**Healthcare Science (Ophthalmic Imaging) Practice Educators Handbook**

2025-2026

Version 1

School of Education, Health and Sciences

[**www.glos.ac.uk**](http://www.glos.ac.uk/)

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# 1.0 Introduction

This handbook contains information relevant to the BSc (Hons) Healthcare Science (Ophthalmic Imaging) programme for the academic year 2025 onwards. The purpose of the handbook is to guide Practice Educators through the process of supporting the University of Gloucestershire’s Ophthalmic Imaging students through their Practice-Based learning. Clinical education is an integral part of the degree course and therefore it is essential that you are fully aware of the learning and assessment requirements.

The early sections of the handbook will outline the course aims, structure, and provide detail on the practice-based modules that form part of the BSc (Hons) Healthcare Science (Ophthalmic Imaging) programme. The information provided is designed to complement the students’ Practice Assessment Documents.

# 2.0 Clinical Practice Team Contacts

HSC Placements <[hscplacements@glos.ac.uk](mailto:hscplacements@glos.ac.uk)>

HSC Practice Support <[practicesupport@glos.ac.uk](mailto:practicesupport@glos.ac.uk)>

HSC Practice Absence <[practiceabsence@glos.ac.uk](mailto:practiceabsence@glos.ac.uk)>

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| --- | --- | --- | --- |
| **Title** | **Name** | **Email** | **Telephone** |
| Strategic Lead for Partnerships & Placements | Eve Scarle | [escarle@glos.ac.uk](mailto:escarle@glos.ac.uk) | 01242 714644 |
| Academic Course Leader | Roz Painter | [rpainter@glos.ac.uk](mailto:rpainter@glos.ac.uk) |  |

**24 Hour Emergency University Contact**

​In the case of an emergency where a University member of staff is required, the 24-hour security number shown below can be used to make contact with key senior staff for support.

**Telephone:** 01242 714402​​

# 3.0 BSc (Hons) Healthcare Science (Ophthalmic Imaging) Programme Structure

## 3.1 Course Philosophy

All modules are taught with respect to the appropriate discipline-specific standards of proficiency. This ensures that students are well prepared for practice and safeguards students, and service users, whilst they are ‘in training’. The teaching philosophy adopted across the School of Education, Health and Sciences is of transformative learning, which aims to develop students as change agents through enabling the development of their scientific enquiry, critical thinking and problem-solving skills. One of the main threads that runs through the programme, and across all programmes in the School of Education, Health and Sciences, is the development of clinical leadership. This teaches professional values that expect students to develop effective self-management and team working behaviours from the outset. Such leadership skills help students to hone their person-centred behaviours which are essential for delivering effective patient services.

The Developing People-Improving Care (NHS, 2016) initiative clearly identifies the need for leadership development and service improvement skills to be equally embedded within the entire pre-registration clinical curricula in healthcare. The degree programme adopts the guidance provided by Health Education England’s Leadership Framework (2015) on integrating their three themes of leadership (focus on self, working with others and on improving healthcare) in pre-registration programmes. **Figure 1.** illustrates the framework and how it can be embedded within an academic setting.



## Figure 1: Health Education England: The Three Stages of leadership development and the three phases of curricula design (Health Education England, 2018)

The programme will be delivered by experienced, registered Healthcare Scientists and other healthcare professionals from the multi-professional team. We aim to accommodate a variety of learning styles and experiences, through the range of teaching and assessment strategies. Our approach to teaching aims to be continuously relevant to practice by utilising local clinicians and service users in the delivery of the programme content. In addition, we aim to accommodate a variety of learning styles and experiences, through the range of teaching and assessment strategies.

## 3.2 Educational Aims of the Programme

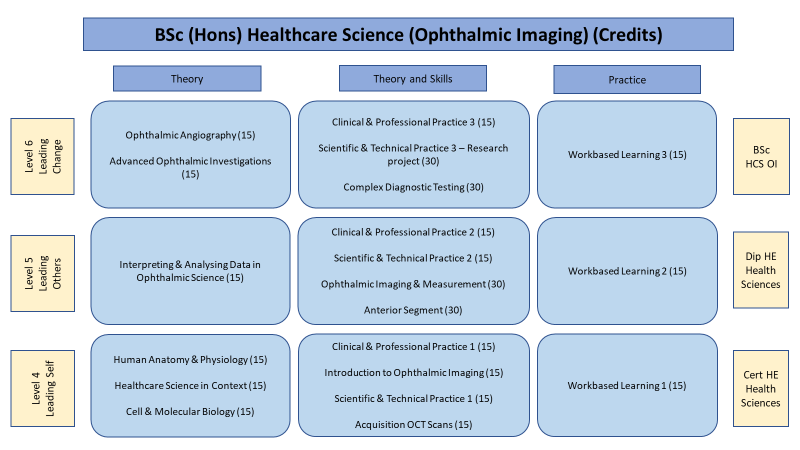
The Healthcare Science (Ophthalmic Imaging) programme has been designed to develop confident, competent and consistent professional Ophthalmic Imagers who are resilient, conscientious, adaptable and safe Healthcare Science Practitioners. The Healthcare Science (Ophthalmic Imaging) programme aims to support students to achieve their best possible work, excelling in their academic and clinical study to produce highly qualified practitioners who, upon graduation, are eligible to apply for registration with the Academy of Healthcare Science. Furthermore, the proposed programme ensures students have a realistic and comprehensive understanding of working in a demanding, modern and changing national healthcare system. Thus, enabling graduates who are able to relate and function as a proficient member of a clinical team and the broader healthcare service, have the ability to be critical thinkers, and deliver robust and innovative care for each and every one of their patients.

**The overall aims of the programme are as follows:**

1. To develop resilient, competent, conscientious and safe Healthcare Science Practitioners in Ophthalmic Imaging.
2. To develop Healthcare Science Practitioners who make a significant contribution to the delivery of an effective and safe Ophthalmic Eye Service whilst working up to and within their scope of practice.
3. To develop Healthcare Science Practitioners to become reflective practitioners, who have a passion for learning and who are committed to their self-development, ensuring they are able to consistently meet the standards of professional practice as required by the AHCS and the NHS.
4. To develop Healthcare Science Practitioners who maximise their knowledge and skills providing the best standards of care to all patients.
5. To develop Healthcare Science Practitioners who are committed to provide the highest standards of person-centred, ethical practice for the people they care for, towards their colleagues, the wider NHS workforce and for themselves.

## 3.3 Programme Learning Outcomes

The overall learning outcomes of the Healthcare Science (Ophthalmic Imaging) degree programme provide more information about how the programme aims are demonstrated by students. The learning outcomes have been mapped against the 20 compulsory modules that form the Healthcare Science (Ophthalmic Imaging) programme as illustrated in **Figure 2**.

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## Figure 2: BSc (Hons) Healthcare Science (Ophthalmic Imaging) Course Map

The Healthcare Science (Ophthalmic Imaging) programme provides the opportunities for students to develop knowledge and understanding, intellectual skills, subject specific skills and transferable skills across the three years of study.

On successful completion of the course students will be able to demonstrate competency in these four areas before transition to practice. Achieved course outcomes are expected to be upheld and demonstrated in progressive levels.

***Professional Practice***

1. To demonstrate professional practice that meets the professional standards of conduct, performance and ethics defined by Good Scientific Practice (2021) and is safe, lawful and effective, and within the scope of practice for the role undertaken, while maintaining fitness to practice.
2. To demonstrate personal qualities that encompass communication skills, self-management, self-awareness, acting with integrity and the ability to take some responsibility for self-directed learning, maintaining their own health and wellbeing, critical reflection and action planning to maintain and improve performance.
3. To demonstrate the ability to act as an independent self-directed learner acting autonomously in a non-discriminatory manner when planning and implementing tasks at a professional level.
4. To demonstrate the ability to work, where appropriate, in partnership with other professionals, often as part of a multidisciplinary team (MDT), supporting staff, service users and their relatives and carers while maintaining confidentiality.
5. To demonstrate the ability to work with the public, service users, patients and their carers as partners in their care, embracing and valuing diversity.
6. To demonstrate a range of transferable generic academic skills and capabilities to the exercise of initiative and personal responsibility, decision making in complex and unpredictable contexts spanning study skills, independent learning, reflective practice, communication, team working, research and leadership skills.
7. To demonstrate a conceptual understanding of ideas and investigative techniques to formulate coherent and sustainable arguments, some of which are at the forefront of HCS.
8. To demonstrate the ability to apply problem-solving skills, evaluate evidence, arguments and assumptions, to reach sound judgements and to communicate information, ideas, problems and solutions to both specialist and non- specialist audiences.

