

Year in registration survey 2023 – highlights report

Executive Summary

This paper presents highlights from our year in registration survey (2023). The survey was launched in mid-June 2023, to seek the views of those who have been HCPC-registered for a year regarding their education and training programme, how this prepared them to practice, and their first year in employment. We intend to integrate insight from this work, into our education quality assurance activities, and inform focus areas for our Policy and Standards, and Professionalism and Upstream Regulation teams.

This report highlights key findings from the survey and where possible breaks the analysis down by individual professions. Conclusions drawn from the data are indicative; caution should be exercised due to the sampling framework adopted which was unstructured and non-random. Compared to previous surveys, the response rate for this year was much improved, with a 9% response rate. This is reflected in the total number of responses more than doubling compared to last year from 574 to 1,219.

Where relevant, we have picked out key learnings where improvements or further exploration may be of benefit via our ongoing work.

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Pre-registration education and training

Preparation for practice

This area was intended to capture how respondents felt their pre-registration education and training programme prepared them for practice.

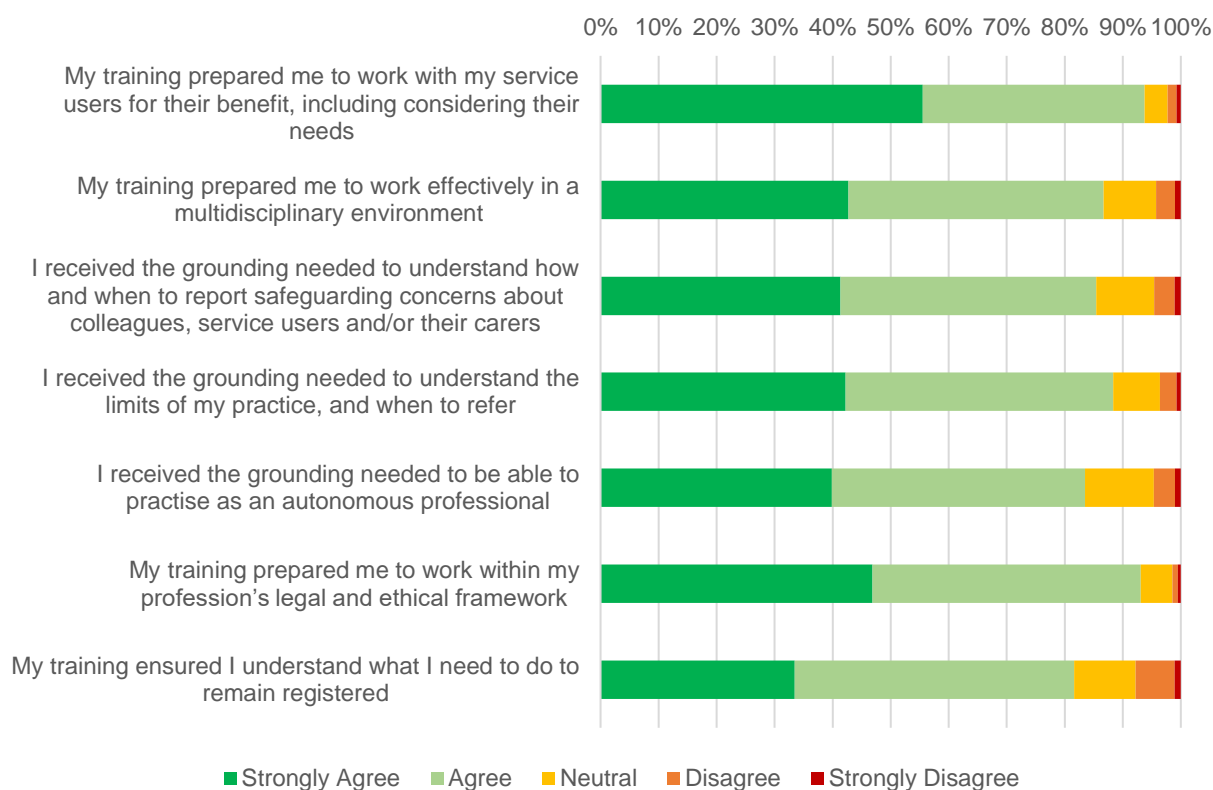


Figure 11 - Preparedness for practice, statement agreement across all respondents (N=1,219)

Summary

Responses generally evoked high levels of agreement (82%+ agreed with statements consistently), which is consistent with findings from the previous two surveys.

