

**Health Professions Council  
Education and Training Committee 28 March 2007**

**Reports from Education and Training Committee Representatives at External Meetings**

**Executive Summary and Recommendations**

**Introduction**

The Committee has agreed that representatives of the Committee should formally report back from meetings at which they have represented the Committee by completing a standard form outlining the meeting attended and the key decisions taken.

Feedback forms, which are attached, have been received from the following members:

- (i) Alan Mount
- (ii) Diane Waller

**Decision**

The Committee is requested to note the document. No decision is required.

**Background information**

Minute 5.6.1 of the Education and Training Committee meeting 23 June 2004.

**Resource implications**

None.

**Financial implications**

None.

**Background papers**

None.

**Appendices**

Copies of feedback forms.

**Date of paper**

16 March 2007.

**FEEDBACK SHEET TO BE COMPLETED AFTER THE MEETING**

<b>Name of Council Member</b>	<b>Alan mount</b>
<b>Title of Conference/Meeting</b>	<b>AHP Career Framework Strategy Group</b>
<b>Date of Conference</b>	<b>31<sup>st</sup> January 2007</b>
<b>Approximate number of people at the conference/meeting</b>	<b>15</b>
<p><b>Issues of Relevance to HPC</b></p> <p>This was the 3<sup>rd</sup> meeting of this group the prime aim to feedback on the developments that had been made across the 4 countries. This included the policy updates &amp; strategic issues that had arouse from the pilot sites and AHP groups who were testing the competences and the mapping document</p> <p><b>1. Competence Development</b> The final stages of development have taken place with site visits being completed and all feedback from these visits and from the last National Reference Group being incorporated into drafts.</p> <p>A full list of generic (relating to all health services) and common (relating to some Allied Health Professions) competences has been compiled and cross-referenced to each Profession. Comments received on these competences have been provided to Skills for Health for inclusion in amendment to competences through the rationalization project. It has been agreed that;</p> <p><b>a. Competences with existing AHP prefix</b> Amendments to these competences will be made by the Project Technical Consultant and included in these project outcomes.</p> <p><b>b. Competences within Health Awards</b> Amendments to these competences will be incorporated into the incremental review which begins in March 2007</p> <p><b>c. All remaining generic/common competences</b> Amendments will be incorporated into planned incremental review</p> <p>A table illustrating this full list of generic and common competences has been compiled and various presentations of this document are being prepared. The most user-friendly presentation will be used for the National Reference Group review in February 2007.</p>	

#### **a) New competences**

No new specific AHP competences were identified in the project. Competences from other development projects, as well as existing competences have been imported. This includes those relating to therapeutic radiography, draft structure for psychological therapies, and technician competences for prosthetics and orthotics groups.

A number of new competences were identified covering more common areas and drafts produced for discussion with the Skills for Health □rationalization project. These competences are;

#### **Select investigative techniques and procedures**

This competence, which was also tested within the MRI project, will be a new Reference Competence within the Health Functional Map – Select assessment and investigative techniques/procedures for use.

#### **Agree nature and purpose of assessment and investigation of individual's health status**

This competence, which was also tested within the MRI project, will be a new Reference Competence.

#### **Assess suitability of patient for planned procedure**

This will be a new Reference Competence, the existing EUSC57 (Assess an individual's suitability to undergo planned actions) will become a specific representation for the Emergency Care service area.

#### **Form a judgement of an individuals health condition**

Feedback suggested that this competence was needed to distinguish the 'judgement' function from that of 'diagnosis' There is an existing competence 'Establish a diagnosis of an individual's health condition' which the □rationalization project would prefer to use. Given the level of feedback on this issue, it has been decided to raise this at the National Reference Group to gain consensus on whether there is a need for this 'judgement' competence, or whether this is reflected in other competences.

#### **Assess risks associated with individual's health needs**

This is a new Reference Competence (CHS46) 'Undertake a risk assessment in relation to a defined health need. This will be compared with RCs from the rationalization project and merged

#### **Plan activities, interventions and treatments to achieve specified health goals**

This is a new Reference Competence (CHS44). This will be compared with RCs from the rationalization project and merged.

#### **Prioritise treatment and care for individuals according to their health status and needs**

This will be a new Reference Competence.

## **2. Next Steps**

The National Reference Group will meet in February to review the final competence map and discuss issues as noted above.

UK wide events are being planned

13<sup>th</sup> March – Scotland – the Stirling Highland Hotel

20<sup>th</sup> March – Wales – the Royal Welsh Showground

An event is being arranged for Northern Ireland.

## **Key Decisions Taken**

- Next meeting 13<sup>th</sup> May 2007
- Review the Skills for Health document – Modernising Healthcare Careers (Awards & Qualifications for AHPs)
- Feedback from Reference Group
- Discuss final details for implementation of programme
  - Education & Training
  - Workforce development & planning
  - Empowering individuals

**SKILLS FOR HEALTH**

**MODERNISING HEALTHCARE CAREERS**

**AWARDS AND QUALIFICATIONS FOR ALLIED  
HEALTH PROFESSIONALS(AHPs) AND SUPPORT  
WORKERS**

**DRAFT 3 15 January 2007**

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## **AWARDS AND QUALIFICATIONS IN ALLIED HEALTH PROFESSIONS**

### **Overview**

Awards and qualifications in the Allied Health Professions must prepare individuals for a career in healthcare, which whilst very likely to be based in one specific discipline, must allow for multi-discipline and cross-discipline work. Such an approach reflects patient focused care. It permits the service driven development of roles whilst allowing individuals to reach their full potential without regard to the level at which or the setting in which they commence a healthcare career and without regard to the qualifications they bring with them at that point.

This paper sets out a set of principles to be followed in modernising education and training programmes for Allied Health Professionals (AHPs). It outlines a methodology for developing competence-based programmes and a structure into which awards and qualifications will fit. Competences are building blocks not an end in themselves. Education is more than the summation of competences requiring the acquisition of analytical, intellectual and interpretive skills as well.

Education and training is increasingly seen as a lifelong process characterised by flexible and accessible learning, by transferable skills and by learning programmes that reflect new roles, a patient focus and service change. Recognised workplace learning should be an important part of flexible and accessible learning. Short courses and CPD should contribute to purposeful and lifelong career-relevant personal development rather than perhaps be ends in themselves. Vocational qualifications, professional courses and higher education programmes all have their part in workforce development as do opportunities to step off and on to longer programmes, increased inter-professional learning and the accreditation of prior experience and learning.

This radically different approach for awards and qualifications in the Allied Health Professions is based on the development of packages of learning, each of which is levelled within the recognised national and higher education qualifications frameworks. As such, packages can be combined into units, modules and programmes of education and training.

