

Council, 25 March 2010

Policy and Standards Department workplan 2010/2011

Executive summary and recommendations

### **Introduction**

A draft workplan for the Policy and Standards Department for April 2010 to March 2011 is attached for the consideration of the Council.

A revised copy of the Standards workplan which sits behind the Department workplan is included as an appendix.

### **Decision**

The Council is asked to discuss and agree the attached Department workplan and appended Standards workplan (subject to any necessary changes arising from the Council's discussion)

### **Background information**

None

### **Resource implications**

The resource assumptions for the attached draft workplan are detailed in the introduction and form part of the assumptions that make up the HPC five year plan.

### **Financial implications**

The financial assumptions of the attached draft workplan form part of the assumptions for the Policy and Standards budget for 2010/2011.

### **Appendices**

Standards workplan

### **Date of paper**

15 March 2010

**Policy and Standards Department**

**2010 / 2011 Workplan**

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**March 2010**

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# **1. Introduction**

## **1.1 This document**

This document has been drafted to set out work priorities for the financial year 2010/2011 and to provide a basis against which the work of the Policy and Standards Department ('the Department') can be planned, resourced and measured.

## **1.2 The Policy and Standards Department**

The Department's main responsibilities are:

- assisting the Council in developing strategy and policy;
- assisting the Council in setting and reviewing standards;
- assisting the Council in drafting guidance;
- managing and supporting Professional Liaison Groups (PLG);
- running consultations;
- managing the new professions, or 'aspirant groups' process;
- liaising with the Council for Healthcare Regulatory Excellence on their annual performance review, and other cross-regulatory projects; and
- ensuring consistency of approach across all HPC departments.

The regular Department activities to meet these responsibilities include researching and writing papers for the Council, Committees and PLGs, responding to correspondence and emails on policy matters and meeting with and presenting to stakeholders.

## **1.3 Policy and Standards planning**

The nature of the issues that the Department deals with are such that work undertaken will comprise of both planned projects and work which arises as a result of external factors, such as changes in legislation, changes to the professions, and other developments that are often unpredictable. Hence, in allocating resources, maintaining the ability to respond to the external environment is an important factor.

The priority projects outlined in this paper are projects with a statutory element such as work necessary to prepare for the regulation of new professions, which includes responding to government consultations and standards drafting work. The projects for 2010/2011 that as a result are of particular priority and have or have the potential to have significant resource implications include:

- The regulation of new professions, particularly work related to the regulation of psychotherapists and counsellors
- Revalidation
- Post-registration qualifications

This document explains in relation to each project area the nature of any external factors on the likely timetable, if applicable.

## **1.4 Resourcing**

The Department currently consists of five employees:

Michael Guthrie	Director of Policy and Standards
Megan Scott	Policy Manager
Charlotte Urwin	Policy Manager
Alison Dittmer	Policy Officer
Unfilled position	To be confirmed

The Director of Policy and Standards is responsible for devising and writing the Department workplan, and overseeing its resourcing and implementation, the day-to-day running of the department, managing and developing the Policy team, and the development of new projects.

The Policy Managers often take particular responsibility for a broad area of work and the projects in that area (e.g. standards) or work across different areas, taking responsibility for more complex projects or pieces of work and supporting the work of the Director of Policy and Standards. One of the existing Policy Managers is working predominantly on the revalidation project (see section 6.1).

The Policy Officers each take on a variety of different projects to enable them to gain a breadth of experience, including education, standards, Europe, and other areas of the Department's work. Their work comprises both responsibility for small projects and assisting the Policy Managers in undertaking tasks within their area of responsibility.

## **1.5 About this document**

The projects outlined in this document are structured into three areas: standards and guidance; regulation of new professions; and other projects.

## **2. Projects delivered in 2009/2010**

This section outlines some the projects successfully delivered in the last financial year.

### **Standards and guidance**

- The review of the standards of education and training was concluded with new standards and guidance becoming effective from the 2009/10 financial year.
- Amendments to the standards of proficiency for chiropodists and podiatrists to make the standards relating to anaesthetics and prescription only medicines compulsory were implemented.
- The review of the generic standards of proficiency was commenced.
- A minor amendment was made to standard five of the standards for continuing professional development.
- Guidance on health and character and on conduct and ethics for students was published.
- A review of the first standard of the standards of education and training, the threshold level of qualification for entry to the Register, was commenced.

### **New professions**

- The Department continued to participate in the cross-department project to bring practitioner psychologists into regulation. Standards of proficiency and the threshold level of qualification for entry to the Register for practitioner psychologists were agreed and standards published.
- The psychotherapists and counsellors PLG continued to meet, a consultation was held on the report of the PLG and the Council made initial conclusions about the potential regulation of psychotherapists and counsellors
- A consultation was held on the potential regulation of dance movement therapists and recommendations made to the Secretary of State for Health and Scottish Ministers as a result.
- The Department continued to participate in the cross-department project to bring hearing aid dispensers into regulation. The Department attended and delivered presentations at a number of meetings and events.

- The Council considered a paper discussing the outcome and implications of the Department of Health Extending Professional Regulation Working Group report. This fed into the Council's February strategy workshop where the Council considered papers looking at influencing the agenda; the purpose of the new professions process; and the licensing of support workers.

## **Other**

- A consultation was held on removing the health reference requirement for entry to the HPC Register.
- A Welsh Language scheme was developed and agreed for consultation.
- The Department co-ordinated HPC's CHRE performance review submission for 2009/2010 and participated in a number of CHRE projects.
- A project plan was put together for work to explore revalidation and a number of pieces of work completed, including commissioning the University of Durham to undertake qualitative and quantitative studies looking at the link between pre-registration education and training and subsequent fitness to practise action.
- The Department responded to 9 external consultations and 9 HPC external consultations were either commenced or concluded in 2009/2010.
- The Department attended numerous meetings with stakeholders and delivered presentations on a number of different topics including revalidation, CPD, the regulation of practitioner psychologists and the potential regulation of psychotherapists and counsellors.



### **3. Policy and Standards and the strategic intent**

The Department has a number of broad aims which link to the strategic objectives outlined in the Council's strategic intent for 2009/10 to 2014/15.

#### **3.1 Strategic objectives and Department aims**

The strategic objectives particularly relevant to the work of the Policy and standards Department in the projects it undertakes (and in joint working and supporting the work of other Departments) are:

- To increase understanding and awareness of regulation amongst all stakeholders.
- To build the evidence base of regulation.
- To proactively influence the policy agenda on regulation reforms.
- To ensure that our values and processes dovetail with the respective healthcare delivery agendas in England, Wales, Scotland and Northern Ireland.

The HPC, through the work of the Policy and Standards Department, seeks to contribute towards the fulfilment of these strategic objectives by achieving the following broad Department aims. These are grouped below under the headings of improve, influence and promote – the overarching 'themes' acknowledged in the introduction to the strategic intent.

Through the work of the Policy and Standards Department the Council aims to:

#### **Improve:**

- To continue to respond to changes in the external environment including the recommendations of the White Paper 'Trust, Assurance and Safety: The Regulation of Health Professionals in the 21<sup>st</sup> Century', published in February 2007, the recommendations of the Council for Healthcare Regulatory Excellence (CHRE).
- To review its standards, guidance and policies, to gain feedback, and to make improvements to ensure that these continue to reflect the Council's purpose and principles.
- To engage with and consult with stakeholders, and take account of their input in its work, to ensure that the HPC's work is informed by the wider healthcare and regulatory landscape, and that our knowledge of multi-professional regulation can be shared.
- To gather and analyse information collected via the consultation process, stakeholder engagement and other means and act upon it appropriately. This could include, for example, widely disseminating the outcomes of policy development or formal research to potentially interested stakeholders, feeding this information into the Communications strategy, and / or making changes to processes where appropriate.

- To continue to improve the way that healthcare professionals are regulated, by developing new guidance, new processes, or new requirements where appropriate.

**Influence and promote:**

- To build on its growing reputation as a respected voice within the policy arena of the regulation of healthcare professionals and other healthcare workers, and to use this reputation to pro-actively influence the external agenda, in the interests of protecting the public.

## **4. Trust, assurance and safety: the regulation of health professionals in the 21<sup>st</sup> century**

### **4.1 Introduction**

The White Paper, 'Trust, Assurance and Safety – The Regulation of Health Professionals in the 21<sup>st</sup> Century' was published in February 2007.

