AHCS Guidelines for Accreditation

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Contents

1. Introduction

This document is for use by those offering programmes leading to registration as a practitioner in the disciplines registered by the Academy for Healthcare Science ('the Academy'). It explains the procedures by which the Academy and its representatives carry out accreditation processes.

This document provides a source of reference for:
- Universities and colleges providing or intending to provide academic programmes leading to eligibility to register with the Academy.
- Accreditation Panel

The Academy's Quality Assurance Framework sets out the arrangements the Academy has put in place to quality assure education and training. A programme which holds accreditation has demonstrated that it meets the required standards. Someone who successfully completes an accredited programme is eligible to apply for registration with the Academy in their chosen discipline.

The Academy:
- oversees the National School for Healthcare Science's ('the School') accreditation of healthcare science programmes – specifically the Practitioner Training Programme (PTP) and the Higher Specialist Scientist Training (HSST) Programme; and
- oversees the Institute of Medical Illustrators' (IMI) accreditation of HEI degree programmes that satisfy the academic requirements for graduates to join the AHCS Register of Medical Illustrators; and
- directly accredits pre-registration practitioner level programmes which do not fall within the School's remit.

A programme seeking direct accreditation by the Academy will be evaluated by visitors with appropriate expertise. The visitors will make recommendations about whether the programme should be accredited; accredited with conditions; or refused accreditation.

Programmes are accredited on an open-ended basis, subject to ongoing quality monitoring. A programme which does not participate in quality monitoring, or for which quality concerns are identified, may have its accreditation withdrawn.

2. Roles and Responsibilities

2.1 Parenting Body
Academy for Healthcare Science (AHCS)

2.2 Accrediting Body
AHCS Education, Training and Standards Committee (ETSC)

2.3 Role of the ETS Committee

The ETCS will make decisions about the accreditation of programmes which are directly accredited by the Academy. The overall purpose is to ensure that the Academy's standards and processes for programme accreditation are fairly, consistently, and rigorously applied.

The ETSC will:

- receive and scrutinise visit and quality monitoring reports, together with any observations from education providers.
- moderate reports and outcomes where required, ensuring that clear reasons are given for outcomes; and
- make final decisions or recommendations about the accreditation of programmes.

2.4 Professional Advisor

A discipline-specific professional to provide advice or guidance on programme development or delivery.

3. Funding

The education provider will meet costs incurred by AHCS members visiting the provider to perform accreditation.

4. Quality Assurance of Professional Standards

The Academy's remit extends to the quality assurance of education and training programmes which lead to registration in its Professional Standards Authority (PSA) accredited registers.

A programme which holds accreditation has demonstrated that it meets the required standards. Someone who successfully completes an accredited programme is eligible to apply for registration with the Academy in their chosen discipline.

The Academy:

- oversees the School's accreditation of healthcare science programmes – specifically the Practitioner Training Programme (PTP) and the Higher Specialist Scientist Training (HSST) Programme; and
- oversees the Institute of Medical Illustrators' (IMI) accreditation of HEI degree programmes that satisfy the academic requirements for graduates to join the AHCS Register of Medical Illustrators; and
- directly accredits programmes which do not fall within the School's remit, including practitioner level, pre-registration undergraduate and postgraduate programmes.

Initial programme accreditation is based on the review of peers with relevant expertise and involves:

- submission of documentary evidence against standards; and
- a remote or physical visit to gather and triangulate evidence

In its wider role of promoting and supporting the Healthcare Science workforce the Academy also:

- supports the development of new education and training curricula; and
- supports sector-led service improvement and accreditation initiatives.

Re-accreditation may be required when:

- There are major changes to the programme.
- Significant issues arise from interim monitoring.
- Concerns about a course are raised with the Academy's ETSC.

5. Procedure for Accreditation

It is the responsibility of the education provider to approach the Academy to arrange the accreditation visit. The Academy's ETSC undertakes to commit to an accreditation visit within six months of a request, the date to be set between the host provider and the ETSC.

