



**IBMS CLINICAL SCIENTIST CERTIFICATE OF
ATTAINMENT (EXPERIENTIAL ROUTE)**

GUIDANCE TO CANDIDATES

Version 4

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1. Introduction

- 1.1. The IBMS Clinical Scientist Certificate of Attainment (Experiential Route) is a programme approved by the Health and Care Professions Council (HCPC), the statutory regulator for Clinical Scientists.
- 1.2. It is offered by the Institute of Biomedical Science (IBMS) as a route by which those who are working in the UK in healthcare science who have an MSc degree or an equivalent-level qualification and who can demonstrate through a combination of their education, training and professional experience that they meet the minimum level of practice required for registration as a Clinical Scientist with the HCPC.

The **Institute of Biomedical Science** is the professional body for those working in biomedical science in the United Kingdom and its aims are to promote and develop individuals working in research and academic professions in biomedical science.

The IBMS represents over 20,000 members employed mainly in the National Health Service, private laboratories, armed services, veterinary laboratories, the NHSBT, Public Health England, Universities, Medical Research Council and the Department for Environment, Commercial fields, Food and Rural Affairs. Most members live and work in the United Kingdom and Ireland. Further information can be found here: www.ibms.org

The **Health and Care Professions Council (HCPC)** is a regulatory body for 16 professions, including biomedical scientists and clinical scientists. One of its key functions is to maintain and publish a register of health and care professionals who meet its standards. Further information can also be found here (www.hcpc-uk.org).

- 1.3. The award is currently offered in three specialist areas of practice:
 - Clinical Biochemistry
 - Clinical Immunology
 - Clinical Microbiology
 - Haematology
- 1.4. This document contains guidance on the process for making an application for the award of the IBMS Clinical Scientist Certificate of Attainment (Experiential Route) in one of the four specialist areas (modality) mentioned above. **Each modality has a curriculum handbook with discipline-specific guidance/admittance criteria.** It is very important to understand the importance of the admittance criteria and note that this route is based on prior learning and training that has been completed BEFORE the application is made, and that the candidate must be able to evidence M-level practice against the standards of proficiency for clinical scientists.
- 1.5. This document should also be read in conjunction with the IBMS Clinical Scientist Certificate of Attainment (Experiential Route) Programme Handbook and the Curriculum Handbook for the relevant specialty, which give further details on the entry requirements and rules (section 4), knowledge/skills required for the award and level of evidence that is required (Sections 5–8).
- 1.6. The fee for the entire equivalence assessment process can be found on the current application form.

- 1.7. The full fee is non-refundable once the candidate has been admitted to the programme. Additional charges also apply for reassessment of the portfolio (£100) or a viva voce resit (£150).
- 1.8. Applications for the IBMS Clinical Scientist Certificate of Attainment (Experiential Route) are considered in stages: application and applicant screening; preparing the portfolio of evidence; portfolio assessment and candidate *viva*.
- 1.9. Application and applicant screening: the applicant's qualifications and experience are reviewed against the entry criteria. The applicant should ensure that they have already received the appropriate training and assessment for their current role which must enable them to demonstrate they have the relevant practice in a specialty that equates to the HCPC standards of proficiency for clinical scientists (see section 2.2) to proceed to portfolio submission. The applicant will be expected to show how they have developed their practice prior to application and had resources sufficient, appropriate and available to support their development and scope of practice to the threshold level of clinical scientist registration.
- 1.10. The applicant must have access to a named mentor who is a registered clinical scientist and able to guide them on the appropriateness of their selected evidence to the HCPC standards of proficiency. Following successful screening, the applicant will be admitted to the programme and issued with electronic versions of the IBMS Clinical Scientist Certificate of Attainment Experiential Portfolio and evidence-mapping document.
- 1.11. Portfolio submission: once the applicant has been issued with an acceptance letter they have 12 months to submit their portfolio of evidence and mapping document to the IBMS Clinical Scientist Certificate of Attainment Experiential Portfolio, this can be submitted electronically. A revised deadline can be agreed by the IBMS Education Department if the candidate can demonstrate mitigating circumstances that have occurred after the letter of acceptance has been received. Mitigating circumstances must be communicated to the Education Department before the 12-month deadline.
- 1.12. Candidates and their mentors will be asked to complete a feedback report after three months in order to monitor progress and provide an opportunity for any problems to be highlighted and resolved in a timely manner.
- 1.13. Portfolio assessment and candidate interview: this will take place by prior arrangement with the candidate. The IBMS will appoint three assessors (a HCPC-registered clinical scientist and a HCPC-registered Biomedical Scientist with experience in the candidate's specialty and a lay representative) within six weeks of the candidate submitting the portfolio of evidence and mapping document. Subject to the outcome of the portfolio assessment a final *viva voce* interview will take place at a mutually agreed time and venue.
- 1.14. All prospective candidates must ensure that they have read and understood this document and other referenced documents before submitting their application.
- 1.15. Applicants are advised to contact the IBMS Education Department if they have a disability that might affect their application equivalence@ibms.org (see section 2.3).
- 1.16. Applicants are advised to contact the IBMS Education Department (equivalence@ibms.org) before submission if they have any questions related to the process.

