

Performance review process report

The National School of Healthcare Science, 2021-2023

Executive summary

This is a report of the process to review the performance of The National School of Healthcare Science. This report captures the process we have undertaken to consider the performance of the institution in delivering HCPC-approved programmes. This enables us to make risk-based decisions about how to engage with this provider in the future, and to consider if there is any impact on our standards being met.

We have:

- Reviewed the institution's portfolio submission against quality themes and found that we needed to undertake further exploration of key themes through quality activities
- Reviewed the institution's portfolio submission to consider which themes needed to be explored through quality activities
- Undertaken quality activities to arrive at our judgement on performance, including when the institution should next be reviewed
- Recommended when the institution should next be reviewed.
- Decided when the institution should next be reviewed

Through this assessment, we have noted:

- The areas we explored focused on:
 - The visitors considered the changes that had taken place as a result of the merger of Health Education England (HEE) and NHS England (NHSE). In particular they focused on the impact the merger had on the education provider from a staffing perspective.
- The following areas should be referred to another HCPC process for assessment:
 - Visitors noted the education provider had highlighted the future expansion of the workforce and the need to increase capacity in practice-based learning would be challenging. We therefore recommended this area should be considered and reviewed again during the next performance review.
 - The education provider is currently in the process of reviewing the Independent Assessment of Clinical Competence (IACC) and plan to introduce a streamlined assessment for 2025. Given this is currently in the developmental stages, the progress of this should be reviewed in the next performance review.
 - There were changes made to the role of the External Examiner in early 2023. These changes highlighted the need to amend the Terms of Reference for the Examination and Ratification Boards. Visitors

recommended these amendments should be reviewed and reflected on in the next performance review.

- The provider should next engage with monitoring in two years, the 2025-26 academic year, because:
 - Due to the lack of established data points. As detailed in <u>section 4</u> we shall work with the education provider to develop the required data. This data will then be available to be used at their next performance review (2025-26).

Previous consideration

Not applicable. The performance review process was not referred from another process.

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
- whether issues identified for referral through this review should be reviewed, and if so how

Next steps

Outline next steps / future case work with the provider:

- Subject to the Panel's decision, the provider's next performance review will be in 2025-26 academic year
- Subject to the Panel's decision, we will undertake further investigations as per section 5

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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 <u>approved on an open-ended basis</u>, subject to ongoing monitoring. Programmes we have approved are listed <u>on our website</u>.

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 <u>partner visitors</u> 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:

Beverley Cherie Millar	Lead visitor, Clinical scientist
Natalie Fowler	Lead visitor, Clinical scientist
Sheba Joseph	Service User Expert Advisor
Saranjit Binning	Education Quality Officer
Lorna Crawford	Advisory visitor, Clinical scientist

We encourage reflections through portfolios to be made at the institution level wherever possible. The performance review process does not always require profession level scrutiny which requires all professionals to be represented in the assessment panel. Rather, the process considers how the education provider has performed at institution level, linked to the themes defined in section 1. Lead visitors have the option to appoint additional advisory partners where this will benefit the assessment, and / or where they are not able to make judgements based on their own professional knowledge.

In this assessment, we considered we required professional expertise across all professional areas delivered by the education provider. We considered this because there were areas within the portfolio which the lead visitors could not make judgements on with their professional knowledge or expertise. These areas were reflections in the clinical scientist profession.

Section 2: About the education provider

The education provider context

The education provider delivers one HCPC approved programme across one profession. It is a Higher Education Institution and has been running HCPC approved programmes since 2018. This is the Certificate of Completion of Scientist Training Programme (STP), which is an integrated full-time three-year programme and consists of a part time master's degree and work-based training. Prior to the National School's approval as an education provider of the STP, the programme had been delivered by the Academy for Healthcare Science (AHCS), which has oversight of the National School of Healthcare Science operations. The STP has been active since 2011, however, the education provider only became the approved provider for the programme in 2018.

