
Performance review process report

The Academy for Healthcare Science, Review Period 2023-2025

Executive summary

This is a report of the process to review the performance of The Academy for 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
- 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:
 - Partnerships with other organisations – the education provider had initially indicated in their portfolio that they had no partnerships. However, through the quality activity, we established several partnerships the education provider has been working with, including 24 professional bodies in healthcare science and how that has brought about programme improvement.
 - Interprofessional education – the education provider did not submit any reflection in their portfolio for this area. However, through the quality activity, we noted how the learners were able to participate in interprofessional education, for example through effective engagement with multiprofessional working to meet the Standards of Good Scientific Practice.
 - The following are areas of best practice:
 - The visitors noted the positive relationships with government bodies and how these have been helping to shape workforce planning for clinical scientists.
 - The following areas should be referred to another HCPC process for assessment:
 - The education provider is undertaking a review of the shared understanding of one of the requirements for applicants - 'must show equivalent depth and breadth of professional knowledge and skills as the relevant STP curriculum' in 2026/27 academic year. As this is outside of this review period, we have referred to their next performance review.
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- The education provider noted their digitalisation project was due to be completed in May 2026. They also considered the use of AI-driven tools to respond to common queries where answers already exist in published guidance. They noted this would further help to streamline support and reduce repetitive workload. To be able to assess the impact of the changes brought about by the introduction of the digitalisation project and the use of AI-driven tools, we have referred this to their next performance review in the 2027/28 academic year.
 - There have been specific actions taken in response to Lay Assessors' feedback and feedback from learners in relation to service user involvement and a couple of areas for development to be taken forward. To consider the impact of these effectively, we have asked the education provider to reflect on them at their next performance review in 2027/28 academic year.
 - The education provider is reviewing their policies, guidance, and assessment strategies for the programme against the Joint Statement from statutory regulators of health and care professionals on Using Artificial Intelligence (AI) in health and care professional education, starting from summer 2026. They will provide an update on this at the September meeting of their Education, Training and Standards Committee. As this is outside of the review period, we will consider it at their next performance review in 2027/28 academic year.
 - The education provider has listed a number of actions they are taking to address the issues around the inappropriate use of AI by applicants. We will consider the impact of these actions at their next performance review in 2027/28.
 - The provider should next engage with monitoring in two years, the 2027-28 academic year, because although they have performed well across all areas, they have not been able to establish a regular data supply through this performance review. This means we need to engage with them more frequently to manage any associated risks. We will continue to work with the education provider to establish data points should they wish to do so at their next performance review.
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Previous consideration Not applicable

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 Outline next steps / future case work with the provider:

- Subject to the Panel's decision, the provider's next performance review will be in the 2027-28 academic year

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Section 1: About this assessment

About us

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

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

Our standards

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

Our regulatory approach

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

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

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

The performance review process

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

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

Through monitoring, we take assurance in a bespoke and flexible way, meaning that we will assess how an education provider is performing based on what we see, rather than by a one size fits all approach. We take this assurance at the provider level wherever possible, and will delve into programme / profession level detail where we need to.

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

Thematic areas reviewed

We normally focus on the following areas:

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

How we make our decisions

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

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

The assessment panel for this review

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

Colin Jennings	Lead visitor, Clinical Scientist, Medical Physics and Clinical Engineering
Duane Mellor	Lead visitor, Dietitian
Ian Hughes	Service User Expert Advisor
Temilolu Odunaike	Education Quality Officer
Hugh Boothe	Advisory visitor, Biomedical 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 decided to involve an advisory visitor as part of the panel to also provide their professional knowledge and expertise. We considered this would benefit the assessment and is in line with our principles around partner involvement in performance reviews.

Section 2: About the education provider

The education provider context

The education provider currently delivers one HCPC-approved clinical science programme, the Certificate of Equivalence, FT (full time). It is a professional body and has been running HCPC approved programmes since 2012.

The education provider falls under our UK wide 'region'- this includes providers that offer programmes to learners based across the country (e.g. professional bodies certificates, distance learning). The education provider, alongside three other providers in the UK, offer programmes throughout the country, leading to eligibility to apply for registration as a clinical scientist. The AHCS as well as the other three providers - Association of Clinical Scientists (ACS), the National School of Healthcare Science (NSHCS) and the Institute of Biomedical Science (IBMS) are professional bodies which makes them unique in the way they provide education and training.

The Certificate of Equivalence programme is an Accreditation of Prior (Experiential) Learning process that involves a retrospective and comparative assessment of an applicant's education, training, and professional experience. As such, it does not include any formal teaching or learning. Applicants must be in relevant employment, typically within the NHS, and demonstrate that they are working at the level of a clinical scientist, aligned to Level 7 of the Healthcare Science Career Framework.

To be admitted to the programme, applicants must show they are operating in complex scientific and clinical roles. The assessment process is designed to ensure comparability with those who have completed the National School of Healthcare Science (NSHCS) Scientist Training Programme (STP).

Assessment is conducted in two stages: a portfolio review followed by an interview. Applicants must demonstrate that they meet the standards in Good Scientific Practice (GSP), which are mapped to HCPC professional standards, and show equivalence in knowledge, skills, and behaviours to STP graduates.

Outcomes are moderated and formally ratified by the education provider's Education, Training and Standards Committee.

The education provider engaged with the performance review process for the second time in the 2023-24 academic year. At the meeting in September 2024, the Education and Training Committee agreed that there was sufficient evidence that the education provider was performing well across all themes. However, due to the lack of established data points, the education provider received a two-year review period.

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	2012

Institution performance data

Data is embedded into how we understand performance and risk. We capture data points in relation to provider performance, from a range of sources. We compare provider data points to benchmarks and use this information to inform our risk based decisions about the approval and ongoing approval of institutions and programmes¹.

Data Point	Bench-mark	Value	Date of data point	Commentary
Learner number capacity	500	520	27/02/2026	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 their last submission.

¹ An explanation of the data we use, and how we use this data, is available [here](#)

				The education provider is recruiting learners broadly at the benchmark.
Learner non-continuation	7%	N/A	Null	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, and they decided not to establish this data point through the submission.
Outcomes for those who complete programmes	92%	N/A	Null	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, and they decided not to establish this data point through the submission.
Learner satisfaction	N/A	N/A	Null	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, and they decided not to establish this data point through the submission.
HCPC performance review cycle length	N/A	Two years	2023/24	The education provider was previously given a two-year performance review period at their last performance review. We were satisfied that they were performing well across all areas. However, due to lack of established data

				supply, they could not be given more than two years.
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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 – partnerships with other organisations

Area for further exploration: In this section, the education provider noted they had no formal partnerships during the review period. The visitors considered the education provider could have possible links to professional bodies and the funding organisations which they could reflect on. Although the programme is based on retrospective assessment, we expect the education provider to consider how partnerships support the sustainability of their work. Therefore, the visitors requested reflection on any relationships that have supported the programme during the review period.