2. Application and Candidate Screening

2.1. Before applying, potential candidates are strongly advised to study the Curriculum Handbook for their specialty and check that the training they have already received and their professional experience and scope of practice cover the range of standards of proficiency contained therein and at the level required of a newly registered clinical scientist.

2.2. The following documents will be required for **initial application** for admittance to the programme:

- Completed application form
- Description of current role¹ to confirm the applicant is working at M-level in their specialty and a summary of professional development to show the applicant has the ability to demonstrate that they can evidence the requirements of the IBMS Clinical Scientist Certificate of Attainment Experiential Portfolio. This should be a statement of no more than 2000 words that summarises the professional training and development they have already undertaken (including relevant periods of secondment), their current role and how this is relevant to the role of a clinical scientist² and the subject-specific curriculum. These should come together to indicate primary sources of evidence of knowledge and skills applied in practice. The statement should also confirm that the environment in which the applicant developed their practice prior to application had resources sufficient, appropriate and available for them to use to support their development and scope of practice to the threshold level of clinical scientist registration. The focus for determining relevant information in the statement should be the detailed knowledge and ability listed in section 5 of the Programme Handbook.
- Assessment fee (Please refer to current application form). A non-refundable administration fee of £50 will be required on submission of the candidate's application for review by the assessment panel. This will be deducted from the overall fee should the candidate be accepted onto the programme. The full fee is non-refundable once the candidate has been admitted to the programme. Additional charges also apply for reassessment of the portfolio (£100) or a viva voce resit (£150).
- Proof of ID (Copy of passport or government-issued photo ID [e.g. driving licence])
- Photocopy of the applicant's qualification certificate(s) and transcript(s)
- Photocopy of change of name (if relevant)
- UK NARIC³ comparability for any non-UK qualification(s)
- Valid Disclosure and Barring Services (DBS) check⁴
- Evidence of English language (IELTS level 7), if English not first language

¹Candidates will only be considered if they are currently working in healthcare science in the UK. Individuals seeking HCPC registration who are working outside the UK are advised to consult the HCPC directly. Information for this can be found at <http://www.hcpc-uk.org/apply/international/>.

²Clinical scientist is a protected title regulated by the Health and Care Professions Council which define this as: "A clinical scientist oversees specialist tests for diagnosing and managing disease. They advise doctors on tests and interpreting data, and carry out research to understand diseases".

³The National Academic Recognition Information Centre for the United Kingdom (UKNARIC) is used to ensure overseas qualifications are equivalent to those in the UK and therefore a photocopy of UKNARIC comparability for any non-UK qualification(s) must be included.

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⁴Candidates who have a conviction outside the UK will be expected to declare this.

Please note: All photocopied ID material and certificates must be signed by the candidate's manager as verification of the authenticity of the document(s).

- 2.3. If the applicant has a disability that might affect the assessment interview, it must be declared upon application, and the panel will be provided with a declaration of disability. The panel must then consider how to mitigate the effects on the interview and ensure fairness. Any disability that is not declared beforehand cannot be taken into account at interview.
- 2.4. Applicants must have access to a named mentor who is HCPC-registered as a clinical scientist and has read and understood the information available on the IBMS website related to the IBMS Clinical Scientist Certificate of Attainment (Experiential Route) award. The mentor will be expected to provide professional support and advice for the candidate's submission of evidence. Please note: applicants who do not have a mentor should contact the IBMS prior to application.
- 2.5. Senior members of the IBMS Education Team will check the application and submitted documentation to confirm the criteria for admittance to the programme have been met. In conjunction with a subject-specific clinical scientist assessor, they will also use the description of the current role and summary of professional development to assess whether these are appropriate to the potential candidate's ability to gather evidence to fulfil the requirements of the IBMS Clinical Scientist Certificate of Attainment Experiential Portfolio, based on the detailed knowledge and ability listed in section 5 of the Programme Handbook and the subject-specific curriculum. At this stage, further information may be requested if the application is not sufficiently explicit.
- 2.6. This application screening process will ensure that the validity of qualifications and periods of experience are appropriate to the potential candidate's ability to gather evidence to fulfil the requirements of the IBMS Clinical Scientist Certificate of Attainment Experiential Portfolio.
- 2.7. If the criteria for admittance have been met, candidates will be issued with electronic copies of the IBMS Clinical Scientist Certificate of Attainment Experiential Portfolio and Mapping Document and given 12 months from the date of issue to submit the required documentation. (Submission of the portfolio of evidence can occur at any time during this period.)
- 2.8. Following initial screening, applicants who are not accepted are provided with a report summarising the reasons for their rejection. Applicants will not be eligible to re-apply within 12 months and must be able to demonstrate that they have engaged in further professional development through systems that ensure periods of education and training are effective in meeting the standards of proficiency.
- 2.9. Once accepted onto the programme, candidates (if not already on an HCPC register) will be expected to comply with the HCPC standards of conduct, performance and ethics and be able to demonstrate their understanding of the implications of these standards to their practice.

