

1a. Informal Interview with Candidate (15 – 20 minutes)

Based on requirements of meeting the HCPC SETs. STANDARD MET:	Y	N
Describe your formal trust and departmental induction process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
How were you made aware of the location of the policies on equal opportunities and anti-discrimination?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Describe what you should do if you feel that you may have been discriminated against or if you have concerns about the safety and well-being of service users.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
How were you made aware of the grievance procedure and how to initiate it?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do you feel you have followed a structured training programme?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Was your training supportive to satisfy all of the above?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Were there any difficulties in delivering your training?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Were there any other trainees?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Was all the training done on one site?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Was there any rotation or collaboration with other departments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Can you give examples of being able to take part in inter-professional learning? (learning with and from other professionals)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

1b. Specific requirements to confirm standards for IBMS Approval for Pre-registration Training are being met.

Based on requirements of meeting the HCPC SETs. STANDARD MET:	Y	N
Was a copy of the training programme made available?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does each trainee have a nominated HCPC registered training officer/mentor?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do they have access to current textbooks and journals?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do they have access to a quiet area for study?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does the Department have a training notice board? (wall or electronic)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does the Department have a Health & Safety notice board? (wall or electronic)	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Did the candidate or training officer wish to make any further comments about the training process?

Some elements of the usual training program could not be carried out due to covid restrictions during the training period, such as visits to other departments and wards.

2. Verification of the Registration Portfolio (maximum length – 90 minutes)

Please include your comments below on the candidate's disposition, only if you feel it may have affected the verification process.

SECTION 1 – PROFESSIONAL CONDUCT		
SECTION 1 – Module 1: Personal Responsibility and Development		
HPCP STANDARDS OF PROFICIENCY COVERED	STANDARDS MET	PLEASE INDICATE WHICH (IF ANY) STANDARDS HAVE NOT BEEN MET
Knowledge standards SoP numbers: 1.1, 1.2, 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7, 3.1, 3.2, 3.3, 4.4, 4.6, 11.1	<input checked="" type="checkbox"/>	
Competence standards SoP numbers: 1, 2, 2.4, 2.7, 2.8, 3, 4, 4.1, 4.2, 4.3, 4.4, 4.5, 11, 14.1	<input checked="" type="checkbox"/>	
COMMENTS		
<p>Please indicate the range of evidence provided, highlighting any strong or weak areas.</p> <p>E1 – A piece of work describing sample turnaround times and prioritisation in the laboratory; examples of urgent tests were given, plus clinical areas that take priority. Good evidence of feedback and marking from the trainer.</p> <p>E2 – A CPD exercise on SARS-CoV-2; some set questions answered by the candidate covering background of the virus, and details of the immune response, plus an explanation of test sensitivity and specificity. There were photos of a scientist (not the candidate) performing lateral flow tests, which were annotated by the candidate to point out elements of practise, and an explanation of the interpretation of test outcomes.</p> <p>E3 – A piece of work explaining accreditation and regulatory bodies; featured a description of UKAS and ISO 15189 and the benefits of accreditation, a description of the function/purpose of EQA schemes, MHRA, IBMS, HCPC and NHSBT. Additional questions were added by the trainer to encourage some extra information and explanation from the candidate, which was great to see.</p>		

SECTION 1 – Module 2: Equality and Diversity		
HCPC STANDARDS OF PROFICIENCY COVERED	STANDARDS MET	PLEASE INDICATE WHICH (IF ANY) STANDARDS HAVE NOT BEEN MET
Knowledge standards SoP numbers: 5, 5.1	<input checked="" type="checkbox"/>	
Competence standards SoP numbers: 6	<input checked="" type="checkbox"/>	
COMMENTS		
<p>Please indicate the range of evidence provided, highlighting any strong or weak areas.</p> <p>E1 – A printout of a screenshot to show that XXXXXXX has completed the Trust equality & diversity training and passed. This is ok, but there was nothing on the screen to indicate it was XXXXXX's record logged into (the username displayed in the top right corner is not the users name), and it would be great if this was accompanied by a reflection from the candidate to say what was covered in the training and/or how they will use it, or a copy of the quiz questions (if a quiz was included at the end of the training) to show what questions were asked and what the candidate got right.</p> <p>E2 – Q&A on equality and diversity and human rights; included definitions of terminology and mentions key policies and legislation with respect to E&D in healthcare. Examples of actions to challenge prejudice and discrimination were given.</p> <p>E3 – A statement from the candidate 'What is meant by equal opportunities' – expands a little on the legislation mentioned in E2, talks about measures that can be taken to reduce inequalities of access to services.</p>		

