

# **KEY PROGRAMME INFORMATION**

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Originating institution(s) Bournemouth University	Faculty responsible for the programme Faculty of Health and Social Sciences									
Final award(s), title(s) and credits BSc (Hons) Operating Department Practice 1 (60 ECTS) Level 6 credits	120 (60 ECTS) Level 4 / 120 (60 ECTS) Level 5 / 120									
Intermediate award(s), title(s) and credits BSc Perioperative Studies 120 (60 ECTS) Le credits Dip HE in Perioperative Studies 120 (60 ECT	evel 4 / 120 (60 ECTS) Level 5 / 80 (40 ECTS) Level 6									
Cert HE in Perioperative Studies 120 (60 ECTS) Level 4 credits										
UCAS Programme Code(s) (where applicable and if known) B991	HECoS (Higher Education Classification of Subjects) Code and balanced or major/minor load. 100273									
<ul> <li>External reference points</li> <li>Quality Assurance Agency for Higher Education (QAA) (2014), UK Quality Code for Higher Education - The Frameworks for Higher Education Qualifications of UK Degree-Awarding Bodies</li> <li>*QAA Subject Benchmark Statement for Operating Department Practice (2004) are out of date and only available via the QAA archive</li> <li>Health &amp; Care Professions Council (2023), Standards of Proficiency for Operating Department Practitioners</li> <li>Health &amp; Care Professions Council (2017), Standards of Education &amp; Training</li> <li>The Perioperative Care Collaborative - Position Statement</li> </ul>										
Professional, Statutory and Regulatory Bo Health and Care Professions Council	ody (PSRB) links									
Places of delivery Bournemouth University										
Mode(s) of delivery Full-time	Language of delivery English									
Typical duration 3 years										
Date of first intake September 2024	Expected start dates September 2024									
Maximum student numbers 28	Practice-based learning providers Dorset, Hampshire & Wiltshire									
Partner(s) Not applicable	Partnership model Not applicable									
Date of this Programme Specification September 2024										
Version number 2.1										
Approval, review or modification reference E232415 FHSS 2425 04, approved on 04/10/24, previous										
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# PROGRAMME STRUCTURE

Programme Award and Title: BSc (Hons) Operating Department Practice

# Year 1/Level 4

Students are required to complete all 6 core units

Unit Name	Core/	No of credits	Assess	ment elem	ent weig	htings	Expected contact	Unit version	HECoS (	
		0.000	Exam 1	Exam 2	Cwk	Practice		no.	major/mino	
Foundations of Surgical Care	Core	20			40%	60%	40	1	100273 100%	
Foundations of Anaesthetic Care	Core	20			40%	60%	40	1	100273 100%	
Foundations of Postanaesthetic Care	Core	20			40%	60%	40	1	100273 100%	
Anatomy and Physiology for Perioperative Practice	Core	20	50%	50%			30	1	100273 100%	
Foundations of Operating Department Practice	Core	20			100%		30	1	100273 100%	
Learning in Higher Education for Healthcare Practice	Core	20			100%		30	1	100273 100%	

2

Progression requirements: Requires 120 credits at Level 4

Exit qualification: Cert HE Perioperative Studies (requires 120 credits at Level 4)

# Year 2/Level 5

Students are required to complete all 6 core units

Unit Name	Core/ Option	No of credits	Ass	essment el weighting		Expected contact	Unit version	version (plus balanced				
			Exam	Cwk	Practice 1	hours per unit	no.	major/mi	nor load)			
Developing Surgical Care	Core	20		40%	60%	40	1	100273 100%				
Developing Anaesthetic Care	Core	20		40%	60%	40	1	100273 100%				
Developing Postanaesthetic Care	Core	20		40%	60%	40	1	100273 100%				
Perioperative Science	Core	20		100%		30	2.0	100273 100%				
Research for Professional Practice	Core	20	50%	50%		30	1	100273 100%				
Medicines Management for Perioperative Practice	Core	20		100%		30	1	100273 100%				

Progression requirements: Requires 120 credits at Level 5

Exit qualification: Dip HE Perioperative Studies (requires 120 credits at Level 4 and 120 credits at Level 5)

3

#### Year 3 / Level 6

Students are required to complete all 6 core units for the full award.

Students who achieve a minimum of 80 credits at this level but do not achieve the full 120 credits, will be eligible for an intermediate award of BSc Perioperative Studies.