3. Completion of the IBMS Certificate of Attainment Portfolio of Evidence and Portfolio Mapping Document

3.1. All assessments of experiential evidence are made against the IBMS Clinical Scientist Certificate of Attainment Experiential Portfolio and thereby the HCPC standards of proficiency for clinical scientists. The evidence must relate to one of three specialist areas of practice:

- Clinical Biochemistry
- Clinical Immunology
- Clinical Microbiology
- Haematology

3.2. The portfolio is the framework against which the candidate is required to provide evidence of pre-existing qualifications, professional training, experience and assessment of competence that has enabled them to practice in their current role.

3.3. The candidate and their mentor will be asked to complete a feedback report after three months in order to monitor progress and provide an opportunity for any problems to be highlighted and resolved before final submission of evidence. A designated email address (equivalence@ibms.org) will provide access to IBMS staff for advice during working hours. Additional guidance is available from the IBMS website information and guidance documents.

3.4. The candidate must use the IBMS Clinical Scientist Certificate of Attainment Portfolio of Evidence Mapping Document when presenting their portfolio of evidence. All evidence must be dated and signed by the candidate. The content and level of the curriculum detailed in the IBMS Clinical Scientist Certificate of Attainment Experiential Portfolio and Curriculum Handbook for each specialty should be used to guide the choice of evidence. There must be no gaps. One piece of evidence can be used in support of more than one standard.

3.5. The portfolio of evidence should contain the following:

- A contents list
- A covering statement of no more than 2000 words that summarises the professional training and development already undertaken by the candidate (including relevant periods of secondment), their current role and how this comes together to demonstrate how the standards of proficiency are met (i.e. a summary of the primary sources of evidence)
- Supporting evidence for each HCPC Clinical Scientist standard of proficiency in each section of the IBMS Clinical Scientist Certificate of Attainment Experiential Portfolio.
- Evidence that standards have been met should be presented in the order in which the portfolio is constructed. The supporting evidence must be clearly indexed and cross-referenced to the portfolio mapping document

3.6. Candidates are advised that the portfolio of evidence must include:

- Evidence of academic and vocational qualifications where relevant to the standards of proficiency for clinical scientists
- Evidence of prior structured training and competence assessment appropriate to their current scope of practice
- Evidence of experiential learning and CPD in their current practice

- Evidence of their scope of practice (e.g. witness testimonies, case studies, presentations, audits, clinical case work, research projects or collaborations) that demonstrates how they meet the HCPC standards of proficiency
 - Evidence of their understanding of the standards of conduct, performance and ethics and the implications and application of these standards to their practice
 - Evidence must demonstrate that they have been assessed in the specialty by appropriately qualified individuals (clinical scientist or medical practitioner)
- 3.7. The portfolio of evidence may contain a number of differing types of evidence from periods of relevant education and training or employment/experience but they must be relevant to the standards of proficiency and satisfy the assessment panel that the candidate has met the required threshold level to practice as a clinical scientist. The layout should be clear, and the content should be well chosen, explicit, concise and legible.
- 3.8. The assessment process of experiential evidence will take into account the requirement for competence assessment at this level to have been carried out by a registered clinical scientist or medical practitioner.
- 3.9. Tables 1, 2 and 3 set out some typical sources for evidence that need to be submitted against the three main curriculum categories.

Table 1. Examples of evidence for academic curricula.

Curriculum	Sources of Evidence	Examples of Evidence
Academic Subject Content (based on education, qualifications and experience)	Type of qualification, subject areas, dates qualified, curriculum Self-directed learning activities Expert briefing/individual tutoring sessions Employment history	Relevance against standards is summarised in a personal reflective statement Evidence-based examples of how a candidate has maintained theoretical knowledge and developed new knowledge CV, description of current job role, employer's reference

Table 2. Examples of evidence for professional conduct modules.

