

## Accredited Registers Programme

### Accreditation Panel's Decision – Notification of Change

Notification from: Academy for Healthcare Science (AHCS)  
Panel meeting: 19 September 2017 (**change approved**)

The [Professional Standards Authority](#) accredits registers of people working in a variety of health and social care occupations not regulated by law. To be accredited, organisations holding such registers must prove that they meet our demanding [Standards for Accredited Registers](#) (the Standards). Accreditation is reviewed every twelve months.

Once accreditation has been granted, significant changes to an Accredited Register need to be assessed by the Authority to ensure ongoing compliance with the Accreditation Standards. These are submitted to the Authority as a notification of change.

On 20 June 2017, the AHCS submitted a notification of change for consideration.

The Accreditation Panel reviewed the notification of change submitted by AHCS . Panel members reviewed the notification of change form and a summary report from the Accreditation team. The Panel had to review the proposed changes and decide whether or not they would impact on the register's compliance with the Accreditation Standards. The Panel could make recommendations in the form of:

- **Conditions** – changes that must be made in order for the change to be approved.
- **Instructions** – actions that would improve practice but do not affect compliance with the Standards and that the Panel requires to be implemented and be satisfied of appropriate implementation within a given timeframe
- **Learning points** – actions that would benefit the operation of the register, the implementation of which would be verified during the annual review of accreditation.

The Panel considered the range of options available to it when making its decision.

The Panel noted the assessment carried out by the Accreditation team for the notification of change included:

- Documentary review (notification of change form)
- Due Diligence checks
- Review of Share Your Experience responses.

There were no declarations of interest from members of the Panel. A summary of matters considered by the Panel is set out in the Annex. The summary is not intended to reflect all of the matters discussed by the Panel, but to record those that were most important in forming its decision.

## Outcome

The Panel decided that the changes would not impact on the AHCS's compliance with the Accreditation Standards so approved the change.

## Conditions, Instructions and Learning Points

The Panel confirmed that no **Conditions, Instructions** or **Learning Points** would be issued as a result of the notification of change.

<b>Organisation:</b>	<b>Academy for Healthcare Science (AHCS)</b>	
<b>Panel meeting date:</b>	<b>19 September 2017</b>	
<b>Description of Proposed change – Clinical Physiologists addition to register</b>		
<p>The AHCS proposed to add a new occupation to its current register: Clinical Physiology. This occupation is split into seven disciplines:</p> <ul style="list-style-type: none"> <li>• Audiologists (including Hearing Therapists)</li> <li>• Cardiac Physiologists</li> <li>• Gastro-intestinal Physiologists</li> <li>• Neurophysiologists</li> <li>• Respiratory Physiologists</li> <li>• Sleep Physiologists</li> <li>• Vascular Scientists</li> </ul> <p>Clinical Physiologists appear on the AHCS register within its cluster model, alongside Practitioner, Medical Illustrator and Higher Specialist Scientist registrants. AHCS estimated that up to 2,000 Clinical Physiologists could register within two years.</p>		
<b>Standard 1: holds a voluntary register for people in health and/or social care occupations</b>		
<p>AHCS proposed to add seven Clinical Physiology disciplines to its register. Clinical Physiologists are involved in the diagnosis, treatment and management of a range of conditions, which can be life-limiting and life-threatening. This can include carrying out invasive and sensitive procedures. Clinical Physiologists are responsible for the reporting of clinical investigations and work in direct contact with patients with the potential to cause harm.</p>		<p>The Panel found that compliance with this Standard was not affected by the change.</p>

<p>The Accreditation team suggested that Clinical Physiologists meet the definition for working in a health care occupation set out in the National Health Service Reform and Health Care Professions Act 2002, section 25E (8) - 'Health care' includes: all forms of health care for individuals, whether relating to physical or mental health; and procedures that are similar to forms of medical or surgical care but are not provided in connection with a medical condition.'</p>	
<p><b>Standard 2: committed to protecting the public and promoting public confidence</b></p>	
<p>The Accreditation team suggested that the addition of Clinical Physiologists to the register will not impact on compliance with this Standard.</p>	<p>The Panel found that compliance with this Standard was not affected by the change.</p>
<p><b>Standard 3: risks</b></p>	
<p>AHCS noted that the risks identified are very similar to those posed by practitioners already on its register, and as such its existing risk register covered the inclusion of Clinical Physiologists. AHCS informed the team that it had worked with organisations including the Registration Council for Clinical Physiologists (RCCP) and the Association of Neurophysiological Scientists (ANS) when developing its new register, and has an ex-president of the RCCP's audiology group on its Board.</p> <p>The Panel previously noted that the management of risks relevant to Healthcare Science Practitioners is addressed within the generic standards of behaviour and practice set out AHCS's <i>Good Scientific Practice</i>, specialist Standards of Proficiency based on role, its Registration Rules and Standards of Continuing Professional Development (CPD). The Panel has also noted that the majority of practitioners work within the NHS or related institutions and will also follow the Codes of Conduct and risk management practices of their employer.</p>	<p>The Panel found that compliance with this Standard was not affected by the change.</p>