As was also the case in last two surveys, the statements “training ensured I understand what I need to do to remain registered” and “I received the grounding needed to be able to practise as an autonomous professional” provoked the most disagreement. However, this equated to $\leq 8\%$ of responses, meaning this was a minority opinion.

The statement evoking the most agreement was “my training prepared me to work with my service users for their benefit, including considering their needs”. This mirrored the response patterns of the 2021 and 2022 surveys.

Profession specific findings

Radiographers often responded with higher levels of agreement to the statements linked to preparedness for practice. Comparatively, speech and language therapists seem to have lower levels of agreement (last year this had been noted among paramedics), indicating these students may benefit from improved pathways in preparing for practice in the future.

Recommendations

1. Explore preparedness for practice findings with speech and language education providers and the Royal College of Speech and Language Therapy (RCSLT) and provide support for education providers and learners where possible.

The quality of education and training – interprofessional education (IPE)

This area was intended to capture respondents' experience of interprofessional education, and how this impacted their learning and practice.

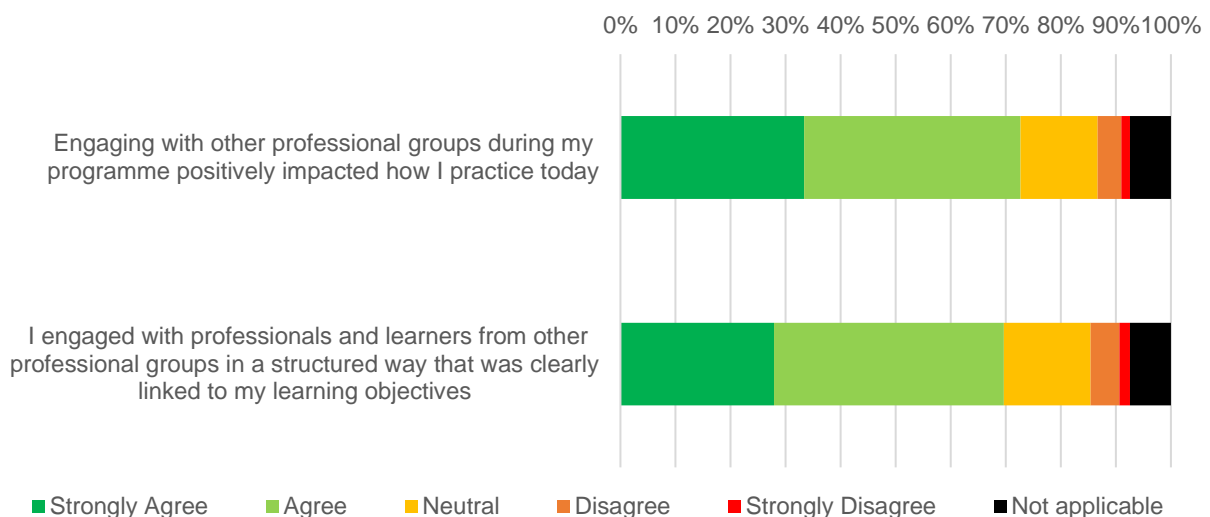


Figure 22 - Quality of education and training (IPE), statement agreement across all respondents (N=1,219)

Summary

Interprofessional education (IPE) is an important part of all programmes HCPC approves and relates to the interactions learners have with professionals and learners from other professional groups. As was the case of the previous survey, agreement to IPE statements continued to outweigh disagreement (70%+).

7% of respondents (an increase of 2% compared to the previous year) reported that they did not engage with other professional groups, which does present concerns as this is a requirement for HCPC-approved programmes. HCPC has asked further specific questions of education providers in this area however the impact of this, through survey results will take time to become apparent.

Profession specific findings

Paramedics and biomedical scientists reported the largest proportionate share of all professions for not engaging with other professional groups (a different finding compared to last year's survey, however this finding does echo the results of the 2021 survey in regard to biomedical scientists low multi-professional interactions).

Compared to other respondents, operating department practitioners were statistically more likely to agree that they had engaged with professionals and learners from other professional groups, and that this engagement was "clearly linked to learning objectives". Paramedics and chiropodists on the other hand were statistically less likely to agree that "engagement with other professionals and learners had positively impacted how they practice today" and was "clearly linked to learning objectives".

Recommendations

2. Continue to explore interprofessional education through engaging with education providers through the performance review process.

