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## Performance review process report

The Academy for Healthcare Science, 2018-2021

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### Executive summary

This report covers our performance review of the Academy for Healthcare Science and its approved provision.

Through their reflection, and from engaging with quality activity, the education provider highlighted areas they are currently investigating and working on. This is primarily to support their applicants in presenting their evidence through the equivalence route to HCPC registration, and to ensure the availability of appropriate trained assessors as this relates to demand. The education provider noted their biggest challenge is the recruitment of assessors. Considering this ongoing challenge of assessors and other “works in progress”, as well as the lack of data points that should support the provider’s position, the visitors considered this a medium risk. As such, they have recommended a review period of two years to evaluate the progress of the actions proposed by the education provider and determine whether the availability of appropriate trained assessors and level of support for applicants is appropriate to maintain applicant numbers and successful outcomes.

This report will be considered by our Education and Training Panel in January 2023, who will make the final decision on the review period.

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Previous consideration	Not applicable – This is the education provider’s first performance review process with the HCPC. There was no previous consideration leading to this performance review.
Decision	The Education and Training Committee (Panel) is asked to decide: <ul style="list-style-type: none"><li>• when the education provider’s next engagement with the performance review process should be</li><li>• whether issues identified for referral through this review should be reviewed, and if so how</li></ul>
Next steps	Subject to the Panel’s decision, the provider’s next performance review will be in the 2023-24 academic year.

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## Section 1: About this assessment

### About us

We are the Health and Care Professions Council (HCPC), a regulator set up to protect the public. We set standards for education and training, professional knowledge and skills, conduct, performance and ethics; keep a register of professionals who meet those standards; approve programmes which professionals must complete before they can register with us; and take action when professionals on our Register do not meet our standards.

This is a report on the performance review process undertaken by the HCPC to ensure that the institution and practice areas(s) detailed in this report continue to meet our education standards. The report details the process itself, evidence considered, outcomes and recommendations made regarding the institution and programme(s) ongoing approval.

### Our standards

We approve education providers and programmes that meet our education standards. Individuals who complete approved programmes will meet proficiency standards, which set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

### Our regulatory approach

We are flexible, intelligent and data-led in our quality assurance of programme clusters and programmes. Through our processes, we:

- enable bespoke, proportionate and effective regulatory engagement with education providers;
- use data and intelligence to enable effective risk-based decision making; and
- engage at the organisation, profession and programme levels to enhance our ability to assess the impact of risks and issues on HCPC standards.

Providers and programmes are [approved on an open-ended basis](#), subject to ongoing monitoring. Programmes we have approved are listed [on our website](#).

### The performance review process

Once a programme institution is approved, we will take assurance it continues to meet standards through:

- regular assessment of key data points, supplied by the education provider and external organisations; and
- assessment of a self-reflective portfolio and evidence, supplied on a cyclical basis

Through monitoring, we take assurance in a bespoke and flexible way, meaning that we will assess how an education provider is performing based on what we see,

rather than by a one size fits all approach. We take this assurance at the provider level wherever possible, and will delve into programme / profession level detail where we need to.

This report focuses on the assessment of the self-reflective portfolio and evidence.

### **Thematic areas reviewed**

We normally focus on the following areas:

- Institution self-reflection, including resourcing, partnerships, quality, the input of others, and equality and diversity
- Thematic reflection, focusing on timely developments within the education sector
- Provider reflection on the assessment of other sector bodies, including professional bodies and systems regulators
- Provider reflection on developments linked to specific professions
- Stakeholder feedback and actions

### **How we make our decisions**

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint [partner visitors](#) to design quality assurance assessments, and assess evidence and information relevant to the assessment. Visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make the decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee takes decisions through different levels depending on the routines and impact of the decision, and where appropriate meets in public. Their decisions are available to view [on our website](#).

### **The assessment panel for this review**

We appointed the following panel members to support a review of this education provider:

Colin Jennings	Lead visitor, Clinical Scientist
Beverley Cherie Millar	Lead visitor, Clinical Scientist
Sheba Joseph	Service User Expert Advisor
Temilolu Odunaike	Education Quality Officer

## Section 2: About the education provider

## The education provider context

The education provider currently delivers one HCPC-approved programme across one profession, clinical scientist. The provider is a professional body and has been running their HCPC approved programme since 2012.

The HCPC approved STP Certificate of Equivalent (CoE) Programme is an Accreditation of Prior (Experiential) Learning process. It is a comparative and retrospective assessment of the applicant's education, training and experience and therefore is an assessment process, without any teaching or learning.

The education provider awards the Certificate of Equivalence to individuals who have worked in healthcare or science seeking recognition and clarification that their previous training, qualifications and experience meets the specified programme outcomes for the Scientific Training Programme (STP) in their chosen modality. Thus avoiding the need to repeat education or training unnecessarily. The Certificate of Equivalence is an approved programme and leads to eligibility to apply for registration and inclusion on the HCPC Register. The STP was developed as part of the Modernising Scientific Careers: The UK way forward policy and comprises of an academic award (MSc in Clinical Science) with a period of work-based learning.

## Practice areas delivered by the education provider

The provider is approved to deliver training in the following professional areas. A detailed list of approved programme awards can be found in [Appendix 1](#) of this report.

	Practice area	Delivery level	Approved since
Pre-registration	Clinical Scientist	postgraduate	2012

## Institution performance data

Data is embedded into how we understand performance and risk. We capture data points in relation to provider performance, from a range of sources. We compare provider data points to benchmarks and use this information to inform our risk based decisions about the approval and ongoing approval of institutions and programmes.