Such an approach will take time to implement, not the least because new programmes will have to be validated, new cohorts of students attracted, then educated and finally assessed.

### **Background**

The Modernising AHP Careers Programme has been sponsored by the Department of Health in England with the active support of the Health Departments in Scotland, Wales and Northern Ireland. It will deliver modernised, competence-based role descriptors and modernised supporting education and training programmes within an Awards and Qualifications Framework (AQF).

### **Principles**

A modernised healthcare service is being transformed by a number of drivers including personal, patient focused care, technological change and the need for a more flexible workforce. Therefore, the roles and functions of many individuals have

moved away from traditional and rigid uni-professional roles to roles which may be extended or advanced and, possibly, cross professional boundaries. This change has often been facilitated by the development of competences on which a new role can be based.

As the Sector Skills Council for Health, SfH is responsible for developing and maintaining a comprehensive set of competences which describe each function in healthcare in terms of performance criteria and required knowledge and understanding. These competences are common between professional groups, transferable across healthcare provider settings and applicable across the UK. They have been widely tested in front-line settings and when tested to the satisfaction of SfH, they become National Workforce Competences (NWC). When tested to the satisfaction of the UK Co-ordinating Group of qualification awarding bodies, they become National Occupational Standards (NOS).

Competences can underpin both the development of roles and the development of education programmes. As such they are powerful building blocks for modernising AHP careers and healthcare education and training programmes. NOS's can be used as the basis of vocational qualifications.

In order to facilitate the development of robust, competence – based education and training programmes. SfH has established seven Learning Design Principles which are closely aligned to good practice and standards in learning design by many learning providers. They are set out in [Box 1](#) and are amplified by the notes in [Appendix 1](#).

#### **Box 1: Skills for Health Learning Design Principles**

1. Recognition and reward of all learning developed in response to robust intelligence on requirement or rationale
2. Flexible and constantly developing units / modules of learning which both stand alone and enable defined packages of learning which are underpinned and mapped by the use of National Workforce Competences.
3. A structure that ensures alignments with UK and European educational level descriptors, Career Frameworks, the NHS Knowledge and Skills Framework (KSF) and country specific level and credit frameworks.
4. Packages or units of learning which meet the needs of the employer, learner, education or training provider, professional bodies and regulators from use of 'rules of combination' in construction of awards and qualifications.
5. A structure that facilitates and promotes the principles of skills escalation by the provision of horizontal and vertical progression routes which also provide the opportunity to study a breadth and/or depth of knowledge and skill as required.
6. The reward and recognition of different types of learning (formal, work based, experiential, informal and theoretical)
7. Reliable and valid quality assured assessment of learning and flexible continued learning development.

These principles have been designed to ensure that the development of new awards, qualifications and other ways of recognising achievement are undertaken in a way that builds cohesion within a health sector framework for the recognition of learning. The use of the learning design principles outlined will ensure durability in the emerging healthcare workforce by ensuring that packages of learning provide or the acquisition of skill, flexibility, transferability and progression routes.

Thus, learning packages will be fit for purpose and accessible. They will form the basis of giving individuals long-term careers.

Designing an award pathway should not start on the basis of qualifications but on the basis of need for a role, i.e. fitness for practice. Packages of learning, which stand alone, can be aligned one to another through mechanisms that identify level and credit values for each, thus allowing individual packages to be combined into programmes of learning, giving either breadth or depth of learning and entry into employment where necessary.

Although the four UK countries have different qualification frameworks, it is possible to align them across the levels and align them with the emerging European Qualification Framework, see [Table 1](#) below.

A set of 11 strategic principles which must underpin the AQF have been identified. These are listed in [Box 2](#) and are amplified by the notes in [Appendix 2](#).

#### **Box 2: Strategic principles for Awards and Qualifications in AHPs**

- A. Congruence with the Career Framework for Health
- B. Competence as a currency
- C. Transferability: a standard learning currency
- D. Recognising the diversity of education and training providers
- E. Recognising the diversity of learning environments
- F. Anticipating technological and scientific advances
- G. Building more flexible careers for all AHPs and support workers.
- H. Widening participation in the workforce
- I. Supporting multi-professional team working
- J. Simplifying the delivery of education and training
- K. Education and training providers as awarding bodies
- L. Recognising informal learning and awarding credit for vocational qualifications
- M. Encouraging both horizontal and vertical progression of individuals' learning
- N. Equipping AHPs and support workers with the education and training they need to carry out their roles

These sets of principles were originally designed for Healthcare Scientists by Keele University but fit well with developments for AHPs.

#### **Structural elements required in the Framework**

In addition to the strategic principles, the Framework needs to cover some structural characteristics to provide for levelling and credits as set out below.

Differentiating between Academic Levels

Packages of learning need to be levelled to determine where they fit on awards and qualifications frameworks and, therefore, how they relate one to another. Each of the UK countries has their own credit and qualifications body and so levels do vary across the four countries. They can be compared the one with another and with the draft European Framework, as in [Table 1](#).

**Table 1: Comparison of qualifications levels across the UK**

National Qualifications Framework (NQF) England, Wales and Northern Ireland <i>Under review</i>	Credit and qualifications Framework Wales (CQFW)	Scottish Credit and Qualifications Framework (SCQF)	England & Northern Ireland Framework for Higher Education Qualifications (FHEQ)	Exemplars of Awards and Qualifications Across the UK	European Qualifications Framework (EQF)  DRAFT
8	8	12	Doctorate	Doctorate	8
7	7	11	Masters	Masters & (S)NVQs	7
6	6	10	Honours	Advanced Higher	6
5	5	9	Intermediate	HND / Degree	5
4	4	8	Certificate	Diploma	4
3	3	7		Foundation Degree	3
2	2	6		SVQ /NVQ /VQ	2
1	1	5		Apprenticeships	1
Entry	Entry	4		Learning pathways	
		3		Access / BACC	
		2			
		1			
		Access			

A more detailed comparison between levels is possible for England, Wales and Northern Ireland, see [Table 2](#).

