

Council, 31 March 2010

Policy and Standards Department workplan 2011/2012

Executive summary and recommendations

Introduction

A draft workplan for the Policy and Standards Department for April 2011 to March 2012 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 2011/2012.

Appendices

- Standards workplan

Date of paper

21 March 2011

Policy and Standards Department

2011 / 2012 Workplan

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Contents

1. Introduction	3
This document.....	3
The Policy and Standards Department.....	3
Policy and Standards planning.....	3
Resourcing	4
About this document.....	5
2. Projects delivered in 2010/2011	6
Standards and guidance	6
New professions.....	6
Other	7
3. Policy and Standards and the strategic intent	8
Strategic objectives and Department aims	8
4. Developing and maintaining the existing business	9
4.1 Revising the HPC's strategic intent	9
4.2 Service user involvement in design and delivery of education and training programmes	9
4.3 Generic standards of proficiency	10
4.4 Review of CPD audit / sampling approach	10
4.5 Review guidance on health and character.....	11
4.6 Review guidance documents – ‘Managing your fitness to practise’ and ‘A disabled person’s guide to becoming a health professional’	12
4.7 Threshold level of qualification for entry to the Register	12
4.8 Post-registration qualifications / annotation of the Register	12
4.9 Student fitness to practise	13
4.10 Alternative mechanisms for resolving disputes.....	14
4.11 Review of fitness to practise decisions	14
4.12 Continuing Professional Development (CPD) sample profiles.....	15
5. The Health and Social Care Bill 2011 and the Command Paper ‘Enabling excellence’	16
5.1 Social workers in England	16
5.2 Psychotherapists and Counsellors	17
5.3 Establishing new registers	18
5.4 Student registration.....	19
5.5 Herbal medicine practitioners	19
6. Other	20
6.1 Standards for independent and supplementary prescribing.....	20
6.2 Revalidation.....	21
6.3 CHRE performance review 2011/2012	22
6.4 CHRE commissions and projects	22
6.5 Safeguarding vulnerable groups.....	22
6.6 European Union.....	23
7. Department activities	24
7.1 Ongoing activities	24
7.2 Department improvements	25
8. Equality and Diversity	26
9. Projects for 2012/2013 to 2013/2014	27
10. Risk management	28

1. Introduction

This document

1.1 This document has been drafted to set out the work of the Policy and Standards Department in the financial year 2011/2012.

The Policy and Standards Department

1.2 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.

1.3 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.

Policy and Standards planning

1.4 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.

1.5 The following projects have been identified as relative priorities for the Department in the coming year.

- Projects arising from the Health and Social Care Bill 2011 and the Command paper – 'Enabling excellence' including the regulation of social workers in England and herbal medicine practitioners
- Service user involvement
- Generic standards of proficiency
- Revalidation
- Post-registration qualifications
- Standards for supplementary and independent prescribing

1.6 The following projects have been identified as of relatively low priority.

- Reviewing 'Managing fitness to practise' and 'A disabled person's guide to becoming a health professional'.
- Student fitness to practise
- Threshold level of qualification for entry to the Register
- CPD sample profiles

Resourcing

Michael Guthrie	Director of Policy and Standards
Sarah Oliver	PA / Administrator
Charlotte Urwin	Policy Manager
Alison Dittmer	Policy Officer

1.7 The Department currently consists of four employees.

1.8 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.

1.9 The Policy Manager often takes 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.

1.10 The Policy Officer takes 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 Director / Policy Managers in undertaking tasks within their area of responsibility.

1.11 The PA / Administrator provides PA support to the Director of Policy and Standards and to the Director of Communications. They also provide administrative support for the Policy and Standards Department including handling incoming correspondence, maintaining databases and handling consultation responses.

About this document

1.12 This document is divided into ten sections.

- Section 2 provides a summary of some of the projects successfully delivered in 2010/2011.
- Section 3 links the Department's activities to the HPC's strategic intent.
- Sections 4 to 7 describe the projects for 2011/2012 in more detail, grouped in four areas: developing and maintaining the existing business; the Health and Social Care Bill 2011 and the Command Paper; other projects; and department activities.
- Section 8 looks at equality and diversity.
- Section 9 outlines potential projects for the period 2012-2014.
- Section 10 looks at the risks owned and mitigated by the Department.