Data Point	Benchmark	Value	Date	Commentary
Total intended learner numbers compared to total enrolment numbers	350	97	2022	The STP CoE Programme is an Accreditation of Prior (Experiential) Learning process. It is a comparative and retrospective assessment of the applicant's education, training and experience. For approval purposes, these applicants are referred to as learners. In 2020/21, the education provider received 300 applications and 71 completions due to HEE funding to meet a specific workforce need. We have therefore used the 2019/20 learner numbers where the provider received a total of 97 applications. The education provider explained the benchmark of "350 learners" was to reflect to the HCPC that the total number of applications per year will vary.
Learners – Aggregation of percentage not continuing	N/A	N/A	2019-2020	As a non-HEI, this data is not provided by HESA. The education provider has submitted their Annual Quality Review Reports which provide similar data – number of completions on a monthly and quarterly basis. The data shows around a third of the applications received completed the programme in the 2020/21 academic year. This data was submitted by the education provider and is produced annually as part of their internal quality assurance process.
Graduates – Aggregation of percentage in employment / further study	N/A	N/A	2019-2020	As a non-HEI, this data is not provided by HESA and it is not applicable. The education provider did not supply alternative data in this area

Teaching Excellence Framework (TEF) award	N/A	N/A		As a non-HEI, this data is not provided by the Office for Students (OfS) and the provider does not have an equivalent data
National Student Survey (NSS) overall satisfaction score (Q27)	N/A	N/A	2022	As a non-HEI, this data is not provided by the OfS and the provider does not have an equivalent data.

## Section 3: Performance analysis and quality themes

### Portfolio submission

The education provider was asked to provide a self-reflective portfolio submission covering the broad topics referenced in the [thematic areas reviewed](#) section of this report.

The education provider's self-reflection was focused on challenges, developments, and successes related to each thematic area. They also supplied data, supporting evidence and information.

### Quality themes identified for further exploration

We reviewed the information provided, and worked with the education provider on our understanding of their portfolio. Based on our understanding, we defined and undertook the following quality assurance activities linked to the quality themes referenced below. This allowed us to consider whether the education provider was performing well against our standards.

#### Quality theme 1 – continued funding for applicants for successful delivery of the programme

**Area for further exploration:** We noted the opportunity of funded places by Health Education England (HEE) were effectively processed during the pandemic. We considered such financial support to applicants and awareness of the Certificate of Equivalence (CoE) programme has laid foundations and an excellent opportunity to highlight the provision and its success. It was however unclear if there were changes to the funding stream during Covid-19 and if so, what the changes were and how the education provider intends to continue to source funding for applicants after the pandemic.

**Quality activities agreed to explore theme further:** To allow the provider to elaborate on previous information they had sent, we requested further clarification around the following areas:

- how places were funded prior to 2020/21;
- how the 200 funded places mentioned by the education provider, were allocated;



- how long it takes from the start of application process until final decision and how this is monitored;
- the financial model and income streams;
- details of the review of organisational structures;
- attraction of applicants and funding opportunities from Northern Ireland;
- contingency plan if funding from HEE is reduced or stopped; and
- recruitment of assessors.

**Outcomes of exploration:** From the education provider's response, we understood that prior to 2020/21 the majority of applicants or their employers paid the fees to go through the programme. Limited fee support was available through NHS Education for Scotland. The places (for applicants in England) were allocated based on the eligibility criteria set by HEE via the National School of Healthcare Science (NSHCS). Details of eligibility criteria were laid out and we received clarification on how the 200 places were allocated. We also understood that the average time from the start of the STP Equivalence process to outcome is 12 months and this is monitored by the Equivalence administrator. Any concerns around time taken is addressed at the fortnightly Equivalence team meetings.

The education provider clarified they are a not-for-profit organisation and is wholly self-funding based on a number of income streams within the healthcare sector in addition to registrant fees. They confirmed their funding model has been sustainable for a number of years. Resource allocation is closely matched to available funds, but always with a priority placed on providing a rigorous and robust assessment process. There is a Management Board that closely monitors the organisation's financial position, and the provider proactively seeks opportunities across the four nations to secure funding for the programme.

We reviewed details of the new organisational structure and it was clear how this supports the delivery of the programme. The provider also noted they had two applicants from Northern Ireland in 2020-21 who are successfully going through the programme and information on how they continue to support attraction of applicants from Northern Ireland was provided.

We noted the Academy is not reliant on HEE funding and they have an assessor bank which helps with the recruitment of assessors and will continue to be used until the pool is of a sufficient size to meet the current demand of the funded places more easily.

We were satisfied with the detailed response provided and were reassured there is continued funding for applicants to get on the programme. Therefore, we are reassured the provider continues to perform well in this area.

### Quality theme 2 – development of existing partnerships and expansion of new partnerships

**Area for further exploration:** We noted existing partnerships between the education provider, HEE and the NSHCS. However, there was limited information about any expansion plans. We considered it useful to know whether the education provider had any plans to continue to develop their existing partnership with HEE and possibly use the successful model with HEE to expand partnerships with other devolved nations and other organisations. In addition, there was no information to

explain how the provider will tackle the challenges and opportunities with HEE and NHS England & NHS Improvement (NHSE&I) when they merge.

