

Course Specification

A. Course Information											
Final award title(s)	BSc (Hons) Diagnostic Radiography Integrated Degree Apprenticeship										
Intermediate exit award title(s)	Diploma in Health Studies Certificate in Health Studies										
UCAS Code		Course Code(s)	5812								
Awarding Institution	London South Bank University										
School	<input type="checkbox"/> ASC <input type="checkbox"/> ACI <input type="checkbox"/> BEA <input type="checkbox"/> BUS <input type="checkbox"/> ENG <input checked="" type="checkbox"/> HSC <input type="checkbox"/> LSS School of Allied and Community Health, Institute of Health and Social Care										
Division	Division of Radiography and Operating Department Practice										
Course Director	Claire Carter										
Delivery site(s) for course(s)	<input checked="" type="checkbox"/> Southwark <input type="checkbox"/> Havering <input type="checkbox"/> Croydon <input type="checkbox"/> Other: (please specify)										
Mode(s) of delivery	<input type="checkbox"/> Full time <input checked="" type="checkbox"/> Part time <input type="checkbox"/> Other (please specify)										
Length of course/start and finish dates	<table border="1"> <thead> <tr> <th>Mode</th> <th>Length years</th> <th>Start - month</th> <th>Finish - month</th> </tr> </thead> <tbody> <tr> <td>Part time</td> <td>3</td> <td>September</td> <td>September</td> </tr> </tbody> </table>			Mode	Length years	Start - month	Finish - month	Part time	3	September	September
Mode	Length years	Start - month	Finish - month								
Part time	3	September	September								
Is this course suitable for a Visa Sponsored Student?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No										
Approval dates:	Course validation date	Feb 2022									
	Course specification last updated and signed off	September 2023									
Professional, Statutory & Regulatory Body accreditation	Health and Care Professions Council Society and College of Radiographers Education Skills Funding Agency (Funding) OFSTED Monitoring and Support Education Inspection Framework (EIF)										
Link to Institute for Apprenticeship (IfA) Standard and Assessment Plan (Apprenticeship only)	https://www.instituteforapprenticeships.org/apprenticeship-standards/diagnostic-radiographer-integrated-degree-v1-2										

Reference points:	Internal	<ul style="list-style-type: none"> • LSBU Corporate Strategy 2020-2025 • LSBU Academic Regulations for Taught Programmes • Academic Quality and Enhancement Website
	External	<ul style="list-style-type: none"> • HCPC Standards of Proficiency for Diagnostic Radiography (2013) • HCPC Standards of Education and Training (2017) • HCPC Standards of Conduct, Performance and Ethics (2016) • Institute of Apprenticeships, Apprenticeship Standards, Diagnostic Radiography (Integrated Degree) (2019) ST0620 • Society and College of Radiographers Indicative Curriculum (2013) • QAA The Frameworks for Higher Education Qualifications of UK Degree Awarding Bodies (2018) • QAA Higher Education Credit Framework for England (2018) • QAA Code of Practice for the Assurance of Academic Quality and Standards in Higher Education, Section 3: Disabled Students (2010) • SEEC Credit Level Descriptors (2021) • OfS Guidance

B. Course Aims and Features

Distinctive features of course	The inclusive curriculum aims to enable the full and equitable participation in and progression through higher education for all prospective and existing apprentices. We are working towards more inclusive policies and educational strategies in teaching and assessment and away from remedial interventions. Inquiry based learning designed with opportunities for blended learning provide an ideal, flexible strategy for all apprentices' needs to be met in an inclusive manner.
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	<p>The distinctive features of the BSc (Hons) Diagnostic Radiography Integrated Degree Apprenticeship programme include:</p> <ul style="list-style-type: none"> • Conferring the professional qualification in Diagnostic Radiography • Meeting the HCPC Standards of Proficiency (2013) and HCPC Standards of Education and Training (2017), and enabling successful apprentices to be eligible to apply for registration with the Health and Care Professions Council. • Studying alongside BSc (Hons) Diagnostic Radiography full-time students on our longstanding and successful course.
<p>Course Aims</p>	<p>The primary aim of the BSc (Hons) Diagnostic Radiography Integrated Degree Apprenticeship is to produce competent Diagnostic Radiographer practitioners who are fit for award, practice, purpose, and profession and who are able to:</p> <ul style="list-style-type: none"> • Demonstrate strong professional role identity, autonomy, accountability and resilience and be able to act as ambassadors for the profession; • Work in partnership with peers, colleagues, service users and carers, to promote participation, health and wellbeing; • Respond appropriately and sensitively to the needs of service users in an anti-discriminatory, inclusive and culturally competent way; • Practise radiography in the context of current and emergent services and work effectively within a changing political and socio-economic climate; • Contribute to the evolution of the profession through the implementation of evidence-based practice; • Take professional and personal responsibility for life-long learning.
<p>Course Learning Outcomes</p>	<p>The course learning outcomes is based on the 1 reference number ST0619, that apprentices on completion of the apprenticeship can competently demonstrate the following duties:</p> <p>Duty 1 Practise safely and effectively within the scope of practice and within the legal and ethical boundaries of the profession.</p> <p>Duty 2 Look after own health and wellbeing, seeking appropriate support where necessary.</p> <p>Duty 3 Practise as an autonomous professional, exercising professional judgement.</p>

Duty 4 Practise in a non-discriminatory and inclusive manner recognising the impact of culture, equality and diversity.

Duty 5 Communicate effectively, maintaining confidentiality and records appropriately

Duty 6 Work appropriately with others.

Duty 7 Reflect on, review and assure the quality of own practice.

Duty 8 Draw on appropriate knowledge and skills to inform practice and apply the key concepts of the knowledge base relevant to the profession.

Duty 9 Establish and maintain a safe practice environment.

Duty 10 Promote public health and prevent ill health.

K1: The importance of continuing professional development throughout own career.

K2: The importance of safeguarding, recognising signs of abuse and the relevant safeguarding processes.

K3: What is required of them by the Health and Care Professions Council, including but not limited to the standards of conduct, performance and ethics.

K4: The importance of valid consent.

K5: The importance of capacity in the context of delivering care and treatment.

K6: The scope of a professional duty of care.

K7: Legislation, policies and guidance relevant to own profession and scope of practice.

K8: The legislative, policy, ethical and research frameworks that underpin, inform and influence the practice of diagnostic radiography.

K9: The importance of own mental and physical health and wellbeing strategies in maintaining fitness to practise.

K10: How to take appropriate action if own health may affect own ability to practise safely and effectively, including seeking help and support when necessary.

K11: The need for active participation in training, supervision and mentoring in supporting high standards of practice, and personal and professional conduct, and the importance of demonstrating this in practice.

	<p>K12: Equality legislation and how to apply it to own practice.</p> <p>K13: The duty to make reasonable adjustments in practice.</p> <p>K14: The characteristics and consequences of barriers to inclusion, including for socially isolated groups.</p> <p>K15: That regard to equality, diversity and inclusion needs to be embedded in the application of all HCPC standards and across all areas of practice.</p> <p>K16: The emotions, behaviours and psychosocial needs of people undergoing diagnostic imaging, as well as that of their families and carers.</p> <p>K17: When disclosure of confidential information may be required.</p> <p>K18: The principles of information and data governance and be aware of the safe and effective use of health, social care and other relevant information.</p> <p>K19: The need to ensure confidentiality is maintained in all situations in which service users rely on additional communication support, such as interpreters or translators.</p> <p>K20: How concepts of confidentiality and informed consent extend to all mediums, including illustrative clinical records such as photography, video and audio recordings and digital platforms.</p> <p>K21: The characteristics and consequences of verbal and non-verbal communication and recognise how these can be affected by difference of any kind including, but not limited to, protected characteristics, intersectional experiences and cultural differences.</p> <p>K22: The need to support the communication needs of service users and carers, such as through the use of an appropriate interpreter.</p> <p>K23: The need to provide service users or people acting on own behalf with the information necessary in accessible formats to enable them to make informed decisions.</p> <p>K24: The principles and practices of other health and care professionals and systems and how they interact with own profession.</p> <p>K25: The need to build and sustain professional relationships as both an autonomous practitioner and collaboratively as a member of a team.</p> <p>K26: The qualities, behaviours and benefits of leadership.</p> <p>K27: That leadership is a skill all professionals can demonstrate.</p> <p>K28: The need to engage service users and carers in planning and evaluating diagnostics, and therapeutic interventions to meet own needs and goals.</p>
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K29: Information from other healthcare professionals and service users, in order to maximise health gain whilst minimising risks to the service user, such as from radiation dose.

K30: The need to involve service users in service design, service delivery, education and research.

K31: The need to engage service users and carers in planning and evaluating their diagnostic imaging and interventional procedures.

K32: The value of reflective practice and the need to record the outcome of such reflection to support continuous improvement.

K33: The value of multi-disciplinary reviews, case conferences and other methods of review.

K34: The value of gathering and using data for quality assurance and improvement programmes.

K35: The principles and regulatory requirements for quality control and quality assurance as they apply to their profession.

K36: The quality improvement processes in place relevant to their profession.

K37: The structure and function of the human body, together with knowledge of physical and mental health, disease, disorder and dysfunction relevant to their profession.

K38: Recognise the roles of other professions and services in health and social care and understand how they may relate to the role of radiographer.

K39: The structure and function of health and social care systems and services in the UK.

K40: The role of the diagnostic radiographer and other operators in the promotion of health and health education in relation to public health, healthy living and health screening for disease detection.

K41: The harms and benefits of population and targeted health screening.

K42: The radiobiological principles on which the practice of diagnostic radiography is based.