SECTION 1 – Module 3: Communication		
HCPC STANDARDS OF PROFICIENCY COVERED	STANDARDS MET	PLEASE INDICATE WHICH (IF ANY) STANDARDS HAVE NOT BEEN MET
Knowledge standards SoP numbers: 8.3, 8.6, 8.7, 8.8, 8.9	<input checked="" type="checkbox"/>	
Competence standards SoP numbers: 8, 8.1, 8.2, 8.4, 8.5, 14.34	<input checked="" type="checkbox"/>	
COMMENTS		
<p>Please indicate the range of evidence provided, highlighting any strong or weak areas.</p> <p>E1 – A witness statement on XXXXXX's knowledge of SOPs and adherence to procedures for dealing with enquiries.</p> <p>E2 – A log of communications XXXXXXX has had with service users, over time during her training, with a summary of what the communications were about and what she had to do to respond. A nice collection of 'real-life' examples with endorsement from the trainer at the end.</p> <p>E3 – Blood sciences handover sheets, used for communication between staff members on different shifts – a blank copy annotated by the candidate to show what kinds of things must be recorded and communicated in each section of the form. Then an example of a completed form from the lab, filled in by the candidate – a very nice piece of evidence!</p>		

SECTION 1 – Module 4: Patient Records and Data Handling		
HCPC STANDARDS OF PROFICIENCY COVERED	STANDARDS MET	PLEASE INDICATE WHICH (IF ANY) STANDARDS HAVE NOT BEEN MET
Knowledge standard SoP numbers: 7, 7.1, 7.2, 7.3, 10.2, 10.3, 10.5, 10.6	<input checked="" type="checkbox"/>	
Competence standards SoP numbers: 7, 10, 10.1, 10.3, 10.4	<input checked="" type="checkbox"/>	
COMMENTS		
<p>Please indicate the range of evidence provided, highlighting any strong or weak areas.</p> <p>E1 – Q&A on Caldicott principles. A good set of questions, well broken down and answered, covering the background to the Caldicott report and what it means for healthcare organisations.</p> <p>E2 – A competence assessment form the laboratory on document control, including questions and answers completed by the candidate and showing marking and feedback from the trainer.</p> <p>E3 – An annotated request form showing all the information that must be included with a request for tests when received by the lab.</p>		

SECTION 1 – Module 5: Professional Relationships		
HCPC STANDARDS OF PROFICIENCY COVERED	STANDARDS MET	PLEASE INDICATE WHICH (IF ANY) STANDARDS HAVE NOT BEEN MET
Knowledge standards SoP numbers: 9.2, 9.3, 9.5, 13.3, 13.4, 13.5	<input checked="" type="checkbox"/>	
Competence standards SoP numbers: 9, 9.1, 9.4, 12.2	<input checked="" type="checkbox"/>	
COMMENTS		
<p>Please indicate the range of evidence provided, highlighting any strong or weak areas.</p> <p>E2 – An overview of the organisational structure of Pathlinks, with explanation of staff member hierarchy and roles. The candidate also then explain the context of her role within this structure.</p> <p>E3 – A reflective statement from XXXXXX on attending haemophilia clinic where she got to interact with a patient and their family member, who described their personal experiences of managing their condition and their interactions with the healthcare pathway. The statement then has a reflection from XXXXXX on how meeting the patient and their carer was of benefit to her in her professional development and how it will affect her future practise.</p> <p>A really great opportunity for the candidate to meet a patient, a fantastic learning experience and a good piece of evidence.</p>		

IMPORTANT:

The candidate must produce a reflective statement on how the engagement with service users and learning with and from professionals and learners in other relevant professions has contributed positively to their professional development (HCPC SoP 9.3, 12.2)

Please comment specifically on this in terms of identified outcomes.