The quality of education and training – programme and staff interactions

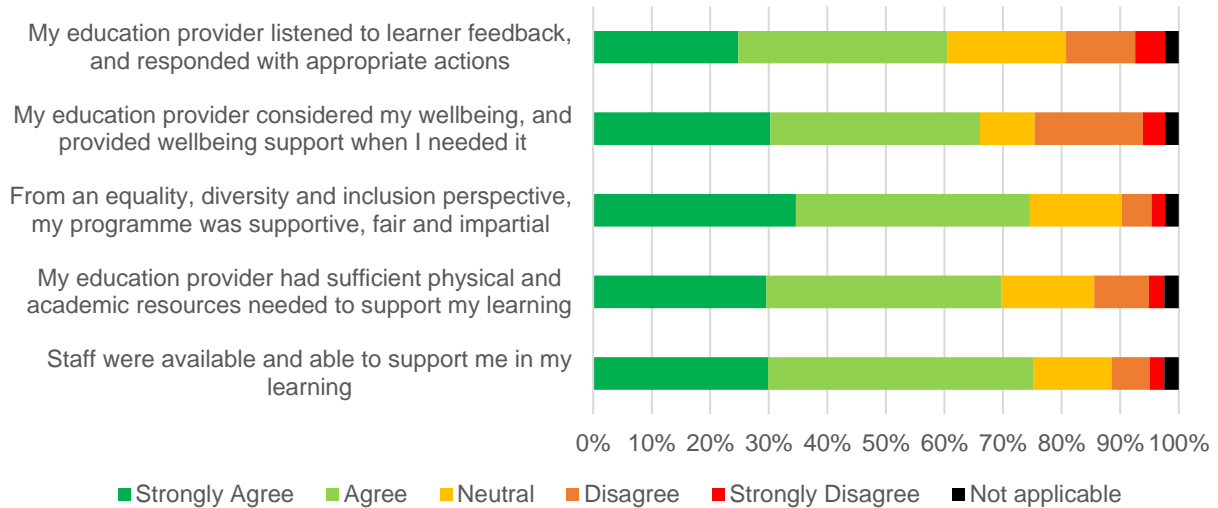


Figure 33 - Quality of education and training (programme / staff interactions), statement agreement across all respondents (N=1,219)

Summary

In terms of staff interactions, a positive picture continued to be depicted with agreement outweighing disagreement consistently across statements (61-75%).

The statement evoking the most agreement was “Staff were available and able to support me in my learning” while the statement resulting in the least agreement was “My education provider listened to learner feedback and responded with appropriate actions”. These were the same two statements and pattern noted as the former two surveys.

Profession specific findings

Paramedics were significantly less likely to agree to statements of “staff were available and able to support students in their learning” and “My education provider had sufficient physical and academic resources needed to support my learning” than other registrants, a finding which was echoed in last years survey.

Hearing aid dispensers were more likely to agree to the statement: “My education provider considered my wellbeing and provided wellbeing support when I needed it”.

Recommendations

3. Continue to explore programme and staff interactions through engaging with education providers through the performance review process.