Module	Sources of Evidence
Personal Responsibility and Development	<ul style="list-style-type: none"> • Involvement in management, supervision and/or training of staff within the laboratory • Expert briefing/individual tutoring sessions • Self-directed learning activities, personal critical reflection, personal development plan, CPD activities • Evidence based (e.g. reflective statements) participation in local seminars and meetings, attendance at clinical audit meetings and clinical governance committees • Personal involvement in recognition and solution of problems with laboratory or clinical scenarios that demonstrate the opportunity for experience-based learning and enhancement of self-development
Equality and Diversity	<ul style="list-style-type: none"> • Local training and development courses • Personal reflective statement to demonstrate understanding and application in practice • Witness statements
Communication	<ul style="list-style-type: none"> • Presentations at scientific meetings, oral and written communications within and outside the department, through seminars, case presentations, posters, peer-reviewed publications in the specialty • Representative appointments, e.g. committee membership, advisory panel, specialist interest groups
Patient Records and Data Handling	<ul style="list-style-type: none"> • Personal statement to demonstrate understanding and use of IT pertinent to service provision and support of effective practice to the level required in the specialism • Training certificates • Witness statements
Professional Relationships	<ul style="list-style-type: none"> • Job description • Personal reflective statement (with examples) on how contributions to multi-disciplinary team meetings have been effective • Evidence based examples of responsibility taken for supervision, team leadership • Representative appointments, e.g. committee membership, advisory panel, specialist interest groups and evidence of professional contribution

Table 3. Examples of evidence for professional skills and standards modules.

Module	Source of Evidence
Application of Professional Knowledge	<ul style="list-style-type: none"> • Employer reference, job description • Evidence of training • Case studies • Research • Reporting of laboratory investigations, clinical interpretation/advice, clinical report authorization • Examples of clinic leadership • Participation in scientific meetings • Notes from clinical liaison meetings • Attendance at ward rounds, clinical audit and governance meetings • Witness testimonies
Health and Safety	<ul style="list-style-type: none"> • Evidence of initiating and evaluating health and safety audits • Writing/review of health and safety policies • Evidence based attendance (e.g. reflective statements) of participation in health and safety training seminars • Evidence of initiating and evaluating risk assessments • Critical appraisal of laboratory practices • Evidence based involvement in recognition and solution of problems with laboratory or clinical scenarios
Quality	<ul style="list-style-type: none"> • Evidence-based participation in national quality schemes • Evidence-based attendance (e.g. reflective statements) of participation in quality audits • Examples of initiating and evaluating quality assessments • Critical appraisal of laboratory practices • Examples of involvement in recognition and solution of problems with laboratory or clinical scenarios
Performing Standard Investigations	<ul style="list-style-type: none"> • Evidence based statements on work experiences • Participation of approved training programmes • Formal training and competence assessment records at local or national level • Practical training and assessment of junior staff • Employer statement on scope of practice
Research and Development	<ul style="list-style-type: none"> • Critical evaluation of literature to identify research question • Grant applications • Supervised or collaborative research project (abstract only required) • Examples of participation on research and development projects • Peer reviewed papers, posters/presentations • Evidenced based participation in local research meetings

- 3.10. The portfolio of evidence is the candidate's opportunity to demonstrate that, through the knowledge and skills required for their scope of practice in their specialty, they work at a level appropriate to the threshold standards required to practise as a clinical scientist. Statements made by the candidate of attendance at, or participation in, meetings or training are, on their own, insufficient. They must be supported by personal reflection and a concise description on how the experience helped in achieving a particular competence. Evidence of 'hands-on' experience is important and should be supported by witness testimonies from qualified, and where appropriate, professionally registered individuals.
- 3.11. The portfolio of evidence must demonstrate a thorough understanding of the subject matter. Evidence should be carefully selected and should NOT include a detailed day-to-day diary or logbook, the full text of any case studies, theses, projects or essays – summaries or extracts should be provided.
- 3.12. Evidence must be specific to the candidate and the demonstration of how they meet the standards of proficiency. The portfolio should NOT contain any original reference material, standard operating procedures, or other published documents.
- 3.13. Evidence provided must meet these criteria in order for the candidate to proceed to Part 2 of the assessment (the *viva voce*).
- 3.14. Each candidate is required to submit to the Education Department their completed IBMS Clinical Scientist Certificate of Attainment Experiential Portfolio Mapping Document and portfolio of evidence within 12 months of acceptance onto the programme, this can be submitted as an electronic version. Evidence must be clearly indexed and cross-referenced to the sections of the IBMS Clinical Scientist Certificate of Attainment Experiential Portfolio and HCPC standards of proficiency for clinical scientists, using the mapping document.
- 3.15. Candidates can apply for extensions to periods of evidence collection and portfolio completion by writing to the IBMS Education Department and formally setting out extenuating circumstances for the extension. Extenuating circumstances will be reviewed by IBMS senior education staff and an extension may be granted. Extenuating circumstances include matters that affect welfare and wellbeing of candidates once they have been admitted to the programme.

