
Performance review process report

The National School of Healthcare Science, 2018-2021

Executive summary

This report covers our performance review of the National School of Healthcare Science and its approved programme. Through this review, we have determined the education provider is performing well across several areas. We also recognised some areas where the education provider has demonstrated good practice such as the move to online Train the trainer sessions which has broadened participation among the Training Officers.

However, given the lack of comparable data points which should further support the education provider's position, we have recommended a two-year review period. We also considered that a two-year review period would help us to review how the education provider has continued to manage capacity of practice-based learning given the increasing number of learners, and impact of the standardised assessment amongst other areas.

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

Previous consideration	This is the education provider's first engagement with the HCPC's performance review process. There was no previous consideration leading to this performance review.
Decision	The Education and Training Committee (Panel) is asked to decide when the education provider's next engagement with the performance review process should be.
Next steps	Subject to the Panel's decision, the education 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:

Geraldine Hartshorne	Lead visitor, clinical scientist
Colin Jennings	Lead visitor, clinical scientist
Hayley Hall	Service User Expert Advisor
Temilolu Odunaike	Education Quality Officer

Section 2: About the education provider

The education provider context

The education provider is a professional body and currently delivers one HCPC-approved programme - Certificate of Completion of Scientist Training Programme (STP) - across one profession comprising of several specialist modalities. This programme has been running since 2018. The education provider is unique as they are also part of Health Education England and are responsible for training and developing healthcare scientists across the UK.

The Certificate of Completion of Scientist Training Programme (STP) is an integrated full-time 3-year programme consisting of a part-time Master's degree and workplace-based training.

Following approval of the programme in 2020, there were areas the visitors who assessed the programme wished to flag to future visitors for consideration:

- Feedback from learners. The visitors considered that the relevant conditions had been met at threshold. However, they also noted that the feedback mechanisms had possible weaknesses, notably because they were weighted towards reactive feedback rather than being designed to pick up ongoing issues in a prompt way. The visitors considered that careful review of the effectiveness of feedback acquisition, monitoring and responses was required in order to ensure the required standard continues to be met in future. In particular, the education provider needed to ensure that feedback from learners is acted upon.
- The operation of the Quality & Standards Committee (QSC). The visitors considered that the information supplied about the QSC meets the condition set under SET 3.4 at threshold, in terms of clarifying the workings of the QSC and showing how it would have operational independence. However, they also noted that there was some overlap between the personnel on the QSC and senior staff at the education provider. The visitors suggested that the education provider should further consider how best to ensure that the QSC maintains its separate identity and distance from the leadership of the education provider.
- Additionally, the panel highlighted the importance of timely and appropriate communication with service users and carers, in order that SET 3.7 continues to be met.

The programme also recently went through a curricula review process. The review was their first systematic review of curriculum content across all 30 specialities since the programme was first developed and delivered in 2010. The curricula review project began in late 2018 and concluded in July 2021; the revised curriculum is being delivered for the first time from September 2022. All specialities were reviewed concurrently. Following HCPC's detailed focused review of the curricula review process, where we engaged our partner visitors in the field to assess how the education provider arrived at decisions, and whether their process was reasonable

and appropriate, we saw sufficient reflective evidence to conclude that the process was reasonable and appropriate.

However, through the focused review, we considered a possible risk in having the mapping exercise done by a non-registered clinical scientist due to misinterpretation and recommended that future mapping is done by a registered clinical scientist.

Given the nature of the education provider and its programme, there are some thematic areas that we have not included through this report as we considered these not applicable to this education provider. These include:

- Assessments against the UK Quality Code for Higher Education
- National Student Survey (NSS) outcomes
- Office for Students monitoring

The education 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	<input type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Postgraduate	2018

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	391	2020	The total number of learners are within a range of the benchmark (HCPC approved numbers) so we were able to take reassurance around the sustainability of the education provider and its programme.
Learners – Aggregation of percentage not continuing	N/A	N/A	N/A	Given the nature of this education provider, (as a non-Higher Education Institute), this data is not provided by Higher Education Statistics Agency (HESA) and so it is not applicable.

Graduates – Aggregation of percentage in employment / further study	N/A	N/A	N/A	Given the unique nature of this education provider, (as a non-HEI), this data is not provided by HESA and so it is not applicable.
Teaching Excellence Framework (TEF) award	N/A	N/A	N/A	Given the unique nature of this education provider, (as a non-HEI), this data is not provided by the Office for Students (OfS) and so it is not applicable
National Student Survey (NSS) overall satisfaction score (Q27)	N/A	N/A	N/A	Given the unique nature of this education provider, (as a non-HEI), this data is not provided by the OfS and so it is not applicable.

