

This route is for RCCP registered applicants only.

PERSONAL DETAILS

Please log onto the on-line form and up-date all sections as required.

The **address for correspondence** will be the one published in the RCCP Register (and Chartered Scientist register if applying for CSci) and should, where possible, be your work address as the information will be in the public domain. Please ensure that you keep your details up to date by editing your application details on-line (<http://www.rccp.co.uk>).

JOINT MODALITIES

Please check your registration modality. Whatever clinical procedures you perform, your attention is drawn to the HCPC Standards of Conduct, Performance & Ethics (2016) which states that registrants’ work within the limits of their knowledge and skills.”

QUALIFICATIONS & PROFESSIONAL EXAMINATIONS

You must supply documentary evidence that you hold a relevant post-graduate qualification awarded by an organisation which has been recognised by RCCP (See Appendix One). Documentary proof in the form of photocopies of certificates should be provided. If these cannot be supplied an explanation (or evidence of why they are not available) should be submitted.

REFERENCES

Attach two comprehensive written references (at least one side of A4):

1. One should be from your current Head of Service or Lead Clinician and should state the service relationship e.g. current Head of Service or Lead Clinician. **This must specifically support your stated role at M level** providing an outline of all the details of your duties and dates of your employment – please provide start and finish dates. This reference needs to be provided on original official (e.g. NHS) letterhead, and be signed and currently dated. The reference must be dated within 6 months of application being received.
2. The second referee could be a peer, educator or other registered healthcare professional who is able to validate/support your application.

REPORT

The application and report is a record of training and experience gained to demonstrate the attainment of personal competence across a range of activities which relate to the sections of the written report (see Appendix

Two). It in no way refers to the activities of an individual department. You are required to upload a report using the headings in Appendix Two covering the period of employment (at least 2 years for the M Level register and 4 years if the application is for CSci). Prepare your report as a word document, a maximum of 1500 words. The report should be pasted into the box provided on-line. This supporting evidence should be at the level of HCPC Clinical Scientist Standards of Proficiency (see <http://www.hpc-uk.org>), and the standards required for Chartered Scientist (<http://sciencecouncil.org/>). Ensure you are familiar with these standards before you prepare your report so that you appropriately reflect their requirements.

CPD ACTIVITY

Please upload a list all CPD activity undertaken in the last two years to the RCCP website. Please use the template in Appendix 3. CPD can be achieved through various activities both in-house as well as external. More information can be found on the RCCP website. If applying for Chartered Scientist, please upload a full report (plus any additional evidence), to demonstrate that the Science Councils standards are met. For more information on CSci CPD requirements see <http://sciencecouncil.org/web/wp-content/uploads/2016/02/CSci-standards-approved-Apr15.pdf>.

FEES

The current table of fees can be found on the RCCP website.

SUBMISSION

- Cheque made payable to RCCP (if payment not met by the online direct debit with Go Cardless)

PROCESSING

Forms will be processed within six months of receipt of fully completed forms and all additional documents.

RCCP Administration
Executive Business Support Ltd
City Wharf
Davidson Road
Lichfield
Staffordshire WS14 9DZ

APPENDIX ONE: RECOGNISED ACADEMIC QUALIFICATIONS AND ASSESSMENT OF COMPETENCE FOR APPLICATION TO THE PHYSIOLOGIST M LEVEL REGISTER (ROUTE ONE) FOR CLINICAL PHYSIOLOGISTS

The list of the current recognised UK qualifications required for Route 1 or 1A can be found on the RCCP website (<http://www.rccp.co.uk>).

Any other relevant MSc may be considered on an individual basis and you are advised to contact your RCCP or PB representative who will advise you prior to applying.

APPENDIX TWO: PROFESSIONAL BODY GUIDANCE

Below is a list of the types of activities which a practitioner practicing at M level might undertake. This is in no way an exclusive list. N.B. Undertaking a few of these activities will not qualify for the M-level register; it is essential to be able to demonstrate knowledge and skill across the range required. It is important to note that one piece of work/ activities could be cross cutting over more than one of the sections.

Professional Autonomy

- Development of policies e.g. new investigations, risk assessment, health and safety policies
- Multi disciplinary communication with regards to planned patient care
- Involvement in research, audit and service improvement in relation to ethical requirements
- Case studies/case conferences/reflective practice to demonstrate compliance with legal and ethical boundaries.
- Using own judgement(s) in provision of clinical reporting and advice e.g. theatre monitoring, ITU, lone working, triaging etc, where it results in action being taken which impacts directly upon patient management
- Demonstration of on-going CPD and personal development
- Involvement in commissioning

Scientific and Clinical Practice

To perform a complex procedure you will need to:

- Apply scientific/medical knowledge to plan the procedure within an evidence based practice framework
- Understand the complex nature of the investigation in relation to the patients needs
- Use excellent communication skills and judgement to influence the outcome
- Ensure the procedure is carried out to the highest standard using the most appropriate equipment and technology
- Analyse and if necessary modify the procedure to ensure a high quality and safe experience for the patient
- Interpret and communicate outcome to relevant personnel in a timely manner
- Use reflective practice

Examples of activities which may demonstrate the above:

- Verbal and written physiologist clinical reporting (application must include anonymised signed and countersigned witness statements/reports)
- Video-telemetry (ANS)
- Theatre monitoring (e.g. Neuro/spinal) (ANS)
- Invasive monitoring (e.g. chronic/ECoG) (ANS)
- Complex NCS (i.e. not standard CTS screening) (ANS)
- Sleep studies (ANS)
- Complex EPs (ANS)

- In a range of GI investigations (GI)

Professional relationships

It is likely that the evidence to support section 1 and 2 will also support professional relationships at the appropriate level. In addition, other examples include:

- Provide effective leadership through engagement in multi-disciplinary teams; line management/ clinical supervision/ mentoring responsibilities; commissioning and quality assurance activities etc
- Engaging with service user in obtaining feedback at an individual and organisation level and acting on outcomes
- Lead investigator for incidents and complaints
- Supporting the professional body by working with other professional groups and stakeholders at a high level (i.e. Trust/SHA/DH levels) to ensure that appropriate professional standards are set and maintained
- Obtain consent, communicating risks and benefits to patients
- Involvement in specialist interest group locally/regionally/nationally

Research and service improvement

This section can be evidenced through significant involvement with a research or service improvement project.

Other activities may include:

- Develop, monitor and manage quality assurance processes
- Development, implementation and maintenance of policies and protocols
- Development of business cases
- Development and implementation of audit – analysis of results and development of appropriate action plans
- Development and/or maintenance of clinical databases
- Incident investigation, implementing actions (with appropriate anonymisation)
- Formal research projects/papers (n.b. you must lead or have a significant contribution to the study and/or have written the paper)
- Workforce planning
- Development of patient pathways