4. Assessment Process

- 4.1. The assessment process begins once the candidate submits their documentation, triggering the appointment of an assessment panel within six weeks.
- 4.2. Assessment of the evidence provided for the IBMS Clinical Scientist Certificate of Attainment (Experiential Route) will be carried out by peer review: an assessment panel comprising a clinical scientist who will act as the designated lead, a biomedical scientist (both of these specific to the specialty) and a lay representative.
- 4.3. The assessment panel will be appointed by the IBMS within 6 weeks of submission of the portfolio and mapping document.
- 4.4. There are two parts to the assessment.
- 4.5. **Part 1:** Each assessor will receive the candidate's IBMS Clinical Scientist Certificate of Attainment Experiential Portfolio mapping document, and a Part 1 assessment report form.
- 4.6. Assessors will be considering the documents presented in a portfolio of evidence in the context of the threshold standards for HCPC registration and practice as a clinical scientist in candidate's chosen specialty.
- 4.7. By reviewing the evidence and mapping template, the assessors will make a professional judgment based on the curriculum, learning outcomes and standards of proficiency on whether or not the candidate has the appropriate qualifications, experience and level of competence in their current practice appropriate to be eligible to apply for registration as a clinical scientist.
- 4.8. Each member of the assessment panel will determine, on a case-by-case basis, whether or not the evidence mapped by the candidate to the IBMS Clinical Scientist Certificate of Attainment Experiential Portfolio is at the level required to meet the HCPC standards of proficiency for clinical scientists. They will confirm this for each standard of proficiency. A final collated report will be agreed by the assessors indicating whether or not there is sufficient evidence to initially confirm the standards of proficiency have been met. This collated report will make a recommendation whether or not the candidate should proceed to Part 2, based on the following outcomes:
 - Outcome 1: Candidate has met all the requirements for mapping evidence against the IBMS Clinical Scientist Certificate of Attainment Experiential Portfolio and may proceed to Part 2.
 - Outcome 2: Candidate has partially met the requirements for mapping evidence against the IBMS Clinical Scientist Certificate of Attainment Experiential Portfolio and is required to submit further evidence to address specific standards of proficiency before they proceed to Part 2.

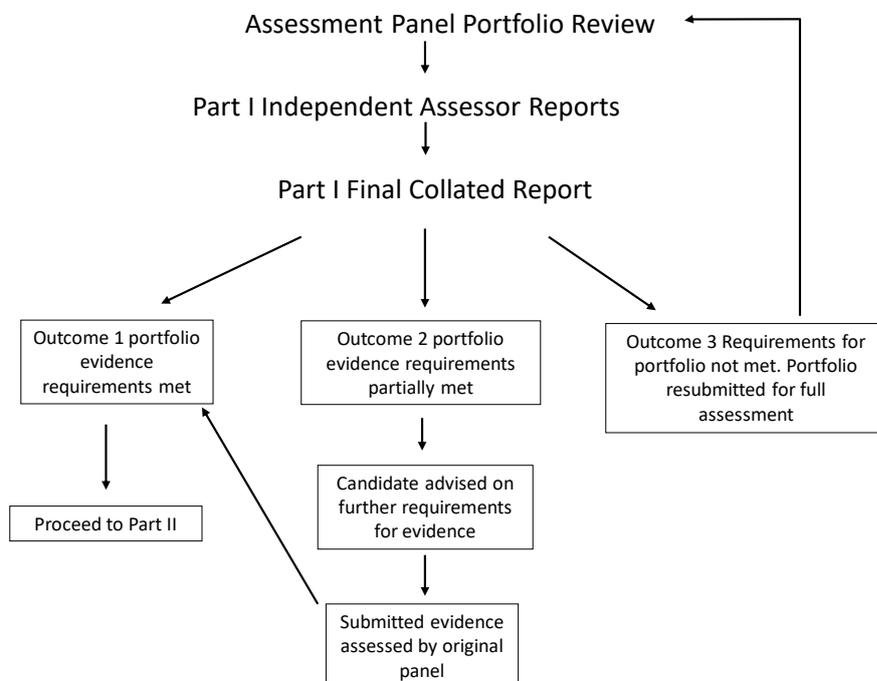
As candidates must have already completed their training before being accepted on the programme, they will be advised that evidence must relate to prior learning and development and must not be generated from additional training that has taken place since they were admitted to the programme. They will also be advised on the possible sources of evidence specific for the standard that would be suitable to demonstrate that the standard has been met. Candidates will be allowed a maximum of six months to submit further evidence. Only the standards requiring additional evidence will be reassessed. If the evidence submitted by the

candidate is insufficient then further advice will be provided and the candidate will have a further three months to provide suitable evidence. Following this stage, either outcome 1 or outcome 3 of the portfolio assessment will apply.

