# 1a. Informal Interview with Candidate (15 – 20 minutes) - NOT DISCUSSED AS VERIFICATION DID NOT TAKE PLACE

Describe your formal trust and departmental induction process.  How were you made aware of the location of the policies on equal opportunities and anti-discrimination?	
anti-discrimination?	
Describe what you should do if you feel that you may have been discriminated against	
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.	
How were you made aware of the grievance procedure and how to initiate it?	
Do you feel you have followed a structured training programme?	
Was your training supportive to satisfy all of the above?	
Were there any difficulties in delivering your training?	
Were there any other trainees?	
Was all the training done on one site?	
Was there any rotation or collaboration with other departments?	
Can you give examples of being able to take part in inter-professional learning? (learning with and from other professionals)?	

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

Did the candidate or training officer wish to make any further comments about the training process?
- NOT DISCUSSED AS VERIFICATION DID NOT TAKE PLACE

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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. N/A SECTION 1 - PROFESSIONAL CONDUCT SECTION 1 – Module 1: Personal Responsibility and Development HCPC STANDARDS OF PROFICIENCY STANDARDS PLEASE INDICATE WHICH (IF ANY) COVERED MET STANDARDS HAVE NOT BEEN MET **Knowledge standards** 3.3, 4.4, 4.6, 11.1 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 **Competence standards** 2, 4, 4.1, 4.3, 4.4, 4.5, 11, 14.1 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 **COMMENTS** Please indicate the range of evidence provided, highlighting any strong or weak areas. 1) Witness statement 2) HCPC essay 3) Transfusion guidelines/regulations statement – good piece of evidence but ?different writing style

SECTION 1 – Module 2: Equality and Diversity		
HCPC STANDARDS OF PROFICIENCY	STANDARDS	PLEASE INDICATE WHICH (IF ANY)
COVERED	MET	STANDARDS HAVE NOT BEEN MET
Knowledge standards	$\bowtie$	
SoP numbers: 5, 5.1		
Competence standards		
SoP numbers: 6		
COMMENTS		

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

- 1) Certificate of elearning not appropriately annotated
- 2) Witness statement of presentation
- 3) Presentation not signed off

Evidence 2 & 3 are really only one activity, should not both be used. Evidence 1 is just a certificate, doesn't show what has been learned.

SECTION 1 – Module 3: Communication		
HCPC STANDARDS OF PROFICIENCY	STANDARDS	PLEASE INDICATE WHICH (IF ANY)
COVERED	MET	STANDARDS HAVE NOT BEEN MET
Knowledge standards		8.3, 8.6, 8.8, 8.9
SoP numbers: 8.3, 8.6, 8.7, 8.8, 8.9		
Competence standards		14.34
SoP numbers: 8, 8.1, 8.2, 8.4, 8.5, 14.34		
COMMENTS		

### COMMENTS

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

- 1) Annotated handover sheet would have been better evidence to use one filled in by Awat
- 2) Witness statement on handover sheet
- 3) Explanation of handover sheet dated by candidate 19/01/2022, signed off by TO 24/04/2020 ??

All three pieces are for the same activity, not covering other methods of communication

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SECTION 1 – Module 4: Patient Records and Data Handling		
HCPC STANDARDS OF PROFICIENCY	STANDARDS	PLEASE INDICATE WHICH (IF ANY)
COVERED	MET	STANDARDS HAVE NOT BEEN MET
Knowledge standard		7.1, 7.3, 10.3,
SoP numbers: 7, 7.1, 7.2, 7.3, 10.2, 10.3,		
10.5, 10.6		
Competence standards		10.3
SoP numbers: 7, 10, 10.1, 10.3, 10.4		
2014 15175		

## **COMMENTS**

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

- 1) Annotated blood pack picture excellent piece of evidence
- 2) Environmental monitoring sheet sheets filled in, but no explanation of what for or how it demonstrates SoP
- 3) Certificate of elearning and accompanying statement where is this diagram from? If you made it, make that clear! If not, reference. Signed off 14/02/2022