**Quality activities agreed to explore theme further:** We requested further detail on the information supplied in the portfolio to have a more in-depth understanding of the areas noted above.

**Outcomes of exploration:** From the education provider's response, we understood they had previously had a formal partnership with the NHS Education for Scotland (NES), but NES did not wish to renew it in 2020-21. However, the provider continues to have a strong relationship with them. We also noted the provider has a close working relationship with Health Education and Improvement Wales (HEIW) with regular meetings and contributions to HEIW Stakeholder Group, Quality and Safety Subgroup.

With the proposed membership of the new Education, Training and Standards Committee (ETSC), the education provider will utilise the Committee to strengthen engagement with all four nations. They also work closely with other professional bodies, such as Institute of Physics and Engineering in Medicine (IPEM) and Registration Council for Clinical Physiologists (RCCP).

We understood that the education provider is already working with NHSE&I and HEE on a number of projects and commissions at Executive level. They continue to engage with HEE colleagues at operational level to ensure they understand the changes that are taking place.

From this response, we were reassured existing partnerships continue to be strengthened whilst new partnerships are being expanded. Therefore, we are satisfied that the provider continues to perform well in this area.

### Quality theme 3 – how relevance of the curriculum is kept up to date

**Area for further exploration:** From our review of the portfolio, it was clear the assessment process to date has been robust in relation to a focus on Good Scientific Practice and NSHCS curriculum equivalence. However, it was unclear how the education provider ensures that applicants and assessors ensure the HCPC Standards of Proficiency (SOPs) for clinical scientists remain central to the application preparation and assessment processes.

**Quality activities agreed to explore theme further:** To address the issues highlighted above, we requested email clarification around the following areas:

- development and sharing of guidance documents/online resources - we requested information about how the provider ensures availability of sufficient resources to ensure all review actions are undertaken and programme standards maintained or developed
- survey/feedback/reflection from applicants who received an initial outcome – we requested further analysis to determine cause of 'more evidence required' results
- how audit of assessor decisions is used to ensure consistency throughout the various assessors

**Outcomes of exploration:** We understood there is an Equivalence Team who, together with relevant committees, review the actions to be taken arising from the programme's Annual Quality Review process and prioritises them. An action plan is developed and discussed with the Senior Team to determine resource implications. Where significant, these are discussed at the Academy's Management Board. The education provider noted they will now investigate gathering feedback from applicants who received an outcome 2. These focused on areas such as guidance material, support (employer and education provider), preferred medium for sharing guidance etc to have a better understanding of what led to their results. The education provider explained what outcomes 1 and 2 meant at the portfolio and interview stages.

At the portfolio stage:

Outcome 1 is the successful submission of a portfolio of evidence meeting all the standards of Good Scientific Practice (GSP) in a specific discipline area and allows the applicant to progress to the interview stage.

Outcome 2 is the unsuccessful submission of a portfolio of evidence requiring more evidence to meet the standards of GSP. The new evidence will be submitted and assessed and if it meets the standards of GSP, the applicant will progress to interview.

At the interview stage:

Outcome 1 is the successful outcome at interview with the applicant answering all the questions covering the five domains of GSP. This verifies that the portfolio submitted is the applicant's and they have the required knowledge and skills to be awarded the Certificate of Equivalence and be eligible to apply for registration as a Clinical Scientist with HCPC.

Outcome 2 is the unsuccessful outcome at interview where the applicant has failed to answer all the questions covering the 5 domains of GSP. They will be required to address the areas with additional experience over an agreed period of time and successfully submit evidence of the required standard prior to further interview.

The education provider also explained that the extension of the moderation process with assessors is on their action plan and will be monitored. To ensure HCPC SOPs remain central to the application preparation and assessment process, the education provider explained that the SOPs are central and closely mapped to the education provider's standards in Good Scientific Practice (GSP). There is plan to review the GSP standards against the newly published revised SOPs and this will be presented to the ETSC for approval.

The education provider was able to sufficiently clarify all areas that had been flagged from our initial review, via the quality activity. This reassured us therefore, that the education provider continues to perform well in this area.

#### Quality theme 4 – how the Quality of Equivalence process was used to manage the impact of Covid-19

**Area for further exploration:** The education provider reported the use of the Quality of Equivalence process to ensure the quality of their programme. However, we noted limited information on how the process has helped to manage the impact of Covid and assessment.

**Quality activities agreed to explore theme further:** To provide a better understanding around the Quality of Equivalence process, we requested further

clarity on the process and how it has helped to manage the impact of Covid and enhanced assessment.

**Outcomes of exploration:** From the response submitted, we understood the current system used is a secure online platform for both the applicant and the assessors. Applicants can complete their application online and upload relevant documentation to a secure portal. Assessors access the same portal to review the portfolio and complete the assessment forms. To further enhance the platform, electronic forms can be used rather than uploading word documents. The provider is considering how to provide further guidance on this to support all applicants.

The information submitted provided sufficient clarity around how the use of technology facilitated the Quality of Equivalence process and how the process helped to enhance assessment. Therefore, we are reassured the provider has performed well in this area.

#### Quality theme 5 – how the education provider ensured ongoing understanding of equality and diversity.

**Area for further exploration:** We reviewed information submitted around equality and diversity for both applicants and assessors. However, we noted a lack of clarity in how the provider ensured ongoing equality and diversity for both applicants and assessors. It was also unclear how the education provider addressed and performed further analysis in relation to the query of potential bias by assessors. We explored how information and data was gathered and analysed in relation to awarding funding to applicants, outcomes of applicants and appointments of lay and scientific professional and clinical assessors.