The ETSC is responsible for accreditation. However, the visit panel will undertake the accreditation visit on its behalf. The ETSC will appoint the Visit Panel (VP) and communicate with the education provider to ensure that the accreditation process is transparent, equitable and undertaken against defined criteria.

The visit will be done remotely (e.g., via MS Teams) to keep the burden of assessment for all parties to a minimum. A physical visit may need to be considered if there were specific issues about facilities or resources in relation to a programme that could only reasonably be assessed by an on-site visit. There should also be an opportunity to meet privately with academic, placement staff and students.

Any programme will be expected normally to meet the standards and curricula published and/or endorsed by the Academy which are used in education quality assurance:

- **Standards of Education and Training** (SETs)
- **Standards of Proficiency** (SOPs)
- **Good Scientific Practice**

The Academy is not directly responsible for the curriculum or competencies as these are established by the School and/or professional bodies. However, it is responsible for ensuring that education providers deliver the content and curriculum as specified.

- **Healthcare Science Curriculum developed by the HEE's National School of Healthcare Science[1]** *For PTP and HSST programmes only*
- **Curriculum framework and/or profession specific guidance where relevant**

Electronic copies of documentation should be sent to the Academy, who will acknowledge receipt. Documentation is required two months prior to the agreed accreditation visit. Membership of the VP will be provided prior to the visit.

The ETSC will endeavour to work within local arrangements for validation/ review providing adequate notice and access are given.

At the end of the accreditation visit, the Visit Panel will offer informal feedback.

Following the visit, written confirmation of the findings will be given to the higher education provider within two weeks of the following the ETSC meeting. The provider will have the opportunity to review the draft and suggest any factual inaccuracies that should be corrected. The committee can make the following decisions in relation to programmes, in line with appliable policy.

- The programme is accredited *(with or without recommendations).*
- The programme is accredited with conditions *(with or without recommendations).*
- The programme's accreditation is refused or withdrawn.

The committee may also recommend that the Academy take such reasonable further steps to allow it to reach a decision. For example, seeking further information from an education provider or arranging for further review.

Where a programme's accreditation has been made subject to conditions and those conditions have subsequently been assessed as being met, the Chair of the ETSC may, at their discretion, agree the fulfilment of the conditions by Chair's action. In all other circumstances, the conditions report should be considered at a meeting of the Committee.

Feedback from the accreditation visit and process will also be sought from the education provider after they have received confirmation of the findings.
Programmes are accredited on an open-ended basis, subject to ongoing quality monitoring. A programme which does not participate in quality monitoring, or for which quality concerns are identified, may have its accreditation withdrawn.

A copy of all documentation will be held by the Academy.

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[1] following the transfer to the work of the HEE's Modernising Scientific Career curriculum development team to NSHCS in 2015-16.

6. Definitions

A '**Condition'** is an aspect of provision for which resolution must be implemented prior to acceptance as an accredited programme:

- Action is required before accreditation is approved and/or
- An action which is required to be completed with a given timeframe for accreditation to continue.

Whereas a '**Recommendation'** is an aspect of provision where resolution would improve the programme and is seen as a quality improvement but is not mandatory.

7. Procedure for Review of Accreditation

Any significant amendments to the programme content/structure should be submitted for ETSC approval.