***Scientific and Clinical Practice***

1. To demonstrate an understanding of a complex body of knowledge, some of it at the current boundaries of an academic discipline, and the ability to apply the scientific principles, method and knowledge to HCS.
2. To demonstrate the ability to apply scientific method and approaches to analytical techniques, HCS research, development and innovation.
3. To demonstrate the ability to perform technical investigations/skills and technical reporting of quality assured tests, investigations and interventions on patients/samples safely and skillfully, adhering to applicable legislation and in compliance with local, national and international guidelines.
4. To demonstrate the ability to provide therapeutic interventions, some of which may be specialist, in a number of specialisms.
5. To demonstrate a systematic understanding of key aspects of their field of study, including acquisition of coherent and detailed knowledge, at least some of which is at, or informed by, the forefront of defined aspects of HCS.
6. To demonstrate high-quality clinical and scientific practice that applies core scientific knowledge, skills and experience in a healthcare setting, places the patient/public at the centre of care, prioritising patient safety and dignity and reflecting NHS/health service values and the NHS Constitution.

***Research, Development, and Innovation***

1. To demonstrate an appreciation of the uncertainty, ambiguity and limits of knowledge, the ability to manage their own learning, and to make use of scholarly reviews and primary sources (for example refereed research articles and/or original materials appropriate to HCS).
2. To apply the methods and techniques that they have learned to review, consolidate, extend and apply their knowledge and understanding, and to initiate and carry out projects.
3. To demonstrate an understanding of the strengths, weaknesses and opportunities for further development of healthcare and HCS as applicable to their own clinical practice, research, audit, innovation and service development, which either directly or indirectly leads to improvements in patient experience, clinical outcomes and scientific practice.

***Clinical Leadership***

1. To demonstrate scientific and clinical leadership appropriate to the HSCP job role based on the continual advancement of their knowledge, skills and understanding through the independent learning required for CPPD.

## 3.4 Course Map- BSc (Hons) Healthcare Science (Ophthalmic Imaging)

The Course map lists the individual modules that make up the Healthcare Science (Ophthalmic Imaging) programme, their associated credits, and delivery timetable.

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| **LEVEL 4** | | |
| To complete your programme you must pass the following compulsory modules: | | |
| HP4001 Workbased Learning 1 | 15 CATS | SEM 1&2 |
| HP4002 Clinical and Professional Practice 1 | 15 CATS | SEM 1 |
| HP4003 Scientific and Technical Practice 1 | 15 CATS | SEM 1 |
| HP4004 Human Anatomy and Physiology | 15 CATS | SEM 1 |
| HP4005 Healthcare Science in context | 15 CATS | SEM 2 |
| HP4006 Cell and Molecular Biology | 15 CATS | SEM 2 |
| HP4007 Introduction to Ophthalmic Imaging | 15 CATS | SEM 2 |
| HP4008 Acquisition Optical Coherence Tomography Scans | 15 CATS | SEM 2 |
|  | | |
| **LEVEL 5** | | |
| To complete your programme you must pass the following compulsory modules:  *List the compulsory modules here:* | | |
| HP5001 Workbased Learning 2 | 15 CATS | SEM 1&2 |
| HP5002 Clinical and Professional Practice 2 | 15 CATS | SEM 2 |
| HP5003 Scientific and Technical Practice 2 | 15 CATS | SEM 1 |
| HP5004 Ophthalmic Imaging and Measurement | 30 CATS | SEM 1&2 |
| HP5005 Anterior Segment | 30 CATS | SEM 2 |
| HP5006 Interpreting and Analysing Data in Ophthalmic Science | 15 CATS | SEM 2 |
|  | | |
| **LEVEL 6** | | |
| To complete your programme you must pass the following compulsory modules:  *List the compulsory modules here* | | |
| HP6001 Workbased Learning 3 | 15 CATS | SEM 1&2 |
| HP6002 Clinical and Professional Practice 3 | 15 CATS | SEM 2 |
| HP6003 Scientific and Technical Practice 3: Research Project | 30 CATS | SEM 1&2 |
| HP6004 Complex Diagnostic Testing | 30 CATS | SEM 1&2 |
| HP6005 Ophthalmic Angiography | 15 CATS | SEM 1 |
| HP6006 Advanced Ophthalmic Investigations Science | 15 CATS | SEM 2 |

## 3.5 Programme Content and Structure

The curriculum is delivered over three years to meet the overall programme learning outcomes. The programme has been designed as a blended learning course; inclusive of employer-led, University led, and student-led sessions. Sessions are defined as either:

* Employer-led sessions – are those timetabled sessions where students are learning within a specialist department. For **direct-entry** students, this time is scheduled within a ‘practice-based’ setting. For **apprentices**, this time is when they are working ‘on the job’ in their recruiting department.
* University-led sessions – are those timetabled sessions which are facilitated by the Academic Teaching team.
* Student-led sessions – are those timetabled sessions which allow students the freedom to carryout independent study.
* Block-release sessions – are those timetabled sessions which are delivered to students on-site at the University of Gloucestershire. These sessions support student induction, student integration and collaboration, as well as fundamental skills training and assessment.

**Figure 2.** above illustrates the programme’s 20 compulsory modules. A mix of Theory, Theory & Skills, and Practice-Based modules have been designed. The 6 Theory modules are taught by the University during University-led sessions and Block-release sessions. The 11 Theory & Skills modules are taught by experts in the field. The majority of this teaching will take place online during University-led sessions. In addition, during their block release sessions, students will be taught at our Collaborative Ophthalmic Imaging facility. This is a Gloucester-based teaching facility found within the Ophthalmology department of Gloucestershire Hospital NHS Foundation Trust. During these block-release teaching sessions, students are taught fundamental clinical skills. The 3 Practice-Based modules will be undertaken in a range of practice settings across the county and beyond.

**Note:** Only those who graduate with the full BSc (Hons) Healthcare Science (Ophthalmic Imaging) will be eligible to apply for admission to the Academy for Healthcare Science register. Exit awards do not provide a pathway to registration

## 3.6 Overview of Modules

### 3.6.1 Level 4- Focus of Self

|  |  |
| --- | --- |
| **Code** | HP4001 |
| **Title** | Workbased Learning 1 |
| **Brief description** | This module offers the initial clinical, scientific, and technical competency training necessary to work safely within a clinical setting. The module provides practical experiences to ensure students can undertake the full breadth of practice expected of a newly qualified Healthcare Science Professional. They will be expected to develop skills with respect to patient-centred care, ensuring that patient values guide all clinical decisions and care is respectful of and responsive to individual patient preferences, needs and values. By the end of this module, students will be expected to apply, in practice, a range of technical and clinical skills and critically reflect on and develop their individual performance, working within the Standards of Proficiency set by the Academy of Healthcare Science. This module will assess the practical competencies required of a year 1 Ophthalmic Imaging Practitioner. |

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| **Code** | HP4002 |
| **Title** | Clinical and Professional Practice 1 |
| **Brief description** | This module builds the underpinning knowledge, and accompanying skills and behaviours, to work as a healthcare science practitioner, with a focus on communication, teamwork, and professional standards. For Ophthalmic Imaging students, this module teaches the clinical considerations for preparing a patient for OCT scanning. |

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| **Code** | HP4003 |
| **Title** | Scientific and Technical Practice 1 |
| **Brief description** | This module introduces students to key elements of investigation and experimentation and therefore provides them with a strong foundation in instrumentation, data collection and interpretation, and the relevance to patient care. |