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 – clarification on the extra funding stream and implications of increased learner numbers

Area for further exploration: We noted diversification to include funding streams that are not Health Education England (HEE) initiatives (such as the Spending Review body). We understood this would help with sustainability and supply of completers of the programme to both the NHS and other healthcare systems. It was unclear if this extra funding streams were a one off or they are dedicated for the longer term.

We also noted major reliance upon NHS staff / departments to contribute to the programme including admissions, supervision, marking and final assessment, which

simultaneously resulted in less budget pressure for the education provider. Given the pressures of the NHS, we noted assuring the quality and reliability of this input was difficult.

As the programme is the main route to clinical science in the NHS, we also noted it was oversubscribed. It was not apparent if the education provider had any plans to expand. Therefore, we requested further information around the following:

- reflections implications on increased numbers of learners; and
- if there were strategic plans for future development of the education provider to deliver the numbers of trained staff in the appropriate disciplines to meet up with the increase in learner numbers.

Quality activities agreed to explore theme further: We requested further information on the areas noted above, via email correspondence. We considered this the most effective way to allow the education provider to elaborate on previous information they had sent.

Outcomes of exploration: The education provider confirmed the funding streams which enabled the development of some staff roles, including regional dean, had been, and remain, secure and permanent. Additional funding secured through engagement with the Spending Review body was also in place to support additional learner numbers over the duration of the programme.

Regarding the implications of increased number of learners, we understood these were fully commissioned and therefore fully funded by HEE and there was no impact in terms of capacity in NHS departments. The education provider explained that the accreditation process ensured that any department that wished to host a learner on the programme was accredited by the education provider. This ensured they had sufficient capacity to fully support the learner over the full duration of the programme. We understood learner numbers were demand driven. Individual NHS trusts approached learners with a request to host them and this was driven by the Trust's workforce requirements. The education provider also worked directly with HEE commissioners to secure the necessary funding to manage the demand for learner places.

Regarding the plans for future development, we understood the education provider's engagement with the Spending Review body has enabled growth in learner numbers for 2022 with priority areas identified and this was expected to be repeated in 2023. The education provider's response provided adequate clarification to the issues raised and following the quality activity, we had no further questions.

Quality theme 2 – impact of reduced staffing on the Quality and Standards Committee (QSC)

Area for further exploration: We noted the programme had partnerships with Higher Education Institutions (HEI), HEE and the NHS. There is also an independent Quality and Standards Committee (QSC) with a remit to provide scrutiny and oversight of the various functions within the programme, ensuring those effective working relationships are maintained. The education provider noted challenges recruiting to key positions which meant the QSC was not yet fully staffed. As such,

we were unable to determine how the education provider had considered and ensured the QSC continued to meet its Terms of Reference with the reduced staffing.

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

Outcomes of exploration: From the education provider's response, we understood the QSC has met regularly in line with its original Terms of Reference. The education provider explained there have been no identified issues so far.

Despite the reduced staff, the education provider noted the QSC had:

- undertaken a review of policy development, with detailed review of the following policies undertaken: Academic Appeals, Reasonable Adjustments, Mitigating Circumstances, Complaints and Appeals (general); and
- initiated its own quality review, with an agreed appraisal process undertaken by all members beginning in December 2022.

Outcomes of the review were noted at the QSC's September and December 2022 meetings. For example, the QSC committee approved the Complaints policy, and this has now been implemented by the Senior Management Team. The education provider intends to provide full details of all outcomes at their next performance review.

This reassured us the QSC has continued to maintain their role and partnership to ensure the quality of the programme, despite the reduced staffing. As such, we can take assurance the education provider has continued to maintain strong and meaningful partnerships with other relevant organisations to enhance their programme. Following this quality activity, we had no further questions going forward.