**Table 2: Comparison of levels National Qualifications Framework for England, Wales and Northern Ireland with other qualifications**

Key Skills	National Vocational Qualifications	National Qualifications Framework (Original levels)	National Qualifications Framework (Revised levels from January 2006)	Framework for Higher Education Qualifications (FHEQ)
	Level 5 NVQs	Level 5 BTEC Advanced Professional Diplomas and Awards	Level 8 BTEC Advanced Professional Diplomas and Awards	Doctorate
			Level 7 BTEC Advanced Professional Diplomas and Awards	Masters
Level 4 Key skills	Level 4 NVQs	Level 4 BTEC HNDs & HNCs BTEC Professional Diplomas and Awards	Level 6 BTEC Professional Diplomas and Awards	Honours
			Level 5 BTEC HNDs & HNCs BTEC Professional Diplomas and Awards	Intermediate
			Level 4 BTEC Professional Diplomas and Awards	Certificate
Level 3 Key skills	Level 3 NVQs	Level 3 BTEC National Diplomas, Certificates & Awards BTEC Diplomas, Certificates & Awards A Levels		
Level 2 Key skills	Level 2 NVQs	Level 2 BTEC First Diplomas & Certificates BTEC Diplomas, Certificates & Awards GCSEs grades A* - C		
Level 1 Key skills	Level 1 NVQs	Level 1 BTEC Introductory Diplomas & Certificates BTEC Diplomas, Certificates & Awards GCSEs grades D – G		
Entry level Literacy & numeracy		Entry Level BTEC Certificates in Life Skills BTEC Certificates in Skills for Working Life		

The QCA, ACCAC and CCEA (2004) have set out level indicators for vocational qualifications requiring that all qualifications 'specify the knowledge, skills and / or understanding required, giving a clear indication of coverage and depth (p19)'. These indicators are set out in [Appendix 3](#).

The Quality Assurance Agency (QAA) has established level descriptors for higher education qualifications which indicate the principal outcomes that a student should be able to demonstrate following the successful completion of an award. These are set out in [Appendix 4](#). For example,

An Honours graduate will have developed an understanding of a complex body of knowledge, some of it at the current boundaries of an academic discipline. Through this, the graduate will have developed analytical techniques and problem-solving skills that can be applied in many types of employment. The graduate will be able to evaluate evidence, arguments and assumptions, to reach sound judgments, and to communicate effectively.

An Honours graduate should have the qualities needed for employment in situations requiring the exercise of personal responsibility, and decision-making in complex and unpredictable circumstances.

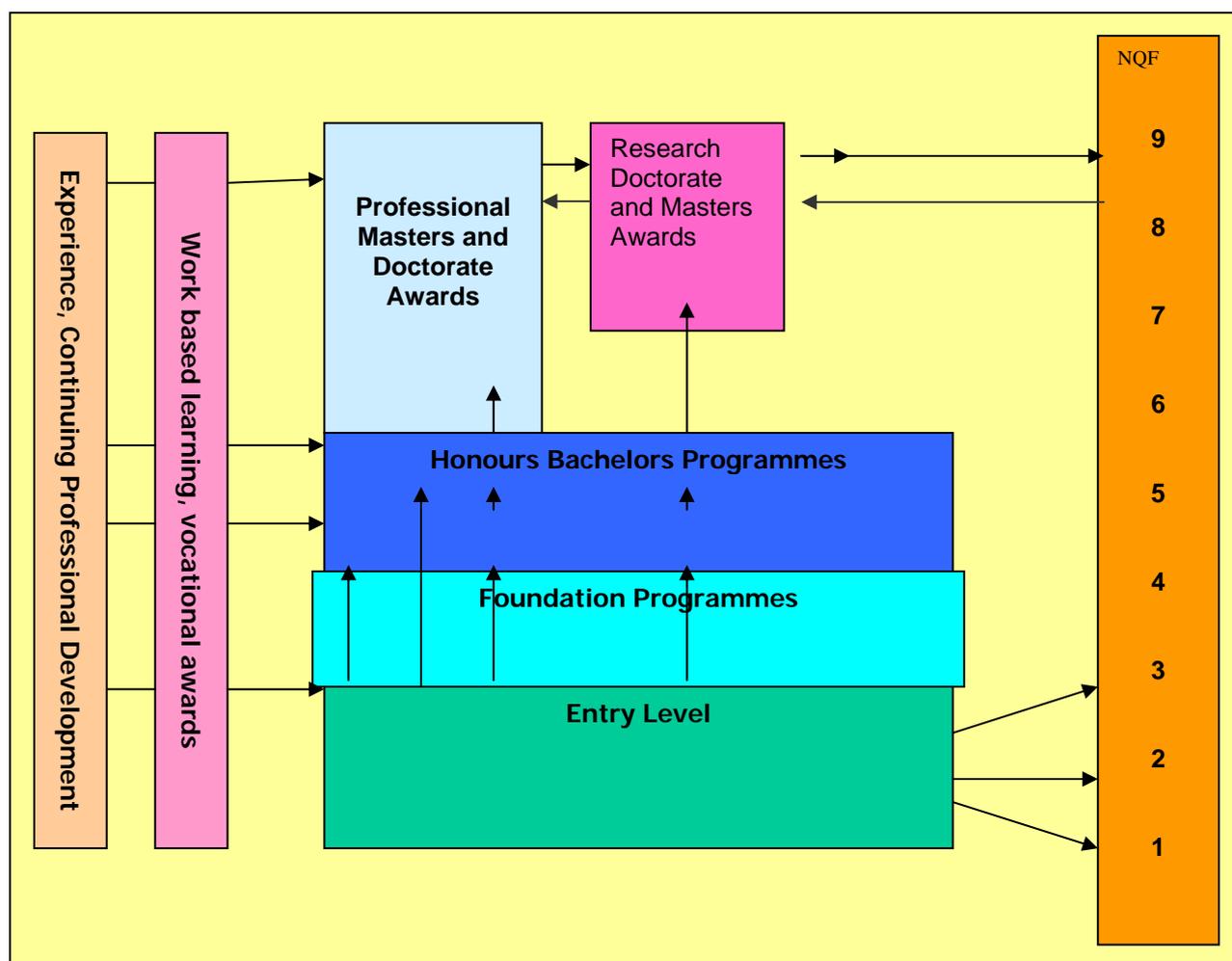
These indicators and descriptors promote a clear understanding of the achievements and attributes of a particular qualification at each of the levels from Entry Level to Doctorate. They set out the attributes and abilities that can be expected from the student and holder of the qualification for each educational level.

#### Levelling Professional Education and Training Programmes

Within the AHPs, some education and training programmes are provided outside of Higher Education and outside of the awarding bodies for vocational qualifications. In some instances programmes are provided by professional organisations which determine the need for the programmes, then design and provide them assessing suitability of the learner for practice.

Within a modernised education and training regime, these programmes would benefit from being independently validated and quality assured. The health sector as a whole would benefit if the programmes were levelled to show how they fit alongside other packages and programmes of learning. Indeed, in many cases it might prove possible, if required, to incorporate a professional package or programme into a recognised award. [Diagram 1](#) shows how different types of programme and different levels fit together.

Diagram 1



Determining Education and Training Credits which contribute to Awards and Qualifications

An award is made up of a certain number of credits and the credits relate to modules and units of learning rather than whole awards. Higher education frameworks across the UK are based on one credit equating to 10 notional hours of successful learning. Recommended minimum credit levels are shown in Table 3 together with the range of levels which can be included in an award and the maximum number of credits which can be gained at the lowest level.