Unit Name	Core/ Option	No of credits		ssment elei weightings	ment	Expected contact	Unit version	HECoS Code (plus balanced or				
			Exam	am Cwk Practice		hours per unit	no.	major/mi	nor load)			
Enhancing Postanaesthetic Care	Core	20		50%	50%	40	1	100273 100%				
Enhancing Surgical Care	Core	20		50%	50%	40	1	100273 100%				
Enhancing Anaesthetic Care	Core	20		50%	50%	40	1	100273 100%				
Transitioning to Registered ODP	Core	20		100%		30	1	100273 100%				
Evidence for Professional Practice	Core	20		100%		30	1	100273 100%				
Leading and Managing Change in Healthcare	Core	20		100%		30	1	100273 100%				

Intermediate award, exit qualification: BSc Perioperative Studies

Full-time UG award: Requires 120 credits at Level 4, 120 credits at Level 5 and 80 credits at Level 6

Exit qualification: BSc (Hons) Operating Department Practice

Full-time UG award: Requires 120 credits at Level 4, 120 credits at Level 5 and 120 credits at Level 6

4

#### 2.1 AIMS OF THE DOCUMENT

This BSc (Hons) Operating Department Practice programme specification aims to:

- Define the structure of the programme.
- Specify the programme award titles.
- Identify programme and level learning outcomes.
- Articulate the regulations governing the awards defined within the document.

#### 2.2 AIMS OF THE PROGRAMME

The overall aim of the programme is to prepare individuals to practice safely whilst providing high quality care to patients. The graduates from the BSc (Hons) Operating Department Practice programme become competent and confident professionals, who are compassionate, reflective, and critical in their thinking and approach to practice. They embrace principles of humanisation which includes recognising diversity, respecting patients and their choices, engaging in open and compassionate communication, and placing patients at the heart of actions and decisions. Graduates value working collaboratively with colleagues, patients (including family and carers) but also recognise the importance to work independently. Their strong professional identity and focus on perioperative patient care, enables them to adapt in healthcare settings and seize new opportunities in emerging areas of practice. Thus, the programme looks to provide graduates with the necessary knowledge, skills, values, and attributes to work safely, ethically, and effectively as Operating Department Practitioner (ODP) in a wide variety of settings, and through continuing professional development to become leaders within the profession.

The HCPC Standards of Proficiency for ODPs, are explicit in the practice assessment documentation to support a culture of familiarity and importance of the essence of what perioperative practice is for students and in their clinical settings. Successful completion of the BSc (Hons) Operating Department Practice programme importantly means a graduate is eligible to apply for registration with the HCPC as a registered ODP.

The curriculum aims to create a vehicle that facilitates the students' journeys with the accumulation of the skills, knowledge, ability, and values that exceeds the professional minimum to practice perioperative care and thereby:

- Develop an understanding of their current role as a critical thinker that maintains practice in light of current evidence.
- Undertake a life-long approach to learning and the skills to inform themselves and others concerning developing good practice to enhance their care of others.
- Demonstrate fitness for registration with the appropriate professional body through compassionate and intelligent care that celebrates the diversity and individuality of humanised care.
- · Act as ambassadors for high professional standards and values.
- Practice perioperative care in a consistently competent, highly skilled and safe manner.

The BSc (Hons) Operating Department Practice programme aims to continue and build on the success of the previous BSc (Hons) Operating Department Practice programme that has enjoyed an above BU average overall student satisfaction NSS score over the last 5 years (achieving 100% in previous years and 100% in 5 questions in 2023; 9 questions 90-99%; 8 questions 80-89% in last year's NSS which did not offer overall rating). Additionally, we have had 100% employment or further studies at point of qualification, with graduates normally securing employment at their place of choice.

#### 2.3 ALIGNMENT WITH THE UNIVERSITY'S STRATEGIC PLAN

The programme continues to be an important part of Bournemouth University's Faculty of Health and Social Sciences (FHSS) portfolio, as identified in the faculty's strategic plan. The BSc (Hons) Operating Department Practice programme, like many across England and Wales, commenced in 2003 and has seen 17 graduations. Previously, Operating Department Practice was an NVQ taught in hospital/education centres. As a young profession that has been establishing itself in higher education as a graduate programme, the academic team have worked hard and achieved much in meeting national workforce demands. The programme continues to work hard to maintain its own identity whilst working towards its contribution to the university's strategic plan. BU's strategic plan and the fusion agenda focuses on the balance and links between practice, theory and research for students, staff, and society.

The BSc (Hons) Operating Department Practice program has always emphasised the crucial connection between theory and practice, and more recently, this relationship has been strengthened through the integration of research. This curriculum seeks to expand upon this approach by incorporating the faculty's commitment to interprofessional education and units designed with a significant emphasis on research and evidence-based practice. This integration of education, research, and professional practice fosters an engaging and purposeful learning environment, shaping students' attitudes toward learning, practice-based learning (PBL), and academic accomplishments, instilling in graduates the qualities of employability, safety, and effectiveness, coupled with a personable and professional conduct as they commence their careers.

### 2.4 LEARNING HOURS AND ASSESSMENT

#### **Learning Hours:**

Bournemouth University taught programmes are composed of units of study, which are assigned a credit value indicating the amount of learning undertaken. The credit value of each unit in this programme is 20 credits, which is equivalent 10 European Credit Transfer System (ECTS) credits. Every level in the programme has three units with 40 contact hours each (including skills sessions) and three units with 30 contact hours (no skills sessions). PBL varies within the 3-year programme as described below:

Level 4 – three PBL blocks, totalling 720 clinical hours.

