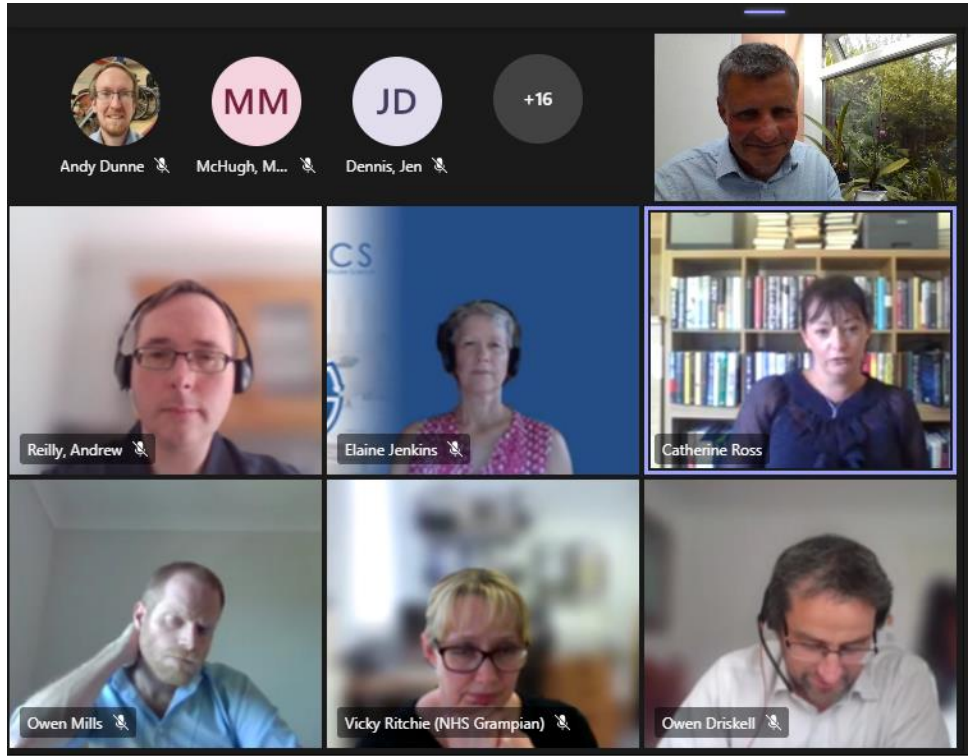


HSS Question & Answer Session, 23rd July 2021

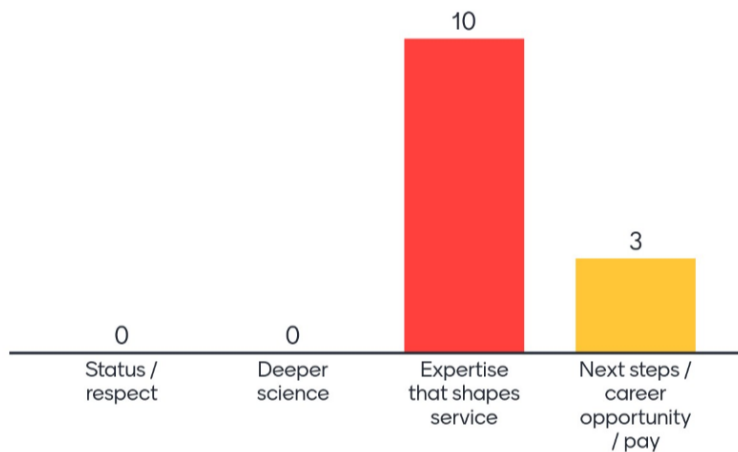
*The long haul and getting the most out of your HSS development*



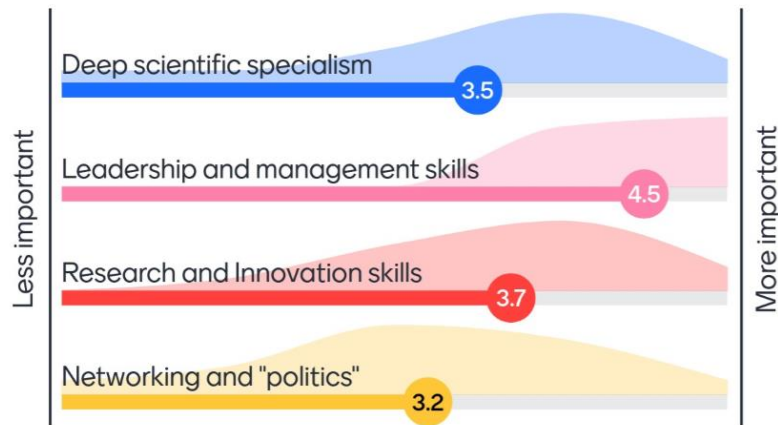
OPENING POLL

Why I aspire to be a Consultant level scientist

Mentimeter



I think the relative importance of being a consultant scientist is:



#### **Rob Farley - NES Associate Director, HCS. Underlying purpose**

- Highlighted Agenda for Change Handbook; potential unevenness in level of “consultant”
- Emphasised nature of support – develop 3 strands of research leadership and speciality
- Noted that the cohort was a pathfinder... what works in Scotland; what does service need.
- Noted that plans should yield eligibility to join HSSR as a shared level. No obligation.