It is possible that credits from one programme could be transferred to another programme to reduce the repetition of learning that some people experience. This transfer is not automatic, but an aim of this framework is to facilitate this process.

**Table 3: Recommended minimum credit values of postgraduate, graduate, undergraduate and associated qualifications**

Level	Qualification	Minimum number of credits	Range of levels and number of credits at highest level	Maximum number of credits at lowest level
D	Professional Doctorate	540	Levels (6), 7, 8 Min 360 at 8	Max 30 credits at Level 6
M	Masters Degree	180	Levels (6), 7 Min 150 at 7	Max 30 credits at Level 6
M	Integrated Masters Degree	480	Levels (3), 4, 5, 6, 7 Min 120 at 7	Max 30 credits at Level 3
M	Post-Graduate Diploma	120	Levels (6), 7 Min 90 at 7	Max 30 credits at Level 6
M	Post-Graduate Certificate	60	Levels (6), 7 Min 40 at 7	Max 20 credits at Level 6
H	Graduate Diploma	120	Levels (3, 4, 5), 6 Min 90 at 6	Max 30 credits at Level 3
H	Graduate Certificate	60	Levels (3, 4, 5), 6 Min 40 at 6	Max 20 credits at Level 3
H	Honours Degree	360	Levels (3), 4, 5, 6 Min 90 at 6	Max 30 credits at Level 3
I	Ordinary Degree	300	Levels (3), 4, 5, 6 Min 60 at 6	Max 30 credits at Level 3
I	Foundation Degree	240	Levels (3), 4, 5 Min 90 at 5	Max 30 credits at Level 3
I	Diploma in HE	240	Levels (3), 4, 5 Min 90 at 5	Max 30 credits at Level 3
I	HND	240	Levels (3), 4, 5 Min 90 at 5	Max 30 credits at Level 3
C	HNC	150	Levels (3), 4, 5 Min 30 at 5	Max 30 credits at Level 3
C	Certificate in Higher Education	120	Levels (3), 4 Min 90 at 4	Max 30 credits at Level 3

### Accrediting Prior Learning and Experience

The AQF needs to reflect contemporary education imperatives like lifelong learning, social inclusion, wider participation, employability and partnership. As a result, Higher Education Institutions recognise significant knowledge, skills and understanding which an individual may have acquired. Such learning may be recognised as prior learning which does not need to be repeated in a subsequent programme.

The QAA has set out five different types of prior learning:

- Accreditation of prior learning (APL)

- Accreditation of prior certificated learning (APCL)
- Accreditation of prior experiential learning (APEL)
- Accreditation of prior certificated and / or experiential learning (AP[E/C]L)
- Accreditation of prior learning and achievement (APL&A)

The QAA has also set out principles to guide the application of prior learning. These principles are included as [Appendix 5](#).

Education programme providers may want pre-determine pre-entry courses, considering each entry programme on its merits. They may want to introduce bridging programmes.

#### Developing programmes with step off points

Higher education delivered programmes up to and including Honours level are usually developed as three year courses for school leavers. Whilst many programmes in the Allied Health Professions will need to meet this requirement, many others will be required which run to Certificate, Diploma or, in England, Foundation Degree level. Such an approach will help to widen access and provide stepping off points for those who do not wish to progress directly to Honours level. These points are illustrated in Diagram 1, which also shows that beyond the initial education and training, packages of learning can support CPD and support extending practice.

Stepping off points is important for those who cannot complete a longer programme, especially if they can return to the programme at a later date. However, stepping off points will only ever provide a minority of entrants to a career. Specific entry qualifications linked to a role will remain the prime entry means.

### **Methodology for developing competence-based learning**

#### Using competences in developing packages of learning

For the purpose of this paper, it is assumed that awards are given for the successful completion of programmes of learning following a period of education and training. Success is demonstrated by assessment against the set learning content and outcomes. Programmes usually comprise a set of modules in the higher education context or a set of units in the vocational context. Vocational units invariably equate to National Occupational Standards (NOS). Modules in the main for AHPs do not.

The work to modernise AHP careers takes a competence, i.e. NOS based, approach to modernising education and training. The methodology developed takes NOS's and groups them into packages of learning which are topic based and which can be grouped into modules to suit the circumstances of education providers. Thus more than one package would comprise a module but different education providers may group packages in different ways perhaps to reflect modules which are already delivered to students in other healthcare programmes.

Ideally whole NOS's would be taken into learning packages. The performance criteria would be taken into skills training and workplace performance. The knowledge and understanding statements would be taken into a training manual and syllabus. The whole package, skills and syllabus, could be levelled.

In general terms, SfH NOS's describe a single function which can be placed as a whole into a package which in turn can be levelled. In Higher Education, packages of learning will always comprise more than the sum of a set of NOS. They will include, for example, reasoning, critical appraisal and synthesis in order that an individual can develop analytical, intellectual and interpretive skills.

### Assessment

In parallel with the development of the AHP AQF, Skills for Health has commenced a project on assessment of NVQ level awards. This project will identify approaches to optimal assessment of competence in practice and will become part of the Health Sector Qualifications Strategy in terms of training of assessors at NVQ levels. It is due to report in March 2007 and will use S/NVQs as the standard / comparator. It will look at possible relationships to KSF assessment and at current assessor training, mapping across different assessment strategies.

A further project on assessment in Higher Education is about to commence aimed at the initial identification of a typology of assessment in Higher Education. This will form the basis on an evolving document that will be informed by other work within the Skills for Health Higher Education strategy. It will also inform another evolving guidance document on using NOS in Higher Education. An extensive range of integrated work streams within Skills for Health is in hand to evolve, evaluate and inform the way educational pathways in Higher Education healthcare programmes can be initiated and devised. This activity will evaluate the roles of the key stakeholders in development work. It is based on major demonstration sites. Those involved will be supported by an infrastructure designed to help the participants to understand where NOS arise and how they can be utilised.

This work will offer recommendations and give strategic direction for the assessment of competence in practice, and will inform the detailed development of awards and qualifications in the Allied Health Professions.

### **Vocational Qualifications**

Table 1 refers to the National Qualification Framework (NQF) and the Scottish Credit and Qualifications Framework (SCQF). The NQF will be replaced over the next 5 years with the Qualifications and Credit Framework (QCF). The introduction of the QCF in England, Wales and Northern Ireland is part of the UK Vocational Qualifications Reform Programme. As part of this programme it is intended that qualifications will become unitised with each unit being levelled and credit rated. Tests and trials are being undertaken through to June 2008 for the QCF with the intention that qualifications that have been developed in response to the Sector qualifications Strategy will be available in 2009.

