

**Health Professions Council
Council 29th March 2007**

THE HEALTH PROFESSIONS COUNCIL STRATEGY

Executive Summary and Recommendations

Introduction

A Council Workshop has been arranged for the afternoon of Wednesday 30th May. The purpose of the Workshop will be to review and revise HPC's Strategy to incorporate the recommendations of the White Paper 'Trust, Assurance and Safety – The Regulation of Health Professionals in the 21st Century'.

A copy of the HPC's existing Strategy is attached for reference. The key parts of the document are Section V Strategy on page 15 and Section VI Strategic and Operational Issues to Resolve on pages 17 – 20.

The White Paper has indicated that there will be a partial review of the regulation of health professionals in 2011.

It is therefore recommended that HPC's Strategy shall be set down for the period 2007 – 2011, or the next four years.

Between today and the Council Workshop Council members are requested to review the White Paper, the existing Strategy, and the list of HPC's tasks, so that they can be discussed and resolved at the Workshop.

Decision

Between today and the Council Workshop Council members are requested to review the White Paper, the existing Strategy, and the list of HPC's tasks, so that they can be discussed and resolved at the Workshop.

Background information

None

Resource implications

None

Financial implications

None

Appendices

'Health Professions Council – the next three years' 1st March 2006

Date of paper

19th March 2007

Health Professions Council – The next three years

Park House, 184 Kennington Park Road, London

1st March 2006

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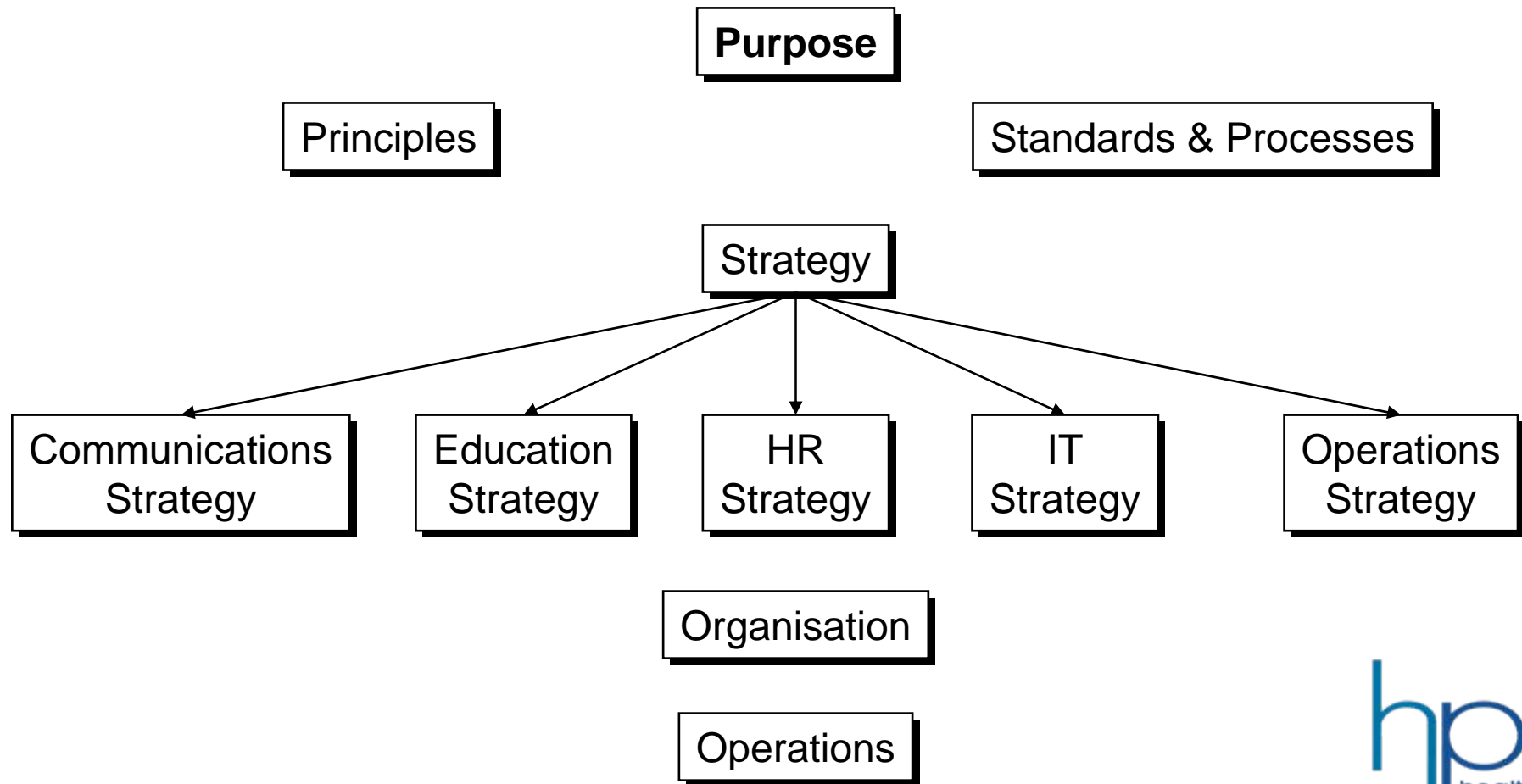
- I. Foreword**
- II. Purpose of HPC**
- III. Principles**
- IV. Standards & Processes**
- V. Strategy**
- VI. Strategic & operational Issues to Resolve**