Quality activities agreed to explore theme further: We decided to explore this through email clarification / narrative as we considered this approach appropriate and proportionate to address the issue raised by the visitors.

Outcomes of exploration: In their response, the education provider reflected on the collaborations they undertook with other organisations and how these impacted their programme. At a national level, the education provider worked in collaboration with the Department of Health and Social Care, the Scottish Government, the Welsh Government, the Northern Ireland Health system, and wider partners to support and promote professional standards, workforce development, and recognition of the UK

Healthcare Science workforce. These partnerships ensured that healthcare science practice aligned with nationally agreed standards, strengthening the credibility and value of the programme across all four nations.

The education provider also led and contributed to key projects and research initiatives, drawing on its leadership and academic expertise to enhance scientific capability in diagnostics and patient care. They played an advisory role in policy development, decision-making, and programme accreditation. Within the Certificate of Equivalence (CoE), these collaborations support programme promotion, inform workforce needs, and enabled applicants to gather relevant portfolio evidence. They also ensured the programme remained accessible across the UK, while keeping standards, governance, and assessment practices aligned with the current healthcare context.

The education provider listed the various organisations they have collaborated with. These include:

- Healthcare science professional bodies
- Healthcare funding bodies
- National School of Healthcare Science
- Other organisations: UKAS, Patient Safety Learning

In terms of their work with professional bodies for example, the education provider noted they work with 24 professional bodies in healthcare science either directly or through the Academy's Professional Bodies Council. Some of the ways by which the professional bodies have provided support to enhance the programme include:

- promotion of the route to members
- suggesting and screening assessors
- providing professional body perspective in the development of the route, reviewing the Standards of Good Scientific Practice and the interview question bank, providing developmental workshops for those considering and on those on the route.
- help with horizon scanning by providing strategic insight on healthcare policy, scientific leadership, and emerging issues affecting the Healthcare Science workforce

The visitors were satisfied with the response noting the range of examples of collaboration provided. It was clear that the education provider worked directly with other organisations and provided strategic insights both at professional body and at government levels. Therefore, the visitors determined that the quality activity had adequately addressed their concerns.

Quality theme 2 – interprofessional education (IPE)

Area for further exploration: In this section, the education provider reiterated that the programme is a comparative and retrospective assessment of the applicant's education, training and experience and therefore there is no teaching and learning. As such, they did not submit any reflection in this area. We understood the education provider's reasoning. However, as we require all education providers to continue to demonstrate how they continue to meet the HCPC standard around interprofessional learning, we requested the education provider's reflection on how IPE is captured

within the learners' portfolio. In their reflections, we expected to see how they ensure learners recognise they are undertaking IPE, to inform their future practice and how the education provider evaluates the impact of these interactions on learner development and readiness for collaborative practice.

Quality activities agreed to explore theme further: We decided to explore this through email clarification / narrative and as we considered this approach appropriate and proportionate to address the issue raised by the visitors.

Outcomes of exploration: In their response, the education provider reflected on applicants' demonstration of effective engagement in multiprofessional working to meet the Standards of Good Scientific Practice, within their portfolio. Applicants collaborated with colleagues and representatives from other organisations through multidisciplinary teamwork and inter-agency working to deliver safe, effective, and efficient patient care. To support this, applicants were provided with guidance on appropriate evidence, such as anonymised multidisciplinary team (MDT) meeting notes, case-based discussions led within MDT settings, multi-source feedback, and witness statements.

Assessors were explicitly instructed to ensure that evidence of MDT working was clearly demonstrated within the portfolio. Additionally, the programme's Question Bank included a specific question on MDT working which enabled assessors to further explore an applicant's experience and understanding in this area during assessment if needed. This ensured that collaborative practice was not only documented but also critically evaluated.

Employment in environments that enable regular interaction with other healthcare professionals also supported collaborative practice. The Academy's Leadership Faculty offered programmes that provided interprofessional learning opportunities for those undertaking or preparing for the programme. The education provider reflected how these initiatives helped to strengthen understanding and application of multidisciplinary working within the healthcare science workforce.

The visitors were satisfied with the response noting the requirement for MDT approach and how the evidence of this was required within submitted portfolio. Therefore, the visitors were reassured that there continues to be interprofessional education opportunities for learners on the programme and that this helps to inform their future practice. Therefore, the visitors determined that the quality activity had adequately addressed their concerns in this area,

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:

- **Admissions procedures –**

- Admissions information including eligibility criteria is provided to applicants via the Programme Handbook. The education provider also ensures openness and transparency by providing applicants with information about other routes leading to HCPC registration.
- There is a complex mix of professions and self-funded and funded applicants. Introduction of a digital system has been a major step forward to help manage this, as well as the challenges of assessing equivalence. The digitalisation process now includes an employer confirmation process which all applicants must go through. This means a formal line manager (or nominee) sign-off is required on each complete portfolio for it to be accepted. The digitalisation process, in addition to the enhanced pre-application process, has also helped to ensure applicants are applying at the appropriate time.
- In response to a small number of queries from applicants and discussions with assessors, the education provider is planning to undertake a small-scale review of the shared understanding of the requirement. This is in relation to the requirement that applicants *‘must show equivalent depth and breadth of professional knowledge and skills as the relevant STP curriculum’* as outlined in the STP CoE Programme Handbook. We understood the review will take place in the 2026/27 academic year, commencing with an initial discussion at the September 2026 meeting of their Education, Training and Standards Committee, where the proposed scope and approach of the review will be presented for approval. We understood the aim of the review is to help ensure a clear and consistent interpretation of the term *‘equivalent’* and how equivalence is evidenced within submissions. This in turn would prevent any unintended drift in threshold expectations when determining whether applicants have met the required standards.
- As the review is taking place outside of the review period, we will expect the education provider to reflect on this at their next performance review in the 2027/28 academic year.
- The visitors were satisfied that the education provider continues to ensure underpinning policies were complied with. The visitors also noted the education provider is effectively monitoring their admissions process including innovations.
- Therefore, the visitors determined the education provider has continued to perform well in this area.