E3 – A reflective statement from XXXXXX on attending haemophilia clinic where she got to interact with a patient and their family member, who described their personal experiences of managing their condition and their interactions with the healthcare pathway. The statement then has a reflection from XXXXXX on how meeting the patient and their carer was of benefit to her in her professional development and how it will affect her future practise.

A really great opportunity for the candidate to meet a patient, a fantastic learning experience and a good piece of evidence.

The statement itself didn't mention learning with and from other healthcare professional, so this would be a suggestion of something to add to the statement for the future, to meet the specific requirement of this piece of evidence, but I am satisfied that this has been demonstrated in other evidence in this section and elsewhere in the portfolio.

SECTION 2 – PROFESSIONAL PRACTICE

SECTION 2 – Module 1: Professional Knowledge

HCPC STANDARDS OF PROFICIENCY COVERED	STANDARDS MET	PLEASE INDICATE WHICH (IF ANY) STANDARDS HAVE NOT BEEN MET
Knowledge standards SoP numbers: 13, 13.1, 13.2, 13.6, 13.7, 13.8	<input checked="" type="checkbox"/>	
Competence standards SoP numbers: 14, 14.14, 14.17, 14.18, 14.19, 14.20, 14.21, 14.23, 14.24, 14.25, 15.6	<input checked="" type="checkbox"/>	

COMMENTS

Please indicate the range of evidence provided, highlighting any strong or weak areas.

E1 – A short description of a range of tests and methods used in the training laboratory, describing the purpose of the test and/or the method principle – included glandular fever test, Kleihauer, malaria rapid detection and films and osmolality.

E2 – A blood grouping exercise completed by the candidate, showing patient blood groups worked out by the candidate from given Ab reactions, and the selection of compatible blood products that could be given to the patient in each case. A description of why the D antigen is clinically significant and interpretation of some antibody screening panels – really nice, comprehensive evidence.

E3 – Q&A on cardiovascular disease, including a description of the pathophysiology of disease, the tests that might be used in diagnosis and monitoring using a case study.

SECTION 2 – Module 2: Health and Safety

HCPC STANDARDS OF PROFICIENCY COVERED	STANDARDS MET	PLEASE INDICATE WHICH (IF ANY) STANDARDS HAVE NOT BEEN MET
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Knowledge standards SoP numbers: 15, 15.1, 15.2, 13.11	<input checked="" type="checkbox"/>	
Competence standards SoP numbers: 15.2, 15.3, 15.4, 15.5	<input checked="" type="checkbox"/>	
COMMENTS		
<p>Please indicate the range of evidence provided, highlighting any strong or weak areas.</p> <p>E1 – ‘Working Safely During COVID-19’ a description of the measures implemented in the training laboratory during the recent pandemic, explaining the reasons for the measures and followed by a personal risk assessment for the individual.</p> <p>E2 – An activity risk assessment for the Kleihauer test, not carried out by the candidate, but annotated by the candidate to describe what each of the aspects included mean.</p> <p>E3 – A COSHH assessment for the Kleihauer test, not carried out by the candidate but annotated by them to highlight the element included in the assessment.</p>		