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| **Code** | HP4004 |
| **Title** | Human Anatomy and Physiology |
| **Brief description** | This module offers an introduction to the key anatomical features of the body and how physiological function is controlled to maintain homeostasis and health. The module underpins the more specialised teaching in year’s two and three. For Ophthalmic Imaging students, this module also explores the basic knowledge of anatomy necessary to practice within an ophthalmic imaging role. It includes a detailed knowledge of the eyeball and the surrounding structures including gross anatomic features and ocular appendages. The nerve and blood supply to the orbit, the autonomic innervation of the orbital structures, the visual pathway, and associated visual reflexes will also be taught. |

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| **Code** | HP4005 |
| **Title** | Healthcare Science in context |
| **Brief description** | This cross-disciplinary module provides students with an introduction to the study of human disease, exploring historical, social and scientific perspectives as well as an opportunity to explore how modern pathology services are structured and operated. For Ophthalmic Imaging students, this module will introduce students to the pathophysiology of diabetes and how NHS policy supports the prevention, management, and treatment of the disease. |

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| **Code** | HP4006 |
| **Title** | Cell and Molecular Biology |
| **Brief description** | This module teaches students about the basic building blocks of human biology including our molecular make-up. It contains an exploration of cell and tissue biology and the founding principles of genetics, embryology and human development which ensures that students receive the foundation knowledge needed to apply specialist concepts of scientific instrumentation, investigation of patient disease, and subsequent treatment therapies in latter modules. For Ophthalmic Imaging students, this module specifically explores how the cells of the eye reproduce under normal situations and how repair mechanisms and scarring can impact on cellular function and patient prognoses. |

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| **Code** | HP4007 |
| **Title** | Introduction to Ophthalmic Imaging |
| **Brief description** | This module provides students with an introduction to the routine tests used in ophthalmology such as Visual Acuity, Visual fields, intraocular pressure, Topography, Keratometry, and Fundus Imaging - stereo and colour fundus photography. The importance of the correct use and maintenance of equipment will also be introduced. |

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| **Code** | HP4008 |
| **Title** | Acquisition Optical Coherence Tomography Scans |
| **Brief description** | This module covers the principles of optical coherence tomography (OCT) scan capture and its place within ophthalmic practice. A timeline of the development of OCT as an imaging resource will be taught; with details of the principles of the 3 main types of OCT scanning - time domain, spectral domain and swept source technology. Specifically, students will gain a knowledge and understanding of the basis of capturing scans including those of the anterior segment, vitreo-retinal and choroidal structures of the eye, the advantages and disadvantages of each OCT scanning method, the principles and the impact of new and developing applications such as OCT angiography. The acquisition of high-quality OCT scans of the eye, which are appropriate and of sufficient quality to document the relevant disease or condition under investigation, will be given as will an understanding of the software and procedures to save, transmit and recall OCT scans and results. This will lead students to learning how to identify appropriate OCT scans for a variety of clinical conditions; explore technical limitations and quality issues including the risk involved in operating the equipment. Students will be shown how to acquire good quality optical coherence tomography (OCT) scans of the eye, relevant to various clinical conditions, and an understanding of use of local software to save and recall scan data results and learn how to subjectively evaluate scans for quantitative and qualitative interpretation and an understanding of the elements included in OCT reports. |

**What we expect of students at level 4**

During level 4, students areintroduced to the fundamental knowledge and skills that underpin Healthcare Science (Ophthalmic Imaging) practice. They will learn to demonstrate a sound understanding of normal anatomy and function and start to appreciate how this information relates to the techniques they are completing in a clinical setting. They will be able to show an awareness of professional legislation and quality standards, professional boundaries, ethical practice and the importance of effective communications in person-centred care.

**By the end of level 4, students should be able to:**

***Professional Practice***

1. Explain the relevant professional, ethical, social and communication contexts of Ophthalmic Imaging and evaluate the relevance of associated health and social care policy.
2. Explain and reflect on the requirements and obligations of an Ophthalmic Imager working as a healthcare science practitioner as set out by relevant Professional Statutory and Regulatory Bodies in their standards of proficiencies.
3. Comply with relevant healthcare legislation, professional codes of conduct, performance and ethics, and recognise scope of practice boundaries, while maintaining fitness to practice.
4. Demonstrate an inclusive, person-centred approach, acting in an ethical, caring and respectful manner to all individuals regardless of background.
5. Communicate scientific topics effectively with patients, carers, health professionals and the wider population.
6. Demonstrate safe working practices that maintain the health, safety, and wellbeing of self and others.

***Scientific and Clinical Practice***

1. Describe the relevant scientific and technical bases and contexts of the Ophthalmic Imaging discipline.
2. Demonstrate a systematic understanding of normal human structure and function and explain the dynamic relationship between health and disease.
3. Demonstrate the knowledge, skills, values, behaviours and competencies (including an awareness of the roles of other disciplines) required to participate at a basic level in routine Ophthalmic Imaging services.

***Research, Development, and Innovation***

1. Demonstrate a structured, evidence-based approach when presenting scientific information.

***Clinical Leadership***

1. Identify learning needs and take responsibility for their own continuous personal and professional development through personal action planning and reflective practice.
2. Demonstrate independent study skills.

### 3.6.2 Level 5- Working with others

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| **Code** | HP5001 |
| **Title** | Workbased Learning 2 |
| **Brief description** | This module builds on the training and competency assessment gained in year one. Specifically, students will learn the benefits of team working and multidisciplinary investigation. This module will assess the practical competencies required of a year 2 Ophthalmic Imaging Practitioner. |

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| **Code** | HP5002 |
| **Title** | Clinical and Professional Practice 2 |
| **Brief description** | This module builds on the clinical and professional expectations of a healthcare scientist as learned in year one. For Ophthalmic Imaging students, this module specifically allows students to explore the principles of quality management and how ophthalmic services can be improved through effective clinical governance procedures. |

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| **Code** | HP5003 |
| **Title** | Scientific and Technical Practice 2 |
| **Brief description** | This module builds on the scientific and technical skills learned in year one by expanding on research methods and the role they play in emergent technologies. For Ophthalmic Imaging students, this module specifically allows students to explore new and evolving ophthalmic technologies e.g point-of-care testing, heightening adoption of advanced testing equipment, artificial intelligence, software advancements and enhanced connectivity to provide quality level equipment and adaptive optics to foster in-vivo retinal imaging. |

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| **Code** | HP5004 |
| **Title** | Ophthalmic Imaging and Measurement |
| **Brief description** | This module gives students an understanding of the function, operation and characteristics of instruments used in Ophthalmic Imaging. In particular, students will learn principles and methods for capturing, recording, archiving and transmitting images of the eye using a variety of modalities and techniques. Overall, the module aims to build on the learning introduced in year 1, by covering advanced confocal scanning ophthalmoscopes (widefield and peripheral lesions), fundus autofluorescence, retinographies e.g. infrared/red free/multicolour. Students will learn how to assess the quality of images and measurements and recognise artefacts, and to adjust techniques to obtain the most appropriate results for the clinical purpose. |

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| **Code** | HP5005 |
| **Title** | Anterior Segment |
| **Brief description** | This module focusses on Anterior Segment Imaging and includes Anterior Segment Photography, Optical Coherence Tomography, Ultrasound Biomicroscopy, Specular Microscopy, the Pentacam, the Placido disc and Biometry of the Anterior Segment. A specific focus on the following anterior segment imaging investigations will be taught: Anterior segment photography, Anterior segment OCT, Clinical applications of Anterior  Segment, Ultrasound Biomicroscopy, Clinical Applications of Specular Microscopy, Clinical Applications of the Pentacam and Placido disc, and Clinical applications of biometry relating to the anterior segment. The student will be able to identify and interpret specific features relating to these clinical conditions. They will assess how recent investigations compare to previous investigations and how these may affect the course of treatment decisions and management of outcomes in clinical practice. The following investigations will be considered: Narrow angle glaucoma, Refractive Surgery, Preoperative assessment for patients undergoing a variety of surgery or treatments for corneal abnormalities, and Monitoring of pigmented lesions of the iris or angle. |