K43: The concept of risk vs benefit with regards to ionising radiation and non-ionising radiation, acknowledging this will differ depending on modality, and communicate this with service users, taking into consideration service user judgement.

K44: The philosophy and principles involved in the practice of their profession.

K45: The principles of ionising radiation production, interaction with matter, beam modification, administration of radionuclides and radiation protection.

K46: The physical and scientific principles on which image formation using ionising and non-ionising radiation is based.

K47: Radiation dosimetry and the principles of dose calculation.

	<p>K48: The theoretical basis underpinning service user assessment prior to and during their procedure.</p> <p>K49: The capability, applications and range of equipment used in their profession.</p> <p>K50: The concepts and principles involved in the practice of their profession and how these inform and direct clinical judgement and decision making.</p> <p>K51: The pharmacology of drugs used in their profession.</p> <p>K52: The legislation, principles and methods for the safe and effective administration of drugs used in their profession.</p> <p>K53: The mechanisms for the administration of drugs, including intravenous and oral contrast agents.</p> <p>K54: The principles of the safe storage, transportation and disposal of medicinal products used in relation their profession.</p> <p>K55: The different communication needs, anatomy and disease processes and their manifestation in children.</p> <p>K56: The signs and symptoms of disease and trauma that result in referral for diagnostic imaging procedures and their image appearances.</p> <p>K57: The structure and function of the human body in health, disease and trauma, as well as common pathologies and mechanisms of disease and trauma, including the:– musculoskeletal system– soft tissue organs– regional and cross-sectional anatomy of the head, neck, limbs, thorax, pelvis and abdomen– the cardiovascular, respiratory, genitourinary, gastrointestinal and neuroendocrine systems.</p> <p>K58: A range of research methodologies relevant to own role.</p> <p>K59: The value of research to the critical evaluation of practice.</p> <p>K60: The need to maintain the safety of themselves and others, including service users, carers and colleagues.</p> <p>K61: Relevant health and safety legislation and local operational procedures and policies.</p> <p>K62: Appropriate moving and handling techniques.</p> <p>K63: The correct principles and applications of disinfectants, methods for sterilisation and decontamination, and for dealing with waste and spillages correctly.</p> <p>K64: The role of the profession in health promotion, health education and preventing ill health.</p> <p>K65: How social, economic and environmental factors, wider determinants of health, can influence a person's health and well-being.</p>
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S1: Identify the limits of own practice and when to seek advice or refer to another professional or service.

S2: Recognise the need to manage own workload and resources safely and effectively, including managing the emotional burden that comes with working in a pressured environment.

S3: Keep own skills and knowledge up to date.

S4: Maintain high standards of personal and professional conduct.

S5: Engage in safeguarding processes where necessary.

S6: Promote and protect the service user's interests at all times.

S7: Respect and uphold the rights, dignity, values, and autonomy of service users, including own role in the assessment, diagnostic, treatment and/or therapeutic process.

S8: Recognise that relationships with service users, carers and others should be based on mutual respect and trust, and maintain high standards of care in all circumstances.

S9: Obtain valid consent, which is voluntary and informed, has due regard to capacity, is proportionate to the circumstances and is appropriately documented.

S10: Exercise a duty of care.

S11: Apply legislation, policies and guidance relevant to own profession and scope of practice.

S12: Recognise the power imbalance which comes with being a health care professional, and ensure it is not for personal gain.

S13: Practise in accordance with current legislation governing the use of ionising and non-ionising radiation for medical and other purposes.

S14: Identify own anxiety and stress and recognise the potential impact on own practice.

S15: Develop and adopt clear strategies for physical and mental self-care and self-awareness, to maintain a high standard of professional effectiveness and a safe working environment.

S16: Recognise that they are personally responsible for, and must be able to, justify their decisions and actions.

S17: Use own skills, knowledge and experience, and the information available, to make informed decisions and/or take action where necessary.

S18: Make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately.

S19: Make and receive appropriate referrals, where necessary.

S20: Exercise personal initiative.

	<p>S21: Demonstrate a logical and systematic approach to problem solving.</p> <p>S22: Use research, reasoning and problem-solving skills when determining appropriate actions.</p> <p>S23: Respond appropriately to the needs of all different groups and individuals in practice, recognising this can be affected by difference of any kind including, but not limited to, protected characteristics, intersectional experiences and cultural differences.</p> <p>S24: Recognise the potential impact of own values, beliefs and personal biases, which may be unconscious, on practice and take personal action to ensure all service users and carers are treated appropriately with respect and dignity.</p> <p>S25: Make and support reasonable adjustments in own and others' practice.</p> <p>S26: Actively challenge barriers to inclusion, supporting the implementation of change wherever possible.</p> <p>S27: Adhere to the professional duty of confidentiality.</p> <p>S28: Respond in a timely manner to situations where it is necessary to share information to safeguard service users, carers and/or the wider public and recognise situations where it is necessary to share information to safeguard service users, carers and/or the wider public.</p> <p>S29: Use effective and appropriate verbal and non-verbal skills to communicate with service users, carers, colleagues and others</p> <p>S30: Communicate in English to the required standard for the profession</p> <p>S31: Work with service users and / or own carers to facilitate the service user's preferred role in decision-making, and provide service users and carers with the information they may need where appropriate</p> <p>S32: Modify own means of communication to address the individual communication needs and preferences of service users and carers, and remove any barriers to communication where possible</p> <p>S33: Use information, communication and digital technologies appropriate to own practice</p> <p>S34: Formulate and provide information and support for service users about their treatment and / or imaging process and procedures, with regular reappraisal of their information needs as appropriate</p> <p>S35: Advise other healthcare professionals about the relevance and application of imaging modalities to the service user's needs</p>
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S36: Provide appropriate information and support for service users throughout their diagnostic imaging examinations

S37: Keep full, clear and accurate records in accordance with applicable legislation, protocols and guidelines

S38: Manage records and all other information in accordance with applicable legislation, protocols and guidelines

S39: Use digital record keeping tools, where required

S40: Work in partnership with service users, carers, colleagues and others

S41: Contribute effectively to work undertaken as part of a multi-disciplinary team

S42: Identify anxiety and stress in service users, carers and colleagues, adapting own practice and providing support where appropriate

S43: Identify own leadership qualities, behaviours and approaches, taking into account the importance of equality, diversity and inclusion

S44: Demonstrate leadership behaviours appropriate to own practice

S45: Act as a role model for others

S46: Promote and engage in the learning of others

S47: Demonstrate awareness of the need to empower service users to participate in the decision-making processes related to their profession

S48: Demonstrate awareness of the need to encourage, support and mentor staff at all practitioner levels

S49: Demonstrate awareness of roles and responsibilities where work is delegated and how this applies in practice

S50: Interpret and act upon information from other healthcare professionals and service users, in order to maximise health gain whilst minimising risks to the service user (such as from radiation dose)

S51: Engage in evidence-based practice

S52: Gather and use feedback and information, including qualitative and quantitative data, to evaluate the responses of service users to own care

S53: Monitor and systematically evaluate the quality of practice, and maintain an effective quality management and quality assurance process working towards continual improvement

S54: Participate in quality management, including quality control, quality assurance, clinical governance and the use of appropriate outcome measures

S55: Evaluate care plans or intervention plans using recognised and appropriate outcome

measures, in conjunction with the service user where possible, and revise the plans as necessary

S56: Demonstrate awareness of the principles and applications of scientific enquiry, including the evaluation of treatment efficacy and the research process

S57: Demonstrate awareness of the philosophy and the development of the profession of diagnostic radiography to inform understanding of current practice

S58: Apply the principles of ionising radiation production, interaction with matter, beam modification, administration of radionuclides and radiation protection

S59: Distinguish between normal and abnormal appearances on images

S60: Recognise and respond to adverse or abnormal reactions to medications used in relation to their profession

S61: Demonstrate awareness of the current developments and trends in the science and practice of diagnostic radiography

S62: Demonstrate awareness of the principles of Artificial Intelligence (AI) and deep learning technology, and its application to practice

S63: Change own practice as needed to take account of new developments, technologies and changing contexts

S64: Gather appropriate information

S65: Analyse and critically evaluate the information collected

S66: Select and use appropriate assessment techniques and equipment

S67: Undertake and record a thorough, sensitive, and detailed assessment

S68: Undertake or arrange investigations as appropriate

S69: Conduct appropriate assessment or monitoring procedures, treatment, therapy or other actions safely and effectively

S70: Critically evaluate research and other evidence to inform own practice

S71: Engage service users in research as appropriate

S72: Formulate specific and appropriate management plans including the setting of timescales

S73: Assess, monitor and care for the service user across the pathway of care relevant to their profession

S74: Undertake and record a thorough, sensitive and detailed clinical assessment, selecting and using appropriate techniques and equipment

S75: Use physical, graphical, verbal and electronic methods to collect and analyse information from a

