



**HANDBOOK**

**OF THE**

**JOINT VALIDATION**  
**COMMITTEE**  
**(JVC)**

*Revision 2004*

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# CHAPTER ONE

## 1 INTRODUCTION

- 1.1.1 These procedures have been produced during a time of change in radiography education. The Joint Validation Committee (JVC) was established in 1993 by the College of Radiographers (CoR) and the Radiographers Board at the Council for Professions Supplementary to Medicine (CPSM) to streamline procedures and avoid duplication of activities associated with validation, periodic review and the monitoring of programmes leading to eligibility for registration as a radiographer and professional accreditation. Procedures include the process for approval and accreditation of practice placements.
- 1.1.2 The Health Professions Council (HPC) superseded the CPSM with effect from 1st April 2002. Following a transition period, new procedures under the order in Council will operate from September 2004.
- 1.1.3 As the processes for the validation and review of programmes leading to eligibility for registration as a radiographer and professional accreditation under the new HPC have not yet been finalised, these procedures form an interim document which will be amended, following clarification of the new arrangements. While there will be changes made to this document, it provides a comprehensive guide to the validation, approval and monitoring processes operated by the College of Radiographers and the statutory body, in respect of programmes leading to eligibility for registration as a radiographer and professional accreditation.
- 1.1.4 **Procedures are enacted to ensure the parent bodies retain their responsibility in the validation and approval of programmes and that they are not delegated to other organisations.**
- 1.1.5 The JVC welcomed the publication of *Meeting the Challenge: A Strategy for the Allied Health Professions* (DOH 2000a) and developed its policies in order to support and encourage radiography departments in higher education institutions (HEIs) to respond innovatively. Whilst DOH 2000a relates specifically to England, the principles apply to all four home countries.
- 1.1.6 *Meeting the Challenge: A Strategy for the Allied Health Professions* (DOH 2000a) focused on stronger partnerships, innovative approaches to practice and fieldwork placements, reducing attrition, inter-professional education and training, flexible and accessible education including part-time routes and strengthening research capacity.
- The JVC welcomes innovative proposals from HEIs and would seek to work with them to bring such proposals to fruition and to ensure that robust mechanisms are in place to assure quality of education, training and support for students.
- 1.2. This handbook describes the procedures by which this JVC functions on behalf of its two parent bodies, namely, the CoR and the HPC.
- 1.3 This handbook is a source of reference for:
- a. HEIs and colleges offering or intending to offer programmes leading to eligibility for registration as a radiographer and professional accreditation;
  - b. purchasing authorities and other agencies which have an interest in managing and/or funding and/or contracting for radiography education, and who have an interest in the quality control of such programmes identified in a;
  - c. curriculum development and programme planning teams in radiography education centres;
  - d. those practice placements which are, or intend to be, associated with the clinical education component of programmes identified in a;
  - e. the JVC itself and its parent bodies;
  - f. representatives of the JVC who are required to implement the procedures of the JVC.

# CHAPTER TWO

## 2 ROLES AND RESPONSIBILITIES

### 2.1 Parent Bodies

The parent bodies are:

The College of Radiographers (CoR) and  
Health Professions Council

#### 2.1.1 The College of Radiographers

The Society is both a professional body and a trades union affiliated to the TUC. The College is the charitable subsidiary of The Society and it exists to serve the public good. The College's objects are directed towards education, research and other activities in support of the science and practice of radiography and its allied sciences. The Society commissions/funded places the College to deliver professional and educational services on behalf of members and the general public.

The Society of Radiographers (SoR) is the professional body for radiographers and associated disciplines. The CoR, on behalf of the SoR, has the following roles and responsibilities:

- a. setting, maintaining and raising of standards;
- b. approval of programmes leading to professional accreditation as a radiographer;
- c. overseeing and co-ordinating the design, delivery and quality assurance of professional education and training.

#### 2.1.2 Health Professions Council

The statutory body, the HPC, has as its primary responsibility the protection of the public. One of the ways it achieves this is through ensuring that programmes presented for approval will produce practitioners who are competent to practise. A requirement of the Health Professions Order, (2001), is that every proposal submitted for pre-registration training is considered. Under the Order in Council, HPC approval of all institutions used for the delivery of radiography education is also required.

##### 2.1.2.1 Recommendations for approvals of programmes and institutions are considered by the Education and Training Committee (ETC), which is a statutory committee of the HPC.

The HPC is required to set, consult on and publish standards of proficiency and standards of education and training for all the professions on its Register.

##### 2.1.2.2 The legislation requires that all institutions used for the delivery of radiography education be approved by the HPC.

##### 2.1.2.3 The HPC has a statutory duty to keep itself informed of the nature of:

- i) the education and training given at approved institutions to persons attending approved programmes.
- ii) the assessment, as the result of which approved qualifications are granted.

## 2.2 The Joint Validation Committee

### 2.2.1 Terms of Reference

#### 2.2.1.1 The JVC will:

- a. appoint panels to carry out visits to education institutions and practice placement units in connection with approval validation and periodic review procedure leading to re-approval/continued approval;
- b. consider the reports of approvals/validation and review panels and make recommendation(s) to parent bodies. The recommendation(s), if appropriate, will be for approval of the programme and integral practice placement units for a specified period of time (usually not exceeding five years);
- c. seek to participate in internal monitoring procedures and will monitor annually the progress and development of programmes. The JVC reserves the right for its representatives to undertake visits to institutions in connection with this;
- d. advise parent bodies on all aspects of the suitability of education institutions to offer programmes in radiography;
- e. agree standing orders for its operations;
- f. advise institutions on issues in relation to development and delivery of appropriate programmes leading to eligibility for registration as a radiographer and professional accreditation.

2.2.1.2 The JVC is accountable to its parent bodies and will report to them annually on the working of the Committee.

2.2.1.3 **Both the CoR, on behalf of the SoR, and the HPC reserve the right to discharge their respective functions independently of the JVC.**

#### 2.2.2 Roles and Responsibilities of the JVC

These include:

- a. recommendation of approval of institutions for the delivery of qualifying programmes in radiography;
- b. participation in the validation/approval of all programmes leading to qualification as a radiographer, professional accreditation and eligibility for registration;
- c. recommendation of approval to parent bodies of programmes leading to qualification as a radiographer, professional accreditation and eligibility for registration;
- d. periodic review of all qualifying programmes in radiography;
- e. monitoring of standards of all qualifying programmes in radiography;
- f. consideration of major change to approved qualifying programmes in radiography;
- g. provision of advice to all institutions offering or intending to offer qualifying programmes in radiography.
- h. bring to the attention of parent bodies issues of concern which impact on the ability of an institution to deliver the programme as approved

### 2.2.3 Membership

2.2.3.1 The JVC shall comprise twelve (12) members. Six (6) members are to be nominated by each parent body.

- 2.2.3.2 Nominations to the JVC may be from members of the Council of the Society of Radiographers, the Health Professions Council, or from other such nominations as may be thought appropriate by the respective parent bodies.
- 2.2.3.3 Non-radiographer members are not to exceed three (3) from each parent body.
- 2.2.3.4 The Chairman of the JVC shall be elected at the first meeting of the JVC each calendar year.
- 2.2.3.5 The Vice-Chairman of the JVC shall be a representative of the Council of the SoR or the HPC, whichever body is not providing the Chairman, and shall be elected at the first meeting of the JVC each calendar year.
- 2.2.3.6 Notwithstanding the provisions of membership above, the following officers may attend in an advisory capacity:
- |              |   |
|--------------|---|
| For the CoR: | Chief Executive                             |
|              | Director of Professional Policy             |
| For the HPC: | Registrar and Chief Executive               |
|              | Director responsible for radiography issues |
- 2.2.4 Quorum
- The quorum of the JVC shall be six (6), of whom a minimum of two (2) shall be appointees of the CoR, two (2) shall be appointees of the HPC and a minimum of two (2) of the six (6) shall be radiographers.
- 2.2.5 Secretariat
- 2.2.5.1 A Secretariat for the JVC will be provided by the SoR, who will be in attendance at all meetings of the JVC and at other meetings and activities as deemed appropriate.
- 2.2.5.2 The Secretary to the JVC shall be an officer of the SoR, with appropriate administrative support.
- 2.2.6 Funding
- 2.2.6.1 The costs incurred in its normal work by the JVC will be met by a financial subvention from the HPC and by a proportion of the annual registration fee for student membership of the professional body.
- 2.2.6.2 **The immediate expenses of the representatives of the JVC involved in validation and associated practice placement visits will be met directly by each education institution.**
- 2.2.6.3 **The statutory body will meet the expenses for institutional visits and if a representative of the professional body participates his/her expenses will be met by the CoR.**

## CHAPTER THREE

### 3 JVC REQUIREMENTS

#### 3.1 Introduction

3.1.1 The JVC has always aimed to be as flexible and non-prescriptive as possible within the limits of the legislative and policy boundaries of its parent bodies. It has also sought to encourage innovation. In so doing, the JVC is concerned that the quality of the education leading to registration and professional accreditation is maintained and new initiatives are resourced adequately.