SECTION 2 – Module 3: Quality		
HCPC STANDARDS OF PROFICIENCY COVERED	STANDARDS MET	PLEASE INDICATE WHICH (IF ANY) STANDARDS HAVE NOT BEEN MET
Knowledge standards SoP numbers: 11.2, 12.3, 12.5, 12.7, 14.15, 14.16	<input checked="" type="checkbox"/>	
Competence standards SoP numbers: 12, 12.1, 12.4, 12.5, 12.6, 12.8, 12.9	<input checked="" type="checkbox"/>	
COMMENTS		
<p>Please indicate the range of evidence provided, highlighting any strong or weak areas.</p> <p>E1 – A print out of QPulse screens for an improvement action, in response to a non-conformance, annotated by the candidate to demonstrate the information captured in the record and an explanation of why it is important to record incidents.</p> <p>E2 – An information poster designed by the candidate to inform service users on how to correctly label samples with barcode stickers, and highlights the consequences of incorrect or poor labelling technique. Two designs are included and were submitted to colleagues for feedback – the candidate then reflected on the feedback and the pros and cons of each poster design. A really excellent piece of evidence!</p> <p>E3 – A description of IQC procedures in the lab, with examples. Includes QC records from the lab detailing the outcome and actions to be taken when checking QC results. Well broken down and explained, good use of pictures and examples.</p>		

SECTION 2 – Module 4: Performing Standard Investigations		
HCPC STANDARDS OF PROFICIENCY COVERED	STANDARDS MET	PLEASE INDICATE WHICH (IF ANY) STANDARDS HAVE NOT BEEN MET

Knowledge standards SoP numbers: 13.10, 14.22	<input checked="" type="checkbox"/>	
Competence standards SoP numbers: 13.9, 14.2, 14.3, 14.4, 14.5, 14.6, 14.7, 14.8, 14.9, 14.10, 14.11, 14.12, 14.13, 14.26	<input checked="" type="checkbox"/>	
COMMENTS		
<p>Please indicate the range of evidence provided, highlighting any strong or weak areas.</p> <p>E1 – Evidence on osmolality testing, covering elements of instrument maintenance, test purpose, calculation and interpretation of results. Evidence includes worksheets from the lab showing tests that have been performed by the candidate.</p> <p>E2 – Kleihauer screening – a description of the test itself and the stages of preparation and analysis; really nice use of photos and annotation of microscope fields showing pos/neg controls and patient sample features.</p> <p>E3 – Evidence of a specimen from a patient with G6PD deficiency; FBC test results shown and scatterplots annotated, next steps in testing explained and some background on G6PD and blood film findings. Great piece of evidence.</p>		

SECTION 2 – Module 5: Research and Development		
HCPC STANDARDS OF PROFICIENCY COVERED	STANDARDS MET	PLEASE INDICATE WHICH (IF ANY) STANDARDS HAVE NOT BEEN MET
Knowledge standards SoP numbers: 14.30, 14.31	<input checked="" type="checkbox"/>	
Competence standards SoP numbers: 14.27, 14.28, 14.29, 14.32, 14.33	<input checked="" type="checkbox"/>	
COMMENTS		
<p>Please indicate the range of evidence provided, highlighting any strong or weak areas.</p> <p>E1 – A piece of work written by the candidate (and other colleagues/students) as part of their degree in 2018, on the effect of pre-analytical variables on FBC. Very well presented, and a nice piece of work. No evidence of marking/feedback or sign-off by the university tutor, or the local training officer – this would be useful to include to verify the content has been checked.</p> <p>E2 – An account of the verification of a new analyser.</p> <p>E3 – An exercise on calculating measurement uncertainty – describing the process, the production of data and statistics used, including differentiation of within run and between run stats.</p>		

OVERALL COMMENTS ON PORTFOLIO

An excellent portfolio, a pleasure to look through.

All evidence (with one exception) was signed and dated by a trainer and trainee, and there was lots of evidence of feedback from the trainer and response from the candidate on the work, which is excellent to see.

Evidence was varied, and the selection covered a wide range of activities and processes XXXXXXXX has experienced during her training. The evidence also demonstrated competence and 'real-life' practise, as well as underlying knowledge.