A major change request may trigger a review of accreditation status, and this will be conducted with similar rigour and process to the initial accreditation. However, it is anticipated that documentation will reflect evidence accumulated over the period of delivery.
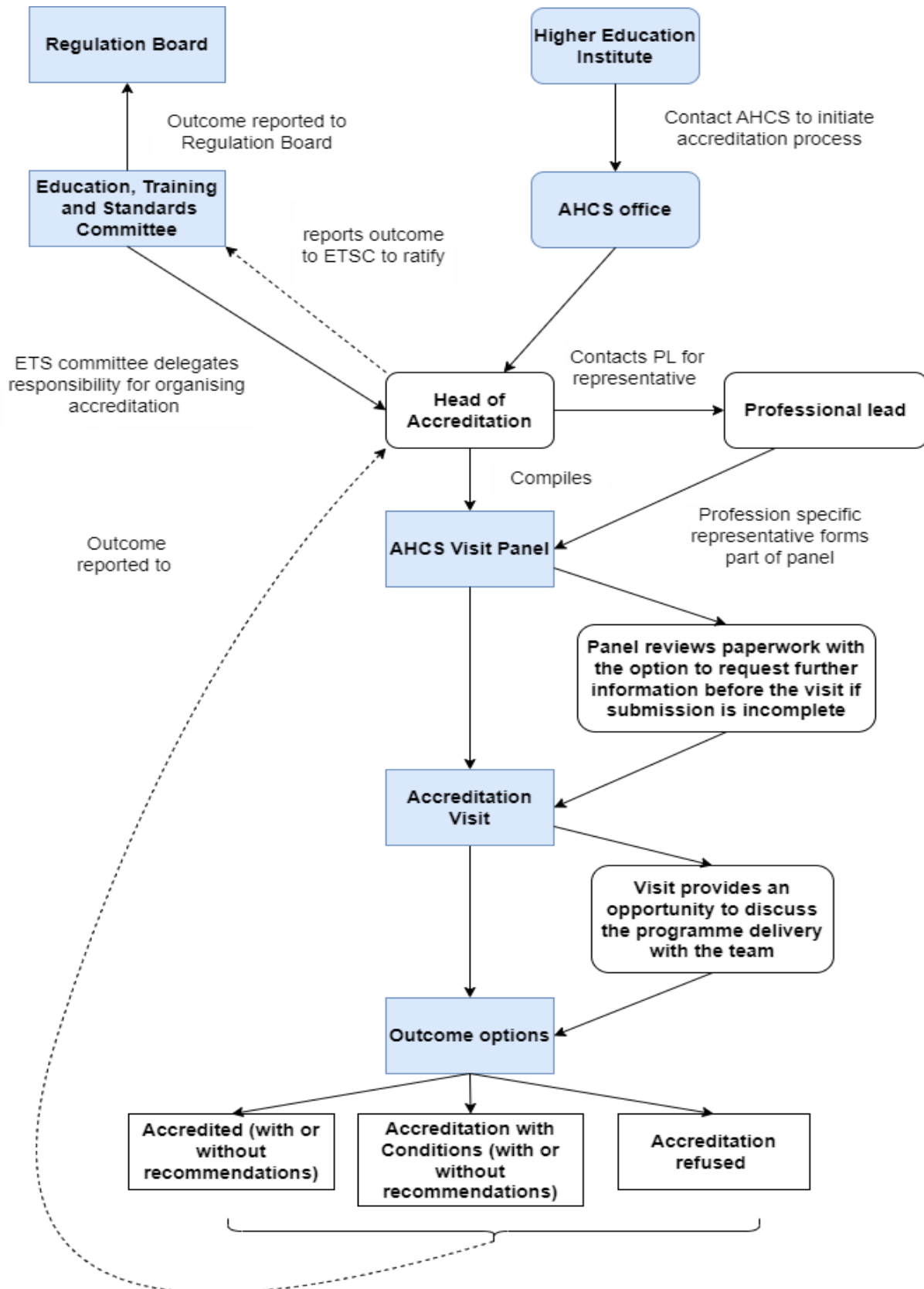
The ETSC reserves the right to review the accreditation status of an education provider at any point.

8. Appeals

Appeals should be made to the Chair of the ETSC as per the AHCS Appeals and Complaints policy for Programme Accreditation.