SECTION 1 – Module 5: Professional Relationships		
HCPC STANDARDS OF PROFICIENCY	STANDARDS	PLEASE INDICATE WHICH (IF ANY)
COVERED	MET	STANDARDS HAVE NOT BEEN MET
Knowledge standards		9.3, 13.5
SoP numbers: 9.2, 9.3, 9.5, 13.3, 13.4,		
13.5		
Competence standards	X	
SoP numbers: 9, 9.1, 9.4, 12.2		
COMMENTS		

#### COMMENTS

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

- 1) Stem cell transplant flow chart fantastic piece of evidence, candidate really thought about how patient pathway was affected.
- 2) Reflective practice on PITS course Nice reflection, but was this to cover the statutory reflective piece for this section (see below)? May need expanded/make that a bit clearer.
- 3) Service user engagement essay and leaflets Noted that this was to cover 9.3, but mostly concerning consent (SoP 2.7), leaflets show minimal annotation, is not evident why they are included/what they add. Not a reflective piece.

### **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.

Evidence 3 was mapped to SoP 9.3, but was not reflective and primarily concerned consent. Evidence 2 was reflective, but didn't really cover the SoPs required by this piece. SoP 12.2 was covered in Evidence 1.

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SECTION 2 – PROFESSIONAL PRACTICE			
SECTION 2 – Module 1: Professional Knowledge			
HCPC STANDARDS OF PROFICIENCY	STANDARDS	PLEASE INDICATE WHICH (IF ANY)	
COVERED	MET	STANDARDS HAVE NOT BEEN MET	
Knowledge standards SoP numbers: 13, 13.1, 13.2, 13.6, 13.7, 13.8	X		
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		14, 14.19, 14.20, 14.21, 14.23, 14.25, 15.6	
	COMMENTS		

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

- 1) Breast cancer essay from university, only first page annotated. Could do with annotation which is relevant to your practice
- 2) Uni certificate and transcript no annotation or reflection
- 3) Particle counter description and use –shows good understanding and regular participation in monitoring, where is the table from? Ref where info is from. Signed off 11/01/2022.

SECTION 2 – Module 2: Health and Safety		
HCPC STANDARDS OF PROFICIENCY	STANDARDS	PLEASE INDICATE WHICH (IF ANY)
COVERED	MET	STANDARDS HAVE NOT BEEN MET
Knowledge standards		13.11
SoP numbers: 15, 15.1, 15.2, 13.11		
Competence standards	X	
SoP numbers: 15.2, 15.3, 15.4, 15.5		
COMMENTS		

## COMMENTS

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

- 1) H&S elearning certificate and explanation shows learning outcomes, would be better if contained more how it applies to your role
- 2) Annotated photos of PPE use very good piece of evidence covering correct use and risks
- 3) Explanation of biological hazard groups and associated containment levels –no explanation of containment levels. Unfortunately there are chunks of this evidence taken directly from the Approved List of Biological Agents from the ACDP, without referencing!! Signed off 14/01/2022.

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SECTION 2 – Module 3: Quality		
HCPC STANDARDS OF PROFICIENCY	STANDARDS	PLEASE INDICATE WHICH (IF ANY)
COVERED	MET	STANDARDS HAVE NOT BEEN MET
Knowledge standards		12.5, 14.16
SoP numbers: 11.2, 12.3, 12.5, 12.7,		
14.15, 14.16		
Competence standards		12.5, 12.6, 12.9
SoP numbers: 12, 12.1, 12.4, 12.5, 12.6,		
12.8, 12.9		
COMMENTS		

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

- 1) Witness statement temperature logging including Awat's report –nice to see her report but if including photos please annotate
- 2) Explanation of PULSE and witness statement
- 3) Incident report good choice for evidence but would have been nice to see reflection. Signed off 03/02/2022.

SECTION 2 – Module 4: Performing Standard Investigations		
HCPC STANDARDS OF PROFICIENCY	STANDARDS	PLEASE INDICATE WHICH (IF ANY)
COVERED	MET	STANDARDS HAVE NOT BEEN MET
Knowledge standards		14.22
SoP numbers: 13.10, 14.22		
Competence standards		13.9, 14.4, 14.5, 14.6, 14.7, 14.8, 14.9,
SoP numbers: 13.9, 14.2, 14.3, 14.4, 14.5,		14.10, 14.11, 14.12, 14.13
14.6, 14.7, 14.8, 14.9, 14.10, 14.11, 14.12,		
14.13, 14.26		

## **COMMENTS**

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

- 1) Placement essay –reflective practice would have been more appropriate, or write more about the general lab skills you acquired
- 2) Point of care statement and certificate no reflection included, certificates not annotated.
- 3) Flow cytometer explanation nice explanation but of a task candidate cannot perform until registered. Signed off 18/02/2022.