- **Resourcing, including financial stability –**

- The education provider works with NHS England, NHS Scotland, and Health Education and Improvement Wales (HEIW) to promote any funding opportunities that are available to applicants. They are a not-for-profit, self-funded organisation. Resource allocation for their programme is closely matched to available funds, but priority is placed on providing a robust assessment process.
- The education provider reflected on the challenges they have had since the merging of Health Education England (HEE) into NHS

England from April 2023. They noted there had been restrictions in funding since then. However, with their close working relationship with the Chief Scientific Officer in England who has oversight of healthcare science education and training, they continue to discuss funding opportunities for the programme.

- The visitors noted the education provider's financial model which is based on a number of income streams and are confident this makes them financially stable. The Academy's Management Board reviews the sustainability of workstreams regularly and can make difficult decisions should they be required.
- Digitalisation has brought about greater efficiencies in the process for applicants, assessors and the administrative function. The visitors noted the successful pilot and the introduction of a portfolio template for applicants. The visitors understood the template has been positively received by assessors and moderators, who reported that it supports clearer and more efficient decision-making. In particular, the visitors recognised that the template has enabled the assessors to more easily determine whether portfolios meet threshold standards and facilitate a smoother internal quality assurance process.
- The visitors were satisfied with the education provider's reflection, noting how it covered the necessary issues linked to staffing the assessments and funding from healthcare commissioners. They also considered how digitalisation has provided potential efficiencies.
- Therefore, the visitors determined the education provider has continued to perform well in this area.
- **Partnerships with other organisations –**
 - The education provider noted that all contract-related matters are managed through their executive structures and reported to the Regulation Board, which maintains oversight of issues relating to the programme, including the progression of funded applicants. This ensures appropriate governance and monitoring of programme delivery.
 - The education provider collaborates with Health Education England, NHS Education for Scotland, and HEIW to promote available funding opportunities. Standard contract management and review processes are in place and are overseen by the Chief Executive Officer (CEO) and Registrar.
 - The education provider noted they had no formal partnerships during the review period. This was explored further through [quality theme 1](#), where we established the various partnerships the education provider had during the review period and how they had worked with them across the review period.
 - The visitors were satisfied with the information provided through the quality activity and determined that the education provider has continued to perform well in this area.
- **Staff development –**
 - The education provider has a small Equivalence Team responsible for managing and administering the programme, including overseeing the quality assurance process. Assessments at the portfolio and interview stages are conducted by specialist and professional assessors or

moderators, with interviews chaired by a lay assessor. All assessors work under Academy contracts and must adhere to the education provider's Code of Conduct. Upon appointment, assessors receive training and are required to attend regular refresher sessions, with participation monitored and additional one-to-one support provided where needed. Guidance materials are also available through a secure, password-protected assessor webpage.

- Most specialist assessors are practising clinical scientists who are registered professionals and must maintain their expertise through continuing professional development, which is monitored by their employers. To ensure current knowledge and skills are maintained, retired specialists may act as assessors for a maximum of two years post-retirement unless they remain active in clinical or academic roles. This approach has helped to ensure that all assessors involved in the programme maintain up-to-date professional competence.
- The education provider reflected that prioritising the assessor training has led to a reduction in the resources available to undertake other developmental work. However, the team is exploring the use of webinar recordings as a preparatory resource for assessors to review before attending question-and-answer sessions designed to check knowledge and understanding. They also aim to develop additional online resources to further assess and support assessor learning.
- The visitors noted there is a clear approach to using only HCPC registered assessors and an acknowledgment of the need to develop training.
- Overall, the visitors were satisfied with the education provider's reflection and determined that they have continued to perform well in this area.

- **Academic quality –**

- The Ratification Process for Equivalence Applications ensures regular monitoring of the Equivalence Process, including review of all assessment forms by the Registrar (or nominee) and of recommended outcomes by the Chair of the Regulation Board. Additional oversight is provided through quarterly meetings of the Regulation Board and Management Board, which support consistent programme monitoring.
- The education provider also evaluates the programme through an Annual Quality Review, producing a report that is shared with the External Examiner. The External Examiner reviews this report, the programme handbook and guidance materials, and a sample of Equivalence applications. Finally, the Education, Training and Standards Committee considers these reviews and the education provider's response before recommending approval of the report and confirming the programme's standing to the Regulation Board.
- In the 2023/24 and 2024/25 academic years, the education provider reflected on how they focused on:
 - mapping of HCPC Standards of Conduct, Performance and Ethics;
 - the review and update of Good Scientific Practice (Professional Standards of Behaviour and Practice for Healthcare Scientists)
 - the piloting and rollout of the revised portfolio template, and

- the restructuring of the administrative function
- We understand these have helped to ensure academic quality is maintained. They added that there has been a positive impact regarding the consistency of assessment and assessors have found it easier to assess the content and compare across applications. They noted this has also helped to ensure threshold standards continue to be met.
- The education provider continues to gather more detailed feedback from a broad range of applicants and assessors with their aim that further data analysis will help to determine any noticeable changes in the pattern of assessment outcomes.
- The visitors were satisfied that there is clear reflection on how academic quality is monitored and reviewed.
- Therefore, the visitors determined that the education provider has continued to perform well in this area.
- **Quality of practice-based learning –**
 - The education provider reiterated that their programme is an Accreditation of Prior (Experiential) Learning process. It is a comparative and retrospective assessment of the applicant's education, training and experience therefore there is no teaching and learning. This means there is no practice-based learning on the programme.
 - Therefore, the visitors determined that the education provider has continued to perform well in this area.
- **Learner support –**
 - Learner support is focused on helping individuals navigate the application process, develop their portfolios, and meet assessment requirements. This is delivered through a variety of approaches, including written guidance, practical tips from previous applicants, and drop-in sessions offered in small groups and in partnership with professional bodies. The effectiveness of these resources and support mechanisms is regularly evaluated. Monitoring methods include informal feedback, formal large-scale and project-specific surveys, feedback from drop-in sessions, and analysis of programme completion times.
 - The education provider reflected on how they expected the digitalisation of the programme, including the further development of the application and assessment platform to create efficiencies and reduce pressure on staff resources. They also considered the use of AI-driven tools to respond to common queries where answers already exist in published guidance. They noted this would further help to streamline support and reduce repetitive workload.
 - We understood the digitalisation project was due to be completed in May 2026, and applicant and assessor materials were being developed to support roll out of the developments. The education provider noted they will continue to monitor the impact of the changes.
 - The visitors noted the effective use of the digital platform to help manage the increase in numbers of applicants. The visitors were satisfied with the guidance provided on the application process, for example the tips and drop-in sessions. They also noted effectiveness is

monitored through feedback and that more guidance is provided through the portfolio templates to further support learners.