Appendix I Organisation

I. Foreword

The HPC is an independent UK statutory regulator of healthcare professionals

- **Health Professions Order 2001**
 - Statutory Instrument (SI) established 1st April 2002
 - Rules and guidance support the SI
 - Initial Rules became operational 9th July 2003
- **Multi professional regulator**
 - Currently 13 Professions
 - Arts Therapists, Biomedical Scientists, Chiropodists & Podiatrists, Clinical Scientists, Dietitians, Occupational Therapists, Operating Department Practitioners, Orthoptists, Paramedics, Physiotherapists, Prosthetists & Orthotists, Radiographers, Speech & Language Therapists
- **Self financing**
- **Reports to the Privy Council**
 - Body corporate



The document outlines the Health Professions Council's (HPC) purpose, principles, standards & processes, strategy, issues to be resolved & organisation

- **Replaces HPC's Strategic Intent documents previously published in 2002 & 2004**
- **Covers the period March 2006 to March 2009**
- **The document will be revised when there are significant changes to the external & internal environment**
 - The recommendations of the Department of Health's reviews of medical and non-medical regulation, (the Foster & Donaldson reviews) are expected to be published in spring 2006

If implemented, the potential recommendations of the Foster & Donaldson reviews may fundamentally change the role & responsibilities of the HPC

- **Potential changes to the processes used to regulate healthcare professionals**
 - Remove some or all of the Investigating &/or Fitness to Practise process from regulators
 - Reduce the number of UK regulators of healthcare professionals
 - Introduce Revalidation
 - Harmonise legislation
 - Commence the statutory regulation of Complementary & Alternative Medicine, (CAM)
 - Appoint registrant to Councils as opposed to existing system of elections
 - Expand the responsibilities of CHRE
 - Statutory regulation of non-professional healthcare workers, (assistants)

- **Both reports expected to be published at the same time**
 - Public announcement expected Spring 2006

- **Amendments to the Health Act 1999 &/or Section 60 Orders will be required**
 - Spring 2008 earliest date for implementation of new Act

II. Purpose

The objective of the HPC is set down in Article 3 (4) of the Health Professions Order 2001

- ***“To safeguard the health and well-being of persons using or needing the services of registrants***
- **Registrants are the healthcare professionals regulated by the HPC**

III. Principles

HPC Stakeholders

- **Carers**
- **Clients:Patients:Users**
- **Consumer Associations**
- **Employers**
- **Government**
- **Higher Education Institutions**
- **Media**
- **Members of the Public**
- **Professional Bodies**
- **Prospective registrants**
- **Registrants**
- **Regulators**
- **Special Interest Pressure Groups**
- **Trade Unions**

The HPC uses six guiding principles

1. **Protect the public**

- Review & amend legislation, standards, guidance & procedures to ensure their relevance & appropriateness
- Have clear & well publicised complaints & appeals procedures for the public & registrants if dissatisfied with the decisions of the Council & Committees

2. **Communicate & respond**

- Ensure wide stakeholder dialogue
- Seek regular feedback from stakeholders & utilise the information & opinions received

3. **Work collaboratively**

- Collaborate with stakeholders to ensure wherever possible that their needs are met
- Enable best practices in any one profession to be accessed by all

The HPC operates using six guiding principles, (contd)

