
Education and Training Committee – 20 November 2014

Academy for Healthcare Science (AHCS) – approval of criteria for the recruitment and appointment of clinical science visitors

Executive summary and recommendations

Introduction

The Academy for Healthcare Science (AHCS) delivers two approved clinical science programmes - the Certificate of Attainment (CoA) and Certificate of Equivalence (CoE). Both programmes were initially approved in September 2012. The AHCS are one of two education providers delivering UK approved programmes for clinical scientists (the other being the Association of Clinical Scientists (ACS)).

Although the profession is regulated using one protected title of 'clinical scientist', clinical science registrants practice in highly specialised roles across a number of areas. These areas of specialised practice are grouped broadly by modalities which recognise the overarching areas of practice which clinical scientists specialise in.¹ Whilst the protected title is set out in legislation, modalities are instead formed by the profession itself, and as such can and do change and develop over time as clinical scientists train and specialise in new areas of practice. The standards of proficiency (SOPs) for clinical scientists reflect these arrangements as they set out the knowledge, skills and experience for all clinical scientists without specifying detailed standards according to any specific modalities of practice. This level of detail is usually specified as part of how the curriculum defined for specialist pathways of education and training offered by both the AHCS and the ACS meet the SOPs.

The AHCS submitted major change notification forms in December 2013 detailing changes to the programmes, primarily around;

- the development of four new specialist curriculums (Critical care science, Reconstructive science, Clinical pharmaceutical science and Clinical bioinformatics); and
- governance changes related to the organisations involved in the delivery of the programme.

The majority of these changes have been reviewed through our approval and monitoring processes and ongoing approval was reconfirmed in September 2014. However, it has not been possible to progress the review of the Clinical bioinformatics curriculum as we have been unsuccessful in recruiting a registrant visitor with the relevant knowledge, skills and experience.

¹ <http://www.hcpc-uk.org/aboutregistration/professions/index.asp?id=4#profDetails>

This paper sets out and seeks approval for the criteria which will be used to allocate visitors to the assessment of the Clinical bioinformatics curriculum, for the AHCS approved programmes.

Background

The AHCS award the CoA to individuals who have successfully completed the academic and work-based learning elements of the Scientific Training Programme (STP). The CoE is awarded to individuals seeking recognition that their previous training, qualifications and experience meets the programme outcomes of the STP in their specialist area.

The STP was developed in response to the 'Modernising Scientific Careers (MSC) the UK way forward' policy and comprises of the successful completion of an MSc in Clinical Science plus a period of work-based learning.

According to the NHS website², clinical bioinformatics "is an interdisciplinary field responsible for developing and improving methods for acquiring, storing, organising and analysing biological data that supports the delivery of patient care. It uses many areas of computer science including software tools that generate useful biological knowledge by manipulating "big data".

There are currently three specialisms within Clinical bioinformatics:

- Genomics;
- Health informatics sciences; and
- Physical sciences.

Education providers deliver an MSc in Clinical Science (Clinical bioinformatics) but concentrate on one of these specialisms; this results in a defined pathway for each specialism. However, there are generic and cross-divisional modules / content across the three specialisms. As such we need to undertake an assessment which looks at the Clinical bioinformatics curriculum in its entirety.

To locate suitably qualified and experienced visitors, all existing Partners were contacted to determine whether they had the knowledge, skills and experience to undertake an assessment of Clinical bioinformatics. As our existing Partners had limited knowledge, a recruitment campaign aimed at registrants was undertaken in February and March 2014. As part of this, all clinical scientist registrants were contacted; advertisements were placed on our website; and the AHCS networks were contacted. The campaign was supplemented by conversations with individuals who had shown an initial interest in applying.

To date we have received one application from a registrant who believes they can review the Genomics specialism. Their application is currently on hold until we receive applications from individuals who can review the other two specialisms.

² www.nhscareers.nhs.uk/explore-by-career/healthcare-science/careers-in-healthcare-science/careers-in-bioinformatics/

From our investigations and discussions with the Partners Department, it is highly unlikely we will be able to find one individual who has the knowledge, skills and experience of all three specialisms and who is a registrant.

Allocation of visitors to undertake an assessment of the Clinical bioinformatics curriculum

Part IV of the Health and Social Work Professions Order 2001 (the Order) sets out the role of the visitor in making recommendations on education and training programmes on behalf of the Education and Training Committee. The Order also sets out specific requirements for the allocation of visitors to particular pieces of work which must be adhered to. In addition to these requirements, there are good practice measures in place to ensure that visitors are well placed to make recommendations to the Education and Training Committee on all approval and monitoring work undertaken.

Article 16(6) states:

“Visitors shall be selected with due regards to the profession with which the education and training they are to report on is concerned and at least one of the visitors shall be registered in that part of the register which relates to that profession.”