- Therefore, the visitors determined the education provider has continued to perform well in this area. To be able to assess the impact of the changes brought about by the introduction of the digitalisation project, we will refer this to the education provider's next scheduled performance review in the 2027/28 academic year.

- **Interprofessional education –**

- The education provider noted in their baseline information that all those who apply for the programme are expected to be employed within an appropriate environment which allows interaction with other healthcare professionals. In their portfolio, they noted there is no interprofessional education on the programme given that there is no teaching or learning involved.
- However, through [quality theme 2](#), we established that there continues to be interprofessional education opportunities for learners on the programme and that this helps to inform their future practice.
- Through the quality activity, the visitors were able to determine that the education provider has continued to perform well in this area.

- **Service users and carers –**

- Service users and carers are involved as lay representatives in:
 - Chairing interview assessment panels
 - As part of the Education, Training and Standards Committee
 - Regulation Board
 - Regular meetings with the programme lead
- Service users (lay assessors) are on contracts which require them to comply with underpinning policies including a code of conduct. Compliance with the policies is monitored by the Programme Lead and the Chair of the Education, Training and Standards Committee (ETSC).
- To support the expanded group of Lay Assessors which took place in 2023, the education provider established a new Lay Liaison role which has helped to provide greater support for all assessors on a one-to-one basis and through training as well as the Lay Assessor forum.
- Lay Assessors were encouraged to give feedback through the Lay Assessor forum. For example, feedback has been given stating that greater emphasis should be placed on ensuring the patient perspective is clearly considered throughout both the portfolio and interview stages. They also added that clearer guidance should be provided so line managers are aware of applicants' intentions, enabling better preparation for resource management and support (such as shadowing). This has been strengthened through the digitalisation process.
- Specific actions have been taken in response to Lay Assessors' feedback and feedback from learners in relation to service user involvement. Some of the actions include:
 - development, pilot and roll out of the portfolio template
 - enhancement to the training of lay assessors
 - increase in the number of assessors
 - applicant Frequently Asked Questions have been updated
- There are also a couple of areas for development to be taken forward:

- developing a bank of mentors
 - speciality specific guidance regarding types of evidence
- We will review these through their next performance review scheduled for 2027/28 academic year.
- The visitors were satisfied that Lay Assessors were contracted by the education provider, followed policies and provided feedback. The visitors were also satisfied that the education provider has used a logical and pragmatic approach to include Lay Assessors and noted their involvement in the Regulation Board.
- Therefore, the visitors determined that the education provider has continued to perform well in this area.
- **Equality, diversity and inclusion –**
 - The education provider has an Equality and Diversity policy which is reviewed regularly. The Assessor Code of Conduct is informed by the principles of the education provider's Equality and Diversity policy and is periodically reviewed to ensure appropriate alignment.
 - Since July 2020, data on protected characteristics has been collected annually and compared with national benchmarks, with findings discussed at the Education, Training and Standards Committee. Enhancements to the education provider's platform have enabled analysis of outcomes against protected characteristics, where provided. This analysis is included in the programme's Annual Quality Review Report and is reviewed by the Regulation Board.
 - Lay Assessors and lay members are required to submit a copy of the certificate of completion when online Equality, Diversity, and Inclusion (EDI) modules, and unconscious bias training are completed. The education provider keeps an attendance list for confirmation of GDPR training.
 - Each year, the Equivalence Team analyses applications to the programme and outcomes, including equality and diversity monitoring data. The visitors noted that in 2023/24 the Education, Training and Standards Committee (ETSC) trialled reviewing the EDI data on a six-monthly basis, but this was discontinued due to minimal changes and small sample sizes, leading to a return to annual analysis. We understood that it was also agreed that the Quality Review Report would be produced every two years to align with the HCPC's performance review, with interim data updates provided to the Education, Training and Standards Committee. Findings showed that outcome differences across protected characteristics remained small, with no consistent patterns or evidence of unconscious bias.
 - The education provider reflected on challenges around limited workforce data across the four nations to enable meaningful analysis of the profile of the healthcare science workforce to act as a benchmark.
 - The education provider noted their access to the HCPC EDI data 2023/24 and how this has been a significant development, however, we understood UK wide workforce data is needed to have an accurate assessment to determine whether the programme disadvantages or prevents certain groups of applicants.
 - The education provider noted that the analysis of the assessment outcomes by protected characteristics, and the increase in the

proportion of applicants providing usable data suggest that the work undertaken by the Equivalence Team to strengthen applicant guidance and the information on the education provider's platform has been beneficial.

- The visitors were satisfied that the education provider continues to ensure they are complying with underpinning EDI policies and that this is stressed during assessor training. The visitors were satisfied with the education provider's reflection around how they have used HCPC EDI data for their own analysis.
- The visitors determined the education provider's reflection provided a sensible approach to use growing data set to seek to improve how this is monitored and inform changes going forward.
- Therefore, the visitors determined the education provider has continued to perform well in this area.
- **Horizon scanning –**
 - The education provider reflected on a couple of challenges within the sector. They noted that at both government and employer strategic levels, the healthcare science workforce is not consistently recognised as a distinct profession. To provide any meaningful horizon scanning, they noted an analysis of the strategic intent in relation to the wider longer-term objects, goals and vision of the UK Government, is needed. We understood this provides the broader policy context which the NHS and the healthcare science workforce functions.
 - The education provider suggested that close working with the Chief Scientific Officers would provide greater clarity at Government policy level. They also noted that closer working with the Professional Bodies Council and the Equivalence Team has helped to broaden the data set on which the horizon scanning is based.
 - Another challenge presented was the rapid and complex developments across and within the four countries, healthcare science divisions and modalities. Horizon scanning has drawn on large and evolving datasets, supported internally by expertise from the Chief Executive Officer (CEO), Management Board, Professional Bodies Council, and President. This was further strengthened by close collaboration with external stakeholders, including Chief Scientific Officers (CSOs)' offices and national education bodies across the four countries.
 - The visitors noted how the education provider is raising the profile of healthcare science workforce at Government level through the CEO and close working relationships with the CSO offices and how this has helped to monitor developments across the four nations.
 - The visitors, therefore, determined that the education provider has continued to perform well in this area.

Risks identified which may impact on performance: None.