	<p>range of relevant sources including service user's clinical history, diagnostic images and reports, pathological tests and results, dose recording and treatment verification systems</p> <p>S76: Interrogate and process data and information gathered accurately in order to conduct the procedures most appropriate to the service user's needs</p> <p>S77: Appraise image information for clinical manifestations and technical accuracy, and take further action as required</p> <p>S78: Manage complex and unpredictable situations including the ability to adapt planned procedures</p> <p>S79: Operate diagnostic imaging equipment safely and accurately</p> <p>S80: Check that equipment is functioning accurately and within the specifications, and to take appropriate action in the case of faulty functioning and operation</p> <p>S81: Select and explain the rationale for radiographic techniques and immobilisation procedures appropriate to the service user's physical and disease management requirements</p> <p>S82: Position and immobilise service users correctly for safe and accurate procedures</p> <p>S83: Authorise and plan appropriate diagnostic imaging examinations</p> <p>S84: Calculate radiation doses and exposures and record and understand the significance of radiation dose</p> <p>S85: Perform a broad range of standard imaging techniques, including examinations requiring contrast agents for relevant modalities across a variety of diagnostic or screening care pathways</p> <p>S86: Assist with a range of more complex diagnostic imaging techniques and interventional procedures providing radiographic support to the service user and other members of the multidisciplinary team</p> <p>S87: Provide appropriate care for the range of service users and their carers before, during and after imaging examinations, minimally invasive interventional procedures and contrast agent examinations</p> <p>S88: Perform a range of imaging examinations where the service user's individual characteristics require examinations to be carried out using nonstandard techniques</p> <p>S89: Perform a range of techniques using mobile imaging equipment outside of a dedicated imaging room</p> <p>S90: Manage and assist with imaging techniques performed on anaesthetised or unconscious individuals</p>
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S91: Adjust ionising radiation exposures and image recording parameters to achieve required image quality at optimal dose for children and adults

S92: Perform a range of imaging techniques and interventions on children

S93: Use to best effect the processing and related technology supporting imaging systems

S94: Manage and assist with fluoroscopic diagnostic and interventional procedures, including those that are complex and involve the use of contrast agents

S95: Perform a broad range of computed tomographic (CT) examinations, including standard head CT examinations, and assist with CT examinations of the spine, chest and abdomen in acute trauma, and to contribute effectively to other CT studies

S96: Perform standard magnetic resonance imaging procedures

S97: Assist with ultrasound imaging procedures

S98: Assist with imaging procedures involving the use of radionuclides including PET tracers and particle emitters

S99: Critically analyse clinical images for technical quality and suggest improvement if required

S100: Distinguish disease trauma and urgent and unexpected findings as they manifest on diagnostic images and take direct and timely action to assist the referrer

S101: Demonstrate awareness of relevant health and safety legislation and comply with all local operational procedures and policies

S102: Work safely, including being able to select appropriate hazard control and risk management, reduction or elimination techniques in a safe manner and in accordance with health and safety legislation

S103: Select appropriate personal protective equipment and use it correctly

S104: Establish safe environments for practice, which appropriately manages risk

S105: Apply appropriate moving and handling techniques

S106: Ensure the physical safety of all individuals in the imaging/ therapeutic work environment, especially with regard to radiation safety and high-strength magnetic fields

S107: Use basic life support techniques and deal with clinical emergencies

S108: Empower and enable individuals (including service users and colleagues) to play a part in managing own health

S109: Engage in occupational health, including being aware of immunisation requirements

	<p>B1: Demonstrate a calm demeanour with empathy, compassion and underpinning emotional resilience to manage day-to-day pressures in unpredictable, emergency and distressing situations, e.g. individuals in cardiac arrest, suffering life changing injuries and/or disease diagnosis.</p> <p>B2: Confident, flexible and adaptable within own scope of practice.</p> <p>B3: Demonstrate emotional intelligence.</p> <p>B4: Act with professionalism, honesty, integrity and respect in all interactions. Maintain good character as outlined in their professional Code of Conduct and not bring their profession or organisation into disrepute.</p> <p>B5: Reflect on own impact on others, take responsibility and be accountable for own actions. Sensitive challenge others and raise issues when appropriate.</p> <p>B6: Actively reflect on own practice and accept and respond to constructive criticism. Be proactive in implementing improvements in order to improve service delivery and patient care.</p> <p>B7: Be aware of and take responsibility for their own fitness in context of physical and/or mental health issues which may affect performance. Seek help and/or guidance as appropriate. Inform Health and Care Professions Council and employer of any change of circumstance that may affect the right to practise.</p>
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C. Teaching and Learning Strategy

A varied teaching and learning diet is used to allow apprentices to learn in a variety of ways and build competence.

- Module co-ordinators provide material on-line and are encouraged to explore the use of on-line technologies that provide virtual teaching and assessment environments
- Lectures will be used to introduce and provide new information and update existing knowledge
- Tutorials with individuals and groups
- Academic workshops, including problem based learning activities
- Formative assessments
- Skills lab workshops to prepare apprentices for clinical placements
- Critical incident analysis to reflect upon practice based issues
- Structured reading/guided study
- Workbooks to develop and update knowledge
- Online group work and e-learning strategies
- Small group exercises

D. Assessment

The programme is based on the following assumptions that assessment:

- Is an integral part of the learning process of the curriculum;
- Encourages apprentices to develop a variety of skills and abilities and build on the strengths they already have;
- Comprises formative assessment in order to provide feedback to apprentices on their progress;
- Provides constructive and detailed summative feedback to apprentices to enable progression on the programme;
- Will promote the integration of theoretical perspectives with professional practice;
- Will promote the principles of inclusive assessment practice;
- Will test the learning outcomes for each module;
- Encourages apprentices to demonstrate excellence;
- Allows apprentices to demonstrate an appropriate level of thinking;
- Client/patient safety is a key requirement for registration as a Diagnostic Radiographer and as such this is reflected in the assessment profile;
- Enables the apprentice to become an effective and competent practitioner;
- Enables the apprentice to demonstrate skills in evaluating research and other evidence to inform their practice.

In order for the assessment strategy to ensure apprentice success, the following conditions will be in place:

- From the outset of the programme, a clear indication will be given regarding the assessment strategy, university expectations, programme and university regulations and procedures;
- Assessment outlines will be included in module guides;
- Apprentices will have scheduled sessions each in each module of learning, to support their preparation for assessment;
- Criteria and guidelines for all assessed components will be provided to apprentices during modules;
- Formative feedback will be given to apprentices throughout the modules. This will generally be undertaken during the delivery of the module;
- Apprentices with specific learning needs or other difficulties impacting their learning will be identified early in the programme and offered the appropriate educational support to maximise their chance of success.

Assessment methods

A variety of approaches will be used in order to balance the assessment methods and to promote different skills/abilities whilst reflecting the nature of the module of learning. The main rationale for choosing the assessment method is helping apprentices in the development of a wide range of professional knowledge and skills. The types of assignments demonstrate progression of skills and abilities as apprentices progress on the programme.

Apprentices will be assessed in each practice placement against specific practice learning outcomes, incorporated within the practice module. In a similar way, practice learning outcomes will necessarily demonstrate differentiation and progression.

The organisation of theory and practice assessment will promote the integration of theory and practice for apprentices. This coherent approach underpins the structure throughout the programme. The proposed strategy aims to help apprentices to:

- Develop key skills such as communication, information technology and professional practice skills
- Develop a range of transferable skills
- Develop an understanding of the complexity of the professional role
- Integrate knowledge from a variety of disciplines to the practice of Diagnostic Radiography
- Develop skills of self and peer assessment

- Become competent in the application of the Diagnostic Radiography process and Medical Imaging service delivery
- Develop skills in critical reasoning, reflection, analysis, and evaluation
- Develop ability to self-direct and self-manage
- Gain the necessary competencies, knowledge, values and skills to be eligible to apply to register as a Diagnostic Radiographer with the HCPC.

Specific details of the formative and summative assessments on each module are written in the Module Descriptors.

Assessment types used by the course include:

- Presentations.
- Posters.
- Critical evaluations.
- Written examinations.
- Workstation examinations.
- Reports.
- Essays.
- Podcasts.
- Critical reflection.
- Placement portfolio.

All modules include formative assessments, aimed at supporting students to develop knowledge and skills required for the summative assessment.

Feedback is provided throughout each module through a variety of means e.g. discussion forums, drafts of written work, and assessment tutorials.

E. Academic Regulations

The University's Academic Regulations apply for this course: [LSBU Academic Regulations](#)

1.0 Compensation

The schools follows the university regulations apart from:

- Students/Apprentices will not be eligible for compensation in any module as a pass in all elements of assessment is required to demonstrate competence.

2.0 Third Attempts

Students/Apprentices will not be eligible for an application for an exceptional third attempt at a single assessment in the final year of a pre-registration health and social care apprenticeship course.

F. Entry Requirements

Admission and selection procedures

All admission and selection procedures are based on:

- Fitness for practice
- An imperative to ensure flexibility of entry in accordance with Department of Health guidance.

- The course team's commitment to facilitate equal opportunities at the point of entry and throughout the course.
- The university operates an equal opportunities policy where there is no discrimination in view of age, disability, gender reassignment, marriage or civil partnership, pregnancy and maternity, race, religion or belief, sex, or sexual orientation.
- Values-based recruitment.

Admissions process

All offers of places on the programme are conditionally based on:

- Satisfactory outcome of a joint interview with the employer and Higher Education Institution.
- Occupational Health clearance (confirmed from employer).
- Satisfactory outcome of an enhanced Disclosure and Barring Service check.
- Completion of apprenticeship pre-course documentation/contract.
- Applications from candidates with disabilities are considered and assessment of abilities and needs undertaken sensitively. The safety of the potential apprentices is an important consideration.
- Applicants who have previously been enrolled on a Diagnostic Radiography pre-registration programme, or any other health professional education programme, must submit a self-declaration confirming no previous fitness to practise concerns.
- All applicants must be 18 years or over at the commencement of the course.

Application is direct to the University.

Entry requirements

It is anticipated that applicants will have a wide a variety of academic backgrounds, but should possess one of the following:

- A Level BBC or;
- BTEC National Diploma DMM in Science or professionally relevant subject or;
- Access to HE Diploma in Science or similar with 24 Distinctions of which 14 must be in Science or;
- Equivalent level 3 qualifications at 112 UCAS points also considered or;
- Foundation degree/diploma (or similar), 120 credits or;
- Bachelor's degree in a relevant science subject or;
- International Baccalaureate in a relevant science subject (22 points).