Quality theme 3 – quality and rigour of assessment

Area for further exploration: In their reflection, the education provider outlined the changes they have made to the final assessment due to Covid-19. For example, the programme has moved from Objective Structured Final Assessments (OSFAs) to Independent Assessment of Clinical Competence (IACC). The visitors noted this was a significant change which meant there was no centralised practical element of the final assessment. They considered the IACC was largely reflective and did not include the practical element that the previous OSFAs had. They noted assessment of practical competence was based solely upon the learner's workplace which was not directly assessed by the education provider. The visitors therefore sought information about the education provider's consideration of risk regarding quality and standardisation of assessment and their reflections following implementation. They also sought the reasoning / reflection about why the education provider considered a random assessment of ten percent of portfolios by the Academy for Healthcare Science (AHCS) adequate to determine the quality and rigour of assessment.

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

Outcomes of exploration: The education provider explained they have fully reviewed both the workplace assessment and the final assessment, in line with the new curriculum rollout for the 2022 intake of learners. They informed us that they took assurance from the review of data from previous years of the programme and noted the implementation of the IACC assessment has had no measurable negative impact on the numbers of learners passing or failing the assessment. This, they explained, indicated that the IACC assessment achieved comparable outcomes to the previous OSFA.

Regarding assessment of ten percent of the portfolio, the education provider explained the current iteration of the programme included assessment through engagement with workplace assessment and a portfolio of evidence. This portfolio of evidence was assessed by Training Officers in the workplace and a random sample ensured consistency of standards. They considered the choice of a ten percent sample corresponded with the levels of sampling adopted by many higher education institutions via their internal quality assurance and external examining.

We were satisfied with this clarity and took assurance the education provider has continued to ensure the quality of assessments on their programme. We had no further questions following the quality activity. However, we considered this an area to review again when next the education provider engages with the performance review process. This would give the education provider the opportunity to have reflected more on the effectiveness of the IACC.

Quality theme 4 – widening participation

Area for further exploration: The visitors noted that an Equality Impact Assessment (EIA) had been carried out and actions based on the results were being addressed. They also noted currently all learners were full time and there was no information about consideration of a part-time route.

The visitors noted the education provider removed the numeracy and logic test from the first stage of the recruitment process, following the findings from EIA. The EIA found that the test appeared to have a measurable and statistically significant effect on Black and Minority Ethnic (BAME) applicants. The ratio of BAME applicants successful at this stage was lower overall than for applicants from a white background. Although the visitors considered this reasonable, they were unable to determine reflections about how numeracy and logic, which are presumably valuable to the recruitment and selection process, had been assessed at admission.

Therefore, the visitors requested further information on the education provider's reflections around the following:

- their consideration around including part time provision to enhance EDI for a wider age range, parents etc
- how they monitored and compared admission statistics year on year to seek improvements; and
- how they assessed numeracy and logic at admission.

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

Outcomes of exploration: In their response, the education provider reflected that the programme was fully funded and predominantly created to train NHS clinical scientists.

As such, the education provider's response showed career breaks were managed on an ad hoc basis, with arrangements negotiated with the learner's employing trust. We also understood there were no plans to introduce part-time provision, although individualised support plans may accommodate alternative working patterns where a learner required this, and the employing trust was able to support this arrangement. The education provider considered this enabled them to accommodate related EDI concerns on an individualised basis.

Regarding admission statistics, the education provider explained EDI data was collected and analysed annually. The EDI profile of applicants was also published on the education provider's website and is available for public scrutiny. The education provider has an EDI committee which met bi-monthly and produced an annual output report. Reflections from the annual report for 2020/21 demonstrated the committee has developed four pillars which focused on:

- quality health and wellbeing support for everyone
- tackling discrimination
- making effective use of the full range of their people's skills and experience; and
- recruiting and keeping people, as well as welcoming back returners

As regards numeracy and logic assessment, we understood these elements were no longer directly assessed at admission, following the feedback relating to EDI issues. Reflections demonstrated that numeracy and logic were indirectly assured via the overall entry requirement of the programme, with all applicants having already completed a relevant undergraduate degree. The education provider explained the previous approach disproportionately disadvantaged BAME applicants and did not provide a useful differentiator for admission, given that all applicants had already demonstrated appropriate levels of numeracy and logical reasoning through their degree level qualifications.

The clarification provided reassured us the education provider has continued to comply with EDI requirements and had acted on feedback where necessary. Following this quality activity, we had no further questions going forward.

Quality theme 5 – external examiner on the programme

Area for further exploration: The visitors noted there were no external examiner reports provided and the education provider's reflection did not cover any feedback or action taken in response to external examiners. Therefore, the visitors could not determine the education provider's performance in relation to input from external examiners. The visitors also requested to understand how the education provider

determined members of the Quality and Standards Committee (QSC) could independently and competently act as external examiners.