The quality of education and training – academic learning

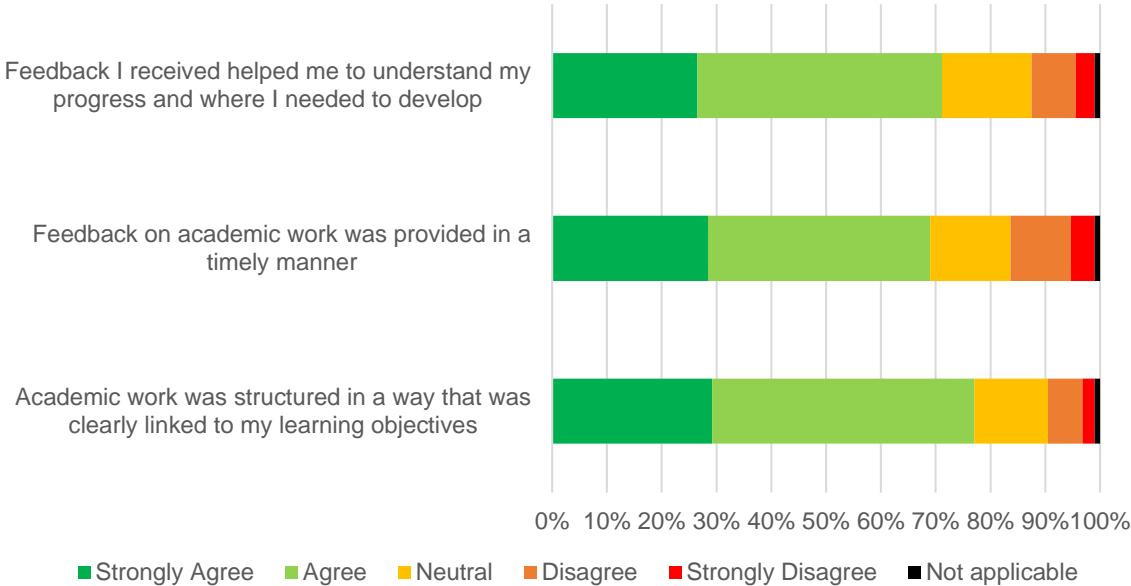


Figure 44 - Quality of education and training (academic learning), statement agreement across all respondents (N=1,219)

Summary

The results illustrate a high level of agreement (69-77%). Academic work being structured, linking to learning objectives, was the most widely agreed-with statement, while statements linked to feedback were less well rated, particularly with regard to timeliness; echoing the results of last year’s survey.

Profession specific findings

Paramedics and clinical scientists were less likely to agree that “academic work was structured in a way that was clearly linked learning objectives”, whereas practitioner psychologists were more likely to agree to this statement than average.

Paramedics and clinical scientists were also less likely than average to agree that “feedback on academic work was provided in a timely manner” while arts therapists and occupational therapists were more likely to agree to this statement than the average.

Paramedics and clinical scientists continued to also be less likely to agree that “feedback received helped them to understand their progress and where they needed to develop”, while practitioner psychologists and operating department practitioners were more likely to agree this as the case.

The quality of education and training – practice-based learning (PBL)



Figure 55 - Quality of education and training (PBL), statement agreement across all respondents (N=1,219)

Summary

As was the case in last year’s survey, agreement was consistently high across the statements (73-88%). The statement most agreed with was “I was able to apply my knowledge and skills in a way which supported me to develop my practice”, while, “I was placed in a variety of settings that supported my learning” was the least agreed with statement.

Profession specific findings

Paramedics, clinical scientists, radiographers and biomedical scientists appeared to have lower levels of agreement on these statements; a finding which echoed that of last year’s survey.

Service users in the delivery of education

This area was intended to capture respondents' experience of interacting with service users in the academic setting, and how this impacted on learning and practice.

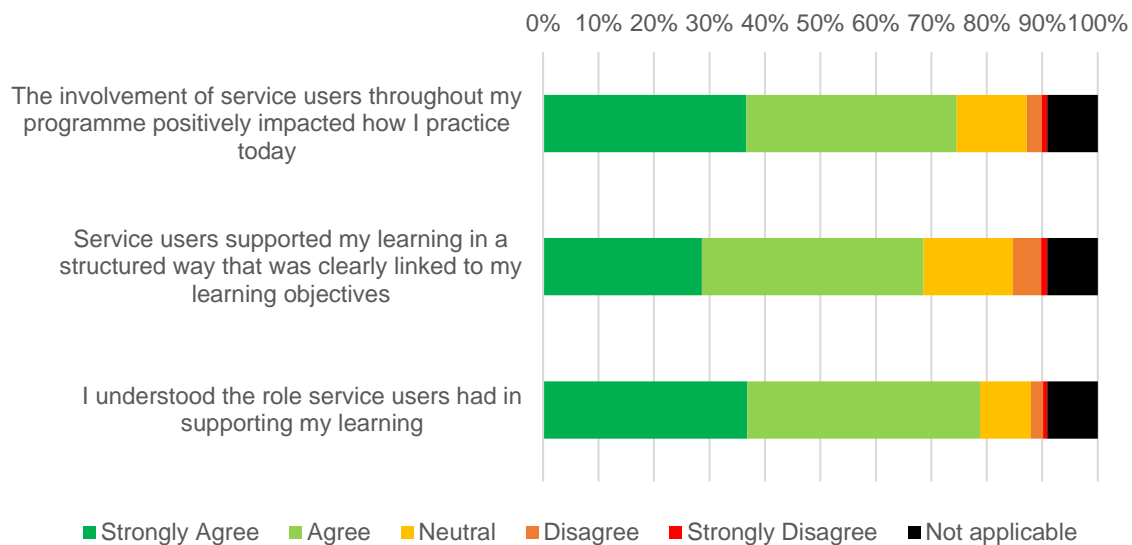


Figure 66 - The influence of service users, statement agreement across all respondents (N=1,219)

Summary

As was observed in the previous survey, agreement outweighed disagreement across statements examining the influence of service users, overall presenting a positive picture.