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| **Code** | HP5006 |
| **Title** | Interpreting and Analysing Data in Ophthalmic Science |
| **Brief description** | This module provides the applied scientific and technical learning needed to collect, interpret, and report patient data. The learning will be directed so students develop a high level of knowledge and understanding of some common abnormalities seen in clinical practice, which support the requirements for effective and relevant clinical OCT scanning and interpretation. Scan quality measures, normal variation, and or relating to refractive variation and common errors (e.g. segmentation and measurement errors) of OCT scanning equipment will be presented to assist in preventing misinterpretation of OCT scans. Students will also gain an understanding of how the use of OCT scans relates to clinical diagnosis and the treatment of eye conditions in Ophthalmology. |

**What we expect of students at level 5**

During level 5, students will build upon knowledge gained in level 4 by applying knowledge and skills learnt to a wider and more complex range of clinical situations. Students will be expected to begin recognising pathological changes within the results they obtain. They will look at basic patient pathways and how they can use diagnostic techniques to support patient investigation and subsequent outcomes. Specifically, they will develop their understanding of quality standards further; evaluating the limitations of investigative techniques and how this applies to clinical investigation. They will begin to show an ability to work effectively with others, contribute to evidence-based improvements, and use justifiable reasoning skills for their clinical decisions.

**By the end of level 5, students should be able to:**

***Professional Practice***

1. Respect and value cultural diversity and uphold the individual’s rights and beliefs.
2. Demonstrate good practice in data handling and information governance in line with national and local policy.
3. Demonstrate effective and empathetic communication of a range of scientific and clinical topics using a range of appropriate media, in individual and collaborative contexts.

***Scientific and Clinical Practice***

1. Explain and critically analyse a range of scientific principles, the pathological processes and clinical features of a range of medical conditions encountered within Ophthalmic care and understand the role Ophthalmic Imaging plays in patient pathways.
2. Demonstrate an ability to adapt communications when informing others, including service users, carers, and other healthcare professionals, of a range of complex Ophthalmic Imaging results.
3. Demonstrate a range of competencies related to the management of complex Ophthalmic Imaging cases, including quality assured investigation, decision-making/interpretation, problem solving and identifying the need for further management or onward referral of service users to other healthcare disciplines.

***Research, Development, and Innovation***

1. Describe and apply basic methods used for research, audit and service evaluation and critically evaluate the evidence-base for relevant practice in Ophthalmic Imaging.
2. Demonstrate skills in research and critically evaluate sources of evidence relevant to clinical practice.

***Clinical Leadership***

1. Demonstrate project management skills (as applicable to the role) which either directly or indirectly leads to improvements in patient experience, clinical outcomes and scientific practices.
2. Work as part of a team to successfully deliver healthcare objectives.

### 3.6.3 Level 6- Improving Healthcare

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| **Code** | HP6001 |
| **Title** | Work-Based Learning 3 |
| **Brief description** | This module finalizes the year one and two training and competency assessment required to enable registration with the Academy of Healthcare Science. Students will be expected to work autonomously to manage complex patient clinics; recognizing personal limits of practice as appropriate. Students will also experience front-line leadership duties through mentorship of junior members of staff. This module will assess the practical competencies required of a year 3 Ophthalmic Imaging Practitioner. |

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| **Code** | HP6002 |
| **Title** | Clinical and Professional Practice 3 |
| **Brief description** | This module increases understanding and application of patient-centred care, safe practice, and multi-disciplinary team working to support patient pathways. Ophthalmic Imaging students will learn about the benefits of multi-disciplinary teams and how they support patient care. Specifically, students will act with minimal supervision to carry out complex diagnostic ophthalmic/optometric tests and make appropriate referrals in accordance with identified pathways and protocols. |

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| **Code** | HP6003 |
| **Title** | Scientific and Technical Practice 3 – Research Project |
| **Brief description** | This module provides students with the opportunity to carry out an in-depth research project in an area of personal interest and relevant to their ophthalmic imaging field. Students will be supported by a project supervisor during their research project who will provide additional support around the complexities of producing a project proposal and gaining ethics approval, where required. The project supervisor will be decided with the students’ practice educator and may be a member of the academic team or practice team. Ethics approval decisions will be made by the University via an ethics approval panel. |

|  |  |
| --- | --- |
| **Code** | HP6004 |
| **Title** | Complex Diagnostic Testing |
| **Brief description** | This module provides the knowledge and understanding of specialised ophthalmic/optometric diagnostic tests and procedures. Tests will include, but not necessarily be limited to, Goldmann, Perimetry (static and kinetic techniques), Ocular Ultrasound techniques (A and B scan), and Colour vision testing. |

|  |  |
| --- | --- |
| **Code** | HP6005 |
| **Title** | Ophthalmic Angiography |
| **Brief description** | This module provides the knowledge of the methods and techniques used to undertake angiographic investigations and those which do not require the use of contrast media. Students will learn the principles and techniques for obtaining angiographic images this will include the anterior segment and fundus with a fundus camera and scanning laser ophthalmoscope, the digital processing of images and image analysis for treatment, the anatomic concepts of fluorescein and indocyanine green (ICG) angiography, the physical and pharmacological properties of fluorescein sodium and ICG fluorescent contrast media, and the method for IV cannulation and administration of IV contrast medium. Students will also consider methods and techniques for assessment of a patient with medical retinal disease, including diabetic retinopathy and ARMD, how these can distinguish different forms of medical retinal disease, and treatment of these conditions. |

|  |  |
| --- | --- |
| **Code** | HP6006 |
| **Title** | Advanced Ophthalmic Investigations |
| **Brief description** | This module provides an introduction to more advanced specialised ophthalmic investigations as used in emerging patient disease. Investigations will include, but not necessarily be limited to, Micro Perimetry, Imaging Modalities, Slit Lamp, Fluorescein and ICG interpretation, Electro-diagnostics, A and B Scan capture, Scanning Confocal Ophthalmoscopes, Portable imaging devices, Tonometry (non-contact & applanation), and Autorefraction. |

**What we expect of students at level 6**

At level 6, the focus is upon integration of clinical concepts and critical evaluation. Students are encouraged to be a critical thinker, aiming to seek high quality sources of information and questioning validity. They are expected to be able to review clinical techniques in combination; being able to recognise how different techniques complement each other and aid in onward patient care. Students are encouraged to question practice and consider how emerging Ophthalmic techniques might change the future of clinical practice. There is also a greater emphasis on independence, by prioritising and managing clinical workloads and leading junior members of staff.

**By the end of level 6, students should be able to**:

***Professional Practice***

1. Assist Ophthalmologists using a range of Ophthalmic Imaging techniques as appropriate to individual patient need and own limits of practice.
2. Work within a multidisciplinary team of Healthcare professionals to deliver patient-centred outcomes based on appropriate Ophthalmic Imaging results.
3. Demonstrate clinical and professional competencies at a graduate-level Healthcare Science Practitioner as outlined in Professional Statutory and Regulatory Body standards of proficiencies and codes of conduct (including those defined by Good Scientific Practice).
4. Demonstrate effective workload planning and time management skills and be resilient and adaptable to the changing pressures and priorities within healthcare.

***Scientific and Clinical Practice***

1. Explain and critically analyse a range of scientific principles relevant to the use and interpretation of more advanced Ophthalmic Imaging procedures to enable safe and effective patient management across Ophthalmic services.
2. Demonstrate skills in the use of information technology and the application of numeracy skills to a practice context.

***Research, Development, and Innovation***

1. Critically appraise potential innovations and their relevant evidence base in the field of Ophthalmic Imaging and broader healthcare settings.
2. Demonstrate skills required to undertake a small-scale independent research project in a specific area of Ophthalmic Imaging, such as critical appraisal of evidence, application of research methods, scientific and technical thinking, problem-solving and communication skills.

***Clinical Leadership***

1. Show a commitment to continuing personal and professional development and life-long learning by critically reflecting on own practice and that of others within and outside Ophthalmic Imaging.

Show emerging skills in clinical leadership, management and service innovation.

