**NSHCS APPRENTICESHIP END POINT ASSESSMENTS:**

**FAIR ACCESS policy**

1. **Introduction and purpose**

1.1 This policy applies to the Healthcare Science Apprenticeship End Point Assessments (EPA) provided by the National School of Healthcare (NSHCS) - henceforth referred to as the School.

1.2 The principle purpose of this policy is to ensure that no apprentice registered with the School to undertake their EPA is advantaged or disadvantaged by any EPA processes instigated by the School.

1.3 The School is a directorate of NHS Health Education England (HEE) and this policy is underpinned by the core values of HEE: <https://www.hee.nhs.uk/about-us/our-values>

1.4 The policy will be facilitated by training and guidance for all School staff, EPA assessors, EPA contributors and relevant others on how the principle purpose described above must be fulfilled.

1. **Principles for management**

2.1The School is committed to fair access to its services. The School’s senior management together with the School’s Apprenticeship Lead will ensure that processes and procedures are in place that enable the policy to be enacted and managed.

2.2 All staff and EPA contributors will be required to complete and keep up to date training in Equality, Diversity and Inclusion.

2.2 The School’s EPA assessment unit will be responsible for ensuring that all within the scope of this policy are aware of the requirements of the policy.

1. **Scope of the policy**

The policy applies to all:

1. apprentices that register with the School for their EPA including, but not exclusively, those with protected characteristics as defined in the Equality Act.
2. EPA contributors engaged by the School for its EPA provision
3. EPA administrators and other School staff that may be involved in the development and delivery of the EPA and any related advisory services provided by the School
4. **Management process**

4.1 EPA administrators will monitor and maintain records of completion and update of Equality, Diversity and Inclusion training for all EPA contributors.

4.2 Apprentices will be encouraged, on application to register for the EPA, to request any required access arrangements or reasonable adjustments, providing evidence as appropriate – see Appendix 1.

4.3 Apprentices will be encouraged to request access adjustments if they become apparent post-application to the EPA.

4.4 Apprentices will also be able to apply for mitigating circumstances to be taken into account after the EPA event if a temporary injury, illness or other affected their performance on the day of the EPA – see Appendix 2.

4.5 EPA administrators will be trained to review requested adjustments fairly and make reasonable provisions to ensure apprentices have fair access to the components of their EPA so long as they do not undermine the stated purpose of the EPA, including liaising with the apprentice’s employer for requirements for any components of the EPA delivered in the apprentice’s workplace.

4.6 Where it is not reasonably possible to apply the requested access adjustments, or if the requested access adjustments compromise the purpose of the EPA, the School will communicate this to the apprentice and their employer clearly stating the reasons.

4.7 EPA component developers will be trained to incorporate fair access to all components of the assessment.

4.8 EPA administrators and assessors will ensure that the approved adjustments are applied during the assessment events.

4.9 As part of the EPA standardisation process, the data related to achievements of the EPA will be reviewed for bias.

1. **Responsibility**

5.1 The ultimate responsibility for the Fair Access to the EPA policy, dissemination of the policy and management of potential and actual conflicts of interest rests with the School’s senior management.

5.2 In some cases, it may be necessary for the School’s senior management to seek advice on a resolution of a case from the EPA’s external quality assurer, the Academy for Healthcare Science, in order to manage conflicts arising regarding fair access.

1. **Advice and guidance**

6.1 Any required guidance regarding fair access to the EPA will be directed in the first instance to the Apprenticeship Lead.

6.2 If an apprentice or their employer has an issue regarding fair access to EPA components or an EPA event, they can refer to the EPA complaints and appeals policy.