- Outcome 3: Candidate has failed to meet the requirements for mapping evidence against the IBMS Clinical Scientist Certificate of Attainment Experiential Portfolio and will need to resubmit their portfolio of evidence for full assessment. Candidates will be advised on the type of evidence that would be suitable to demonstrate that the standards have been met. As further training may be required, candidates will not be allowed to remain on the programme and will need to re-apply for admittance to the programme. They will not be able to re-apply before 12 months has elapsed. A charge of £100 will apply for re-assessment and admission.

4.9. If the evidence provided has been accepted and a recommendation made for the candidate to proceed to Part 2 of the assessment process, the candidate will be sent a copy of the final Part 1 report by the IBMS and invited to attend an interview (*viva voce*) with the assessment panel. If the evidence provided is not accepted as sufficient and the recommendation in the final Part 1 report is not to proceed to Part 2, the candidate will be advised in accordance with the recommendations of the report.

4.10. In the event of the assessors being unable to reach a consensus opinion on the assessment outcome, the candidate is still referred to Part 2 and areas of concern are specifically examined in addition to other areas of the portfolio. However, in this instance, a third assessor will automatically be appointed to the interview *viva* panel, with a requirement that they are a registered clinical scientist.



4.11. **Part 2:** A *viva voce* will be held in order for the panel to explore aspects of the candidate's education and training, and their understanding of the standards of proficiency based on the evidence submitted in the portfolio and questions related to the practice of their specialty,

thereby confirming their suitability for the award. Each assessment will normally last about 60 minutes.

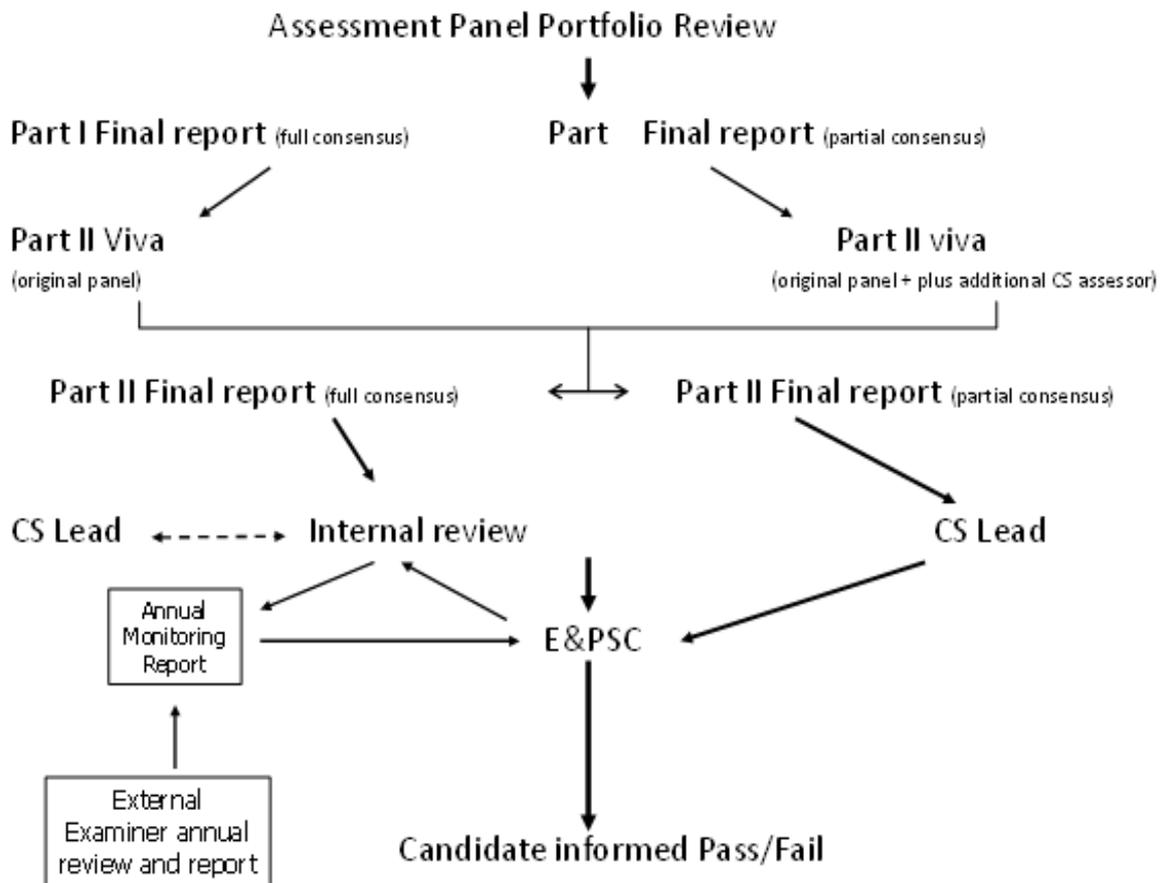
The assessors will together produce a final Part 2 outcome report and a recommended outcome of the assessment process for submission to the IBMS Education and Professional Standards Committee.

