

HEALTHCARE SCIENCE WEEK

DAY 4: REGULATION

Welcome to Day 4 of Healthcare Science Week!

Today we're shining a spotlight on the vital role of regulation in supporting patient safety, professional standards, and the evolving healthcare landscape. Effective regulation ensures public trust, enhances career development, and strengthens the impact of Healthcare Scientists.

We look forward to following along on Social Media. Check in to our website each day for new content!

Tomorrow, we round up our series of Healthcare Science Week newsletters with a focus on Leadership!

IN TODAY'S CONTENT:

- The importance of Healthcare Science regulation - Osama Ammar, Head of Accreditation, The Professional Standards Authority
- Phil Brown, Director, regulatory compliance, ABHI
- AHCS Healthcare Science Leadership Journal Highlight - "Consultant Clinical Scientist: My career path in Clinical Haematology"



THE IMPORTANCE OF HEALTHCARE SCIENCE REGULATION



OSAMA AMMAR
HEAD OF ACCREDITATION,
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Regulation serves as a fundamental safeguard in Healthcare Science, ensuring that services are effective, accurate, scalable, cost-efficient, and, most importantly, safe.

While discussions about regulation in Healthcare Science often focus on professional regulation, this perspective overlooks the layers of system and service regulation that govern the delivery of life-changing and life-saving services to patients and their families.

In some theories of regulation, those layers of regulation are thought of as a sequence of nets stacked upon one another that make it increasingly difficult for things to fall through the gaps and lead to poor outcomes or harm. For Healthcare Science, and because of the very nature of it, those layers run deep. Leaders and staff are held accountable, depending on their role, setting and specialism, to requirements from: employers, clinical governance, laboratory accreditation, wider system regulation and the law for medicines, medical devices and radiation.

That's already an overwhelming set of things to consider before we add on the individual demand of professional regulation. It is precisely because of the complexity of the field, that forms of professional regulation are required to make sure that the people who are trusted to safely deliver the demanding work of Healthcare Science have the right knowledge, skills, experience and behaviours.

Perhaps in Healthcare Science's case, professional regulation is even more important because so much of the practice happens at the cutting edge and is one of the major drivers of moving healthcare forward.

Inherently though, professional regulation carries costs and burden to individuals, employers and the health and care system. When there are already so many nets to prevent harm, it is only right that we should ask questions about proportionality, benefit and unintended consequences of adding more regulation.

That takes us to where professional regulation for Healthcare Science is today - a mixed model wherein some roles are subject to statutory regulation under the Health and Care Professions Council (HCPC), while others are covered by the Academy for Healthcare Science (AHCS) Accredited Registers. This is a consequence of UK Government policy that statutory regulation will only be considered where there is a compelling case on the basis of a public safety risk and where Accredited Registers are not considered sufficient to manage this risk.

There are examples of risks to the public that are emerging under the current framework of regulation but the root cause of that risk is not so easily attributed to the systems of professional regulation themselves. Instead, it appears that more needs to be done in the first instance to ensure that we are using the systems of professional regulation as they stand; making sure that healthcare science services are led and staffed by the right people. While we do not make the maximum utility of both forms of professional regulation in making decisions about Healthcare Science services, it will be hard to evidence any system of professional regulation is more effective than the other.

So, if there is a short-term goal that we should all share in our aspirations for the future of professional regulation of healthcare science, it is that both the statutory and Accredited Registers become a much more critical component of decision-making about how healthcare science services are continuously made safe. Not only does that support evidence-informed choices for the future, but it has the potential to enhance patient safety sooner rather than later.

THE LIFE SCIENCE INDUSTRY

PHIL BROWN
DIRECTOR, REGULATORY COMPLIANCE,
ABHI



"HealthTech is developed through collaboration between manufacturers, healthcare professionals, and patients. As safety is paramount, maintaining the highest professional standards in these relationships is essential, and robust credentialing schemes play a crucial role in achieving this. This is why close collaboration with organisations like the Academy for Healthcare Science and their membership is key, ensuring that life-enhancing and life-saving technologies are introduced and used safely and effectively."

AHSC HEALTHCARE SCIENCE LEADERSHIP JOURNAL HIGHLIGHT

SHARRAN GREY - “CONSULTANT CLINICAL SCIENTIST: MY CAREER PATH IN CLINICAL HAEMATOLOGY”

Below, Sharran Grey, Consultant Clinical Scientist in Clinical Haematology at the Lancashire and South Cumbria Tertiary Haematology Centre in Blackpool, shares a story of her career path in Clinical Haematology.

Thirty-seven years ago, I was appointed to a rotational training post in Pathology as a very junior trainee scientist. I loved the work and had fantastic colleagues. I even enjoyed the exams! In the first week I remember thinking that I had found my ideal career and would do it until I retired, but I also felt rather detached from the patient’s diagnostic journey. I didn’t know it then but that observation was something that would shape my career and my vision for the Clinical Haematology workforce and new ways of working.

My career then progressed through a series of laboratory based Biomedical Scientist posts which were mainly technical, scientific and managerial. My journey to becoming a Consultant Clinical Scientist began when my work became increasingly patient-facing in response to service need. I felt my contribution would be better recognised professionally through registration as a Clinical Scientist. I obtained the Academy of Healthcare Science (AHCS) Certificate of Equivalence, enabling me to register as a Clinical Scientist with the Health and Care Professions Council, and then joined the Haematology Higher Specialist Scientist Training (HSST) programme. This route offers flexibility to Biomedical Scientists who are developing clinical scientific careers or wishing to pursue HSST. The AHCS Equivalence programme avoids the need for Biomedical Scientists to enter a 3-year Scientist Training Programme (STP) and study for a Clinical Science MSc if they already have an appropriate qualification at masters level and suitable experience equivalent to the STP curriculum and competency assessments.

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