Applicants must hold 5 GCSEs A-C including Maths, English and Science **or** equivalent (reformed GCSEs grade 4 or above).

For candidates whose first language is not English

Candidates must have the following minimum International English Language Test Score (IELTS) results at the time of applying:

- 7.0 overall or equivalent.
- 7.0 in the listening and reading sections.
- 7.0 in the writing and speaking sections.

Accreditation of prior learning

Potential apprentices may apply for exemption for certain modules on the basis of prior learning and/or experience through the AP(E)L process when applying. This will be reviewed by the APEL team in the Institute of Health and Social Care for consideration of exemption and following a skills scan administered by the University Central Apprenticeship Team.

G. Course Structure(s)

Course overview

This programme design aims to ensure that future graduates are able to:

- Demonstrate strong professional role identity, autonomy, accountability and resilience;
- Work in partnership with peers, colleagues, service users and carers, to promote participation, health and well-being;
- Practice Radiography in the context of current and emergent services and work effectively within a changing political and socio-economic climate.

Evidence-based practice is as integral to course delivery as it is to service delivery and features strongly in the curriculum. Apprentices will gain an understanding of the evidence base of practice through:

- Lecturers drawing on evidence to underpin their sessions
- Apprentices being required to draw upon research being undertaken in their workplace
- Incorporation of evidence-based concepts into practice
- Experienced, active researchers contributing to course delivery
- Learning about the research process
- Skills of retrieval and critical appraisal of research literature.

Course structure

The university programme is based on a 3-year model, taking 36 months to complete. Apprentices will progress through the same course structure as the existing 3-year BSc (Hons) Diagnostic Radiography part-time course.

There will be one intake a year in September.

Learning will take place on a block-learning model, at any time that an apprentice is not expected to undertake academic learning they will be undertaking the learning and development of the clinical elements of their apprenticeship under the supervision of their employer.

Course structure overview

Study Year	Semester 1 (September – January)	Semester 2 (January – June)	Summer (June – August)	Credits
Year 1 (months 1-12)	LSBU and work-based learning	LSBU and work-based learning	Work-based learning	120
Year 2 (months 13-24)	LSBU and work-based learning	LSBU and work-based learning	Work-based learning	120
Year 3 (months 25-36)	LSBU and work-based learning	LSBU and work-based learning	Work-based learning	120
				360 credits for award

The programme consists of 13 modules:

- 3 Interprofessional Learning modules (Levels 4 (Concepts of Interprofessional and Collaborative Practice), 5 (Appraising Evidence for Research Informed Practice) & 6 (Quality Improvement, Change Management and Leadership)), valued at 20 credits. The modules are shared with diagnostic radiography, therapeutic radiography, operating department practice, physiotherapy, sports rehabilitation, chiropractic, social work, and occupational therapy students.
- 9 profession-specific modules valued at 20 credits.
- 3 profession-specific clinical practice modules valued at 40 credits.

All modules must be passed in order to be awarded the BSc (Hons) Diagnostic Radiography Integrated Degree Apprenticeship and to be eligible to apply for registration with the Health and Care Professions Council. Apprentices who do not complete the course but have sufficient credits will be awarded a Diploma or Certificate in Health Studies. These awards do not confer eligibility to apply for registration with HCPC.

Module overview

BSc (Hons) Diagnostic Radiography Integrated Degree Apprenticeship Pathway	
Semester 1	Semester 2
Year 1	
Introduction to Radiation Science (20 Credits)	Concepts of Interprofessional and Collaborative Practice (20 Credits)
Systemic Anatomy and Physiology 1 (20 Credits)	Principles of Clinical Reasoning in Medical Imaging (20 Credits)
Medical Imaging Practice 1 (40 credits)	
Progress to Year 2	
Year 2	
Medical Imaging Modalities (20 Credits)	Medical Imaging of Pathology and Disease Processes (20 credits)
Systemic Anatomy and Physiology 2 (20 Credits)	
Appraising Evidence for Research Informed Practice (20 Credits)	
Medical Imaging 2 Practice (40 credits)	
Progress to Year 3	
Year 3	
Professional Identity, Autonomy & Accountability (20 credits)	Contemporary Issues in Medical Imaging (20 credits)

Interpretation of Medical Imaging (20 credits)	
Quality Improvement, Change Management and Leadership (20 Credits)	
Medical Imaging Practice 3 (40 credits)	
EPA Gateway criteria achieved (360 credits)	
Award	

Work experience information:

Professional body requirements indicate that a minimum of 60% of the programme must be undertaken in clinical practice. Apprentices must demonstrate competence in all skills, knowledge, and behaviours, as defined by the integrated Degree Apprenticeship Standard. In order to successfully complete the award apprentices must also evidence a **minimum of 20% of their time in 'of the job training' activities**, this can be achieved in a variety of ways; attending lectures, seminars/workshops, tutorials, skills-lab sessions, e-learning, blended learning and self-managed learning.

Apprentices will usually be expected to gain their full work experience at their employing trust. Occasionally more than one trust may form a reciprocal arrangement to ensure the apprentices can work in all the required specialities. In these instances, the employing trust is responsible for ensuring that all required learning opportunities are arranged

Placement information

The primary aim of the BSc (Hons) Diagnostic Radiography integrated Degree Apprenticeship is to produce competent Diagnostic Radiography practitioners who are fit for award, practice, purpose, and profession. On completion of the course successful apprentices will be eligible to apply for registration with the Health and Care Professions Council.

In accordance with this principle, the apprenticeship programme is practice- and work-based centred and directed to achievement of professional competence. Work-based learning is a knowledge-to-competence strategy. It provides learners with real-life, work-related experiences where they can apply behavioural and professional skills and develop their employability.

The theory which underpins safe practice skills will be delivered at the University and supported in the workplace through a variety of work-based learning methods. Some practice skills will be taught in the classroom, and rehearsed in the skills laboratories, but the majority will be demonstrated in actual clinical settings. This will allow apprentices to experience the realities of performing the skills required under real work conditions. Apprentices will continually learn practical skills towards the required competencies within clinical placements, under the direction of practice educators, mentors, and other professionals within the team.

Practice placements are audited annually as part of our quality assurance measures and it is anticipated that the work-based learning environments, as part of the apprenticeship scheme, will be part of the same audit cycle. Information discussed at tripartite reviews will also look at placement quality to ensure the setting meets the requirements of the HCPC Standards of Education and Training.

Practice and Work Based Experience

Diagnostic Radiography is a practice-based profession. Competency is achieved through experiential learning and active participation, supported by the acquisition of a necessary extensive knowledge base. It is therefore essential to provide each apprentice with a structured education based upon their supervised involvement in practice- and service user-orientated activities. Crucial to the success of practice-based education is the successful integration of academic and clinical components of the programme. The relationship between these two areas of learning is a mutually supportive one: the knowledge base underpins practice activities but is itself sustained through reflection upon and critical appraisal of practice experiences. To facilitate the bridging of the theory-practice interface the programme incorporates the use of skills sessions and laboratory workshops in the university and work-based learning materials and tutorial sessions in clinical practice. Apprentices will also have access to a range of web-based resources via the "Moodle" virtual learning environment.

In order to assist personal development and increase motivation, it is considered important for Diagnostic Radiography apprentices to develop self-awareness, belief in their own abilities and appreciation of their own individual cognisance. Practice placements are at the centre of the Diagnostic Radiography programmes and are designed to enable apprentices to develop a strong role identity as they become increasingly autonomous, accountable and resilient. Integration between the academic curriculum and the practice placements, at the level of the individual, aims to support apprentices to manage and take responsibility for their professional development over time. Personal support will be offered both collectively by the course team and through the provision of a named skills coach.

To facilitate a robust and effective means of communication, each clinical department or significant placement will have a named skills coach who will visit the apprentices and the departmental manager on a regular basis and maintain links with the clinical staff as part of the apprenticeship tripartite process. To complement this, each department has a named practitioner who takes the role of practice coordinator and a mentor to supplement the support of academic staff and maintain quality standards. To ensure continuity of support, the skills coach will make face-to-face tri-partite reviews three times a year for apprentices as standard.

Ongoing monitoring is available via One-file and if necessary additional meetings could be scheduled.

Organisation of Compulsory Placements

Practice placements are an integral component of the total curriculum that enables the apprentice to develop, demonstrate and achieve competence to practise. It is therefore undertaken as a requirement of the educational programme leading to a qualification in Diagnostic Radiography.

It is necessary for apprentices to gain supervised experience of working with patients, service users and carers who experience different needs and whose care is managed in different service context. Although apprentices will be employed at one specific employer for the duration of their course, they will need to undertake placement in a variety of areas of practice in order to gain the required experience. This needs to be done with reference to both course and service needs, and requires local knowledge to effectively meet all requirements. The following criteria will be taken into consideration to ensure balance of experience:

1. The apprentice must complete at least one physical and one psychosocial placement across practice placements 2, 3 and 4.
2. Apprentices' balance of experience must include working in acute/long-term/in-patient and community settings.
3. Consideration is given to experience of working with people across the lifespan.

The host employer is responsible for organising these placements either within their own organisation or with another provider. A reciprocal arrangement and/or honorary contract basis can facilitate the movement of apprentices into these additional placement settings.