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

Outcomes of exploration: The education provider noted there was a programme wide external examiner and explained their role in the approval of ratified results. There was no mention of any feedback or action taken following external examiner input. Regarding how the QSC ensured assessment of the programme was undertaken objectively and in a similar way to an external examiner, the education provider responded they have discussed this with the QSC and have now opted to continue with a separate programme external examiner. The education provider is now appointing three external examiners in the 2022/23 to oversee the different aspects of the programme.

The programme also has separate external examiners responsible for the MSc element at each of their partner higher education institutions (HEIs). Both the programme wide and its partner HEI external examiner reports will be collated and presented to the Quality and Standards Committee.

This information reassured us that although there appeared to have been minimal contribution from the external examiner during the review period, there were plans in place to involve more external examiners in the future so they can contribute to the programme in a more meaningful way to ensure its effectiveness. Following this quality activity, we had no further questions going forward. However, given the education provider's intention to recruit three new external examiners, we considered the need to review this area again when next they engage with the performance review process. This will help us to understand how the recruitment has developed and the education provider's reflections around this.

Quality theme 6 – discrepancy around data

Area for further exploration: In their portfolio, the education provider submitted destination data for learners that completed the programme in 2020, which showed 9.4% unemployment. We sought information about whether there had been any further analysis of this. For example, if there were particular disciplines affected by unemployment.

We identified discrepancies in some of the tables the education provider submitted as part of their data presented for the 2020 data. We noted the data in the table on a particular page showed 4.22% leavers, whereas the same data in a table on another page showed 1.53%. Therefore, we requested further clarity from the education provider.

Quality activities agreed to explore theme further: We requested further clarity on the data presented to provide us with clear understanding of the education provider's performance in the areas noted.

Outcomes of exploration: The education provider acknowledged the data presented was inaccurate and did not accurately represent the results of the programme's annual exit survey. They submitted the correct data and explained they would provide more comprehensive exit data for cohorts which more closely aligns to the methodology and timing of Higher Education Statistics Agency (HESA) data in future quality returns.

The education provider stated they do not have a standardised benchmark on employment status. They explained their exit survey typically had a response rate of around 70% every year and gave further breakdown of the results. We understood the exit survey enabled the education provider to determine and report employment destinations differentiated by employment as a clinical scientist or within healthcare science more generally and by NHS or non-NHS employment. Further differentiated outcomes also considered being employed outside of the healthcare science profession or not employed or seeking employment.

Regarding disciplines being affected by unemployment, the education provider explained the exit survey collected data on specialisms and employment status separately. At the time of reporting, they had not interrogated the data to determine whether any given disciplines were disproportionately affected by difficulties in recruiting qualified clinical scientists and confirmed they were unaware of employment related difficulties in any given speciality.

As the education provider had acknowledged the inaccuracies in the data supplied and their plans to ensure accurate data is submitted in future reviews, we were able to take reassurance accurate data points would be presented in the future to support the provider's position. Following this quality activity, we had no further questions going forward. We will, however, review this area again at the education provider's next performance review to ensure data has been further reflected upon and has resulted in an improved performance 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 noted the programme is fully commissioned by HEE which ensures it remains sustainable. The education provider also acknowledged the relatively small size of the profession which has resulted in demand for increases in staff to ensure effective oversight of learners across the profession.

