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# **BSc Programme Re-accreditation Self-reflection Template**

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| **Executive Summary** |
| Outline key information on how any changes introduced at the last accreditation / re-accreditation event have been received, how the programme has been running in its current format, plus any key changes being requested at this re-accreditation event: |
| List supplementary documentation submitted in support of the executive summary (if required): |

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| **Programme Management and Resources**  |
| **Programme Management** |
| Describe the current provision of the programme, demonstrating that the programme is sustainable, fit for purpose and effectively managed. Information on all programme titles offered that have IBMS accreditation, their distinctive features and entry criteria should be discussed: |
| List supplementary documentation submitted in support of the programme management below: |
| **Programme Resources** |
| Describe the staff resource and physical resources that support the delivery of the programme(s). Staff development opportunities for academic staff and visiting lecturers must be demonstrated: |
| List supplementary documentation submitted in support of the programme resources below: |
| **Module Content and Organisation**  |
| Provide a brief overview of how the basic knowledge, clinical laboratory specialisms and other required content for an IBMS accredited programme as described in the QAA Subject Benchmark Statement for Biomedical Science and Biomedical Sciences (2023) are delivered. Integrated module content must be demonstrated, plus practical and transferable skill development. There must be a clear description of how the Research Project (Capstone Experience) is organised, allocated and supervised (for both internally and externally delivered projects): |
| List supplementary documentation submitted in support of the module content and organisation below: |
| **Assessment**  |
| **Assessment Design and Delivery** |
| Provide an overview of the assessment strategy that includes details of authentic and varied assessment types.  |
| List supplementary documentation submitted in support of the assessment design, organisation and delivery for the programme: |
| **Assessments and Progression** |
| Provide evidence that formal, closed book assessments are required across the duration of the programme and that the component assessments in all clinical specialism modules require a pass mark. The institutional regulations on progression must be clearly articulated (including the number of attempts).  |
| List supplementary documentation submitted in support of requirement for closed book assessments, the requirement to pass all component assessments in the programme and institutional progression criteria: |
| **Research Project** |
| Provide evidence that the research project module is double weighted compared to other final year modules and cannot be compensated or condoned. |
| List supplementary documentation submitted with respect to assessment of the research project module: |
| **Programme Evaluation, Curriculum Development and Quality Assurance** |
| **Student Voice** |
| Highlight the key themes identified from student voice data for the duration of the previous accreditation period. This must include evaluation of module feedback, staff student liaison committee issues raised and National Student Survey (NSS) data, noting the key themes and what has been done to address any issues: |
| List supplementary documentation submitted in support of the Student Voice analysis: |
| **Employer Liaison Group** |
| Highlight the key themes from Employer Liaison Group meetings for the duration of the previous accreditation period. This must include evaluation of employer feedback on the programme content, delivery of clinical specialism modules, provision of placements (as appropriate), any issues raised, actions taken and good practice to share: |
| List supplementary documentation submitted in support of the Employer Liaison reflection: |
| **Programme Annual Monitoring Reports** |
| Highlight the key themes identified in institutional annual monitoring reports (or equivalent) for the duration of the previous accreditation period. This must include evaluation of the programme content, delivery, provision of placements (as appropriate), academic achievement of students, cohort sizes, progression, retention and attainment data, plus any issues raised and good practice to share. Key themes identified should have action plans to address any issues: |
| List supplementary documentation submitted in support of the annual monitoring of the programme: |
| **External Examiner Reports and Responses** |
| Highlight the key themes identified across all external examiner reports for the duration of the previous accreditation period. This should include evaluation of the module content, delivery of the programme, academic achievement of students, academic standards and quality assurance processes, plus any issues raised and good practice to share. Key themes identified must have action plans to address any issues: |
| List supplementary documentation submitted in support of the external examiner analysis of the programme: |
| **Placements** |
| **All year-long placements** |
| Evidence how a thorough and effective system for approving all placements is maintained, evidence the partnership agreements between the university and the placement provider, or alternative host institution, including monitoring of students, feedback arrangements and lines of responsibility. Information must be provided to both students and placement providers to clearly explain the following: timings and the duration of any placement experience; intended learning outcomes to be achieved and means of assessment; expectations of professional behaviour; communication and lines of responsibility/accountability; support and monitoring during placement; arrangements for feedback on the placement experience. |
| List supplementary documentation submitted in support of the non-clinical placement (ie study abroad or industrial placements) organisation and oversight: |
| **Clinical Placements**  |
| Evidence how the selection process for placement assesses the suitability of applicants (e.g. criminal conviction check (basic DBS check), engagement and attitude to work) and ensure that placement applicants are aware of and comply with any health requirements (e.g., appropriate vaccinations, occupational health arrangements etc.). The programme team must be able to evidence that placement providers have current IBMS laboratory training approval for the laboratory offering the Registration Training Portfolio, can support the student to complete all, or most, of the IBMS Registration Training Portfolio, that the person responsible for training students is a HCPC registered biomedical scientist and training plans are in place: |
| List supplementary documentation submitted in support of the clinical placement organisation and oversight: |
| **Integrated Clinical Placements**  |
| Evidence how verification of the Registration Training Portfolio is organised, appropriate Training for Trainers events are delivered, ensuring trainers and verifiers receive relevant information and remain up-to-date and that the person responsible for training in each clinical placement laboratory has appropriate experience or qualifications in training delivery. How the learning outcomes and the standards of proficiency, as described in the Registration Training Portfolio, are met must also be described: |
| List supplementary documentation submitted in support of the integrated clinical placement organisation and oversight for the programme: |