

Report

# How long do new HCPC registrants stay registered for?

An analysis of first-time HCPC registrations: 2013 to 2020

23/09/2025

HCPC Insight & Analytics Team 2025

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## **Foreword**

The retention of staff has been a long-term issue for the health and care workforce in the UK and in particular the NHS. While retaining staff in all health and care professions and settings is critical to safe and effective care, the levels of retention in allied health professions, as well as scientific and psychological professions are becoming increasingly important.

The NHS 10-year plan for England, published in July 2025, again brings into focus the importance of workforce retention and the need for action in professions that are essential to the delivery of effective care. As these plans start to be implemented, retention continues to be a top priority for the health and care sector.

Expanding on our 2023 and 2024 reports [1], this report provides data and insights to inform how the health and care sector responds to workforce challenges over the coming years. For instance, our analysis highlights an expected lower level of retention among international registrants, which can affect the overall retention levels in professions with higher proportions of registrants who have joined via the international route. Many young international-route registrants work in the UK on two-year visas, which in part explains their lower retention rate.

Our analysis can provide useful insights to help inform workforce planning, particularly in those professions that rely on the international supply to meet UK workforce demands. The greater attrition of international registrants is felt more acutely in some professions who rely on them. For example, some professions with relatively large proportions of new registrants joining via the international route, such as dietitians (28% of new registrants joining), physiotherapists (32% of new registrants joining), and radiographers (35% of new registrants joining), show relatively low retention rates – approximately 30% of dietitians and physiotherapists left within four years, compared to 17% of radiographers.

Our report also found lower levels of retention among overseas students who have qualified in the UK. For parts of the UK with higher proportions of overseas students, such as Scotland, this then leads to lower overall retention rates in those areas. Everyone in the sector, including regulators, has a role in supporting retention and addressing issues where they exist in support of safe, effective and high-quality care.

Our findings support steps already being taken by workforce planners, education providers and employers to address retention issues. They are also directly relevant to plans being developed in some parts of the UK, such as the NHS 10-year plan for England, on how best to balance recruitment of domestically and internationally trained professionals to meet workforce demands.

By sharing these insights and making our analyses widely available as part of our interactive online data hub, we aim to support the healthcare sector to retain the right skills and experience in the critical professions delivering care to the public.

Bernie O'Reilly
CEO and Registrar

## **Executive Summary**

This report studies the amount of time that new HCPC registrants stayed on our Register, by analysing both UK-route and international-route registrants who joined the HCPC Register between 2013 and 2020. The report expands on our analysis from 2023 and 2024, which presented retention rates for new registrants for both routes, between 2013 and 2018 [1].

We have employed appropriate statistical methods to assess new registrants between 2013 and 2020, following their registration status for four years after initial registration. Alongside this report, we are publishing detailed interactive analyses online as an expansion to the HCPC data hub [2].

The time spent on the Register is analysed separately by:

- profession
- registration cohort
- registration route
- age of registrants at first registration
- sex
- place of education and training

The HCPC initially embarked upon this analysis to inform our work on preceptorship [3]. Our findings have broad significance. They have particularly important implications for training providers, those commissioning education, and workforce planners and policy makers. Additionally, they are likely to be relevant to other stakeholders, including professional bodies and unions.

In summary the key findings of the analysis were:

- One in ten (10%) of all new registrants left the Register within four years. There
  were differences in the rates of leaving by each registration route. One in twenty
  (5%) UK-route registrants left the Register within four years compared with
  almost one in three (30%) international-route registrants.
- With all registration routes combined, the rates of leaving the Register varied between professions from 3% (one in thirty) operating department practitioners to 15% (one in seven) physiotherapists.
- For UK-route registrants there is a link between profession size and rate of leaving the Register. We found that registrants from smaller professions appeared more likely to leave within four years.
- For most professions there were no substantial differences between the sexes in the leaving rates of UK-route registrants within four years of joining the Register. Overall female international-route registrants remained registered at a slightly lower rate (67%) compared to their male counterparts (74%), although the extent of this varied between professions.