4. Be Transparent

- Establish fast & accessible procedures
- Undertake thorough consultations

5. Provide value for money & audit

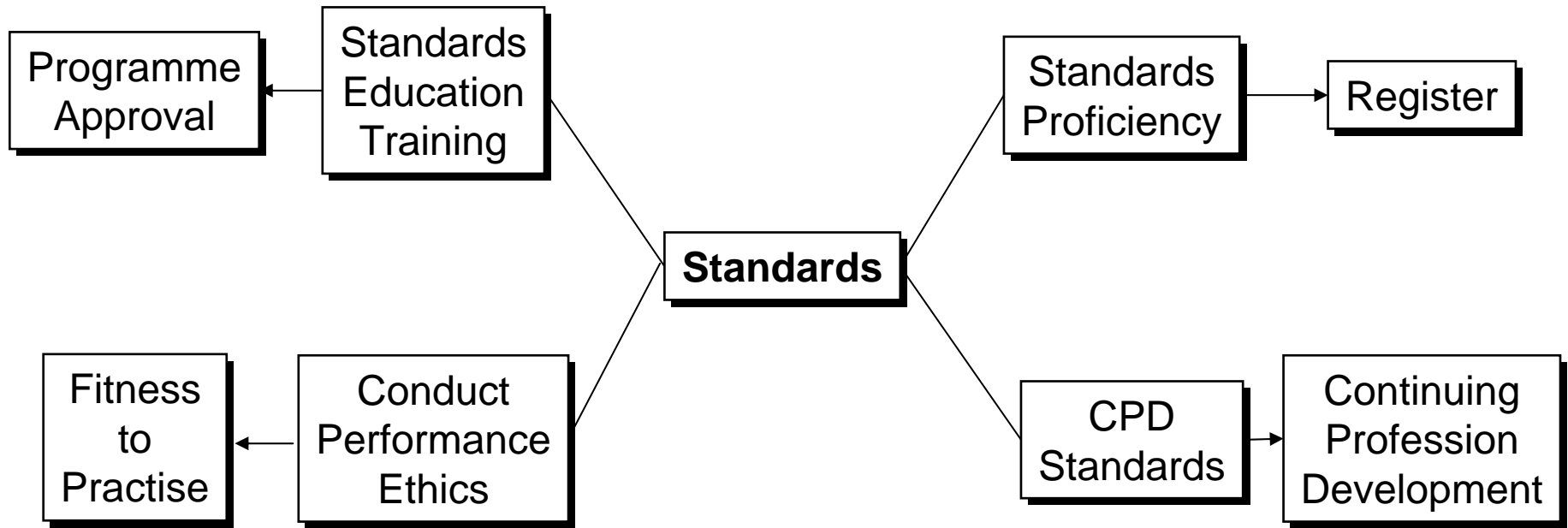
- Invest in systems & procedures to provide a value for money service for registrants & the public
- Be open & proactive in accounting to all stakeholders for the HPC's work

6. Deliver a high quality service

- Provide a unified service where issues are common & focus on individual activities which are significantly different between professions
- Support personal training & development of HPC employees as well as registrants

IV. Standards & Processes

Integrated process of setting & maintaining standards



The HPC achieves its objective by managing an integrated process of setting standards & operating processes to maintain the standards

- **Standards**

- Four sets of standards
 - ¶ Education & Training
 - ¶ Proficiency
 - ¶ Conduct, Performance & Ethics
 - ¶ Continuing Professional Development (CPD)
- The HPC must consult before establishing standards, rules & guidance
- HPC currently has no powers to undertake revalidation

- **Integrated processes**

- Approval of programs
- Registration
 - ¶ UK, International & Grandparenting
 - ¶ New professions
- Fitness to Practise Tribunals
 - ¶ Protection of title
- CPD assessment

V. Strategy

HPC's Strategy is to continually improve the organisation, influence the regulatory agenda & promote best practises

- **Improve**

- HPC's ability to manage increasing demand for its services by redesigning the organisation
- HPC's Governance via restructuring the Council
- Fitness to Practise tribunals by instituting new processes
- Protection of professional titles
- Public, Patient, Involvement (PPI) within HPC's processes
- Speed of the registration process

- **Influence Agendas**

- Education & training
- Government including four UK Departments of Health & EU
- Post registration qualifications
- Regulation of Assistants
- Revalidation

- **Promote**

- CPD
- Benefits of UK wide regulation but incorporating sensitivities to devolution
- Proactive regulation of Aspirant Groups
- Value & merit of professional led statutory regulation

VI. Strategic & Operational Issues to Resolve

Notwithstanding the outcome of Foster & Donaldson reviews, the HPC will resolve a number of outstanding strategic issues by March 2007

- **Size of Council**
 - Working with the Department of Health amend the HPO to limit the number of members of Council while maintaining stakeholder support
- **Home Country presence**
 - Investigate the benefits & cost of establishing a presence in NI, Scotland & Wales
- **Public Patient Involvement (PPI)**
 - Embed PPI in all appropriate HPC processes
- **Registration of Students**
 - Council to agree position
- **Professional Indemnity Insurance**
 - Council to review existing policy