**Quality activities agreed to explore theme further:** We sought further clarification through an email response to allow the education provider to elaborate on information previously supplied.

**Outcomes of exploration:** To ensure ongoing understanding of equality and diversity, the education provider plans to provide an online module for assessors to complete by the end of the calendar year (2022). A mandatory requirement to complete the module or to provide proof that Trust or other organisational equality, diversity and inclusion (EDI) training is up to date, with a renewal every three years has been included in the assessor contracts currently being revised. The education provider noted an analysis of outcome by assessor will be undertaken and areas of concern will be discussed with individual assessors. Research will also be undertaken to investigate whether there is any inbuilt bias in the current assessment methods.

For applicants, we understood that the programme's online platform requires all applicants to complete the monitoring data. Applicants cannot progress with their application until the monitoring data module is completed. Going forward, in addition to existing Equality and Diversity strategy, the provider plans to compare their data with that provided by the NSHCS for their STP applicants. System development work will take place to add the current monitoring data module (used by applicants) to the assessor area of the system. Assessors will be asked to complete the section as part of the contract requirements. Analysis of the assessor cohort will then be undertaken

and reported to ETSC and included in the provider's next Annual Quality Review Report.

From the further information submitted by the education provider, we received sufficient clarification to determine that the provider ensures and monitors ongoing understanding of equality and diversity by applicants and assessors. Therefore, we considered they have performed satisfactorily in this area. As a result of the extent of the proposed work and to be able to review the outcome, we considered this area as one to be reviewed in the provider's next performance review.

#### Quality theme 6 –working with professional and regulatory bodies, and healthcare providers

**Area for further exploration:** We noted the education provider is aware of long-term challenges around working with professional and regulatory bodies as well as healthcare providers. Examples of these include lack of employer engagement with the importance of regulation, declining applicant demand for the process and having sufficient assessor resource due to the increasing demands on their time in the workplace. It was unclear how the provider plans to address these challenges and working closely in partnerships with other relevant groups and regulatory/professional/ and stakeholder bodies.

**Quality activities agreed to explore theme further:** We requested further information to better understand how the provider intends to/is dealing with the long-term challenges identified.

**Outcomes of exploration:** In their response, the provider acknowledged the importance of working with professional and regulatory bodies and healthcare providers to promote the importance of regulation and have staff members working on this. They noted colleagues in their Regulation team and members of Regulation Board are currently working on how to manage the challenges identified.

The provider's response reassured us they continue to work with professional and regulatory bodies. However, to understand how the provider has dealt with the challenges identified in relation to employers, sufficient assessor resource and time demands in the workplace, we considered reviewing this area when the education provider next engages with the performance review process. This way, they would have had sufficient opportunity to address the challenges and we will be able to determine how well they have performed in this area.

#### Quality theme 7 – review of assessment methods

**Area for further exploration:** The education provider reflected on their close working relations with the NSHCS, the HCPC approved provider for the STP Certificate of Completion to externally quality assure the Independent Assessment of Clinical Competence (IACC) assessment. The provider noted the IACC assessment was introduced to address the impact of Covid-19 on the previous face to face assessment. However, there was lack of detail around the education provider's plan to investigate the evolution of assessment methods in the future.

**Quality activities agreed to explore theme further:** We requested further information to allow the provider to elaborate on previous information they had sent.

**Outcomes of exploration:** We understood the Equivalence Team are currently reviewing the assessment methods within the programme, particularly in the context of the interview and how they might make it more reflective while also providing the opportunity for assessors to explore the applicant's portfolio. The provider also noted their involvement in the development and subsequent external quality assurance of the NSHCS IACC in 2020 will be helpful in this regard – the provider reviewed a percentage of the completed IACCs and their reviewers also observed the IACC Exam Board. With the additional information submitted, we had some reassurance around how the education provider intends to review the assessment methods and clarity on the intended outcomes of the review. We were therefore satisfied the provider has performed satisfactorily in this area.

#### Quality theme 8 – working with the Professional Bodies Council and the review of GSP standards

**Area for further exploration:** We noted there is an AHCS Professional Bodies Council. The education provider's reflection provided minimal information on how the Council worked within the review period.

We noted a recent review of GSP standards, in consideration of professional body guidance to ensure it is still fit for purpose. However, we could not determine whether there are plans to work with other professional bodies/associations or indeed recruit membership/consultation with such bodies. We also could not determine how the education provider evaluated that the review process was effective and that all healthcare bodies listed were represented equally.

**Quality activities agreed to explore theme further:** We sought clarification through additional information to allow the provider to elaborate more on information previously supplied.

**Outcomes of exploration:** The education provider explained how the Professional Bodies Council was set up to provide a high-level strategic discussion forum on healthcare policy, scientific leadership and horizon-scanning of issues which may affect the whole of the Healthcare Science workforce. We also noted the composition and membership of the Council and their operating procedures. The Council meets the terms of reference through quarterly meetings, events, working groups, consultations, campaigns.

The education provider also described how they work with a range of professional bodies and associations beyond those on the Professional Bodies Council. For example, providing advice and guidance on the equivalence routes, registration, training, providing presentations at annual conferences/workshops. We noted examples of the professional bodies/networks including the Institute of Decontamination Science, Ophthalmic Imaging Association, Audiology Cymru, and several others. Committee members, AHCS staff and their assessors also provide links to the professional bodies out-with Professional Council. Other professional bodies have come under the auspices of the Academy, for example the Genetic Counsellors Registration Board, and Registration Council for Clinical Physiologists.