Similarly to the last two surveys:

- 79% of respondents agreed / strongly agreed that they “understood the role that SU’s had in supporting their learning”.
- 75% of respondents agreed / strongly agreed that involvement of SU’s throughout their programme “positively impacted how they practice today”.
- 69% of respondents agreed / strongly agreed that SU’s “supported their learning in a structured way that was clearly linked to their learning objectives”.

Almost 1 in 10 respondents reported they had not engaged with service users in the academic setting (9%), which is a finding consistent with the last two surveys. To become and remain HCPC approved, all providers must meet a standard which required service user involvement in programmes. A recommendation from the survey of 2021 led to HCPC asking further specific questions of education providers in this area. However, as was the case of last year, seeing impact through survey results will take a long time, likely many years, due to improvements filtering through the learners, and then those learners registering and completing this survey a year after completing their programme.

Profession specific findings

Clinical scientists and biomedical scientists commonly showed the least agreement towards these statements. These professions traditionally have fewer service user interactions than the other professions, but we do have a requirement for service user involvement in all education and training programmes.

Recommendations

4. Continue to explore service user involvement through engaging with education providers through the performance review process.

Recommendation likelihood

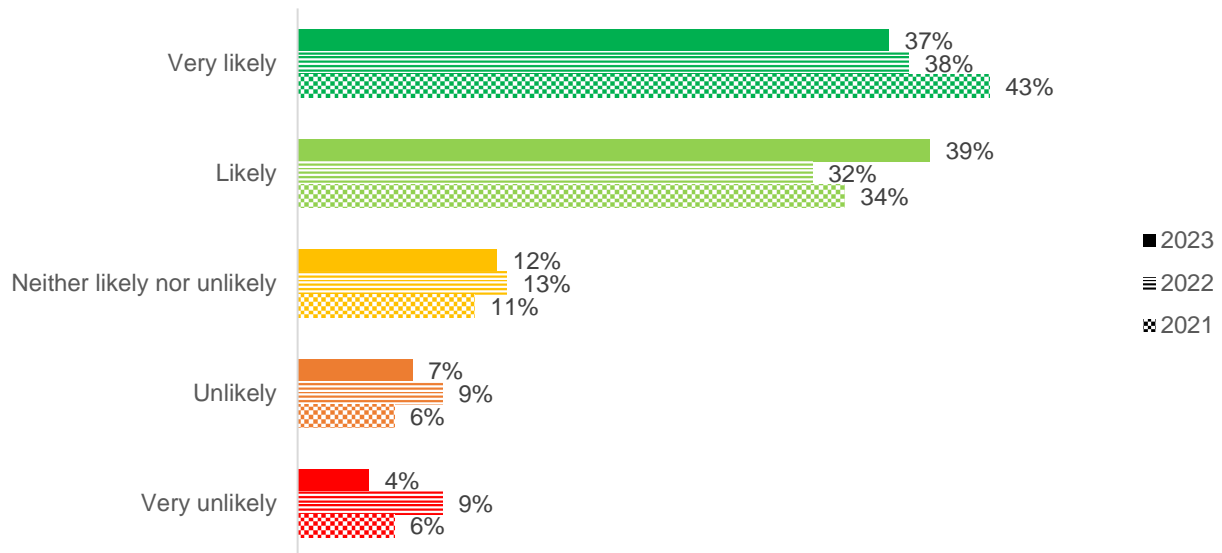


Figure 77 - Recommendation likelihood rating, across all respondents comparing 2023 (1,219), 2022 (N=574) & 2021 (N=888) responses

Summary

Respondents were asked how likely they would be to recommend their programme or education provider to a friend or family member who was considering entering professional training.

Overall, the response was very positive, with 76% reporting that they would be very likely / likely to recommend. While this was a 6% improvement to 2022 results compared to 2021, a 1% deficit continued.

Profession specific findings

Paramedics and occupational therapists are significantly less likely to report intention to recommend their programme while practitioner psychologists and hearing aid dispensers were significantly more likely than average to recommend. The results in relation to paramedics and practitioner psychologists were also noted last year.