Notwithstanding the outcome of Foster & Donaldson reviews, the HPC will resolve a number of outstanding operational issues by March 2007

- **CPD**
 - Following the publication of exemplars agree operational procedures including the sampling of CPD profiles
- **Equality & Diversity**
 - Following Council agreement on strategy in March 2006, the Executive to operationalise strategy including data collection & analysis
- **Fitness to Practise Tribunals**
 - Implement modern tribunal practices
 - Amend the guidance to complaints
- **Grandparenting**
 - Analyse the benefits of replace distributed system with regular partner group meetings
- **Health & Disabilities**
 - Implement recommendation following completion of consultation
- **Stannary Street**
 - Agree architectural plans & costs & commence redevelopment

Notwithstanding the outcome of Foster & Donaldson reviews, in the next two to three years the HPC intends to influence &/or promote the following strategic issues

- **Education**
 - Approvals process minimise necessity for multiple inspections
 - Increase influence
- **Europe**
 - Common platforms
- **Post registration qualifications**
- **Proactive regulation of Aspirant Groups**
 - To date the HPC has waited for aspirant groups to apply for statutory regulation
 - Establish criteria when the HPC will recommend regulation before application received
- **Protected titles**
 - Consider increasing number of protected titles for existing statutory regulated professions
- **Rules, Standards & Guidance**
 - Revise & update as required

Notwithstanding the outcome of Foster & Donaldson reviews, in the next two to three years the HPC intends to resolve a number of outstanding operational issues

- **Bichard**
 - Prepare to implement recommendations
- **Identity theft**
 - Ensure HPC adopts best practise
- **Value for money service**
 - Ensure that HPC continues to provide a VFM service
- **Audit systems & procedures**

Appendix I Organisation

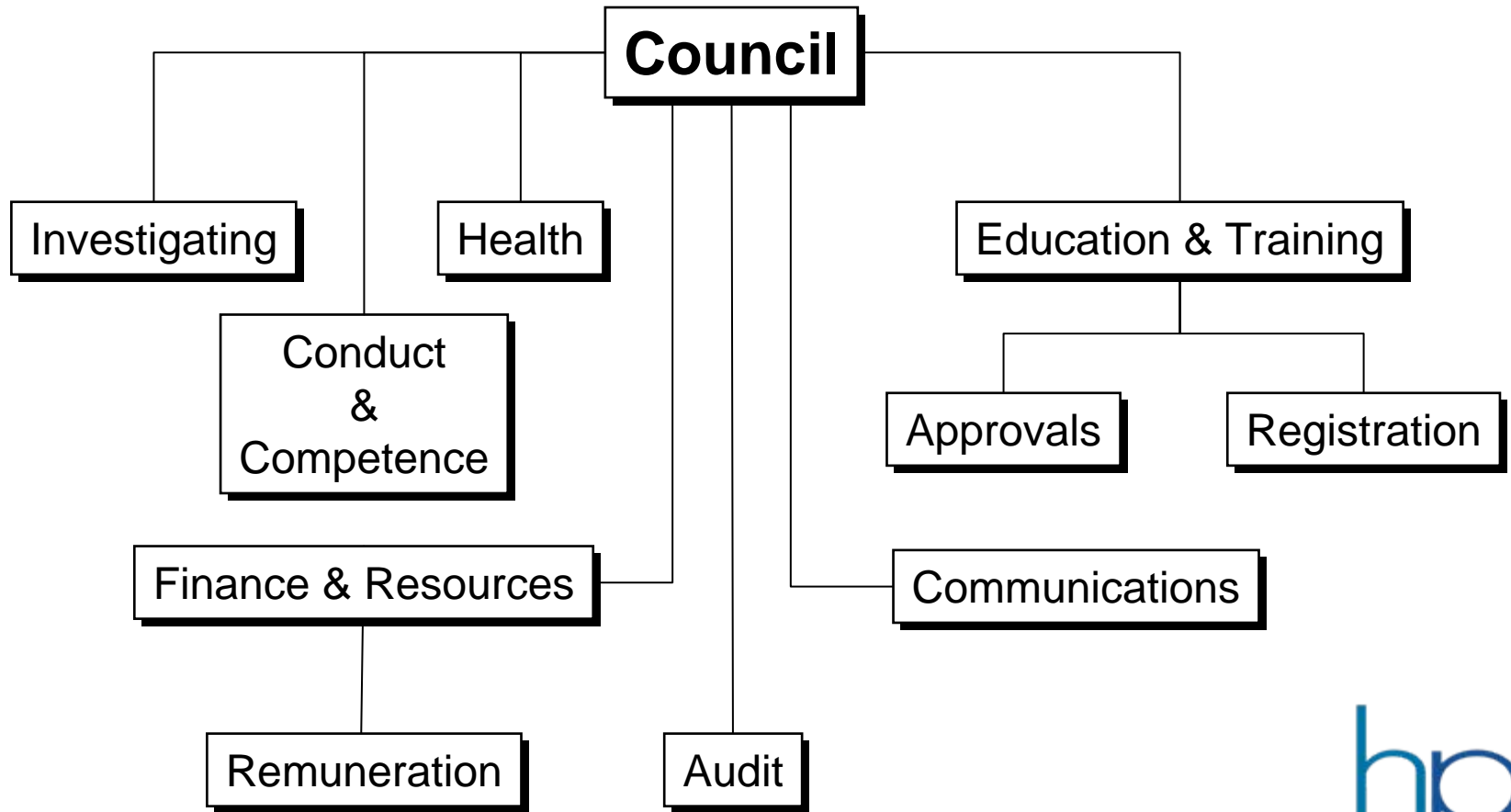
The HPC will deliver its strategy via the Council, the Committees & the Executive