The Practice Coordinator in each employer undertakes the organisation and allocation of individual placements. They provide an interface for apprentices between the university and work-based mentors. The Practice Coordinator will regularly meet with the apprentices based within their clinical area and provide each apprentice with a year-on-year practical training programme, which is designed to make best use of learning and assessment opportunities. They are also responsible for providing regular structured tutorial sessions for their apprentices. They are able to assist apprentices with portfolio construction and management. They are the first point of contact for apprentices who are experiencing difficulties in the workplace environment.

Because of the diverse nature of placements and changing staff, it will be the Practice Coordinator's responsibility in each Trust to support the various individual mentors in that placement. The course team at LSBU will always offer support to individual mentors where necessary, but it is necessary for mentors to have local support on a day-to-day basis.

It is important to stress that these roles are not performed in isolation. The continuous joint cooperation between these key players in the workplace and the course team is a vital component of cohesive apprentice support and one which will ultimately determine the success of course delivery.

Integration of Compulsory Placements and the academic curriculum

In order to meet professional requirements, practice experiences are integrated into the academic curriculum. Practice Placement is organised through the programme as illustrated in the table below.

Practice Placement	Focus of Placement	Time schedule
One (Module: Medical Imaging Practice 1)	Introduction to medical imaging practice	Year 1 Semesters 1&2
Two (Module: Medical Imaging Practice 2)	Continued development of apprentices' clinical skills in conventional medical imaging, and introduces specialist modalities	Year 2 Semesters 1&2
Three (Module: Medical Imaging Practice 3)	Continued development of apprentices' clinical skills to demonstrate HCPC Standards of Proficiency, in addition to the introduction of specialist referral pathways	Year 3 Semesters 1&2

Placement Levels, Learning Outcomes and Assessment

Prior to each placement apprentices will receive university-based placement preparation, which will support their preparation and understanding of the level and their responsibility on the practice placement.

Apprentice Support in Practice and Work Based Learning

Learning agreements are established between the apprentice and the practice educator early on in the placement and formal supervision time will be used for supporting the apprentice's

progressive learning on the agreed outcomes and reviewing and revising objectives and plans for the remainder of the placement in light of this. The weekly records should indicate areas both for recognition of achievement and areas that need specific work. In addition to formal supervision, short feedback and discussion sessions may occur naturally between intervention sessions or at the end of a working day.

As with academic work, it is important for the apprentice to gain feedback on practice and to recognise how he or she is progressing with the acquisition and application of their skills. An assessment strategy that has an integral mechanism for providing apprentices with verbal and written feedback on performance and for making graded judgements using predetermined criteria can support learning and development.

It is important for apprentices to be given feedback on specific strengths and limitations in their practice so that they know where improvements might be made. It is also important for them to be given opportunity to act on the feedback in an attempt to improve performance during the timeframe of the practice experience; apprentices will therefore have a midway and final assessment.

Apprentices, when in their host employer organisations, are employees. A comprehensive system of support for the apprentices should include:

- Library and/or learning resource facilities located within participating employer organisation.
- “Moodle” virtual learning environment and email support from the Skills Coach, Module Leaders or Course Director.
- Clinical education and assessment supported by practice educators and mentors within participating clinical sites.
- Close collaboration between university and clinical sites via regular meetings with service providers at all levels.
- Regular, planned visits to clinical sites to support apprentices, practice educators and mentors.
- All apprentices are allocated a Skills Coach for assistance with personal or pastoral issues.

Raising a concern by an apprentice

LSBU and all our placement provider organisations fully support apprentices who raise concerns and/or need to exercise a professional duty of candour. If an apprentice raises a concern with their Trust and/or the University, they will be fully supported by the Trust and the University throughout the ensuing process.

Where an apprentice has concerns about the safety or wellbeing of people who access services, is concerned that a member of staff, another student, carer, family member or visitor is behaving inappropriately (this may include concerns about someone being under the influence of alcohol, drugs or other substances), or has witnessed unsafe, unprofessional or poor practice, the apprentice should raise their concern by informing their nominated Practice Educator, Manager, or member of their Trust/care organisation Practice Education Team, and/or a member of staff from the University (e.g. Skills Coach or Course Director).

Where an apprentice is concerned there is an immediate risk of harm to a patient the HCPC requires that it be reported immediately to anyone listed above in order to protect the health, wellbeing and safety of a patient or others. While it is preferable for the apprentice to raise concerns with someone in the practice learning opportunity, ultimately it is very important that the student raise their concern with somebody within the Trust or the University. All Trusts will have their own specific policies and guidance regarding raising and escalating concerns and safeguarding patients and others. These policies will be followed when any concern is raised even if it was initially raised through the University.

Consent

Apprentices must always seek the understanding and cooperation of the patient/service user before undertaking any clinical/care activity, while being aware that a patient/client has the right to decline care by a student. If an apprentice has any concerns about the ability of the patient/client to give consent, or is uncertain of their response, they should involve their Practice Educator or a qualified member of staff in establishing effective communication with the patient/client.

Preparation for Practice Educators

Preparation for Practice Educators and practice learning is fundamental. This is facilitated through a number of forums. These include:

- Invitation to a clinical liaison meeting within each semester. These meetings include updates from both clinical sites and the university, and feedback from students.
- Practice educator training day. This is provided free of charge to all radiographers who work in LSBU partner host Trusts. This training prepares them for working with students and LSBU documentation.
- Annual clinical staff update training. This provides new staff a chance to learn more about working with students in the clinical environment and LSBU portfolio, and a refresher opportunity for existing staff.

Audit of Practice Placement and Management of Data

Quality monitoring of practice placements as part of work-based learning is carried out bi-annually through the National Education and Training Survey (NETS) administered by Health Education England, and through course monitoring processes. Quality monitoring is also undertaken by academic and practice staff as part of the tri-partite reviews. Any areas of concern are discussed with staff and action plans identified.

Through this process ways in which good practice can be supported and any issues arising can be resolved. The Commitment Statement sets out how LSBU, the Employer and the Apprentice will work together to support the Apprentice to complete the Apprenticeship and achieve the Apprenticeship Standard.

The Division of Radiography and ODP at LSBU has always maintained effective quality assurance and monitoring arrangements through robust links with employers and service providers. The different professional groups within the division hosts "Practice Educator meetings" meeting twice-yearly (November and May). The meeting aims are to maintain and develop links between the University and employers, and provide a forum for feedback on issues relevant to education and practice. The standing agenda covers the portfolio of courses at LSBU and curricula, practice placement, service updates, innovations in practice, and student recruitment and retention.

These arrangements will remain central to the provision of the BSc (Hons) Diagnostic Radiography integrated Degree Apprenticeship framework. Any areas of concern will be discussed and action plans identified. The Placement Quality Monitoring Protocol for practice placements across the Division of Radiography and ODP is in the LSBU School of Allied and Community Health, Practice Learning Guidelines, Appendix D: Diagnostic Radiography Specific Information.

H. Course Modules

Module Title				Assessment
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	Level	Semester / Year	Credit value	
Introduction to Radiation Science	4	1 / 1	20	Formative assessment: Mock examination Summative assessment: EX1 2 hour unseen written examination 40% pass mark 100% weighting
Systemic Anatomy and Physiology 1	4	1 / 1	20	Formative assessment: Mock examination Summative assessment: EX1 2 hour unseen written examination 40% pass mark 100% weighting
Principles of Clinical Reasoning in Medical Imaging	4	2 / 1	20	Formative assessment: 500 word draft or plan of summative assignment Summative assessment: CW1 3000 word written assignment OR, 20 minute podcast 40% pass mark 100% weighting
Concepts of Interprofessional and Collaborative Practice	4	2 / 1	20	Formative assessment: 500 word draft or plan of summative assignment Summative assessment: CW1 3000 word written assignment 100% weighting
Medical Imaging Practice 1	4	1 & 2 / 1	40	Formative assessment: Mock examinations Continuous clinical monitoring via clinical portfolio Summative assessment: EX1 (Semester 1) 2 hour unseen written examination 50% weighting EX2 (Semester 2)

				<p>1 hour unseen workstation examination 50% weighting</p> <p>CW1 Clinical Portfolio Pass/Fail</p> <p>Students are required to achieve a pass in all elements of assessment.</p>
Medical Imaging Modalities	5	1 / 1	20	<p>Formative assessment: Group presentation</p> <p>Summative assessment: CW1 Poster presentation examination 40% pass mark 100% weighting</p>
Systemic Anatomy and Physiology 2	5	1 / 2	20	<p>Formative assessment: Mock examination</p> <p>Summative assessment: EX1 2 hour unseen written examination 40% pass mark 100% weighting</p>
Medical Imaging of Pathology and Disease Processes	5	2 / 2	20	<p>Formative assessment: 500 word draft or plan of summative assignment</p> <p>Summative assessment: CW1 3000 word written assignment OR, 20 minute podcast 100% weighting</p>
Appraising Evidence for Research Informed Practice	5	1 & 2 / 2	20	<p>Formative assessment: 500 word draft or plan of summative assignment</p> <p>Summative assessment: CW1 3000 word written assignment 100% weighting</p>
Medical Imaging 2 Practice	6	1 & 2 / 2	40	<p>Formative assessment: Mock examinations Continuous clinical monitoring via clinical portfolio</p> <p>Summative assessment: EX1 (Semester 1)</p>