Level 5 – three PBL blocks, totalling 795 clinical hours.

Level 6 – three PBL blocks, totalling 685 clinical hours.

Moreover, each unit has additional hours dedicated to assessment (exam, coursework, presentation, and practice assessment).

The students spend just over 50% of their activity in the practice environment. This is turn does slightly reduce the nominal self-managed study time but enables students to benefit from time in practice as part of their learning experience. The BSc (Hons) Operating Department Practice programme has a well-established working partnership with the PBL provider it is linked to. All students are scheduled for around 2,500 hours of PBL (including practice assessment) throughout the three years, which is critical to the programme and to the development of students. The academic team, with practice co-ordinators and our education links at hospitals, work hard to ensure students are effectively allocated and supported in relevant areas of practice to develop their skills, knowledge, and proficiencies, enabling them to achieve their full potential. In addition, PBL providers have ongoing support from the University Practice Learning Advisor (UPLA) team.

All PBL providers deliver a high standard of care and are committed to the teaching and assessment of the future workforce. The PBL will include a range of acute settings that give students the opportunity to develop their skills and achieve competencies and proficiencies. All PBL providers are subject to regular education audit and review to ensure they maintain and develop an optimum learning environment for students.

#### **Assessment:**

The BSc (Hons) Operating Department Practice programme aims to promote a holistic and effective learning experience for students, and the assessments are crucial to achieving this. Different types of assessments promote the development of a wide range of skills, ensuring that different types of learners can demonstrate their understanding and knowledge effectively. Key to this is using assessment for learning as well as assessment of learning. This is enabled through the range of assessments that look to develop student's intellectual ability, dissemination skills, critical thinking, use of literature and integration of theory and practice. Additionally, the wide range of approaches to assessment, added to learning in clinical areas, mirror the real-world scenarios and better prepare students for the challenges they will face in their future careers. In addition, assessment takes on the responsibility of ensuring students are able to demonstrate they meet the HCPC standards of proficiency.

Assessment strategies are likely to include written assignments, examinations (unseen and open book), OSCEs, inter-professional group work, posters, presentations, *Viva Voce*, patchwork, and portfolio. Feedback aims to not only clarify achievement but to also promote reflection and support the student's personal development journey.

Clinical practice will be assessed using the practice assessment tool which is based on the HCPC Standards of Proficiency for Operating Department Practitioners; so that all students are measured against every proficiency in the hospital setting to determine student's ability by relevant practice supervisors and practice assessor.

#### 2.5 STAFF DELIVERING THE PROGRAMME

The great majority of student learning is delivered by the BSc (Hons) Operating Department Practice academic team. The two interprofessional units are delivered as department or faculty wide units and draw from the wide range of expertise the faculty enjoys. This approach enables all students to benefit from the teaching and learning that experts and experienced academic are able to offer. Learning in the hospital is made through practice supervisors, practice assessors and other healthcare professionals.

The programme is supported by a wide range of programme, faculty and university staff including, programme support officer and administrators, practice simulation technicians, librarians, learning support, learning technology and so forth.

All students are allocated a personal tutor from the academic team. The personal tutor is the link between the hospital where the student is allocated and the academic team. Additionally, each hospital is further supported by a member of the University Placement Learning Advisor (UPLA) team.

## 2.6 INTENDED LEARNING OUTCOMES (ILOs)

Across the three years, distinct indicators outline the directions that students will follow, guiding their development into graduates. These indicators revolve around fostering confidence in research, a humanised approach to care, the importance of patient-centred care, enhancing problem-solving skills, and improving clinical competencies. Appendix 1 outlines the ILOs for each level of study and indicates what learning/assessment strategy is used to enable the students to achieve the ILOs. Appendix 2 maps the ILOs against each unit.

To facilitate student learning, a variety of methods are employed, including lectures, interactive seminar-style discussions, tutorials, simulations, skills sessions, access to a diverse array of materials on the virtual learning environment (VLE), and exposure to clinical settings. The acquisition of theoretical knowledge is further reinforced through practice simulations, offering a dual learning approach involving initial demonstration and subsequent hands-on practice. The demonstration phase of practice simulation allows students to observe, engage, and grasp various practical aspects, paving the way for them to practice and refine their skills within a secure and controlled environment.

These essential higher education skills are developed and refined over the course of the three-year programme, with a distinct emphasis on the significance of research and the incorporation of research-friendly language. This approach enables students to recognise the interconnected nature of evidence-based practice and effective care. While this approach is applied throughout numerous units, it is explicitly emphasised in the level 5 "Research into Professional Practice" unit; the level 6 "Evidence for Professional Practice" unit; and the level 6 "Leading and Managing Change in Healthcare" unit.