9. Appendices

9.1 Appendix 1: Accreditation Process Flowchart

9.2 Appendix 2: Accreditation Checklist

Accreditation of programmes on behalf of AHCS ETSC pre-visit requirements

Documentation	Y/N	Comments
Programme specification and module descriptors		
Programme Handbook		
Timetable of delivery (specifying time on campus and in the clinical setting)		
Programme specific regulations		
Admissions criteria including language requirements, DBS, and occupational health checks		
Programme monitoring and evaluation processes		
Quality assurance processes for practice with evidence of mechanisms to ensure the safety of service users e.g., raising and escalating concerns, appropriate supervision, consent processes, information to service users etc.		
Materials to support student learning while off campus		
Evidence of practice capacity to support student placement, including departmental details e.g., range of services, staffing etc.		

Fitness to Practice arrangements, including appeals and complaints processes		
There must be an effective process in place to support and enable learners to raise concerns about the safety and wellbeing of service users.		

Meetings with	**Y/N**	**Comments**
Academic staff delivering the programme		
Meetings with Senior staff		
Staff from clinical placements		
Students (if programme already running)		

Information required

Evidence of curriculum design, content, and organisation	**Y/N**	**Comments**
Level and mode of study, matched to relevant and appropriate curriculum documentation (including GSP, Standards of Proficiency etc.)		
Development of subject specific skills		
Inclusion of opportunities for inter-disciplinary and multi-disciplinary involvement		
Application of current research and practice		
Involvement of employers, professional organisations, service users, & other stakeholders		
Entry qualifications		
Process of admission, including pre- and post- induction information		

	Y/N	Comments
Pastoral/disability/welfare support		
Complaints/grievance procedure		
Compliance with equality and diversity requirements		
Careers information/guidance		
Details of external examiner from relevant professional body		

Evidence of teaching, learning & assessment	Y/N	Comments
Appropriate and adequate resources for delivery - both on campus and online		
Evidence of use of different teaching methods		
Clear assessment criteria e.g., mark schemes		
Mechanisms to ensure transparency, validity, and reliability of assessment e.g., parity of marking, moderation processes		
Evidence of methods for student support, guidance, and involvement, including failing students		
Input from, and response to, professional body/bodies		
Academic guidance and tutorial support		
Opportunities and timing for student feedback		
Input and feedback from other stakeholders		

Evidence of learning resources	Y/N	Comments
Library services including appropriate induction process		
Details of access information and vacation arrangements to library		
Details of library budget allocation		
Specialist equipment, including clinical skills labs, and IT, equitably available across student disciplines		
Teaching and learning facilities for students (both campus based and online)		
Technical and administrative support		
Evidence of quality management and enhancement		
Staff development in teaching, learning and assessment skills		
Evidence of placement learning	**Y/N**	**Comments**
Evidence of adequate placement provision		
Evidence of pastoral support during placement		
Evidence of method for audits of clinical placement in host departments		
Records of professional training and CPD of teaching staff and placement staff		
An adequate learning environment		
Access to internet learning resources		

Compliance with QAA requirements for the monitoring and enhancement of quality		
Framework	**Y/N**	**Comments**
Research active department with appropriate level of academic input		
Teaching staff contribute to evidence-based learning within their discipline		
Clinical core component taught by people who are registered practitioners, with appropriate skills, knowledge, and experience		

The following also applies to Apprenticeship programmes (not accredited by NSHCS)	**Y/N**	**Comments**
Standard contract, detailing relationship between the employer, employee, and university (including information about responsibilities of all parties ensuring quality of clinical learning)		
Training provided for the employer in terms of ensuring placement quality		
Apprenticeship infrastructure support in the University		
Information about the structure of the EPA (i.e.is it included in the degree programme)		

9.3 Appendix 3: Accreditation Notification Template

Dear

Re: Accreditation Visit Panel review (state name of programme) on behalf of the AHCS ETSC

This is to inform you that the AHCS Accreditation Visit Panel has set the following date for a visit. We have endeavoured to give you as much notice as possible and I hope that this date will be acceptable to you. As I am sure you can appreciate, we have several visits to make, and it is difficult scheduling these for members of the Committee who also have a clinical role. There will be two members of the Panel.