# 4.0 Expectations that we hold for student performance and behaviour

Students are advised from the outset that they are studying to become a professionally registered Healthcare Science Practitioner and therefore their programme requires them to behave in a professional manner, take responsibility for their own learning journey and treat those around them with compassion.

Students are directed to the [Student Charter](http://www.glos.ac.uk/life/pages/student-charter.aspx) which sets out the standards of service that students can expect from the University of Gloucestershire together with expectations that the University reasonably has of its students.

Conduct of students preparing to register as Healthcare Science Practitioners should include due care and attention to the appropriate use of social media, thinking through issues and acting professionally, ensuring public protection at all times. Please read the Academy of Healthcare Science [Guidance for the use of Social Media.](https://www.ahcs.ac.uk/registration-guidance/dsocial-media-guidance-for-registrants/)

## 4.1 Professional Practice Regulations

All professional programmes are validated by their governing regulatory body. Ophthalmic Imaging staff are governed by the Academy of Healthcare Science Good Scientific Practice Standards (2025), Standards of Proficiency for Healthcare Science Practitioners (2019) and Ophthalmic Science Practitioners (2020). Students are required to recognise and adhere to these professional standards throughout their studies and in their personal lives. Failure to adhere to them may impact on their ability to complete their studies, their fitness to practice, and their ability to register with the Academy of Healthcare Science. Details of these professional standards can be found [here](https://www.ahcs.ac.uk/standards/). Students are also expected to adhere to the codes of conduct within their clinical setting. These should be shared with the student during their practice induction.

Failure to meet expected standards of conduct may result in a student being referred to the Faculty Fitness to Practice Committee. The committee responds to concerns about professional conduct raised regarding students. The committee is designed to ensure students are fit for registration and fit to practice. A referral to this Committee may be due to conduct demonstrated whilst at University, whilst on site at Gloucestershire Hospital, whilst in a practice setting, or whilst away from either of these activities, for example during their personal time.

Concerns regarding practice areas should always be brought to the attention of the University link tutor or personal tutor in the first instance.

# 5.0 Practice-Based Education

The University of Gloucestershire and employers are working collaboratively to ensure the course is designed to give a high-quality multi-disciplinary experience; for students, clinical partners and the University of Gloucestershire. It is important to recognise that practice education is gained through employer-led sessions. For **Direct-entry** students, this time is scheduled as periods of ‘practice-based education’: 10 weeks in year 1, 15 weeks in year 2, and 25 weeks in year 3. For **Apprentices**, the practice-education is ongoing whilst working in their recruiting department.

The aim of the practice-based learning is to ensure that, by the time of graduation, students can appropriately integrate theory and practice to the standard expected of a Healthcare Science Practitioner. These standards have been mapped to the practice-based modules and, as such, practice-education is focused on students achieving the learning outcomes from these workbased learning modules: HP4001, HP5001, and HP6001. Module assessments are not based on numbers of practice hours achieved but rather competency-based achievements that are assessed within the learner’s portfolio submission.

In order to provide a well-rounded Healthcare Science experience, students are asked to visit different fields of practice during their practice-education time. These visits will supplement the students’ understanding of the wider Healthcare Science profession as well as recognise the benefits of multi-disciplinary working within their own area or practice. Visits could include, but is not exhaustive of, the following areas:

* A&E
* Audiology,
* Biochemistry,
* Blood transfusion,
* Cardiology,
* Cytology,
* Dermatology,
* Diagnostic imaging,
* Endocrinology,
* Gastroenterology,
* Genetics,
* General imaging,
* Gynaecology,
* Haematology,
* Histocompatibility and Immunogenetics,
* Histology,
* Immunology,
* Medical physics,
* Microbiology,
* Nephrology,
* Neurology,
* Oncology,
* Radiography,
* Respiratory medicine,
* Rheumatology,
* Urology,
* Virology

In order to complete their programme, and be eligible to apply for AHCS registration, students must pass all elements of the practice-based modules. If they miss any clinical time, and fail to complete their workbased learning module assessments, they will have to arrange additional practice education to enable the modules to be retaken. The mark for the reassessment will be capped at an overall module grade of 40% and there may be a delay with your graduation from the degree programme.

Any student who fails their second attempt at the workbased learning module assessments will be withdrawn from the BSc (Hons) Healthcare Science (Ophthalmic Imaging) programme and may either be transferred onto another programme of study or exit the university with an interim award that does not allow eligibility to apply for AHCS registration.

## 5.1 The Role of the Practice Educator

Your role of Practice Educator is to support and facilitate students learning whilst in the practice setting. You will act as the first point of contact for students during the practice-based education period and support them in developing as an autonomous practitioner. They will meet with you on a monthly basis to discuss their progress and any concerns you, or the student, may have. See **Appendix 1** for the outline of the meeting discussion.

The practice educator should:

* Read the Practice Educators handbook and Practice Assessment Documents and be familiar with its contents and the roles and responsibilities of all concerned.
* Arrange an induction to the practice setting, and facilitate integration with other team members
* Assist the students in their personal development planning Task
* Act as the ‘line manager’, overseeing the day to day management of the student’s work
* Allocate the level, amount and type of work in consultation with the student and the guidance for level of study for their degree programme.
* Provide the student with day to day advice and support.
* Contribute to the completion of practice-based paperwork.
* Undertake observed practice, case based discussions, question and answer sessions and support reflective practice.
* Support and/or contribute to the teaching and assessment of the student.
* Oversee and monitor the implementation of any action plans to ensure that sufficient opportunities are provided to enable the student to develop as required.
* Participate in the evaluation and monitoring of the course by completing the Practice Educators survey
* Attend University workshops for Practice Educators as required.

## 5.2 The Role and Responsibilities of the Student

Students are advised of their role and responsibilities when on placement and are provided with the following guidance:

* Identify own learning needs and make full use of all available learning opportunities.
* Demonstrate professional behaviour at all times in accordance with your practice setting code of conduct.
* Act in accordance with all local policy and procedures.
* Undertake direct work under the instruction and supervision of the Practice Educator.
* Develop the capability to work with increasingly complex situations commensurate with the level of the practice setting.
* Develop autonomy in making professional judgements and decisions commensurate with the level of the practice setting.
* Prepare for, attend and participate in all training and team meetings.
* Utilise the knowledge, values and skills of perioperative practice to the best of their ability.
* Seek appropriate support, guidance and supervision where needed
* Develop as a reflective practitioner using verbal and written feedback to improve or adapt practice.
* Notify the Practice Educator of any significant change in your personal or professional circumstances which may impact on their practice.
* Discuss with the Practice Educator any concerns that you have about the practice setting prior to raising any concerns more formally with your Link Tutor or Module Tutor.
* Raise any concerns concerning practice that you observe within the practice setting with the team manager prior to formally using agency whistleblowing policy.
* Complete and submit all practice setting paperwork and assessment requirements by due or agreed dates.
* Comply with confidentiality and anonymisation protocols.

## 5.3 The Role of the Placement Link Tutor

For each practice-based period, the student will be assigned to a link tutor. This is an academic member of staff who will liaise with the student and with you during the practice-based period. They will also make regular visits to the practice setting. When the link tutor visits, students will have the opportunity to discuss their progress and any concerns with them. Every 8-12 weeks they have the opportunity to meet with both link tutor and Practice Educator for further discussions and raise any concerns from a clinical or academic viewpoint.

If you have any concerns regarding the student, you do not need to wait until this time to contact the University. Any concerns you wish to raise regarding the student should be made by following the ‘Raising Concerns’ process as featured at the [Practice Education Support website](http://www.glos.ac.uk/academic-schools/health-and-social-care/practice-support/Pages/practice-support.aspx).

## 5.4 Practice Education Website

The [Practice Education Support website](http://www.glos.ac.uk/academic-schools/health-and-social-care/practice-support/Pages/practice-support.aspx) is where you will find all the relevant policy and guidance on practice education across the School of Education, Health and Sciences. There is information on each degree programme, policies and procedures, raising concerns, training and updates. Within the Healthcare Science (Ophthalmic Imaging) section, you will be able to specifically access course information, the student course handbook, student practice handbook, Practice Educators handbook, and Practice Assessment Documents; amongst other relevant paperwork.