- The overall retention rate within the first four years of registration for international-route registrants aged 18-29 was lower (63%) than for those aged 30-39 (81%).
   However, for UK-route registrants, the difference in retention rates between the age bands 18-29 and 30-39 was very small (94% and 96%, respectively).
- Leaving rates within the first four years of registration varied between UK nations
   / English regions where the registrants qualified (shown as education and training
   areas on our online dashboard). Analysis showed that those who trained in
   Scotland had the highest leaving rate across all professions (10%) mainly driven
   by the high proportion of overseas students (20%) in Scottish education
   providers.
- There are significant differences in the proportion of professionals leaving the Register within four years, depending on the world region in which they qualified. Registrants from Europe, the largest international group, had a leaving rate of 21% within four years, while registrants from Oceania, the second largest group, had the highest leaving rate (57%) within that time.

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## Introduction

A successful preceptorship — the transition and onboarding process for newly registered health practitioners, whether trained in the UK through an HCPC-approved programme or internationally — is essential for supporting their development into autonomous professionals and supporting long-term retention. To assist this transition period, HCPC published a set of principles for preceptorship programmes that could be used by all employers to provide support of the same high and consistent standard [3]. Those principles apply to all registrants working in any health or social care setting across the UK, including but not limited to, the NHS, the social care sector, and the independent and charitable sectors.

In support of that HCPC project and health and care workforce planners, a programme of analytical work was initiated in 2022 to develop relevant insights from existing HCPC data. Given the complex mix of the 15 HCPC professions and their various settings, sectors and locations, these analyses use time-to-event analysis methods to assess time remaining registered in the four years that followed first registration.

The purpose of this set of analyses was to:

- (a) obtain general estimates of retention for all registrants and for individual professions; and
- (b) to investigate possible associations between individual characteristics and attrition.

## **Methods**

#### **Data**

For the purposes of this report, we have created three cohorts, based on the renewal cycles between 2013 and 2020, for each of the professions regulated by the HCPC. The cohorts consist of all healthcare professionals who registered for the first time within this period.

Profession specific cohorts were necessary as most professionals leave the Register on the day after the closure of a renewal window, and profession renewal windows occur at different points in time over a two-year cycle [4]. Therefore, to ensure equal exposure to those key time points, the profession specific cohorts were aligned to their respective renewal windows (Table 1). It should therefore be remembered when all professions are considered together, or when different professions are being compared, that there will be some degree of variation in their cohort times. In the most extreme case, for the professions at opposite ends of the renewal cycle, this means their two-year cohorts overlapped by only six months.

This analysis considered UK-route registrants (including those who have successfully completed UK based HCPC-approved education programme and grandparenting routes), and international-route registrants (including international and European Mutual Recognition routes) which apply to those who obtained their qualifications outside of the UK. In this report we have analysed the professions accounting for the demographic differences between registrants from the UK routes and international routes.

Table 1: Profession specific cohort periods

	First-registration			
Profession	Cohort 1	Cohort 2	Cohort 3	
Practitioner psychologists	Mar 2013 - Feb 2015	Mar 2015 - Feb 2017	Mar 2017 - Feb 2019	
Orthoptists	Jun 2013 - May 2015	Jun 2015 - May 2017	Jun 2017 - May 2019	
Paramedics	Jun 2013 - May 2015	Jun 2015 - May 2017	Jun 2017 - May 2019	
Clinical scientists	Jul 2013 - Jun 2015	Jul 2015 - Jun 2017	Jul 2017 - Jun 2019	
Prosthetists / orthotists	Jul 2013 - Jun 2015	Jul 2015 - Jun 2017	Jul 2017 - Jun 2019	
Speech and language therapists	Jul 2013 - Jun 2015	Jul 2015 - Jun 2017	Jul 2017 - Jun 2019	
Occupational therapists	Aug 2013 - Jul 2015	ıg 2013 - Jul 2015 Aug 2015 - Jul 2017 Aug 2017 - Ju		
Biomedical scientists	Sep 2013 - Aug 2015	Sep 2013 - Aug 2015   Sep 2015 - Aug 2017   Sep 2017 -		
Radiographers	Dec 2013 - Nov 2015 Dec 2015 - Nov 2017 Dec 20		Dec 2017 - Nov 2019	
Physiotherapists	Feb 2014 - Jan 2016	Feb 2016 - Jan 2018	Feb 2018 - Jan 2020	
Arts therapists	Mar 2014 - Feb 2016	Mar 2016 - Feb 2018	Mar 2018 - Feb 2020	
Dietitians	Apr 2014 - Mar 2016	Apr 2016 - Mar 2018	Apr 2018 - Mar 2020	
Chiropodists / podiatrists	May 2014 - Apr 2016	May 2016 - Apr 2018	May 2018 - Apr 2020	
Hearing aid dispensers	May 2014 - Apr 2016	May 2016 - Apr 2018	May 2018 - Apr 2020	
Operating department practitioners	Sep 2014 - Aug 2016	Sep 2016 - Aug 2018	Sep 2018 - Aug 2020	

We analysed the retention pattern for about 88,000 first registrants. The size of the cohorts for each profession is shown on Table 2.

