff to undertake work-based assessment</td>
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<td></td>
<td>• Details of external examiner(s) and their role</td>
<td>• Details of external examiner(s) and their role</td>
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<td>• A statement that there will be no condonement/compensation of modules and that aggregation of marks will not be allowed in the research or clinical or work-based modules</td>
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<td>• A proforma detailing modules where aggregation of marks is used</td>
<td>• A proforma detailing modules where aggregation of marks is used</td>
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<td></td>
<td>• Details of reassessment/deferral/exit routes</td>
<td>• Details of reassessment/deferral/exit routes</td>
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<td>• Professional Suitability to Practice reports</td>
<td>• Professional Suitability to Practice reports</td>
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</table>
| Excellent education (1) | S.2.4  The programme team is appropriately staffed with an adequate number of qualified and experienced staff to deliver the programme. Delivery of specialist modules should have subject specialist knowledge and be members of the relevant professional register and/or professional body; where appropriate are undertaking continuing professional development (CPD); | • Module recovery plan to recover the failed modules  
• Complete list of all staff contributing to the programme including a brief summary of their contribution  
• CVs of all HEI staff including all those who are named in module specifications  
• CVs of all NHS specialist teaching staff contributing to the programme including details of their specialist area of expertise and teaching qualifications  
• Refer to the relevant section of this guide for further details of the required content of the CVs  
• Evidence of staff CPD |
| Excellent education (1) | S.2.5  The work-base placement plan has LETB/Strategic Health Authority (or and NHS partner approval\(^4\), providing high quality learning | • A list detailing the name, address and contact number for each department who will be supervising students on |

\(^4\) Or equivalent health service bodies in Northern Ireland, Scotland and Wales.
environments and where appropriate accredited by the National School of Healthcare Science, with an adequate number of qualified and subject experienced staff who are fully prepared for the placements;

- The name and CV of the lead trainer in each department, including details of their experience, teaching and assessment qualifications and commitment to continuing professional development
- Confirmation, in writing, from the SHA that a learning agreement is in place for the work-based placement programme
- Copy of the Learning Agreement

*S the equivalent in Northern Ireland, Scotland and Wales

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<tr>
<th>Excellent education (1)</th>
<th>Competent and capable staff (2)</th>
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<tr>
<td><strong>S.2.6</strong> The degree programme is taught in a research active academic environment, and is informed by recent research findings</td>
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<tr>
<td>Evidence the delivery of the curriculum is relevant to current scientific and clinical practice</td>
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<tr>
<td>Evidence of on-going or collaborative research</td>
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</tr>
<tr>
<td>CVs of Key delivery staff who are currently research-active in the relevant curriculum areas.</td>
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</tr>
<tr>
<td>S.3 PUBLIC, PATIENT AND SERVICE USER INVOLVEMENT</td>
<td>EVIDENCE REQUIRED</td>
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</tr>
<tr>
<td>NHS values and behaviours (4) Adaptable and flexible workforce (3)</td>
<td><strong>S.3.1</strong> There is an appropriate involvement/interface with patients, carers, NHS policy and the public in the design, delivery, quality assurance and development of the programme.</td>
</tr>
</tbody>
</table>
| | • A well designed patient engagement plan that involves patients and lay people in all aspects of the programme  
• This plan should be drawn up with the patient/lay person representatives and should have clear time lines by which activities will be achieved and a formal review process  
Development plans |

<table>
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<tr>
<th>S.4 LIAISON WITH PROFESSIONAL BODIES</th>
<th>EVIDENCE REQUIRED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excellent education (1) Competent and capable staff (2)</td>
<td><strong>S.4.1</strong> There is appropriate involvement/interface with professional bodies ensuring the programme requirements takes account of any subject registration requirements</td>
</tr>
</tbody>
</table>
| | • Confirmation that the programme leaders have an on-going relationship with the professional body relevant to each specialism  
• Evidence of the opportunities for inter-professional learning and teaching |
Appendix 4 Change Notification Form