Through these connections the provider engages a broader range of the professional bodies in and related to healthcare science. They also seek their guidance on

specific projects such as the review of specialties used in the HCPC Register. Regarding the review process, we understood that the GSP went out for public consultations and was widely publicised including the education provider's website, social media channels, registrants' newsletter and other avenues. Professional bodies not on the Professional Bodies Council had the opportunity to contribute and identify if there were any documents that should be considered.

Through the provider's response, we had a clear understanding of how they worked with other professional regulators/ professional bodies and how relevant reviews were undertaken. We were therefore satisfied that the education provider continues to effectively engage with other relevant professional bodies to improve their provision.

#### Quality theme 9 – involvement of lay assessors/service users and carers

**Area for further exploration:** We noted several opportunities for involvement by lay assessors were highlighted. However, this lacked sufficient detail to give us a clear understanding of how the service user involvement was monitored, whether there were feedback and actions taken or innovations resulting from their involvement.

**Quality activities agreed to explore theme further:** We requested more information through email communication on the following areas:

- lay assessors' forum - requirements to be a lay assessor and on-going training/standardisation exercises
- input from service users and carers rather than solely lay assessors.

**Outcomes of exploration:** The education provider explained that the assessors' forum consists of all Lay Assessors, Head of Standards, Equivalence Lead and the Equivalence administrator. It is used to discuss outcomes, discussion of applicant portfolios and the interview processes, including the paperwork that is submitted. These discussions help to maintain fair and consistent assessments. We also noted the Lay Assessor's role specification and what training is available to them to assist them in their role. The education provider is looking to have input into their Certificate of Equivalence programme from service users and carers. The provider intends to identify individuals through their work with the Patient Safety Learning group with whom they have a memorandum of understanding and HEE's Patient Advisory Forum (PAF). The provider also plans to contact comparable organisations across the four nations, who would be willing to act as critical friends and participate in working groups where required.

With the plans in place, we were assured that there is opportunity for service users and carers to be involved in and contribute to the education provider in a meaningful way. However, to determine the progress of this, we considered this an area for us to review when next the provider engages with the performance review process.

#### Quality theme 10 – how feedback from applicants was captured and used

**Area for further exploration:** The education provider noted they do not have any formal mechanisms for gathering feedback from applicants but that they respond to any feedback received. We considered the importance of putting applicant feedback at the centre of any future developments of the provider's application and

assessment process and how it could potentially improve applicants' success rate. Due to the lack of appropriate mechanisms for gathering feedback, we were unclear how the education provider ensures applicants' experience of the application and assessment process was captured.

**Quality activities agreed to explore theme further:** We sought clarification through additional information to allow the provider to elaborate more on information previously supplied.

**Outcomes of exploration:** The education provider acknowledged the need to formalise how they collected feedback from applicants. This was to supplement their current approach which is to offer applicants who receive an "outcome 2" the opportunity to meet with the STP Equivalence Programme Lead to discuss the outcome and the process itself. The provider was willing to adopt the visitors' suggested approach of gathering feedback which includes:

- survey applicants receiving an outcome 1 on their first attempt at portfolio and interview stage;
- survey applicants receiving an outcome 2 at each stage; and
- undertake focus group(s) to follow up the survey with applicants who have completed the STP Certificate of Equivalence process.

We noted the provider will evaluate the approach subsequently to determine any further developments needed and establish a working group to review the assessment approach. To ensure the education provider's performance in this area, we will review when next they engage with the performance review process. We will also expect the provider's subsequent reviews to cover surveys of those applicants receiving an outcome 3.

#### Quality theme 11 – how external examiners were recruited and how their report actions were reviewed and prioritised

**Area for further exploration:** We noted some excellent and appropriate recommendations made by the external examiner, which the education provider subsequently implemented. However, we were unclear about the criteria and the robustness of the approach to recruit a new and appropriate external examiner. We were also unclear about how external examiners' report actions were reviewed and prioritised.

**Quality activities agreed to explore theme further:** We sought clarification through additional information to allow the provider to elaborate more on information previously supplied.

**Outcomes of exploration:** Through the education provider's response, we noted they followed a robust process to appoint an external examiner for the programme. The provider detailed the process of appointment which involved submission of CVs and scrutinising them against the criteria set out in the External Examiner role brief. Following the provider's explanation of how the Equivalence Team worked as outlined above in [Quality theme 3](#), we were satisfied that the education provider has appropriate teams in place who continue to review actions from External Examiner and where necessary, such are also discussed at the Academy's Management Board. We were therefore satisfied that the education provider has continued to



ensure External Examiners' reports actions are reviewed effectively and in a timely manner and prioritised as appropriate. Therefore, we are confident the provider has continued to perform well in this area.

## Section 4: Summary of findings

This section provides information summarising the visitors' findings for each portfolio area, focusing on the approach or approaches taken, developments, what this means for performance, and why. The section also includes a summary of risks, further areas to be followed up, and areas of good practice.