**Table 2: Profession cohort sizes** 

	Cohort 1		Cohort 2		Cohort 3	
Profession	UK	International	UK	International	UK	International
Arts therapists	611	22	650	27	703	37
Biomedical scientists	1,516	391	1,650	485	1,892	442
Chiropodists / podiatrists	733	65	715	68	652	50
Clinical scientists	636	81	605	81	775	73
Dietitians	817	229	768	330	843	329
Hearing aid dispensers	495	46	597	44	544	41
Occupational therapists	3,606	501	3,240	634	3,312	573
Operating department practitioners	1,373	21	1,375	-	1,374	25
Orthoptists	138	-	137	-	137	-
Paramedics	2,305	233	3,046	770	4,316	554
Physiotherapists	3,671	1,494	3,745	2,044	4,139	1,905
Practitioner psychologists	2,134	281	2,144	305	2,181	382
Prosthetists / orthotists	115	-	104	27	93	27
Radiographers	2,804	795	2,796	1,282	2,947	1,581
Speech and language therapists	1,484	310	1,514	323	1,423	242

#### **Outcome Variable**

The outcome variable, time-to-event, was the time in days from the date of first registration to the date of deregistration. For registrants who had not deregistered, this was the time from first registration to the censoring date: 1 May 2025. All records included in this study had minimum of four years follow up from the point of registration.

Registrants who had deregistered but had subsequently reregistered before the censoring date were not counted as having left. This ensured that those who unintentionally deregistered through non-renewal and then readmitted did not affect the analysis.

Leaving the Register for involuntary reasons (Fitness to Practise, Continuing Professional Development audit failures, non-renewal, and non-payment of fees) and for voluntary reasons (where the registrant had notified HCPC themselves) were all included. Records where the deregistration was due to the death of the registrant or where the registration had been made in error, were excluded.

### **Explanatory Variables**

The following variables were analysed separately: registration route, age at first registration, and sex. Additionally, for UK-route registrants, the UK region hosting the approved programme of study and the registrants' nationalities was analysed. For international-route registrants, further analysis was carried out based on the country or world region where training took place.

#### **Statistics**

The single-variable time-to-event analysis was conducted using the Kaplan-Meier method. All analysis were conducted in R 4.4.1 by implementing the package *survival* 3.8 [5].

## Results

#### **Overall Retention**

There were considerable differences between professions in terms of the proportions remaining registered after four years since first registration for all registration routes combined (Figure 1). The highest retention rates were observed for operating department practitioners (97%) and practitioner psychologists (96%), while the lowest rates were observed for physiotherapists (85%) and for prosthetists / orthotists and dietitians (both 86%). Please note that the online report available on the HCPC data hub [2] contains the detailed breakdown by profession and individual cohorts.

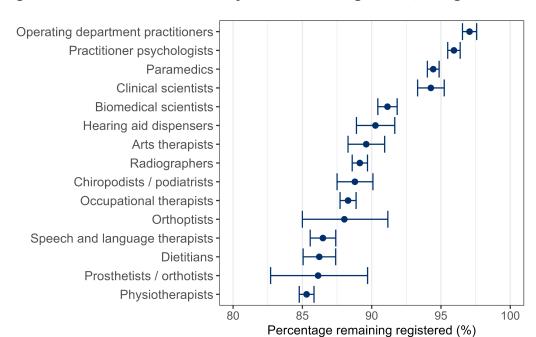
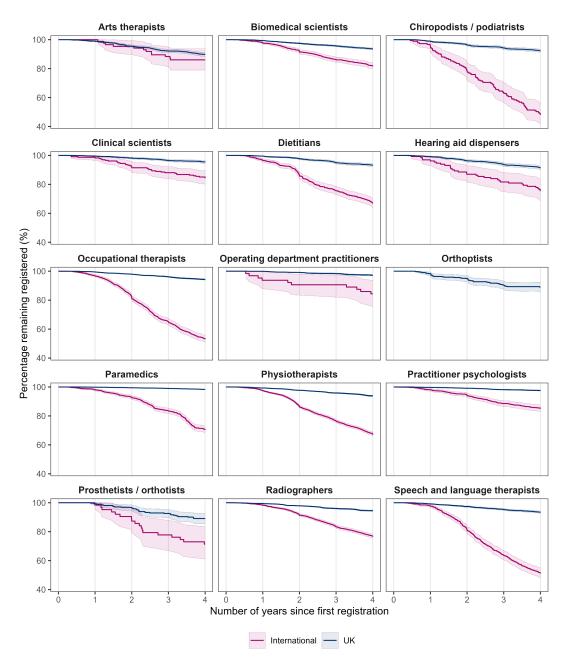