Outstanding issues for follow up:

- The education provider is undertaking a review of the shared understanding of one of the requirements for applicants - *'must show equivalent depth and breadth of professional knowledge and skills as*

the relevant STP curriculum” in 2026/27 academic year. As this is outside of this review period, we have referred to their next performance review.

- The education provider noted their digitalisation project was due to be completed in May 2026. To be able to assess the impact of the changes brought about by the introduction of the digitalisation project, we have referred this to their next performance review.
- There have been specific actions taken in response to Lay Assessors’ feedback and feedback from learners in relation to service user involvement and a couple of areas for development to be taken forward. To consider the impact of these effectively, we have asked the education provider to reflect on them at their next performance review.

Quality theme: Thematic reflection

Findings of the assessment panel:

- **Embedding the revised HCPC standards of conduct, performance and ethics across professions –**
 - **How the provider made the changes** - the education provider reflected that since the approval of their programme in 2014; they have used the standards in Good Scientific Practice (GSP) as the basis of the assessment of the portfolio and question bank for the interview to determine equivalence. They noted the standards had previously been mapped to HCPC’s Standards of Conduct, Performance and Ethics annually (via the old HCPC annual monitoring audits) to confirm continued alignment.
 - The education provider noted that in March 2024, the standards in GSP were mapped against the revised HCPC standards of conduct, performance and ethics, with overall alignment confirmed by their Education, Training and Standards Committee in June 2024. A task and finish group was then established to undertake a more detailed review, including representatives from key stakeholder groups and input from the External Examiner. Their findings, presented in September 2024, confirmed that overall, all standards in the GSP aligned with the HCPC’s revised standards of conduct, performance and ethics.
 - **Equality diversity and inclusion** – the mapping exercise showed how the education provider’s GSP standards were linked to HCPC’s revised standards relating to equality, diversity and inclusion. The specific GSP standards covered the following topics:
 - Patient-centred care
 - Communication
 - Clinical activity
 - Clinical investigation and therapeutics
 - **Communication** – the mapping exercise showed how the education provider’s GSP standards were linked to HCPC’s revised standards relating to communication. The specific GSP standards covered the following topics:
 - Patient-centred care
 - Communication

- Professional responsibilities
 - Working with others
 - Clinical activity
- **Duty of Candour** – the mapping exercise showed how the education provider's GSP standards were linked to HCPC's revised standards relating to duty of candour. The specific GSP standards covered the following topics:
 - Patient-centred care
 - Scope of practice
 - Professional responsibilities
 - Working with others
 - Data and reporting
 - Technical proficiency
 - Leading others
- **Upskilling and training responsibilities** – the mapping exercise showed how the education provider's GSP standards were linked to HCPC's revised standards relating to upskilling and training responsibilities. The specific GSP standards covered the following topics:
 - Patient-centred care
 - Professional responsibilities
 - Scope of Practice
 - Communication
 - Working with others
 - Data and reporting
 - Technical proficiency
 - Clinical investigation and therapeutics
 - Developing of self
 - Leading others
- **Managing existing health conditions and disabilities in the workplace** – the mapping exercise showed how the education provider's GSP standards were linked to HCPC's revised standards relating to managing existing health conditions and disabilities in the workplace. The specific GSP standards covered the following areas:
 - Professional responsibilities
 - Working with others
 - Technical proficiency
 - Quality assurance
- **Sustainability** – the mapping exercise showed how the education provider's Good Scientific Practice (GSP) standards were linked to HCPC's revised standards relating to sustainability. The specific GSP standards covered the following areas:
 - Working with others
 - Clinical investigation and therapeutics
- **Guidance on social media** – the mapping exercise showed how the education provider's GSP standards were linked to HCPC's revised standards relating to equality, diversity and inclusion. The specific GSP standards covered the following areas:
 - Patient-centred care
 - Communication

- Professional responsibilities
- The visitors were satisfied that there was consideration of how the GSP and HCPC revised standards are linked as part of review process. They noted all the revised standards were clearly linked and included in the GSP standards.
- Therefore, the visitors were satisfied that the education provider has performed well in this area.
- **Impact of workforce planning –**
 - In their reflection, the education provider emphasised the need for science and innovation to be led by scientists within the healthcare workforce. They identified the lack of specific reference to the healthcare science workforce in the workforce plans for England, Scotland and Wales despite the strategic policy documents and frameworks in place, as a challenge. The education provider noted how this has reduced the profession's ability to speak with one clear voice and contributed to employers' limited understanding of the role and status of healthcare scientists, as well as the need for statutory registration across all modalities of healthcare science.
 - To address this, the education provider has continued to lobby government and provide a clear, consistent narrative on the profession's value and the need for statutory registration across all levels of the healthcare science workforce.
 - The education provider also noted how they have collaborated with the Professional Bodies Council, NHS employers, and other stakeholders to reinforce the importance of clinical scientist registration and the role of training programmes in achieving it. They are also addressing the growing challenge posed by emerging and evolving fields - such as Toxicology, Pathogen Genomics Bioinformatics, and Applied Epidemiology - where current pathways are leading to a largely unregistered workforce and associated risks. They intend to explore expanding Equivalence benchmarks to define competencies for these specialties in partnership with professional bodies, the Academy's Professional Bodies Council, and the National School of Healthcare Science.
 - The education provider noted the restructure of their administrative function and the digitalisation of the application and assessment process, as developments. They will continue to monitor the impact of the restructure and the roll out of the digitalisation process by collating feedback from applicants and assessors.
 - Their ability to support the development of healthcare science specific frameworks has been described as a success and they will continue to actively engage with the relevant government agencies and NHS statutory bodies for healthcare science workforce planning and education.
 - The visitor noted the positive relationships with government bodies and how these have been helping to shape workforce planning for clinical scientists. They considered this good practice. The visitors also noted how the new specialties are being developed with potential for increased numbers applying to the programme.