Word association sentiment



Figure 88 - Words associated with programme, all respondents (N=1,219)

Similarly to the previous two year’s survey, ‘supportive’ and ‘challenging’ were the most frequently quoted words respondents reported associating to their programme. Examining sentiment of words used, the majority were positive (71%).

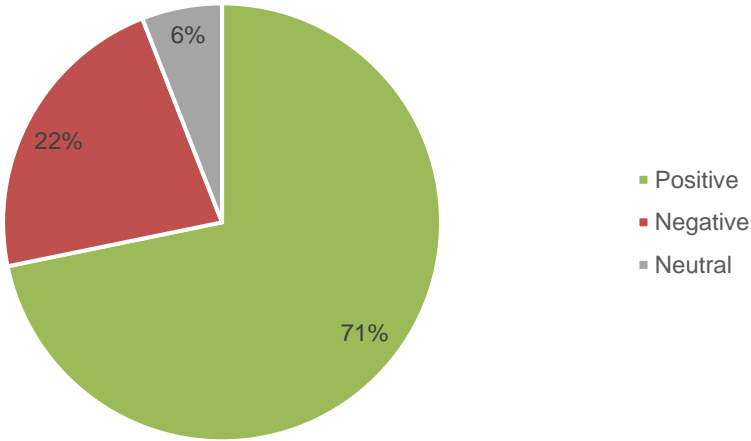


Figure 9 – Sentiment of words associated with programme, all respondents (N=3,657)

Recommendations

- 5. Include word association sentiment responses in communication and engagement (Education)

Preceptorship support¹

Availability and length

This area was intended to capture how respondents felt their transition into practice was supported by their employer.

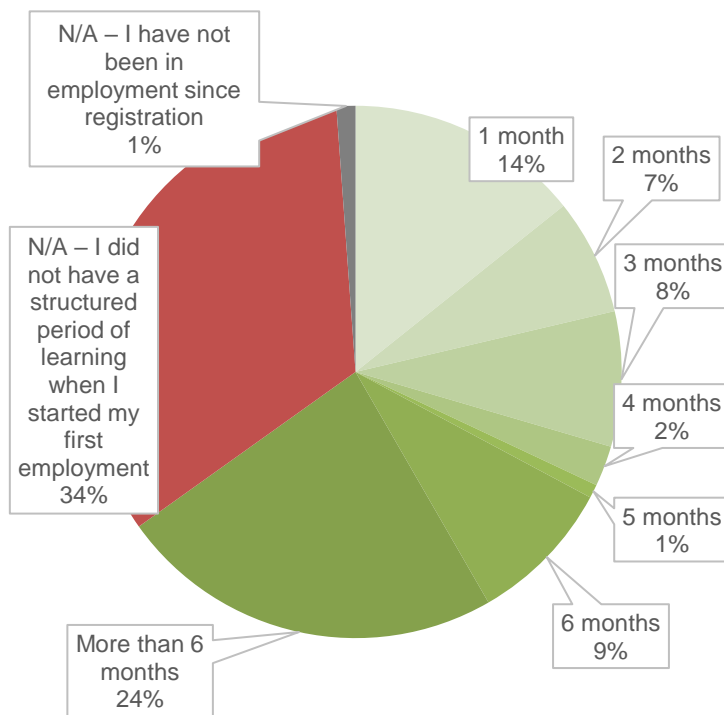


Figure 10 - Length of structured learning across all respondents (N=1,219)

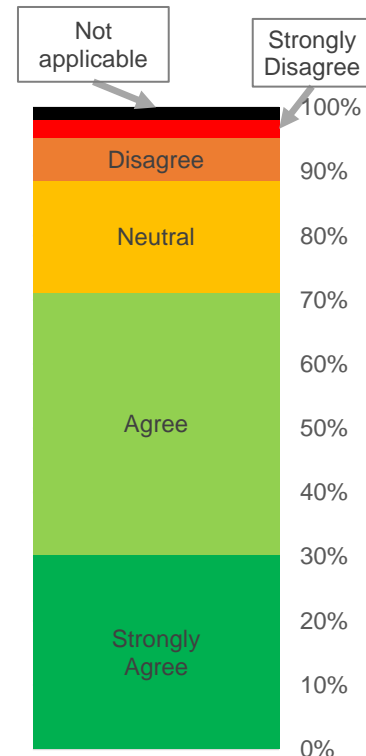


Figure 11 – The duration of structured learning and development felt adequate to support my practice, agreement across all respondents (N=808)

Summary

34% of respondents reported that they did not have a structured period of learning on entering practice. A further 29% reported this period to be 3 months or less. This echoes the findings of last year's survey. Among those who reported having structured learning and development, more than 70% agreed the duration was adequate to support their practice. Of those reporting the absence of a structured period of learning, 45% felt this had had a negative or very negative impact on their transition from learning to practice.