- During 2020, the education provider worked with the NHS and HEE with the aim to increase the number of learners across specific specialities to support cancer and diagnostics, and physiology.
- The education provider has also identified additional funding streams that will allow the development of healthcare science education and training and potentially enable sustainable increased learner numbers in the future.
- As noted in [quality theme 1](#), we have been reassured the education provider and its provision are sustainable.
- We have therefore determined they have performed well in this area.
- **Partnerships with other organisations –**
 - The nature of the programme requires the education provider to maintain effective working relationships with different external partner organisations. This includes working with the independent Quality and Standards Committee (QSC) to ensure quality of academic teaching and workplace supervision from their partner providers
 - As outlined in [quality theme 2](#), reduced staffing within the QSC has had an impact on this partnership working. However, the education provider has continued to work with other organisations. These include HEE, Higher Education Institutions (HEIs), learners' workplaces and the Academy for Healthcare Science (AHCS), to ensure governance and effective management of their provision.
 - This has demonstrated to us the education provider's performance in this area continues to be good.
- **Academic and placement quality –**
 - Through a series of meetings with HEE and with external governance relationships, the education provider discusses high risk matters on academic quality. There are annual evaluations of admissions, learner progression, final assessment outcomes and learner experience.
 - Practice-based learning is undertaken primarily within the learner's own workplace with an appropriately qualified Training Officer. They ensure appropriate opportunities for learning are provided and an accurate record of learning achievement is recorded in the learner's portfolio
 - The education provider noted challenges in ensuring academic quality due to the Covid-19 pandemic. This, they explained made managing their learners' ongoing learning difficult.
 - One of the areas they struggled with was learner feedback via the National Education and Training Survey (NETS) and the limitations of the survey due to low response rate. The education provider is now developing a bespoke exit survey for their programme to be able to use the feedback to improve the programme quality.
 - Through [quality theme 3](#), we were reassured the final assessment Independent Assessment of Clinical Competence (IACC) has been effective in assessing learners.
 - The information submitted through the portfolio and engagement with quality activity was sufficient to demonstrate the education provider has performed satisfactorily in this area.
 - When the education provider engages with the performance review again in two-years' time, we will have the opportunity to understand reflections on how the assessments and practice-based learning have

performed under the new curriculum rollout.

- **Interprofessional education –**

- The education provider noted interprofessional education (IPE) activity is evidenced through attendance at Multi-Disciplinary Team (MDT) meetings within the host training department. The MDT exists to bring together diverse disciplines to review, discuss and plan patient care. There are other IPE opportunities provided by the Training Officers during practice-based learning.
- The education provider intends to continue to use the MDT meetings as an opportunity for learners to interact, contribute and learn from other healthcare professionals. Although the pandemic has limited the opportunities for learners to network and engage in face-to-face events to share good practice, the education provider has supported several virtual networking opportunities.
- The education provider reflected upon further examples of IPE opportunities available to learners:
 - Multi-professional Webinars;
 - Infection Prevention and Control training – with nurses/IPC professionals;
 - NHS Quality Improvement webinars/events;
 - Careers events, e.g., critical care which is a multi-professional specialty (e.g., medics, clinical scientists; ODPs; nurses; paramedics) or nuclear medicine (medics, scientists; technologists; radiographers etc.).
- Therefore, they considered the education provider has performed well in this area.

- **Service users and carers –**

- Service users were involved in accreditation panels, recruitment panels, assessment, learner support and curriculum review, practice-based learning and in the MSc programmes.
- Service user representatives observed a ten percent sample of the programme's final assessments across all specialties. They then provided feedback and recommendations which informed the ongoing quality enhancement of assessment processes.
- The education provider noted delays to the recruitment of service users during the review period. Going forward they have recognised the need to ensure a broader service user representation in their programme and now have plans to develop a more mature service user led input into their various operational committees.
- The education provider's reflection in this area demonstrated how they continue to involve service users in the programme and look at ways to involve them in a more effective way. We are therefore satisfied the education provider has performed satisfactorily in this area. However, to ensure they are performing well, we will review again when next the education provider engages with the performance review process, when they would have had the opportunity to broaden service user involvement.

- **Equality and diversity –**

- The education provider is governed by NHS Equality and Diversity policy. The education provider monitors equality and diversity data collected at all stages of the admissions process. There is an established Equality and Diversity Committee that has oversight on issues affecting learners, policies and procedures.
- Details of how the education provider ensured they have widened participation to allow disadvantaged applicants opportunity to get on the programme are covered in [quality theme 4](#).
- Through the education provider's original reflection and their engagement with the quality activity, we are satisfied with their performance in this area.
- **Horizon scanning –**
 - A number of areas have been identified where the education provider is looking to develop in the future. These include:
 - Increasing educators in the workplace and ensuring they are trained;
 - Standardising placement supervision;
 - Accommodating new sub-specialities; and
 - Funding models.
 - The education provider recognises that some specialisms may struggle due to small and financially non-viable cohort sizes. The education provider is having discussions with the smaller specialities to find viable solutions to support their workforce needs. Additionally, they are liaising with their colleagues in Scotland, Northern Ireland, and Wales to see whether a collective approach across all regions of the UK may help in addressing the recruitment issues.
 - We understand a date has been set for the standardisation of assessment project. This will be implemented alongside their new curriculum.
 - This information demonstrated the education provider is considering ways to develop their programme. Therefore, we are satisfied they are performing satisfactorily in in this area. However, to be able to review the impact of the standardised assessment, we will review this area again when next the education provider engages with the performance review process.