The White Paper was published as a result of the Chief Medical Officer's review of medical regulation, the parallel review of non-medical regulation (sometimes also called the 'Foster review') and the resulting consultation. The paper sets out the Government's vision and priorities for how the regulation of health care professionals should work in the future, in order to respond to increasing expectations of the public and other stakeholders.

Although published more than three years ago, the White Paper still remains an important driver for developments and debate in the professional regulatory arena, and hence for the Department's work.

The main project areas relevant to the White Paper in this financial year are:

- Revalidation
- Post-registration qualifications
- Removing the health reference as a requirement for entry to the Register
- Professional indemnity insurance
- Regulation of new professions
- Review of the new professions process

The White Paper said that a number of areas would be subject to further review in 2011, including changes of the regulators' governance arrangements and the number of regulators. 2010/11 is therefore an opportune time for the Council to review its progress against the conclusions and recommendations outlined in the White Paper and this is included as a piece of work in this workplan.

## **5. Standards and guidance**

The Department undertakes work to review existing standards where necessary and to write standards for new professions that are to be regulated by the HPC in the future.

The Department also produces guidance on its standards or on other standards related matters where this might help to explain the Council's processes and approach to its stakeholders.

The Council's standards workplan establishes the concept of ongoing and periodic review of the standards and sets out an indicative timetable for periodic standards review. It also sets out some broad principles for when the Council might consider publishing guidance on its standards. The Standards workplan has been updated and is appended to this workplan.

### **4.1 Standards**

#### **4.1.1 Review of the generic standards of proficiency**

In September 2009 and January 2010 a small group of the Education and Training Committee met to review the generic standards of proficiency. In doing so, the group took into account the comments on the existing generic standards we had received in recent consultations, including consultations on standards for practitioner psychologists and for psychotherapists and counsellors.

At its meeting in January 2010 the group considered whether minor changes were necessary to the existing standards or whether, in light of the feedback we received, more substantial changes were necessary. The group recommended to the Education and Training Committee an approach which would see the generic standards become more overarching and top level. The existing profession specific standards could then be augmented to include some of the existing detailed generic standards and to revise terminology to express standards in the correct profession-specific language.

The Education and Training Committee agreed and recommended to the Council the next steps for this piece of work at its meeting in March 2010. The Council will be asked to ratify the Education and Training Committee's decision at its meeting in March 2010.

#### **Timetable**

The ongoing timetable for this work is subject to Council approval. However, the outline timetable is as follows:

- A public consultation on the key generic standards between mid July and mid October 2010.
- Approval of new standards following consultation – December 2010.

- January 2011 to 2013 – rolling process to review profession-specific standards, consult and implement new standards.

#### **4.1.2 Threshold level of qualification for entry to the Register**

Standard one of the standards of education and training sets out the normal threshold level of qualification necessary for entry to the Register. Each time a new profession is regulated a consultation is held on the proposed threshold level for the group and the standards updated.

The Education and Training Committee and the Executive have identified that the purpose and function of the threshold level should be reviewed, in light of previous discussion by the Committee and at PLG and Council level, and in light of responses received to previous consultations about setting the level for new professions.

A number of points have been raised about the existing standard including:

- The purpose of the existing standard and its role in delivering safe and effective practice and public protection. In particular, how meaningful the standard is given its normative status.
- The factors to be taken into account in setting the threshold level for a new profession. In particular, whether it is possible to read across from the standards of proficiency to establish the level necessary to successfully deliver those standards.
- The question of whether the standards should be expressed in terms of levels linked to qualification frameworks rather than by the names of academic awards.
- The factors to be taken into account in considering whether the threshold level for an existing profession should be raised.

At its meeting on 10 March 2010 the Education and Training Committee did not reach a final decision as to the next steps of the review. A further paper is planned for the June 2010 meeting of the Committee.

#### **Timetable**

The timetable for this work is subject to the discussion and future decisions of the Council and Education and Training.

However, any change to the standard would require a public consultation and it will important to involve key stakeholders, including education providers, professional bodies and visitors, in any further work in this area.

### **4.1.3 Health psychologists' standards of proficiency**

The standards of proficiency for practitioner psychologists were published in July 2010. The standards were put together by a Professional Liaison Group and revised following a publication consultation which ran from December 2007 to February 2008. The standards include standards which apply to all seven domains of psychology practice and standards which are only applicable to each domain. For example, there are profession-specific standards which are applicable to health psychologists only.

The Division of Health Psychology of the British Psychological Society has raised an issue about one of the profession-specific standards for health psychologists only. The standard currently reads 'be able to integrate and implement therapeutic interventions based on a range of evidence-based models of formal psychological therapy, including the use of cognitive behavioural therapy'.

However, it has emerged that, although cognitive behavioural therapy may be one of the therapies covered in health psychology pre-registration education and training, it is not a routine or compulsory part of that entry education and training.

Although we would normally avoid making changes to the standards of proficiency until the end of a new profession's grandparenting period, the current standard has the potential to cause unnecessary difficulties in the approval of education and training programmes and in other processes in which the decisions are made using the standards.

In 2010/2011 a short consultation will take place on a proposal to amend this standard to read: 'be able to integrate and implement therapeutic interventions based on a range of evidence-based models of formal psychological therapy'.

### **Timetable**

Subject to the approval of Council, a consultation will take place for 3 months from April 2010, with the Education and Training Committee and Council asked to consider the outcomes of the consultation at their meetings in September or October 2010.

Subject to the outcome of the consultation, the change to the standard might be effective from the date of the Council's decision.

## **4.2 Guidance**

### **4.2.1 Whistleblowing**

At its meeting on 20 May 2009 the Council considered a paper which outlined a small number of recent concerns raised about service standards in NHS hospitals. The paper also referred to a fitness to practise case considered by the Nursing and Midwifery Council (NMC) which had received some media attention.

The Council agreed to consider producing guidance on whistleblowing / reporting concerns, subject to a further paper on the topic. Since the Council's decision, the NMC has undertaken work with a range of stakeholders looking at this issue and is consulting on draft guidance. The Executive plans that the Council should consider a further paper on this topic which will include looking at the NMC's draft guidance and considering whether similar HPC guidance would be appropriate or necessary.

**Timetable**

The Council will consider a discussion paper at its May 2010 meeting.

## **5. Regulation of new professions**

The regulation of aspirant groups by the Council is an important area of work, particularly given the clear message given by the White Paper that there will be no additional regulators created, and that the HPC is likely to be the regulator for future groups coming into regulation.

The White Paper identifies psychotherapists, counsellors and healthcare scientists as the next professions that are the highest priority for regulation. Practitioner psychologists became regulated by the HPC on 1 July 2009.

The report of the Department of Health Extending Professional Regulation working Group was published in July 2009 and discusses future government policy in extending regulation to new groups. This is likely to influence the Council's strategic thinking and the work of the Department in the coming year.

The work that the Policy and Standards Department will do in this area will be divided into two areas:

- The provision of information to groups interested in regulation or seeking to apply to the Council, and liaising with those who have already applied to the Council. This includes producing written information and formal speaking commitments.
- Preparing for the regulation of groups who are mentioned in the White Paper, including the process of preparing standards and being part of any cross-department operational projects to open a new part of the Register.

The timing of work around drafting standards is heavily dependent upon the priorities of the UK departments of Health, and the timetable for legislation, which is subject to change. Hence, the work below has been planned as flexibly as possible, in order to make pragmatic decisions about allocating resources. External developments in the areas of new professions may be relatively limited in the coming financial year given a likely May 2010 general election.

### **5.1 New professions**

#### **5.1.1 Hearing aid dispensers**

Hearing aid dispensers (also known as hearing aid audiologists) are a profession currently regulated by the Hearing Aid Council (HAC). The required Section 60 Order under the Health Act 1999 has now been approved by parliament; the Hearing Aid Council is due to be abolished and its professional regulatory functions transferred to the HPC on 1 April 2010.

The Council has agreed the standards of proficiency, threshold level of qualification for entry to the Register and the registration cycle for hearing aid dispensers.



The Department has continued to work with internal colleagues on the project team for this work and to meet with and present to hearing aid dispensers and other stakeholders with an interest in the regulation of this profession. This has included close liaison with the Hearing Aid Council, producing frequently asked questions for the website, delivering training for registration advisors and supporting the Communications team in delivering the communication strategy.