1.13 Annex A provides a summary table of projects for the 2011/2012 financial year. This includes timescales for the overall project areas where applicable and for key milestones. More detail regarding timescales for each project is included in internal Departmental planning and often provided and approved by the Council and/or its Committees when particular pieces of work are considered for discussion/approval.

2. Projects delivered in 2010/2011

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

Standards and guidance

- The review of the generic standards of proficiency progressed well, with a consultation held on proposed changes and new generic standards due to be agreed by the Education and Training Committee and the Council in March 2011.
- The threshold level of qualification for entry to the Register was reviewed with the Education and Training Committee discussing this area at its March and June 2010 meetings.
- A consultation was held on a minor amendment to the standards of proficiency for health psychologists and the change became effective from 1 October 2010.
- In May 2010 the Council agreed an approach to producing information / advice in the area of whistleblowing. In November 2010 an article appeared in the In Focus newsletter about raising and escalating concerns and further information including a flow diagram for making decisions was published in the HPC website.
- A number of articles have appeared in the 'In Focus' newsletter on standards related topics over the course of the year. These articles have been informed by an audit of the standards-related queries we receive into the policy email inbox undertaken in 2010/2011.

New professions

- Five further meetings of the Psychotherapists and Counsellors PLG were held between May 2010 and February 2011. In addition, the Department met with and presented to a number of different stakeholders and worked with the Communications Department and other internal colleagues to hold an information event for psychotherapists and counsellors in Scotland.
- In July 2010 it was announced that the regulation of social workers in England would be transferred to the HPC. Since the announcement the Department has undertaken a number of activities in partnership with internal colleagues including:
 - meeting with external stakeholders including the GSCC, the Joint Social Work Unit and attending meetings of working groups attached to the Social Work Reform Board;

- preparing briefings for the Council and its Committees on the key issues in this area, in particular the impact of the recommendations of the Social Work Task Force and the work of the Social Work Reform Board; and
 - managing the establishment and running of the PLG set up to draft standards of proficiency for social workers in England including preparing papers for three meetings which took place in 2011/2012.
- Ongoing liaison with aspirant groups interested in or seeking to apply to the Council via the new professions process.

Other

- The consultation on removing the health reference requirement for entry to the Register closed in April 2010. In light of the outcomes of the consultation, the Council decided to remove the health reference requirement and replace it with a self declaration, subject to necessary amendments to the relevant rules.
- A consultation was held on a Welsh Language Scheme under the Welsh Language Act 1993. The scheme will be implemented from April 2011.
- The Department wrote some of the content and co-ordinated HPC's CHRE performance review submission for 2010/2011. The Department also participated in a number of CHRE projects.
- The ongoing work looking at the HPC's approach to post-registration qualifications progressed well, and a consultation took place between November 2010 and February 2011.
- The work on revalidation progressed well with research looking at multi-variant analysis of fitness to practise data commissioned and ongoing. A visit was also undertaken to a number of regulators in Ontario, Canada and a report produced on the learning.
- The Department participated as members of various working groups and attended numerous other groups and meetings with stakeholders including delivering presentations on topics such as revalidation, CPD and the regulation of social workers in England.
- The Department responded to 8 external consultations and 4 HPC external consultations were either commenced or concluded in 2010/2011.

3. Policy and Standards and the strategic intent

3.1 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.

Strategic objectives and Department aims

3.2 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 outlined below.

- To maintain and develop efficient business processes throughout the organisation as it grows.
- 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.

3.3 The Director of Policy and Standards will work with the Chief Executive, Chair and the Council to revise the strategic intent in 2011/2012 – in particular, to take account of changes in the external environment.

3.4 Annex A of this document provides an overview of the specific projects for 2011/2012 with broad timescales, referenced against the most directly relevant HPC strategic objectives.

4. Developing and maintaining the existing business

This section outlines the department's activities in 2011/2012 which are focused on developing and maintaining the existing business, with a focus on the existing regulated professions and the HPC's existing processes. For example, this includes:

- reviewing and revising standards, guidance and other documents;
- reviewing processes, approaches and policy positions; and
- undertaking or commissioning research to identify areas for further development or improvement.

4.1 Revising the HPC's strategic intent

The HPC's strategic intent document sets out the organisation's vision, values and strategic objectives for the coming year. The strategic intent is reviewed by the Council approximately every 2 years and was last published in 2009 for the period 2009/2010 to 2014/2015.

In 2011/2012, the strategic intent will be reviewed and revised. In particular, this will need to take account of changes to the external environment (e.g. the Health and Social Care Bill 2011), and changes in the breadth and diversity of the professions that the HPC regulates.