In 2018 the Scientist Training Programme (STP) went through a curricula review where the curriculum for all specialities was reviewed. This review was completed in July 2021 and the revised curriculum was delivered in September 2022. These revisions were considered by the HCPC through the focused review process and profession specific visitors were consulted to assess if the curriculum review process was reasonable and appropriate.

The education provider engaged with the performance review process in 2021-22 and received a two-year monitoring period. The following issues were referred to this performance review cycle from the review completed in 2021-22:

• The performance of the assessment and practice-based learning under the new curriculum rollout – 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. In addition to this, 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 number of learners passing or failing the assessment. However, it was recommended this should be

- reviewed during the next performance review, as it will help understand the effectiveness of the IACC after using it for a period.
- Broadening service user involvement there were delays to the
 recruitment of service users during the review period. The education provider
 recognised the need to ensure a broader service user representation in their
 programme and were looking to develop a more mature service user led input
 into their various operational committees. It was recommended this should be
 reviewed during the next performance review, as it will help to understand
 how this has developed and the education provider's performance in this area.
- Expanding learner numbers through additional practice-based learning
 opportunities or supportive collaborations 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.
- Recruitment of new external examiners 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
 understand how the recruitment has developed and the education provider's
 reflections on it.
- Accuracy of data points 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.

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	□Undergraduate	⊠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 programmes¹.

¹ An explanation of the data we use, and how we use this data, is available here

Data Point	Bench- mark	Value	Date of data point	Commentary
Numbers of learners	391	552	2023	The benchmark figure is data we have captured from previous interactions with the education provider, such as through initial programme approval, and / or through previous performance review assessments. Resources available for the benchmark number of learners was assessed and accepted through these processes. The value figure was presented by the education provider through this submission. The education provider is recruiting learners above the benchmark. We explored this further through the Profession specific reflection section and noted the increase in learner numbers was due to the expansion of the workforce in response to the NHS Long Term Workforce Plan.
Learner non continuation	3%	N/A	2020-21	There is no data available for this data point. We asked the education provider to consider if they wanted to establish ongoing data reporting for this and other data points through this performance review assessment. Further information about the outcome of establishing data reporting is available in section 4 Data and reflections
Outcomes for those who complete programmes	94%	N/A	2019-20	There is no data available for this data point. We asked the education provider to consider if they wanted to establish ongoing data reporting for this and other

				data points through this performance review assessment. Further information about the outcome of establishing data reporting is available in section 4 Data and reflections
Learner satisfaction	N/A	N/A	N/A	There is no data available for this data point. We asked the education provider to consider if they wanted to establish ongoing data reporting for this and other data points through this performance review assessment. Further information about the outcome of establishing data reporting is available in section 4 Data and reflections

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 <u>thematic areas reviewed</u> 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 – Impact of the merger on the staffing structure

Area for further exploration: Visitors noted there were some major changes taking place with the education provider's structure due to the merger with Health Education England (HEE) and NHS England (NHSE). We recognised this merger had resulted in some uncertainty on how the final structure would operate and the impact of this on the education provider. Due to the merger, there were interim staffing arrangements in place and we noted the education provider was in the

process of formally replacing some senior members of staff. Visitors acknowledged the plan was for this process to be finalised by January 2024, however they raised some concerns in terms of the delays the education provider experienced and if this would result in the interim staff continuing in their positions.

We therefore sought further information from the education provider on what arrangements were in place with the interim members of staff. In addition to this, further reflections were requested on the sustainability of the staffing structure and the outcome of the appointment of senior staff members.

Quality activities agreed to explore theme further: We explored this through email clarification and additional evidence as we considered this the most appropriate and proportionate way to address the concerns.

Outcomes of exploration: The education provider informed us in the narrative they provided, that the interim Director of Operations had been appointed permanently and the Head of School position was still being occupied by an interim member of staff, however, this post had been advertised. Further details were also provided on the outcome of the merger where we received confirmation that the education providers structure remained largely unchanged, which was positive. Only one position was identified as being better suited in a different part of the structure, which was the Stakeholder Engagement Manager.

Visitors were satisfied with the reflections provided. Although there was a high level of uncertainty during the merger, it was reassuring to see a positive outcome where the impact on the education provider was minimal. The permanent appointment of the Director of Operations was positive and provided stability and continuity.

