

NSHCS survey re Core Module for STP Curriculum – gathering feedback for the AHCS response

The National School of Healthcare Science is seeking feedback from a range of its stakeholders on the four modules that make up the core curriculum for the STP Programme. The Academy will submit a response and would like to gather your views to help us form that response. To do this we have transcribed the online survey questions into this word document.

I should be grateful if you would review the four core modules and answer the questions below.

Details of the four core modules can be found at:

<https://curriculumlibrary.nshcs.org.uk/stp/review/core-modules/>

Please return the completed word document to Dr Elaine Jenkins, Head of Standards, elaine.jenkins@ahcs.ac.uk **by 5pm 28 January 2021 so that we can put together our response.**

If you wish to respond directly to the survey it can be accessed at:

<http://curriculumreview.nshcs.org.uk/?programme=stp&tracker=core-curriculum>

Survey questions

Welcome {from the National School of Healthcare Science]

We have conducted an extensive review of the curriculum content over the past 2 years. The core curriculum content has been reviewed and written by scientific experts, patient representatives, and leadership professionals and we are now contacting a wider stakeholder group to ask for your comments on this new curriculum.

This content complements the specialist curricula which will be reviewed separately soon. The core curriculum aims to provide essential elements of practice required for all Clinical Scientists.

We would be grateful for your feedback on the content of the core curriculum and suitability of the programme to meet current and future workforce needs.

Your comments will be gathered anonymously and there will be an opportunity to provide further thoughts, comments and feedback at the end of the survey.

Thank you for your time.

IPEM's response to this online survey is below

HEI Delivery

The curriculum is written at MSc/Level 7, do you feel the curriculum is appropriate for this level of study? [please place an X in the relevant box]

Yes	X
No	
Can't comment	

Does the curriculum show suitable and sufficient professional knowledge of the programme?
[please place an X in the relevant box]

Yes	
No	X
Can't comment	

Lacking in anatomy and physiology, this knowledge is part of HCPC Standards of proficiency for clinical scientists (13.1 understand the structure and function of the human body, together with knowledge of health, disease, disorder and dysfunction relevant to their profession.)

Is the curriculum suitable robust and able to adapt to future developments in the field? [please place an X in the relevant box]

Yes	X
No	
Can't comment	

Workplace

Would you be able to deliver this programme within your workplace? [please place an X in the relevant box]

Yes	
No	X
Can't comment	

Module S-C1, Assessments: Comment: Trainees in medical physics (regardless of specialism) will find it hard to complete 4 of the proposed list of DOPS and OSCE (assuming they must be taken from the list). Realistically consent is not something we are involved in. This point is especially salient as the newer model of potentially reducing time in non-specialist areas is introduced. Suggestion: Given there are specific OCEs on remote monitoring and screening, perhaps some could also be added geared towards therapy or diagnostic (i.e. not screening) imaging? Or as there is only 1 DOPS, perhaps one on sharing learning from attending an event/conference, or based around one of the other competencies could be added?

Some of the assessment criteria are irrelevant to the field of radiotherapy physics, but there is no way to leave these unmarked in OLAT so we end up giving nominal marks for these that represent how well it is felt the student performed overall, or we hugely stretch the definition of how these may be interpreted. The irrelevant ones are:

“Is able to interpret and report patient results and provide appropriate clinical advice”

“Can discuss the significance of patient results within the clinical context of the referral”

Neither of these make sense within the context of producing a clinical radiotherapy plan. Yes, an awareness of diagnostic results and how these influenced the decision of the referring consultant may be of some benefit to our field, but it has never been the responsibility of Radiotherapy Physicists to interpret and act on these and should not be expected in training.

Does the core curriculum provide the professional skills to enable a trainee to influence service delivery and development? *[please place an X in the relevant box]*

	Yes	No	Can't comment	Any comments
Now		X		Doesn't consider Medical devices in terms of definition, regulations,, CE marking, risk assessment, or the MHRA.
Future		X		No mention of horizon scanning to anticipate future changes. In the research academic module there is the statement "Universities will support completion of the project in the workplace" there is the implication that academic supervision mandatory, if this is the case then HEI's will claim IP, and consequently workplaces will not allow trainees to complete novel projects that may involve IP. Trusts must be allowed to sponsor their workplace projects

Workforce

Would these professional skills be valuable in the workforce today? *[please place an X in the relevant box]*

Yes	X
No	
Can't comment	

Would a trainee who completed the programme have a valuable role in the workforce in 3 years' time? *[please place an X in the relevant box]*

Yes	X
No	
Can't comment	

Are there any essential skills or knowledge you feel the trainee would be lacking on completion of this programme? *[please place an X in the relevant box]*

Yes	X
No	
Can't comment	

IT awareness: security including firewalls, virus, encryption.

