



# Newsletter

Issue No. 6  
May 2009

## Modernising Scientific Careers (MSC)

I am sure that for all working in healthcare science the proposed MSC programme has generated both positive and negative reactions. This might well be expected in circumstances whereby significant changes are being proposed. The MSC programme has certainly caused serious and lengthy debate within professional bodies and has naturally been a topic of discussion for VRC.

As a regulator VRC has a very simple purpose and that is to register healthcare science practitioners and prepare them as a group for statutory regulation sometime in the future. The sole aim of either statutory or voluntary regulation is of course to protect the public by ensuring that practitioners practice to the highest standards and are competent in the application of that practice. With this in mind it is not within the remit of VRC to enter into the fine detail of the MSC programme in terms of its proposals for training, education and qualification. Such discussions are clearly for the professional bodies.

There are elements of the MSC programme that do give rise for concern from a regulators viewpoint. These concerns rest with the apparent assumptions or predeterminations that healthcare scientists at a particular qualification level will be state registered with no consideration given as to whether there is a genuine need. Remember that the purpose of statutory (state) regulation is to protect the public therefore registration should be determined by the level of risk and not the level of qualification. It is hoped that this view is taken on board by the MSC team at Department of Health and that such matters will be adequately addressed in the final report from the Regulating Non-medical Healthcare professions consultation. Only time will tell.

**Terry Johnson**  
VRC Chair

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## **Modernising Scientific Careers... How will this shape your career? An Ophthalmic & Vision Science perspective.**

“High Quality Care for All” identified science and innovation as being at the heart of high quality healthcare for delivery for the 21<sup>st</sup> century; so healthcare scientists and that means you, are very much on the Department of Health’s radar. The HCS workforce encompasses 55,000 people and more than 40 professions. Modernising Scientific Careers seeks to establish a unified training and career structure for all Healthcare Scientist’s through three clearly defined stages:

- Healthcare Science Assistant (HCSA)
- Healthcare Science Practitioner (HCSP)
- Healthcare Scientist (HCS)

Underpinning these career points will be structured education and training, at foundation degree, degree and masters levels. Entry to Practitioner and Scientist training will be competitive, with entry routes by progression from HCSA & HCSP levels or direct entry with a relevant scientific qualification at BSc or MSc level. The contribution of the existing workforce is recognised and valued, and existing healthcare scientists will be mapped onto the new career pathway.

Practice at all levels of the healthcare science career pathway will be regulated.

The final date for responses to the Modernising Scientific Careers (MSC) consultation process was March 6th 2009; a formal response document was submitted on behalf of Ophthalmic & Vision Science by the Association of

Health Professions in Ophthalmology (AHPO); the submission received the endorsement of the Association of Ophthalmic Science Practitioners, The British Association of Retinal Screeners (BARS), the British Society for Clinical Electrophysiology of Vision (BriSCEV) and the Ophthalmic Imaging Association (OIA). This single step represents a unique level of cross profession cooperation and underlines the importance of the MSC programme to healthcare scientists working within the field of ophthalmology. Listed below is an extract from the consultation response and I'm sure that the hopes and concerns expressed by Ophthalmic and Vision Science about the MSC programme, will resonate with other professions as well.

*"The consultation document provides an essential framework for education and training for Ophthalmic & Vision Science where in some instances, none exists. Currently there are many ways of entering the profession creating variable skill levels and as a consequence, the career pathway is inconsistent and there is no national parity. Career progression can be restricted. The professional disciplines consist of highly skilled healthcare scientists at all levels, who have currently been let down by the lack of career structure and professional development, particularly at the lower levels. Ophthalmology has advanced dramatically over recent years, with increasing emphasis on diagnostic imaging, disease screening, physiological measurement and clinical investigation. These changes require a robust scientific workforce, which at his time does not exist in sufficient numbers.*

*Clinical resources within ophthalmology in the UK are stretched to the limit, in many trusts; outpatient numbers for ophthalmology exceed the combined workload of all other clinical disciplines. If ophthalmologists are to meet these increasing levels of service demand then disease screening, investigation and treatment monitoring must be devolved to healthcare scientists. Supporting training in these circumstances will need to be resourced, both financially and in terms of staffing.*