#### 3.2 Appointment of a Named JVC Link Person to each HEI

3.2.1 The JVC appoints a named representative, from its committee, to each HEI. This link person is the main point of contact between the HEI and the JVC on matters relating to validation monitoring and review, including the quality of education provision. This person should be an additional resource and should in no way replace that provided by the JVC Secretariat.

#### 3.2.2 The Role and Remit of the Link Person

The link person should:

- a) Advise education providers on JVC policy
- b) Enable the HEI to have direct reprogramme to a member of the JVC.
- c) Report to the JVC any problems experienced by the HEI of a material nature likely to affect the quality of provision as approved.
- d) Alert the JVC when a formal matter for resolution might be forthcoming or formal correspondence is expected.
- e) Have a public relations role to ensure the JVC does not appear remote.
- f) Maintain contact and have an overview of the relevant issues.

#### 3.2.3 Involvement in Monitoring

The link person could be involved in discussion before the education provider completes the Annual Monitoring Schedule, giving guidance on critical areas. This could enable issues such as attrition to be picked up early.

Each link person is asked to give the JVC an objective report directly relating to the Annual Monitoring Schedule provided by the HEI and analysis of progress and issues in its academic programmes. This is designed to identify:

- any particular elements of good practice;
- areas of concern which need to be addressed in the short term
- forthcoming validation/reviews and issues which they may need to address.

#### 3.3. Increases in student Numbers

3.3.1 It is the policy of the JVC to support increases in student numbers to meet service requirements and the Government's commitment to expanding the workforce as set out in as set out in the Improving Health in Wales ( The National Assembly for Wales 2001) NHS Plan (DOH 2000b) and Our National Health (Scottish Executive 2000). **This will be subject to confirmation that additional resources are in place to support the increase.**



3.3.3 The JVC monitors the quality of education provision and ensures that any increase in student numbers is properly resourced before approval is granted.

### **3.4 Registerable Qualifications**

3.4.1 The JVC would expect to see the following programmes leading to registration and professional accreditation :

- Bachelor of Science Degrees with Honours;
- Accelerated Bachelor of Science Degrees with Honours;
- Postgraduate Diploma/Masters degrees, (see guidance at Appendix Two);
- In-service/in-employment programmes linked to Bachelor of Science Degrees with Honours.

3.4.2 The JVC does not consider that all elements of the QAA Subject Benchmarks could be achieved within a competence-only qualification. A National Vocational Qualification (NVQ) or Scottish Vocational Qualification (SVQ) Level 4 alone, therefore, would not be appropriate for Registration. However, a qualification incorporating an appropriate NVQ/SVQ at Level 3/4, designed in association with an HEI to provide the broader education required to support an evidence-based, professional approach to practice, would be considered.

3.4.3 Notwithstanding the above, the JVC confirms that the minimum qualification to practise as a radiographer is a Bachelor's degree at honours level or its equivalent.

### **3.5 Mode of Delivery**

3.5.1 It is expected that HEIs will determine the particular nature of the programme or programmes they intend to deliver, and the degree of flexibility they will incorporate.

3.5.2 In reviewing current programmes and developing new ones, the emphasis should be on maximising opportunities for students to access programmes.

3.5.3 The JVC accepts and welcomes innovation in programme delivery which currently include accelerated full-time and part-time (See Guidance at Appendix One).

3.5.4 Where programmes have provision for "stepping off" and "stepping on" at academic levels below that recognised for the professional qualification, the JVC expects issues concerning the interval between, and relevance of, experience in the interim period to be addressed. This may vary for different programmes and different stages of a programme.

3.5.5 All programmes will still need to meet the requirements for competence to practise and provision of the minimum Bachelor degree with honours level professional education, or equivalent, required for registration and professional accreditation as a radiographer.

3.5.6 These issues will need to be clearly addressed in approval/validation documentation.

### **3.6 Routes to Entry and Progression**

3.6.1 The JVC does not prescribe entry requirements, although it expects entrants to benefit from higher education study, and to meet the minimum standard of entry to higher education in the UK.

3.6.2 To incorporate flexibility, it is recognised that entry to programmes leading to eligibility for registration as a radiographer and professional accreditation may be obtained through a range of routes, including the following:

MODE OF ENTRY	INDICATIVE QUALIFICATIONS
Standard Entry	Standard secondary and post-16 tertiary education entry qualifications including Scottish Highers and Irish Leaving Certificate
	Access and BTEC
	NVQ/SVQ level 3 - life experience portfolio
	Foundation Programmes
Entry with Advanced Standing	Foundation Degree
	Cert. HE, Dip. HE
	Other Degrees
Stepping On and Off	Those "stepping on" may offer knowledge, skills and experience for entry or entry with advanced standing. Where individuals step off, they should do so with at least a transcript of their achievements. Where possible a recognised award should also be available. These should facilitate "stepping on" again at a later date.

N.B: This list is indicative and should not be seen as definitive.

3.6.3 Bridging programmes may also be a suitable means of providing flexibility. The JVC anticipates that these would be appropriate in the following situations:

- to support students offering part, but not all, of the entry qualifications required by an HEI;
- to enable assistant practitioners to step on to a BSc (Hons) (Hons) programme at the level consistent with their learning and experience;
- to facilitate transfer from one health profession's education pathway to a different one (for example, a student who wants to move from a nursing or occupational therapy pathway into a diagnostic or therapeutic radiography pathway).

### 3.7 Learner Groups Accessing Part of a Programme

3.7.1 The JVC welcomes and encourages the facilitation of access to parts of an approved radiography curriculum by other groups of learners or individuals, without compromising the integrity of the educational experience or the award for any learner group or individual. Such groups and individuals might include:

- radiographers intending to return to practice and re-gain registered status;
- diagnostic radiography and radiotherapy helpers or assistant practitioners;
- students following access, foundation or similar programmes;
- applicants for registration with qualifications obtained in a country outside the UK.

3.7.2 Robust mechanisms should be in place to safeguard the education of all student groups through careful planning and liaison and to ensure there are sufficient staff to deliver the programme, both within the HEI and in associated practice placements.

3.7.3 The appropriate mechanisms for co-ordination of the various groups will need to be demonstrated through the validation and approval mechanisms.

### **3.8 Collaboration**

- 3.8.1 The JVC supports initiatives involving inter-professional collaboration and collaboration between HEIs. Validation documentation should clearly identify the measures taken to ensure that collaborative arrangements, including those for clinical education, are robust. Written agreements, safeguarding the interests of all groups of students and staff, must be in place and there should be adherence to the QAA code of practice on collaborative provision (QAA 1999) should be adhered to. The equality of all parties involved in inter-professional collaboration is considered important, as is clarity in terms of relative roles and responsibilities in the partnerships.
- 3.8.2 The JVC is particularly concerned to ensure that collaborative arrangements meet the needs of the student bodies of the partners. Where provision is collaborative, particular attention will be paid to its impact on recruitment and retention of students.

### **3.9 Attrition**

- 3.9.1 The JVC will monitor student attrition and its causes and will expect HEIs to have strategies in place to minimise the loss of students from programmes.
- 3.9.2 With widening access and a greater diversity among learners, HEIs, with their practice placement partners, have the responsibility of ensuring that those involved in education are properly informed of these matters and recognise their roles in minimising attrition and maximising progression.