¹ We undertook research in this area in 2022 to further inform our understanding of registrant experiences of preparedness for practice, support and preceptorship. More details can be found here: [HCPC launches new work on preceptorship | \(hcpc-uk.org\)](https://www.hcpc-uk.org/news/hcpc-launches-new-work-on-preceptorship)

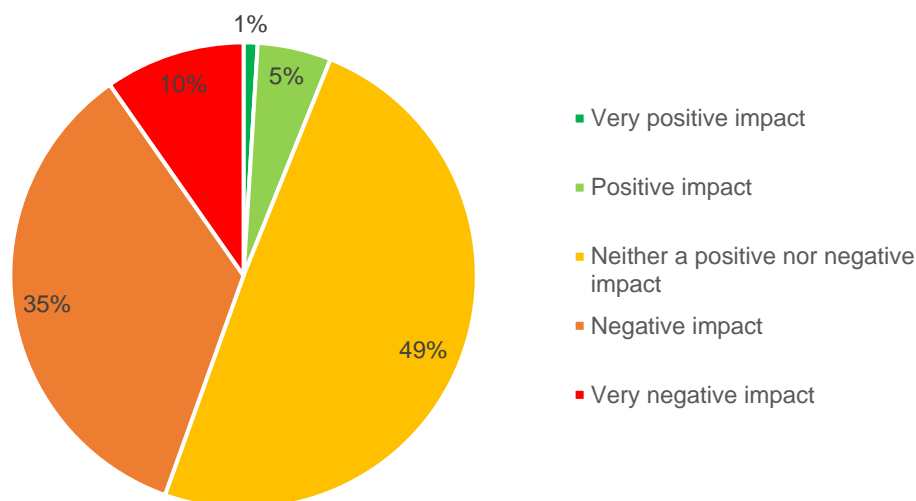


Figure 992 – Impact of **not** having a structured period of learning upon period of transition from education into practice (N=411)

Profession specific findings

Clinical scientists and practitioner psychologists more often than average reported an absence of this type of structured learning.

Quality

This area was intended to capture how respondents felt their transition into practice was supported by their employer. Deeper dive questions from the last section helped to explore whether respondents felt they had enough protected time, adequate support, and considered this time positively impacted on their practice.

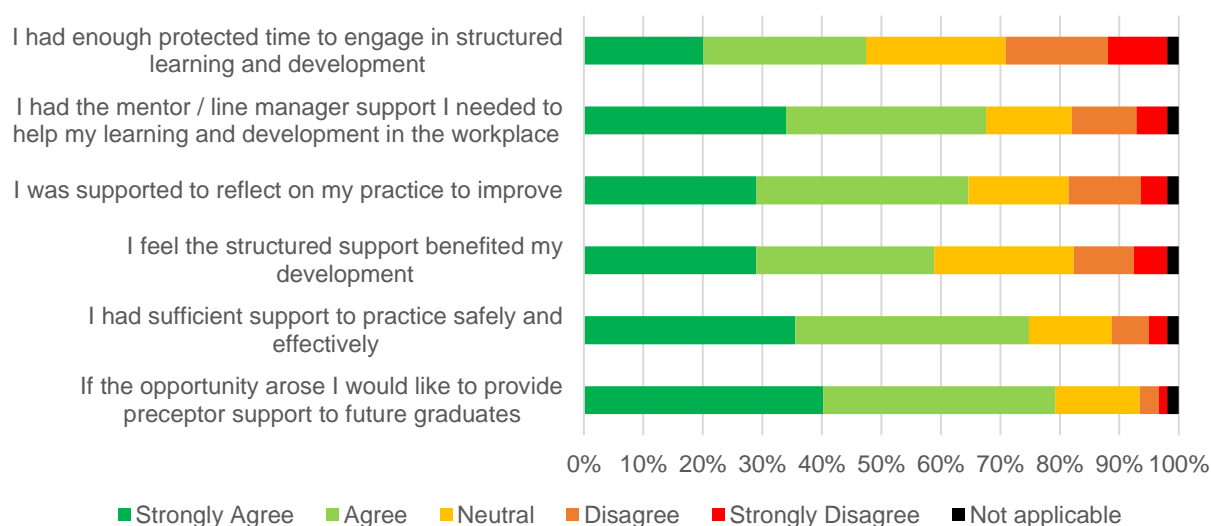


Figure 13 - Preceptorship quality, statement agreement across all respondents (N=1,219)