## 5.5 Managing a failing student

If a student is experiencing difficulties during their practice-based period, or you wish to raise concerns about the student, please do this as soon as possible so that the issues can be addressed where possible. In the first instance you should attempt to raise the concerns directly with the student with a view to finding an informal resolution. If the matter cannot be resolved informally, please follow the ‘raising concerns’ process and contact the University via [practicesupport@glos.ac.uk](mailto:practicesupport@glos.ac.uk)

Useful policy links are below:

* [**Policy-Raising concerns**](https://www.glos.ac.uk/practice-support/raising-concerns/)

# 6.0 Practice-Based Activity

## 6.1 Activity at Each Level of Study

Practice-Based Tasks vary between academic levels and are outlined within the Practice Assessment Document. To achieve the practice-based learning, you should provide each student with a practice plan appropriate to their level of study. As Practice Educator, you are responsible for planning the student’s time during their placement period. The structure of a practice plan will vary between settings and across the three levels of study. To gain a realistic experience, all year groups are expected to work the shifts of their practice setting.

## 6.2 Inter-professional Learning

Many practice settings have opportunities for the student to participate in inter-professional learning to improve students understanding of the scope of practice and skills of other professions. Although students are encouraged to seek out these opportunities for themselves, they may need some assistance and guidance at times.

The aims for Inter-professional learning are to:

* + - Improve understanding of the roles of other health and social care professions
    - Participate effectively in inter-professional approaches to health care
    - Understand the need for a high level of communication between and within professional groups and service users and carers.
    - Recognise the similarities and differences in assessment and management of patients by other professionals

## 6.3 Attending meetings and training

Students should fully participate in the daily practices of the Ophthalmic Imaging role and be able to join in appropriate team meetings, case conferences, handovers, in-service training or other meetings.

## 6.4 Study time during the practice period

The Practice Educator may allocate the student personal study time during the practice period. This could be for preparation of presentations, case study analysis or formal reflection upon learning experiences. Students should be aware that this time is allocated at the discretion of the Practice Educator and is likely to vary between placement settings. You may set specific work for them to achieve in this time, for example, investigating a particular treatment approach or medical condition.

# 7.0 Practice Guidelines

The following sections give you guidance about how to manage and structure the practice period.

## 7.1 Prior to the Student arriving

Students will receive your preferred contact details once they have been assigned to your practice setting. They are asked to contact you before their start date to arrange start time etc.

It may be helpful to have an information sheet to provide to the student prior to commencing to outline any relevant information. You could consider the following as a guide:

1. Where to report to on their first day and whom to ask for
2. Hours of work expected
3. Parking/Travel arrangements
4. Any essential reading or revision
5. Uniform guidance e.g. footwear.
6. Facilities at workplace e.g. showers, café, library.
7. Useful information on the department
8. How to report absence

## 7.2 Induction to the Practice Setting

You should organise the student/s an induction programme on arrival to the practice setting. This needs to include all the health and safety information students require in order to be able to work safely in that environment. This should include the following:

* Contact details for the Practice Educator and department
* The procedure for reporting sickness and absence
* Fire safety
* Infection control policy relevant to the setting
* Manual handling guidance
* Setting-specific advice e.g. how to use telephones, equipment, where notes are located
* Incident reporting procedures

You may have your own organisational induction policies. These are perfectly acceptable to use, however where needed, an example induction checklist, is included in **Appendix 2.**

# 8.0 Assessment of Clinical Placement

## 8.1 Assessment

The student’s practice will be assessed in various parts, with the production of a practice portfolio at the end of the year. As the Practice Educator, you will assess whether the student’s portfolio has reached the correct standard and this pass/fail mark will be linked to their practice-based learning modules (Level 4 – HP4001, Level 5 HP5001 and Level 6 HP6001). In order to complete and pass the portfolio element of these practice=based modules, students will need to complete all assessment parts:

**Part 1 – Continuous Personal and Professional Development**

A log of the student’s initial personal development plan and subsequent continuous personal and professional development is required here. Students are required to work with you to formulate their initial development plan. Their practice plan can be designed from this and will help the learner determine different development activities throughout their practice period. Students are asked to reflect on their progress against their plan as well as any adhoc learning opportunities. At the end of the practice period, you are asked to review and feedback on the learner’s performance overall and against the initial plan. Their summative submission should include an initial assessment plan and CPPD log with reflections.

**Part 2 – Ophthalmic Imaging Techniques Logbook**

A log of Ophthalmic Imaging techniques is required for this part of the practice-based education. There are different techniques required for each of the different academic levels to ensure progressive learner development is captured. All numbers for each technique will need to be completed and the record entered into the portfolio for summative assessment. There is an expectation that at least half of these numbers will be completed unassisted. **Table 1.** defines ‘unassisted’ for each academic Level. The blue font highlights those additional requirements as students progress.

**Table 1:** Expected requirements for ‘unassisted’ performance per Academic Level

|  |  |  |
| --- | --- | --- |
| **Unassisted expectations per Academic Level** | | |
| **Level 4 (Year 1)** | **Level 5 (Year 2)** | **Level 6 (Year 3)** |
| * accurately select the equipment needed for the technique, * prepare the equipment and the patient for the technique; including checking the equipment and environment is safe, confirming patient identification, and gaining patient consent * accurately complete the technique * accurately record the results | * accurately select the equipment needed for the technique, * prepare the equipment and the patient for the technique; including checking the equipment and environment is safe, confirming patient identification, and gaining patient consent * accurately complete the technique * accurately record the results * consider quality standards and limitations of the technique * recognise basic pathological findings | * accurately select the equipment needed for the technique, * prepare the equipment and the patient for the technique; including checking the equipment and environment is safe, confirming patient identification, and gaining patient consent * accurately complete the technique * accurately record the results * consider quality standards and limitations of the technique * recognise complex pathological findings * interpret the pathological implications of the results on the patient * identify any additional techniques needed to support overall patient management |

It is important to recognise that the log is asking you to confirm the numbers of experienced techniques and not that the student is able to carry out the activity fully unsupervised.

**Part 3 – Clinical Practice Activities**

There are a number of clinical practice activities for students to achieve throughout each year. Each of these activities link to specific learning outcomes. Once students have completed each activity, you will need to provide formative feedback on their learning. Should their learning require any improvement then you should advise the student how they might improve their work. Providing effective feedback to students is an important but not always an easy task. Students should always be provided with feedback in a constructive manner, highlighting the good points as well as the areas that need improvement. Feedback TEMPLATES to support these activities can be found within the Practice Assessment Document.

Students will be given an opportunity to improve their work before it needs to be entered into their portfolio as a finished piece of work. At the end of the year when the student’s portfolio is handed in, you will decide if they have made the necessary amendments and if their work is suitable to be passed.

**Part 4 – Feedback**

We recognise that receiving feedback is an excellent way for students to develop into competent practitioners. As well as the feedback they receive from you, there are additional requirements for feedback built into the practice-based education. These are:

* Level 4 (Year 1) – feedback from service users
* Level 5 (Year 2) – feedback from colleagues
* Level 6 (Year 3) – feedback from delegates

Feedback TEMPLATES to support these activities can be found within the Practice Assessment Document. We ask that you support the facilitation of these on behalf of the student so that the feedback is anonymous.

Feedback does not have to reach a certain standard but rather should be used to help the student learn and develop themselves. Once it has been completed, students should reflect on the content and add to their summative submission.

**Completed Portfolio submission**

Once a student has completed their portfolio, they will hand it in to you for a final assessment and be awarded an overall pass or fail. An assessment checklist will be provided for you to indicate whether any sections have not been passed or are incomplete. If they have not passed it at first attempt, they are able to retake the failed element.