### **3.10 Student Learning Environment**

- 3.10.1 The JVC recognises the considerable pressures currently placed upon those in the learning environments. This results in the need for supervision and mentoring of large groups of diverse learners, without dilution of the quality of provision for students on programmes leading to eligibility for registration as a radiographer and professional accreditation.
- 3.10.2 A need is recognised for significant investment such as the development of clinical skills “laboratories” and information and communication technology (ICT). Capital expenditure and ongoing revenue commitment is required to support this. Evidence of such investment and commitment must be demonstrated at validation or re-validation, and at annual review.
- 3.10.2.1 Clinical skills “laboratories” should, where appropriate, provide a multi-professional environment, which mirrors as far as possible the world of work. They may also incorporate access to patients and clients where it is possible and practical to do so safely.
- 3.10.3 Each student must have easy access to networked computing and email facilities both within all learning environments.
- 3.10.4 Development of clinical education must take account of flexible patterns of clinical learning. This must be organised to ensure coverage of the required range of procedures to meet the outcomes of the programme and develop appropriate professionalism.
- 3.10.5 Evidence of effective co-ordination and clear communication and liaison between the HEI and all practice placements is essential for the continued development and delivery of clinical education of consistent quality.
- 3.10.6 The JVC will consider the allocation of learners from different education and learning programmes within a practice placement. Where more than one HEI is involved or where learners follow different types of programme, possibly at different educational levels, this must be appropriately co-ordinated and mechanisms of support must be clearly identified and equitability established. These arrangements must be transparent at validation/approval.

- 3.10.7 Higher education institutions must have in place quality assurance mechanisms, to ensure there are appropriate actual numbers of staff and resources in placements to support the practice education. Where agency staff are deployed, their clinical and educational skills and development must be taken into account.

### **3.11 Staff Development**

- 3.11.1 Those staff involved in the teaching and learning process must have appropriate education and training to support them in their educational role. Academic staff will also need to maintain clinical credibility, in the areas of practice where they are responsible for delivery of the educational programme. There must be evidence that all staff undertake appropriate CPD in order to maintain their registration.

### **3.12 Staffing Levels Appropriate to Delivery of the Radiography Programme**

- 3.12.1 The Government demand for increasing numbers of students and the provision of greater flexibility in programmes result in increased complexity of educational provision and student support. Nevertheless, the study of radiography requires a high level of small group work and lecturer to student contact on a person-to-person basis to ensure the safe application of diagnostic and treatment techniques. Learning environments will vary but will include lecture theatres, laboratory settings and practice placements.

- 3.12.1.1 As a consequence and to ensure that staffing levels are able to support learning the JVC requires an overall minimum academic staff: student ratio (SSR) of 1:12 for each programmes leading to eligibility for registration as a radiographer and professional accreditation.

The ratio is to be based on the number of students for which there are commissions/funded places/funded places or on the actual number of students if this figure is higher. Institutions must approach the JVC if an approved cohort size is to be exceeded. This approach must be at least three months prior to the commencement of the cohort as HEIs will be expected to meet the 1:12 SSR prior to the commencement of the programme.

- 3.12.1.2 When calculating SSR consideration will be given to the import and export of contributors to the programme and the balance of suitably qualified radiographic staff.

- 3.12.2 The JVC considers that there needs to be investment in clinical staff and in provision of appropriate resources to support the delivery of clinical education.

- 3.12.2.1 There needs to be investment to ensure that diminishing staff: student ratios do not affect clinical education adversely. Indeed, opportunities to enhance clinical education are to be encouraged.

- 3.12.2.2 Recognition of the diversity of learner needs is essential. Continuing professional development of all staff is important.

## CHAPTER FOUR

### 4 VALIDATION, PERIODIC REVIEW, INSTITUTIONAL VISITS AND MONITORING

#### 4.1 Overall Aim of Validation, Approval, Periodic Review, Institutional Visits and Monitoring

4.1.1 The overall aim of programme approval validation, periodic review, institutional visits and monitoring is to secure and maintain a high quality educational experience for students through assessment of the quality and standards of programmes, the stimulation of curriculum development through peer review and appraisal and the adequacy of the full range of resources.

4.1.2 The JVC seeks to work in collaboration with other bodies involved in similar activities so that these procedures are streamlined, documentation is shared and the burden on HEIs is minimised. This will ensure that the requirements of the parent bodies are met and not delegated to any other organisation.

#### 4.2 Objectives of Validation/Approval

4.2.1 Any new pre-registration programme which is intended to lead to professional accreditation and eligibility for registration as a radiographer must be submitted for validation.

4.2.2 Validation /Approval must ensure that:

- a programmes meet the requirements for the relevant award, and that standards are appropriate to the award; [reference must be made to the *Standards of Proficiency* (HPC2004), *A Curriculum Framework for Radiography* (COR 2003) and the *NHS Benchmark Statements: Radiography* (QAA2001)];
- b. the human and physical resources available, and the environment, both academic and practice, within which the programme is offered, are satisfactory and comply with the HPC's standards of education and training;
- c. the critical criteria outlined in 4.3 have been met.

#### 4.3 Requirements for the Approval of Programmes Leading to Eligibility for Registration as a Radiographer and Professional Accreditation

4.3.1. The viability of a radiography programme/programme with eligibility for registration is dependent upon a number of critical conditions being met. The JVC must ensure that the following requirements are satisfied during the validation and appraisal process of such programmes:

- a. unambiguous programme aims, objectives and outcomes together with evidence of how they are to be met in terms of educational support within an institution and the associated practice placements must be evident;
- b. there must be a clear demonstration of the quality, nature and range of academic and practice facilities available to support radiography education and practice;
- c. evidence of a staff development strategy to support radiography education must be provided;
- d. the number of full time equivalent staff designated to support the programme and their range of expertise must be stated and must demonstrate that resources are sufficient to enable delivery of the programme as proposed.

The JVC now requires a minimum academic staff: student ratio of 1:12 to support each programme leading to eligibility for registration as a radiographer and professional accreditation. This is based on the number of students for which commissions/funded places/funded places are placed, or on the actual number of students if this figure is higher.

- e. the quality assurance process underpinning the programme needs to be clearly defined;
  - f. a clear framework for the progression of students through the programme
  - g. an effective assessment strategy that tests the stated programme outcomes and leads to the development of competent practitioners;
  - h. all staff who are teaching radiography, by virtue of their qualification as radiographers, on the programme are registered with the HPC.
- 4.3.2. The JVC will withhold its support and refuse approval for any programme submission which does not clearly demonstrate that it has met the requirements listed above.
- 4.3.3. The JVC recommends that additional information to support the above requirements be presented within a concise programme submission document. This should include:
- 4.3.3.1 A statement confirming that:
- a. the necessary institutional approval to offer the programme has been granted;
- 4.3.3.2 Background information, such as the context of the programme in terms of institutional policies and plans and of regional and national demand and provision.
- 4.3.3.3 The name of the award. It is recommended that the title should include the discipline offered, and be consistent with those listed in 3.4.
- 4.3.3.4 The programme specification and regulations covering the information required for the final/definitive programme document.
- 4.3.3.5 Details of the syllabus and learning and teaching strategies for each element or unit, including practice.
- 4.3.3.6 Brief details of the organisation and staffing, to include:
- a. a list of teaching, technical, and administrative staff to be involved in the programme, with details of any vacant posts to be filled;
  - b. curriculum vitae of the academic staff who will be involved, including their qualifications in full, their teaching and other relevant experience, with dates;
  - c. details of staff research, consultancy and scholarly activity relevant to the programme, with dates;
  - d. the constitution and operation of any programme committee, and the name and position of the programme-leader;
  - e. the constitution and terms of reference of the examinations board.
- 4.3.3.7 Assurances should be provided on:
- a. the capital and revenue budget proposed for the support of the programme;
  - b. library, computing and other relevant supporting provision;
  - c. specialist accommodation and major items of equipment.
- 4.3.3.8. A programme booklist indicating the range of reading considered essential and/or recommended.
- 4.3.3.9. Where relevant, any requirements for the selection of project topics, provisions for supervision, and requirements for submission of projects which are not detailed in the programme assessment regulations.

#### **4.4 Aim of Periodic Review**

- 4.4.1 Periodic review is considered by the JVC and its parent bodies to be just as important as the original validation/ approval although the emphasis is to ensure developments are consistent with changes and advances in professional practice and that standards are maintained.
- 4.4.2 The purpose of a periodic review is different from the major review of healthcare programmes undertaken by the QAA on behalf of the Department of Health, which is a retrospective evaluation of the programme. Periodic review by the JVC is prospective and primarily concerned with continuation of approval of the programme, including approval of developments and its suitability for meeting the future requirements of the profession. Developments to the programme need to be informed by critical review of the current programme.
- 4.4.3 A programme should normally be submitted for periodic review at five yearly intervals although an institution may choose to submit a programme earlier.