Risks identified which may impact on performance: None

Outstanding issues for follow up:

1. Reflections on the performance of the assessment and practice-based learning under the new curriculum rollout – we will need to review the education provider's performance around the use of IACC to effectively assess learners' competence.
2. Broadening service user involvement – we will need to review the education provider's performance around the development of a more mature service user led input into their various operational committees.
3. Impact of standardised assessment- following the implementation of the standardised assessment, we will need to review the education provider's performance around this and possible impact of this change.

Areas of good and best practice identified through this review:

We recognised the learner exit survey is a good addition and has been intelligently analysed and suitable further action undertaken.

The midterm assessment is also an example of good practice.

The visitors considered that both of these show good use of information gathered during and post programme to improve the delivery and ensure that the learners are kept on track with their progress.

Quality theme: Thematic reflection

Findings of the assessment panel:

- **Impact of COVID-19 –**
 - The education provider's reflection in this area highlighted challenges that were due to Covid-19 pandemic. For example, face-to-face interviews were stopped and all recruitment processes were amended to allow virtual delivery.
 - As part of the education provider's response to the pandemic, a decision was made to maintain multi-stakeholder interviews remotely using Microsoft Teams. Also, in lieu of the Objective Structured Final Assessment (OSFA), a new Independent Assessment of Clinical Competence (IACC) was introduced. This enabled learners to submit an alternative written assessment to replace the OSFA and undertake a reflective discussion of the assessment during an interview with an independent assessor panel.
 - The education provider was able to support learners to remain on the programme and in NHS employment through the review period. Additional support has been provided by the addition of the Training Programme Directors / Regional Deans roles, which has given the education provider the extra resource needed to manage learners needs through the pandemic period.
 - The detailed reflection submitted as well as information received through [quality theme 3](#) demonstrated the education provider has successfully managed the impact of Covid-19 and therefore we are satisfied about their performance in this area.
- **Use of technology: Changing learning, teaching and assessment methods –**
 - Prior to Covid-19 pandemic, the education provider had already made significant use of technology with an online e-portfolio service for all learners and their trainers, online multi-source feedback services, online introductory webinars about the e-portfolio. They also used the digital scoring systems for recruitment interviews and final assessment assessors.
 - Given the impact of the pandemic, the education provider has recognised the key importance of having a dedicated digital services team and have identified a quality improvement initiative in addition to the Covid-19 response. In 2019-20, the digital team sought to understand what users wanted and needed from the education

provider and shaped the education provider's services in response. Due to recruitment and time constraint, the website development did not progress as quickly as expected. However, the revised site went live at the beginning of September 2021. The education provider noted they will continue to conduct both informal and fully formal user research about the website with their core user groups to continue to discover where there are areas of unmet need.

- We considered the education provider has been able to use technology to develop their programme, both in response to the pandemic and as part of development of their teaching and assessment methods. This demonstrated the education provider was performing well in this area.
- **Apprenticeships –**
 - The education provider does not currently offer any HCPC approved apprenticeship programme.
 - However, the education provider has recently introduced a 'Trailblazer' group that has developed a level 7 Clinical Scientist apprenticeship standard. Therefore, there is now an opportunity to develop a level 7 apprenticeship route to the programme. Discussions have started around the relative merits of establishing a new approved apprenticeship programme or amending the current approved programme to incorporate an apprenticeship route.
 - The education provider employs an End Point Assessment Manager who holds responsibility for apprenticeship levy funded programmes. This affords them the opportunity to gain a full understanding of the apprenticeship levy model and explore opportunities to utilise this funding for the programme.
 - Although we do not have full details on how the degree apprenticeship programme would run, we are satisfied that the education provider is already considering how this might impact on their existing provision and are putting plans in place to manage the impact. Therefore, we considered they are performing well in this area.

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:

- **Assessment of practice education providers by external bodies –**
 - Due to the size and nature of the programme, the education provider has multiple partner organisations including HEIs, NHS trusts and some independent private sector laboratories.
 - Practice education occurs primarily within NHS trusts where learners are based on an employed basis. There are rigorous practice placement partner accreditation processes which helps to ensure the quality of practice education at all partner sites. All NHS trusts undergo periodic inspection by separate regulatory bodies and part of the education provider's assessment of the suitability of a site for learners considers data derived from these sources.