Section 4: 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 –

In their last performance review the education provider reflected on the appointment of the Training Programme Directors (TPDs) and the ongoing funding they received for the training places on the Scientist Training Programme (STP), which was positive. However, since then, the education provider has experienced some challenges due to Health Education England (HEE) merging with NHS England (NHSE). This merger has had an impact on the education provider, particularly on the operational structure, which has resulted in some uncertainty with

the final structure and the Head of School and Director of Operations retiring. During this period, the education provider has made interim appointments internally to cover the posts, which has provided some stability.

- Through <u>Quality theme 1</u> we explored the impact of the merger with HEE and NHSE on the staffing structure and the status of the interim positions.
- Reflections were provided on the outcome of the merger and how the education provider had maintained their funding. They acknowledged this as an achievement of their contribution to the healthcare science workforce.
- Through clarification, we noted the education provider's financial structure is supported with funding from NHSE for learners. It is the education providers responsibility to ensure the NHS Trusts can offer learners places and funding is then requested accordingly from NHSE. We recognised how the education provider had managed the increased learner numbers and the pressure this had placed on their resources and managing the final assessment, which was the Independent Assessment of Clinical Competence (IACC). Through their processes they were able to manage the increase with learner numbers and the arrangements for the final assessments. However, the IACC assessment is currently being reviewed and the aim is to introduce a streamlined assessment in 2025.
- Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.

Partnerships with other organisations –

- During this period the Quality and Standards Committee (QSC) has been developed and they have oversight of the Scientist Training Programme (STP). The updates have included the exclusion of the Head of School and the Director of Operations from the membership to ensure the committee is fully independent, which means any member of staff can be held accountable for specific functions of the STP. The committee is viewed as an independent advisory committee and their input is acknowledged by the education provider.
- Through quarterly meetings the QSC have been able to understand how STP functions, which has enabled them to update the terms of reference and identify the specific elements they will focus on
- Through clarification we noted the education provider collaborated with Higher Education Institutes (HEIs) and NHS Trusts. Due to the nature of the commissioning process, which was through NHSE, the input from the education provider was limited. However, we recognised they collaborated directly with these partners through regular meetings where operational issues were discussed.
- Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.

Academic quality –

 During the COVID-19 pandemic, the education provider implemented the Independent Assessment of Clinical Competence (IACC). The

- purpose of this assessment was to enable learners to demonstrate their readiness for practise and to minimise the impact of the restrictions in place on newly qualified trainees. They have continued to use this assessment. In response to stakeholder feedback they have also made some amendments to the assessment.
- The education provider acknowledged there was a gap with some of the evidence learners were submitting. They recognised this was due to some gaps with the teaching, which they were unable to deliver due to the pandemic. To address this issue, they introduced a registered professional sign-off, which required Training Officers to confirm learners had met the learning outcomes through alternative methods during the pandemic.
- Through clarification we noted, the registered professional sign off process was only used to address the gaps with learning during the pandemic. Learners who completed from 2023 onwards were assessed using the same approach that was used prior to the pandemic.
- Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.

• Placement quality -

- The education providers Accreditation and Admissions Team have overall responsibility for the quality of the STP and ensure all learners are able to meet the standards.
- There were processes in place for accreditation and ongoing monitoring. This involved working closely with NHS Trusts to monitor the quality of placements, which allowed the education provider to understand and respond to any issues that may impact learners whilst on placement. The placement experience for learners was also monitored through the Trainee Exit Survey (TES). Feedback relating to the placement experience for learners on the STP was received through this survey and reviewed by the education providers Senior Management Team. This review enabled the team to respond to issues identified through the feedback and to put in place an action plan.
- Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.

• Interprofessional education -

- Interprofessional learning (IPL) was recognised as an important element of the STP. There were a range of IPL opportunities available to ensure learners engaged with a variety of healthcare professionals. The opportunities included multi-disciplinary meetings, webinars, career events in multi-professional specialities and learners training other professionals. The range of IPL opportunities contributed to the learning experience for learners and enabled them to gain exposure to a range of professions in a clinical environment.
- Visitors acknowledged the range of IPL opportunities available to learners and noted how some of the opportunities were profession specific. The list was extensive and provided learners with a variety of clinical experiences.

 Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area

Service users and carers –

- Reflections were provided on service user and carer input across the STP. The education provider explained how they were involved with assessments and provided feedback, practice-based learning and programme design. They reflected on how this level of service user and carer involvement met the HCPC standards at threshold level in the previous review they completed but recognised this involvement was on an ad-hoc basis.
- Significant progress has been made with involving service users and carers through the development of the 'Lay Representative Collaborative'. This is a collaboration of service users and carers who have previously engaged with the education provider. The purpose of this group is to identify areas where they could be actively involved to improve service user and carer involvement. It was noted how the development of this sub-committee has centralised and improved service user and carer involvement. For example, previously only one service user was involved with the training support panel but this has now been increased to two. The effectiveness of this sub-committee and enhancing service user and carer involvement has also been commended by NHSE.
- Visitors acknowledged the benefits of the Lay Representative Collaborative and noted how this allowed for closer collaboration with the education provider and involvement at different stages.
- Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.

Equality and diversity –

- During this review period a range of Equality, Diversity and Inclusion (EDI) policies have been developed or amended, such as the Appeals Policy, Complaints Policy and Reasonable Adjustment Policy. To support the changes with these policies the EDI Committee has worked closely with the Professional Standards and Improvement Manager to integrate the Equality Impact Assessments (EIAs) into all policies that are amended or developed in future. This signifies there is a structured approach to identifying EDI concerns and addressing them.
- Reflecting on the development of the EDI Committee, the education provider acknowledged how new this committee was and the ongoing support they would require. However, they also recognised the importance of the committee and the work they had undertaken to improve EDI.
- Through clarification we noted the 'discrete Equality, Diversity and Inclusion role' referred to the role being standalone within the education provider. Visitors noted this role was part time and was specifically dedicated to equality, diversity and inclusion.
- Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.

• Horizon scanning -

- Reflections were provided on some of the challenges the education provider experienced with practice educator capacity, particularly in the smaller specialities. However, they acknowledged the impact of these challenges was significantly lower than originally envisaged and noted the work NHSE were undertaking to increase practice educator capacity across the Trusts.
- The education provider acknowledged the NHS Long Term Workforce Plan (2023) and reflected on the impact of this on the HCPC provision. They recognised they had to support the expansion of the workforce as part of this plan and noted how challenging the increase in learner numbers would be for them.
- Through clarification, we noted the capacity at NHS Trust level to recruit and support learners through the STP was ensured through the education provider's accreditation processes. Training opportunities and peer support were also available to new practice educators.
- Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.

Risks identified which may impact on performance: None.

Outstanding issues for follow up: The education provider is currently in the process of reviewing the Independent Assessment of Clinical Competence and plan to introduce a streamlined assessment for 2025. Visitors noted this is currently in the developmental stages and recommended this should be considered and reviewed during the next performance review.

Quality theme: Thematic reflection

Findings of the assessment panel:

• Embedding the revised Standards of Proficiency (SOPs) -

- In 2022, the education provider considered the draft Standards of Proficiency (SOPs) within the curriculum. The final version of the SOPs was confirmed in September 2023 and the education provider undertook a thorough mapping process using a traffic light system. This system identified any further changes that maybe required to the curriculum and was categorised as red (new or substantially revised), amber (revised with additional elements) and green (revised but not substantially altered). To address any gaps, the education provider reviewed and updated the mapping documentation and module descriptors.
- Through clarification, we noted all the SOPs were addressed in the learning outcomes and all updates were incorporated into the STP curriculum. Further details of this were provided in the mapping document. Visitors found this document helpful, as it enabled them to understand how and where the education provider had considered the SOPs. For example, learners were encouraged to use both in-person and digital technologies for consultation and therapy sessions. This provided them with the skills to use different service delivery methods

- and also prepared them for future changes. Other examples included learners being provided with opportunities to lead multidisciplinary teams during placements and demonstrating leadership through the peer mentorship initiative.
- Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.