				<p>2 hour unseen written examination 50% weighting</p> <p>EX2 (Semester 2) 1 hour unseen workstation examination 50% weighting</p> <p>CW1 Clinical Portfolio Pass/Fail</p> <p>Students are required to achieve a pass in all elements of assessment.</p>
Professional Identity, Autonomy and Accountability	6	1 / 3	20	<p>Formative assessment: 500 word draft or plan of summative assignment</p> <p>Summative assessment: CW1 3000 word written assignment OR, 20 minute podcast 100% weighting</p>
Interpretation of Medical Imaging	6	1 / 3	20	<p>Formative assessment: Mock written exam</p> <p>Summative assessment: EX1 2-hour unseen work station written examination 40% Pass mark 100% Weighting</p>
Contemporary Issues in Medical Imaging	6	2 / 3	20	<p>Formative assessment: 500 word draft of the summative assignment.</p> <p>Summative assessment: CW1 3000 literature review 40% pass mark 100% weighting</p>
Improving quality, change management and leadership		1 & 2 / 3	20	<p>Formative assessment: 500 word draft or plan of summative assignment</p> <p>Summative assessment: CW1 3000 word written assignment OR, 20 minute podcast 100% weighting</p>
Medical Imaging Practice 3	6	1 & 2 / 3	40	Formative assessment:

				Mock examinations Continuous clinical monitoring via clinical portfolio Summative assessment: EX1 (Semester 1) 2 hour unseen written examination 50% weighting EX2 (Semester 2) 1 hour unseen workstation examination 50% weighting CW1 Clinical Portfolio Pass/Fail Students are required to achieve a pass in all elements of assessment.
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I. Timetable Information

An indication of the timetable is included in the Curriculum Maps. Apprentices attend University ('off-the-job' training) in blocks to ensure that it sits at the same time as the full time course delivery. Outside of this they will be full time in their place of employment undertaking work-based learning.

An indicative provisional timetable is available 9 months prior to the start of the academic year. A confirmed timetable is made available at the end of each academic year for the following academic year.

J. Apprenticeship Standards Curriculum Map

	LSBU Module Name	TRD-4-012	TRD-4-013	AHP-4-010	TRD-4-011	TRD-4-014	AHP-5-010	TRD-5-014	TRD-5-013	TRD-5-011	TRD-5-012	AHP-6-010	TRD-6-014	TRD-6-013	TRD-6-014	TRD-6-011	
	LSBU Module Year	L1	L1	L1	L1	L1	L2	L2	L2	L2	L2	L3	L3	L3	L3	L3	
	K,S,B Description																
k1	K1: The importance of continuing professional development throughout own career.		TD	T					T							T	D
k2	K2: The importance of safeguarding, recognising signs		TD A						DA				TD A	DA			

	of abuse and the relevant safeguarding processes.														
k3	K3: What is required of them by the Health and Care Professions Council, including but not limited to the standards of conduct, performance and ethics.		TD A	D				T				D	D	TD A	D
k4	K4: The importance of valid consent.		TD A	D				DA	D				DA		
k5	K5: The importance of capacity in the context of delivering care and treatment.		TD A	TD A					DA				DA		
k6	K6: The scope of a professional duty of care.		TD A	A				TD A					TD A	TD A	
k7	K7: Legislation, policies and guidance relevant to own profession and scope of practice.		TD A	T	TD A			T	TD A			D	D	TD A	D
k8	K8: The legislative, policy, ethical and research frameworks that underpin, inform and influence the practice of diagnostic radiography.		TD A		TD A							D			D
k9	K9: The importance of own mental and physical health and wellbeing strategies in maintaining fitness to practise.		TD A			T		TD A						TD A	
k10	K10: How to take appropriate action if own health may affect own ability to practise safely and effectively, including seeking help and support when necessary.		TA			T		TD A					TD A	T	
k11	K11: The need for active participation in training, supervision and mentoring in supporting high standards of practice, and personal and professional		TD A					TD A					TD A		

	conduct, and the importance of demonstrating this in practice.																
k12	K12: Equality legislation and how to apply it to own practice.		TD A	T					TD A			D			TD A		
k13	K13: The duty to make reasonable adjustments in practice.		TD	T					DA						DA		
k14	K14: The characteristics and consequences of barriers to inclusion, including for socially isolated groups.		TD	T					TD A			D			TD A		
k15	K15: That regard to equality, diversity and inclusion needs to be embedded in the application of all HCPC standards and across all areas of practice.		TD						DA			D			DA		
k16	K16: The emotions, behaviours and psychosocial needs of people undergoing diagnostic imaging, as well as that of their families and carers.		TD A												DA		
k17	K17: When disclosure of confidential information may be required.		TD A												TD A		
k18	K18: The principles of information and data governance and be aware of the safe and effective use of health, social care and other relevant information.			T											DA	TA	
k19	K19: The need to ensure confidentiality is maintained in all situations in which service users rely on additional communication support, such as interpreters or translators.		TD A												TD A		

k20	K20: How concepts of confidentiality and informed consent extend to all mediums, including illustrative clinical records such as photography, video and audio recordings and digital platforms.		TD A	T					TD A				TD A			
k21	K21: The characteristics and consequences of verbal and non-verbal communication and recognise how these can be affected by difference of any kind including, but not limited to, protected characteristics, intersectional experiences and cultural differences.		TD	T		TD A		TD A					DA			
k22	K22: The need to support the communication needs of service users and carers, such as through the use of an appropriate interpreter.		TD	T	DA			TD A					TD A			
k23	K23: The need to provide service users or people acting on own behalf with the information necessary in accessible formats to enable them to make informed decisions.		T					DA					DA			
k24	K24: The principles and practices of other health and care professionals and systems and how they interact with own profession.			TD A				DA					DA			
k25	K25: The need to build and sustain professional relationships as both an autonomous practitioner and collaboratively as a member of a team.		TD	TD				DA			D		DA			
k26	K26: The qualities, behaviours and										TD A		TD A			

	this with service users, taking into consideration service user judgement.																	
k44	K44: The philosophy and principles involved in the practice of their profession.		TD A						DA						D	T	D	
k45	K45: The principles of ionising radiation production, interaction with matter, beam modification, administration of radionuclides and radiation protection.		DA		TD A	T												
k46	K46: The physical and scientific principles on which image formation using ionising and non-ionising radiation is based.		DA		TD A													
k47	K47: Radiation dosimetry and the principles of dose calculation.		DA		TD A													
k48	K48: The theoretical basis underpinning service user assessment prior to and during their procedure.		TD A						DA	TD					TD A			
k49	K49: The capability, applications and range of equipment used in their profession.		TD A		TA				DA	TD A					TD A			
k50	K50: The concepts and principles involved in the practice of their profession and how these inform and direct clinical judgement and decision making.		TD A		TA	T			DA	TD A					TD A			
k51	K51: The pharmacology of drugs used in their profession.								T						TD A			
k52	K52: The legislation, principles and methods for the safe and effective administration of drugs used in their profession.								T						DA			

k53	K53: The mechanisms for the administration of drugs, including intravenous and oral contrast agents.		TD A						T	TD A				TD A		
k54	K54: The principles of the safe storage, transportation and disposal of medicinal products used in relation their profession.								T					TD A		
k55	K55: The different communication needs, anatomy and disease processes and their manifestation in children.	TD A	TD A						TD A				TD A	TD A		
k56	K56: The signs and symptoms of disease and trauma that result in referral for diagnostic imaging procedures and their image appearances.	TD A	TD A					TD A		TD		D	TD A			
k57	K57: The structure and function of the human body in health, disease and trauma, as well as common pathologies and mechanisms of disease and trauma, including the:– musculoskeletal system– soft tissue organs– regional and cross-sectional anatomy of the head, neck, limbs, thorax, pelvis and abdomen– the cardiovascular, respiratory, genitourinary, gastrointestinal and neuroendocrine systems.	TD A	TD A					TD A	DA	TD A		TD A				
k58	K58: A range of research methodologies relevant to own role.				TA	TA										TD A
k59	K59: The value of research to the critical evaluation of practice.				TA	TA				DA		D				TD A

S5	S5: Engage in safeguarding processes where necessary.		TD A						DA				DA	TD A		
S6	S6: Promote and protect the service user's interests at all times.		TD A						DA					TD A	T	
S7	S7: Respect and uphold the rights, dignity, values, and autonomy of service users, including own role in the assessment, diagnostic, treatment and/or therapeutic process.		TD A						T					TD A		
S8	S8: Recognise that relationships with service users, carers and others should be based on mutual respect and trust, and maintain high standards of care in all circumstances.		TD A	T					DA					DA		
S9	S9: Obtain valid consent, which is voluntary and informed, has due regard to capacity, is proportionate to the circumstances and is appropriately documented.		TD A						DA					DA		
S10	S10: Exercise a duty of care.		TD A						DA					DA		
S11	S11: Apply legislation, policies and guidance relevant to own profession and scope of practice.		TD A		TA				DA				D	DA		D
S12	S12: Recognise the power imbalance which comes with being a health care professional, and ensure it is not for personal gain.		TD A						T					D		
S13	S13: Practise in accordance with current legislation governing the use of ionising and non-ionising radiation for medical and other purposes.		TD A			T			DA					DA		

S14	S14: Identify own anxiety and stress and recognise the potential impact on own practice.		TD A						T						D	TD
S15	S15: Develop and adopt clear strategies for physical and mental self-care and self-awareness, to maintain a high standard of professional effectiveness and a safe working environment.		TD A						DA							DA
S16	S16: Recognise that they are personally responsible for, and must be able to, justify their decisions and actions.		TD A						DA						DA	
S17	S17: Use own skills, knowledge and experience, and the information available, to make informed decisions and/or take action where necessary.		TD A				T		DA				DA	DA		
S18	S18: Make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately.		TD A				T		DA						DA	
S19	S19: Make and receive appropriate referrals, where necessary.		TD A												D	
S20	S20: Exercise personal initiative.		TD A				T		DA	D					DA	
S21	S21: Demonstrate a logical and systematic approach to problem solving.		TD A				T		DA			DA	DA	DA		
S22	S22: Use research, reasoning and problem-solving skills when determining appropriate actions.		TD A				TA					DA				