Figure 1: Overall retention after four years since first registration, all registrants

The proportion of professionals remaining registered after four years of initial registration was very different depending on the registration route (Figure 2). Overall, 95% of the UK-route registrants remained registered within four years. The highest retention rates were observed for paramedics and practitioner psychologists (both 98%), while the lowest rates were observed for prosthetists / orthotists and orthoptists (both 89%).

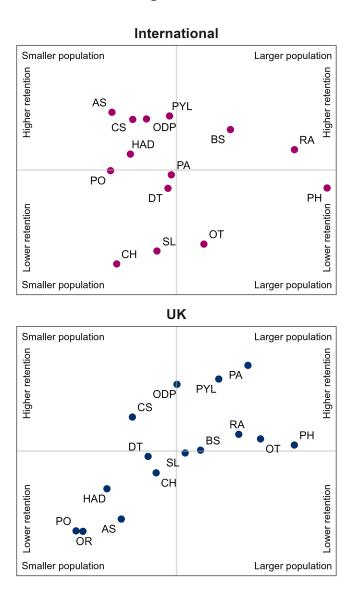
The proportion of international-route professionals who remained registered after four years of initial registration was always lower than the UK-route registrants, but the rates varied largely across professions. The four-year retention for international-route registrants was highest among arts therapists (86%) and practitioner psychologists (85%), and lowest among chiropodists / podiatrists (48%), speech and language therapists (51%), and occupational therapists (53%). Please note that the number of international registrants in some cohorts were relatively small (Table 2) which made the confidence intervals wider.

Figure 2: Retention over time for all cohorts combined, UK-route and international-route registrants



To compare professions and explore a potential relationship between profession size (population) and four-year retention, we calculated the Z-scores values for each profession using the square root of the number of registrants and their four-year retention rate. These standardised scores were then plotted to enable meaningful comparisons across professions (Figure 3). For UK-route registrants there is a clear association between profession size and retention. However, this relationship cannot be observed for international-route registrants. Professions with a small population of international registrants showed either high (art therapists) or low (chiropodists / podiatrists) retention rates. Similarly, professions with a large population of international registrants showed either high (radiographers) or slightly lower (physiotherapists) retention rates.

Figure 3. Z-score values for profession population and four-year retention for combined cohorts, UK-route and international-route registrants



## Retention by registration cohort

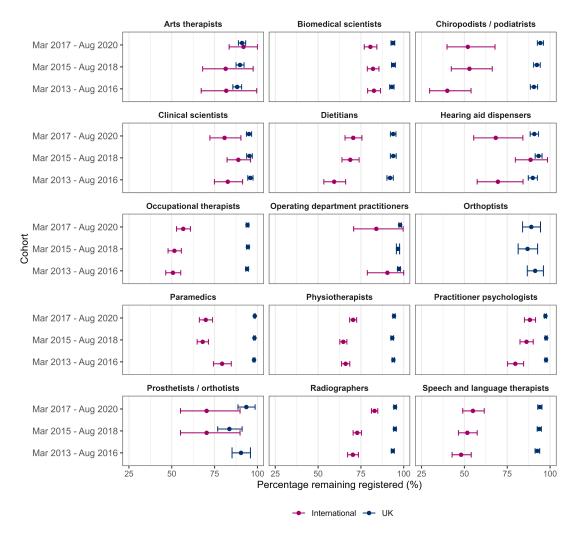
The retention rates for each registration cohort and registration route within each profession varied across all professions (Figure 4).