The curriculum promotes a transition from learners to skilful practitioners, emphasising a balanced assessment strategy that requires them to showcase their theoretical understanding, practical skills, and ability to apply knowledge with empathy to enhance patient within the dynamic landscape of healthcare practice.

#### 2.7 ADMISSION REGULATIONS

The admissions regulations for this programme are the University's Standard Undergraduate Admissions regulations and are available on this page:

https://intranetsp.bournemouth.ac.uk/pandptest/3A-standard-admissions-regulations.pdf

With the following additional requirements set out by professional and statutory bodies:

- The requirement to satisfy criminal conviction checks with the Disclosure and Barring Service at an enhanced level. See policy <u>3E-admissions-policy-and-procedure-for-applicants-with-a-criminal-record.pdf</u> (bournemouth.ac.uk)
- The requirement to satisfy health checks by student self-declaration, GP statements or Occupational Health reports and to receive or follow guidance from Occupational Health, as per national standards, for exposure prone procedures.
- International applicants must offer evidence of qualifications in written and spoken English. Acceptable qualifications are: IELTS (academic) 6.5 (with a minimum of 6.0 in writing and 6.5 in speaking, listening, and reading) or direct equivalent.
- UK nationals/residents or those with dual citizenship, who do not have English as their first language, will not require IELTs and will be assessed at interview with regard their ability to effectively communicate in English.
- Consideration will be given to applicants with substantive and relevant work experience.

#### 2.8 ASSESSMENT REGULATIONS

The regulations for this programme are the University's Standard Undergraduate Assessment Regulations (<a href="https://intranetsp.bournemouth.ac.uk/pandptest/6a-standard-assessment-regulations-undergraduate.pdf">https://intranetsp.bournemouth.ac.uk/pandptest/6a-standard-assessment-regulations-undergraduate.pdf</a>), with the following approved exceptions:

### Pass Mark (section 6):

The pass mark for each unit will be 40%. Where a unit contains practice placement as one element of summative assessment, and exam or coursework as the other element of summative assessment, a pass will be awarded where:

- the overall unit mark is at least 40% AND
- the mark of practice placement is not less than 40% AND
- the mark of exam or coursework is not less than 36%

Where the practice placement element has separate components, a fail in any one component will result in a mark of 0% being awarded for that element.

**Compensation (section 7):** awards of credits for a unit in which a passing grade (40%) was not achieved, based on good overall academic performance.

- Compensation does not apply to units which have practice placement as the only element of summative assessment.
- Compensation does not apply to units where the practice placement element is less than 40%.

**Awards (section 10):** Certificate HE, DipHE, BSc, and Aegrotat awards will not confer eligibility to apply for registration with the Health and Care Professions Council and will be titled Perioperative Studies'.

**Provision for failed candidates (section 12)**: Carrying credit is not permitted for any practice-based units.

**External Examiners:** To meet the requirements of the Health and Care Professions Council, at least one external examiner for the programme must be appropriately experienced/qualified and be registered on the relevant part of a statutory professional register.

# 2.9 PRACTICE-BASED LEARNING (PBL)

PBL is an integral part of the programme and are factored into the degree classification in accordance with standard university guidelines. Diverse PBL opportunities facilitate the fulfilment of student outcomes, promoting the integration of practical experience with theoretical knowledge and encouraging the application of practical insights to inform theoretical understanding.

PBL is provided in a broad range of perioperative settings in both NHS and the independent sector across Dorset, Hampshire, and Wiltshire. Clinical areas typically involve operating theatres, including the anaesthetic areas and recovery units but, particularly in year three, it may also include other acute areas relevant to the programme such as pre-operative assessment, acute admissions, ITU/HDU. The curriculum offers students the opportunity to engage in "role-emerging areas", allowing them to gain diverse experience by working in environments that may currently lack comprehensive Operating Department Practice provision.

Students complete three units involving PBL in each level of study. These units progress from level 4 and build on previous learning through levels 5 and 6. This progressive module structure aims to provide students with a solid foundation in the initial years, followed by the development of advanced knowledge and skills in the subsequent years, ultimately preparing them for successful careers in their chosen field of study.

These PBL units have two elements of assessment, with one of them being coursework and the other being a practice profile, completed and assessed via the practice assessment tool. The practice element includes relevant skills, HCPC proficiencies, reflections, 6Cs and a one-day assessment, where students are expected to bring together their newly acquired learning to efficiently and empathetically care for patients on a selected operating list.

At the beginning of each PBL block, students meet with their allocated practice supervisor/assessor for an initial interview, to determine learning strategies and what types of formative feedback would be useful. A mid-way interview includes a student reflection on their learning experience and formative feedback. The final assessment also includes an articulation of how the student has aligned their learning to the 6Cs. This allows students to learn through a braided approach that integrates their theoretical learning with their practice-based learning.