The assessors will be expected to make one of the following summative recommendations in their report:

- Outcome 1: Candidate has met all the requirements for the award of the IBMS Clinical Scientist Certificate of Attainment (Experiential Route).
- Outcome 2: Candidate has failed to meet the requirements for the award of the IBMS Clinical Scientist Certificate of Attainment (Experiential Route).

- 4.12. In the event of the assessors being unable to reach a consensus opinion on the assessment outcome it is referred to the IBMS Education and Professional Standards Committee for the appointment of an independent assessor. This individual would be required to review all submitted candidate material and assessor reports and to discuss the issues with the panel to enable a final recommendation to be reached.
- 4.13. Following consideration of all reports by the IBMS Education and Professional Standards Committee, candidates will be notified in writing of the outcome of their assessment and invited to complete a feedback form to enhance process monitoring.
- 4.14. If all the necessary outcomes of the programme have been met, the letter to the candidate will include the award of an IBMS Clinical Scientist Certificate of Attainment (Experiential Route) and confirmation that their name has been forwarded to the HCPC and they are eligible to apply for admittance to the register as a clinical scientist.
- 4.15. If the necessary outcomes of the programme have not been met, the candidate will be advised in the letter whether or not a period of education/training is required in order to meet a shortfall against the standards. Candidates are strongly advised to familiarise themselves with the table of assessment outcome indicators in paragraph 4.21, a candidate may be advised that further training is required which will require them to re-apply for entry to the programme.
- 4.16. Candidates who are unsuccessful after Stage 2 will be allowed one opportunity to resit the *viva voce*. This will incur a charge of £150.
- 4.17. Unsuccessful candidates will have the opportunity to appeal on procedural matters related to the assessment process. Appeals must be made within 28 days of the candidate being notified of their assessment outcome. Appeals must be made in writing to the IBMS Executive Head of Education and clearly state the reasons for the appeal, with supporting evidence where appropriate. Appeals will be considered by an appeals panel of the external examiner and two HCPC-registered members of the IBMS Council who are not associated with any aspect of the application.
- 4.18. Candidates should note that a successful outcome of the assessment process leading to eligibility to apply for registration as a clinical scientist does not provide any further guarantees regarding terms and conditions of employment.

4.19. A summary of the assessment process is detailed in the flowchart below.



4.20. Table of assessment outcome indicators

Assessment Outcome Indicators		
Assessment Outcome Part 1	Action	Reason
Portfolio is rejected	Candidate advised that further training is required before re-application	Many of the standards lack appropriate evidence. There may be omissions or lack of depth in the evidence that indicate candidate lacks experience in the scope of practice required to meet the standards of proficiency for a clinical scientist
Portfolio partially accepted	Candidate asked to address shortfall in evidence against specific HCPC standards of proficiency and resubmit evidence within six months	Evidence demonstrates the majority of standards of proficiency (<80%) have been met but evidence for some may be limited in depth and extent
Portfolio accepted	Action proceeds to Part of the assessment process.	Evidence is sufficient to demonstrate HCPC standards of proficiency have been met or can be met based on further exploration in the <i>viva voce</i>
Assessment Outcome Part 2	Action	Reason
Candidate has met all of the requirements for the award of the IBMS Clinical Scientist Certificate of Attainment (Experiential Route)	Candidate recommended for award of IBMS Certificate of Attainment	Candidate displays a sound understanding of the central issues. There are no significant deficiencies in evidence of knowledge and ability relevant to the subject specific areas of the specialty
Candidate has failed to meet the requirements for the award of the IBMS Clinical Scientist Certificate of Attainment (Experiential Route)	Candidate not recommended for award of IBMS Certificate of Attainment Candidate must re-submit their application	Candidate attempted to address the questions but answers contain some significant factual or conceptual errors. There may be major omissions related to knowledge or ability relevant to the subject-specific areas of the specialty indicating insufficient understanding to merit a pass

5. Additional Resources and Reference Documents Available on the Institute of Biomedical Science Website (www.ibms.org)

The IBMS is committed to supporting the welfare and wellbeing of candidates (and service users) once they have been admitted to the programme and to ensuring candidates are supported to enable them to raise concerns about themselves, or the safety and wellbeing of service users. This includes support to recognise where there may be a risk and ensuring action is taken in response to concerns that have been raised. The following resources are available from the IBMS and may be used in addition to the usual employment policies.