Knowledge of Equipment Lifecycle: specification, tendering & procurement, installation and commissioning, decommissioning.

Role of quality management system

Basic safety related to medical devices, electrical safety testing.

Do you think there is enough consideration of the patient experience? *[please place an X in the relevant box]*

Yes	X
No	

Any comments

[Please enter your comments here]

Would you feel safe being treated by someone who completes this programme? *[please place an X in the relevant box]*

Yes	X
No	

Any comments

[Please enter your comments here]

Is there enough of the following in the curriculum: *[please place an X in the relevant box]*

	Enough Content		Any comments
	Yes	No	
Leadership	X		
Patient/Public Engagement	X		
Communication and confidentiality		X	There seems to be focus on receiving feedback but not necessarily giving it and this is just as important.
Professionalism and professional identity	X		
Standards of practice		X	Module S-C1, competency 18:

			Comment: Doesn't appear to be quite finalised, e.g. punctuation and capitalisation, and as competency 17 is perhaps overly brief. Similar issue with the standards, is there something to follow? Suggestion: More detail in considerations, i.e. no mention of professional body guidelines. Add Learning Outcome 7 to list of relevant Los.
Research and Development	X		
Healthcare Science within NHS		X	Lack of Anatomy and Physiology
Horizon scanning		X	There isn't any

Curricula must meet the Health and Care Professions Council Standards of Conduct, Performance and Ethics, do you feel this curriculum promotes these standards? *[please place an X in the relevant box]*

	Meet the criteria		Any comments
	Yes	No	
Be able to practise safely and effectively within their scope of practice		X	additional understanding of definition of medical devices and risk assessments needed
Be able to practise within the legal and ethical boundaries of their profession	X		
Be able to maintain fitness to practise	X		
Be able to practise as an autonomous professional exercising their own professional judgement	X		
Be aware of the impact of culture, equality and diversity on practice	X		
Be able to practise in a non-discriminatory manner?	X		
Understand the importance of and be able to maintain confidentiality	X		
Be able to communicate effectively		X	Module S-C1, competency 9: Comment: As other competencies include suggestions within considerations, some suggestions for potential audiences may be useful for those a bit daunted by this. Suggestion: E.g. patient support group, becoming a STEM ambassador, patient

			<p>information events, stand in waiting room to highlight e.g. day of [insert specialty], hospital event (annual member's meeting) etc.</p> <p>Module S-C1, competency 13: Comment: Fourth bullet point in considerations refers to drivers and lists most but not all aspects from common approach - PESTLE, doesn't include legal though</p> <p>Module S-C1, competency 13: Comment: Fourth bullet point in considerations refers to drivers and lists most but not all aspects from common approach - PESTLE, doesn't include legal though for some reason. Suggestion: Add legal for completeness.</p>
Be able to work appropriately with others	X		
Be able to maintain records appropriately	X		
Be able to reflect on and review practice		X	<p>Module S-C1, competencies 2 and 3. Comment: There are minor differences between the 2 competencies indicating that reflective practice should behave differently depending on whether or not the outcome was good/bad, when all experiences should be learning. Suggestion: The addition of how this may change your practice in future be added to both (along with the continuous improvement bullet under considerations).</p>
Be able to assure the quality of their practice		X	<p>Module S-C1, competency 17: Comment: Although less is more, I think a few more words in the competency wording itself and the considerations would be helpful. Also the punctuation implies there will be more standards (?international) in the third bullet point. Suggestion: E.g. "Perform an audit " -> "Identify a suitable aspect of practice to</p>

			audit and conduct it in a systematic way”. Possibly add clinical audit to considerations. Also, add Learning Outcome 7 to list of relevant Los.
Understand the key concepts of the knowledge base relevant to their profession		X	lacking in anatomy and physiology
Be able to draw on appropriate knowledge and skills to inform practice	X		
Understand the need to establish and maintain a safe practice environment	X		

Do you think the curriculum upholds the values of the NHS constitution? *[please place an X in the relevant box]*

Yes	X
No	
Can't comment	

Do you think the curriculum is inclusive and promotes equality and diversity? *[please place an X in the relevant box]*

Yes	X
No	
Can't comment	

Anything else.....

Is there anything further you would like to tell us about the content of this curriculum or the

There are references to “Trust” in the work-based content of Module S-C1. There are some trainees (in Wales for example) who do not work for a Trust. A more general term, such as 'Organisation' or 'Employer', would be better, even for trainees in England.