## 8.2 Practice setting Debrief for Students

On return to University, students will undertake a practice setting debrief session with their module leader in a small group setting. The aims of the session is to discuss their experience within the practice setting and share any significant events, positive and negative experiences. The small group setting allows students to share their experiences with other students, learning from positive and negative events and discuss their feelings about future practice-based education. The module leader will facilitate their discussions in a non-judgemental way and assist students in thinking about their reflection on the practice period and how they can set an action plan for their future practice-based education.

# 9.0 Procedures for Reporting Absence

As part of the induction process, please advise students of how to report absence during their practice-based period. The students are provided with the information below to help guide them on reporting absence for University activity and placement

**Students are advised to:**

1. contact the practice setting directly on their telephone number or otherwise agreed absence reporting system
2. ask to speak to the member of staff who is expecting you
3. inform them of your absence and likely return date if possible
4. Email the practice setting team with the date, time and whom the absence has been reported to include a likely return date if you are able to do so.

Please be aware that if the practice setting is severely concerned about your absence they will contact the Academic Course Lead immediately, or, if out of hours, will call the on-call University Manager.

In all cases you should ensure that you document the name of the person you reported sick or absence to, as well as the date and time, and share this with your Personal Tutor. It is important that absence is kept to a minimum and you should see your lecturers on your return, to ensure that you can catch up with missed work. Failure to adhere to the procedure will result in an unauthorised absence being recorded and this could impact on your ability to finish the course of study.

It is also important that you inform us if you feel that there are circumstances that may impact on your performance more generally. This might include health issues, personal issues or general difficulty with your programme. You may discuss any worries you have with your Personal Tutor at any point during your studies. The Students’ Union and University Student Services Department are also there to provide advice and support.

# 10.0 Evaluation of Practice Settings and Quality Assurance

All practice settings will have an annual educational audit to quality assure the learning experience in practice and comply with professional requirements. The audit and online setting profile that both educators and students can use as a resource, will be produced for each practice area. Quality monitoring of practice settings will be reported through the Placements Partnership Board. **Appendix 3.** lists the requirements of the practice setting.

At the end of the practice-education period, the student and the Practice Educator are encouraged to evaluate the practice setting. This helps with the moderation of the quality of the practice setting and the quality of the student, and the University support system. We strive to keep our standards high and gaining insightful feedback will help us continually improve our performance. A summary report of practice setting evaluation is produced annually and shared with clinical partners.

# 11.0 Supporting Students with Disabilities

Students who have declared a disability will be supported by the Student services team at the University during their studies. The team offer a confidential, one-to-one support service for students who have a disability, dyslexia or have additional learning needs. The areas of support provided by the Disability Advisers include:

* Advisory visits to University prior to formal application
* Advice on diagnostic and medical assessments (including dyslexia & other specific learning difficulties)
* Assistance with application for the Disabled Students' Allowance (DSA)
* Provision of note takers, study skills tutors and communicators
* Links with outside agencies concerned with disability issues
* Advice on disability access
* Disability awareness training
* Liaison with academic staff and student services regarding support

A student who has a disability will be asked for their permission to share the details of their disability with the practice setting. If they provide consent you will be informed of the details of their disability and any support mechanisms in place to manage the situation. Further advice and support can be accessed at any time by contacting the link tutor.

# 12.0 Practice Educators Course

The University of Gloucestershire runs annual practice education courses for health professionals (physiotherapy, adult nursing, mental health nursing and paramedic science). The online course contains generic (multi-professional) and discipline-specific sessions to ensure all clinical staff involved in practice-based activity are suitably prepared to take students within their practice-setting and familiar with the practice-based paperwork and procedures. All staff receiving students will need to complete the University’s practice education course. Educators who have completed the course at other institutions will attend a shorter version of the course.

Further support on anything related to practice-based education can be accessed at any time on the [practice education support website](http://www.glos.ac.uk/academic-schools/health-and-social-care/practice-support/Pages/practice-support.aspx). Alternatively, you can contact the academic link tutor for more support.

# Appendix 1: Discussion Points for Meeting between Practice Educator and Student

|  |  |
| --- | --- |
| Individual discussion with Practice Educator | |
| Practice Educator name:  Date of Meeting: | |
| Feedback on student progress to date |  |
| Any concerns raised? |  |
| Further support required |  |
| Practice Educator Signature |  |
| Student Signature |  |

# Appendix 2: Induction Checklist for Placement Activity

**Day 1**

1. Orientate students to the placement setting

|  |  |
| --- | --- |
| **Activity** | **Tick** |
| Working hours/pattern expected/lunch/breaks |  |
| Access to the department/ward |  |
| Introduce staff |  |
| Orientate to area- fire exits, toilets, lockers, canteen, library, parking etc. |  |
| Emergency procedures- fire, cardiac arrest, emergency bells |  |
| Relevant policy – manual handling, infection control |  |
| How to report absence/sickness |  |

2. Getting to know the student.

|  |  |
| --- | --- |
| **Activity** | **Tick** |
| Ask about previous experience |  |
| Ask student about personal development objective/ideas |  |

3. Getting to know you.

|  |  |
| --- | --- |
| **Activity** | **Tick** |
| Discuss your career to date |  |
| Outline your expectations of them during the practice period |  |
| Discuss how they would raise and issue or concern with you |  |
| Discuss possible learning opportunities |  |
| Discuss typical working day |  |

# Appendix 3: Practice Setting Requirements

**Practice Setting Requirements – Self Assessment TEMPLATE**

This form should be completed for each practice setting and sent to [practicesupport@glos.ac.uk](mailto:practicesupport@glos.ac.uk) for review. Where the Practice setting requirements are not fully met, the practice support team will work with you to identify corrective actions prior to students allocation.

Section One – Practice Setting Details

|  |  |
| --- | --- |
| Manager name: |  |
| Department name: |  |
| Organisation/Trust Name: |  |
| Address: |  |
| Manager Email address: |  |
| Manager Tel contact: |  |

Section Two – Existing Practice Training Commitments

|  |  |  |  |
| --- | --- | --- | --- |
| Do you provide laboratory-based placements for university students? | | | |
| YES |  | NO |  |
| **If Yes, please provide the following details:** | | | |
| Training course: |  | | |
| Number of Students: |  | | |
| Length of Training period: |  | | |

Section Three – Staff Details

|  |  |
| --- | --- |
| Ophthalmic Imaging Staff Numbers: |  |
| Training completed: Ophthalmic courses, GOC, Assessor Training/other training qualifications *(Please specify)* |  |

Section Four – Policy Details

|  |  |  |  |
| --- | --- | --- | --- |
| **Policy Requirements** | **Location** | **Confirmation** | |
| **Yes** | **No** |
| Induction Policy (Organisation wide) |  |  |  |
| Induction Policy (local) |  |  |  |
| Equality and Diversity Policy |  |  |  |
| Safeguarding Policy |  |  |  |
| Health and Safety Policy |  |  |  |
| Training Policy |  |  |  |

Section Five – Self-Assessment

|  |  |  |
| --- | --- | --- |
| **Requirements** | **Confirmation** | |
| **Yes** | **No** |
| There are adequate resources to support a meaningful training experience and enable Ophthalmic Imaging Practice Assessment |  |  |
| There is a safe and supportive environment for training and development of staff |  |  |
| There is a structured practice-based training programme which supports the academic teaching and enables students to gain a rounded experience |  |  |
| Training will be undertaken by staff with the relevant expertise in accordance with standard protocols:   * Practice Educators = 5 years or more experience of Ophthalmic Imaging in clinical practice and Healthcare Science role awareness * Mentors = 2 years or more experience of Healthcare and Healthcare Science role awareness |  |  |
| There is a named person with overall responsibility for the practice-based training and assessment (Practice Educator) |  |  |
| In-house or external training is available for staff assisting in the training process |  |  |
| There is a structured induction for each student |  |  |
| Clear lines of accountability are in place for the management and governance of practice-based education |  |  |
| Students are provided with time for study and reflection |  |  |
| Students have the opportunity to engage with Service users |  |  |
| Students have the opportunity to engage with wider Healthcare Science Professions |  |  |
| Students have the opportunity to engage with Multidisciplinary Team Meetings |  |  |
| There are regular training review systems in place |  |  |
| Prompt student feedback is given |  |  |
| Students have the opportunity to learn the following techniques *(Either within the department of by rotation):* |  |  |
| * Perform Visual Acuity Testing using a range of techniques |  |  |
| * Perform basic and complex Visual Field Testing e.g. Humphrey vs. Goldmann |  |  |
| * Perform Fundus Photography Imaging |  |  |
| * Perform Optical Coherence Tomography Scan |  |  |
| * Perform Intra Ocular Pressure Testing |  |  |
| * Perform Autorefraction Testing |  |  |
| * Perform Focimetry Testing |  |  |
| * Perform Keratometry Testing |  |  |
| * Perform Corneal Topography test |  |  |
| * Perform Optical Biometry |  |  |
| * Perform Fundus Autofluorescence Imaging |  |  |
| * Perform Anterior Segment Optical Coherence Tomography Scan |  |  |
| * Perform Specular Microscopy |  |  |
| * Perform Anterior Segment Ultrasound Biomicroscopy |  |  |
| * Perform Ultrasound A and B scans |  |  |
| * Perform Fluorescein Angiography and Indocyanine Green Angiography |  |  |
| * Perform Optical Coherence Tomography ​Angiography |  |  |
| * Perform Slit Lamp Biomicroscopy |  |  |