### Overall findings on performance

#### Quality theme: Institution self-reflection

#### Findings of the assessment panel:

- **Resourcing, including financial stability –**
  - The education provider works with Health Education England, NHS Education for Scotland, and Health Education and Improvement Wales to promote any funding opportunities that are available to applicants. It is a not-for-profit organisation which is wholly self-funded. Resource allocation for the STP Certificate of Equivalence programme is closely matched to available funds, but always with a priority placed on providing a rigorous and robust assessment process.
  - Since 2018, the provider has moved to online interviews which was not only cost effective but welcomed by applicants and assessors. In the light of the impact of Covid-19 meant that the Equivalence process could continue to operate throughout. The streamlining of the education provider's governance structure in 2020 helped to reflect the changes to their Education Provider status for the STP Certificate of Attainment. During 2020/21 the Registration Council for Clinical Physiologists (RCCP) was incorporated into the Academy. They have been able to attract funding from HEE for 200 places on the programme.
  - Through information provided in their portfolio and engagement with quality activity as outlined in [Quality theme 1](#), we were able to gain reasonable understanding that the provider and its provision are financially stable and continue to be sustainable. Therefore, we are reassured the provider continues to perform well in this area.
- **Partnerships with other organisations –**
  - The provider noted they currently have only one contract that could be considered under the auspices of a formal partnership. This is with Health Education England (HEE) to deliver 200 funded places on the programme. The places (for applicants in England) were allocated based on the eligibility criteria set by HEE via the National School of Healthcare Science (NSHCS).
  - As outlined in [Quality theme 2](#), we noted several other partnerships which the education provider has and their plans to expand new partnerships whilst strengthening the existing ones.

- We were therefore reassured the provider has continued to perform well in this area.
- **Academic and placement quality –**
  - The programme offered is an Accreditation of Prior (Experiential) Learning process. It is a comparative and retrospective assessment of the applicant's education, training and experience and therefore there is no teaching and learning. Through their Equivalence process as detailed in [Quality theme 3](#), the education provider ensures quality of the programme.
  - With a clear understanding of how the Equivalence process is used to ensure quality in application and assessment, the visitors were satisfied the provider has performed well in this area.
- **Interprofessional education –**
  - The provider has stated that this area is not applicable to them because there is no teaching and learning involved. All applicants for the programme are expected to be employed within an appropriate environment which allows interaction with other healthcare professionals. We are therefore satisfied that learners have interprofessional education opportunities and therefore determined the provider has performed well in this area.
- **Service users and carers –**
  - Service user and carer involvement has been via the lay assessors involved in the programme, the broader pool of the provider's Equivalence assessors and lay representation on the Regulation Board and Education Standing Panel. Because it is a single programme, compliance with the underpinning policies is monitored by the Head of Standards, Programme Lead and the Chair of the Regulation Board.
  - The provider noted in their reflection that the 2020/21 feedback from the lay assessors and lay members on the Regulation Board contributed to better clarity. There was also emphasis in the Good Scientific Practice (2021) about the consideration of the patient within the document and in all practices. This has led to the development of the revised question bank for the STP Equivalence interview, and clearer guidance about the role of each type of assessor.
  - As detailed in [Quality theme 7](#), we have been assured there are now plans in place to involve service users and carers, and not only lay assessors in the programme. Therefore, we considered the provider has performed satisfactorily in this area but as noted above, we will need to review this area when next the provider engages with the performance review process.
- **Equality and diversity –**
  - The education provider noted the vast majority of their assessors are employed by the NHS and therefore need to keep their mandatory training up to date which includes Equality and Diversity Training. Applicants have the opportunity to raise any concerns about fairness of treatment in the context of equality and diversity on the programme via the education provider's appeals and complaint process
  - In 2020/21 the data analysis included in Programme's Annual Quality Review report was extended to consider outcomes of the protected characteristic data collected. The provider noted that although the numbers are small, the analysis has identified a number of areas

where further analysis and research is needed to explore whether the process, or potential (unconscious) bias by the assessors is disadvantaging particular groups of applicants.

- Through the education provider's portfolio reflection and engaging with quality activity as detailed in [Quality theme 4](#), we received clarification on how the provider has monitored equality and diversity both among the applicants and the assessors. We were therefore satisfied the provider had performed satisfactorily in this area but we will also review their continued performance in their next performance review.
- **Horizon scanning –**
  - The education provider noted the most significant challenges they have had are
    - lack of employer engagement with the importance of regulation,
    - declining applicants demand for the process; and
    - having sufficient assessor resource given the ever-increasing demands on their time in the workplace.
  - We recognised that aside from working with assessors, the provider could also benefit from working with professional and regulatory bodies and healthcare providers to promote the importance of regulation within their healthcare institutions and/or training/educational institutions as outlined in [Quality theme 8](#).
  - As part of the outcome of the quality activity, we were satisfied the provider has continued in their work with professional and regulatory bodies and have developed strategies which ensures they continue to attract new assessors.
  - Therefore, we have determined the education provider has performed well in this area.

**Risks identified which may impact on performance:** None

**Outstanding issues for follow up:** As noted above, we would need to review how the education provider has involved service users and carers, not just lay assessors in their programme. Similarly, following the education provider's analysis around equality and diversity and to determine whether potential (unconscious) bias by the assessors is disadvantaging particular groups of applicants, we will need to review the outcome of this analysis in the provider's next performance review.