Vocational qualifications currently have no standard for the titling of qualifications. The QCF is proposing that qualifications will be:

- Awards for up to 120 Guided Learning Hours
- Certificates for 121 to 260 Guided Learning Hours
- Diplomas for over 260 Guided Learning Hours

Awards, Certificates and Diplomas will be prefixed by the relevant level. The 'conventions' will be confirmed as an outcome of the Tests and Trials.

At present NVQ's are qualifications which assess both "doing" and "knowing". Vocationally Related Qualifications (VRQ) assess "knowing". They are mapped to the knowledge and understanding part of a NOS.

The new vocational qualifications will be NOS based with Learning Outcomes plus key skills. They will link with and may be part of the 14-19 National Diploma (Level 3 at age 19) and apprenticeships at both Level 2 and Level 3. Apprenticeships comprise NVQ's plus key skills plus the technical certificate.

### **Packages of learning**

The packages are building blocks of differing sizes. Initial work (done within Healthcare science) suggests that packages of learning can be categorised into one of three groups:

- General, which is applicable to all disciplines
- Common, which is applicable to several disciplines but not to all
- Specific, which is applicable to one discipline only

Each package can be delivered at different education and training levels depending on the roles and functions being supported. A pre-registration education and training programme will need to contain each of the packages. A specialist or additional programme will need to cover those packages which are relevant.

#### **Box 4: Some suggestions for packages of learning for AHPs?**

##### General

Audit  
Communication  
Data & Information Management  
Ethics  
Health & safety  
Key skills for health  
Management  
Multi-disciplinary working  
NHS Policies, Priorities and Organisation  
Personal Development  
Problem solving  
Quality management  
Research  
Support           ting professional practice learning  
Underpinning science

##### Common

Patients and carers  
Quality  
Service Improvement  
Knowledge of disease processes  
Knowledge of human body systems

##### Specific

Professional practice – theoretical and practical

Each package will set out indicative content for learning, skills to be acquired and suggested learning outcomes.

## **Education and training programmes**

### Programme design

Programmes are developed by grouping packages together. At the smallest level a programme may consist of one package, which might be taken to broaden or deepen knowledge and skills in a particular area and is likely to be part of Continuing Professional Development. Large programmes will comprise many packages drawn together to meet identified and funded needs. Given that some packages in the AHPs are general to all disciplines or common across some, many programmes will comprise parts which are shared across disciplines and maybe shared with disciplines outside of the Allied Health Professions, for example, with medicine, nursing or with Healthcare science, as is already the case in some instances.

Packages of professional practice will in the main need to be work based.

## References and sources

Reference documents that aid understanding and explanations of points above

Skills for Health, 'Learning Design Principles', 2006

Skills for Health, 'Sector Skills Agreement', 2006

Abi Masterson and Lindsay Mitchell, 'Knowledge Project Report', Skills for Health, 2005

Maggie Pearson and Lesley Burn, 'Modernising Healthcare Science Careers: An Awards and Qualifications Framework', Keele University, 2006

Qualifications and Curriculum Authority, 'National Qualifications Framework', 2005

'The Scottish Credit and Qualifications Framework'

Credit and Qualification Framework for Wales, Northern Ireland Credit Accumulation and Transfer System, Northern Universities Consortium for Credit Accumulation and Transfer, Southern England Consortium for Credit Accumulation and Transfer, 'Credit and HE Qualifications', 2001

Qualifications and Curriculum Authority, Qualifications, Curriculum and Assessment Authority for Wales, CCEA, 'National Qualifications Framework – Level Descriptors', 2004

Quality Assurance Agency, 'The framework for higher education qualifications in England, Wales and Northern Ireland', 2001

**AJB/AS**

### **Skills for Health Learning Design Principles**

#### **Brief notes and definitions of each learning design principle indicating the parameters and complexities of each without being exhaustive**

1. Fitness for purpose: Clearly identified need or rationale for the development of packages of learning. This will be closely aligned to the emergent Sector Skills Agreements and labour market intelligence to inform on requirements / priorities etc
2. NWC / NOS based – Close alignment with NOS based workforce and role design and other definitions of proficiency / performance and educational requirements. The use of NWC /NOS to underpin and inform curriculum / training development and learning outcomes and mapping to offer transferability of functional competence.
3. Packages of learning – To capture unitization or modularisation in award and qualification design, 'stand alone' units of learning and new ways of recognising achievement. Encompasses design to provide flexible routes / progression, transferability and blended learning approaches.
4. Alignments – Recognition driven by use of educational level descriptors, country specific level and credit frameworks, Career Frameworks, The NHS Knowledge and Skills Framework (KSF) – Multiple requirements regarding alignments to frameworks to ensure recognition / fitness for role / progression routes and the transferability of competence and wider learning.
5. Progression – The importance of promoting horizontal and vertical progression and the need for breadth and / or depth in learning design and provision – responsiveness to workforce design and role needs, skills escalation, widening entry and participation, career development etc
6. Measurement of attainment – To include guidance on assessment of competence in practice. From full accreditation / validation of learning to other assessment / accreditation standards that meet local / country requirements. Measurement of attainment ranging from recognition for the learner for locally developed and provided learning to the requirements of national statutory regulation and or professional standards for practice.
7. Quality – From Quality Assurance (QA) of Higher Education, Endorsement of vocational qualifications by Skills for Health, further developments in kite marking of awards and qualifications such as the Foundation degree and other work in progress to recognise and quality assure learning to meet local / country requirements and QA standards.

## Strategic principles for Awards and Qualifications for AHPs

### A. Congruence with the Career Framework for Health

The Competence-based Career Framework project for AHPs has identified competences needed by AHPs to demonstrate their competence to perform designated roles. The Career Framework for AHPs has been populated with roles described by competence at each level of the career pathway.

The AHP Awards and Qualifications Framework will map onto the Career Framework for AHPs and the Career Framework for Health which is being developed by Skills for Health. Both these frameworks use a nine stage Career Pathway.

### B. Competence as a currency

The national occupational standards create a currency for describing competence. Furthermore, national occupational standards can inform the learning outcomes of any programme of education or training where the demonstration of competence underpins the assessment strategy and the educational credit or currency of the award. Competence therefore is a powerful integration tool across the AHP Award and Qualifications Framework.