In 2010/2011, hearing aid dispensers will be HPC registered. The Department will continue to support internal colleagues and liaise with stakeholders in the field in the period following the registration of hearing aid dispensers.

### **Timetable**

Ongoing early 2010/2011.

#### **5.1.2 Psychotherapists and Counsellors**

A Professional Liaison Group (PLG) was established in 2008 to discuss and make recommendations to the Council about the regulation of psychotherapists and counsellors. The PLG met five times over 8 days to make recommendations about the structure of the Register, protected titles, voluntary registers, grandparenting, education and training and standards of proficiency. A consultation was held on the conclusions and recommendations of the PLG between July and October 2010.

At its meeting in December 2010, the Council discussed the responses to the consultation and agreed a number of initial conclusions about how psychotherapists and counsellors might be regulated (subject to a policy decision by Government and subsequent parliamentary approval). The Council also identified a number of areas which needed to be explored further, including the issue of differentiation between psychotherapists and counsellors and whether those practitioners qualified to work with children and young people should be specifically identified in the structure of the Register. The Council also identified that further work would be necessary on standards of proficiency, after the completion of the current review of the HPC's existing generic standards of proficiency.

At its March 2010 meeting, the Council will consider a workplan for any future meetings of the PLG and any future stakeholder engagement work.

### **Timetable**

The timetable for this work is subject to the Council's discussion and decision at its March 2010 meeting.

#### **5.1.3 Healthcare scientists**

In 2008/2009, the Council responded to the UK Health Departments consultation on Modernising Scientific Careers, a project looking at reforming the career structure for scientists working in healthcare.

Since 2003, the Council has recommended the following healthcare scientist professions for regulation to the Secretary of State:

- Clinical perfusionists (September 2003)
- Clinical physiologists (October 2003)
- Clinical technologists (May 2004)
- Medical illustrators (May 2004)
- Maxillofacial prosthetists and technicians (September 2005)

The Modernising Scientific Careers project is still ongoing.

In 2010/2011, the Executive will continue to meet with the project team and other stakeholders about this area. The further work that might be necessary in this area will be dependent upon the progress of the Modernising Scientific Careers project. Depending on the outcomes, this might include beginning the process of putting together standards of proficiency.

#### **Timetable**

The timetable for the work in this area is subject to the outcomes of the Modernising Scientific Careers project.

#### **5.1.4 Acupuncturists, medical herbalists and traditional Chinese medicine practitioners**

In July 2008, the Steering Group for the statutory regulation of acupuncture, herbal medicines, traditional Chinese medicine and other traditional medicine systems practising in the UK reported to Ministers. The Group recommended that these professions should be regulated by the HPC. In September 2008, the Council considered the Group's report and recommended the regulation of these groups to the Secretary of State.

In November 2009, the Department responded to the Department of Health consultation on the regulation of these groups. The consultation followed the publication of the report of the Department of Health Extending Professional Regulation Working Group and looked broadly at the regulatory options including statutory regulation and a licensing model.

In 2010/2011, the Department of Health may publish the outcome of the consultation and indicate the potential future direction of government policy in this area.

Dependent upon the outcome of the consultation and any subsequent decisions, the Department might begin planning work to produce standards of proficiency and agree the threshold level of qualification for entry to the Register.

#### **Timetable**

Ongoing 2010/2011.

### **5.1.5 The regulation of support workers / occupations**

The White Paper discusses the regulation of healthcare support workers, and in particular the Scottish pilot project to implement employer-led regulation.

The White Paper also says that the Government 'will consider whether there is sufficient demand for the introduction of statutory regulation for any assistant practitioner roles at levels 3 and 4 on the Skills for Health Career Framework.'

This is in accordance with the Council's view that some form of statutory regulation is necessary for these groups, in the interests of public safety.

The Department will keep abreast of developments in this area and continue to keep the Council informed.

#### **Timetable**

Ongoing 2010/2011.

### **5.2 Review of the new professions process**

The Council has to date considered 12 applications for the regulation of new professions, and has recommended all of these groups for regulation to the Secretary of State for Health. In the same period, only two new professions have come on to the HPC Register.

The report of the Extending Professional Regulation Working Group was published in July 2009 and looks at the question of how decisions about extending regulation should be made. In particular, the report suggests a new 'Gatekeeper' role to decide on the basis of a thorough assessment of risk and readiness for regulation, the relative merits of regulating different groups. The response to the report from Ministers in the four countries made no conclusions about the feasibility of such a role, but did conclude that the HPC should continue its process for considering readiness for regulation in the interim period. In late 2009, the Finance and Resources, Communications and Education and Training Committees and the Council considered a paper from the Executive discussing the potential implications for the HPC and the new professions process of the Extending Professional Regulation report.

The Council also considered a paper about the purpose and future role of the new professions process at its February 2010 strategy workshop.

In 2010/2011, the Department plans to review the new professions process, new professions criteria and guidance notes in light of the Council's experience of handling applications from aspirant professions and changes to the external environment. This will include reviewing whether the current arrangements for considering applications directly from representative organisations should continue; reviewing the relevance and applicability of the criteria; and rewriting the guidance notes, as appropriate. Additional guidance might also be considered, to cover the process of statutory regulation from the beginning, including the new professions process and continuing as a professional body after regulation.

## **Timetable**

The timetable for this work is subject to the agreement of the Council but the following outline timetable is anticipated:

- Council – July 2010 meeting. The Council will be asked to consider a paper about the overall approach to the review and will be asked to discuss and agree in principle the process that should be followed in making recommendations about the regulation of new professions.
- September and December 2010 meetings. The Council will consider subsequent papers reviewing the existing criteria and guidance.
- A consultation might be held on the revised new professions process, criteria and guidance early in the 2011/2012 financial year.

### **5.3 Aspirant professions liaison work**

In 2009/2010, the Council considered two applications via the new professions process and recommended the regulation of both groups.

The Department also liaised with a number of aspirant professions about the new professions criteria. At the time of writing, at least two further aspirant professions were in the process of putting together an application to the Council.

Throughout 2010/2011, the Department will continue to liaise appropriately with aspirant groups. This includes responding to requests for meetings, identifying groups to meet with and drafting information for publication on the HPC website. This liaison work applies to groups who have applied to the Council, and also those groups that have not and are considering doing so.

In addition, the Department will liaise with any group wishing to make an application to the Council this year, provide feedback on draft applications where helpful and will score the application against the 10 existing new professions criteria to aid the Council's consideration.

## **Timetable**

Ongoing 2010/2011.

## 6. Other projects

### 6.1 Revalidation

In 2008, the Continuing Fitness to Practise Professional Liaison Group (PLG) published its report. The report was approved by the Council at its October 2008 meeting. The report concluded that whilst an additional layer of inspection was not indicated at this time, further work was necessary, in particular to explore the link between pre-registration education and training and subsequent fitness to practise action.

In December 2008, the Department of Health Working Group for Non-Medical Revalidation published principles for revalidation and asked each regulator to respond, explaining their proposals and how they met the principles.

In May 2009, the HPC received a grant of £360,000 from the Department of Health to explore the evidence which will inform any revalidation system; and the potential feasibility of possible models of revalidation. A Policy Manager is in place to deliver the revalidation project.

The following projects form part of that work. Some of the projects are ongoing from 2009/2010.

- The link between conduct during pre-registration education and training and subsequent fitness to practise action (external research commissioned in 2009/2010).
- Piloting a pre-registration education and training 'professionalism tool' (external research commissioned in 2009/2010).
- Analysis of HPC's fitness to practise data to identify trends regarding fitness to practise concerns across the Register.
- Analysis of HPC's CPD audit profiles to identify trends regarding CPD profiles and assessment results across the Register
- Literature review of the fitness to practise of the professions regulated by the HPC.
- Literature review of the fitness to practise trends regarding professions other than those regulated by the HPC.
- Review of existing revalidation processes that have been implemented by international regulators.
- Review of existing revalidation processes that have been implemented or are being developed by other regulators.
- Review of patient feedback tools currently being developed by other health regulators.