S46	S46: Promote and engage in the learning of others		T	TD A										T	
S47	S47: Demonstrate awareness of the need to empower service users to participate in the decision-making processes related to their profession		TD A			T							DA		
S48	S48: Demonstrate awareness of the need to encourage, support and mentor staff at all practitioner levels		TD A						D				D		
S49	S49: Demonstrate awareness of roles and responsibilities where work is delegated and how this applies in practice		TD A	TD A					D				D		
S50	S50: Interpret and act upon information from other healthcare professionals and service users, in order to maximise health gain whilst minimising risks to the service user (such as from radiation dose)		TD A						TD A				TD A		
S51	S51: Engage in evidence-based practice		TD A			T			DA			DA	DA	T	TD A
S52	S52: Gather and use feedback and information, including qualitative and quantitative data, to evaluate the responses of service users to own care							D A							D
S53	S53: Monitor and systematically evaluate the quality of practice, and maintain an effective quality management and quality assurance process working towards continual improvement		T									D			D

S61	S61: Demonstrate awareness of the current developments and trends in the science and practice of diagnostic radiography		T						DA						DA
S62	S62: Demonstrate awareness of the principles of Artificial Intelligence (AI) and deep learning technology, and its application to practice														D
S63	S63: Change own practice as needed to take account of new developments, technologies and changing contexts							DA					DA		
S64	S64: Gather appropriate information			DA		D A			TD A						DA
S65	S65: Analyse and critically evaluate the information collected					D A			DA						TD A
S66	S66: Select and use appropriate assessment techniques and equipment		TD A					DA					DA		
S67	S67: Undertake and record a thorough, sensitive, and detailed assessment		TD					D					D		
S68	S68: Undertake or arrange investigations as appropriate		TD A					DA					DA		
S69	S69: Conduct appropriate assessment or monitoring procedures, treatment, therapy or other actions safely and effectively		TD A												
S70	S70: Critically evaluate research and other evidence to inform own practice					T	TA								DA
S71	S71: Engage service users in research as appropriate										T				T
S72	S72: Formulate specific and appropriate management										TA				

	plans including the setting of timescales																	
S73	S73: Assess, monitor and care for the service user across the pathway of care relevant to their profession		TD A												DA			
S74	S74: Undertake and record a thorough, sensitive and detailed clinical assessment, selecting and using appropriate techniques and equipment		TD A															
S75	S75: Use physical, graphical, verbal and electronic methods to collect and analyse information from a range of relevant sources including service user's clinical history, diagnostic images and reports, pathological tests and results, dose recording and treatment verification systems		TD A												DA			
S76	S76: Interrogate and process data and information gathered accurately in order to conduct the procedures most appropriate to the service user's needs		TD A												DA			
S77	S77: Appraise image information for clinical manifestations and technical accuracy, and take further action as required		TD A												TA			TD A
S78	S78: Manage complex and unpredictable situations including the ability to adapt planned procedures		TD A												TD A			TD A
S79	S79: Operate diagnostic imaging		TD A												DA			DA

B7	B7: Be aware of and take responsibility for their own fitness in context of physical and/or mental health issues which may affect performance. Seek help and/or guidance as appropriate. Inform Health and Care Professions Council and employer of any change of circumstance that may affect the right to practise.																		
			TDA																TDA

DUTIES

Level 4

Professional Practice		Clinical Reasoning in Medical Imaging	Introduction to Radiation Science	Systemic Anatomy and Physiology 1	Medical Imaging Practice 1	Concepts of Interprofessional and Collaborative Practice
DUTY	CRITERIA FOR MEASURING PERFORMANCE					
Duty 1 Practise safely and effectively within the scope of practice and within the legal and ethical boundaries of the profession.	Adhere to Health and Care Professions Council Standards of Proficiency, performance, conduct and ethics; and Society and College of Radiographers guidance; national legislation and local policies and procedures	TDA	D	D	TDA	D
Duty 2 Look after own health and wellbeing, seeking appropriate support where necessary.	Adhere to Health and Care Professions Council Standards of Proficiency, performance,	TDA			TDA	

	conduct and ethics; and Society and College of Radiographer's guidance; national legislation and local policies and procedures					
Duty 3 Practise as an autonomous professional, exercising professional judgement.	Adhere to HCPC Standards of Proficiency, performance conduct and ethics, Society and College of Radiographer's guidance; national legislation including Ionising Radiation (Medical Exposure) Regulations and Ionising Radiation Regulations; and local policies and procedures	TDA			TDA	TDA
Duty 4 Practise in a non-discriminatory and inclusive manner recognising the impact of culture, equality and diversity.	Adhere to Health and Care Professions Council Standards of Proficiency, performance, conduct and ethics; Society and College of Radiographer's guidance; national legislation including Ionising Radiation (Medical Exposure) Regulations; and Ionising Radiation Regulations				TDA	

	and local policies and[Text Wrapping Break]procedures					
Duty 5 Communicate effectively, maintaining confidentiality and records appropriately	Adhere to HCPC Standards of Proficiency, performance, conduct and ethics; Society and College of[Text Wrapping Break]Radiographers guidance; national legislation including Ionising Radiation (Medical Exposure) Regulations and Ionising Radiation Regulations; local policies and procedures	TDA			TDA	
Duty 6 Work appropriately with others.	Adhere to Health and Care Professions Council Standards of Proficiency, performance, conduct and ethics; Society and College of Radiographers guidance; national legislation including Ionising Radiation (Medical Exposure) Regulations; local policies and procedures	A			TDA	TDA

<p>Duty 7 Reflect on, review and assure the quality of own practice.</p>	<p>Adhere to Health and Care Professions Council Standards of Proficiency, performance, conduct[Text Wrapping Break]and ethics; Society and College of Radiographers guidance; local policies and procedures</p>	TDA			TDA	TDA
<p>Duty 8 Draw on appropriate knowledge and skills to inform practice and apply the key concepts of the knowledge base relevant to the profession.</p>	<p>Comply with national legislation, including data protection and Ionising Radiation (Medical Exposure) Regulations and local policies and procedures[Text Wrapping Break][Text Wrapping Break]Adhere to Health and Care Professions Council Standards of Proficiency, Performance, Conduct[Text Wrapping Break]and Ethics and Society and College of Radiographers Code of Professional Conduct</p>				TDA	TDA
<p>Duty 9 Establish and maintain a safe practice environment.</p>	<p>Adhere to Health and Care Professions Council Standards of Proficiency, performance,</p>				TDA	

	conduct and ethics;, and Society and College of Radiographer's guidance; national legislation and local policies and[Text Wrapping Break]procedures					
Duty 10 Promote public health and prevent ill health.	Adhere to Ionising Radiation (Medical Exposure) Regulations, Ionising Radiation Regulations and local policies and procedures[Text Wrapping Break][Text Wrapping Break]Adhere to Health and Care Professions Council Code of Conduct.	TDA			TDA	TDA

Level 5

Professional Practice		Systemic Anatomy and Physiology 2	Medical Imaging modalities	Medical Imaging of pathology and disease processes	Medical Imaging Practice 2	Appraising evidence for research informed practice
DUTY	CRITERIA FOR MEASURING PERFORMANCE					
Duty 1 Practise safely and effectively within the scope of practice and within the legal and ethical boundaries of the profession.	Adhere to Health and Care Professions Council Standards of Proficiency,		TDA	D	TDA	

	performance, conduct[Text Wrapping Break]and ethics; and Society and College of Radiographer s guidance; national legislation and local policies and procedures					
Duty 2 Look after own health and wellbeing, seeking appropriate support where necessary.	Adhere to Health and Care Professions Council Standards of Proficiency, performance, conduct[Text Wrapping Break]and ethics; and Society and College of Radiographer s guidance; national legislation and local policies and procedures				TDA	
Duty 3 Practise as an autonomous professional, exercising professional judgement.	Adhere to HCPC Standards of Proficiency, performance conduct and ethics, Society and College of Radiographer s guidance; national legislation including Ionising Radiation (Medical Exposure) Regulations and Ionising Radiation Regulations; and local policies and procedures				TDA	

<p>Duty 4 Practise in a non-discriminatory and inclusive manner recognising the impact of culture, equality and diversity.</p>	<p>Adhere to Health and Care Professions Council Standards of Proficiency, performance, conduct and ethics; Society and College of Radiographers guidance; national legislation including Ionising Radiation (Medical Exposure) Regulations; and Ionising Radiation Regulations and local policies and[Text Wrapping Break]procedures</p>				TDA	
<p>Duty 5 Communicate effectively, maintaining confidentiality and records appropriately</p>	<p>Adhere to HCPC Standards of Proficiency, performance, conduct and ethics; Society and College of[Text Wrapping Break]Radiographers guidance; national legislation including Ionising Radiation (Medical Exposure) Regulations and Ionising Radiation Regulations; local policies and procedures</p>				TDA	
<p>Duty 6 Work appropriately with others.</p>	<p>Adhere to Health and Care Professions</p>	TDA			TDA	

