

BRIDGING THE GAP: FROM HIGHLY SPECIALISED CLINICAL PHYSIOLOGIST TO CLINICAL SCIENTIST – Reflections on the STP Equivalence Journey

Prakriti Pyakurel

About the author

Prakriti Pyakurel is an HCPC-registered Clinical Scientist in Neurophysiology at NHS Grampian, Aberdeen. With over 14 years of experience in neuroscience services, her professional interests include nerve conduction studies, neurophysiology service development, reducing waiting lists, healthcare science leadership, education, research, workforce development, and clinical academic practice. She currently serves as a Council Member of the Association of Neurophysiological Scientists (ANS) and Chair of the NHS Grampian Healthcare Science Promotion Group, supporting the development, visibility, and future workforce of healthcare science.



I am a Band 7 Highly Specialised Clinical Physiologist in Neurophysiology with over 14 years of NHS experience. For most of my career, my professional focus has been on delivering specialist diagnostic investigations, providing high-quality patient care, and maintaining technical excellence. While these are fundamental aspects of healthcare science practice, my journey through the Scientist Training Programme (STP) Equivalence process taught me that Clinical Scientist-level practice extends far beyond clinical expertise alone.

When I first applied for STP Equivalence, I assumed that my years of experience and advanced clinical skills would demonstrate my readiness for Clinical Scientist registration. However, over a three-year period, I received multiple Outcome 2 decisions that required additional evidence before equivalence could be awarded. Although initially frustrating, the process ultimately became one of the most valuable professional development experiences of my career.

As I reviewed my portfolio, I realised that the challenge was not my clinical competence but my ability to demonstrate leadership, research, education, governance, and service improvement activities in a way that aligned with Good Scientific Practice (GSP). Like many healthcare scientists, I was already undertaking much of this work through mentoring colleagues, leading audits, contributing to service development, and supporting departmental initiatives. The challenge was that much of this activity had not been formally mapped or evidenced against the GSP standards.

The equivalence process encouraged me to reflect critically on my professional practice and identify areas requiring further development. Mapping my experience against the five domains of Good Scientific Practice helped me recognise that many activities I considered routine were, in fact, evidence of Clinical Scientist-level practice. Chairing meetings, developing clinical protocols, supervising staff, and leading quality improvement initiatives all contributed towards demonstrating competencies expected of a Clinical Scientist.

“One of the most important lessons I learned was that professional development is influenced not only by individual motivation but also by the opportunities available within the workplace.”

In highly specialised neurophysiology services, service pressures and growing waiting lists can limit protected time for leadership development, research, audit, and quality improvement activities. As a result, many experienced healthcare scientists develop exceptional clinical expertise while having limited opportunities to evidence leadership, research, and service improvement activities in a structured and visible way.

To strengthen my portfolio, I actively sought opportunities beyond routine clinical work. I completed leadership and research training, including NIHR programmes and Good Clinical Practice certification, increased my involvement in audit and service improvement projects, and expanded my teaching and mentoring activities. These experiences not only strengthened my portfolio but also increased my confidence as a healthcare science leader and advocate for professional development.

Perhaps the greatest outcome of the STP Equivalence process was a change in mindset. I came to understand that leadership, research, education, and service improvement are not separate from clinical practice; they are essential components of advanced healthcare science roles.

“The process helped me move from viewing professional development as an activity separate from clinical work to recognising it as an integral part of Clinical Scientist practice.”

The experience has strengthened my development as a Clinical Scientist and provided a foundation for future progression into senior leadership, clinical academic, and Consultant Clinical Scientist roles. Most importantly, it has reinforced the value of developing expertise across clinical practice, research, education, and leadership, while highlighting the importance of supporting healthcare scientists to develop across all pillars of professional practice.

Looking ahead, I believe that achieving Clinical Scientist equivalence should be accompanied by meaningful opportunities for career progression and continued professional development. Healthcare scientists who demonstrate Clinical Scientist-level competence should be supported to undertake greater responsibilities in leadership, research, audit, education, and service improvement. Clear pathways towards senior and strategic roles, supported by managers, departments, and organisations, are essential to retain skilled professionals, maximise workforce capability, and improve patient care.

“My STP Equivalence journey became far more than a portfolio exercise. It was a period of reflection, growth, and professional transformation.”

The key lesson for me was that achieving Clinical Scientist-level practice requires not only clinical expertise but also visible evidence of leadership, education, research, and service improvement. Equally important is access to organisational support that enables healthcare scientists to develop, apply, and progress their skills throughout their careers. Bridging this gap between capability and opportunity is essential for individual career progression, workforce sustainability, and the future of healthcare science.