<p>The team asked the AHCS whether it was aware of specific risks of harm to patients relevant to Clinical Physiologists' practise. The AHCS provided a number of relevant examples to demonstrate awareness of the specific risks posed by the practise of Clinical Physiologists.</p> <p>The Academy asserted that such risks were mitigated by the Academy's standards as outlined above.</p>	
<p><b>Standard 4: Financial sustainability</b></p>	
<p>The addition of Clinical Physiologists to the register will mean that AHCS will have an increased number of registrants and therefore this will likely result in an increased revenue. The yearly fee for Clinical Physiologists will be set at £30 per registrant. Clinical Physiologists who began the registration process by 31 August 2017 will receive one year's free registration with AHCS.</p> <p>The team asked the AHCS if it had analysed the effect that providing free membership may have on its finances. The AHCS responded that this marketing opportunity has been budgeted within its current three-year plan, approved by the AHCS board and its Regulation Council, and reviewed by Health Education England.</p> <p>The AHCS advised that around 400 Clinical Physiologists that have started the registration process to date.</p>	<p>The Panel found that compliance with this Standard was not affected by the change.</p>
<p><b>Standard 5: capacity to inspire confidence</b></p>	
<p>The Accreditation team suggested that the addition of Clinical Physiologists to the register will not impact on compliance with this Standard.</p>	<p>The Panel found that compliance with this Standard was not affected by the change.</p>

<p><b>Standard 6: knowledge base</b></p>	
<p>Clinical Physiologists work within NHS and independent healthcare settings, using recognised procedures for diagnosis, treatment and management of patients. The disciplines covered are recognised NHS roles, providing science-based treatments.</p>	<p>The Panel found that compliance with this Standard was not affected by the change.</p>
<p><b>Standard 7: governance</b></p>	
<p>Clinical Physiologists will fit within AHCS's current governance structures. The team noted that bodies for clinical physiology are currently represented within the AHCS' governance, for example its Professional Council, which 'is the senior overarching body focusing on the AHCS's strategy and policy' includes the British Academy of Audiology and British Society for Clinical Neurophysiology. The Accreditation team suggested that the addition of Clinical Physiologists to the register would not impact on compliance with this Standard.</p>	<p>The Panel found that compliance with this Standard was not affected by the change.</p>
<p><b>Standard 8: setting standards for registrants</b></p>	
<p>AHCS stated that, as with other occupations on its register, there are two routes of entry to the register, one via an education and training route ('attainment') and the other through an equivalence route. Only attainment or equivalence routes that are quality assured and approved by AHCS's Education Training &amp; Professional Standards Committee will allow entry to the register.</p> <p>AHCS has developed specific Standards of Proficiency for Clinical Physiologists, which cover three areas:</p> <ul style="list-style-type: none"> <li>• Professional autonomy and accountability</li> <li>• Skills required for practice as a Clinical Physiologists</li> <li>• Knowledge of Healthcare Science.</li> </ul> <p>These Standards of Proficiency are in the same format as those developed for the other occupations on AHCS's register.</p>	<p>The Panel found that compliance with this Standard was not affected by the change.</p> <p>The Panel checked that Clinical Physiologists on AHCS's register would be covered by employers' indemnity schemes or other appropriate insurance.</p>