Summary

Agreement generally outweighed disagreement among these statements. The only exception of this was for the statement for “I had enough time to engage in structured learning and development” which suggested a significant proportion of respondents were not able to dedicate enough time to their preceptorship learning.

As was the case last year, the most agreement elicited was towards the statement of “If the opportunity arose I would like to provide preceptor support to future graduates” (79% agreement). This highlights an appetite to help among registrants early in their career, which could be harnessed to provide preceptorship supervision to new registrants.

Profession specific findings

Practitioner psychologists were consistently more agreeing than average on these statements.

Paramedics were less agreeing towards most statements, suggesting there is further work to do within this profession to support new registrants in practice.

Like was the case last year, operating department practitioners agreed more often with the statement about providing preceptorship support to future graduates, while arts therapists were notably less likely to agree to this statement.

Recommendations

- 6. Share the finding that 79% of respondents would like to provide preceptorship support to future graduates.

Additional questions for 2023

In this year’s survey, additional questions were included to better understand the terminology used for preceptorship and personal support provision.

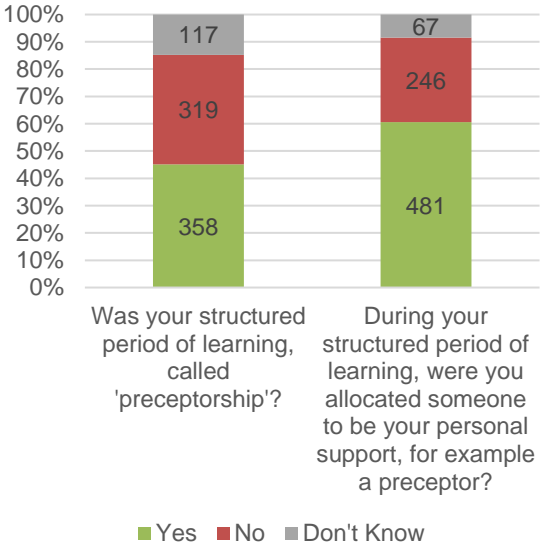


Figure 14 - Learning & Development 'name' and personal support allocation across respondents with structured period provided (N=794)

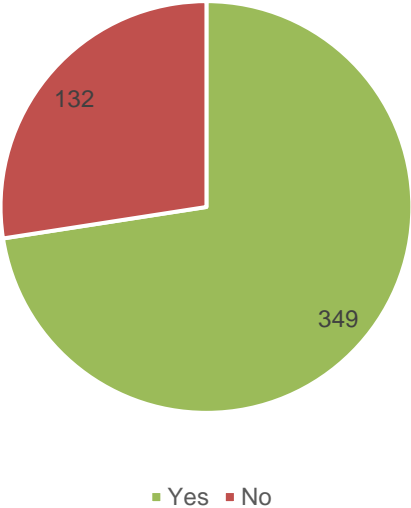


Figure 15 - Learning & Development consistency of personal support allocation (i.e. same person allocated for whole period of learning) (N=481)

It was observed that over 40% of those with structured periods of learning referred to this time as 'preceptorship'. It was positive to see how 61% of individuals were allocated someone for personal support whereby 73% of these persons had the same for their whole period of learning.

Summary of recommendations

1. Explore preparedness for practice findings with speech and language education providers and the Royal College of Speech and Language Therapy and provide support for education providers and learners where possible (Education).
2. Continue to explore interprofessional education through engaging with education providers through the performance review process (Education)
3. Continue to explore programme and staff interactions through engaging with education providers through the performance review process (Education)
4. Continue to explore service user involvement through Continue to explore service user involvement through engaging with education providers through the performance review process (Education)
5. Include word association sentiment responses in communication and engagement (Education)
6. Share the finding that 79% of respondents would like to provide preceptorship support to future graduates (Policy and Standards, Professionalism and Upstream Regulation)