The Accreditation Panel visit is planned to take place virtually/physically: (delete as appropriate)
The date set for the Accreditation Panel visit is: [Provide date here]
The Accreditation Visit Panel will consist of: [Provide names here]

To avoid a conflict of interest:
- Accreditation Visit Panel members will not participate in accreditation of a higher education provider with which they are involved in teaching, learning, assessment, or where they may act as an external examiner (for clarity a member of the visit panel should not have been involved in any of these activities within the higher education provider within the last 5 years).
- Reciprocal arrangements for accreditation will be avoided wherever possible
- The higher education provider may veto membership of the Accreditation Panel
- Such veto must be received by the AHCS within two weeks of receipt of this letter

The sample agenda timetable provides an indication of suggested times and can be adjusted through negotiation with the accreditation panel. More detailed information of our requirements can be found in the document AHCS Guidelines for Accreditation which you can download from our website (www.ahcs.ac.uk).

Electronic copies of documentation should be sent to the AHCS two months prior to the agreed accreditation visit.

Following the visit, written confirmation of the findings will be given to the education provider as a draft for comment on any factual inaccuracies, within two weeks of issue of the draft. The final report of findings will be issued within two weeks of the following AHCS ETSC meeting. The report will either:

- The programme is accredited *(with or without recommendations).*
- The programme is accredited with conditions *(with or without recommendations).*
- The programme's accreditation is refused or withdrawn.

Feedback from the accreditation visit and process will also be sought from you after you have received confirmation of the findings.

If you have any queries, please do not hesitate to contact me.

Yours sincerely,
Name
Title
Organisation

9.4 Appendix 4: Sample agenda

	Sample agenda
	AHCS Visit Panel meeting
10.00am	*This specific meeting will be used to discuss the documentation and agree the detailed points of discussion in the various meetings.*
11.00am	**Welcome and introductions**
	This meeting allows the AHCS visit panel to meet programme providers (course director, member(s) of staff responsible for clinical practice, and module conveners or those who can answer questions on the content or structure of modules are available).
11.30am	**Fifteen-minute presentation of programme followed by discussion**
	This provides an opportunity to identify key challenges for the programme followed by discussion.
12.30pm	**Meeting with students**
	This meeting allows the AHCS panel to gauge the students' experience of the programme. Ideally, this meeting should include student representatives. If the programme does not have current students, then students from similar programmes may be recruited.
1.00pm	**Lunch**
2.00pm	**Visit Panel meeting**
2.30pm	**Meeting with placement providers**
	This meeting enables the AHCS panel to discuss placement provision.
3.00pm	**Meeting with senior staff (e.g., senior managers, Deans / Heads of School / Faculty, professional body representatives)**
	This meeting allows the AHCS panel to discuss issues with those responsible for the resourcing and financing (as opposed to the delivery) of the programme.
3.30pm	**Visit Panel meeting**
4.00pm	**Visit Panel feedback to programme**
4.30pm	**Finish**
	This will enable the panel to provide brief feedback on findings.

9.5 Appendix 5: Report template

Dear Name

Re: Accreditation Panel review (state name of programme) on behalf of the AHCS ETS committee

Date of accreditation visit: [provide date here]

Date of letter: [provide date here]

AHCS Accreditation Visit Panel

[provide names here]

The accreditation process was carried out in accordance with the AHCS Guidelines for Accreditation (Version X).

The Accreditation Visit Panel recommends the accreditation of the PROGRAMME NAME programme with the following:

Conditions:

Recommendations:

Commendations:

The accreditation of this programme depends on the conditions being met by the DATE.

If you have any queries, please do not hesitate to contact me.

Yours sincerely,

Name
Title
Organisation