The content of these projects is set out in more detail in the Council paper 'Revalidation project update' (10 December 2009). However, some of the key activities involved include managing relationships with externally commissioned researchers; collating data from the fitness to practise process and from the outcomes of CPD audit; undertaking desk research; meeting

with other regulators and professional bodies to discuss revalidation; undertaking a fact-finding trip to regulators in north America; and producing project briefs, papers and reports at regular intervals for the Council.

### **Timetable**

The timetable for this project is ongoing through 2010/2011.

Some key milestones are:

- Successful delivery of a qualitative study looking at the link between pre-registration education and training and subsequent fitness to practise action; reports from initial stages of quantitative study piloting the use of professionalism measures – by end of 2010/2011.
- Successful delivery of research looking at data from CPD audits and fitness to practise data – ongoing and by end of 2010/2011.
- Fact-finding trip undertaken to international regulators to explore other models of revalidation; a full report will be written and presented to the Council - trip by June / July 2010; report by September 2010.

Regular updates will be provided to the Council.

## **6.2 Post-registration qualifications**

In 2008/2009, the Education and Training Committee discussed this area, in light of a discussion meeting held in February 2008. At its meeting in December 2008, the Committee agreed that the Register should only be annotated where annotation would improve the protection of the public and where a qualification permitted an extension of scope of practice; and that the HPC should directly approve programmes leading to annotation of the Register.

The Committee agreed that a position statement should be produced and considered by the Committee following the publication of the report of the Department of Health Extending Professional Regulation Working Group. The Committee might then consider the qualifications it considers are priorities for annotation of the Register.

At its meeting in March 2010, the Education and Training Committee will be asked to agree an approach in this area. In particular, the Committee will be invited to consider whether the Executive should begin to undertake work to explore the feasibility of annotating the Register for podiatric surgeons and neuropsychologists.

In February 2009, the Department provided a submission to the Council for Healthcare Regulatory Excellence (CHRE), who have been commissioned by the Department of Health to look at the regulators' approach to 'advanced practice'. The CHRE has also been commissioned by the Department of Health to look at the issue of distributed regulation with a report due in April 2010. These reports will be taken into account in the planned work in this area.

### **Timetable**

The Education and Training Committee agreed a timetable for this work at its meeting in March 2010, including a further paper in June 2010 and a subsequent consultation on an approach to making decisions about the annotation of the Register; and a proposal that qualifications in podiatric surgery and neuropsychology might be annotated on the HPC Register.

The Council will be asked to ratify the Education and Training Committee's decision at its March 2010 meeting.

## **6.3 Removing the health reference as a requirement for entry to the Register**

At its meeting in November 2009, the Education and Training Committee agreed to consult on a proposal to remove the existing health reference requirement for entry to the Register and replace it with a self-declaration. This decision was made as a result of review of the existing requirement and in light of reports by the Disability Rights Commission (replaced by the Equality and Human Rights Commission) and the Council for Healthcare Regulatory Excellence into health and registration.

If agreed, this change would bring the requirement for entry to Register into line with the existing requirement for renewal of registration. The consultation opened on 4 January 2010 and will close on 9 April 2010.

### **Timetable**

A timetable for this work has been agreed by the Education and Training Committee and the Council.

The Education and Training Committee and the Council will consider the outcomes of the consultation at their meetings in June and July 2010. If the change is agreed, a further consultation would be held from August 2010 on relevant amendments to the 'Guidance on health and character', with implementation of the change anticipated in February / March 2011.

### **6.4 Professional indemnity insurance**

The 2007 White Paper says that: 'In response to a government initiative, indemnity insurance is also becoming a requirement.' Professional indemnity insurance was also mentioned in the Council for Healthcare Regulatory Excellence's performance review report for the Nursing and Midwifery Council.

In early 2009 the Department of Health indicated that it might seek to introduce compulsory professional indemnity insurance for the professions regulated by the HPC in forthcoming legislative amendments. In March 2009 the Council considered a paper from the Executive on professional indemnity insurance and the Council identified a number of potential problems if a compulsory requirement was to be introduced.

In May 2009, following concerns raised about the impact that a compulsory requirement might have upon independently practising midwives, the Department of Health decided to review its policy. A review group has been established and a member of the Executive has attended a stakeholder meeting. The timetable for the review includes further engagement with stakeholders early in 2010 with a report to the Secretary of State in May 2010.

If the Department of Health introduces legislation to make professional indemnity insurance a compulsory requirement, the Policy and Standards Department will work with the Operations Department to ensure that the HPC is compliant with the new legislation in a timely manner.

### **Timetable**

The Executive will continue to attend and participate as appropriate in any further meetings on this issue. A further paper will be brought to the Council following the publication of the review group's report.



## **6.5 Welsh language scheme**

In 2009/2010 the Executive undertook work to develop a Welsh language scheme for HPC. The draft scheme brings together existing practice across the organisation to explain how the HPC meets the requirements of the Welsh Language Act to treat the English and Welsh languages on an equal basis.

The Council approved a draft scheme for consultation at its meeting in February 2010. This work was delayed because of a delay in gaining the necessary approval from the Welsh Language Board. It is anticipated that the consultation will take place between April and June 2010 with final sign off at the September 2010 Council meeting.

### **Timetable**

A three month consultation will take place following Welsh Language Board approval. The HPC is required to ensure that the consultation document is available in both English and Welsh.

Following the consultation the results will be analysed and the Council invited to invite to approve a final copy of the scheme. The consultation analysis and final scheme will need to be approved by the Welsh Language Board prior to publication.

## **6.6. Review of fitness to practise decisions**

At its meeting on 25 February 2010, the Fitness to Practise Committee approved an approach to reviewing the decisions reached by panels of the Practice Committees.

The review is aimed at providing a systematic way through which the Executive can review the decision making quality of panels, including checking adherence to the applicable law and to HPC policy in a given area, rather than 'second guessing' or 'going behind' the decisions of panels. It is hoped that this assessment might feed into refresher training for panels as well as flagging areas where further policy development would be helpful.

The review will involve completing an audit form for each decision. The audit forms will then be reviewed a report written.

The forms reviewing case to answer decisions by the Investigating Committee will be completed by the relevant Fitness to Practise Case Manager. The report on those forms will then be written by a member of the Policy and Standards Department

The forms reviewing final panel decisions will be completed by a member of the Policy and Standards Department who will also write a report against those forms.

This project will assist the Fitness to Practise Department to review an important part of its work by providing a more 'arms length' assessment of decisions reached by panels.

## **Timetable**

Ongoing 2010/2011.

Reports are planned for the Fitness to Practise Committee in November 2010.

### **6.7 Health for health professionals**

In 2008, the Department of Health in England established a working group looking at health issues for professionals which affect their ability to practise. This work has been primarily focused on establishing a pilot specialist health referral service for doctors. The aim is that early intervention will prevent health problems from deteriorating and affect doctors' ability to remain in practise. The working group consisted of a broad range of stakeholders including regulators and employers and the HPC was represented on this group by Chair of the Council.

The report of the working group should be published in March or April 2010. Whilst the pilot project is focused on doctors, the report is likely to make more general conclusions about the regulators' approach to issues related to health. Following the publication of the report the Executive plans to produce a paper for the Council discussing the implications of the report for the HPC.

## **Timetable**

A paper will be considered by the Council following the publication of the health for health professionals report.

### **6.8 Alternative mechanisms for resolving disputes**

At its October 2009 away day the Council discussed the potential role of mediation or alternative dispute resolution (ADR) in fitness to practise proceedings. The Council discussed the purpose of mediation and identified a number of questions and issues that might need to be explored further. The Fitness to Practise Department has identified this as a subject on which further research might be helpful.

The topic of mediation, its role in fitness to practise proceedings and the suitability of HPC's fitness to practise proceedings has also been the subject of recent debate in the psychotherapy and counselling field.

This piece of work will look broadly at alternative ways of resolving disputes or complaints between registrants and the public, including, but not limited to, exploring processes for mediation and ADR. This work will explore whether such arrangements have a place in the fitness to practise process or whether there are other steps that the HPC could take in order to help 'resolve' issues and concerns about registrants which fall short of impairment of fitness to practise.

## **Timetable**

This work will include:

- An externally commissioned literature review of the material available in this area. This will include exploring any evaluations of the benefits

and usefulness of the mediation, ADR and conciliation processes adopted by other organisations. It is planned that the literature review will be completed by August 2010.