• Use of technology: Changing learning, teaching and assessment methods –

- The Digital and Communications team are responsible for managing all aspects of technology. They reflected on how despite all the efforts of the team they have experienced some barriers with the current Microsoft database due to limited access and ongoing maintenance requirements. They recognised the current system would not be able to manage with the expansion of trainee numbers. Therefore, they are in the process of exploring and testing a Client Data Management System. This should improve access to user records and enhance communication with stakeholders.
- Through clarification, we noted there was flexibility with using simulation and other technologies for assessment purposes, however this varied depending on the specialisms and was not necessarily a requirement.
- Artificial intelligence (AI) was also an area reflected on which was evolving rapidly and was being used as a tool within bioinformatics.
 They recognised how this could be misused and were therefore in the process of developing a specific policy for AI and had collaborated with an AI expert to do this. In the absence of this policy, they were following the Russell Group guidance.
- Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.

• Apprenticeships in England -

- We acknowledged significant progress had been made with regards to the Level 7 Clinical Scientist Apprenticeship. The Apprenticeship Team had gained approval as the End-Point Assessment Organisation (EPAO) for this from the Institute for Apprenticeships and Technical Education (IfATE). The education provider was therefore the only recognised EPAO, which provided them with the opportunity to develop alternative routes in the Clinical Scientist profession with new partners.
- The education provider reflected on how a decision had not been made on pursuing the apprenticeship levy funding for the STP. The focus was to secure funding for the existing STP and to maintain stability within the new NHSE structure. Having managed these challenges, the education provider is now in a position to explore new partnerships to meet the needs of the NHS Long Term Workforce Plan.
- Visitors were satisfied with the information provided in this section, which demonstrated 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: Sector body assessment reflection

Findings of the assessment panel:

Assessments against the UK Quality Code for Higher Education –

- The UK Quality Code for Higher Education does not apply to the STP, as there is no Quality Assurance Agency (QAA) benchmark statement for the Clinical Scientist qualification. We recognised this was unusual for a HCPC regulated programme, however this was not unique within healthcare education. This highlights how some qualifications operate without oversight from the QAA.
- Visitors were satisfied with the information provided in this section, which demonstrated the education provider had considered this area and there were no concerns.

Office for Students (OfS) –

- The education provider reflected they were not registered with the Office for Students, however, it was noted they worked with seven partner HEIs to deliver the MSc Clinical Science award, all of whom were registered with the OfS. These education providers had degree awarding powers and were responsible for their own quality assurance within the higher education frameworks. Their Teaching Excellence Framework (TEF) awards were also available on the OfS website, which provided transparency and insight into the quality of teaching and education.
- Visitors were satisfied with the information provided in this section, which demonstrated the education provider had considered this area and there were no concerns.

• Other professional regulators / professional bodies -

- The STP covers various sub-specialisms, which do not all have their own professional bodies. Due to the complexity of this, the education provider was unable to complete any formal review activities with any professional bodies. Despite this, the education provider actively engages with stakeholders through curriculum reviews, assessment changes and recruitment processes.
- Ouring this period the Healthcare Science Professional Collaborative was developed, which was a forum to replace the Themed Boards. This forum allowed for regular engagement with professional stakeholders from the healthcare science community and for input and feedback to be provided on the core activities. Visitors considered this was an excellent initiative where professional stakeholders could interact and included relevant professional bodies and regulators.
- Visitors were satisfied with the information provided in this section, which demonstrated 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 -

- Reflecting on the curriculum review process, the new curriculum was reviewed in 2021 by the HCPC and implemented in 2022. The revised SOPs were incorporated into this in 2023. Taking into account the various changes that had been made, it was clear the curriculum was current and would therefore not require any significant changes to be made until 2026. This approach ensured the curriculum remained current and aligned with professional standards.
- Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.