Practice supervisors/assessors are qualified registered practitioners that have been educated in mentoring and have been supported in BU processes (including assessment expectations and assessment tool) by the Personal Tutor/UPLA team. Personal Tutors and the Programme Leader maintain a close contact with practice educators to support and ensure effective management of the PBL experience. Additionally, a comprehensive monitoring process is

maintained through regular audits and communication with PBL education leads to ensure the quality of student experience, including the provision of a secure environment conducive to supporting student learning, and the presence of adequately qualified practice educators to educate, assess and support students.

#### 2.10 PROGRAMME ANNUAL MONITORING

For the purpose of annual monitoring, adherence to the University Academic Quality policies will be followed. The Programme Leader will be responsible for generating an Annual Monitoring and Enhancement Review (AMER), while Unit Leaders will produce Unit and Assessment Monitoring Report (UAMR). These reports will be informed by student feedback and performance data.

The objectives of the review, reports and planning process include:

- Assessing the achievement of intended learning outcomes by students.
- Evaluating the ongoing effectiveness of the curriculum, assessments and student experience
- Reviewing the completion of the action plan and proposing a new action plan for the subsequent year.
- Ensuring the implementation of appropriate measures to address any identified deficiencies.

During completion of the AMER, the Programme Leader, in collaboration with the academic team, will analyse and consider available data and information regarding the programme, including but not limited to: external examiner reports, reports from accrediting or external bodies, input from staff and students, student progression data, awarding gap data, National Student Survey data.

#### 2.11 PROGRAMME HANDBOOK

The academic team has devised the Programme handbook, which can be regularly revised and modified in an official capacity to accommodate evolving requirements. This handbook serves as an important resource during programme delivery, offering key information such as relevant contacts, detailed unit specifications, acquired employability skills, assessment requirements, course particularities, and guidelines for handling contingencies.

# Appendix 1

# **BSc (Hons) Operating Department Practice Intended Learning Outcomes Level 6**

		T
	ject knowledge and understanding	The following learning, teaching & assessment
	ogramme provides opportunities for students to develop and demonstrate	strategies & methods enable students to achieve
	dge and understanding of:	& demonstrate the programme learning outcomes:
A1:	Key legal and professional policies and guidelines to enhance best	Learning and teaching strategies and methods:
۸۵.	practice and provide a safe and effective care environment.	• lectures (A1-A6)
A2:	How human factors, safety, culture, and values influence the delivery of	• seminars (A1-A6)
	humanised care and developing good communication skills that	directed reading (A1-A6)
۸۵.	enhance working and therapeutic relationships.	• use of the VLE (A1-A6)
A3:	Sound knowledge of a wide range of clinical procedures with a depth of understanding of appropriate diagnostic, monitoring and therapeutic	<ul> <li>practice-based learning (A1-A6)</li> </ul>
	interventions.	• simulation (A2, A3, A6)
A4:	How evidence-based practice enhances perioperative care and	Assessment strategies and methods:
A4.	understanding the variety of research methods that contribute to the	<ul> <li>practice assessment (A1-A6)</li> </ul>
	development of perioperative practice.	• OSCE (A3,A5)
A5:	Application of perioperative science to understand, assess, inform, and	• exam (A1-A5)
710.	support patient care.	• essay (A1-A6)
A6:	Leadership and management principles, innovation, and adaptation to	<ul><li>poster (A1,A2,A4)</li></ul>
710.	change	<ul> <li>oral presentation (A1,A4,A6)</li> </ul>
	Shariyo	• group work (A1,A4,A6)
	llectual skills	
This pr	ogramme provides opportunities for students to:	
B1:	Analyse, critically appraise and apply evidence from literature and a	Learning and teaching strategies and methods:
	variety of other sources to develop best practice and understand the	• lectures (B1-B6)
	principles of audit and evidence-based practice.	• seminars (B1-B6)
B2:	Understand methods commonly used in perioperative care research,	directed reading (B1-B6)
	including ethical issues, the collection, interpretation and analysis of	• use of the VLE (B1-B6)
	data and dissemination of findings.	<ul> <li>practice-based learning (B1-B6)</li> </ul>
B3:	Critically evaluate new concepts, theories, and research in order to	• tutorial (B1-B3,B5)
	determine their relevance to perioperative practice and to creatively	• simulation (B4,B5)
D4:	resolve problems, recognising the need for innovation in practice.	Assessment strategies and methods:
B4:	Demonstrate clinical reasoning and professional judgement in	practice assessment (B1, B3-B5)
DE.	evaluating and monitoring the effectiveness of specific practice.	• OSCE (B4,B5)
B5:	Demonstrate critical reflection on and evaluation of clinical applications	• exam (B1,B3)
	and a critique of own performance.	• essay (B1-B3)
		• poster (B1-B3)
		oral presentation (B1-B3)
		• group work (B1-B3)
C: Pra	ctical skills	
	ogramme provides opportunities for students to:	
C1:	Attain national proficiencies for perioperative practice.	Learning and teaching strategies and methods:
C2:	Demonstrate skill in the assessment, monitoring, support, and care of	• simulation (C2-C5)
	perioperative patients.	directed reading (C3)
C3:	Develop, implement, and evaluate practice, demonstrating application	• use of the VLE (C3)
	of best evidence, effective use of resources and patient-centred	practice-based learning (C1-C6)
	practice.	Assessment strategies and methods:
C4:	Communicate professional judgements and findings effectively to meet	practice assessment (C1-C6)
	diverse needs.	• OSCE (C1-C6)
C5:	Work in highly complex and pressurised settings, maintaining	• Simulation (C1-C6)
	advocacy, professional integrity, and judgement.	
C6:	Demonstrate safe practice and know when a situation is beyond the	
	scope of one's own practice.	