- A stakeholder engagement event is planned for September 2010. This event is planned to build upon the discussion of the Council at its away day in October 2009 by holding an event to engage with a wider group of stakeholders across the professional regulatory field, which might include professional bodies; patient and consumer advocacy groups; and other regulators, both professional and service related, in healthcare and elsewhere. The event would be discursive and deliberative in nature with the aim of seeking the wider views of the professional and regulatory field on the principle of mediation, ADR and other ways of resolving disputes, as well as debating the challenges of implementing such approaches. It is planned that this event will take place in late September 2010.
- The Policy and Standards Department and Fitness to Practise Department will work together to carry out ongoing reviews of no case to answer and not well founded decisions. This will assist in identifying those cases where an alternative method of resolving complaints might be helpful. It is planned that this should be ongoing with a report to the Fitness to Practise Committee at its November or December 2010 meeting.
- Following the delivery of the points above and on the previous page, the Executive will consider the outcomes of the project and put together a discussion paper for the Fitness to Practise Committee in November / December 2010 looking at the various options and recommending the next steps.

### **6.9 Fees rise consultation**

The current registration fee is £76 per year. The Council is required to consult each time it proposes to change the level or structure of the registration and scrutiny fees. An amendment to the Registration and Fees (Rules) Order of Council 2003 is also required before any change to the fees can be implemented.

The Finance and Resources Committee and the Council considers the five year plan each year and keeps under review whether changes to the current fee levels are necessary.

If a fees rise is proposed, the Department will work with internal colleagues to put together a consultation document. It will also analyse the responses to any consultation and present the findings to the relevant Committees and to the Council.

### **Timetable**

Subject to decisions taken by the Finance and Resources Committee and the Council.

### **6.10 CHRE performance review**

Every year, the Council for Healthcare Regulatory Excellence (CHRE) reviews the performance of all nine health regulators. Assembling the HPC's submission to the performance review is co-ordinated by the Department. This process involves submitting a report to CHRE, attending meetings, providing additional information as required, and approving the final report(s).

The CHRE is consulting from January to April 2010 on revised standards and process for the performance review. The changes proposed appear relatively minor and include moving the standards to a more outcome-based approach. If agreed, the new standards and process would apply for the 2010/2011 performance review.

### **Timetable**

The Executive will respond to the CHRE consultation in April 2010.

The performance review for the financial year 2010/2011, if similar to that of last year, will involve submitting the initial report to CHRE in December 2010, with the results of the review being published in June / July 2011.

### **6.11 CHRE commissions and projects**

The CHRE is often commissioned by the Department of Health to produce reports on regulatory topics and also undertakes projects which arise from the performance review.

Typically the CHRE will either seek to meet with members of the Executive to discuss the project they are undertaking or will invite the regulators to respond to a series of questions, normally based on a CHRE discussion paper. The CHRE will then consider all the responses before producing a final report which is published on their website. Submissions are normally written by the Policy and Standards Department with input from colleagues in other Departments. The Education and Training Committee and the Council have considered papers as a result of the CHRE reports in the last year.

The Executive has responded to the following CHRE projects:

- Protecting the public from unregistered practitioners
- Should the regulators receive the outcomes of student fitness to practise committees
- Maximising the contribution of regulatory bodies' registers to public protection
- Distributed regulation
- Healthcare for people with disabilities
- Handling complaints – sharing the registrant's response with the complainant
- How regulatory bodies approach the problem of data misuse

- Scope for sharing functions amongst the regulators
- Advanced practice
- Regulatory bodies health requirements for registrants
- Quality Assurance of Undergraduate Health Education

### **Timetable**

Ongoing – The Department will continue to participate in CHRE projects and will update the Education and Training Committee and the Council as appropriate. In particular:

- The Education and Training Committee will consider a paper on the CHRE report on receiving the outcomes of student fitness to practise committees at its meeting in June 2010.
- The Council will consider a paper on the CHRE report on the registers of the regulatory bodies at its meeting in May 2010.

### **6.12 European Union**

In 2009/2010, the Department continued to attend meetings of the Alliance of UK Regulators in Europe (AURE) and Health Professions Crossing Borders (HPCB) to keep up to date with developments in Europe and share information between European Regulators. Updates on work in Europe have in the past been made to the Education and Training Committee and the Council.

In 2010/2011, the Department will continue its involvement in work in this area and will:

- continue membership of the Alliance of UK Health Regulators in Europe (AURE), as an effective way of making shared UK regulatory issues heard in Europe;
- continue to implement and review the recommendations from the European conference on Healthcare Professionals Crossing Borders, October 2005. This includes working with colleagues in European competent authorities around implementing the next steps of the consensus, particularly around sharing information in Europe;
- continue ongoing updating and development of [www.healthregulation.org](http://www.healthregulation.org) as a worldwide resource for all regulators to enable effective sharing of information, particularly around fitness to practise;
- put together a strategy / workplan document articulating the objectives that the Council seeks to achieve in its work in Europe and outlining any ongoing work to meet those objectives.

### **Timetable**

Ongoing 2010/2011.

### **6.13 Stakeholder liaison**

The Department will continue to work with the Chief Executive, and the Communications Department to ensure a consistent and strategic approach to stakeholder relationships.

In particular, a joint approach by the Department and the Communications Department in making dedicated trips to one or more of the four countries over several days in the last two financial years has been very successful in building and developing new and existing relationships respectively. Further to these meetings, contacts have been followed up, areas of common interest have been identified, and working relationships improved.

In 2010/2011, the Department is likely to continue to work with the Communications Department to continue regular visits to stakeholders in the four countries. These contacts are complementary to the regular meetings with government representatives from all four home countries undertaken by the Chief Executive and Chair of the Council.

#### **Timetable**

Ongoing 2010/2011

### **6.14 Continuing Professional Development (CPD) sample profiles**

The Department will continue to work with the professional bodies to produce sample profiles. We have now published at least one sample profile for 13 parts of the HPC register (with the exception of practitioner psychologists). However, we have not to date published sample profiles for art or music therapists.

Profiles are drafted by professional bodies and then checked by a member of the Department and three volunteers from the Education and Training Committee to ensure that they are of a good standard for publication. Feedback is provided to the authors and the profiles redrafted. Profiles often go through two or three drafts before they are approved for publication.

We are currently working with the representative organisations in the following professions to produce sample profiles:

- Art therapists
- Dietitians
- Hearing aid dispensers (due to become regulated by the HPC 1 April 2010)
- Music therapists
- Practitioner psychologists
- Clinical scientists (cytogeneticists)

#### **Timetable**

Ongoing 2010/2011.

### **6.15 Safeguarding vulnerable groups**

Legislation is being introduced to implement the recommendations of the Bichard report around the protection of children and of vulnerable adults. This is being implemented via the Safeguarding Vulnerable Groups legislation in England, Wales and Northern Ireland, and the Protection of Vulnerable Groups legislation in Scotland.

This legislation will create two barring systems, which are intended to prevent individuals from working with children and / or vulnerable adults if they are considered not safe to do so. It is important that HPC works with these new barring arrangements to fully understand the impact that these will have on our processes, particularly for registration, and the interaction with our fitness to practise process.

The Department has worked with the Fitness to Practise Department to respond to initial consultations on the setting up of barring arrangements and the Department will continue to be part of the cross-department project group for implementation, providing research and recommendations on ways forward. The Department will keep the Council informed of developments in this area as appropriate.

#### **Timetable**

Ongoing 2010/2011.

### **6.16 Consultation responses**

The Department will continue to respond to other organisations' consultations that are directly concerned with health professionals' regulation, and will aim to respond to those relevant consultations on issues related to health, consumer issues, and regulation more broadly.

Responses to consultations relating to the regulation of new professions and other consultations by the UK Departments of Health, and other government departments salient to regulation and the HPC's role, will be priorities for the Department.

#### **Timetable**

Ongoing 2010/2011.

### **6.17 Briefing papers**

The Department aims to keep stakeholders, both internal and external, including Council and Committee members, well informed about policy developments in the external environment and the HPC's view about these.

The Department also needs to develop ways of working which will ensure that information is easily accessible and knowledge retained within the Department. Such briefing notes might also be helpful for the Chair of Council, other Council members and the Chief Executive in undertaking external meetings and speaking commitments.