A comprehensive training plan was also provided, plus examples of training review meetings between the candidate and training officer – fantastic.

A full scan of the portfolio was sent through, showing all sections had been signed off and the evidence of achievement boxes were complete.

A great portfolio, well done!

3. Tour of Laboratory (maximum length – 40 minutes)

This is an opportunity to observe the training environment and candidate's knowledge and understanding of the service delivery. The candidate should be able to demonstrate an understanding of the routine service and respond correctly to pro-active questioning.

The criteria below should be verified in accordance with the knowledge and understanding of the candidate in respect of the discipline(s) in which their training has taken place.

CANDIDATE ABILITY	STANDARD MET	STANDARD NOT MET
Candidate was able to show they knew the correct procedures for handling specimens, pre and post analysis.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Candidate was able to show a knowledge and application of health & safety requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Candidate was able to show they knew how to use the main laboratory computer system in accordance with service requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Candidate was able to show they knew how to operate equipment used in the preparation and analysis of samples	<input checked="" type="checkbox"/>	<input type="checkbox"/>

COMMENTS
<p>Please provide a brief summary of the topics covered on the tour and the candidate's scope of practice. The tour was conducted via a powerpoint presentation, due to remote verification requirements. XXXXXXX began the tour by giving an overview of Pathlinks, describing which Trusts are involved, shared work and procedures and which departments and tests are housed on which sites.</p> <p>The tour then moved on to specimen reception, where XXXXX showed a schematic of the department and described the location of spill kits, eyewash stations and fire points and equipment. This was followed by some photographs of the reception area where XXXXXXX described the requirement for visitors to sign in and out and then went on to describe the arrival of samples in the lab, the triaging and sorting process to correctly direct specimens for different disciplines and sites.</p> <p>XXXXXXX then described the prioritisation and urgency of different blood sciences specimens, some of which are urgent because of the location they come from and some of which must be analysed urgently because of sample stability giving examples throughout. She then talked about the requesting and booking-in processes, electronic and manual, and described checks that must be done when receiving samples, and the minimum sample acceptance criteria and what would be done if a sample/request failed to meet these. Moving into the laboratory areas, XXXXXXX described the layout of the lab and the different areas that make up the blood sciences department:</p> <ul style="list-style-type: none">- Sample storage and sample retention times for different departments/sample types- Sysmex XN in haematology; describing the flow of request information through the interfaces; the parameters measured in a full blood counts and when a film might be made, plus, using low platelets as an example, described other checks that would be carried out on the sample.- Described blood films and the stains used, and what components they stain;

- Biochemistry sample sorter, prioritisation and directing of samples with different requirements/urgencies, also describing common errors or issues that arise and what action must be taken to resolve them quickly.
- Main methodologies on the chemistry lines: ISE, spectrophotometry and immune assay with a very basic overview of the principle.
- Coagulation – explanation of the sample flow and a description of what happens inside the analyser to perform the test.
- Validation bench – XXXXXXX described that there is some autovalidation of results but if results fall outside set limits, or if there was an IQC failure, they are held back by the result handling systems and middleware.
- Using patient history and relevant checks to be able to validate results, must communicate them out if they fall outside the departmental phoning limits – used the examples of an oncology patient with abnormal results that could be expected for their current clinical condition and treatment status, and of a high potassium result that must be checked and phoned.
- Osmolality overview.

Moving on to the blood transfusion section, XXXXXXX described how and why there is secure access. She then talked about the importance of the fridge and freezer temperatures and how they are monitored, and the importance of keeping blood products at the right temperature. She mentioned the role of the MHRA and explained what the cold chain is, and the rules around using blood that has been outside of the fridge for up to 30 mins, between 30 and 60 mins and over 60 mins. XXXXXXX gave a very comprehensive description of blood supplied to other sites and services and how these are managed and temperature controlled. She then talked about the use of the Datix system to report and record blood that is wasted, and the reasons for doing this.