Development to reflect changes in professional body guidance –

- The education provider indicated there had been no changes in professional body guidance during this review period.
- Through clarification, the education provider confirmed they engaged with various professional bodies during the curriculum review process and since then no further changes in professional body guidance had occurred. Any further changes that may occur would be highlighted through the Healthcare Science Professional Collaborative, as interaction with professional bodies is managed through this process.
- Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area

• Capacity of practice-based learning (programme / profession level) -

- Reflecting on the development of the STP, the partnership model has been applied. This means all placement providers must go through the Expression of Interest (EOI) process and apply to the NHSE Commissioning Team if they are interested in hosting a learner and they must also go through an accreditation process. Successful placement providers, who are normally the NHS Trusts will employ the learners on fixed term contracts for the duration of the STP. This model ensures the capacity of practice-based learning is managed closely and enables the education provider to maintain adequate capacity for each new intake.
- It was acknowledged the number of learners was influenced by the capacity available within individual NHS Trusts and not by a workforce model which could determine the need for Clinical Scientists within the NHS. This has resulted in placement capacity becoming a limiting factor for future workforce growth.
- The education provider acknowledged the need to increase capacity to meet workforce targets set out in the Long Term Workforce Plan and recognised the current model did not allow for workforce expansion. They recognised this would be challenging and were therefore continuing to work with NHSE to enable sustainable growth in capacity.
- Visitors acknowledged the education providers partnership model,
 which linked learners to placement providers. Through this model they

have been able to sustain the availability of practice-based learning, however visitors were concerned how this would be managed in the future with the projected increase in learner numbers. Visitors noted the education provider had highlighted the future expansion of the workforce and the need to increase capacity in practice-based learning would be challenging. Given the challenges associated with this expansion, visitors recommended this area should be considered and reviewed again during the next performance review.

 Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area. However, they noted the future expansion of the workforce was an ongoing development and the progress of this should be reviewed again in the next performance review.

Risks identified which may impact on performance: Visitors acknowledged the education providers partnership model, which linked learners to placement providers. Through this model they have been able to sustain the availability of practice-based learning, however visitors were concerned how this would be managed in the future with the projected increase in learner numbers. Visitors noted the education provider had highlighted the future expansion of the workforce and the need to increase capacity in practice-based learning would be challenging and recommended this area should be considered and reviewed during the next performance review.

Outstanding issues for follow up: None.

Quality theme: Stakeholder feedback and actions

Findings of the assessment panel:

- Learners -
 - Previously learners had been involved with the Themed Boards, however with the recent development of the Healthcare Science Professional Collaborative this changed. This collaborative focussed on professional collaboration, which resulted in the need to identify a new forum for learner input. This led to the creation of the Trainee Representative Collaborative (TRC), which included trainees who previously represented the STP at Themed Boards. The TRC met quarterly and ensured learners were able to provide feedback and contribute to the improvements of the programmes. We recognised this new structure allowed for better reporting of issues to the Senior Management Team and enhanced the collaboration with learners.
 - Due to the education provider not having HEI status, they do not participate in the National Student Survey (NSS).
 - However, feedback was gathered from learners on clinical practice placements through the National Education and Training Survey (NETS). It was noted learners on all healthcare programmes at various levels complete this survey.
 - In addition to this, the Trainee Exit Survey (TES), which had an exceptionally high response rate at approximately 70% annually, was completed by learners and provided specific feedback on the STP. This data was reviewed annually by the Senior Management Team

- alongside a report and action plan, which outlined the findings of the data and the areas where there were concerns and action was required. This ensured all feedback was addressed.
- Visitors noted the establishment of the TRC and commented on how this provided learners with an 'excellent' opportunity to express their concerns and raise any issues they may have.
- Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.

Practice placement educators –

- The term 'practice placement educator' encompasses various roles. The education provider therefore uses the term training officer for those professionals who are based within the NHS Trusts and have responsibility for supervising and assessing the learners. It was noted the Training Officers are qualified healthcare science professionals. Through clarification, we noted Training Officers were from the appropriate profession and were provided with relevant training and support to perform the role. We were also provided with details of the various opportunities they had to feedback about any issues or concerns they had. Examples included the bi-annual meetings, training courses and the examination boards.
- In addition to the Training Officers, there are also the 'Practice Education Facilitators' who are involved with the delivery of the STP. It was noted this was a regional role and therefore could be used across the different NHS Trusts and professions. It was acknowledged involvement with learners in the practice-based learning environment was not limited to these individuals and that other professionals from the healthcare workforce may also have contribute to the learners training and assessment.
- We noted feedback was gathered from all individuals who were involved with the training and delivery of the STP. This was managed though the Healthcare Science Collaborative and ensured continuous improvement and alignment with professional standards.
- Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.