#### **4.5 Objectives of Periodic Review**

- 4.5.1 Periodic review shares the objectives of initial approval/validation but is additionally concerned with evaluating the success of the programme in practice.
- 4.5.2 Review therefore requires the approving /validating authority to consider:
- a. the quality of the programme in operation as demonstrated by the performance of students and the reports of the external examiners;
  - b. the extent to which staff have updated themselves and their programme, and engaged in relevant research, consultancy and professional activity;
  - c. the outcomes of the process of critical appraisal in which staff have engaged;
  - d. the results of any evaluation of the programme by students;
  - e. the rationale for any changes that have been made since validation and any plans for further changes.

#### **4.6 Information Required For A Periodic Review**

- 4.6.1 A full programme submission document should be submitted for consideration.
- 4.6.2 The programme submission document should also include:
- a. data related to student intakes since validation or last periodic review;
  - b. critical evaluation of the programme since original validation or last periodic review. This should comment on the monitoring process and outcomes.

#### **4.7 Aims of Institutional Visits**

- 4.7.1 Approval of all institutions used for the delivery of radiography education by the HPC is a statutory requirement.
- 4.7.2 Such visits are normally an integral part of approval/validation event or periodic review. An institutional visit may also take place at such time as a substantial alteration to existing arrangements is deemed to have taken place, for example, a move to new premises.

## **4.8 Objectives of Institutional Visits**

4.8.1 An institutional visit requires the JVC to appraise the adequacy of the full range of resources which are available to support radiography education and the availability of access to other facilities which support student education in its wider context. These include access to library, recreation, transport and accommodation facilities.

## **4.9 Programme Monitoring**

4.9.1 The JVC will communicate regularly with institutions offering programmes leading to eligibility for registration as a radiographer and professional accreditation to facilitate the monitoring of progress and development.

4.9.2 Institutions are required to complete a programme-monitoring instrument, which will be circulated annually, for return to the JVC Secretariat by **the date advised**.

4.9.3 In addition, institutions may be requested to submit external examiners reports and any other documentation which supports the monitoring return data.

## **4.10 Changes to the Programme (including variation in size of intake)**

4.10.1 Proposed significant changes to the programme approved at validation/approval/periodic review require submission to the JVC for approval. These may include changes in the following:

- intake of students per annum;
- mode of delivery of the programme;
- level of resources, including staffing.

NB. Programmes are approved for a specific length of time, e.g. the BSc (Hons)(Hons) programme is normally delivered over 3 years for England and Wales and 4 years for Scotland and Northern Ireland, therefore, separate approval is required for a part-time route as it is delivered over an extended period.

4.10.2 Any proposed changes should be notified in writing to the JVC link person and copied to the Secretariat for information. Consideration should be given to the impact of any change on the resources required to support delivery of the programme, including physical resources and staffing in both the clinical and academic environment.

### **4.10.3. Variation In Student Numbers**

4.10.3.1. At validation or periodic review it is normal procedure to consider the size of student cohort in relation to available resources and management of the scheme.

4.10.3.2 Where there is an intention to increase numbers as a result of a request from purchaser or funding bodies, or as a result of an additional contract, institutions are required to inform the JVC in writing, at least 3 months prior to the date of commencement of the new arrangements. In reaching a decision for approval of the request, the JVC will need to be assured that conditions, resources and arrangements (to include provision of practice placements) are in place to support the planned increase in student numbers.

4.10.3.3. It is quite feasible for an institution to exceed its planned intake as a result of the number of offers and acceptances. JVC approval must be sought as soon as an HEI is aware of the extra numbers. This should be sent in writing with evidence of the resources available to support the increase in numbers, to the JVC Link person, copied to the Secretariat for information. The JVC will endeavour to give prompt attention to the request for approval of the increase. Institutions should not enrol students until the additional numbers have been approved.



- 4.10.3.4. Where proposals are submitted for a significant increase in the JVC approved annual intake of students, it may be necessary to reconvene a small panel to review the proposal and ensure that necessary resources are in place to support such an increase.
- 4.10.3.5. Where an institution is withdrawing from radiography education the JVC must be informed as soon as possible. The JVC will seek reassurance that the level of resource is maintained to ensure that students are able to complete their studies within the approved regulations for their programme. Any other proposal would need the support of the students and the JVC.

#### **4.11 Interprofessional Validation Approval and Periodic Review**

- 4.11.1 The JVC is increasingly participating in interprofessional validation/approval procedures. Notice of at least six months is required where such an event is anticipated to ensure that appropriate panel members can be nominated by the JVC.
- 4.11.2 During an interprofessional validation/approval a number of other professional programmes will be considered. Some disciplines may already operate within the purview of the HPC and may therefore share issues in common. However, other professions may operate under different legislation and professional requirements. In such circumstances the JVC reserves the right to make a judgement on the radiography programme independent of other approving bodies.
- 4.11.3. The purpose of interprofessional validation/approval must be stated clearly by the institution and the programme teams.
- 4.11.4. The programme document should demonstrate clearly the content and structure of the radiography programme.
- 4.11.5. The interprofessional validation/approval procedure must seek to establish commonality of standards across the disciplines within the programme, whilst maintaining the integrity of each discipline.
- 4.11.6 It is the responsibility of the chairman of the validation panel to ensure that sufficient time is available so that issues of concern are properly considered during the validation.
- 4.11.7 It must be recognised that professional representatives may have different responsibilities to their individual parent bodies in terms of authority to make recommendations. This is likely to affect the wording of any approval that may be given to a programme.

#### **4.12 Accreditation of Practice Placements**

- 4.12.1 Clinical education is an integral part of all programmes leading to eligibility for registration as a radiographer and professional accreditation and of necessity will normally take place in a practice setting.
- 4.12.2 It is the policy of the CoR and the HPC to approve and accredit practice placements as an integral part of programmes. Therefore, as part of the responsibility to its parent bodies, the JVC is required to approve new placements or confirm continuing accreditation of established placements in the normal review process. The JVC may therefore require to visit, for the purposes of approval and accreditation, practice placement units involved in the provision of clinical education within the programmes leading to eligibility for registration as a radiographer and professional accreditation. The JVC will make every effort to integrate any such approvals within the validation or periodic review procedure.
- 4.12.3 The JVC is willing to consider the placement of learners from different education and learning programmes within a practice placement.
- 4.12.4 Where more than one HEI is involved this must be appropriately co-ordinated and mechanisms of support need to be clearly identified and equitability established.

Memoranda of agreement between all contributing bodies must be in place prior to approval.

- 4.12.6 Effective articulation of policy and practice by the HEI, with supporting evidence and documentation, has enabled a move away from institutional approval of individual placements under the PSM Act<sup>3</sup> and towards approval of local systems of education including the mechanisms for evaluation and monitoring of associated practice placements. (*See Chapter Six*).
- 4.12.7 The JVC reserves the right to visit all placements.

## CHAPTER FIVE

### 5 PROCEDURE FOR VALIDATION/APPROVAL AND PERIODIC REVIEW

#### 5.1 Types of Validation/Approval and Periodic Review

5.1.1 The JVC recognises that there is no common pattern of validation/approval or periodic review of programmes within higher education establishments, although, broadly, two types of procedures exist:

- a. **Validation/Approval/Periodic Review Events** whereby validation/approval/ periodic review is vested predominantly in a final meeting of the programme team and the validation review panel;
- b. **Process Validations/Approval/Periodic Reviews** whereby validation/approval/ periodic review consists of an extended period of consultation with the panel, leading to approval.

5.1.2 Institutions intending to develop a new programme or to undertake a periodic review are required to notify the JVC early in the planning cycle (notwithstanding the requirement of paragraph 5.3.1). The JVC will acknowledge this notification and dispatch to the institution a copy of the latest edition of the JVC Handbook pertaining to validations and periodic reviews. This will be regarded as the reference document that will govern or inform the event or process validation/ approval/periodic review.

5.1.3 The JVC aims to work within the validation/approval and periodic review structures and procedures of individual institutions. However, it reserves the right to seek modification of, or to withdraw from, these structures and procedures, if, in the view of the JVC representatives, they prevent proper scrutiny of the proposed programme.