5.1. Provided directly by the IBMS personnel:

- IBMS education executive team: and via designated email address (equivalence @ibms.org)
- IBMS education administrative staff (Telephone contact 020 7713 0214 and via designated email address equivalence@ibms.org)
- IBMS Council (some of whom are members of the Education and Professional Standards Committee - contact details see website or contact email above)
- IBMS Specialist Advisory Panels relevant to the modalities in this programme are Clinical Biochemistry, Haematology, Immunology, Microbiology and Virology.

The IBMS senior education team is experienced in offering advice or counselling on all aspects related to completion of evidence for the HCPC approved routes to registration offered by the IBMS.

All details of extenuating circumstances (including periods of sickness) submitted by a candidate for extension to periods of evidence collation and portfolio completion will be dealt with in confidence. Candidates and mentors should also note that advice on further training in order to produce evidence for the Experiential Portfolio will only be provided **prior to the application**. As this is an experiential route, all training must be completed before the application, as evidence must be based on retrospective learning and practice only. Advice on further training **will not be provided** once the candidate has been admitted to the programme.

5.2. Provided by other IBMS resources:

- IBMS CPD scheme- a member benefit. The IBMS CPD scheme encourages members to maintain, improve and extend their knowledge, skills and practice for the purpose of maintaining Continuing Professional Development (CPD)
- Open access to the IBMS website (www.ibms.org), which includes the following specific programme information
- Programme information
 - Programme Specification for IBMS Clinical Scientist Certificate of Attainment (Experiential Route)
 - Programme Handbook for IBMS Clinical Scientist Certificate of Attainment (Experiential Route)
 - Clinical Biochemistry Curriculum Handbook for IBMS Clinical Scientist Certificate of Attainment (Experiential Route)
 - Clinical Immunology Curriculum Handbook for IBMS Clinical Scientist Certificate of Attainment (Experiential Route)
 - Haematology Curriculum Handbook for IBMS Clinical Scientist Certificate of Attainment (Experiential Route)

- Specific to the Candidate
 - IBMS Clinical Scientist Certificate of Attainment (Experiential Route) Guidance for Candidates
 - Application Form
 - Candidate Monitoring Feedback Form for IBMS Clinical Scientist Certificate of Attainment (Experiential Route)
 - IBMS Clinical Scientist Certificate of Attainment (Experiential Route) Candidate Final Feedback Form
 - IBMS Clinical Scientist Certificate of Attainment (Experiential Portfolio)
 - IBMS Clinical Scientist Certificate of Attainment Portfolio of Evidence Mapping Document

- Specific to the Mentor
 - Guidance on the Role of the Mentor
 - IBMS Clinical Scientist Certificate of Attainment (Experiential Route) Mentor Monitoring Feedback Form
 - IBMS Clinical Scientist Certificate of Attainment (Experiential Route) Mentor Final Feedback Form
 - A designated forum on the IBMS website for candidates and mentors to exchange ideas and experiences

5.3. Provided by external resources:

- Applicant's mentor

5.4. Equality and Diversity Policy

The IBMS operates an equality and diversity policy using the *Equality and Diversity Monitoring Form Procedure IBMS QM801 01* and *Equality and Diversity Policy Form IBMS QM801 02*. Forms are available at <https://www.ibms.org/resources/documents/ibms-equality-and-diversity-monitoring-form/>

In relation to this programme, the purpose of the policy is to provide equality and fairness for all in our dealings with candidates seeking assessment of their experiential learning. All applicants for the IBMS Clinical Scientist Certificate of Attainment (Experiential Route) will be treated fairly and with respect. All candidates will be assessed against the evidence provided to show they meet the HCPC standards of proficiency for clinical scientists. This assessment will be based on published curricula. Candidates will be asked to complete an optional equality and diversity monitoring form which will be separated from the other documents prior to assessment and review. This is received by the Education and Professional Standards Committee as part of the annual monitoring report and is referred to the Membership and Marketing Committee for inclusion in the IBMS's wider Equality and Diversity work stream in accordance with the Science Council Diversity and Inclusion Framework.

5.5. Complaints Handling System

The IBMS operates a complaints handling procedure which can be found at the following link <https://www.ibms.org/contact-us/customer-service/>

5.6. <https://www.ibms.org/go/registration/become-hcpc-registered>

Details of all the IBMS routes and processes supporting individuals seeking HCPC registration.

- 5.7. **IBMS Code of Conduct:** The Code consists of principles that IBMS members are expected to observe in the interests of patient care and in order to promote confidence in the profession of biomedical science.

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