External examiners –

- Reflecting on the changes to the external examination process for the STP, they previously had multiple MSc programme level External Examiners and a single overall examiner for the STP. To add more scrutiny this process has been redesigned by appointing three External Examiners each focusing on different themes, which has increased capacity and allows for more detailed input.
- The new External Examiners were appointed in early 2023 and came with both industry and academic experience. In their role, they were given access to all materials relating to the Independent Assessment and Clinical Competence (IACC) and produced independent reports, which were submitted to the Ratification Board. The education provider acknowledged the success of this initiative and recognised the importance of External Examiner involvement at this level but this

- process also highlighted the need for amendments to the Terms of Reference for the Examination and Ratification Boards. This approach demonstrated the value of external input.
- Through clarification, we noted all External Examiners were registered Clinical Scientists.
- Visitors were satisfied with the information provided in this section, which demonstrated the education provider was performing well in this area.

Risks identified which may impact on performance: None.

Outstanding issues for follow up: We noted there were changes made to the role of the External Examiner in early 2023. These changes highlighted the need to amend the Terms of Reference for the Examination and Ratification Boards. Visitors recommended these amendments should be considered and reviewed in the next performance review.

Data and reflections

Findings of the assessment panel:

Learner non continuation:

- The education provider confirmed they did not use HESA's method to define non continuation data. There were two main reasons for this. Firstly, the education provider presents non-continuation data at a fixed point in time, which therefore makes it difficult to compare to the previous year's data. Secondly, they do not collect comparable data when learners exit the programme and do not gather destination data.
- During this review, the education provider has been engaging with the HCPC and has committed to work with the HCPC to develop a suitable supply of data. Currently, non-continuation rates are calculated as year on year averages. It is noted the non-continuation rate is above the 3% benchmark and the education provider recognises there is a need for improvement here.
- The visitors were satisfied with the education providers performance in this area and acknowledged they were engaging with the HCPC to develop a regular supply of externally verified data points.

• Outcomes for those who complete programmes:

- The STP Trainee Exit Survey is conducted within a month of the programme completing and has a high response rate. The survey is considered representative of most learners who complete the programme within the expected timeframe. However, the education provider recognises this does not capture all learners as there is no mechanism to track learners who do not complete within the expected timeframe.
- The education provider has compared the STP Trainee Exit Survey to the HESA data. They have noted HESA aggregates professions and measures outcomes 15 months post-graduation, which complicates direct comparison with a single profession like Clinical Scientists.

 The visitors were satisfied with the education providers performance in this area and acknowledged they were engaging with the HCPC to develop a regular supply of data points.

• Learner satisfaction:

- Reflections have been provided on the feedback received through the Trainee Exit Survey (TES), which has a positive average response rate of 70% annually. In 2021, 95% of learners were satisfied with the programme, however there was a slight decrease with this figure in 2022 to 93%. This was a reflection of the impact the Covid-19 pandemic had on learners and the delivery of the programme.
- In addition to this, the data from the NETS was also considered which indicated the majority of learners on the healthcare science programmes rated their experience as 'Good' or 'Outstanding'.
- The visitors were satisfied with the education providers performance in this area and acknowledged they were engaging with the HCPC to develop a regular supply of data points.

Programme level data:

- The data provided captured the status of learners at different stages over a period of six years. The data included details of the number of deferrals, suspensions, fails, sickness and pass rates during this six year period. It was noted how helpful this data was to monitor the effectiveness of the programme.
- The visitors were satisfied with the education providers performance in this area

Proposal for supplying data points to the HCPC: The education provider has confirmed they will continue to work with the HCPC to develop a regular supply of data points. The new updated guidance for establishing data points will be used, as this guidance has been designed to support education providers in this position where data is not captured through the same sources as HEIs due to the nature of their provision.