4.2 Service user involvement in design and delivery of education and training programmes

This area has been under discussion by the Education and Training Committee at a number of meetings through 2010 and was most recently considered by the Committee at its March 2011 meeting. The focus of the Committee's consideration is on service user involvement in the design and delivery of approved programmes and the HPC's potential role in specifically recognising, supporting and/or compelling that activity. This might potentially include, in the future, considering whether the standards or guidance should be augmented to specifically require service user involvement.

At its meeting in March 2011 the Committee agreed the following pieces of work to be delivered in 2011.

- Commissioning external research to look at different approaches to service user involvement amongst the professions regulated by the HPC. The outcomes of the research will inform consideration of whether a new standard or changes to the guidance should be introduced.
- Putting together a position statement articulating the Committee's position on service user involvement in the design and delivery of HPC approved programmes.

4.3 Generic standards of proficiency

In March 2011 the Education and Training Committee and the Council are due to consider the outcomes of the consultation on revised generic standards of proficiency. Subject to approval of the revised standards, the Executive plans to commence the next part of this project in 2011/2012. The following activities will be undertaken.

- Review of existing detailed generic and profession-specific standards in light of the revised generic standards. This will include mapping the existing detailed generic and profession-specific standards against the new overarching generics. This process will include ensuring that necessary content included in the existing detailed generics is not lost and that the terminology used is appropriate to the professional group in question. This is likely to include seeking the informal input of the professional bodies on the drafts. As this represents a substantial amount of work (and for most professions, the existing detailed generic standards are not problematic) it is anticipated that this work will be undertaken on batches of three or four professions at a time on a rolling basis.
- A public consultation on the first set of revised standards incorporating the agreed generic standards.
- Liaison with internal colleagues to ensure that arrangements for publication / implementation of the standards allow sufficient lead time and do not adversely affect operational processes.

4.4 Review of CPD audit / sampling approach

In 2011, the Policy and Standards and Registration Departments will review the existing approach to the CPD audits.

The CPD audits commenced in July 2008. In March 2009 following the audits of the first two professions, the audit sample size was reduced to 2.5%.

Since then, there has continued to be debate at the Education and Training Committee and amongst Council members about the purpose of the CPD standards and audits, and therefore the sampling approach that should be taken on an ongoing basis. At its meeting in June 2010, the Education and Training Committee agreed that it would not review the current sampling approach until at least all 13 professions (regulated when the CPD standards were introduced in 2006) had been audited at the 2.5% sample size.

The review will include the following.

- A discussion of the purpose of the CPD standards and audits and whether this guides our approach to sampling.
- The outcomes of the past audits.
- Statistical and data analysis previously undertaken on our behalf by the University of Reading.
- The outcomes of research commissioned from a researcher at Oxford Brookes University looking at risk profiling and the outcomes of the CPD audits. This research was commissioned as part of the revalidation project.
- Any relevant information from other parts of the revalidation project, including the review of approaches adopted in Ontario, Canada.
- Identification of any options or further future work including the operational consequences of any decisions to change the sampling approach.

This review will need to incorporate and/or take account of the need for a decision prior to the opening of the social workers register as to when social workers will be first audited and the sample size.

4.5 Review guidance on health and character

In July 2010, the Council agreed to remove the health reference requirement for entry to the Register, subject to necessary amendments to the Health Professions Council (Registration and Fees) Rules 2003. In addition, at its meeting in November 2010, the Education and Training Committee agreed changes to the process for how the HPC deals with self-referrals from registrants.

As a result of the changes above, the guidance document 'Guidance on health and character' needs to be reviewed and updated to reflect the changes. It had been anticipated that a consultation might commence late in 2010/2011 but this was delayed to take account of changes to the self-referral process and the timing of the passage of new rules. In March 2011, the Education and Training Committee and the Council are being asked to approve the revised guidance for consultation.

4.6 Review guidance documents – ‘Managing your fitness to practise’ and ‘A disabled person’s guide to becoming a health professional’

‘Managing your fitness to practise’ and ‘A disabled person’s guide to becoming a health professional’ were published in 2006. Both publications now need to be reviewed and revised to ensure that they are up to date with changes in the HPC’s processes and standards, consistent with other more recent publications and consistent with changes in legislation.