- The visitors considered how the close working with professional bodies has helped to develop suitable competencies and find suitable assessors.
- Therefore, the visitors determined the education provider has continued to perform well in this area.
- **Use of technology: Changing learning, teaching and assessment methods –**
 - The education provider has an online platform which supports their core processes. This system enables applicants to submit applications and portfolios, assessors to review materials and complete assessments, and supports the moderation process. It also facilitates interview documentation and includes an audit function to track user activity and administrative decisions, while allowing analysis of applicant, assessor, and outcome data.
 - The education provider continues to draw on developments in the higher education sector to inform its approach to digital tools and innovation. An organisational artificial intelligence (AI) policy has been introduced following discussion at the Education, Training and Standards Committee, with updated guidance reflecting HCPC (April 2024) guidance and higher education providers. This includes consideration of generative AI, recognising not only risks such as plagiarism but also the potential opportunities such technologies present.
 - To strengthen oversight, the Equivalence Team will be reviewing policies, guidance, and assessment strategies for the programme against the Joint Statement from statutory regulators of health and care professionals on Using Artificial Intelligence (AI) in health and care professional education starting from summer 2026. They will provide an update on this at the September meeting of their Education, Training and Standards Committee. As this is outside of the review period, we will consider at their next performance review in 2027/28 academic year.
 - Additionally, targeted training has been introduced for assessors to support identification of AI-generated content, while applicant guidance places greater emphasis on reflective, personal portfolio submissions. Interviews are now recorded to provide an audit trail and enable review where concerns arise about inappropriate AI use. This training for assessors was implemented in the 2024/25 academic year following the education provider's publication on their Use of Generative Artificial Intelligence in AHCS Equivalence (AI policy).
 - Further developments include exploring integration of AI-checking tools, such as Turnitin or Inspira, as part of an ongoing digitalisation project.
 - The education provider noted specific actions for them to undertake to address issues around the inappropriate use of AI by applicants. These include:
 - The proposed new employer confirmation element of the digitalisation project to include a statement by line manager (or nominee) regarding the AI and the need to acknowledge where and how it has been used. The declaration that the applicant

needs to complete will also make reference to the use of AI and its acknowledgement where used. This action was completed in June 2026.

- Consideration of the introduction of AI detecting software that can link to the education provider's platform, although there are licensing and developments costs attached. Further information was received which showed that in May 2026, system developers confirmed that the integration of AI-detection software with the education provider's platform was not feasible.
- Continue to seek learning from the approach being taken by higher education providers and other assessment organisations. This is ongoing.
- Gain a better understanding of employer guidance in respect of the use of AI to ensure that the programme guidance is clear. We understood there is currently no capacity within the team to undertake this piece of work but would review when capacity allows.
- Extend the Frequently Asked Questions to include questions around the use of generative AI and signposting to the institutional policy. The education provider noted this would be undertaken as part of their next scheduled review.
- The visitors were satisfied that there is a clear approach to managing risks linked to AI and that digitalisation has helped the education provider to be more effective. The visitors noted the online system for applications and how AI policy is embedded in processes. They also noted the extra training for assessors on the use of AI.
- Therefore, the visitors determined the education provider has continued to perform well in this area but as noted above, we will consider the outcome of their review of policies, guidance, and assessment strategies as well as the in 2027/28. In addition, we will consider address the actions taken to address the issues around the inappropriate use of AI by applicants at their next performance review in 2027/28.
- **Apprenticeships in England –**
 - The education provider's only programme is an Accreditation of Prior (Experiential) Learning process. It is a comparative and retrospective assessment of the applicant's education, training and experience therefore there is no teaching and learning. They are not currently planning to deliver an apprenticeship programme.
 - There is no impact of the STP on degree apprenticeship programmes. However, the education provider is mindful of the Clinical Scientist degree Apprenticeship Standard when undertaking any review of the standards in Good Scientific Practice.
 - Based on this model of provision, the visitors determined that this area is not applicable.

Risks identified which may impact on performance: None.

Outstanding issues for follow up:

- The education provider is reviewing their policies, guidance, and assessment strategies for the programme against the Joint Statement from statutory regulators of health and care professionals on Using Artificial Intelligence (AI) in health and care professional education starting from summer 2026. They will provide an update on this at the September meeting of their Education, Training and Standards Committee. As this is outside of the review period, we will consider at their next performance review in 2027/28 academic year.
- Additionally, the education provider has listed a number of actions they are taking to address the issues around the inappropriate use of AI by applicants. We will consider the impact of these actions at their next performance review in 2027/28.

Areas of good and best practice identified through this review: The visitor noted the positive relationships with government bodies and how these have been helping to shape workforce planning for clinical scientists. They considered this good practice.

Quality theme: Sector body assessment reflection

Findings of the assessment panel:

- **Other professional regulators / professional bodies –**
 - The education provider stated that because their programme does not involve any teaching or learning, it is not subject to review by other regulators or professional bodies. However, they have a Register (Healthcare Science Practitioner Register) which is accredited by the Professional Standards Authority (PSA), and any learning from PSA reviews is shared with their Equivalence Team.
 - The education provider reflected that their Professional Bodies Council offers strategic insight into healthcare policy, scientific leadership, and emerging workforce challenges. These perspectives have informed the ongoing development and refinement of Equivalence processes, including updates to Good Scientific Practice (2025) and enhancements to the interview question bank.
 - The visitors were satisfied with the relationship between the education provider and the PSA and how this has continued to impact the programme positively.
 - Therefore, the visitors determined the education provider has performed well in this area.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Quality theme: Profession specific reflection

Findings of the assessment panel:

- **Curriculum development –**
 - Again, the education provider noted that this area is not applicable to them given that their programme is a comparative and retrospective

assessment of an applicant's education, training and experience and therefore has no teaching and learning element. They noted however, that similar to how they mapped the standards in the GSP to the revised SOPs at their last performance review, they have also mapped the standards within the GSP to the HCPC revised Standards of Conduct, Ethics and Performance. Details of this have been provided in the appropriate section above.

- The education provider went on to note how they maintained currency of the standards in Good Scientific Practice through:
 - Resourcing
 - Other professional regulators / professional bodies
 - Curriculum Development
 - External Examiner
 - Embedding the revised HCPC standards of conduct, performance and ethics across professions
- Many of their assessors were also actively involved with the assessment of Clinical Scientist competence through the following roles and these have supported curriculum development:
 - Assessment of competencies within employing organisation or training Centres
 - Assessment and quality assurance activities within higher education institutions.
- As part of both initial and ongoing refresher training, assessors were required to review the current curriculum and associated learning outcomes. This ensured assessments remain aligned with the competencies required for the Certificate of Equivalence and that applicants' evidence is appropriately mapped to the relevant learning outcomes.
- The visitors were satisfied with this reflection, noting that as an assessor of prior learning this area is not relevant.
- Therefore, the visitors determined the education provider continues to perform well in this area.
- **Capacity of practice-based learning (programme / profession level) –**
 - Because the programme is a comparative and retrospective assessment of the applicant's education, training and experience there is no teaching and learning. As such there is no practice-based learning and the visitors are satisfied that this area is not applicable.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Quality theme: Stakeholder feedback and actions