Using competence as a currency will realise the workforce vision for AHPs where the skills and expertise required to fulfil AHP roles are described as competences and supported by national occupational standards. Education and training programmes will be designed to develop these competences mapped to the NHS Knowledge and Skills Framework, to Agenda for Change and other pay reward systems, and also linked to personal development planning and appraisal for each member of staff. Adopting competence based education and training programmes with competence as the central currency provides:

- Education and training programmes explicitly designed and assessed to develop and validate competence and fitness to practice.
- Education and training programmes where the content, learning outcomes and assessment criteria are developed by a partnership of learners, education providers, commissioners, employers, and professional bodies to reflect service need.
- Clinical governance and workforce regulation underpinned by each employee's ability to demonstrate competence to practice.
- Workforce planning informed by the need for defined skills and expertise for local service delivery solutions and not the need to employ more staff with a particular occupational title.
- Flexibility of educational and training offerings: the workforce can easily respond to change and new demands as responsive education and training programmes deliver the skills and expertise to perform new and redesigned roles.

### C. Transferability: a standard learning currency

The granting of awards and qualifications will be more flexible and accessible so that different forms of achievement, including practical experience gained through work based learning; can be readily given an educational credit. This will be

achieved by describing the knowledge and skills acquired in both academic and vocational learning environments through competence and valuing this competence development in a common transferable credit system.

This will widen access to both education and training (and to the achievement of awards) to a wider number of students and trainees from a greater range of social, cultural and work experience backgrounds.

**D. Recognising the diversity of education and training providers**

Education and training opportunities for AHPs are available through a range of providers. The Framework must allow for the learning from all educational opportunities to be valued consistently within an award structure.

**E. Recognising the diversity of learning environments**

Currently, the education and training of AHPs takes place in a range of formal and informal learning environments. Some programmes are delivered in academic institutions and require students to travel to these institutions for formal blocks of learning. Some are delivered through non-HEI awarding bodies, particularly at levels 2 – 4 of the Career Framework. Others are workplace based and are validated either through formal work based competence assessment or informally through personal development programmes, continuing professional development or lifelong learning objectives. This diversity of learning environments should be explicitly extended. With the development of innovative learning technologies, learners can access education and training opportunities through a range of media. While these will still include experiences in higher and further education institutions, it is important to recognise that distance learning packages, e-based learning, mentoring, work based and other experiential learning opportunities are effective environments for delivering education and training where they are supported by robust assessment processes. It is important to explicitly recognise that different learning methods have differing benefits. An integrated learning programme will value the benefits of each approach (which will vary across approaches) and will blend them in any learning programme to maximise their potential for each learner. Supporting best practice in e learning<sup>21</sup> emphasises the importance of adopting and using new delivery modalities to support accelerated learning for faster service transformation. There are benefits in blending a range of learning systems (for example, face to face delivery with technology based learning) in the design, delivery and support of education and training programmes.

**F. Anticipating technological and scientific advances**

The consolidation of a research-based culture within the NHS is important to manage the ongoing integration of evidence-based practice into services. Policies for implementing clinical governance, improving the spread of research findings and introducing new technologies mean that AHPs at all levels need to be research aware. Many need to be able to critically appraise and manage the implementation of research findings or to become active researchers.

**G. Building more flexible careers for all AHPs**

The Award and Qualifications Framework recognises that there are, within the Career Framework, stepping on and stepping off points which reflect each individual's ability, competences and professional aspirations. While there is a

link between higher skill development, career progression and the demonstration of competence, and the acquisition of awards and qualifications, each individual AHP can renew and extend their skills and knowledge, transfer and progress at their own pace and according to personal preference, proven ability and organisational and service need. The requirements of continuing professional development will ensure that every AHP continues to demonstrate competence to practice at any given level within the Career Framework.

The Framework allows for:

- multiple entry points enabling access for individuals from a wide variety of backgrounds
- flexibility of career paths to enable individuals to build on their knowledge and skills and develop in a variety of ways
- the development of high levels of professional skills and knowledge where there is a service need for these.

#### H. Widening participation in the workforce

Having a systematic framework for valuing the skills and expertise of a wide spectrum of the population will attract a diversity of students and trainees from a greater range of backgrounds to pursue a career in the NHS. The AHP workforce will better reflect the composition of the general population and will be well placed to provide culturally sensitive treatment and care. Additionally, by attracting a diverse workforce, there will be opportunities to expand the workforce to meet future demand if this is required.

#### I. Supporting multi-professional team working

Actively developing multi-professional teams across the whole of healthcare to deliver patient centred services across traditional service boundaries makes the best use of the skills and knowledge staff have, where governance and safety is ensured through the acknowledgement of validated competence to practice. By breaking down the professional boundaries which say that only one professional group can provide a particular type of care, the contribution that all staff can make to providing patient care can be maximised.

#### J. Simplifying the delivery of education and training

One of the challenges for education providers is to re-profile existing education and training programmes so that they explicitly develop competence in line with service need, and to develop a simplified award and qualifications structure supported by a standard credit system which enables the recognition and transfer of standard educational credits across all providers. Work to articulate credit frameworks across the four UK countries is already underway.

#### K. Education and training providers as awarding bodies

While HEIs and other education providers will design, develop and sometimes deliver programmes of education and training in partnership with a number of audiences including learners, employers, commissioners of NHS services and professional and regulatory bodies, the responsibility for granting an award will rest solely with the designated educational provider.

These providers will have to comply with any legislative and other frameworks which inform the granting of awards including QAA national terms and definitions, regulatory requirements and any changes in legislation which impact on regulation, the Framework for Achievement, the National Qualifications Framework and the Higher Education Qualification Framework. Educational providers will also be responsible for using appropriate benchmarking tools such as the QAA benchmark statements in the design of learning.

L. Recognising informal learning and the award credit for vocational qualifications

Different education establishments appear to have different criteria for accrediting prior knowledge and experience, there is a need to work with these establishments to define these criteria more consistently across the wider UK.

M. Encouraging horizontal progression of an individual's learning as well as vertical

The design of the AHP Career Framework and the associated “blocks or units” of learning are correlated with educational level descriptors and therefore emphasise an award and qualification design based on vertical progression. The framework needs to demonstrate the value and importance of horizontal progression as well in order to meet the needs of service delivery into the future (SSA SfH 2006). Achieving this requires workforce redesign to support and protect the time of specialist staff; liberating them from functions that could be undertaken by others following appropriate educational preparation.