<p>The AHCS confirmed that to be eligible for registration, all Clinical Physiologists will work within the NHS or will otherwise be covered by their employer's indemnity cover.</p> <p>The team asked for an update on the AHCS equivalence route for clinical physiology. AHCS responded that it has interviewed and will announce the appointment in September of a professional group lead for physiology. It will be the physiology group's responsibility to establish criteria for equivalence and after consultation these will be published.</p>	<p>The Panel requested AHCS to provide updates on the development of its equivalence route.</p>
<p><b>Standard 9: education and training</b></p>	
<p>The same Standards for Education and Training (SETs), and Quality Assurance Framework, will be used for Clinical Physiology courses as for other occupations on the AHCS register. The SETs outline the requirements for Modernising Scientific Careers (MSC) undergraduate and postgraduate programmes and cover professional standards and standards of education and training.</p> <p>There are 36 approved degree courses from 17 universities that will allow entry to the register. Prospective registrants must choose their course from a drop-down list and upload their certificates during the application process. These are checked by AHCS prior to admitting individuals to the register. Trained Clinical Physiologists whose qualifications do not feature on that list but who wish to register must apply under the equivalence route, which is in development, as discussed above.</p> <p>The AHCS confirmed that relevant training requirements will continue to be published online with their own dedicated webpage.</p> <p>During the team's assessment, AHCS advised that one group of Clinical Physiologists, Accredited Vascular Scientists (AVSs) belonging to the Society for Vascular Technology (SVT), may be admitted to the register (transferred over as a block) without making Practitioner Training Programmes (PTP) attainment or equivalence applications. The SVT is the '<i>national scientific and educational society for Clinical Vascular Scientists working in Great Britain and Ireland</i>' and its '<i>Accreditation certification provides employers and patients with the confidence that the individual has reached and maintains the national standards set for vascular ultrasound investigations.</i>'</p>	<p>The Panel found that compliance with this Standard was not affected by the change.</p>

The team noted that AHCS had previously commissioned an external report for another professional body (the former-Voluntary Registration Council (VRC) for Anatomical Pathology Technologists, Genetic Technologists, Ophthalmic Science Practitioners and Tissue Bank Technologists) to assure that those practitioners had undergone a formal, objective assessment of competence to join the VRC. The team asked the AHCS how it had assured that SVT members met its standards for training.

The AHCS advised:

‘Vascular Scientists have a system of theory and practical exams to determine competence. We have reviewed the following documentation and it is of a high standard:

1. The assessor’s guide for the practical examination/viva
2. The scoring sheet for the practical examination/viva
3. CPD documentation
4. Accreditation documentation.

These all demonstrate the rigorous methods used to train, assess and maintain certification (SVT Accreditation).’

The team noted from the SVT website that Accreditation, necessary for transfer to the AHCS register, *‘is aimed at the ADVANCED SCIENTIST with a minimum of three years full-time postgraduate experience (or part-time equivalent) in a range of key diagnostic vascular investigations.’*

AHCS confirmed that the transfer-to-the-register would only be for SVT members who had achieved accreditation, and stated this level of competence sat between its minimum PTP-level qualification for registration and Scientist Training Programme (STP)-level qualifications required for statutory regulation as a clinical scientist. Lower-level ‘Ordinary members’ employed as vascular scientists or sonographers would not meet AHCS’s standards and be ineligible for registration until they have gained AVS status. At that point AVS holders would be eligible to apply under an AHCS application route. Registered Vascular Scientists will otherwise be subject to the same standards as other AHCS registrants. AHCS confirmed no other occupations were currently under consideration for similar transfers into the register.

<b>Standard 10: the register</b>	
<p>AHCS stated that the online application system will be the same for Clinical Physiologists as for other occupations on the register. This is currently open on the AHCS website for Clinical Physiologists to apply. Additional training will be provided to the Registrar and Registrations Administrator. AHCS advised that the register system will be the same as the current systems updated with Clinical Physiology terminology, and has been found to be working with current applications.</p>	<p>The Panel found that compliance with this Standard was not affected by the change.</p>
<b>Standard 11: complaints and concerns</b>	
<p>The Accreditation team suggested that the addition of Clinical Physiologists to the register will not impact on compliance with this Standard.</p>	<p>The Panel found that compliance with this Standard was not affected by the change.</p>
<b>Share your experience</b>	
<p>The Accreditation team received three responses to the share your experience process, one stating it found no concerns about the inclusion of Clinical Physiologists on the AHCS register. The Chief Scientific Officer for NHS England and the Director and Dean of Education and Quality for Health Education and England (London and South East) offered their support to AHCS's application.</p>	<p>The Panel considered the call for information responses when making their decision to approve the change.</p>

<b>Equality duty under the Equality Act 2010</b>	
The Panel must consider the Authority's equality duty under the Equality Act 2010 when considering the notification of change.	The Panel had regard to its duty under the Equality Act 2010 when considering this notification of change.
<b>Impact Assessment</b>	
<p>AHCS states that the introduction Clinical Physiologists to the register is likely to increase the number of registrants by up to 2,000 over a two-year period. Some of these registrants may join AHCS from other registers.</p> <p>Registration fees will be set at £30 per registrant per year. AHCS offered one year's free registration for Clinical Physiologists who applied by 31 August 2017.</p>	The Panel noted and took account of the impact of its decision to approve the change.