#### **Catherine Ross – CHCSO, Scottish Government. Senior leadership**

- Emphasised the need for strong HCS leadership, especially during pandemic
- Explained “pathfinder” nature of cohort will indicate Scotland’s future approach
- Challenged is to take opportunities as part of their plan to “step up”, e.g. local HCS groups

#### **Andrew Reilly – Director DCPB Glasgow. Self-leadership**

- Noted individual plans toward equivalence unlike a formal programme (HSST)
- Glasgow approach is to have regular reviews, quarterly.
- Journey will have challenges and opportunities... all are formative and count
- Embrace the unexpected; time passes quickly, do not waste opportunity.

#### **Ruth Hamilton – DCPB, Electrophysiology of vision Professional bodies and societies: interacting for learning and research**

- Described own HSSR experience and professional activity
- Noted the hazard of professional isolation; professional bodies can overcome this
- Powerful message on networking opportunities and peer support... vital
- Inspiration and support for research: *clinically active hospitals have better patient outcomes*

## Healthcare Science – HSS

- Developing a personal repertoire...helps build experiences

### **Vicky Ritchie – GI Physiology Lead, Grampian. HSS trainee. Development of personal training plan**

- Summarised role and described GI service
- Outline a methodical approach to planning own development in line with GSP
- Emphasised contact with medical supervisor
- Explained approach to acquaintanceship with allied areas to broaden experience

### **Owen Driskell – HSST Training Programme Director. National School Perspective, IAPs and MAHSE**

- Outlined role of School, MAHSE
- Summarised purpose of *Independent Assessment of Professional Skills* towards the end of HSST programme on completion of One File log [by analogy the equivalence route viva follows “sign-off” of the equivalence portfolio]
- Noted the uncertainty in the Scottish group around research skills as per the opening poll

### **Elaine Jenkins – Head of Standards, AHCS. What level do I need to demonstrate equivalence?**

- Described AHCS process and approach regards equivalence and mapping to HSST curricula
- Explored the QAA descriptors of candidate skill-level at FHEQ level8 [SCQF 12] (i.e. doctoral)
- Note that equivalence requires breadth and depth *comparable* to HSST

### **Owen Mills – Principal Lead, NES HCS. HSS support -Training plans / progress monitoring, Multi-source feedback**

- Described NES HCS quality assurance interest
- Our ARCP exercise and how this will apply to HSS cohort
- Introduced our 360 degree multi-source feedback offer to supplement training

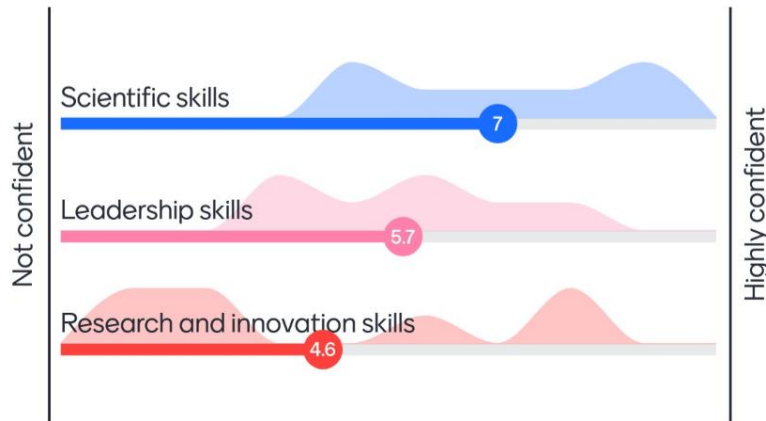
### **Rob Farley / Catherine Ross    Next steps**

- Emphasis on Consultant Scientist
- Monitoring progress of this pathfinder
- HSS trainees expect to check-in with NES as part of ARCP / any adjustments to plan
- Closing poll - what next / else?

CLOSING POLL

How confident are you that your training plan is on track in respect of:

Mentimeter



8

3 words on what could we explore next:

Mentimeter



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