N. Equipping the AHP Workforce with the Skills and Knowledge to carry out their designated Scope of Practice and Role

**QCA, ACCAC & CEA level indicators for the National Qualifications Framework**

<b>Entry</b>	Recognises basic knowledge and skills and the ability to apply learning in everyday situations under direct guidance or supervision. Learning is not geared towards specific occupations.
<b>Level 1</b>	Recognises basic knowledge and skills and the ability to apply learning with guidance or supervision. Learning is about activities which mostly relate to everyday situations and may be linked to job competence.
<b>Level 2</b>	Recognises the ability to gain a good knowledge and understanding of a subject area of work or study, and to perform varied tasks with some guidance or supervision. Learning involves building knowledge and/or skills in relation to an area of work or a subject area and is appropriate for many job roles.
<b>Level 3</b>	Recognises the ability to gain, and where relevant apply a range of knowledge, skills and understanding. Learning involves obtaining detailed knowledge and skills. It is appropriate for people wishing to go to university, people working independently, or in some areas supervising and training others in their field of work.
<b>Level 4</b>	Recognises specialist learning and involves detailed analysis of a high level of information and knowledge in an area of work or study. Appropriate for people working in technical and professional jobs, and/or managing and developing others. Qualifications are equivalent to Certificate of Higher Education level.
<b>Level 5</b>	Recognises the ability to increase the depth of knowledge and understanding of an area of work or study to enable the formulation of solutions and responses to complex problems and situations. Learning involves the demonstration of high levels of knowledge, a high level of work expertise in job roles and competence in managing and training others. Appropriate for people working as higher grade technicians, professionals or managers. Qualifications equivalent to intermediate Higher Education qualification level such as Diplomas of Higher Education, Foundation and other degrees.
<b>Level 6</b>	Recognises a specialist high level knowledge of an area of work or study to enable the use of an individual's own ideas and research in response to complex problems and situations. Learning involves the achievement of a high level of professional knowledge and is appropriate for people working as knowledge-based professionals or in professional management positions. Qualifications are at a level equivalent to Bachelors degrees with honours, graduate certificates and graduate diplomas.
<b>Level 7</b>	Recognises highly developed and complex levels of knowledge which enable the development of in-depth and original responses to complicated and unpredictable problems and situations. Learning involves the demonstration of high level specialist professional knowledge and is appropriate for senior professionals and managers. Qualifications are at a level equivalent to Masters degrees, postgraduate certificates and postgraduate diplomas.
<b>Level 8</b>	Recognises leading experts or practitioners in a particular field. Learning involves the development of new and creative approaches that extend or redefine existing knowledge or professional practice.

**The Quality Assurance Agency's qualification descriptions for Higher Education**

Descriptor	holders of the qualification will have demonstrated	and will have
<b>Certificate (C) level: Certificate of Higher Education</b>	<ul style="list-style-type: none"> <li>▪ knowledge of the underlying concepts and principles associated with their area(s) of study, and an ability to evaluate and interpret these within the context of that area of study;</li> <li>▪ an ability to present, evaluate, and interpret qualitative and quantitative data, to develop lines of argument and make sound judgments in accordance with basic theories and concepts of their subject(s) of study.</li> </ul>	<ul style="list-style-type: none"> <li>▪ evaluated the appropriateness of different approaches to solving problems related to their area(s) of study and/or work;</li> <li>▪ communicated the results of their study/work accurately and reliably, and with structured and coherent arguments;</li> <li>▪ undertaken further training and develop new skills within a structured and managed environment;</li> <li>▪ qualities and transferable skills necessary for employment requiring the exercise of some personal responsibility.</li> </ul>
<b>Intermediate (I) level: Degree (non-Honours)</b>	<ul style="list-style-type: none"> <li>▪ knowledge and critical understanding of the well-established principles of their area(s) of study, and of the way in which those principles have developed;</li> <li>▪ ability to apply underlying concepts and principles outside the context in which they were first studied, including, where appropriate, the application of those principles in an employment context;</li> <li>▪ knowledge of the main methods of enquiry in their subject(s), and ability to evaluate critically the appropriateness of different approaches to solving problems in the field of study;</li> <li>▪ an understanding of the limits of their knowledge, and how this influences analyses and interpretations based on that knowledge.</li> </ul>	<ul style="list-style-type: none"> <li>▪ use a range of established techniques to initiate and undertake critical analysis of information, and to propose solutions to problems arising from that analysis;</li> <li>▪ effectively communicate information, arguments, and analysis, in a variety of forms, to specialist and non-specialist audiences, and deploy key techniques of the discipline effectively;</li> <li>▪ undertake further training, develop existing skills, and acquire new competences that will enable them to assume significant responsibility within organisations;</li> <li>▪ qualities and transferable skills necessary for employment requiring the exercise of personal responsibility and decision-making.</li> </ul>

<p><b>Honours (H) level: Bachelors degree with Honours</b></p>	<ul style="list-style-type: none"> <li>▪ a systematic understanding of key aspects of their field of study, including acquisition of coherent and detailed knowledge, at least some of which is at or informed by, the forefront of defined aspects of a discipline;</li> <li>▪ an ability to deploy accurately established techniques of analysis and enquiry within a discipline;</li> <li>▪ conceptual understanding that enables the student:             <ul style="list-style-type: none"> <li>– to devise and sustain arguments, and/or to solve problems, using ideas and techniques, some of which are at the forefront of a discipline; and</li> <li>– to describe and comment upon particular aspects of current research, or</li> <li>– equivalent advanced scholarship, in the discipline;</li> </ul> </li> <li>▪ an appreciation of the uncertainty, ambiguity and limits of knowledge;</li> <li>▪ the ability to manage their own learning, and to make use of scholarly reviews and primary sources (e.g. refereed research articles and/or original materials appropriate to the discipline).</li> </ul>	<ul style="list-style-type: none"> <li>▪ apply the methods and techniques that they have learned to review, consolidate, extend and apply their knowledge and understanding, and to initiate and carry out projects;</li> <li>▪ critically evaluate arguments, assumptions, abstract concepts and data (that may be incomplete), to make judgements, and to frame appropriate questions to achieve a solution - or identify a range of solutions - to a problem;</li> <li>▪ communicate information, ideas, problems, and solutions to both specialist and non-specialist audiences;</li> <li>▪ qualities and transferable skills necessary for employment requiring:             <ul style="list-style-type: none"> <li>▪ the exercise of initiative and personal responsibility;</li> <li>▪ decision-making in complex and unpredictable contexts; and</li> <li>▪ the learning ability needed to undertake appropriate further training of a professional or equivalent nature.</li> </ul> </li> </ul>
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<p><b>Masters (M) level: Masters degree</b></p>	<ul style="list-style-type: none"> <li>▪ a systematic understanding of knowledge, and a critical awareness of current problems and/or new insights, much of which is at, or informed by, the forefront of their academic discipline, field of study, or area of professional practice;</li> <li>▪ a comprehensive understanding of techniques applicable to their own research or advanced scholarship;</li> <li>▪ originality in the application of knowledge, together with a practical understanding of how established techniques of research and enquiry are used to create and interpret knowledge in the discipline;</li> <li>▪ conceptual understanding that enables the student:             <ul style="list-style-type: none"> <li>- to evaluate critically current research and advanced scholarship in the discipline; and</li> <li>- to evaluate methodologies and develop critiques of them and, where appropriate, to propose new hypotheses.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>▪ a deal with complex issues both systematically and creatively, make sound judgements in the absence of complete data, and communicate their conclusions clearly to specialist and non-specialist audiences;</li> <li>▪ demonstrate self-direction and originality in tackling and solving problems, and act autonomously in planning and implementing tasks at a professional or equivalent level;</li> <li>▪ continue to advance their knowledge and understanding, and to develop new skills to a high level;</li> <li>▪ the qualities and transferable skills necessary for employment requiring:             <ul style="list-style-type: none"> <li>- the exercise of initiative and personal responsibility;</li> <li>- decision-making in complex and unpredictable situations; and</li> <li>- the independent learning ability required for continuing professional development.</li> </ul> </li> </ul>
<p><b>Doctoral (D) level: Doctoral degree</b></p>	<ul style="list-style-type: none"> <li>▪ the creation and interpretation of new knowledge, through original research or other advanced scholarship, of a quality to satisfy peer review, extend the forefront of the discipline, and merit publication;</li> <li>▪ a systematic acquisition and understanding of a substantial body of knowledge which is at the forefront of an academic discipline or area of professional practice;</li> <li>▪ the general ability to conceptualise, design and implement a project for the generation of new knowledge, applications or understanding at the forefront of the discipline, and to adjust the project design in the light of unforeseen problems;</li> <li>▪ a detailed understanding of applicable techniques for research and advanced academic enquiry.</li> </ul>	<ul style="list-style-type: none"> <li>▪ make informed judgments on complex issues in specialist fields, often in the absence of complete data, and be able to communicate their ideas and conclusions clearly and effectively to specialist and non-specialist audiences;</li> <li>▪ continue to undertake pure and/or applied research and development at an advanced level, contributing substantially to the development of new techniques, ideas, or approaches;</li> <li>▪ the qualities and transferable skills necessary for employment requiring the exercise of personal responsibility and largely autonomous initiative in complex and unpredictable situations, in professional or equivalent environments.</li> </ul>