Findings of the assessment panel:

- **Strategic approach to feedback –**
 - The education provider noted who their key stakeholders are – applicants (learners), assessors, the healthcare science professional bodies, service users and carers, the offices of the Chief Scientific Officers (or equivalent) across the four UK countries and other national

education bodies. They also noted several ways by which they gather feedback from these stakeholder groups. Some of these include:

- Learners – through surveys, regular meetings of the Applicant Reference Group and through specific pilot projects, for example the portfolio template pilot project and rollout
 - Lay assessors – lay assessor forums, assessor surveys
 - Specialist assessors – assessor training events, assessor surveys
 - Professional bodies – through the education provider's Professional Bodies Council – both by presenting at meetings, and seeking specific feedback on issues
 - Service users and carers – through their lay representatives on Academy Committees, and lay assessors,
 - Consultations, for example the consultation on Good Scientific Practice
 - The Offices of the Chief Scientific Officer – the education provider's CEO meets regularly with the individual CSOs and collectively.
- The education provider reflected on resourcing challenges due to their small team size. We understood this has impacted on progressing actions arising from the feedback received. They noted their Equivalence Team continues to progress actions when resources allow.
 - In terms of successes, the education provider reflected on how specific projects have benefitted from feedback, noting how utilising feedback from stakeholders has strengthened projects, the approach taken, and the final product. For example, they noted the digitalisation project also benefited from feedback from applicants and assessors in relation to the programme.
 - As noted earlier in this report, the education provider intends to evaluate the impact of the changes made once the digitalisation project has been completed.
 - The visitors were satisfied with the education provider's reflection noting the several ways by which they gather feedback and the challenges associated with having a small team.
 - Therefore, the visitors determined that the education provider has continued to perform well in this area.
- **Learners –**
 - Feedback was gathered from applicants through the applicant survey, the regular meetings of the Applicant Reference Group and through specific pilot projects, for example the portfolio template pilot project and rollout. The education provider noted their next applicant survey will take place towards the end of 2026.
 - The education provider reflected on two learner surveys that were conducted in 2021/22 academic year, but action plans were considered during the last review period. The survey was for learners going through the programme at the time and those who had recently completed the process since September 2021. The outcomes of the survey and the action plan were considered by the education provider's

Education, Training and Standards Committee at their meeting in November 2023.

- The survey results showed that, overall, survey responses were positive, although a small number of current learners at the time felt the guidance materials were not helpful in preparing them for interviews. For example, 64% of learners who completed the survey, found the materials helpful or very helpful. The most common issues raised were used to develop an action plan, which was reviewed and endorsed by the Applicant Reference Group in January 2024. The reflection showed that analysis by disability and ethnicity showed no significant differences in response patterns, although some disability-related feedback has informed ongoing improvements.
- While the planned 2025 applicant surveys were postponed until May 2026 to assess the impact of the new portfolio template and digitalisation project, feedback has continued to be gathered through the Applicant Reference Group. To ensure all learners have the opportunity to contribute, the education provider has initiated an online survey in May 2026 with the Applicant Reference Group and assessors. We understood the development of the 2026/27 surveys and comparative analysis is underway, with draft surveys currently being prepared. In addition, the digitisation project includes a mandatory end-of-programme evaluation form within the assessment platform, ensuring more consistent and regular applicant feedback before outcomes are released.
- The visitors noted that the survey covers both those in the process and those recently completing and considered this good practice. They also noted the results have been summarised, discussed, and an action plan drawn up and changes made. The changes have also been assessed by both learners and an assessor to ensure their effectiveness.
- The visitors were satisfied that the education provider continues to act on feedback from learners.
- Therefore, the visitors determined the education provider has continued to perform well in this area.
- **Practice educators –**
 - As the programme is an assessment of applicants' prior learning and experience, practice educators are not involved and as such there is no feedback from them.
 - The visitors were satisfied and determined this is not applicable.
- **External examiners –**
 - In 2023/24, the External Examiner reported that they felt well prepared for their role, with sufficient access to information for selecting portfolio samples. They received initial one-to-one training and annual meetings with a senior Equivalence Team member to review requirements and process updates. Their report was positive, confirming assessments were rigorous, fair, and aligned with current guidance. The External Examiner also praised the use of social media for communication and welcomed updates to Good Scientific Practice and the draft portfolio template.

- In 2024/25, the External Examiner reviewed proposed updates to Good Scientific Practice in line with the revised HCPC standards and expressed support for these changes. They were able to select and review a sufficient and varied sample of portfolios and assessment forms, observing rigorous and equitable assessment processes, including robust interview procedures where applicable.
- Feedback provided to applicants was found to be clear, constructive, and achievable at both portfolio and interview stages. Guidance documents were judged to be well-structured, detailed, and supportive, with clear communication provided to applicants throughout the process.
- One recommendation was made to improve assessment forms by encouraging assessors to explicitly confirm when standards are met, and this action has been incorporated into the action plan.
- The visitors were satisfied with the education provider's reflection on the training given to external examiners and how this has prepared them for their role. The visitors were also satisfied with how the annual meetings have been helpful to review the process and how the education provider responded to queries and suggestions from the External Examiner.
- Therefore, the visitors were satisfied that the education provider has continued to perform well in this area.

Risks identified which may impact on performance: None.

Outstanding issues for follow up: None.

Data and reflections

Findings of the assessment panel:

- **Learner non continuation:**
 - The education provider stated that they are not a recognised higher education provider as defined by the Office for Students. Therefore, they do not report Higher Education Statistics Agency (HESA) data, participate in the National Student Survey (NSS) or Postgraduate Research Experience Survey (PRES).
 - The visitors considered this area is not applicable based on the education provider's comment above.
- **Outcomes for those who complete programmes:**
 - The education provider noted that an admissions criterium to join the programme is that applicants are employed as a healthcare scientist in either the NHS or private provider.
 - The visitors noted all applicants are already in employment. The visitors understood that the education provider's model of delivery means they are unable to provide this specific data. As such the visitors were satisfied with the education provider's explanation.
- **Learner satisfaction**
 - The education provider stated that they are not a recognised higher education provider as defined by the Office for Students, therefore they do not report HESA data, participate in the NSS or PRES.

