

HEALTH PROFESSIONS COUNCIL

DISCUSSION PAPER ON PROPOSED CHANGES TO THE CONSTITUTION OF THE COUNCIL

Issues to be addressed:

- ✚ An immediate issue is the forthcoming expansion of the Register with the addition of new professional groups.
- ✚ A possible issue that may arise sometime in the future is the belief that government may eventually want to reduce the number of separate health regulators.

Core principles that must inform any proposals for change.

- ✚ Any changes must ensure the centrality of **the protection of the public**.
- ✚ Any new structure must maintain the **primacy of The Council**.
- ✚ Any future Council must be able to maintain (and demonstrate) adequate **corporate governance**.
- ✚ Any proposals should be essentially **'future proof'**.
- ✚ In order to maintain effective and efficient business processes any future Council **should ideally not exceed 30 members**.
- ✚ Any future Council should maintain **the current ratio of registrant/lay members**.
- ✚ Any proposal must take account of the **four country requirement**.
- ✚ Any proposed change should be, at worst, **cost neutral** and preferably capable of resulting in **cost reduction**.

Other principles relating to the professions to be regulated.

- ✚ Equity
- ✚ Fairness
- ✚ Participation
- ✚ Identity

Other factors to be taken into consideration.

- ✚ The number of professions regulated will expand from the current 12 to 18 by 2006/07.
- ✚ By 2010 the number of separate groups to be regulated may well have expanded to between 25 and 30.
- ✚ The current **Agenda for Change** process may result in changes to the current configuration of professional groups.

DISCUSSION

1. The expansion of the Register is predicated essentially on the desire of health professions to come under the regulatory umbrella of the HPC. It is expected that new professions will experience the benefits of being accepted into the

- 'family' of regulated profession and, in particular, will be perceived by those existing professions as being mature, respectable, responsible and accountable.
2. It is possibly counter intuitive to believe that aspirant professions would remain committed to regulation by a body in which equity of opportunity for engagement was not assured. It is unlikely that such a situation would be seen as attractive by the members of aspirant groups and the potential reluctance to become regulated will not contribute to adequate protection of the public.
 3. It could be argued that the current structure of Council, with just one registrant member from each of the regulated professions limits the range of views and opinions available to Council to inform the decision making process. It is certainly the case that some Alternate Registrant members have little opportunity to contribute to the business of Council itself as they can only attend when the Registrant member is absent, though of course they are able to contribute significantly to the work of committees.
 4. Whereas the current membership of Council is linked explicitly to the structure of the Register there is no reason why this should continue to be so. Any proposed change to the structure of Council does not have to result also in a change to the structure of the Register. Ideally the current structure of the Register, whereby registrants are listed under the relevant protected title should continue. This will facilitate access to the Register by members of the public who will increasingly become familiar with those titles.
 5. It is already evident that at least some of the groups already recommended for inclusion into HPC are unhappy at the prospect of having less 'representation' on Council than existing regulated professions. Whilst it is important to understand the technical difference between the role of a 'delegate' as compared with that of a 'representative', the current structure of Council does tend to encourage the occasional blurring of the role of Registrant members. There is nevertheless a clear commitment on the part of all Council members to address the corporate agenda of Council and any proposed changes should, if possible, enhance this.
 6. The current policy agenda in health and social care would suggest that government would like to see the removal of 'barriers' between separate professions and the modernisation strategy is clearly addressing the need for new roles to develop as part of future service delivery. Whilst it is clearly not the role of HPC to promote such changes it will be essential for the Council to be in a position to respond creatively to the regulatory challenges that will inevitable follow.
 7. It is evident that, if Council is to restrict membership to 30 in the interests of efficiency and effectiveness, the principles of equity, fairness, participation and identity can only be upheld through significant change to the current structure.

A PROPOSAL FOR CHANGE

8. It is therefore proposed that, in future the Council of HPC should be aided by the establishment of a "**Registrants' Congress**". The key features of the new structure would be as follows:
 - ↓ Each profession regulated by the HPC would elect 3 members to attend meetings of the Congress.

- ✚ In addition each profession would elect an Alternate to attend meetings on a substitution basis as necessary.
- ✚ A separate election would be held to elect 'pan-professions' registrant members of Congress from each of the 4 countries on a proportional basis of 2 each from Northern Ireland, Scotland and Wales and 4 from England.
- ✚ Members of Congress would be eligible for travel and subsistence but would not receive an attendance allowance.
- ✚ The Congress would meet no more than twice in any one year.
- ✚ One meeting would be primarily concerned with the election of 15 Registrant Members of Council.
- ✚ Given that such members would no longer be elected on a 'single profession' basis, there would be no need for alternate registrant members.
- ✚ The other meeting would provide an opportunity to debate key issues relating to the regulation of health professionals.
- ✚ 15 lay members of Council would be appointed through the normal public appointments process with at least two from each of Northern Ireland, Scotland and Wales and at least four from England.
- ✚ In future Council would meet on only 4 occasions each year.
- ✚ The committees of Council would comprise Council Members together with additional co-opted members.
- ✚ Such co-opted members should not be members of Congress but may be drawn from a variety of sources including consumer groups and professional bodies.
- ✚ Council would promote the wider involvement of service users and other independent groups through focussed involvement in 'issue specific' Task/Working Groups.
- ✚ The President of Council would be elected by the whole Council from amongst the registrant members.
- ✚ The Vice President would be elected by the whole Council from among the lay members.
- ✚ The Vice President would also fulfil the role of Chair of Congress.

DISCUSSION

9. The proposal that a Registrants' Congress should meet no more than twice a year is designed to underline the primacy of Council. The Congress would have no decision making powers over and above the election of registrant members. The key role of the Congress would be to provide a forum in which each regulated profession has a voice. Consideration might need to be given to the use of information technology to enable ongoing discussions amongst Congress members as a means of informing appropriately the work of Council.
10. A clear separation between the Council and Congress would ensure the maintenance of appropriate standards of corporate governance. This would be enhanced further by the fact that all registrant members of Council would be there to 'represent' (in the parliamentary sense) health professionals as a whole rather than on a profession specific basis.

11. The establishment of a Registrants' Congress would ensure that each regulated profession would have an equal opportunity to participate in the broader business of HPC (as distinct from the actual 'Council/Governing Body'). The inclusion of each regulated profession in the HPC Register under their agreed protected title would ensure easy and transparent access to the Register by the public.
12. The holding of separate elections for registrant members from the 4 countries would facilitate more appropriate consideration of country specific issues whilst at the same time maintaining the UK wide remit of the HPC. It may be that the devolved administrations would no longer require country specific Council membership from registrants given the enhanced country involvement in the Congress together with enhanced country specific membership of lay persons.
13. The number of Congress members elected by each regulated profession could be reviewed when the number of professions regulated goes beyond, say, 20/22.
14. Further discussions will need to take place should the government decide to allocate the task of regulating Healthcare Assistants to the HPC. It would seem unlikely that this additional responsibility could be undertaken without the creation of some type of parallel structure though the congress model has the potential to embrace such developments.
15. Having established the clear principle of representation of health professions as a whole on the Council/Governing Body, the congress model also has the potential to embrace a process of reducing the number of separate regulatory bodies.

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