Change notification form

A separate form must be completed for each MSC accredited programme

<table>
<thead>
<tr>
<th>Section 1 – About your programme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of education provider</td>
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<td>Programme title</td>
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<tr>
<td>Mode of delivery</td>
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<tr>
<th>Contact details for person responsible for submitting the change proposal</th>
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</thead>
<tbody>
<tr>
<td>Name</td>
</tr>
<tr>
<td>Job title</td>
</tr>
<tr>
<td>Telephone number</td>
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<tr>
<td>Email address</td>
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<tr>
<th>Section 2 – Outline of change(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please indicate which areas of your programme you feel the change is likely to affect from the list below (delete as appropriate)</td>
</tr>
</tbody>
</table>

1. Academic content  
2. Teaching method(s)  
3. Work-based learning  
4. Admissions  
5. Programme management  
6. Programme resources  
7. Curriculum  
8. Assessment  
9. Other (please state)

Please provide a detailed description of the change being proposed. In order to assess how the change will impact on our standards, it is useful if changes are put in the context of our standards (see page 7 of the Guidelines).
Section 3 – Your review of the change(s)

Is there an event already scheduled to assess the change to the programme or is there a periodic review meeting upcoming?

☐ Yes  ☐ No

If yes, what are the intended dates and format for this event / meeting?


When do you wish to introduce any changes i.e. 2012 or 2013?


Is documentation available now to evidence the change to the programme?

☐ Yes  ☐ No

If no, when will evidence of the change and how MSC standards continue to be met become available?


Section 4 – Confirmation

I confirm that all information relating to the proposed programme changes which have been submitted, and the information provided on these changes, is correct.

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<tr>
<th>Job title</th>
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<th>Date</th>
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Appendix 5 Standards Underpinning MSC Programmes

Professional Standards

- The programme must address the requirements of *Good Scientific Practice* and the professional curriculum related to it.
- Within training environments patients/volunteers must not be exposed to undue risk from teaching and learning and teaching activities.
- Training programmes must support safe, effective, patient centred and compassionate care at all times.
- Successful completion of a programme and conferment of an award leading eligibility for entry to professional registers must ensure fitness to practise in line with GSP.
- Equality and diversity policies must be in place, implemented and monitored in all settings for all programmes fostering equality of opportunity and respecting diversity.
- The programme must deliver the MSC education and training outcomes.
- The delivery of the curriculum must remain relevant to current scientific and clinical practice.
- Professional aspects of practice must be integral to the programme and should be clearly visible in assessment procedures.
- Quality assurance processes must be in place for all parts of the programme.
- The programme must promote self-development, accountability and the personal qualities related required of a healthcare professional.
- Approaches to teaching and learning approaches must foster independent, learner centred learning and must develop evidence-based practice in learners.
- Learners’ and employers’ and patients’ views must be taken into account in the design, delivery and evaluation and development of the programme.
- The programme must provide opportunities for inter-professional teaching and learning and teaching and support the development of the learner in a multi professional team setting.
- The delivery of the curricula must be relevant to the needs of service commissioners, employers and patients.
- Academic providers must ensure that exit awards that do *not* lead to eligibility for healthcare science professional status, must be named appropriately to avoid confusion with any approved healthcare science award.
- Knowledge, skills and work based components of the programme must be integrated.
- The programme must be effectively managed with sufficient and infrastructure, in order to ensure delivery of the required outcomes of training.
Education and Training Standards

1.1.1 The standards for education and training describe in detail the expectations of the NHS in the delivery of a quality programme by individual or consortia arrangements for all providers of academic or work base education and training. Their delivery in the work base is quality managed by the NSHCS, working as part of the West Midlands Multi Professional Deanery, within the lead LETB and on behalf of HEE. Evidence of adherence to these standards by an HEI is required in order to be an accredited MSC undergraduate programme.