- The education provider did not highlight any issues from any assessments undertaken during the review period. Therefore, we are able to take assurance that they are performing well in this area.
- **Other professional regulators / professional bodies**
 - The education provider noted that some specialisms within the profession have their own professional body to represent their interests while others do not. Given the nature of the programme, the education provider explained they do not undertake formal review activities with all of the relevant professional bodies. However, they engage with relevant professional bodies through curriculum review; changes to assessment processes; and changes to recruitment processes.
 - We took assurance the education provider has engaged with relevant professional bodies for the benefit of their provision and therefore considered the education provider was performing 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 –**
 - Between 2018 and 2021, the education provider undertook a curriculum review project as noted in the Education provider context above. The education provider stated the review was undertaken so the programme remained relevant, up-to-date and fit for purpose.
 - All stages of the curriculum review project have now been completed and the new programme structures and new curriculum content have been introduced to education providers delivering the programme. Final implementation was carried out in 2022 with the exception of Microbiology which is to be implemented in 2023.
 - The visitors considered the curriculum review was timely and well presented. They are therefore satisfied the education provider is performing well in this area.
- **Development to reflect changes in professional body guidance –**
 - The education provider noted there have been no significant changes in professional body guidance during the reporting period. As a professional body themselves, we are confident any developments in response to changes in professional body guidance will be appropriately managed.
 - Therefore, we are satisfied the education provider is performing well in this area.
- **Capacity of practice-based learning –**
 - The education provider operates a partnership model whereby practice providers host learners through an Expression of Interest (EOI) to the HEE Commissioning Team followed by an internally led accreditation process. This enabled the practice provider to employ the learner on a fixed term contract for the length of the programme. This model ensured practice-based learning capacity is closely managed and

enabled the education provider to assure adequate capacity for new intakes.

- The education provider recognised that expansion of practice-based learning capacity is likely to be required in the near future. They are therefore working with national commissioners to develop a better understanding of future workforce needs, with one current area of work being around the development of Practice Education Facilitators. As part of the Spending Review, additional funding has been secured to employ Practice Education Facilitators and the education provider will be evaluating the effectiveness of the role to inform future spending review bids.
- The visitors considered the review to expand practice-based learning capacity essential to inform future funding and learner support. However, they also recognised the education provider is closely associated with the NHS and effectively relies upon it for practice-based learning and many elements of the education. We considered that as a close partner of the NHS, the education provider should take a more proactive approach towards expanding learner numbers through additional practice-based learning opportunities or supportive collaborations.
- We are satisfied the education provider is performing satisfactorily in this area but considered a two-year review would give us the opportunity to reassess how the education provider has continued to perform in this area, following the visitors' feedback.

Risks identified which may impact on performance: None

Outstanding issues for follow up:

Education provider's approach to expanding learner numbers through additional practice-based learning opportunities or supportive collaborations.

Quality theme: Stakeholder feedback and actions

Findings of the assessment panel:

- **Learners –**

- Learners are involved in the education provider's governance through:
 - representation on the Themed Boards;
 - the Trainee Representative Group which feeds into monitoring and improvement processes; and
 - the leavers' survey.

In addition, as part of the accreditation of the academic degrees, the education provider requires HEIs to demonstrate learner involvement in their programmes.

- Feedback from learners is obtained via the National Education and Training Survey (NETS) and Trainee Exit Survey (TES).
- The education provider gathered feedback from learners on their experience of the amended final assessment process, the IACC, in addition to other surveys that all learners were asked to undertake upon completion of the programme (NETS and TES).

- The education provider used themes drawn from the feedback to inform the separate curriculum review and the decision has now been made to retain the IACC and amend it in response to the feedback received.
- This reassured the visitors that learners are involved in the programme and that feedback from them is taken and actioned appropriately. This demonstrated the education provider is performing well in this area.
- **Practice placement educators –**
 - The education provider uses different means to gather, collate and act on feedback from their stakeholders, including practice educators. One of these is the use of ‘Themed Boards’.
 - The education provider offers a bespoke Train the Trainer (TTT) course to their practice educators, with input from relevant professional staff. Anonymous feedback is gathered from the Training Officers and is collated into an annual report which is used to guide and inform any required developments or amendment to the programme.
 - The education provider recorded a high degree of positive feedback in 2020 where 97% of the respondents rated the TTT course as ‘good’ or ‘outstanding’ and 100% in 2021. The education provider also noted a huge increase from 324 that attended the course face-to-face in 2019 compared with 1021 who attended virtually in 2020.
 - The visitors considered moving the TTT session online has helped to broaden participation and considered this a good practice. We are therefore satisfied the education provider is performing well in this area.
- **External examiners –**
 - The education provider has an external assessment expert who oversees the Ratification Board that approves the outcomes of the final assessment. The education provider also has seven partner HEIs delivering the named award of MSc Clinical Science and these HEIs each have their own external examiners on their programmes.
 - The education provider noted challenges they experienced in effectively responding to multiple external examiner reports across disparate MSc programmes.
 - As detailed in [quality theme 5](#), the education provider is now planning to recruit additional external examiners to ensure the way feedback is taken from them and actioned in response, is effective.
 - We are reassured by this that the education provider is performing satisfactorily in this area. However, as noted in the section above, we will revisit this area when the education provider next engages with the performance review process. Then, we will be able to review the education provider’s performance and reflection on the recruitment of more external examiners.

