SLIDO Questions for NSHCS from the Cohort 5 HSST induction

1. As part of the accreditation process I had to nominate a local research supervisor who signed an agreement to support. Is this role now defunct?

No, this role is not defunct. It is someone who will support you in your Section C research and innovation work together with a nominated academic supervisor.

2. When do you anticipate IAPS will happen?

There is updated information available on this and the Exit procedure from HSST on the School's website.

http://www.nshcs.hee.nhs.uk/current-hsst/nhs-higher-specialist-scientific-training/the-hsst-handbook/exit-criteria-for-certification

The process of IAPS is integrated into the Exit procedure and can be initiated by the trainee up to 3 months ahead of their anticipated end date.

3. Can retrospective evidence be used as evidence - some HSST trainees are very experienced and may have relevant evidence from before starting HSST?

Yes, retrospective evidence is admissible provided it is at the appropriate consultant level.

4. Is there a way to gain access to Onefile without needing training officer details or a way of changing training officer during training?

Yes. We have set up all new HSST trainees with OneFile access whether they have provided supervisor details or not. There is a form in OneFile that trainees can complete to request new or additional supervisors during training. To access this form go to My Portfolio then click on the Forms tab.

5. Example of how the money (grant) was used and what is the breakdown ... are there any statistics of budget breakdown (as guidance)?

There is no structured information currently available in this format. HEE commissioners have issued a statement on the acceptable use of the educational allowance at:

http://www.nshcs.hee.nhs.uk/current-hsst/nhs-higher-specialist-scientific-training/hsst-funding-guidance

and reserve the right to audit this.

6. Similarly to the STP, can more than one person sign off items on OneFile? Or is it's purely your Workplace Supervisor?

Yes this is possible. At the point of submission, trainees can invite a new assessor to review their work.

7. If there are issues with the curriculum library who should we contact?

Issues with curriculum library on the School's website should be addressed in the first instance to the generic School inbox. nshcs@hee.nhs.uk

8. Can evidence for portfolio be retrospective i.e. performed before starting on the programme (provided it fulfilled necessary criteria)?

See response to Question 3

9. How do we complete all the standards of proficiency if they are well beyond our role/grade, given limited autonomy locally?

The programme facilitates the trainee being eligible to apply for registration on the Academy's Register of Higher Specialist Scientists and hence the employer is required to facilitate training to this level. To use the STP analogy, training is to reach the level of a minimally competent consultant in the specialism.

As such, training can therefore be supervised or overseen if it is felt that autonomous working wouldn't be appropriate.

10. What is IAPS? Please explain how this works.

The IAPS is an Independent Assessment of Professional Skills (IAPS), which will consist of a *viva voce*-type examination with a panel of expert specialism-specific examiners. The format of the IAPS will comprise an assessment of the trainee's understanding of their five pieces of showcased OneFile evidence and the review of a specialist paper relating to research or service development within the specialism.

Life Science trainees who exit with FRCPath are exempt IAPS as it is included in the Part 2 College examinations.

11. Presumably there are Consultant Clinical Scientists undertaking this programme how would they formulate a training programme given they have achieved competence

At the outset of the programme there were several experienced individuals who successfully applied and entered the programme. They presumably saw this as an opportunity to extend their skill set and would have developed a training plan appropriate to their own needs.

12. What band can we expect to be at the end of the programme?

There is no expected band of employment at the end of the programme as this is a matter for local employers.

The programme does however equip successful trainees to apply for registration as a Higher Specialist Scientist with the Academy. This then facilitates application for consultant equivalent grade posts within their specialism as recommended by NHS Employers guidance for the appropriate role definitions, role descriptors, suggested appointment and appraisal processes for a consultant clinical scientist.

http://www.nhsemployers.org/your-workforce/recruit/employer-led-recruitment/consultant-clinical-scientist-guidance-project

13. Is there any interoperability between OneFile and the professional organisations' CPD schemes?

There is currently no such interoperability both from OneFile or from professional organisation's schemes. Evidence from those schemes would need to be referenced within OneFile. This can be uploaded or submitted in a number of different ways.

14. When is the annual bursary paid to the Trusts? What is the best mechanism to accessing this for research consumables etc?

The Local HEE Office makes a sum of £13K per year for each trainee and for the five years of training available. These monies will usually come into the Trust through the Learning and Development Department (or equivalent) as part of the training sum received from the HEE Local Office. It is a matter for local negotiation to access these funds.

15. In OneFile how can we partially sign off SOPs as we may not be fully competent until year 5?

It is not possible to partially sign off evidence but it is possible to submit evidence and to receive feedback on it and have it returned by your supervisor for additional evidence to be added at a later date as appropriate to reflect progress through the programme.

Please see the helpful videos of the three options available to supervisors to Approve, Reject or Resubmit evidence on OneFile videos page on Schools website via: http://www.nshcs.hee.nhs.uk/onefile

16. What's the difference between a mentor and education supervisor?

A mentor is usually an experienced and trusted advisor, an expert in a particular field, who may be remote from the trainee's workplace but able to offer advice and support in particular areas.

The term education supervisor is not one used widely. The workplace supervisor is someone local to the trainee, often their line manager, who has an overarching responsibility for the trainee's progression and will offer clinical, scientific and educational support as well as pastoral care and career guidance.

17. Could you provide more light on how the training allowance is used to cover service-related contingency plans when the trainee is away on training?

The disbursement of these funds is the responsibility of the local employer and should follow the guidance offered by HEE as specified in the answer to Question 5.

18. Can we have a breakdown of career stage of new HSST starters?

This information is not immediately available. It is something the School may consider providing subject to the GDPR restrictions.

Entrants to the programme to date have varied from those successfully exiting STP to those already holding senior and authoritative positions as Heads of Department. It is anticipated that as the programme develops entrants would typically come from those who have successfully completed the STP programme, or gained equivalence to it, and may have had at least one years' experience working as a registered clinical scientist.

19. How do we ensure our prior PhDs are approved? Do they need to be within a set timeframe e.g. within the last 5 years?

Trainees seeking exemption from the Section C Research Project through a prior PhD should email the National School with details of:

- Year of PhD award
- Awarding university
- Confirmation of award (e.g. certificate or letter from the awarding university)
- Title of PhD
- PhD abstract in full

PhDs are required to be timely, usually within the last 10 years, and of relevance to the trainee's specialism.

Trainees should note that if an exemption from the Research Project is granted they would not be eligible for a DClinSci award (as the University will not APEL research). The options for exit award would then be PG Diploma for Section A and CPD recognition for section B and the extended innovation proposal.