- The visitors considered this area is not applicable based on the education provider's comment above.
- **Proposal for supplying data points to the HCPC:**
 - The education provider noted that learning continuation data is already collected to monitor progression through both the portfolio and interview stages, and it can be analysed by protected characteristics. There is also an opportunity to strengthen processes by formally recording applicants as non-completions if they fail to resubmit by the deadline or remain inactive for an agreed period. They noted this would improve the accuracy and completeness of continuation data tracking.
 - For programme outcomes, completion data is already analysed across several factors, including division, specialty, UK country of work, and protected characteristics. However, the education provider noted that the HCPC measure of graduate destinations is not applicable in this context, as all applicants are required to be employed as healthcare scientists at the point of entry. As a result, tracking progression into employment or further study after completion is not applicable to this programme.
 - The education provider noted that their learner satisfaction data was last collected through an applicant survey in 2022/23. Although a full follow-up survey was planned for 2024/25, this was replaced with a more targeted survey focusing on feedback about the new portfolio template due to limited resources. Many of the learners reported that the new template was more user friendly. A broader survey of current applicants and completers is planned for the next academic year, once the digitalisation project is complete and the updated portfolio template has been in use for at least a year.
 - The visitors acknowledged that as learners are typically in work and retrospectively seeking registration, these data points are not available in same way as most education providers.
- **Programme level data:**
 - In this section, the education provider stated their number of cohorts as rolling programme of application/ admission and did not provide any further reflection. They attributed this to the flexible and retrospective nature of the programme.
 - The visitors were satisfied with this reflection noting that programme data is not available in same way as most education providers because learners are typically in work and retrospectively seeking registration.

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

Review of the shared understanding of applicant requirement

Summary of issue: The education provider is undertaking a review of the shared understanding of one of the requirements for applicants - *‘must show equivalent depth and breadth of professional knowledge and skills as the relevant STP curriculum’* in the 2026/27 academic year. As this is outside of this review period, we have referred to their next performance review.

Impact of the digitalisation project

Summary of issue: The education provider noted their digitalisation project was due to be completed in May 2026. They also considered the use of AI-driven tools to respond to common queries where answers already exist in published guidance. They noted this would further help to streamline support and reduce repetitive workload. To be able to assess the impact of the changes brought about by the introduction of the digitalisation project and the use of AI-driven tools, we have referred this to their next performance review.

Actions taken in response to Lay Assessors and learners’ feedback

Summary of issue: There have been specific actions taken in response to Lay Assessors’ feedback and feedback from learners in relation to service user involvement and a couple of areas for development to be taken forward. To consider the impact of these effectively, we have asked the education provider to reflect on them at their next performance review.

Review of policies, guidance, and assessment strategies

Summary of issue: The education provider is reviewing their policies, guidance, and assessment strategies for the programme against the Joint Statement from statutory regulators of health and care professionals on Using Artificial Intelligence (AI) in health and care professional education starting from summer 2026. They will provide an update on this at the September 2026 meeting of their Education, Training and Standards Committee. As this is outside of the review period, we will consider at their next performance review

Actions taken to address inappropriate use of AI

Summary of issue: the education provider listed a number of actions they are taking to address the issues around the inappropriate use of AI by applicants. We will consider the impact of these actions at their 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 2027-28 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, partner organisations, external examiners.
- External input into quality assurance and enhancement
 - The education provider engaged with several 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) (e.g. 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)
- In summary, the reason for the recommendation of a two year monitoring period is:
 - The education provider has not been able to establish data supply through this performance review. This means we need to engage with them more frequently to manage any associated risks. We will continue to work with the education provider to establish data points should they wish to do so at their next performance review in the 2027-28 academic year.

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 2027/28 academic year
- The issues identified for referral through this review should be carried out as detailed in section 5.

Reason for this decision: The Panel noted that the provider's observations did not challenge the outcome of the performance review or the recommended review period. The observations primarily related to the wording and terminology used within the report. The Panel was satisfied that the report accurately reflected the evidence considered during the review. The Panel noted that the provider's observations principally related to the wording and terminology used within the report rather than the findings of the review.

Having regard to the importance of maintaining consistency and standardisation across performance review reports, the Panel was satisfied that no amendments to the report were required. The Panel agreed with the visitors' recommended monitoring period for the reason noted below:

- the absence of established data points which would support the consideration of a monitoring period longer than two years.

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	The Academy for Healthcare Science		
Case reference	CAS-01832-Z5Q6C3	Lead visitors	Colin Jennings Duane Mellor
Review period recommended	Two years		
Reason for recommendation			
The provider should next engage with monitoring in two years, the 2027-28 academic year, because although they have performed well across all areas, they have not been able to establish a regular data supply through this performance review. This means we need to engage with them more frequently to manage any associated risks. We will continue to work with the education provider to establish data points should they wish to do so at their next performance review.			
Referrals			
<u>Review of the shared understanding of applicant requirement referred to the next scheduled performance review</u>			
Summary of issue: The education provider is undertaking a review of the shared understanding of one of the requirements for applicants - <i>‘must show equivalent depth and breadth of professional knowledge and skills as the relevant STP curriculum’</i> in the 2026/27 academic year. As this is outside of this review period, we have referred to their next performance review.			
<u>Impact of the digitalisation project referred to the next scheduled performance review</u>			
Summary of issue: The education provider noted their digitalisation project was due to be completed in May 2026. They also considered the use of AI-driven tools to respond to common queries where answers already exist in published guidance. They noted this would further help to streamline support and reduce repetitive workload. To be able to assess the impact of the changes			

brought about by the introduction of the digitalisation project and the use of AI-driven tools, we have referred this to their next performance review.

Actions taken in response to Lay Assessors and learners' feedback referred to the next scheduled performance review

Summary of issue: There have been specific actions taken in response to Lay Assessors' feedback and feedback from learners in relation to service user involvement and a couple of areas for development to be taken forward. To consider the impact of these effectively, we have asked the education provider to reflect on them at their next performance review.

Review of policies, guidance, and assessment strategies referred to the next scheduled performance review

Summary of issue: the education provider is reviewing their policies, guidance, and assessment strategies for the programme against the Joint Statement from statutory regulators of health and care professionals on Using Artificial Intelligence (AI) in health and care professional education starting from summer 2026. They will provide an update on this at the September 2026 meeting of their Education, Training and Standards Committee. As this is outside of the review period, we will consider at their next performance review

Actions taken to address inappropriate use of AI referred to the next scheduled performance review

Summary of issue: the education provider listed a number of actions they are taking to address the issues around the inappropriate use of AI by applicants. We will consider the impact of these actions at their next performance review

○ .

Appendix 2 – list of open programmes at this institution

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