In most professions the proportions of UK trained professionals remaining registered after four years of initial registration was either identical or very similar (less than one percentage point difference) between the three registration cohorts, namely March 2016 – August 2016, March 2015 – August 2018 and March 2017 – August 2020 (see the cohort periods for individual professions on Table 1).

In some professions, the proportion of UK professionals registered after four years of initial registration has increased between the first registration cohort (Mar 2013 – Aug 2016) and the latest registration cohort (Mar 2017 – Aug 2020) like in chiropodists / podiatrists (from 91% to 94%) or prosthetists / orthotists (from 90% to 94%).

In orthoptists the proportion has slightly decreased between first and last registration cohorts (from 91% to 89%). The differences outlined above should be interpreted with caution, as the confidence intervals for the cohorts show partial overlap.

Figure 4: Retention after four years since first registration by registration cohort and registration route



Regarding international registrants, the retention rate has increased in most professions between the March 2013 – August 2016 and March 2017 – August 2020 registration cohorts like for radiographers (from 66% to 83%), speech and language therapists (from 48% to 55%), dietitians (from 59% to 71%) or practitioner psychologists (from 80% to 88%). By contrast, for other professions the retention rate between those registration cohorts has decreased like in paramedics (from 79% to 70%) or biomedical scientists (from 83% to 81%).

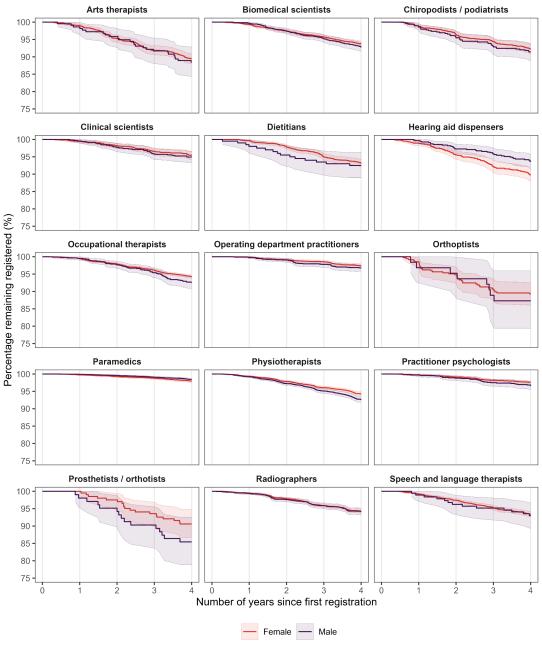
Please note that, from the next section onward, we are presenting results that combine all the registration cohorts from each profession (for definition of our cohorts, please see page 7). For detailed insights into individual registration cohorts, please refer to the HCPC data hub [2].

### Retention by sex

Retention by sex among UK registrants across professions indicates that, for most professions, there was either no difference or only a minor one (Figure 5). There were notable differences in a few professions through. Female prosthetists / orthotists had a retention rate that was five percentage points higher than their male counterparts. By contrast, male hearing aid dispensers had a retention rate four percentage points higher than their female counterparts.

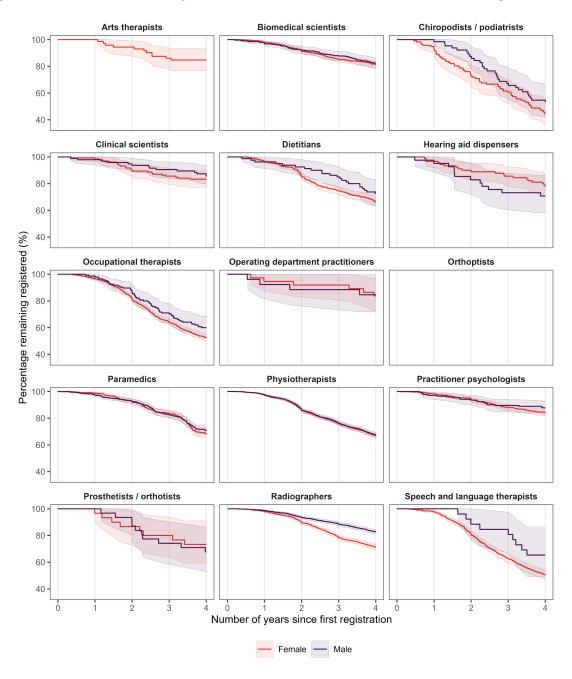
Biomedical scientists Chiropodists / podiatrists Arts therapists