D: Tra	nsferable skills	
This pr	ogramme provides opportunities for students to:	
D1:	Practice in an anti-oppressive manner, respecting the rights, dignity, culture & individuality of patients and colleagues, working in a patient-centred manner with people from diverse backgrounds.	Learning and teaching strategies and methods:  • lectures (D3-D7)  • seminars (D3-D7)
D2:	Build professional relationships, underpinned by partnership and trust and respecting consent, confidentiality, and dignity of patients.	<ul><li>directed reading (D5-D7)</li><li>use of the VLE (D5-D7)</li></ul>
D3:	Demonstrate verbal and non-verbal communication skills that support diversity and effective professional interaction.	<ul> <li>practice-based learning (D1-D6)</li> <li>tutorial (D3-D7)</li> </ul>
D4:	Communicate effectively in formal and informal situations through a range of media.	• simulation (D1-D6)
D5:	Resolve problems systematically, logically, and creatively, drawing on a range of knowledge and information sources.	Assessment strategies and methods:
D6:	Demonstrate IT literacy and skill in using information and communication technologies.	<ul><li>practice assessment (D1-D7)</li><li>OSCE (D3-D5)</li></ul>
D7:	Understand the importance of their own mental and physical health and wellbeing strategies in maintaining fitness to practise.	<ul> <li>exam (D5,D6)</li> <li>essay (D4-D6)</li> <li>oral presentation (D3-D6)</li> <li>poster (D4-D6)</li> <li>group work (D2-D7)</li> </ul>

# Diploma of Higher Education Perioperative Studies Intended Learning Outcomes Level 5

	owledge and understanding	The following learning, teaching & assessment
	evel provides opportunities for students to develop and demonstrate edge and understanding of:	strategies & methods enable students to achieve & demonstrate the programme learning outcomes:
A1:	Current health and social policies and the implications in a healthcare setting.	Learning and teaching strategies and methods:  • lectures (A1-A8)
A2:	How human factors, safety, culture, and values influence the delivery of humanised care.	<ul><li>seminars (A1-A8)</li><li>directed reading (A1-A8)</li></ul>
A3:	Sound knowledge of clinical procedures with a depth of understanding of appropriate diagnostic, monitoring and therapeutic interventions.	<ul> <li>use of the VLE (A1-A7)</li> <li>practice-based learning (A1-A5, A7, A8)</li> </ul>
A4: A5:	Psychological and sociological factors relevant in perioperative care. Legal, ethical, and professional issues governing healthcare provision.	• simulation (A2,A3,A7,A8)  Assessment strategies and methods:
A6: A7:	Relevant and appropriate research processes.  How anatomy and physiology define pathology and associated pharmaceutical intervention common to the perioperative environment.	<ul><li>practice assessment (A1-A5,A7,A8)</li><li>OSCE (A3,A7,A8)</li></ul>
A8:	Good communication to enhance working & therapeutic relationships.	<ul> <li>exam (A4,-A7)</li> <li>essay (A1-A6)</li> <li>poster (A1-A6)</li> <li>group work (A2,A5,A6,A8)</li> </ul>
	ellectual skills evel provides opportunities for students to demonstrate:	
B1: B2: B3: B4: B5:	Critical understanding of the principles of perioperative practice. Critical evaluation and analysis of evidence to underpin practice. Reflection on practice to inform theory. Development of coherent arguments/rationale for practice. Demonstrate clinical reasoning in evaluating the effectiveness of practice.	Learning and teaching strategies and methods:  • lectures (B1-B5)  • seminars (B1-B5)  • directed reading (B1-B4)  • use of the VLE (B1,B2,B4)  • practice-based learning (B1-B5)  • simulation (B1-B3,B5)  Assessment strategies and methods:  • practice assessment (B1-B5)  • essay (B1-B5)  • OSCE (B3-B5)  • exam (B1,B2)  • poster (B1,B2,B4)
	evel provides opportunities for students to:	
C1: C2: C3: C4: C5:	Attain some of the national proficiencies for perioperative care.  Demonstrate competence with operating department technology.  Practice within legal guidance and apply the principles of ethics.  Develop ability to effectively contribute to team working.  Exercise personal responsibilities and decision making.	Learning and teaching strategies and methods:     • simulation (C1-C5)     • practice-based learning (C1-C5)  Assessment strategies and methods:     • practice assessment (C1-C5)     • OSCE (C1,C2,C4,C5)
	ansferable skills	
This le D1: D2: D3: D4: D5:	Professionalism and the ability to effectively participate in teamworking.  Perform and interpret effective communication skills.  Self appraisal for reflection inspiring life-long learning.  Ability to appraise healthcare literature.  Develop commitment to care and compassion of others.	Learning and teaching strategies and methods (referring to numbered Intended Learning Outcomes):  • lectures (D1-D5) • seminars (D1-D5) • tutorials (D2,D3) • direct reading (D4) • use of the VLE (D4) • practice-based learning (D1-D5) • simulation (D1-D3)  Assessment strategies and methods: • practice assessment (D1-D5) • essay (D3-D4) • OSCE (D2,D3) • exam (D4) • poster (D3,D4)