	Council Standards of Proficiency, performance, conduct and ethics; Society and College of Radiographers guidance; national legislation including Ionising Radiation (Medical Exposure) Regulations; local policies and procedures					
Duty 7 Reflect on, review and assure the quality of own practice.	Adhere to Health and Care Professions Council Standards of Proficiency, performance, conduct[Text Wrapping Break]and ethics; Society and College of Radiographers guidance; local policies and procedures				TDA	
Duty 8 Draw on appropriate knowledge and skills to inform practice and apply the key concepts of the knowledge base relevant to the profession.	Comply with national legislation, including data protection and Ionising Radiation (Medical Exposure) Regulations and local policies and procedures[Text Wrapping Break][Text Wrapping Break]Adhere to Health and Care Professions Council Standards of Proficiency,				TDA	

	Performance, Conduct[Text Wrapping Break]and Ethics and Society and College of Radiographer s Code of Professional Conduct					
Duty 9 Establish and maintain a safe practice environment.	Adhere to Health and Care Professions Council Standards of Proficiency, performance, conduct and ethics;; and Society and College of Radiographer s guidance; national legislation and local policies and[Text Wrapping Break]procedures				TDA	
Duty 10 Promote public health and prevent ill health.	Adhere to Ionising Radiation (Medical Exposure) Regulations, Ionising Radiation Regulations and local policies and procedures[Text Wrapping Break][Text Wrapping Break]Adhere to Health and Care Professions Council Code of Conduct.				TDA	

Level 6

Professional Practice	Professional Identity,	Contemporary Issues in	Interpretation of Medical	Medical Imaging	Improving quality,
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		Autonomy and Accountability	Medical Imaging	Imaging	ing Practice 3	change management and leadership
DUTY	CRITERIA FOR MEASURING PERFORMANCE					
Duty 1 Practise safely and effectively within the scope of practice and within the legal and ethical boundaries of the profession.	Adhere to Health and Care Professions Council Standards of Proficiency, performance, conduct[Text Wrapping Break]and ethics; and Society and College of Radiographers guidance; national legislation and local policies and procedures	TDA		TD	TDA	D
Duty 2 Look after own health and wellbeing, seeking appropriate support where necessary.	Adhere to Health and Care Professions Council Standards of Proficiency, performance, conduct[Text Wrapping Break]and ethics; and Society and College of Radiographers guidance; national legislation and local policies and procedures	TDA			TDA	
Duty 3 Practise as an autonomous professional, exercising professional judgement.	Adhere to HCPC Standards of Proficiency, performance	TDA			TDA	

	conduct and ethics, Society and College of Radiographers guidance; national legislation including Ionising Radiation (Medical Exposure) Regulations and Ionising Radiation Regulations; and local policies and procedures					
Duty 4 Practise in a non-discriminatory and inclusive manner recognising the impact of culture, equality and diversity.	Adhere to Health and Care Professions Council Standards of Proficiency, performance, conduct and ethics; Society and College of Radiographers guidance; national legislation including Ionising Radiation (Medical Exposure) Regulations; and Ionising Radiation Regulations and local policies and procedures	TDA			TDA	
Duty 5 Communicate effectively, maintaining confidentiality and records appropriately	Adhere to HCPC Standards of Proficiency, performance, conduct and ethics; Society and College of	TDA			TDA	

	Wrapping Break]Radio graphers guidance; national legislation including Ionising Radiation (Medical Exposure) Regulations and Ionising Radiation Regulations; local policies and procedures					
Duty 6 Work appropriately with others.	Adhere to Health and Care Professions Council Standards of Proficiency, performance, conduct and ethics; Society and College of Radiographers guidance; national legislation including Ionising Radiation (Medical Exposure) Regulations; local policies and procedures	DA			TDA	
Duty 7 Reflect on, review and assure the quality of own practice.	Adhere to Health and Care Professions Council Standards of Proficiency, performance, conduct[Text Wrapping Break]and ethics; Society and College of Radiographers guidance; local policies	D			TDA	D

	and procedures					
Duty 8 Draw on appropriate knowledge and skills to inform practice and apply the key concepts of the knowledge base relevant to the profession.	Comply with national legislation, including data protection and Ionising Radiation (Medical Exposure) Regulations and local policies and procedures[Text Wrapping Break][Text Wrapping Break]Adhere to Health and Care Professions Council Standards of Proficiency, Performance, Conduct[Text Wrapping Break]and Ethics and Society and College of Radiographers Code of Professional Conduct	TDA			TDA	
Duty 9 Establish and maintain a safe practice environment.	Adhere to Health and Care Professions Council Standards of Proficiency, performance, conduct and ethics;, and Society and College of Radiographers guidance; national legislation and local policies and[Text Wrapping Break]procedures	A			TDA	

Duty 10 Promote public health and prevent ill health.	Adhere to Ionising Radiation (Medical Exposure) Regulations, Ionising Radiation Regulations and local policies and procedures[Text Wrapping Break][Text Wrapping Break]Adhere to Health and Care Professions Council Code of Conduct.	A			TDA	
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K. Costs and Financial Support

Tuition fees/financial support/accommodation and living costs

- Information on tuition fees/financial support can be found by clicking on the following link: <http://www.lsbu.ac.uk/courses/undergraduate/fees-and-funding> or
- <http://www.lsbu.ac.uk/courses/postgraduate/fees-and-funding>

List of Appendices

Appendix A: Terminology **Appendix A: Terminology**

(Please review the definitions and add those according to your own course and context to help prospective students who may not be familiar with terms used in higher education.)

Some examples are listed below:

accelerated degree	accelerated degrees (also known as two-year degrees) are full bachelor's degrees (undergraduate courses) you can complete in a condensed time period
awarding body	a UK higher education provider (typically a university) with the power to award higher education qualifications such as degrees
bursary	a financial award made to students to support their studies; sometimes used interchangeably with 'scholarship'
collaborative provision	a formal arrangement between a degree-awarding body and a partner organisation, allowing for the latter to provide higher education on behalf of the former

compulsory module	a module that students are required to take
contact hours	the time allocated to direct contact between a student and a member of staff through, for example, timetabled lectures, seminars and tutorials
coursework	student work that contributes towards the final result but is not assessed by written examination
current students	students enrolled on a course who have not yet completed their studies or been awarded their qualification
delivery organisation	an organisation that delivers learning opportunities on behalf of a degree-awarding body
distance-learning course	a course of study that does not involve face-to-face contact between students and tutors
extended degree	an extended degree provides a bridging route for students who don't meet the initial entry requirements for the undergraduate degree. The first year provides the necessary knowledge and skills before students begin the degree-level course.
extracurricular	activities undertaken by students outside their studies
feedback (on assessment)	advice to students following their completion of a piece of assessed or examined work
formative assessment	a type of assessment designed to help students learn more effectively, to progress in their studies and to prepare for summative assessment; formative assessment does not contribute to the final mark, grade or class of degree awarded to students
foundation	foundation year programmes are designed to develop skills and subject-specific knowledge to ensure a student can advance to a degree course. They may be offered as stand-alone one-year courses or integrated into degree programmes.
higher education provider	organisations that deliver higher education
independent learning	learning that occurs outside the classroom that might include preparation for scheduled sessions, follow-up work, wider reading or practice, completion of assessment tasks, or revision
integrated	an integrated Master's degree combines undergraduate and postgraduate study. In relation to Apprenticeships, integrated would usually mean that the End Point Assessment (EPA) is integrated with the academic award
intensity of study	the time taken to complete a part-time course compared to the equivalent full-time version: for example, half-time study would equate to 0.5 intensity of study
lecture	a presentation or talk on a particular topic; in general lectures involve larger groups of students than seminars and tutorials
learning zone	a flexible student space that supports independent and social learning

material information	information students need to make an informed decision, such as about what and where to study
mode of study	different ways of studying, such as full-time, part-time, e-learning or work-based learning
modular course	a course delivered using modules
module	a self-contained, formally structured unit of study, with a coherent and explicit set of learning outcomes and assessment criteria; some providers use the word 'course' or 'course unit' to refer to individual modules
national teaching fellowship	a national award for individuals who have made an outstanding impact on student learning and the teaching profession
navigability (of websites)	the ease with which users can obtain the information they require from a website
optional module	a module or course unit that students choose to take
performance (examinations)	a type of examination used in performance-based subjects such as drama and music
pre-registration (HSC only)	a pre-registration course is designed for students who are not already registered with an independent regulator such as the Nursing and Midwifery Council (NMC)
professional body	an organisation that oversees the activities of a particular profession and represents the interests of its members
prospective student	those applying or considering applying for any programme, at any level and employing any mode of study, with a higher education provider
regulated course	a course that is regulated by a regulatory body
regulatory body	an organisation recognised by government as being responsible for the regulation or approval of a particular range of issues and activities
scholarship	a type of bursary that recognises academic achievement and potential, and which is sometimes used interchangeably with 'bursary'
semester	either of the parts of an academic year that is divided into two for purposes of teaching and assessment (in contrast to division into terms)
seminar	seminars generally involve smaller numbers than lectures and enable students to engage in discussion of a particular topic and/or to explore it in more detail than might be covered in a lecture
summative assessment	formal assessment of students' work, contributing to the final result

term	any of the parts of an academic year that is divided into three or more for purposes of teaching and assessment (in contrast to division into semesters)
top-up degree	A top-up degree is the final year (Level 6) of an undergraduate degree course. It allows students to top-up an existing qualification to a full BA, BSc or BEng.
total study time	the total time required to study a module, unit or course, including all class contact, independent learning, revision and assessment
tutorial	one-to-one or small group supervision, feedback or detailed discussion on a particular topic or project
work/study placement	a planned period of experience outside the institution (for example, in a workplace or at another higher education institution) to help students develop particular skills, knowledge or understanding as part of their course
workload	see 'total study time'
written examination	a question or set of questions relating to a particular area of study to which candidates write answers usually (but not always) under timed conditions