*Of concern is workforce planning as to how supernumerary trainees within the PTP and STP will be supported and where the specialist expertise and trainers will be drawn from, to facilitate training. Currently this role would have to be carried out by senior staff working within the ophthalmic HCS, which, if taken out of the workplace to assist in training, would have a detrimental effect on service provision.*

*Recruiting specialists from outside the NHS is a concern. Even if we can manage without them, we run the risk of developing a homogeneous workforce, which may limit our ability to think 'outside the box'.*

*Modernising Scientific Careers seeks to improve standards of patient care and at the same time provide uniformity of education, training and career progression to the scientific professions. Ultimately this will raise the profile of healthcare scientists and giving them a voice equivalent to their medical and nursing colleagues. Ophthalmology and Vision Science supports these goals and wishes to work towards an effective and structured career pathway for the workforce. MSC offers a framework for training and development that in some instances has not been available or is at an embryonic stage and therefore needs support. However, in creating a new career structure we should not lose sight of our successes, clinical scientist training within ophthalmology, creates registered practitioners of the very highest standard, any new training programme must emulate or exceed these standards and not diminish them."*

The first phase of the process has been completed; the preparation of role descriptor templates defining all stages of the career pathway from Healthcare Science Assistant to Consultant Healthcare Scientist and the submission of a formal response to the consultation document. The MSC advisory team for Ophthalmic and Vision Science is now awaiting feedback from the MSC Programme Team regarding the consultation. The next stage of the process will be to work on the curricula for the Practitioner and Scientists Training Programmes, this work will take place during June and July and will involve input from AHPO, AOSP, BARS, BriSCEV & OIA. From this point forward we should have a clearer understanding of what the career pathway for ophthalmic and vision science might look like, how it will be underpinned by education and training and how this will link to regulation and statutory registration of ophthalmic healthcare scientists.

What is still not clear is how the different professions will be able to map their roles and training onto a common career spine, it is relatively straight forward to see how ophthalmic technicians, ophthalmic photographers, OSP's and ophthalmic electro-physiologists/clinical scientists would migrate to the generic MSC career pathway. Also the role descriptor documents have been designed in such a way as to be sufficiently flexible as to include retinal screeners, although it is far too early to say whether this will happen or not. BARS and the English National Screening Programme for Diabetic Retinopathy Screening will be involved in the PTP & STP curricula development and from that point forward it should be possible to determine whether there is merit in future collaboration.

The MSC Programme is gathering pace and as new developments unfold AOSP will do it's best to keep members informed. Remember regulation of healthcare scientists is likely to form an important part the of any new career pathway, transitional arrangements for MSC will almost certainly consider voluntary registration when mapping staff to the new career points. If you haven't voluntary registered with VRC maybe now is the time to download the application form or if it's sitting on the desk at home, set aside some time to complete it and get it in the post.

**Christopher Mody**  
**AOSP Registrar**



**It is important to remember that you do not have to belong to a Professional Body to apply for registration via VRC.**

Application forms are available via the VRC website <http://www.vrcouncil.org/>  
Or directly from

Executive Business Support Ltd  
Suite 4, Sovereign House  
22 Gate Lane  
Boldmere  
Sutton Coldfield.  
B73 5TT

T: 0845 838 6267  
F: 0121 355 2420  
E: [vrcc@execbs.com](mailto:vrcc@execbs.com)  
W [www.vrcouncil.org](http://www.vrcouncil.org)

The fee for a new application is £45. To view the full list of charges please visit the website or see below.

VRC has been set up to provide a stepping-stone for healthcare science professions aspiring toward formal regulation via the Health Professions Council (HPC).

VRC is delighted to accept applications for registration from the 7 following professions:

**Anatomical Pathology Technologists**

**Cytotechnologists**

**Critical Care Technologists**

**Genetic Technologists**

**Diabetic Retinal Screeners**

**Ophthalmic Science Practitioners**

**Tissue Bankers**

<b>Fee</b>	<b>Details</b>	<b>Amount</b>
Registration	Initial Application	£45.00
Incomplete Registration	Minor Omittances For example documents or cheque are unsigned	£20.00
Incomplete Registration	Major Omittances For example, the application is returned by the assessor requesting further information	£35.00
Renewal Fees		£25.00
Late Renewals		£50.00
Registration Reactivation		£50.00
Replacement Certificates		£5.00