## Accreditation of Prior Learning

### Principles as recommended in the guidelines published by the QAA September 2004

#### Policies and Procedures

##### Principle 1:

Decisions regarding the accreditation of prior learning are a matter of academic judgement. The decision-making process and outcomes should be transparent and demonstrably rigorous and fair.

##### Principle 2:

Where limits are imposed on the proportion of learning that can be recognised through the accreditation process, these limits should be explicitly stated. The implications for progression, the award of any interim qualification and the classification or grading of a final qualification should be clear and transparent.

##### Principle 3:

Prior experiential and/or certificated learning that has been accredited by an HE provider should be clearly identified on students' transcripts.

#### Information

##### Principle 4:

Higher Education providers should provide clear and accessible information for applicants, academic staff, examiners and stakeholders about its policies, procedures and practices for the accreditation of prior learning.

##### Principle 5:

The terminology, scope and boundaries used by an HE provider in its policies, procedures and practices for the accreditation of prior learning should be explicitly defined in information and guidance materials.

##### Principle 6:

Information and guidance materials outlining the process (es) for the assessment of claims for the accreditation of prior experiential and/or previously certificated learning should be clear, accurate and easily accessible.

##### Principle 7:

Higher Education providers should consider the range and form(s) of assessment appropriate to consider claims for the recognition of learning.

##### Principle 8:

The criteria to be used in judging a claim for the accreditation of prior learning should be made explicit to applicants, academic staff, stakeholders and assessors and examiners.

**Principle 9:**

Applicants should be fully informed about the nature and range of evidence considered appropriate to support a claim for the accreditation of prior learning.

**Principle 10:**

The assessment of learning derived from experience should be open to internal and external scrutiny and monitoring with an institutional quality assurance procedure.

**Roles and Responsibilities**

**Principle 11:**

The locus of authority and responsibilities for making and verifying decisions about the accreditation of prior learning should be clearly specified.

**Principle 12:**

All staff associated with the accreditation of prior learning should have their roles clearly and explicitly defined. Full details of all roles and responsibilities should be available to all associated staff and applicants.

**Principle 13:**

Appropriate arrangements should be developed for the training and support of all staff associated with the support, guidance and assessment of claims for the accreditation of prior learning.

**Support**

**Principle 14:**

Clear guidance should be given to applicants about when a claim for the accreditation of prior learning may be submitted, the timescale for considering the claim and the outcome.

**Principle 15:**

Appropriate arrangements should be in place to support applicants submitting claims for the accreditation of prior learning and to provide feedback on decisions.

**Monitoring and Review**

**Principle 16:**

Arrangements for the regular monitoring and review of policies and procedures for the accreditation of prior learning should be clearly established. These arrangements should be set within established institutional frameworks for quality assurance, management and enhancement.

**FEEDBACK SHEET TO BE COMPLETED AFTER THE MEETING**

<b>Name of Council Member</b>	<b>Diane Waller</b>
<b>Title of Conference/Meeting</b>	<b>The Age Agenda</b>
<b>Date of Conference</b>	<b>Tues 20<sup>th</sup> February 2007</b>
<b>Approximate number of people at the conference/meeting</b>	<b>500 plus</b>
<p><b>Issues of Relevance to HPC</b></p> <p>The morning was taken up by presentations from speakers from statutory and voluntary services concerned with older people's health and well-being, and ended with a speech from Ivor Lewis MP. The workshops I attended focussed on service delivery, mainly mental health services, and on care. The Health Care Commission representative described their role. But the most useful workshop from HPC perspective was that given by Dr June Crown (Chair of Inquiry into Older People's Mental Health and Well-Being) and Professor Subu Banerjee from the Inst of Psychiatry, who confirmed the poor and patchy level of services for older people with mental health problems and dementia. Attitude change was highlighted as essential and that could come from training of health and social care professionals and research.</p> <p>The final session was a panel, at which Sir Derek Wanless and others presented their views.</p> <p>I think it will be important for the HPC and other health regulators to see if and how training programmes are addressing service delivery to older people with MH problems.</p> <p>It is common knowledge that the population of over 65s is growing rapidly but the current cut-off from adult services at this age (still quite common in many areas) causes many problems. However, if 'elderly services' are merged with adult services, this might mean even less attention, and non-specialist attention, is available.</p> <p>It was an extremely well attended and important occasion and complements the work of the Age Concern Inquiry.</p>	
<p><b>Key Decisions Taken</b></p> <p>To continue to press government for urgent attention to be given to older people's health and well-being and to attend to issues such as housing, poverty, appropriateness and accessibility of services.</p> <p>To encourage anyone connected with training and regulation to examine how trainees are being taught about older people's health, especially mental health.</p>	