



These questions and answers are associated with the CASE accreditor training webinar from 22 January 2021.

1. Are the changes to the focused course accreditations being implemented immediately?

- They will be introduced for new focused courses or programme. Teams looking to accredit a focused course will be advised on the new decision-making tool.
- There is no plan to review those with existing focused courses until they are due for review.
- The focused course template/decision-making tool will help programme teams to justify their decisions, particularly within their own institutions or in discussions with funding providers.
- It is be important to review the whole decision-making tool, rather than one specific aspect of that, when making decisions.

Some commissioners think that a focused course will be a quick fix method to get people trained in a specific area of practice. This is generally not the case, and in many cases takes as long, if not longer to complete than a postgraduate certificate (PgC), where someone has more protected time and support for developing the clinical skills.

2. How do you define focused courses?

How would, for example a physiotherapist, with no prior ultrasound education, fit into this scheme for musculoskeletal ultrasound. They would be a novice in ultrasound but have the skills to communicate complex findings.

It is important to look at who the course is aiming at:

- Their previous ultrasound experience and the scope of practice.
- What the gaps are in their skills, knowledge and experience and can they be filled in a focused course?
- Would a physiotherapist get sufficient physics and technology content deliverable in a short period of time, as would be included in a focused course, compared to a postgraduate certificate, to enable them to practise at the level of anyone else doing that scan?

Questions need to be asked including 'What is the service delivery need that you're trying to meet?' This would help guide people towards either a focused course or a full PgC.

Conversations with the programme team, in the early stages of planning a focused course would be helpful. It is important to define the scope of practice. A wide scope of practice would not fit with a focused course, which is supposed to have a **very narrow, clearly defined scope**.

If there is a broad scope of practice, a learner would be unable to achieve anything other than minimal competence, which could put patients at risk. It also has the potential to disadvantage the learner.

We need to make sure it is clearly defined what can be done within the scope of practice, but equally what a practitioner cannot do within the scope of practice from a focused course.

3. How do external documents, such as saving babies lives impact on the accreditation of focused courses?

Whoever comes through these courses, whether that be focused course or postgraduate certificate, they need to be able to function at the required level. The level of care they deliver must be the same as any other competent practitioner.

An example is the trimester obstetric scanning.

- Fetal biometry in the third trimester would potentially fit the focused course decision-making tool template for a novice practitioner
- A full growth assessment to meet the requirements of saving babies lives care bundle version 2 would exceed the remit of a focused course. Practitioners would be expected to undertake cervical length assessment and Doppler examinations in addition to the biometry and assessment of liquor. They also then have to interpret these findings and communicate results both in a written report and to the patient in complex, high risk pregnancies.

Focused courses cannot be mapped to a module for a programme for recognition of prior learning (RPL) if the focused course is a mixture of everything (fundamental principles/physics, professional issues and clinical). Learners who elect to up-skill from a focused course to a programme would have to complete the PgC.

4. Can a centre set up a focused course, without any links to a Higher Education Academy (HEI)?

We normally accredit the HEI to give the award for a focused course. CASE would recommend an affiliation with a HEI which has award bearing powers. Without an affiliation with a HEI it would be difficult to provide additional support required for student progression and achievement, such as learning support for those with additional learning needs, library facilities, e-learning resources, academic misconduct and fitness to practise arrangements.

5. Can a private company set up focused courses for people who are assistant practitioners and gain CASE accreditation?

Any course that CASE accredits has to meet the learning outcomes specified within the [Standards for Sonographic Education](#). These are at academic level 6 to academic level 8.

- Ultrasound programme teams have to undertake a mapping exercise, to demonstrate that the focused course or programme meets the CASE learning outcomes.
- It is a really important part of the accreditors' role to cross check the mapping of learning outcomes against the evidence provided within the course documentation. It is not simply enough to see that the mapping has been undertaken really important to check the accuracy of this.
- It can be helpful to those developing a focused course to review the learning outcomes.

Focused courses are not a watered-down version of the programme, but a really high quality focused area of practice.

It is important to make sure that no one will be disadvantaged by this being a focused course e.g. patients, students, employers. If there are gaps where a programme does not meet the learning

outcomes defined within the CASE standards, then we have to question whether we accredit a programme.

We also have to consider the overarching aims of CASE which are to ensure that someone exiting with an award can **undertake, interpret, analyse and report an ultrasound scan** within their focused scope of practice. We would probably not expect an assistant practitioner to be able to fulfil this.

6. As an accreditor can you request to look at e-learning resources if a programme team deliver all the content (e.g. physics) online?

Yes, accreditors should ask to have access to anything that will help them make informed judgements about whether the course meets CASE standards. The role of the accreditor is to make sure that the course is setting learners up for successful completion, not setting them up to fail.

The fundamental principles of ultrasound have to be taught and supported fully by the HEI, whether that is via face to face, blended or on-line learning approach. There cannot be an assumption that the clinical staff have the confidence, knowledge and skills or time to be able to teach and explain this to learners.

Accreditors need to ask questions about how the HEI team support learners, answer questions and check their learning, particularly if the content is delivered predominantly online.

Key reminders:

The scan has to be of the same quality regardless of who does it or the level of education and training.

If there are any doubts about whether the course is focused or should be a full programme, please do discuss with a member of the committee who can then arrange a conference call to discuss the issue in depth with you and other committee members. It is far easier to have these conversations at the outset, than after an accreditation event has taken place.

We strongly encourage programme teams to make contact with CASE prior to beginning the process of developing a focused course, to ensure that it fulfils the criteria for a focused course.