Risks identified which may impact on performance: None.

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).

Referrals to next scheduled performance review

Capacity of practice-based learning (programme / profession level)

Programme(s) applicable to:

Certificate of completion of Scientist Training Programme (STP)

Summary of issue: Visitors acknowledged the education providers partnership model, which linked learners to placement providers. Through this model they have been able to sustain the availability of practice-based learning, however visitors were concerned how this would be managed in the future with the projected increase in learner numbers. Visitors noted the education provider had highlighted the future expansion of the workforce and the need to increase capacity in practice-based learning would be challenging and recommended this area should be considered and reviewed again during the next performance review.

Resourcing, including financial stability

Programme(s) applicable to:

Certificate of completion of Scientist Training Programme (STP)

Summary of issue: The education provider is currently in the process of reviewing the Independent Assessment of Clinical Competence (IACC) and plan to introduce a streamlined assessment for 2025. Given this is currently in the developmental stages, the progress of this should be reflected on in the next performance review.

External examiners

Programme(s) applicable to:

Certificate of completion of Scientist Training Programme (STP)

Summary of issue: We noted there were changes made to the role of the External Examiner in early 2023. These changes highlighted the need to amend the Terms of Reference for the Examination and Ratification Boards. Visitors recommended these amendments should be reviewed and reflected on in the next performance review.

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 2025-26 academic year
- The issues identified for referral through this review should be carried out in accordance with the details contained in section 5 of this report

Reason for next engagement recommendation

- Internal stakeholder engagement
 - The education provider engages with a range of stakeholders with quality assurance and enhancement in mind. Specific groups engaged by the education provider were learners, service users, practice educators, partner organisations and external examiners.
- External input into quality assurance and enhancement

- The education provider engaged with professional bodies. They considered professional body findings in improving their provision.
- The education provider did not engage with other relevant professional or system regulator(s) (eg NMC, OfS).
- The education provider considers sector and professional development in a structured way.

Data supply

- Through this review, the education provider has not established how they will supply quality and performance data points which are equivalent to those in external supplies available for other organisations. Where data is not regularly supplied, we need to understand risks by engaging with the education provider on a frequent basis (a maximum of once every two years)
- The education provider is willing to work with the HCPC in accordance with our guidance on establishing data points. This data will then be available to be used at their next performance review (2025-26).
- In summary, the reason for the recommendation of a two year monitoring period is:
 - Due to the lack of established data points. As detailed above we shall work with the education provider to develop the required data. This data will then be available to be used at their next performance review (2025-26).
 - The capacity of practice-based learning (programme / profession level), resourcing, including financial stability and external examiners have been referred to the next performance review to be considered, as outlined above in Section 5.

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 2025-26 academic year
- The issues identified for referral through this review should be carried out through the next performance review process.

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

Appendix 1 – summary report

If the education provider does not provide observations, only this summary report (rather than the whole report) will be provided to the Education and Training Committee (Panel) to enable their decision on the next steps for the provider. The lead visitors confirm this is an accurate summary of their recommendation (including their reasons) and any referrals.

Education provider	Case reference	Lead visitors	Review period recommendation	Reason for recommendation	Referrals
The National School of Healthcare Science	CAS-01388- C3C4L2	Beverley Cherie Millar & Natalie Fowler	Two years	In summary, the reason for the recommendation of a two year monitoring period is: • Due to the lack of established data points. As detailed above we shall work with the education provider to develop the required data. This data will then be available to be used at their next performance review (2025-26). • The capacity of practice-based learning (programme / profession level), resourcing, including financial stability and external examiners have been referred to the next performance review to be	 Capacity of practice-based learning (programme / profession level) - referred to next performance review. Resourcing, including financial stability – referred to next performance review. External examiners – referred to next performance review.

		considered, as outlined above in Section 5.	

Appendix 2 – list of open programmes at this institution

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