Figure 5: Retention over time by sex group for combined cohorts, UK-route registrants



Retention by sex among international registrants across professions shows more pronounced differences compared to UK registrants (Figure 6). For most professions, the retention of female registrants was lower than male. The greatest sex disparity, where female retention was notably lower than male, was observed among speech and language therapists (50% vs. 65%) and radiographers (71% vs. 82%). By contrast, the retention of female registrants was higher than male for hearing aid dispensers (78% vs. 71%) and prosthetists / orthotists (73% vs. 68%).





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<sup>&</sup>lt;sup>1</sup> Figure 6: Please note that for orthoptists there are no international-route registrants

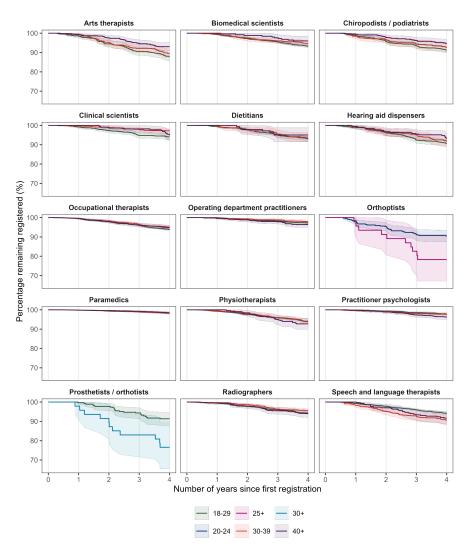
## Retention by age

Overall, the retention rates by age for UK-route registrants show very small differences between age bands in each profession (Figure 7). In some professions, small differences in retention were observed between age groups. For example, among arts therapists, retention was 88% for those aged 18–29 and 93% for those aged 40 and over.

Similarly, chiropodists / podiatrists showed retention rates of 95% and 91% for the same age bands. Differences were also noted between the 18–29 and 30–39 age groups for clinical scientists (94% vs. 97%) and for speech and language therapists (94% vs. 91%).

The most notable differences were seen among orthoptists, with retention rates of 90% for those aged 30+ compared to 78% for those aged 20–24, and among prosthetists / orthotists, where retention was 91% for the 18–29 group and 77% for those aged 30 and over.

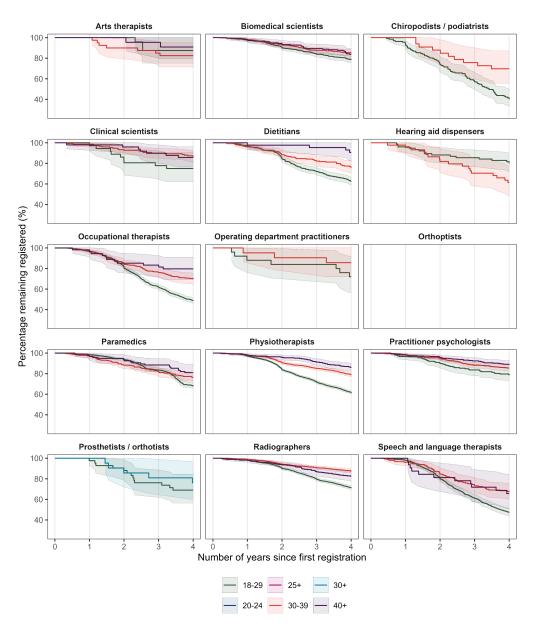
Figure 7: Retention over time by age group for combined cohorts, UK-route registrants



The differences in retention between age groups are more acute among international-route registrants, than among UK-route registrants (Figure 8).

In most professions, the age band 18-29 showed the lowest retention rate compared with older age-bands. Chiropodists/podiatrists showed the greatest difference in retention rates between age bands at 30 percentage points, followed by occupational therapists at 21 percentage points, and speech and language therapists at 20 percentage points. By contrast, hearing aid dispensers showed higher retention for the 18-29 age band compared with the 30-39 band (19 percentage points).