5.1.4 Irrespective of the nature of the validation/approval/periodic review, the JVC will attempt to integrate validation with practice placement and institutional visits where these are required so that account can be taken of the contribution from all of the components of the programme within the recommendations.

5.1.5 Independent of the nature of the validation/approval/periodic review procedure, a list of placement placements units (including proposals for new units), together with a written review of facilities available and the arrangements to support clinical education at all practice placements, should be submitted to the JVC Secretariat by the programme planning team at the time of notification of the validation or periodic review. (*See Chapter Six*).

5.1.6 At the time of initial notification of the intention to develop a new programme or undertake periodic review, institutions may request that a JVC advisor is nominated to give advice on the feasibility and appropriateness of its proposals in accordance with guidelines laid down by the JVC.

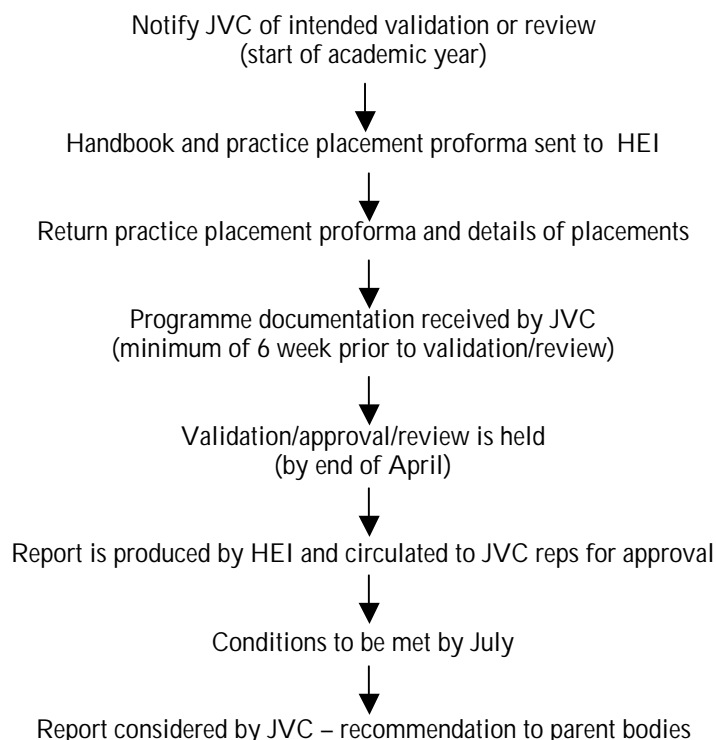
5.1.7 It would be helpful to receive documentation describing the programme and for periodic review an outline of the proposed changes.

#### 5.2 The Validation Panel

5.2.1 The JVC normally chooses a maximum of four representatives to serve on validation or review panels, of whom at least one must be a JVC member and who will act as the lead JVC representative. At least one representative in each discipline must be a HPC Visitor. The other nominations are taken from the Register of Validators. Panel members have delegated responsibility to consider the submission on behalf of the JVC and will make recommendations back to the JVC.

- 5.2.2 It is expected that the awarding institution will:
- nominate additional panel members drawn from the wider HEI who are independent of the programme team;
  - appoint the Chairman of the approval/validation panel;
  - be responsible for the production of all documentation and reports resulting from the approval/validation/periodic review whether event or process.

5.2.3 **Flow Chart of Validation/Approval/Review Process**



5.3 **Event Type Validation/Approval/Periodic Review**

- 5.3.1 Proposed dates for validation/ approval/periodic review events should be forwarded to the JVC Secretariat at least six months before the intended event. This will ensure that there is adequate time for appropriate panel members to be nominated by the JVC.
- 5.3.2 At the time of notification the placement proforma should be forwarded to the JVC Secretariat and details of all the proposed practice placement units associated with the award(s) to be validated/reviewed, including monitoring and audit reports, should be forwarded to the JVC representatives, once they have been appointed. (*See Chapter Six*).
- 5.3.3 The Secretariat will agree dates for the validation/ approval/periodic review events, provide details of the JVC panel members (identifying an advisor and or lead representative) and liaise regarding practice placement visits as appropriate.
- 5.3.4 A minimum of six weeks before the validation/approval/periodic review event, the institution should forward a full programme submission directly to all JVC panel members. The JVC reserves the right to withdraw from the validation event if the documentation is received later.
- 5.3.5 The JVC advises institutions that rigorous internal scrutiny or faculty review prior to the validation/ approval/periodic review event has been found to be helpful. The JVC would participate in this at the request of the institution.

## 5.4 **Format for Event Validation/Approval/Periodic Review**

- 5.4.1 The itinerary for the day will have been agreed by the awarding institution in consultation with the chairman of the validation/approval/review panel and the JVC representatives.
- 5.4.2 The format may include a series of practice placement visits and a visit to the institution that would normally be undertaken by a sub-group of the approval/validation panel, which includes representation from both the JVC and the Institution. (*See Chapter Six*).
- 5.4.3 The JVC representatives will expect to participate fully in the event, which may include separate discussions with staff and students and a review of resources.
- 5.4.4 Normally, the JVC representatives would expect to reach a conclusion in agreement with the institution. If required there will need to be a plenary session towards the end of the event to allow JVC representatives to confirm their position.

### **Typical Agenda**

- Practice placement visits
  - Meeting of JVC representatives
  - Meeting of panel and JVC representatives to review the agenda and identify issues for consideration
  - Tour of facilities
  - Meeting with senior management
  - Meeting with clinical representatives
  - Meeting with students
  - Meeting with programme team
  - Private meeting of panel
  - Feedback to programme team
- 5.4.5 A written report of the proceedings, stating the conditions and recommendations of the approval/validation/periodic review, where applicable, should be produced by the awarding institution. A draft copy should be circulated by the institution to all members of the panel for approval. Following approval of the report by the members of the panel, a copy of the confirmed report should be sent to the JVC Secretariat for consideration and action.
- 5.4.6 **Validation and Periodic Review Reports**
- 5.4.6.1 A report of validation or periodic review, incorporating reports of any visits to practice placements as an integral part of the validation or review, is required for all programmes for which statutory and professional approval is sought
- 5.4.6.2 Validation and periodic review demonstrate the institutions' public accountability for the standard achieved by their programmes. Peer groups' academic judgements, and the evidence on which they are based, must be substantiated and publicly accessible through reports.
- 5.4.6.3 Reports of validation and periodic review are primarily addressed to the academic board of the institution concerned and to the JVC.
- 5.4.6.4 Validation or periodic review reports are important sources of qualitative information about the design, development, monitoring and evaluation of programmes, and complement the factual information within the final programme documents for parent bodies.

- 5.4.6.5 Reports may be used by The CoR and the HPC to provide an overview on standards being achieved, changing patterns of curricular provision, and valuable and innovative practices.
- 5.4.6.6 Reports should be self-explanatory and comprehensible to an external audience. The evidence and analysis contained in reports should be sufficient to explain the panel's conclusions, conditions of approval and recommendations.

5.4.6.7 Specific Information

A report should specify:

- the date(s) and place(s) of the meeting(s) of the validating or review panel;
- the membership of the panel, showing members' names, posts, places of employment, and derivation of their nomination, including specification as to which of the JVC representatives is also a HPC Visitor;
- other major contributors to the discussion, giving their posts and the capacity in which they attended;
- the academic board's decision on the approval of the programme or programme proposal and the duration of approval;
- if there is a change in the title of the award or of the awarding body this should be clearly stated with a recommendation for approval.
- any conditions attaching to the approval of the programme, which must be fulfilled in order for it to meet the requirements, together with the dates and mechanisms by which these should be met;
- any recommendations for changes or future developments desirable in order to enhance the quality of the programme.

5.4.6.8 Focus of Reports

5.4.6.8.1 Reports should relate the discussions of the validation or periodic review panel to matters raised by the programme teams in the critical appraisal of the progress of the programme.

5.4.6.8.2 Reports of periodic reviews should offer a rationale for past and proposed changes to curriculum, commenting in particular on special or innovative developments in programme content and teaching practice.