Quality theme: Thematic reflection

**Findings of the assessment panel:**

- **Impact of COVID-19 –**
  - The education provider noted the redeployment of both applicants and assessors into front line locations during Covid-19 meant they had an influx, in some disciplines, of requests for extensions and a reduction in review availability. This resulted in a standard extension of three months in some cases while other specialities also experienced some delays in the assessment process.
  - Protocols are now in place in respect of notifying applicants, dealing with extensions and working with assessors should they be required in future. The provider confirmed that all delayed interviews have taken place and timescales for the assessment process have returned to

normal. They continue to explore how they can use technology to make the Equivalence assessment process more effective and efficient. For example, they are currently exploring whether the introduction of electronic/online forms and an online matrix for linking evidence to the GSP standards would be beneficial for applicants and a more efficient way of creating and submitting a portfolio.

- This information demonstrated the education provider has adequately managed the impact of Covid-19. Therefore, we are satisfied they have performed well in this area.
- **Use of technology: Changing learning, teaching and assessment methods –**
  - The education provider noted their biggest development regarding the use of technology was the creation of a bespoke platform which included a section for their Equivalence assessment processes. The new platform was introduced in September 2020 and they stated it has provided a more effective and user-friendly system.
  - The provider explained they have had to be pragmatic regarding introducing developments for the benefit of the efficiency of the process for applicant, assessor and their staff vis-à-vis short term costs/resources. Through work with another organisation, expertise is being gained in the development of another portfolio system, whilst considering the cost and benefit of such investment. As mentioned in the theme above, the provider continues to explore different ways of using technology to make the Equivalence assessment process effective and efficient.
  - We are therefore satisfied with the provider's performance in this area.
- **Apprenticeships –**
  - As there is no teaching and learning on this programme, the education provider has stated that this area is not applicable to them. We have accepted this response as the provider has no intention of delivering apprenticeship programmes in the future.

**Risks identified which may impact on performance:** None

**Outstanding issues for follow up:** None

Quality theme: Sector body assessment reflection

**Findings of the assessment panel:**

- **Assessments against the UK Quality Code for Higher Education –**
  - The education provider is not a higher education institution and there is no learning and teaching on their only approved programme. They have stated in their portfolio that this area is not applicable to them.
- **Assessment of practice education providers by external bodies –**
  - The education provider is not a higher education institution and there is no learning and teaching or practice-based learning on their only approved programme. They have stated in their portfolio that this area is not applicable to them.

- **National Student Survey (NSS) outcomes –**
  - The education provider is not a higher education institution and there is no learning and teaching on their only approved programme. They have stated in their portfolio that this area is not applicable to them.
  
- **Office for Students monitoring –**
  - The education provider is not a higher education institution and there is no learning and teaching on their only approved programme. They have stated in their portfolio that this area is not applicable to them.
  
- **Other professional regulators / professional bodies –**
  - The provider noted there were no review activities by either another regulator or professional body on their approved programme. They explained they have their own Register accredited by the Professional Standards Authority and any learning arising from its review of the provider's Register is shared with the Equivalence team. The provider stated there was no such learning for the reporting period.
  - The provider has a Professional Bodies Council which is the senior council providing a high-level strategic discussion forum on healthcare policy, scientific leadership and horizon-scanning of issues that may affect the whole of the Healthcare Science workforce. In this context the Council provides an invaluable channel of intelligence regarding workforce issues which could impact on the Equivalence processes. It also provides advice and guidance on significant developments for the programme, such as the development of the revised version of Good Scientific Practice (2021) and helps to promote the request for assessors.
  - We were satisfied with this response and that provided during the quality activity and therefore determined the provider has performed well in this area.

**Risks identified which may impact on performance:** None

**Outstanding issues for follow up:** None

Quality theme: Profession specific reflection

**Findings of the assessment panel:**

- **Curriculum development –**
  - The education provider noted their programme is an Accreditation of Prior (Experiential) Learning process. It is a comparative and retrospective assessment of the applicant's education, training and experience therefore there is no teaching and learning. As such they have stated this area is not applicable to them.
  - We understand the programme is an experiential route to registration as an HCPC registered clinical scientist. It is an assessment of an applicant based on equivalent knowledge and skills gained elsewhere in their career and compared to the end point requirements from the taught STP programme. Applicants are assessed according to their

academic knowledge of the specific modality and against each of the HCPC SOPs for clinical scientists.

- At their next performance review, we will review how the education provider ensured the newly updated SOPs have been integrated into this experiential assessment.
- **Development to reflect changes in professional body guidance –**
  - During 2020/21 the education provider stated they completed their review of the standards within Good Scientific Practice, which are the standards used in the STP CoE programme. As part of the review, the guidance from the relevant healthcare science professional bodies was considered to ensure that the revised standards continued to reflect, as best as possible, the requirements of these bodies. The draft Standards were then shared with the provider's Professional Bodies Council for comment. They noted this part of the consultation process was important to ensure that the standards continued to have professional body support.
  - The provider has continued to work with all 42 healthcare science professional bodies and associations which provide guidance which could influence the review of the GSP standards. The education provider is now looking to develop a more collaborative approach when reviewing the GSP standards at an earlier stage.
  - From our review of the information provided in the portfolio and engaging with quality activity as outlined in [Quality theme 6](#), the provider has demonstrated they have performed well in this area.
- **Capacity of practice-based learning –**
  - As there is no learning and teaching, including practice-based learning on the programme, the education provider has stated this area is not applicable to them.

**Risks identified which may impact on performance:** None

**Outstanding issues for follow up:** When next the education provider engages with the performance review process, we will review how they have ensured the newly updated SOPs have been integrated into this experiential assessment.