In 2010/2011 the Department aims to produce a small number of 'briefing papers' on discrete topics in order to ensure that policy developments are widely disseminated. For example, we plan to produce a briefing note on the structure of the NHS in England, Scotland, Wales and Northern Ireland in order to assist other colleagues in their interaction with stakeholders and ensure that the appropriate terminology is used. Such briefing papers might be posted on to the Council member's extranet or included as papers to note at Council or Committee meetings.

**Timetable**

The timetable for this area of work will be ongoing and dependent upon need and the other projects outlined in this document.

**6.18 Review of White Paper recommendations**

The 2007 White Paper identified a number of areas, including the governance arrangements of the regulators and the number of regulators which should be reviewed by 2011.

As the White Paper is now four years old, 2010/2011 seems an appropriate point for the Council to review the conclusions and recommendations of the White Paper; to review the progress made by Government / the HPC in relation the conclusions and recommendations; and to review whether any further work is necessary.

The Council will be asked to discuss a paper which will look at all the conclusions and recommendations against the progress made and work undertaken by the HPC to date.

**Timetable**

A paper will be drafted for the Council meeting in September or October 2010.



## **7. Department improvements**

In 2010/2011 the following pieces of work are planned to review and improve the operation of the Department:

### **7.1 Review of consultation methodology and analysis**

In May 2008 the Council considered a paper from the Executive reviewing the HPC's consultation process. The Council agreed a series of principles for future consultation work as a result. The Executive also made changes to the information about consultations available on the website and put together a more standardised format for information about HPC and consultations for inclusion in consultation documents.

In 2009/2010 the consultation on psychotherapists and counsellors received more than 1,100 responses. We have also seen a general increase in responses to other consultations where the topic is widely applicable across the regulated professions. As the HPC regulates more professions it is likely that the number of responses received to consultations will continue to increase overall and it is important that arrangements are put in place to allow for thorough quantitative and qualitative analysis. The current approach can be very resource intensive if high volumes of responses are received.

In 2010/2011 the Department plans to internally review the approach used by the Department to formally consult with stakeholders to improve the way in which the Department undertakes analysis of consultation responses.

The Department intends to undertake the following pieces of work:

- To review the implementation of the points agreed by the Council in May 2008 and check whether any other operational changes are necessary.
- To put together a template / internal policy document to standardise further the content and format of HPC consultation documents.
- To review the way in which consultations are currently formally conducted. In particular, respondents are currently asked to respond in writing, by email or post. Some other organisations create forms for respondents to complete and send back, or have some kind of online form that respondents can paste or write their answers into and submit directly. These approaches may be helpful in increasing the accessibility of the consultation process as well as making consultation analysis easier to undertake. The Department will consider the feasibility of these approaches, as well as considering whether software packages aimed at consultation analysis would be helpful.
- To review and put together a template / internal policy document to standardise the content, format and approach adopted in putting together HPC consultation response documents. The approach used in

consultation analysis and the format and content of consultation responses documents has evolved over time and is often tailored towards the individual consultation and the number of responses received. However, this has also led to some inconsistency in approaches between employees and between consultations. The Department plans to review the consultation response documents put together since the Department was created in 2005 and to work towards developing an internal policy to ensure a flexible but consistent approach.

**Timetable**

By end of 2010/2011.

**7.2 Standard format for policy reports and papers**

The format of policy and standards reports and papers to the Committees and the Council has evolved over a period of time.

Whilst the overall standard of reports and papers has increased over time and papers are generally well received by the Council and its Committees, there is some inconsistency. In addition, as Council and Committee papers are subject to increasing scrutiny by external stakeholders it is important that papers are clear and comprehensive.

In 2010/2011, the Department will produce an internal policy document to standardise the format for policy and standards reports and papers.

**Timetable**

By end of 2010/2011.

**7.3 Auditing responses to emails to the policy inbox and producing standard responses to questions**

The Department is responsible for the [policy@hpc-uk.org](mailto:policy@hpc-uk.org) and [consultation@hpc-uk.org](mailto:consultation@hpc-uk.org) inboxes. The inboxes are managed by the Department's two policy officers who answer the emails, escalating more complex enquires to the Policy Managers or Director of Policy and Standards as appropriate. The Department aims to respond to emails within five working days of receipt.

In 2010/2011, we will continue to audit responses to emails to the policy inbox and to produce internal guidance / standard responses to questions to ensure consistency.

**Timetable**

Ongoing.

## **8. Equality and Diversity**

The Council has agreed its Equality and Diversity Scheme, which details, amongst other areas:

- action points for each department;
- the employee diversity group; and
- collecting demographic data.

In past years the Department has provided the lead for the HPC's Equality and Diversity Scheme. In 2010/2011, the Department will support the work of the Internal Equality and Diversity Working Group. In 2010/11 the Working Group will be compiling a progress report which will report on progress in meeting the action points contained within the scheme over the past year.

The existing scheme expires in early 2011 and the Working Group aim to present a new scheme outlining actions for the following three years at the Council meeting in March 2011.

### **Impact assessment**

In carrying out its activities, the Department needs to ensure that any equality and diversity implications are taken into account and brought to the Council or a Committee's attention as appropriate.

For example, in its standards work, the Department will continue to highlight to PLGs, the Education and Training Committee, and the Council, the need to consider any potential adverse impact in setting standards.

## **9. 2011 – 2013**

The Policy and Standards Department will continue to work flexibly, adapting plans for delivering work in response to changes in the external environment. It is anticipated that future important areas of work will include the following:

### **Revalidation**

Overall, it is expected that the work of the Department to 2012 will continue to be influenced by the recommendations made in the White Paper for revalidation. In particular, the Department will want to monitor developments in this area, publish the outcomes of its research in this area and commission further research in line with the Council's approach to this topic. The Department will need to respond flexibly to any developments in government policy in this area.

### **Evidence-based regulation**

Building upon the research referred to in relation to revalidation, in 2011 to 2013 it is likely that resources will need to be allocated to commissioning further research in areas of interest to the Council and in considering ways in which the Council can promote the outcomes of this research widely to stakeholders. Building the evidence base of regulation is one of the Council's key strategic objectives.

### **New professions**

The area of new professions will continue to be a significant project area for the Department in 2011 to 2013.

In particular, on present timescales, it is anticipated that the regulation of psychotherapists and counsellors and healthcare scientists may occur during this period.

## **9. Risk management**

Managing risks is also a vital part of the Department's work over the coming year. The main risks that are owned by the Department are:

12.1 Incorrect process followed to establish standards/guidance/policy (i.e.: no relevant Council decision)

12.2 Inappropriate standards/guidance published e.g. standards are set at inappropriate level, are too confusing or are conflicting

12.3 Changing/evolving legal advice rendering previous work inappropriate

12.4 Inadequate preparation for a change in legislation (Health Professions Order, or other legislation affecting HPC)

In summary, however, it should be noted that although it's separately dealt with here, risk management is in fact embedded into much of the workplan for this coming year. For example:

### **Resourcing**

Increasing the number of employees, particularly those with good previous experience, increases the capacity of the Department, and also helps to manage all the relevant risks in the Department, but particularly risks 12.3 and 12.4.

### **Networking and engagement**

Making good contacts with external organisations feeds into the Council's overall aim to influence and promote, and also helps to manage risk 12.4.

### **Quality management**

Working with the Head of Business Process Improvement, particularly around internal audits, not only links with the Council's aim to improve, by keeping ISO registration, but also helps to manage risk 12.1.

**Appendix 1**

**Policy and Standards Department Standards workplan**

**2010/2011**

# 1. This document

This document sets out broad areas for the future direction of the Council's work in the area of standards. It is designed to bring together information about the background to the Council's standards, establish some broad principles, particularly around standards development and review, and indicate past, present and possible future activities, linked to the overarching Policy and Standards Department workplan. It should be read in conjunction with the workplan.

This document was first approved by the Council December 2006, and has been revised for 2010/2011. It will be revised and brought back to the Council alongside the Policy and Standards Department workplan in future years.

## 1.1 The standards

The Council produces four key standards which are the subject of this document. They are:

- Standards of proficiency
- Standards of conduct, performance and ethics
- Standards of education and training
- Standards of continuing professional development

The Council also publishes requirements for returning to practice.

Setting standards is one of the Council's key processes and the standards are central to how individuals become and remain registered.