# Certificate of Higher Education Perioperative Studies Intended Learning Outcomes Level 4

A: Kn	owledge and understanding	The following learning, teaching & assessment
This le	vel provides opportunities for students to develop and demonstrate	strategies & methods enable students to achieve &
knowle	edge and understanding of:	demonstrate the programme learning outcomes:
A1: A2: A3: A4: A5: A6:	Normal and altered anatomy and physiology of the human body. An understanding of current health and social policies in a healthcare setting. Principles of healthcare. Knowledge of a range of clinical procedures and aspects of their appropriate monitoring and therapeutic interventions. An understanding of aspects of psychology and sociology factors. The legal, ethical, and professional issues in healthcare.	Learning and teaching strategies and methods:  • lectures (A1-A6)  • seminars (A1-A6)  • directed reading (A1-A6)  • use of the VLE (A1-A6)  • practice-based learning (A1-A6)  • simulation (A3,A4)  Assessment strategies and methods:  • practice assessment (A1-A6)  • exam (A1-A6)  • essay (A2,A3,A5,A6)
R: Inte	ellectual skills	portfolio (A1-A6)
	vel provides opportunities for students to demonstrate:	
B1: B2: B3:	An understanding of the principles of perioperative practice and the impact of policy and legislation.  An analysis of literature and information related to the perioperative environment.  Reflect on own performance, highlighting strengths, weaknesses, and future actions.	Learning and teaching strategies and methods:  • lectures (B1-B4)  • seminars (B1-B4)  • tutorials (B3)  • directed reading (B1,B2,B3)  • use of the VLE (B1,B2)
B4:	Distinguish the role of the operating department practitioner from that of other team members.	practice-based learning (B1,B3,B4) simulation (B3)  Assessment strategies and methods: practice assessment (B1,B3,B4) essay (B1-B4) OSCE (B3) Exam (B1-B3) Portfolio (B1-B3)
	ctical skills	
	vel provides opportunities for students to:	
C1: C2: C3:	Attain a number of competencies of the core content of the national standards as described by the level 4 units.  Demonstrate competence with aspects of operating department technology.  Practice within legal and ethical provision.	Learning and teaching strategies and methods:  • lectures (C1,C4)  • seminars (C1 C4)  • simulation (C1-C4)
C4:	Develop ability to effectively contribute to team working.	practice-based learning (C1-C4)     Assessment strategies and methods:     practice assessment (C1-C4)     OSCE (C1-C4)
	nsferable skills	
D1: D2: D3: D4:	vel provides opportunities for students to demonstrate:  Ability to participate in team-working.  Perform and interpret effective communication skills.  Self-appraisal for reflection.  Understand the importance in maintaining their own mental and physical health and wellbeing.	Learning and teaching strategies and methods:     lectures (D1-D4)     seminars (D1-D4)     tutorials (D1-D4)     practice-based learning (D1-D4)     simulation D1-D3)
		Assessment strategies and methods:  • practice assessment (D1-D4)  • OSCE (D1-D3)  • exam (D3)  • portfolio (D1,D3,D4)