Quality theme: Stakeholder feedback and actions

**Findings of the assessment panel:**

- **Learners –**
  - Given the nature of the programme as a comparative and retrospective assessment of an applicant's education, training and experience the education provider has stated there are no "learners". Individuals going through the process are referred to as applicants. For HCPC purposes, we refer to this group using the generic term 'learners'.
  - As noted in [Quality theme 8](#), the education provider is looking to develop ways to ensure feedback from applicants is collected and actioned to enhance the effectiveness of their provision. The provider is willing to adopt the visitors' suggested approach and review this to ensure its appropriateness.

- This has demonstrated the education provider's willingness to engage more with learners and evaluate feedback. This remains an area for us to review at the provider's next performance review when they would have had the opportunity to gather and implement actions based on such feedback.
- **Practice placement educators –**
  - As there is no learning and teaching, including practice-based learning on the programme, the education provider has stated this area is not applicable to them.
- **External examiners –**
  - The education provider supplied their External Examiner reports for 2018/19 and 2019/20 academic years. We noted recommendations were made to enhance the documentation and guidance that underpins the STP Equivalence process. The provider highlighted the challenges they faced with completing all the actions arising from the External Examiner's report within the same academic year as the report is produced, due to historical availability of resources. This has now led to a restructuring of responsibilities within the Equivalence Team to ensure resource is available earlier to undertake the actions identified.
  - The provider also noted the recruitment of a new External Examiner and how the Equivalence Team is working to ensure the new External Examiner is provided with an appropriate induction to the requirements of the role and ongoing support as they undertake the role.
  - Through engaging with quality activity as noted in [Quality theme 9](#), we were reassured that the External Examiner had been recruited appropriately and that actions from External Examiner reports are being reviewed and progressed effectively.
  - This demonstrated the provider is performing well in this area.

**Risks identified which may impact on performance:** None

**Outstanding issues for follow up:** As noted above, at the provider's next performance review, we will review how they are engaging more with learners to evaluate and action their feedback as appropriate, to ensure the effectiveness of the programme.

#### Data and reflections

**Findings of the assessment panel:** As part of their internal quality assurance process, the education provider reports the number of completions on a monthly basis at team meetings and quarterly to the Regulation Board. On an annual basis they produce the STP CoE Annual Quality Review Report which considers the following data:

- Number of STP CoE applications and completions (from academic year 2013/14)
- The number of each type of outcome at portfolio and interview stages (from academic year 2017/18) The number of successful completions by specialty at portfolio and interview stages (from academic year 2019/20)

- Breakdown of each type of outcome at portfolio and interview stages by the protected characteristics gathered: gender, ethnicity, sexual orientation, disability, religion/belief (from academic year 2020/21)
- Number of appeals and complaints
- Analysis of the reasons for outcome 2 – further evidence required and outcome 3 – reject application at portfolio and interview stage
- Time taken to complete the STP CoE process

Following their review, the visitors concluded that although this is not a taught educational program but an experiential route, data can still be provided although may be different. The visitors considered feedback from applicants, assessors and the various outcomes need to be monitored.

**Risks identified which may impact on performance:** As noted above, we are aware that the nature of the programme would mean the provider may not be able to supply data points on the standard areas required:

- Continuation rates
- Graduate outcomes
- Teaching quality
- Learner satisfaction

The provider has however proposed other areas where they are able to supply ongoing data. These include:

- Completion rate
- Assessment outcomes by stage (portfolio and interview) and by year
- Assessment outcomes by stage and by protected characteristic

The lack of data coupled with the on-going challenges around assessors has meant we will need to review the provider again in two years to check in on the progress of the developments they have identified. This will also give us the opportunity to review how service user and carer involvement as well as equality and diversity has developed. As noted, we will also be able to review how the education provider has considered their assessment approach based on the feedback from applicants.

**Outstanding issues for follow up:** None

## Section 5: Issues identified for further review

This section summarises any areas which require further follow-up through a separate quality assurance process (the approval or focused review process).

There were no outstanding issues to be referred to another process.

## Section 6: Decision on performance review outcomes

### Assessment panel recommendation



Based on the findings detailed in section 4, the visitors recommend to the Education and Training Committee that the education provider's next engagement with the performance review process should be in the 2023-24 academic year.

**Reason for this recommendation:** This would allow us to evaluate the progress of the actions proposed by the education provider around the following areas:

- Ensuring availability of appropriately trained assessors and that level of support for applicants is appropriate to maintain applicant numbers and successful outcomes.
- Regular supply of data and intelligence to help us understand the provider's performance outside of the periods where we directly engage with them.
- Involvement of service users and carers in the programme.
- Ensuring equality and diversity continues to be monitored and enhanced.
- A review of the assessment approach based on feedback from applicants.
- Integration of the revised standards of proficiency for clinical scientists.

### **Education and Training Committee decision**

Education and Training Committee considered the assessment panel's recommendations and the findings which support these. The education provider was also provided with the opportunity to submit any observation they had on the conclusions reached.

Based on all information presented to them, the Committee decided that the education provider's next engagement with the performance review process should be in the 2023-24 academic year

**Reason for this decision:** The Panel agreed with the visitors' recommended monitoring period, for the reasons noted through the report.

Appendix 1 – list of open programmes at this institution

<b>Name</b>	<b>Mode of study</b>	<b>Profession</b>	<b>Modality</b>	<b>Annotation</b>	<b>First intake date</b>
Certificate of Equivalence	FT (Full time)	Clinical scientist			01/10/2012