XXXXXX then gave an overview of the morphology bench, and described the function and use of the microscopes. She also described blood grouping and crossmatching and explained the use of forward and reverse grouping and records of special requirements for some patients, using examples of washed platelets and less common antibodies.

To finish up there were some slides showing the different waste streams in the laboratory, which XXXXXXX talked through, and then fire safety and laboratory rules and PPE. She showed a picture of spill kit contents and described the different situations in which these would be used. She showed examples of communication boards in the lab, and explained the way communication had changed due to Covid restrictions in the lab.

XXXXXXX answered some questions on quality in the laboratory and explained the process and purpose of IQC and EQA.

A very good, comprehensive tour!

The Institute has published 'Clinical Laboratory Standards' for the approval of laboratories for pre- and post- registration training. Based on these criteria, the laboratory tour also gives the external verifier an opportunity to judge whether the laboratory has the appropriate requirements for training against the standards below.

OVERALL STANDARDS	STANDARD MET	STANDARD NOT MET
Environment, Facilities and Equipment – as much as can be discerned via remote powerpoint presentation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Health and Safety – as much as can be discerned via remote powerpoint presentation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Workload and Staffing – as much as can be discerned via remote powerpoint presentation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Quality	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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External verifiers report for the Verification of the Registration Training Portfolio for the Certificate of Competence

Education and Training	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Documentation	<input checked="" type="checkbox"/>	<input type="checkbox"/>

4. Feedback Comments to Trainer and Candidates

This also provides an opportunity to seek further clarification on points of evidence if required.

FEEDBACK:

Overall an excellent portfolio and tour, showing a varied and robust training process. XXXXXXXX has obviously engaged with each are of the lab she has worked in and was very confident in talking about laboratory procedures and the role of the Biomedical Scientist.

COMMENDATIONS: Highlight any areas of good practice.

A very engaging portfolio, good use of real examples to support underlying knowledge. I particularly like the post on sample labelling, which included feedback from a colleague and reflection on that feedback.

Being able to visit a clinic and interact with nurses and patients there was a fantastic opportunity for XXXXXXXX, this is really nice to see incorporated into training. She explained enthusiastically how that had been of benefit to her training and development, and will be to her future work in the lab.

RECOMMENDATIONS:

Please note this is meant to be constructive and helpful where you are able to suggest one or two areas where future training may benefit.

Recommendations must be consistent with IBMS guidelines for registration training and portfolio completion.

Just a couple of very minor suggestions for the future, discussed at the end of the verification;

- Where a piece of university work had been included as evidence, it would be good if this was signed off by a local trainer, just to confirm it has been checked and is correct and relevant. Alternatively, including the university marks and feedback for the assignment would be good.
- Where a print out was added showing a mandatory training module had been completed, it would be good if this was accompanied by a summary of what was covered in the training, or a reflection on the training, just to show what the content of the training was and that it is relevant to the standards being demonstrated.

5. Result of Verification

If completion of any academic study is still outstanding, the verifier should recommend the award of the Certificate of Competence subject to the relevant evidence being submitted to the Institute.

AWARD OF CERTIFICATE OF COMPETENCE RECOMMENDED

YES ☒ NO ☐

If degree has not been completed or if further evidence is required, please indicate below.
(Continue on extra sheet if necessary.)

TRAINING APPROVAL OF THE LABORATORY RECOMMENDED

YES ☒ NO ☐

If No, indicate further evidence required. (Continue on extra sheet if necessary.)

IS THERE ANY PARTICULAR ISSUE YOU WISH TO BRING TO THE ATTENTION OF THE INSTITUTE?

No

I confirm that this external verification has been carried out in a manner consistent with the guidelines provided and in line with the requirements of the Institute of Biomedical Science and that the candidate is previously unknown to me.

Verifier Name:

Signature:

Date:

In providing IBMS with the information requested you are consenting to its use as indicated in the IBMS Privacy Notice. Further information can be found on the IBMS website at www.ibms.org/privacy