5.4.7 The lead representative of the JVC will additionally inform the JVC Secretariat of the outcome of the event.

## 5.5 Process Type Validations/Approvals/Periodic Reviews

5.5.1 The JVC is committed to enabling institutions to undertake validations/approvals and periodic review using a process methodology. This demands that the interactions between the JVC representatives and the institution will require a collaborative approach that will result in an extended relationship. Accordingly, management of the process by the awarding institution is considered crucial and is its responsibility. The JVC recognises that validation/approval or periodic review by process is likely to be especially rigorous, searching and wide ranging but should enhance the relationship between the institution and the professional and statutory bodies through constructive dialogue. Where in the view of JVC representatives, process validation or periodic review becomes inappropriately protracted, or impossible to sustain, the JVC will seek a formal meeting with the full validation panel and with the programme team.

5.5.2 In order to participate in process validation/approval/periodic review, the JVC requires that the institution forward to the JVC Secretariat, full documentation of its quality assurance procedure for the scrutiny of programme proposals at the time of notification of the intended validation/approval/periodic review. This will ensure that appropriate panel members can be nominated by the JVC.

- 5.5.3 At the time of notification the practice placement proforma should be forwarded to the JVC Secretariat and details of all the proposed practice placement units associated with the award(s) to be validated/reviewed, including monitoring and audit reports, should be forwarded to the JVC representatives, once they have been appointed. (*See Chapter Six*).
- 5.5.4 The JVC Secretariat will then provide details of the JVC panel members appointed, to a maximum of four, one of who will act as the lead representative. It is expected that, following notification of JVC representatives, the institution will make early contact with the representatives initiating discussions to agree the way in which the process review is to be conducted. It is expected that early agreement will be reached on the focus of the review, timescale, the nature and extent of contact with JVC representatives and the necessity or otherwise of undertaking clinical and institutional visits.
- 5.5.5 It is expected that the institution would also appoint a number of representatives from the wider HEI, independent of the programme team, to participate in the process validation/periodic review.
- 5.5.6 The nature of process validation/approval/periodic review requires that consultation with JVC representatives take place regularly throughout the period of validation/ approval/ periodic review. Consultations may be by telephone, correspondence or meetings. The process may be considered complete when both the awarding institution and the JVC representatives are satisfied that the programme meets the requirements to enable the institution to award the degree and the JVC representatives to recommend approval for recognition, or continuing recognition, to parent bodies through the JVC.
- 5.5.7 Following completion of the process as described in 5.5.6 above, the awarding institution is expected to produce a report of the process, incorporating reports of any visits to clinical departments as an integral part of the validation or review, to be agreed by the JVC representatives and the institution. The JVC representatives will submit the report to the JVC for consideration and action.

It is expected that the report will reflect on the key elements, stages and outcomes including the recommendations to be made by JVC representatives to parent bodies through the JVC. The report will also identify the period for which approval of the programme was agreed.

## **5.6 Approval of Validation and Periodic Review by the JVC**

- 5.6.1 Only when the JVC is satisfied that all conditions of the validation have been met will the programme be recommended for approval. **Two** copies of the final/definitive programme document(s) must be forwarded to the JVC as soon as possible after the programme has been approved.
- 5.6.2 Although the format of the document is a matter for local custom and practice, the document should include all the information presented within the submission document together with evidence to demonstrate that any concerns raised by the validation panel have been addressed.
- 5.6.3 The final approved/definitive programme documents provide the JVC with a comprehensive programme archive and facilitate the gathering of information on programme developments and good practice.

## **5.7 Deferral of Approval by the JVC**

Should a proposal for a programme be found by the JVC to be unacceptable for registration or professional accreditation then the JVC will give reasons for its unacceptability. The JVC retains the right not to proceed with consideration of submissions that are unsuitable and to make its views known to the relevant institution and to parent bodies.

**5.8 Decisions Arising from Validation/Approval/Periodic Review and Institutional Visits**

Recommendations for approval will be progressed via the established and required route, which maintains separate powers and responsibilities of the CoR and of the HPC.

**5.9 Decisions Concerning Approval of Practice Placements**

The JVC approves new practice placements on behalf of the parent bodies.



## CHAPTER SIX

### 6 DEVELOPMENT, APPROVAL AND ACCREDITATION OF PRACTICE PLACEMENTS

#### 6.1 Introduction

6.1.1 The JVC would want to support diverse, creative and practical solutions to providing placement education, provided that the quality of practice education is maintained. The JVC would commend the publication *Placements in Focus: Guidance for Education in Practice for Health Care Professions* (ENB & DOH, 2001) which provides “practical and contemporary guidance to enhance the quality and innovative development of practice placements” (ibid, p 6).

6.1.2 In exercising its responsibilities in relation to practice placements, the JVC is concerned with:

- the process, nature and range of clinical education and its outcomes;
- matters related to how practice education is supported by both the HEI and the placement provider; and
- the evaluation of practice education and practice placements.

Accordingly, in order to assure itself that practice education is appropriate and practice placements provide a proper environment for students’ learning, the JVC requires details of the pattern of student education being offered.

6.1.3 Essentially, for each student, a high quality, practicable and appropriate practice education pathway should be evident. Importantly, this should be able to demonstrate to the student, the HEI, the JVC and other agencies that practice education will enable the student to achieve the competencies associated with the demands of ‘first post’ employment as set out in the academic and practitioner standards in diagnostic and therapeutic radiography contained within the *NHS Benchmark Statements: Radiography* (QAA, 2001) & *Health Professions Council (2003) Standards of Proficiency Radiographers*.

#### 6.2 Responsibilities: Higher Education Institutions

6.2.1 The responsibility for the quality of practice placements and practice education rests primarily with HEIs, working closely with their practice placement providers to secure quality education.

6.2.2 Generally, practice placements have been associated with a single HEI. However, it is anticipated that an increasing number of practice placement departments will need to be used by more than one HEI. In these circumstances, it is the joint responsibility of the HEIs concerned and the practice placement provider to agree and collaborate formally on the use of those sites to be used jointly. Such agreement is essential prior to seeking JVC approval.

6.2.3 Novel placements may be incorporated into students’ practice education programme; for example, health centres with diagnostic imaging facilities or cancer support units, mobile facilities, and private clinics. These opportunities are to be welcomed but the rationale for such placements must be evident within the validated programme, and each must provide the quality and standard of practice education required.

6.2.4 HEIs will need to demonstrate how equity of the student experience in practice education is achieved and how the clinical environments used are able to support the different learning needs of diverse cohorts of students.

6.2.5 HEIs will also need to demonstrate that coherent and appropriate learning outcomes exist for all practice placements; and that the assessment of these is integral to their programmes. While the nature of awards is likely to become more diverse, it is, nevertheless, expected that practice learning outcomes reflect competency and initial fitness for practice.

### 6.3 Evidence of Quality Practice Education

6.3.1 Certain criteria that assist in determining the quality of practice education which the JVC expects HEIs to have considered them in relation to each of its practice placements. In arriving at judgements, emphasis will be placed on those criteria that demonstrate the quality of the support and practice education opportunities available to students.

6.3.2 In seeking to increase the range of opportunities for practice education, as well as in relation to established and approved practice placements, HEIs will need to demonstrate that the following have been considered and judged to be appropriate:

- The range of practice education opportunities available within the placement site.
- The overall volume and range of work undertaken in the placement department.
- The range, nature and standard of the equipment and modalities available to support students' practice education.
- The maximum number of students that the placement department can manage and support effectively. Consideration will also need to be given to the number of students that can be associated with individual examination or treatment rooms where it is expected that two or more students will be rostered simultaneously.
- Staffing arrangements to provide pastoral support, as well as practice education need to be considered and made explicit. As part of this, the number of registered radiographers and other qualified staff who are available to support the proposed maximum number of students placed in the practice placement department at any one time needs to be identified.
- Education and training specifically associated with enabling clinical staff to be effective in their various roles relative to students' practice education and development must be specified. Good practice would encourage clinical staff to gain recognised qualifications or academic credit for their development.
- Practice departments may be working extended days and weeks and may consider offering practice education to students throughout its normal operational hours. In such circumstances, proper consideration must be given to the support provided to students and to how the extended working day or week may be used to provide effective practice education.
- At any one time practice placements may have a range of students and learners to manage, for example, trainee assistant practitioners, those seeking to return to practice, and students from other HEIs on elective placements. Careful consideration needs to be given to the effect of other learners on the quality of the practice education for the student radiographers attached to the placement.
- The general environment apparent within a placement site as may be judged through considering the cohesion of the work force, the education and development culture of the placement, and the attitudes of staff towards supporting learners. Indicators of placements that are likely to provide the necessary quality of practice education and student support include evidence of a full and active continuing professional development programme for all of its staff; role development initiatives operating successfully; research and other academic or clinical collaborative work with the HEI, plans to introduce advanced and consultant level practitioners, and evidence that good clinical governance, risk management and health and safety policies and procedures are in place and operating effectively.
- Student learning facilities, which need to include electronic access to the HEI.
- The arrangements for support for, and interaction with, the practice placement by the relevant HEI in relation to students' practice education.
- Robust mechanisms for the evaluation of practice education provision which encompasses input from students and clinical staff, as well as the HEI.