Figure 8: Retention over time by age group for combined cohorts, international-route registrants<sup>2</sup>



<sup>&</sup>lt;sup>2</sup> Figure Please note that for orthoptists there are no international-route registrants

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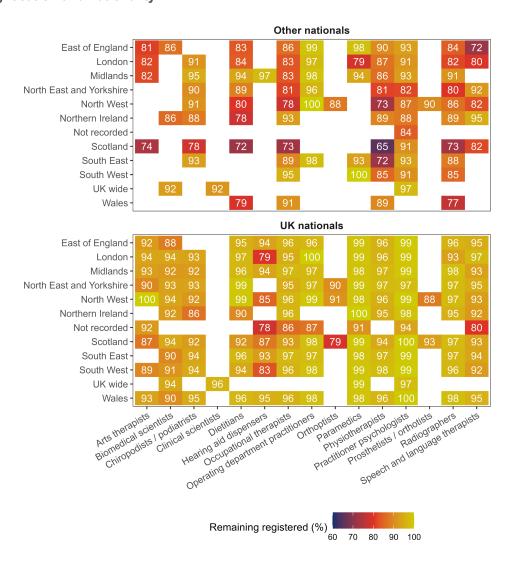
### Retention by UK education and training location

Retention among UK trained professionals, those who completed an HCPC-approved education programme in the UK, was analysed by grouping education and training institutions according to their location across English regions and UK nations (Northern Ireland, Scotland, and Wales). The analysis also grouped registrants by nationality, categorising them as either UK nationals or overseas nationals (other nationals).

Across all UK education and training locations and professions, UK nationals consistently show higher four-year retention rates compared to other nationals (Figure 9). Over 90% UK nationals from most professions remained registered after four years of initial registration across most education and training locations.

There were few countries/England regions where that proportion was lower for some professions. For UK nationals, the education and training locations and professions with lowest retention after four years of initial registration were London for hearing aid dispensers (79%) and Scotland for orthoptists (79%), although the number of registrants in these locations was relatively small (~30 people).

Figure 9: Retention at four years by profession for combined cohorts, UK education and training location and nationality



The UK country/England region with the lowest overall retention of professionals from other nationalities was Scotland (74%). This is mainly driven by the professions with a high number of non-UK nationality professionals like physiotherapists (324, 65%), occupational therapists (202, 73%) and radiographers (148, 73%) (Figure 9). The Midlands and South West England had higher four-year retention rates of non-UK nationality professionals, compared to other education and training locations across the UK.

Operating department practitioners was the profession with the highest overall retention after four years of initial registration of non-UK nationals across all locations, while arts therapists, dietitians and speech and language therapists had the lowest four-year retention.

## Retention by international education and training location

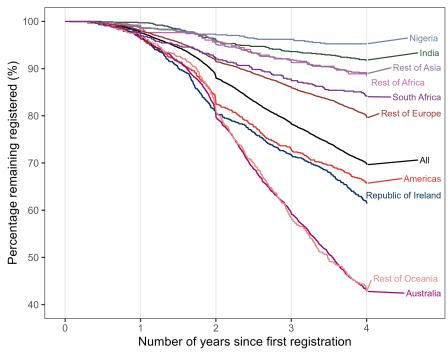
Overall, around 80% of international professionals from Oceania, Americas and Republic of Ireland left two years after first registration.

Registrants from the Republic of Ireland left at slightly higher rate during that period (Figure 10).

After two years, registrants from Oceania left at the highest rate compared with other international registrants, and only 43% remained registered after four years of initial registration.

By contrast, the highest proportion of international professionals who remained after four years of initial registration were from Nigeria (95%) and India (92%), which are very similar retention rates compared with UK registrants (Figure 2).

Figure 10: Retention by international education and training location for all combined cohorts and professions



Professionals who trained in Australia were the largest group of international-route registrants overall, in the cohorts considered here (Figure 2). However, this was not reflected across every profession, with the proportion of those who trained in Australia varying considerably across individual professions.

For example, in professions such as occupational therapists and speech and language therapists, more than four in ten international-route registrants trained in Australia (41% and 46%, respectively), but their four-year retention rates were lower than the average (37% and 32%, respectively). Notably, paramedics who have trained in Australia showed a higher retention rate (64%), with their proportion of international registrants also being the highest at 65%.

In other professions, the largest proportion of international registrants trained in Europe (exc. the Republic of Ireland for the purposes of this report) such as biomedical scientists (52%), practitioner psychologists (48%) and physiotherapists (45%). Retention rates for professionals trained in Europe were relatively high across these professions, ranging from 87% for practitioner psychologists to 77% for physiotherapists.