6.3 All policies related to the School’s EPA provision will be publically available on the School’s website for review by apprentices, employers and all other interested parties: <http://www.nshcs.hee.nhs.uk/join-apprenticeships/apprenticeships>

**Policy review date:** every 2 years from implementation

**Appendix 1 – process for access arrangements and/or reasonable adjustments**

Tailored arrangements for the EPA may be made for apprentices with disabilities or additional needs by means of requested access arrangements or reasonable adjustments using the form below.

|  |  |
| --- | --- |
| Date:  | Click here to enter text. |
| Apprentice name: | Click here to enter text. |
| Apprentice email address: | Click here to enter text. |
| Apprenticeship programme: | Click here to enter text. |
| Anticipated EPA event date: | Click here to enter text. |
| Employer name: | Click here to enter text. |
| Employer email address: | Click here to enter text. |
| Workplace address: | Click here to enter text. |

Evidence of disability or additional need that may affect the apprentice’s performance in, or access to the EPA:

Click here to enter text.

*(Copy of evidence to be attached to this form)*

Apprentice is diagnosed with: Click here to enter text.

Diagnosis supplied by: Click here to enter text.

**e.g: Medical Practitioner; Educational/ Occupational/ Clinical-Psychologist; Therapist**

Name and organisation of person supplying the diagnosis: Click here to enter text.

Date of diagnosis: Click here to enter text.

The apprentice should identify which of the following access arrangements/reasonable adjustments they consider to be relevant to their evidenced disability. Please note that:

1. The NSHCS will consider the apprentice’s evidence and request for access arrangements and/or reasonable adjustments, and notify the apprentice which of their requests, or blend of requests, can be accommodated and reasons for any that cannot;

|  |  |
| --- | --- |
| **Apprentice use only**  | **Office use only**  |
| **Please check relevant boxes**  | **Comment** |
|[ ]  Apprentice is recording disability for information only and does not require particular access arrangements or other reasonable adjustments.  |  |
|[ ]  Wheelchair access and table/desk risers or other special access requirements. Please specify requirements:Click here to enter text. |  |
| [ ]  | Printed materials in accessible format. Please specify preferred format:Click here to enter text. |  |
| [ ]  | Use of specialist software in the relevant EPA element (as provided by the employer) Please specify:Click here to enter text. |  |
| [ ]  | A reader to read aloud EPA instructions |  |
| [ ]  | A scribe for written EPA elements  |  |

|  |  |  |
| --- | --- | --- |
| [ ]  | Use of coloured overlay and coloured ruler (to be provided by the apprentice as appropriate for their diagnosis) |  |
| [ ]  | Dispensation of the station mark scheme relating to spelling errors where spelling errors will not compromise patient safety |  |
| [ ]  | Extra time as appropriate to the requirements of their disability |  |
| [ ]  | Other access arrangements or reasonable adjustments. Please specify:Click here to enter text. |  |

**Appendix 2 – notification of mitigating circumstances**

This form records the information that will be considered by the EPA assessor concerning any mitigating circumstances that the apprentice believes may have affected their performance in the EPA. The completed form should be submitted, together with the supporting evidence, to the NSHCS as soon as possible or within 2 working days of the end of the EPA.

**APPRENTICE NAME :** Click here to enter text.

**CONTACT (phone / email):** Click here to enter text.

**SECTION OF EPA COMPONENT TO WHICH ANY MITIGATING CIRCUMSTANCES APPLY:** Click here to enter text.

**DATE:** Click here to enter text.

Please complete either a) medical circumstances or b) non-medical circumstances section below:

**a) MEDICAL CIRCUMSTANCES**

(To be completed by a medical practitioner or accompanied by medical certifications. Continue on blank sheet provided if necessary).

**Please state the nature and severity of the apprentice’s medical condition and describe any consequences of the illness and/or treatment that may be relevant. Please provide the dates when the illness started and when the apprentice was/will be fit to work.**

Click here to enter text.

**Signature of Medical Practitioner \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(if appropriate)

Medical Practitioner’s official Stamp:

**b) NON-MEDICAL CIRCUMSTANCES**

(To be completed by the apprentice. Continue on blank sheet if necessary)

**Please give a brief description of the circumstances that you believe affected your EPA performance, accompanied by supporting evidence. Please state the dates on you were affected and an explanation of how the situation affected your performance.**

Click here to enter text.

***Signature of Apprentice\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_***