Section Six- Final Declaration:

The signatory of this form will be considered the primary link and contact for the Practice Support Team. It can be the manager or training lead.

|  |  |
| --- | --- |
|  | I confirm the details provided within this document are accurate. |
|  | I understand that the University will undertake annual auditing against the practice setting requirements. |
|  | I also understand that the University may undertake a visit to assess training as part of the auditing procedure. |

|  |  |
| --- | --- |
| Print Name: | Signature: |
| Job Title: | Date: |

# Appendix 4: Halfway Appraisal TEMPLATE

This TEMPLATE should be used to record a student’s progress against expectations during their Workbased Learning Module. It may be helpful to refer to the Practice Assessment documentation and the Marking RUBRICS/Grids as reference for the appraisal. The student should keep a copy of their halfway appraisal within their Practice Portfolio.

You **do not** need to provide the student with a grade for each section, only an overall midway assessment grade.

**NB:** *This paperwork acts as a formative assessment and does not count towards the summative assessment mark.*

|  |  |
| --- | --- |
| **Criteria** | **Feedback** |
| **Clinical and Professional Practice** |  |
| **Scientific Practice** |  |
| **Research, Development and Innovation** |  |
| **Clinical Leadership** |  |
| **Reflective Practice** |  |

|  |  |
| --- | --- |
| **Halfway Appraisal Mark (%):** |  |

**To be completed by the student:**

|  |  |
| --- | --- |
| Review of Current Personal Development Actions |  |
| Updated Personal Development Actions |  |

|  |  |
| --- | --- |
| Student signature and date: |  |
| Practice Educator signature and date |  |
| Link Tutor signature and date |  |

# EXAMPLE Summative Assessment Marking Grid (HP4001)

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **FEEDBACK** | | | | | | | | |
| **What we asked for** | | **How you did** | | | | | | |
| **Core Skills** | **Indicators of Excellence** | **Fail** | | **3rd** | **2.2** | **2.1** | **1st** | |
| **0-29** | **30-39** | **40-49** | **50-59** | **60-69** | **70-84** | **85-100** |
| **DOMAIN 1 – PROFESSIONAL PRACTICE** | | | | | | | | |
| Professional Practice – Understand and respect roles of team members | * Consistently demonstrates understanding of the roles of the department |  |  |  |  |  |  |  |
| Professional Practice – Professional conduct | * Consistently upholds local policies. Takes responsibility regarding dress code/use of devices/reporting absence |  |  |  |  |  |  |  |
| Professional Practice – Professional Skills and Behaviours | * Consistently follows organisational policy regarding health and safety, consent, privacy, dignity and respect of colleagues and/or people using the service. Demonstrates ability to consider interests of others and promote equity without support |  |  |  |  |  |  |  |
| Professional Practice – Ability to adhere to professional standards | * Demonstrates understanding of Good Scientific Practice. Consistently relates to own practice with support |  |  |  |  |  |  |  |
| Professional Practice – Communicating with people using the service and their families/carers | * Consistently uses the personal narrative to influence practice with support. Consistently adapts communication style to the needs of the recipient without support |  |  |  |  |  |  |  |
| Professional Practice – Build effective team relationships | * Consistently demonstrates ability to build effective relationships within the immediate team without support. |  |  |  |  |  |  |  |
| Professional Practice – Documentation | * Demonstrates understanding of Good Documentation Practice |  |  |  |  |  |  |  |
| **DOMAIN 2 – SCIENTIFIC PRACTICE** | | | | | | | | |
| Scientific Practice – Reporting | * Consistently reports on basic techniques in a timely manner with support |  |  |  |  |  |  |  |
| Scientific Practice – Technical proficiency | * Consistently develops and maintains basic technical proficiency |  |  |  |  |  |  |  |
| Scientific Practice – Health and Safety | * Consistently participates in health, safety, and risk assessment procedures as an integral part of service |  |  |  |  |  |  |  |
| Scientific Practice – Quality assurance | * Consistently participates in basic quality assurance processes with support |  |  |  |  |  |  |  |
| **DOMAIN 3 – CLINICAL PRACTICE** | | | | | | | | |
| Clinical Practice – Professional Reasoning | * Consistently obtains informed consent from individual parties |  |  |  |  |  |  |  |
| Clinical Practice – Diagnostic interpretation | * Consistently interprets and advises on basic diagnostic data |  |  |  |  |  |  |  |
| Clinical Practice – Clinical reasoning | * Consistently understands clinical analysis and/or advice given by senior members of the team |  |  |  |  |  |  |  |
| Clinical Practice – Patient surveillance | * Consistently refers patients to the most appropriate healthcare professional or service with support |  |  |  |  |  |  |  |
| Clinical Practice – Multidisciplinary working | * Understands the work of the team in multi-disciplinary clinical meetings |  |  |  |  |  |  |  |
| **DOMAIN 4 – RESEARCH, DEVELOPMENT, AND INNOVATION** | | | | | | | | |
| Research, Development, and Innovation – Evidence informed practice | * Consistently able to source appropriate evidence to inform routine practice with support |  |  |  |  |  |  |  |
| Research, Development, and Innovation – Service development | * Consistently recognises where own practice can be improved |  |  |  |  |  |  |  |
| **DOMAIN 5 – CLINICAL LEADERSHIP** | | | | | | | | |
| Clinical Leadership – Ability to advocate for self and others | * Consistently demonstrates importance of self-awareness, emotional intelligence and resilience with support |  |  |  |  |  |  |  |
| Clinical Leadership – Ability to recognise rights & responsibilities of self and others | * Consistently takes responsibility for own health and well-being with support |  |  |  |  |  |  |  |
| Clinical Leadership – Ability to identify own learning needs | * Consistently aware of own learning needs and adopts strategies to enhance professional development with support |  |  |  |  |  |  |  |
| Clinical Leadership – Preparation for supervision | * Consistently takes responsibility for personal review/supervisory meetings |  |  |  |  |  |  |  |
| Clinical Leadership – Managing workload | * Consistently able to plan, organise, and prioritise workload using appropriate resources with support |  |  |  |  |  |  |  |
| Clinical Leadership – Ability to modify actions | * Can evaluate impact of actions on themselves and others with support |  |  |  |  |  |  |  |
| ***Please indicate the student’s overall performance grade*** | | Inadequate  (0-39%) | | Adequate  (40-49%) | Satisfactory  (50-59%) | Good  (60-69%) | Excellent  (70-84%) | Outstanding  (85-100%) |

|  |  |
| --- | --- |
| **Professional Practice (20% weighting)** |  |
| **Scientific and Clinical Practice (20% weighting)** |  |
| **Research, Development, and Innovation (20% weighting)** |  |
| **Clinical Leadership (20% weighting)** |  |
| **Reflective Practice (20% weighting)** |  |
| **TOTAL PLACEMENT GRADE (%)** |  |