## **6.4 Criteria for the Selection of Practice Placements**

- 6.4.1 The criteria for the selection of practice placements as part of the programme should be evident within the programme documentation. Learning outcomes for each practice placement should be described clearly within the programme.

An indication should be given as to whether a practice placement is to be used as a major placement, in which students gain a substantial element of the clinical experience specific to one or more years of the programme usually on a recurrent basis, or a subsidiary placement, in which students gain experience on a minor or specialist element of the programme, usually on a "one off" basis.

It is expected that practice placements will exhibit diverse clinical practices. It is not the validity of these practices that is subject to review by JVC representative, but rather that the clinical education programme reflects such diversity.

- 6.4.2 Confirmation of the supernumerary status of students should be established, as should the arrangements for the provision of honorary contracts, as appropriate.
- 6.4.3 In considering proposals for approval of additional practice placements subsequent to validation or periodic review the effect of the proposal on the programme as approved at validation will be assessed by the JVC

## **6.5 The Monitoring and Evaluation of Practice Placements**

- 6.5.1 The regular monitoring and evaluation of practice placements is the responsibility of the education provider.

- 6.5.2 The JVC would expect the education provider to satisfy itself that practice placements:

- i) provide a stimulating learning environment which enables the learning outcomes to be achieved;
- ii) have sufficient numbers of clinical staff with a clear understanding of their roles and responsibilities in relation to the support of students and their education;
- iii) are able to demonstrate ongoing staff training, to include a robust programme of staff development;
- iv) have adequate facilities to support the approved number of students;
- v) have clearly established lines of communication and liaison with the education provider.
- vi) demonstrate compliance with current legislation including health and safety legislation and ionising radiation regulations

- 6.5.3 There should be a robust agreement between the education provider and the practice placement provider specifying the duties and expectations of each.

## **6.6 Assessing of Suitability of Practice Placements**

### **6.6.1 Procedure for Practice Placement Assessment**

- 6.6.1.1 The JVC requires that the HEI submit a completed JVC practice placement proforma to the Secretariat at the time of notification of the validation or periodic review. A written review of facilities available and the arrangements to support clinical education at all practice placements should be submitted to the JVC representatives as soon as possible and at the latest six weeks prior to the approvals event.

6.6.1.2 The JVC will then notify the education provider of the mechanism(s) to be adopted in terms of the assessment of practice placements at the time of confirmation of date(s) for the validation or periodic review.

6.6.1.3 The JVC reserves the right to visit all new practice placements to be associated with a degree programmes leading to eligibility for registration as a radiographer and professional accreditation.

#### 6.6.2 Documentary Evidence

The HEI will provide this at the request of the JVC. In addition to the annual monitoring report, the JVC may request information on a number of issues including:

- a) number of students to be allocated to a placement e.g. number of students -per annum/ at any one time/ by intake;
- b) student facilities e.g. library facilities, tutorial/study facilities, ICT facilities and social facilities such as common room/changing rooms;
- c) adequacy of clinical staff support e.g. staff establishment with grading;
- d) summary of practice placement staff training record with details of ongoing CPD;
- e) arrangements for practice education, e.g. rostering, use of placements by other HEIs;
- e) range and number of examinations or treatments conducted;
- f) mechanisms for quality monitoring relevant to audit;
- g) minutes of relevant meetings e.g. programme committee, clinical liaison committee etc.
- h) details of equipment inventory

A Memorandum of Agreement or similar evidence of agreed contracts between the institution and practice placement units be appended to this document.

The JVC may utilise a range of mechanisms to satisfy itself that the practice placement is properly equipped and organised to be recommended for approval. Such mechanisms, herein termed practice placement assessments may include, scrutiny of documentary evidence, interactive discussion(s) and practice placement visit(s).

#### 6.6.3 Interactive Discussions

The JVC may choose to undertake a critical review of previously approved practice placement units through an interactive group discussion with clinical representatives from each practice placement associated with a degree programme.

#### 6.6.4 Practice Placement Visits

The purpose of visits to practice placements, where deemed appropriate, is to facilitate discussion of the education programme with all parties involved.

6.6.4.1 In the case of periodic review, where practice placements have been previously approved the JVC, at its discretion, may choose to visit a sample of practice placements, as appropriate.

6.6.4.2 Irrespective of the nature of the validation or periodic review, the JVC will attempt to integrate any practice placement visit(s) within the validation or periodic review procedure so that account can be taken of the contribution from all components of the programme within the recommendations.

6.6.4.3 When practice placement visits are undertaken as an integral part of validation or periodic review, they would normally be scheduled to take place during the day(s) immediately preceding the validation or periodic review panel discussions.

6.6.4.4 If an interactive discussion involving clinical representatives is undertaken then it would normally be scheduled for the day immediately prior to, or the morning of, the day of the validation or periodic review panel discussions.

#### 6.6.5 JVC Requirement for Practice Placement Visit

The JVC may request a visit to a practice placement outside of the normal validation or periodic review process. In such cases, the remit of the representatives and the reasons for the visit will be clearly established and notified to the education provider in advance.

#### 6.6.6 Special Circumstances

In special circumstances, at the request of the education centre or appropriate authority, the JVC may wish to exercise its right to undertake such procedures as deemed necessary.

#### 6.6.7 Conduct of the Visit

6.6.7.1 Where visits are undertaken, they should be seen as an opportunity for the programme team to provide additional evidence of the quality of the programme and the representatives should be prepared to offer constructive advice.

6.6.7.2 The JVC representatives may not necessarily visit all practice placement areas or individual examination or treatment rooms within each practice placement. However, the education provider should justify within its documentation the numbers of students that can be allocated to each placement according to that centre's criteria for the selection of practice placements.

6.6.7.3 Where representatives have misgivings about the suitability of a practice placement, the programme team shall be given every opportunity to justify its inclusion within the programme.

#### 6.6.8 Practice Placement Visit Report

6.6.10.1 Where practice placement visit(s) and/or interactive clinical discussions are an integral part of validation or periodic review it is the responsibility of the HEI Registrar's Office/Quality Assurance Division to ensure that notes are taken and recorded. These must form an integral part of the substantive report arising from the validation or periodic review procedure.

6.6.10.2 The reports of practice placement visit(s) and/or interactive discussions should then be incorporated within the substantive report arising from the validation or periodic review procedure.

6.6.10.3 Reports must differentiate between requirements that place conditions upon validation or periodic review and recommendations that provide professional advice intended to enhance the quality of programmes.

6.6.10.4 Reports should reflect the spectrum of opinion that is expressed. Opinions expressed by staff and students may be recorded but statements should not be attributed to named individuals.

6.6.10.5 It should be recognised that the placing of requirements on a programme team in respect of resources and facilities available within NHS Trust are unlikely to be resolved at validation or periodic review. Representatives should be aware that subsequent approval of the programme will, necessarily, be conditional upon such requirements being met.

6.6.10.6 Reports of practice placement visit(s) conducted outside the normal validation and periodic review process should be forwarded through the JVC to the institution for the purposes of their own internal monitoring.

**JOINT VALIDATION COMMITTEE**

The College of Radiographers

Health Professions Council

**Clinical Placement Visits on *date* to the *name of practice placement department(s)*, associated with the *Validation/Periodic Review of the BSc (Hons) (Hons) title of award, University of***

.....

**Visitors**      Title-1<sup>st</sup> name -surname  
                     Title-1<sup>st</sup> name -surname  
                     Title-1<sup>st</sup> name -surname

## 1. Acknowledgements

The visitors wish to acknowledge the hospitality extended to them by the staff of the *placement name*. The visitors wish to thank *name of individual, University Dept name* for making the arrangements as well as escorting the visitors to the site. They also wish to thank everyone involved for giving up their time to speak freely to the visitors.