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HCPC STANDARDS OF PROFICIENCY	STANDARDS	PLEASE INDICATE WHICH (IF ANY)
COVERED	MET	STANDARDS HAVE NOT BEEN MET
Knowledge standards	×	
SoP numbers: 14.30, 14.31	_	
Competence standards		14.28, 14.29, 14.32
SoP numbers: 14.27, 14.28, 14.29, 14.32,		
14.33		
	COMMENTS	
to current practice 2) Uni project abstract –again, no refle	ection or annot main points we	or annotation to bring up to date/relate ation. Signed off 08/02/2022. ell, some good examples relating directly

#### **OVERALL COMMENTS ON PORTFOLIO**

## Room for improvement:

- Several pieces such as certificates which on their own do not evidence demonstration of knowledge/competence – should be annotated with relevant info such as how the knowledge gained has impacted your practice, or a reflective learning.
- Annotation generally was poor, and did not cover the relevant SoP. An exception was the blood pack picture with attached statement, you applied this well to the data handling section.
- Although some attempt at mapping the evidence to standards has been done in the justifications document, there are many SoPs which have not been met. When looking at the evidence I was trying to tick any addition standards I felt you had met but not mapped, but this step should really be done prior to applying for verification for the future perhaps a spreadsheet or table of the SoPs would be helpful, and corresponding evidence pieces can be marked against it as they are finished?
- Good evidence of marking and feedback
- Portfolio seems rushed, some pieces dated after application for verification candidate should be deemed ready before applying
- Evidence of plagiarism which results in a fail referred to IBMS

These points were discussed with TO when cancelling verification date.

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# 3. Tour of Laboratory (maximum length – 40 minutes) - TOUR/VERIFICATION DID NOT TAKE PLACE

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.				
Candidate was able to show a knowledge and application of health & safety requirements.				
Candidate was able to show they knew how to use the main laboratory computer system in accordance with service requirements.				
Candidate was able to show they knew how to operate equipment used in the preparation and analysis of samples				
COMMENTS				
Please provide a brief summary of the topics covered on the tour and the candidate's scope of practice.				
Tour was cancelled, portfolio showed evidence of plagiarism.				

The Institute has published 'Clinical Laboratory Standards' for the approval of laboratories for preand 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- NOT DISCUSSED AS VERIFICATION DID NOT TAKE PLACE	STANDARD MET	STANDARD NOT MET
Environment, Facilities and Equipment		
Health and Safety		
Workload and Staffing		
Quality		
Education and Training		
Documentation		

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# 4. Feedback Comments to Trainer and Candidates

This also provides an opportunity to seek further clarification on points of evidence if required.
FEEDBACK:
As discussed/above
COMMENDATIONS: Highlight any areas of good practice.
I especially liked the Stem cell transplant flow chart piece of evidence, candidate had obviously thought about the patient pathway.
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.
N/A

## 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.)			
Portfolio failed as evidence of plagiarism in portfolio			
TRAINING APPROVAL OF THE LABORATORY RECOMMENDED			
YES □ NO □			
If No, indicate further evidence required. (Continue on extra sheet if necessary.)			
- TOUR/ VERIFICATION DID NOT TAKE PLACE, UNABLE TO ASSESS LAB FOR TRAINING APPROVAL			
IS THERE ANY PARTICULAR ISSUE VOLUMENT TO REING TO THE ATTE	NITION OF THE INSTITUTE?		
IS THERE ANY PARTICULAR ISSUE YOU WISH TO BRING TO THE ATTE	NTION OF THE INSTITUTE?		
As previously discussed on phone and by email, there is evidence of plagiarism in this portfolio.			
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 <a href="www.ibms.org/privacy">www.ibms.org/privacy</a>

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