## 1.2 Overall aims

The Council's standards should:

- effectively protect the public;
- not hinder the development by education providers, registrants and others of innovative and pragmatic ways of working;
- be applicable to all or most registrants (except in the case of profession-specific standards of proficiency);
- be written in broad terms to allow for developments in best practice, technology and legislation;
- be set at a 'threshold' level – e.g. the level which is necessary for safe and effective practice, and public protection; and
- describe outcomes or broad principles and not be prescriptive about ways of meeting the standards.

## **1.3 Overarching aims**

The overarching aims identified in the Policy and Standards Department workplan and most relevant to the areas outlined in this document are:

### **1.3.1 Improve**

- The Council aims to review its standards, guidance and policies, engaging with and consulting stakeholders, to gain feedback and to make improvements to ensure that these continue to reflect the Council's purpose and principles.
- The Council aims to engage with and consult stakeholders, and take account of their input in its work, to ensure that the HPC's work is informed by the wider healthcare and regulatory landscape, and that our knowledge of multi-professional regulation can be shared.

### **1.3.2 Influence and promote**

- The Council aims to build on its growing reputation as a respected voice within the policy arena of the regulation of healthcare professionals and other healthcare workers, and to use this reputation to pro-actively influence the external agenda, in the interests of protecting the public.



## **2. Background to the standards**

### **2.1 Standards of proficiency**

#### **Legal background**

Article 5 (2) (a) of the Health Professions Order 2001 says that the council shall:

*'establish the standards of proficiency necessary to be admitted to the different parts of the register, being the standards it considers necessary for safe and effective practice under that part of the register.'*

#### **Summary**

The standards are set at a threshold or 'necessary' level and play a central role in entry to the register.

The standards are used in the following ways:

- in making decisions against the standards about international and grandparenting (route b) applications;
- in assessing education programmes to decide whether the learning outcomes meet the standards of proficiency; and
- in making decisions about lack of competence fitness to practise cases.

The standards include a 'generic core' which is common to all professions on the register and profession-specific standards.

Although the standards are threshold standards for entry to the register, the interaction between the standards and the standards of education and training means that a small number of standards relate to additional or post-registration entitlements and are therefore 'optional'. For example, the standards for radiographers, physiotherapists and chiropodists and podiatrists include a standard which relates to supplementary prescribing entitlements. It is only necessary for registrants to meet this standard if they wish to practise as a supplementary prescriber.

The Executive will be undertaking a project in 2010/2011 on post-registration qualifications. Subject to decisions by the Education and Training Committee and the Council, the Executive may develop additional standards related to post-registration entitlements.

## **2.2 Standards of conduct, performance and ethics**

### **Legal background**

Article 21 (a) says that the Council shall –

*‘establish and keep under review the standards of conduct, performance and ethics expected of registrants and prospective registrants and give them such guidance on these matters as it sees fit.’*

Article 27 (a) (i) further provides the Conduct and Competence with the role of advising the Council on the *‘performance of the Council’s functions in relation to standards of conduct, performance and ethics expected of registrants and prospective registrants’*.

Rule 8 of The Health Professions Council (Practice Committees) (Constitution) Rules Order of Council 2003 says that the Conduct and Competence Committee must review the standards each year.

### **Summary**

The standards describe our expectations of registrants in terms of their professional attitudes and behaviour. They:

- may be taken into account by fitness to practise panels in deciding whether the fitness to practise of a registrant is impaired; and
- are used in making health and character decisions on admission to the register.

The standards are generic across all registered professionals and specifically apply to prospective registrants. Applicants for registration are asked to confirm that have read and understood the standards and will keep to them once registered.

## **2.3 Standards of education and training**

### **Legal background**

Article 15 (1) (a) says that:

*The Council shall from time to time establish—*

*‘the standards of education and training necessary to achieve the standards of proficiency it has established under article 5 (2).’*

Article (6) (a) further provides that –

*‘In respect of additional qualifications which may be recorded on the register the Council may establish standards of education and training’.*

### **Summary**

The standards ensure that education programmes allow graduates to successfully meet the learning outcomes described in the standards of proficiency. The standards cover such areas as admissions, assessments and practice placements.

The standards are generic and are monitored via the Council’s approvals monitoring processes.

## **2.4 Standards of continuing professional development**

### **Legal background**

Article 19 (1) says that:

*'The Council may make rules requiring registrants to undertake such continuing professional development as it shall specify in standards.'*

### **Summary**

The standards of continuing professional development (CPD) link the learning and development of registrants to continued registration, meaning that registrants must continue to learn while they are registered, to help ensure that they remain safe and effective practitioners.

The standards are generic and focus on the outcomes of registrants' learning,

All registrants are required to confirm when renewing their registration that they understand and meet the Council's standards for CPD. Since 2008, the Council has audited registrants to ensure that they meet the standards. The Council will shortly publish the first annual report for CPD, which includes information on the audit process and the outcomes of the process.

## **2.5 Requirements for returners to practice**

### **Legal background**

Article 19 (3) says that:

*'The Council may by rules require persons who have not practised or who have not practised for or during a prescribed period, to undertake such education or training or to gain such experience as it shall specify in standards.'*

### **Summary**

The Council has defined the practise of a profession as someone drawing on their professional skills in some way in the course of their work. The returners to practice requirements make additional requirements of registrants who have been out of practise for more than two years in order to remain registered or readmit to the register. The requirements also apply to someone who has never been registered, who has been out of practise for more than two years and who holds an approved qualification which is over five years old.

Registrants are required to undertake a period of updating which may include supervised practise, formal study or private study and provide evidence of this in order to become re-registered.

### **3. Workplan**

This workplan is divided into five areas relevant to the Department's standards work.

An aim / objective for each area of the Department's standards work is identified, background provided for that area and general principles established that will influence the Department's approach in this area.

#### **3.1 Develop and review standards**

##### **Aims / Objectives**

- All standards reviewed on an ongoing and periodic basis in accordance with review policy and timetable.

##### **3.1.1 Standards for new professions**

Whenever a new part of the HPC Register is opened, the Council needs to publish standards for proficiency and amend standard one of the standards of education and training ("SET 1") to establish the threshold level of qualification for entry to the Register.

A Professional Liaison Group (PLG) was established to put together draft standards of proficiency for practitioner psychologists and the psychotherapists and counsellors PLG was also tasked with putting together draft standards. However, this approach has not been followed in relation to other professions. For example, the standards of proficiency for operating department practitioners were put together by a professional body, with input from the Executive. The standards of proficiency for hearing aid dispensers were put together by a group convened by the Hearing Aid Council, on which the Executive was represented.

The Council will normally establish a Professional Liaison Group (PLG) to draft the standards of proficiency for a new part of the Register. However, where substantial work has already been undertaken to draft standards of proficiency (for example, by a professional body or bodies), a PLG may not be necessary. The HPC's new professions process includes a requirement for a profession seeking regulation to include standards of proficiency with their application.

The Council is required to consult before publishing or amending any standards.

When a new profession is regulated, there will normally be a time-limited grandparenting period. The HPC has in the past committed to keeping the standards the same during the grandparenting period to ensure consistency and fairness. The standards of proficiency for the first 12 professions regulated, and the standards for operating department practitioners, were reviewed following the end of their respective grandparenting periods.

The Education and Training Committee should consider at the end of the grandparenting period whether it is necessary to review the standards of proficiency for new professions.

- A Professional Liaison Group (PLG) was established in the autumn of 2008 to discuss the statutory regulation of psychotherapists and counsellors, including putting together draft standards of proficiency.
- A consultation was held between July and October 2009 on the proposed statutory regulation of psychotherapists and counsellors. This included a consultation on draft standards of proficiency. The outcomes of the consultation were considered by Council in December 2009.
- A consultation was held between July and October 2009 on proposals for the regulation of dance movement therapists. This included a consultation on draft standards of proficiency. The outcomes of the consultation were considered by Council in December 2009.
- A joint consultation with the Hearing Aid Council on standards of proficiency for hearing aid dispensers was held in 2008, in advance of the opening of the Register on 1 April 2010. These standards were agreed by the Council in February 2010.

### **3.1.2 Ongoing and periodic review**

Ongoing and periodic will ensure that the standards continue to be fit for purpose and that their content is well understood by the Council's stakeholders.

Ongoing review should focus on ensuring that the standards continue to be fit for purpose. 'Ongoing review' is the 'day-to-day' reviewing of the standards by the Council, its Committees and the Executive. This will ensure that the standards do not limit effective ways of working for registrants and education providers.