- **Council**
- **Statutory Committees**
- **Non-Statutory committees**
- **Executive**
- **Partners**
- **Professional Liaison Groups (PLGs)**

The Council is responsible for ensuring that the functions as set down in the Health Professions Order (HPO) are delivered

- **Develops & is responsible for HPC's strategy & policy**
- **Sets certain standards & keeps them under review**
 - Standards of Conduct, Performance & Ethics
 - Standards of Proficiency
 - Standards of CPD
 - Requirements of registrants good health & character
- **Sets service standards**
- **Monitors progress against targets**
- **Maintain the financial well being of the HPC**
- **Ensures good corporate governance**
- **Works in partnership with the Executive via a Scheme of Delegation**

The Council has Statutory & Non-Statutory Committees



There are three Fitness to Practise Committees

- **Investigating Committee**
- **Conduct & Competence Committee**
- **Health Committee**

- **Advice to Council**
 - The Conduct & Competence Committee advises the council on its performance in relation to Standards of Conduct Performance & Ethics
 - Requirements of good health & character

- **Report**
 - On behalf of the Council drafts a report on the fitness to practise process, HPO Article 44

The functions of the Education & Training Committee

- **Education & Training Committee**
 - Sets and monitors the Standards of Education & Training
 - Advise the Council on the Standards of Proficiency
- **Responsible for developing & monitoring the Council's education strategy**
- **Reports**
 - Will provide feedback to educators via an annual report on the Approvals & monitoring process
 - Will publish a report on the CPD process
- **Home country different systems**

The Education & Training Committee has established two Non-Statutory Committees to assist it in discharging its functions

- **Approvals Committee**
 - Responsible for developing the process to approve & monitor programmes
- **Registration Committee**

The HPC has established three Non-Statutory Committees which report directly to the Council

- **Finance & Resources Committee**
 - Responsible for developing & monitoring the Council's
 - ¶ Annual budget
 - ¶ Financial investment strategy
 - ¶ Five year financial plan
 - ¶ Human Resources strategy
 - ¶ IT strategy
 - ¶ Risk mitigation strategy

- **Remuneration Committee**

- **Audit Committee**
 - Responsible for overseeing the role of the external & internal auditors

The Health Professions Order requires the HPC to inform & educate registrants & inform the public about its work

- **Communications Committee**
 - Non-statutory committee
 - Responsible for developing & monitoring the Council’s communications strategy
 - Ensures equitable access to all publications
 - Oversees HPC’s Patient/Public involvement strategy
- **HPC uses a range of communications techniques to raise awareness amongst its stakeholders**
 - “Listening Events”
 - Publication of brochures & leaflets
 - HPC web site
 - ¶ www.hpc-uk.org
 - ¶ Micro site www.hpc-uk.org
 - Electronic news letter
 - Market research

The Executive is responsible for a range of tasks

- **Responsible for day-to-day operations of the HPC**
- **Implements the Strategic Intent & annual plan**
- **Maintains service quality**
 - Documents processes
 - ISO 9001/2000
 - Customer service strategy
 - Plain English
- **Organisational growth**
 - Match the capacity of the organisation to demand
 - Invest in systems to build capacity
 - Increase resource, financial, systems and employees to maintain & increase service

The Executive works with Partners & uses Professional Liaison Groups

- **Partners**
- **Professional Liaison groups, (PLGs)**