## 2. Rationale and Background to the Visit

Indicate whether it was part of validation or periodic review or additional clinical placement introduced to accommodate additional student numbers. Indicate if the decision to visit was taken following review of documentation.

## 3. Visit to the *Name of Placement*

Brief details of the placement to include details of indicate catchment served and equipment and development of service provision.

### 3.1 Meeting with Students

Brief description of meeting with students and any issues raised/discussed. Individual students should not be named.

### 3.2 Meeting with Clinical Staff

Brief details of meeting with any staff responsible for clinical education/assessment/mentoring of students.

### 3.3 Meeting with Services Manager

Brief details of discussions and overview of management of students' education within the wider context of the management of the department and the needs of other learners. Overview of staff development and training.

### 3.4 Tour of the Department and Facilities

Details of the equipment and range of experience gained by students.

### 3.5 Student Facilities

Details of facilities for student to include library and computer/internet/email access.

## 4. Conclusions and Recommendations to the Joint Validation Committee

The visitors consider the *name of practice placement* to *(have a culture of supporting learners and good links and communication) appropriate comment* with the *University of xxxxxxxx*.

Based on the visits, validation event and documentation the following recommendation(s) is/ are made to the JVC:

- i) The *name of practice placement* should be approved for student placements from the *University of xxxxxx* for *x* students per cohort (maximum of *xx* at any time).

### ADVICE ON THE DEVELOPMENT OF PART-TIME BSc (Hons) (Hons) PROGRAMMES (INCLUDING IN-SERVICE)

#### 1. Introduction

- 1.1 The JVC supports the development of flexible routes to qualification, including the provision of part-time undergraduate programmes, and is concerned to ensure that the currency of the part-time award is consistent with that of the full-time programme. The JVC will expect to be contacted by HEIs at an early stage in the development of such a programme to discuss the proposal.

#### 2 Approval

- 2.1 A part-time programme differs in length from the BSc (Hons) (Hons) full-time programme originally approved by Privy Council or HPC. Therefore, a recommendation for approval of the part-time programme must be referred to the HPC.

#### 3. Outcomes of the Programme

- 3.1 The outcomes achieved by students on completion of the part-time programme must be equivalent to those achieved by students completing the full time programme.

#### 4 Appropriate Part-time Provision

- 4.1 The part-time programme should provide an equivalent educational and developmental experience for students registered on it, to those following the full-time route.
- 4.2 Prior to commencement on a part-time programme, students should be informed of the programme provision available to them for the entire duration of the programme. This may mean, for example, developing and adhering to a block type and/or day release type timetable that shows the complete timetable for all students, whether full or part-time.
- 4.3 Within the part-time programme, provision must be made to ensure that those completing it successfully are properly competent at the point of qualification, and that their acquired knowledge, skills and behaviours are contemporary with professional practice requirements of the time. This will require attention to the anticipated period of approval of the programme, the maximum period in which a student can achieve an award that confers eligibility for registration; and, where step off and step on or interruptions are permitted, the maximum length "step off" or interruption.
- 4.4 At this stage the JVC does not intend to be prescriptive on these matters, but expects HEIs to have considered them carefully and developed regulations governing their part-time awards that address these effectively. These should demonstrate a balance between facilitating flexibility and ensuring that graduates are fit to enter the radiography profession and HPC register.

#### 5. Length of Programme

It is expected that students would normally complete the part-time programme within 5 years of first registration. For students registering towards the beginning of a re-validation cycle, it is possible to begin and complete within the period for which the programme is approved. However, for those students registering later in the programme's approval period, this is not possible. In these circumstances, it is expected that arrangements will be made for registered students to transfer effectively to the new revalidated programme.

#### 6. In- Service

There must be recognition of the integrity of the NHS student employee as a student and clearly identified time allocated for the clinical education component of the BSc (Hons) (Hons) programme.



### GUIDANCE FOR THE DEVELOPMENT AND APPROVAL OF M LEVEL PROGRAMMES WITH ELIGIBILITY FOR REGISTRATION

#### 1. Introduction

- 1.1.1 In response to the NHS Modernising Education agenda and other initiatives, HEIs offering radiography education are increasingly considering the provision of routes to qualification other than the traditional, three year, full time undergraduate route.
- 1.1.2 It may be of considerable benefit to develop practice and practitioners through masters' level programmes that have been designed to confer eligibility for registration and professional accreditation. This approach could facilitate a more appropriate route into radiography for graduates from other disciplines as well as widening the entry gate into the profession and adding to the potential work force.
- 1.1.3 In adopting such an approach the JVC recognises that there is not a single curriculum model that should be followed but a range of acceptable models that can be considered.

#### 2. JVC Involvement

- 2.1 In order to expedite progress the JVC expects to be contacted by HEIs at an early stage in the development of a new course to discuss initial proposals. It welcomes innovative proposals from HEIs and would seek to work with them in bringing them to fruition.
- 2.2 JVC involvement should be similar to that for a process review and include meetings with clinical staff, workforce development confederations, HEI staff and, where possible, potential students.

#### 3. Appropriate Award

- 3.1 The minimum acceptable M level award intended to confer eligibility for registration is a postgraduate diploma. Furthermore, it is the expectation of the JVC that for all students completing a postgraduate diploma there would be an in-built opportunity to progress to a master's degree.
- 3.2 The minimum length of programme is likely to be greater than that for a typical full-time postgraduate diploma or master's degree because of the need for students to obtain clinical competency. This is unlikely to be achieved in less than 18 months although this will depend upon the structure of the programme.

#### 4. Entry Requirements

- 4.1 It expected that applicants to the programme would be in possession of a first degree. This should be a degree with a health sciences related background or, alternatively, the HEI should provide a pre-entry development programme to enable students to enter the programme with a common knowledge base.

#### 5. Programme Content

- 5.1 It is expected that the programme will be new and independent from an undergraduate programme. It will have its own philosophy and rationale.
- 5.2 M level learning outcomes must be transparent and consistent with the entrants' intellectual abilities.
- 5.3 The threshold clinical competencies should be at least those required for first post independent practice and be based on confident and competent case management rather than solely on performance of radiographic technique. Account should be taken of QAA subject benchmarks.

5.4 Notwithstanding that the threshold clinical competencies must be reached, the learning, teaching and assessment methods and outcomes, including those relating to clinical learning, should be vested at Masters level.

5.5 The programme must recognise the autonomy of the learners and their role in determining their individual learning needs. There needs to be clear evidence within the programme of research methodology and reflective practice.

## **6. Learning Strategy in Practice Placement Departments**

6.1 It is expected that students entering with a first degree would differ from undergraduate students in that they would have a well-developed knowledge base, greater powers of critical enquiry which they are able to apply in the clinical environment, and be relatively assertive.

6.2 While it is essential that clinical competence is acquired and evidenced explicitly through relevant assessment methods, learning in the clinical environment is likely to differ in nature from that undertaken by undergraduate pre-registration students in that it may, for example, be driven by individually negotiated clinical learning contracts or other more advanced or independent learning strategies. These should enable students to evidence and achieve their clinical learning outcomes at different rates according to how well, or otherwise, they progress.

6.3 Traditional patterns of placement may not be appropriate to support independent learning skills.

## **7. Staffing to Support the Programme**

7.1 The HEI is required to ensure that all programmes leading to eligibility for registration in radiography including those at masters' level are supported by a staff student ratio of 1:12. Additionally, the expectation is that these staff must have the ability to deliver the programme at the required level.

7.2 There should be relevant staff development for delivery of the Master's level programme both in the academic and clinical environment.

## **8. JVC Advice**

8.1 The JVC Secretariat may be contacted for advice or clarification on issues raised in this guidance.

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**LIST OF ABBREVIATIONS**

The following list of abbreviations, or acronyms, have been used in this document:

CAT	Credit Accumulation and Transfer
CoR	College of Radiographers
CPD	Continuing Professional Development
CPSM	The Council for Professions Supplementary to Medicine – Statutory body for the allied health professions until 2002
DH/DoH	Department of Health
ETC	Education and Training Committee (of HPC)
HEI	Higher Education Institution
HPC	Health Professions Council
JVC	Joint Validation Committee
NVQ	National Vocational Qualification
QAA	Quality Assurance Agency for Higher Education
SoR	Society of Radiographers
SSR	Staff: student ratio
SVQ	Scottish Vocational Qualification

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