# **APPENDIX 2 - PROGRAMME SKILLS MATRIX**

	UNITS	A1	A2	A3	A4	A5	A6	B1	B2	B3	B4	B5	C1	C2	C3	C4	C5	C6	D1	D2	D3	D4	D5	D6	D7
	Enhancing Postanaesthetic Care	Χ		Χ	Χ	Χ	Χ	Χ		Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	X	
IĖ	Enhancing Surgical Care	Χ	Χ	Χ	Χ	Χ	Χ	Χ		Χ	Χ	Χ	Χ	Χ	X	Χ	X	Χ	Χ	Χ	Χ	Χ	Χ	X	
V 6	Enhancing Anaesthetic Care	X		Χ	Χ	Χ	X	Χ		Χ	Χ	X	Χ	X	X	Χ	X	X	Χ	X	X	X	X	X	
F 6	Evidence for Professional Practice	X			Χ			Χ	Χ	Χ						Χ					X	X	X	X	
17	Transitioning to Registered Operating Department Practitioner	X	Χ		Χ	Χ	X	Χ		Χ	Χ	X				Χ					Χ	X	X	X	X
_	Leading and Managing Change in Healthcare	Χ	Χ		Χ		Χ	Χ		Χ	Χ					Χ				X	Χ	Χ	Χ	X	
	Developing Surgical Care	Χ	Χ	Χ	Χ	Χ		Χ		Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	X	Χ	X	X	Χ	Χ	X	
I⊨	Developing Anaesthetic Care	Χ		Χ	Χ	Χ		Χ		Χ	Χ	Χ	Χ	Χ	X	Χ	X	Χ	Χ	Χ	Χ	Χ	Χ	X	X
E	Developing Postanaesthetic Care	Χ		Χ	Χ	Χ		Χ		Χ	Χ	Χ	Χ	Χ	X	Χ	X	Χ	Χ	Χ	Χ	Χ	Χ	X	
V 5	Perioperative Science					Χ																		X	
15	Research for Professional Practice	X			Χ			Χ	Χ	Χ						Χ				Χ	Χ	X	X	X	
_	Medicines Management for Perioperative Practice	Χ				Χ		Χ			Χ			Χ	Χ								Χ	X	
	Foundations of Surgical Care	Χ	Χ	Χ		Χ					Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	X	
I⊨	Foundations of Anaesthetic Care	X		Χ		Χ					Χ	X	Χ	Χ	X	Χ	X	Χ	Χ	Χ	Χ	X	X	X	
E	Foundations of Postanaesthetic Care	X		Χ		Χ					Χ	X	Χ	Χ	X	Χ	X	Χ	Χ	Χ	Χ	X	X	X	
l <sup>v</sup> <sup>4</sup>	Anatomy & Physiology for Perioperative Practice					Χ																		X	
15	Foundations of Operating Department Practice	Χ	Χ		Χ																	Χ		Χ	X
L	Learning in Higher Education for Healthcare Practice				Χ				Χ							Χ						Χ		Χ	X

#### A - Subject Knowledge and Understanding

- A1: Key legal and professional policies and guidelines to enhance best practice and provide a safe and effective care environment.
- A2: How human factors, safety, culture, and values influence the delivery of humanised care and developing good communication skills that enhance working and therapeutic relationships.
- A3: Sound knowledge of a wide range of clinical procedures with a depth of understanding of appropriate diagnostic, monitoring and therapeutic interventions.
- A4: How evidence-based practice enhances perioperative care and understanding the variety of research methods that contribute to the development of perioperative practice.
- A5: Application of perioperative science to understand, assess, inform, & support patient care.
- A6: Leadership and management principles, innovation, and adaptation to change.

#### B - Intellectual Skills

- B1: Analyse, critically appraise and apply evidence from literature and a variety of other sources to develop best practice and understand the principles of audit and evidence-based practice.
- B2: Understand methods commonly used in perioperative care research, including ethical issues, the collection, interpretation and analysis of data and dissemination of findings.
- B3: Critically evaluate new concepts, theories, and research in order to determine their relevance to perioperative practice and to creatively resolve problems, recognising the need for innovation in practice.
- B4: Demonstrate clinical reasoning and professional judgement in evaluating and monitoring the effectiveness of specific practice.
- B5: Demonstrate critical reflection on and evaluation of clinical applications and a critique of own performance.

#### C - Subject-specific/Practical Skills

- C1: Attain national proficiencies for perioperative practice.
- C2: Demonstrate skill in the assessment, monitoring, support, and care of perioperative patients.
- C3: Develop, implement, and evaluate practice, demonstrating application of best evidence, effective use of resources and patient-centred practice.
- C4: Communicate professional judgements and findings effectively to meet diverse needs.
- C5: Work in highly complex and pressurised settings, maintaining advocacy, professional integrity, and judgement.
- C6: Demonstrate safe practice and know when a situation is beyond the scope of one's own practice.

#### D - Transferable Skills

- D1: Practice in an anti-oppressive manner, respecting the rights, dignity, culture & individuality of patients and colleagues, working in a patient-centred manner with people from diverse backgrounds.
- D2: Build professional relationships, underpinned by partnership and trust and respecting consent, confidentiality, and dignity of patients.
- D3: Demonstrate verbal and non-verbal communication skills that support diversity and effective professional interaction.
- D4: Communicate effectively in formal and informal situations through a range of media.
- D5: Resolve problems systematically, logically, and creatively, drawing on a range of knowledge and information sources.
- D6: Demonstrate IT literacy and skill in using information and communication technologies.
- D7: Understand the importance of their own mental and physical health and wellbeing strategies in maintaining fitness to practise.