For the smaller professions we recruit a smaller number of visitors as the number of approved programmes available for them to assess does not warrant large volumes of approval and monitoring work. This limits the visitors available to us but also means that when recruiting, the number of potential visitors is restricted by the overall number of registrants. As clinical science is one of the smaller professions and Clinical bioinformatics is a much smaller, newly developed specialism within it, it is highly unlikely we would be successful with a further recruitment campaign aimed at registrants.

However there are professions not regulated by us, who hold the knowledge, skills and experience in order to be able to undertake this assessment. This is because Clinical bioinformatics is a highly specialised area which has only recently emerged as a distinct area of professional practise in its own right for clinical scientists. Legal advice has confirmed that, given the unsuccessful recruitment activities to date, it is entirely permissible and appropriate that any further recruitment be focused on professionals not regulated by us within the fields of information technology, physics and engineering and informatics. From discussions with the AHCS, individuals are likely to be in senior positions in a range of settings, such as universities, the NHS or independent companies. Therefore a targeted mailing at these individuals using the professional networks available would be the most appropriate course of action.

The proposed approach detailed here is similar to that already agreed by the Committee in November 2012 regarding the allocation of visitors from professions not regulated by us to assess independent prescribing programmes (nurses and pharmacists)³. To ensure the visitor panels have the required expertise of the specialist area to make appropriate recommendations, additional criteria (set out in Appendix one) for the appointment of clinical science visitors to approval and monitoring work should be agreed, and are summarised as follows:

³ <http://www.hpc-uk.org/assets/documents/10003D73enc12-VisitorPartnersforsupplementaryprescribingapprovalwork.pdf>

- The currently agreed requirement for there to always be at least one visitor from the same part of the Register should be expanded for clinical science to ensure the visitor also has relevant experience of working within the specialist area. Alternatively, if no visitors are available or none have the relevant experience, a visitor, who is not registered with us but has current or past experience of working in the specialist area, can be recruited.
- If needed, a second clinical science visitor can be appointed who does not have the specialist experience but has experience of working within the wider profession.

Should new specialist areas be developed within Clinical science, it is anticipated that the same criteria be applied.

Decision

The Committee is asked to agree the criteria for the allocation of visitors to clinical science programmes provided as Appendix one to this paper.

Background information

Education and Training Committee paper, 10 March 2011 (enclosure 5) at www.hcpc-uk.org/aboutus/committees/archive/index.asp?id=547

Education and Training Committee paper, 13 September 2012 (enclosure 12) at www.hcpc-uk.org/aboutus/committees/archive/index.asp?id=589

Resource implications

Resources have been accounted for in the 2014–15 Education Department and Partners Department work plan and budget, and, if necessary, will be taken forward into future work plans and budget.

Appendix two provides a timeframe for the proposed recruitment and assessment of the Clinical bioinformatics curriculum.

Financial implications

Finance resources have been accounted for in the 2014–15 Education Department and Partners Department work plan and budget, and, if necessary, will be taken forward into future work plans and budget.

Appendices

- Appendix one – considerations for visitor allocation to clinical science programmes
- Appendix two – timeframe for proposed recruitment and assessment of Clinical bioinformatics curriculum

Date of paper

23 October 2014

Appendix one - Considerations for visitor allocation to approval and monitoring work

Additional considerations for Clinical science programmes

Always or normally	Consideration
Always	<p>At least one visitor from the Clinical science profession:</p> <ul style="list-style-type: none"> • who is registered with us; and • who has current or past experience of working in the specialist area; <p>or</p> <p>At least one visitor recruited on the following criteria:</p> <ul style="list-style-type: none"> • who has current or past experience of working in the specialist area.
Normally	<p>Two visitors from the Clinical science profession:</p> <ul style="list-style-type: none"> • who are registered with us; and • who have current or past experience of working in the specialist area. <p>If needed, the second visitor can come from the following background:</p> <ul style="list-style-type: none"> • the Clinical science profession who is registered with us, but without the appropriate experience of working in the specialist area.

Appendix two - Timeframes for proposed recruitment and assessment of Clinical bioinformatics curriculum

On the 20 November 2014, the Education and Training Committee will consider the paper Academy for Healthcare Science (AHCS) – approval of new and emerging curriculums. Subject to the Committee’s agreement of the proposed criteria to allocate visitors, the timeframes for the recruitment of visitors to assess the Clinical bioinformatics curriculum are outlined below:

Date	Activity
w/c 24 November 2014	Recruitment opens for four weeks. The role is advertised via our website and newsletters, distributed through professional networks / targeted individuals and promoted on social media.
w/c 5 January 2015	Applications are shortlisted.
w/c 26 January 2015	Interviews take place.
w/c 16 February 2015	Deliver appropriate training and undertake assessment through the major change process. In total, two days.
Mid May 2015	Expect to complete the major change assessment of the Clinical bioinformatics curriculum.