1.1.2 The standards for education and training which incorporate many of the expectations of Good Scientific Practice (GSP) are split into three domains, which define the requirements of the NHS and explain and contextualise the overarching professional standards. These are;

- Domain 1: Patient protection and engagement
- Domain 2: Learner centred approach
- Domain 3: Programme content, management and resources

1.1.3 Domain 1) Patient protection and engagement

- Patients must be treated with respect, compassion and dignity, maintaining confidentially.
- Patient safety must protected and patients should not be exposed to risk from learners.
- Patients must be informed when learners will be involved in their care and their consent must be obtained
- Entry requirements for the programme must ensure learners meet essential requirements for patient protection of:
  - English language skills
  - Criminal records checks (CRB)
  - Occupational Health checks
  - Prior knowledge skills and experience
- Admissions procedures must include CRB checks, compliance with health requirements and professional entry and academic standards
- Processes must be in place to handle concerns over trainee/student and their professional suitability throughout the course of the programme.
- Learners must be subject to appropriate supervision at all times and in all settings.
- Assessment processes must be valid, reliable, consistent and equitable.
- Patients must be involved in programme design, delivery, evaluation and development.
- Lay people must be included in recruitment and assessment activities.
1.1.4 Domain 2 Learner centred approach

- Applicants to a programme must be able to access clear and accurate information about the programme, the entry requirements and application process and information about the programme in all settings.
- Procedures must be in place to evaluate/accredit prior experience and learning for entry to and/or exemption from components of the programme.
- Learners must be appropriately prepared for and supported during the programme, including an appropriate induction to the learning environments and resources available for the programme.
- Learners must be appropriately prepared for the work based setting and have relevant knowledge, skills and experience to practice safely under supervision.
- Learners must be able to access appeal processes.
- Learners must be able to access processes to raise concerns about the quality of the education and training programme.
- Learners must be able to access support and guidance in all settings.
- Learners must have identified educators in both educational and work based settings.
- The supervision model must be appropriate for the learning and teaching activities of the programme and the needs of the learner.
- Systems must be in place to identify and address the needs of learners requiring additional support.
- Protocols must be in place to stipulate maximum durations for the programme and to authorise breaks in study, to ensure learning remains current throughout the course of the programme.
- Systems must be in place to gain consent from learners engaging in learning and teaching activities which risk personal injury or disclosure of personal information and reasonable alternative arrangements must be available when consent is not provided.

1.1.5 Domain 3 Programme content, management and resources

Programme Delivery

- The range of learning, teaching and assessment methods must be appropriate to the intended learning outcome.
- The number of educators must be appropriate for the number of learners and associated teaching, learning and assessment and support roles.
- Educators must be appropriately trained to undertake their teaching and assessment and support roles.
- The learning, teaching and assessment environments must be appropriate for the effective delivery of the programme.
• Educators must be appropriately professionally qualified and/or members of the relevant professional register/body.
• The physical resources and the learning resources, including electronic materials, must be appropriate for the effective delivery of the programme.
• The human resources must be adequate for the delivery of the programme.

Assessment

• Assessment must be conducted against objective and documented outcomes.
• Assessment should include both formative and summative approaches.
• The delivery of the assessment should ensure that learners are enabled and supported to successfully meet the learning outcomes upon completion of the programme.
• Feedback following assessment must be learner centred, timely and linked to the assessment outcomes.

Programme Management

• An appropriately qualified professional lead for each programme must be named.
• The respective roles and responsibilities for all parties in the design, delivery, assessment and evaluation of the programme must be documented.
• Educators in the work based setting must have their role in education and training stipulated in their job descriptions.
• The programme must have a secure place in the education provider’s business plan.
• The details of how the programme delivery is managed must be documented and accessible.
• Channels of communication between all parties must be agreed and documented.
• A documented evaluation of the programme delivery must take place at least on an annual basis.
• Work based teaching and learning for undergraduates must be subject to education provider approval, monitoring processes or formal agreements must be in place.