## **Discussion**

This analysis has revealed some interesting patterns in the length of new registrations via the UK and international routes. The overall retention of UK trained professionals is high (95%), but there are wide differences across health and care professions. For example, 89% of UK trained prosthetists / orthotists remained registered for four years after initial registration compared to 98% of UK trained paramedics.

As highlighted in our previous reports [1], demographic differences across professions may help account for variations in retention rates. For example, professions like paramedics, include career pathways through unregulated technician roles, which may lead to conversion into the regulated paramedic role later in life. Additionally, differences in retention may also be influenced by the availability of employment opportunities outside regulated roles. Biomedical scientists, for instance, may transition into the profession from unregulated laboratory positions or have greater flexibility to move out of regulated roles into unregulated ones.

The retention rate for international-route registrants is lower than for UK-route registrants across all professions. This is particularly relevant in professions that rely on the international supply to meet UK workforce demands. Over one in four registrants in the latest cohort of dietitians (28%), physiotherapists (32%), and radiographers (35%) trained internationally. Among those professionals, approximately 30% of dietitians and physiotherapists left within four years, compared to 17% of radiographers.

We identified demographic differences between UK and internationally trained registrants. For instance, among some professions, female registrants who joined via the international route had lower retention rates than their male counterparts. Additionally, international registrants aged 18–29 were more likely to leave than those in older age groups. These patterns provide important information for those creating targeted recruitment and retention plans and strategies.

For those who trained in the UK, we observed significant differences in leaving rates between UK and non-UK nationals which poses important considerations for those involved in planning, delivering, and funding education and training programmes. The higher leaving rates among non-UK registrants were substantial enough to influence overall retention rates in areas with a greater proportion of international students. Nonetheless, it is important to highlight that overall, UK trained professionals from other nationalities remained registered after four years of initial registration in a higher proportion than their international registration route counterparts.

The current analysis considered international-route registrants (and additional registration cohorts) in comparison with our previous retention analysis [1]. As before, we have also observed here a strong link between the number of UK-route registrants in a profession and the proportion of UK trained professionals remaining registered after four years of initial registration. The analysis suggests that larger professions have higher retention rates for UK-route registrants, however the analysis did not find this link for international-route registrants.

This raises a key question that cannot be answered by using data alone: Why do individuals choose to deregister voluntarily? A recent study examining why allied health

clinicians in Australia are leaving the profession identified several key factors influencing their intention to leave [6]. These include: (a) a lack of job satisfaction, (b) feeling unrecognised and unrewarded by their team manager, (c) not working in their preferred clinical area, and (d) experiencing job-related burnout. Understanding the reasons for leaving the health and care professions in the UK would provide valuable insight into whether professionals in the UK are leaving the field entirely or simply exiting the UK workforce.

The challenges faced by newly qualified registrants can significantly influence their decision to leave the profession early in their careers. Research on the retention of newly qualified nurses highlights the importance of structured support systems — such as effective preceptorship, mentorship programs, and strong leadership — in helping newly qualified nurses navigate early career challenges and prevent burnout. Furthermore, fostering a positive workplace culture that emphasises psychological safety, inclusivity, and opportunities for career development can greatly enhance job satisfaction among new nurses [7].

In November 2023, the HCPC published the Principles for Preceptorship to ensure that preceptorship programmes are designed to effectively meet the needs of new registrants from UK and international routes [3]. These principles underline the importance of: (a) providing opportunities to build confidence, (b) supporting career development, (c) prioritising health and wellbeing, and (d) fostering a culture of learning, self-reflection, and safe practice. Preceptorship should be recognised as a strategic tool for both recruitment and retention. Many newly qualified health practitioners choose their first role based on the healthcare provider's preceptorship programme model [8].

# **Acronyms**

Acronym	Meaning
AS	Arts therapists
BS	Biomedical scientists
СН	Chiropodists / podiatrists
CS	Clinical scientists
DT	Dietitians
HAD	Hearing aid dispensers
ODP	Operating department practitioners
OR	Orthoptists
ОТ	Occupational therapists
PA	Paramedics
PH	Physiotherapists
РО	Prosthetists / orthotists
PYL	Practitioner psychologists
RA	Radiographers
SL	Speech and language therapists

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