A periodic review should be more thorough and comprehensive. The purpose of periodic review is to:

- ensure that the standards remain fit for purpose – in making decisions about education programmes and in making fitness to practise decisions, for example;
- ensure that they are well understood by our stakeholders including registrants, patients, education providers and the public; and
- ensure that they take account of change including changes in practice, legislation, technology, guidelines and wider society.

In addition:

- Ideally, no more than one periodic review of the Council's standards should take place in any one financial year. This ensures that any confusion is avoided, allows the Council to more effectively engage with its stakeholders, and allows for the effective use of resources.

- Any periodic review should have a clear workplan. A periodic review might involve establishing a Professional Liaison Group (PLG) if the Council and/or a sponsoring Committee considered this to be helpful approach.
- Periodic reviews should take place no more than once every five years. This five year period will normally be from the date of the republication of the standards following the last review.

Whilst the principle is established that a periodic review should normally not take place more than once every five years (subject to the provisions of ongoing review), the exact timing of a review may be subject to change. The timing of any review would be influenced by the Council's priorities in any given year and therefore the budget and resource considerations of the Policy and Standards Department.

- A Professional Liaison Group (PLG) was established to review the standards of education and training in September 2007 and a consultation held on revised standards and guidance between August and November 2008. The changes were subsequently agreed and the standards were effective from September 2009.
- A consultation was held between November 2007 and March 2008 on making the standards of proficiency for chiropodists and podiatrists which relate to supplementary prescribing and prescription only medicines compulsory. The changes were subsequently agreed and will become effective 1 September 2009.
- A consultation was held on a proposed minor change to standard five of the CPD standards. This change was agreed and is now effective.
- A consultation will shortly be held on a minor amendment to the standards of proficiency for health psychologists.
- A review group was established in September 2009 to review the generic standards of proficiency. The recommendations of the review group are being considered by the Education and Training Committee and Council in March 2010.
- A paper was brought to the Education and Training Committee on standard one of the standards of education and training, the threshold level of qualification. Depending upon the outcomes of the discussion, further work may be undertaken to review or amend this standard.



## 3.2 Standards guidance and information

### Aims / Objectives

- To improve understanding of, and compliance with, the standards amongst registrants.
- To improve understanding of the standards amongst other stakeholders.

The Hampton review concluded that regulators place insufficient focus on providing advice to ensure compliance and recommended that regulators should provide more advice as ‘better advice leads to better regulatory outcomes’.<sup>1</sup>

The Council presently publishes guidance on topics in a small number of areas directly related to the standards or on topics building upon the principles expressed in the standards, for example:

- Standards of education and training guidance for education providers
- A disabled person’s guide to becoming a health professional
- Confidentiality – guidance for registrants

A distinction is drawn between publications providing information about the Council’s processes and publications which provide specific guidance on standards or standards related issues.

In particular, the Executive has identified the potential need for guidance to the standards of conduct, performance and ethics in a small number of discrete areas.

Formal guidance should be produced if:

- there is good evidence to suggest that guidance would be helpful;
- the topic is not substantially covered in another HPC publication or another authoritative sources;
- the topic is relevant to most professionals who are registered; and
- the topic builds upon the existing standards.

Whilst links to the Council’s key fitness to practise functions should be clear, any guidance should be positive in nature by focusing on ways of meeting the standards rather than situations would not meet the standards or the possible consequences of a failure to meet them. Guidance should focus on the importance of registrants making individual decisions which are informed and reasonable.

Where a need for guidance might be identified, but such guidance would not be sufficiently substantial to justify separate published guidance, the Executive might

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<sup>1</sup> Hampton, Philip (HM Treasury), Reducing administrative burdens: effective inspection and enforcement, March 2005, p.10 and p.15.  
<http://www.hm-treasury.gov.uk/media/A63/EF/bud05hamptonv1.pdf>.

consider published information on the HPC website with links to other sources of guidance.

The Council recognises the important role of professional bodies and other organisations in publishing guidance and information to assist registrants in meeting the standards. Any guidance should not seek to replace this role and should provide signposts to other information available where possible.

- Guidance on the health and character process was published in January 2010.
- Guidance on conduct and ethics for students was published in January 2010.
- The Executive will be undertaking a project in 2010/2011 to identify discrete areas within the standards of conduct, performance and ethics where further guidance may be needed and appropriate.

### **3.3 Standards and ethics queries**

#### **Aims / Objectives**

- Responses to standards and ethics queries are appropriate and consistent.

We regularly receive letters and e-mails from registrants and employers asking questions about our standards, particularly the standards of conduct, performance and ethics. Most commonly we receive enquiries asking about how to interpret the standards, particularly registrants and employers seeking assurances that their working practices meet our standards. (Queries received from individual registrants on matters related to fitness to practise are answered by the Fitness to Practise Department.)

We are also regularly asked for information on topics with some relevance to the standards such as the drug administration entitlements of those we register.

The Policy and Standards Department will work with the Fitness to Practise Department to ensure consistency and best practice in answering standards and ethics queries.

In 2010/2011 the Policy and Standards Department will carry out an internal audit of the responses received to emails in the policy inbox. The department will produce internal guidance or standard responses to questions which will ensure consistency.

## 3.4 Involve

### Aims / Objectives

- To involve stakeholders in developing standards and guidance.
- To be involved in the development of standards and guidance by other organisations where this is relevant to the Council's aims.
- To be recognised as a source of expertise in producing clear, accessible and appropriate standards and guidance.

The Council will involve its stakeholders in the production of its standards and guidance. For example, the Council invited input from charities and disability groups when it established a PLG to consider issues around health, disability and registration.

The involvement of external stakeholders benefits the Council in developing its standards and guidance in a number of ways. The Council benefits from the knowledge and expertise of its stakeholders, often profession-specific and drawn from a wide range of practice areas. Involving our stakeholders in the development of standards and guidance (rather than simply at the consultation stage) also ensures 'buy-in' from stakeholders and improved dissemination of the completed work. It also raises the profile of the organisation.

The Council also involves its stakeholders by consulting whenever it produces guidance or standards. It also provides input into other standards development by others by responding to external consultations where appropriate.

The Council is often involved in the development of standards and guidance by other organisations.

Becoming involved in the development of standards and guidance by other organisations will:

- allow sharing of knowledge, expertise and best practice for mutual benefit;
- provide opportunities for networking; and
- raise our profile.

- Regular participation in cross-regulatory fora which often consider standards related matters.
- The Psychotherapists and counsellors PLG has a representative from an organisation representing the interests of service users.
- Public consultation and responding to other organisations consultations on standards related matters.
- 'A disabled person's guide' was cited as an example of good practice within current regulatory requirements in the Disability Rights Commission's report 'Maintaining Standards: Promoting Equality'

## 3.5 Communicate

### Aims and Objectives

- To effectively communicate the role and purpose of the Council's guidance to its stakeholders.

The Council should aim to effectively communicate the role and purpose of its standards to a variety of different stakeholders including employers, registrants and education providers.

The Policy and Standards Department will work with the Communications Department to develop effective ways of communicating the purpose and function of the Council's standards and guidance.

This could include:

- using opportunities to promote the Council's standards work at events;
- producing content for the newsletter which explores standards and ethics type issues;
- developing the HPC website; and
- exploring possibilities of standards focused consultation events in the future.

- Press releases for reviews and consultations
- Regular 'HPC In Focus' articles on standards consultations and other related matters.
- Numerous presentations given to stakeholders on topics including the standards of conduct, performance and ethics, CPD standards and returners to practice requirements.

## 4. Indicative periodic review timetable

Standard	Date of first publication	Date of first review (financial year)	Date of re-publication	Date of subsequent review (financial year)
Standards of proficiency	2003	2005/06	2007	2009/2010 (ongoing)
Standards of conduct, performance and ethics	2003	2007/08	2008	2013/14
Standards of education and training	2004	2007/08	2009	2014/15
Standards for continuing professional development**	Effective 2006	TBC	n/a	TBC
Returners to practice requirements	2005	TBC*	n/a	

NB: The above timescales are subject to the information in section 3.1 of this document.

\*In 2010-2011 an amendment to the HPC registration database is planned to allow reporting on returners to practise requirements. A review of the requirements will take place at a suitable time after this change has been made.