Risks identified which may impact on performance: None

Outstanding issues for follow up:

Reflections on the recruitment of new external examiners. We will review the education provider's performance around the involvement of their external examiners following the recruitment of three new external examiners on the programme.

Areas of good and best practice identified through this review: The visitors considered moving the Train the trainer sessions online was beneficial as it allowed broader participation with less disruption to the Training Officer's (TO) day job. The visitors considered it good practice to have retained this option going forward.

Data and reflections

Findings of the assessment panel: The visitors identified some discrepancies around the data supplied. Details of these are provided in [quality theme 6](#). This has made it difficult to make any meaningful deductions from the data supplied and as such, we would hope to receive more accurate data points when next the education provider submits their portfolio for their next performance review.

Risks identified which may impact on performance: We understand that as a non-Higher Education Institution, the education provider is not included in external data returns linked to the following areas:

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

Therefore, given the lack of comparable data points to support the education provider's position, we have considered this a risk and as such, would require undertaking another performance review of the education provider and its approved programme in two academic years from this review. A shorter review period would also allow the education provider to submit more accurate data points given the inaccuracies identified in the previous data points submitted.

Outstanding issues for follow up:

Accuracy of data points- we will review the data points that the education provider submits on the areas listed above to have a better understanding of their performance in these areas.

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

Referrals to next scheduled performance review

1. The performance of the assessment and practice-based learning under the new curriculum rollout

Summary of issue: The move from Objective Structured Final Assessments (OSFAs) to Independent Assessment of Clinical Competence (IACC) meant there was no centralised practical element of the final assessment. We considered the IACC was largely reflective and did not include the practical element that the previous OSFAs had. The education provider stated the implementation of the IACC assessment has had no measurable negative impact on the numbers of learners passing or failing the assessment. However, we considered reviewing this at the next performance review will help us understand the effectiveness of the IACC after using it for a period.

2. Broadening service user involvement

Summary of issue: There were delays to the recruitment of service users during the review period. The education provider has recognised the need to ensure a broader service user representation in their programme and are now looking to develop a more mature service user led input into their various operational committees. Reviewing at the next performance review will help us understand how this has developed and the education provider's performance in this area.

3. Expanding learner numbers through additional practice-based learning opportunities or supportive collaborations

Summary of issue: The education provider has recognised the need to expand practice-based learning opportunities to support an increase in learner numbers in the future. At their next performance review, we will review the education provider's performance around how they have developed additional practice-based learning opportunities or supportive collaboration to cater for the increased learner numbers.

4. Recruitment of new external examiners.

Summary of issue: The education provider has identified the need for additional external examiners on the programme. Reviewing this at the education provider's next performance review will help us to understand how the recruitment has developed and the education provider's reflections on it.

5. Accuracy of data points

Summary of issue: We identified discrepancies in some of the data points submitted which has made it difficult to make meaningful deductions from the data. The education provider intends to supply more accurate data and cover areas listed in section 4 above when they next engage with the performance review process. This will give us a better understanding of how they have performed in this area.

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: Overall, the visitors considered the education provider has maintained a good performance across the different areas of this performance review. There were also three areas where the visitors have considered the education provider demonstrated good practice. However, as noted in sections above, the lack of externally sourced data has meant the review period could not be extended beyond two years for this performance review. We have also considered this an opportunity for the education provider to further reflect on and develop areas where improvements may be needed.

Appendix 1 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
Certificate of Completion of Scientist Training Programme	FT (Full time)	Clinical scientist			01/09/2018