The recent decision to remove the health reference requirement for registration means that the ‘Information about the health reference’ document is now obsolete. However, this document contains some very useful general guidance regarding managing health issues and this provides an opportunity to incorporate the relevant content into a more comprehensive document. ‘A disabled person’s guide’ now includes references to standards which have been changed and also needs to be revised to take account of the implementation of the Equality Act 2010. A public consultation will be held on both documents.

4.7 Threshold level of qualification for entry to the Register

In 2010, the Education and Training Committee reviewed the threshold level of qualification for entry to the Register outlined in the standards of education and training (SET 1).

The Committee agreed that:

- there should be no immediate change to SET 1;
- the Policy department should produce further guidance to strengthen the understanding of SET 1; and
- the Policy department should return to a future meeting with further developments.

The guidance suggested in the paper was in the form of ‘policy statements’ on the following areas: the purpose of SET 1; the factors involved in setting the threshold level for a new profession joining the Register; and the factors involved in considering changing the threshold level set for an existing profession.

4.8 Post-registration qualifications / annotation of the Register

A consultation was held between November 2010 and February 2011 on the HPC’s approach in the area of post-registration qualifications / annotation of the Register. The consultation consisted of two elements on which stakeholders’ views were sought: draft ‘criteria’ to guide HPC decisions about which qualifications are and which are not eligible for annotation of the Register; and whether the qualifications for podiatric surgeons and neuropsychologists should be annotated in the HPC Register.

In order to facilitate the HPC's ability to annotate the Register when necessary (for example, in light of Government's decisions to extend prescribing rights; or in light of a decision made following this consultation), a major project is being considered for 2011/2012 to develop the netregulate registration system. This upgrade will allow the future flexibility to add, amend or remove annotations of the Register without the need for a separate technology upgrade on each occasion. The project will also encompass capturing and managing the various organisational consequences of any decision to extend independent prescribing rights to chiropodists/podiatrists, physiotherapists and paramedics (see section 6.1).

In 2011/2012 the following activities will be undertaken in this area.

- Consultation analysis will be completed.
- A paper will be presented to the Education and Training Committee and to the Council to facilitate agreement of a finalised position on this topic; and decisions about whether the Register should be annotated.
- Identification of any next steps including liaison with stakeholders as appropriate and/or planning for work to produce standards and so on.
- The Department will participate in the project to develop netregulate to allow greater flexibility in annotating the Register.

4.9 Student fitness to practise

At its meeting in September 2010, the Education and Training Committee discussed the recommendations of a CHRE report looking at whether the regulators should receive the outcomes of education providers' student fitness to practise committees. The Committee decided that this was not necessary but agreed the following:

- that the HPC should explore carrying out research to collect aggregated data about student fitness to practise outcomes;
- that the HPC should explore the possibilities for work with education providers to share good practice in the management of student fitness to practise issues; and
- that the Executive return to a future meeting of the committee setting out options for further work, and exploring the resource implications of those options.

The second bullet point above has been taken forward by the Education Department's seminars for education providers in 2010/2011 and their focus on the new standard of education and training relating to education providers' handling of conduct concerns about students.

The Committee also suggested that it might be useful to keep this area on the agenda by inviting an academic involved in research in this area to come and present to the Committee at a future meeting.

This area is a low priority for 2011/2012 and the activities undertaken will heavily depend on other relative priorities assessed during the year. However, the following is currently planned.

- Inviting an academic with experience in this field to attend and present to a meeting of the Education and Training Committee in order to stimulate discussion – to be determined with the Chair of the Committee.
- A paper exploring the benefits and potential arrangements including timescales for collecting aggregated student fitness to practise data from education providers.

4.10 Alternative mechanisms for resolving disputes

This project area is led by the Fitness to Practise Department. In 2010/2011 a literature review was commissioned which reviewed the available material available in the area of alternative dispute resolution, looking at what this might mean for the HPC.

At its February 2011 meeting, the Fitness to Practise Committee considered a number of papers from the Executive outlining the next stages of this project. These include externally commissioning further research with registrants and complainants to inform the scope of a potential pilot to commence in 2012.

The Department will feed into the work carried out by the Fitness to Practise Department in this area to include:

- reviewing the outcomes of the research;
- producing further papers for the Fitness to Practise Committee as necessary; and
- providing input into defining the scope of a possible future pilot.

4.11 Review of fitness to practise decisions

This is a continuing project area from 2010/2011. There are two areas:

Final hearing decisions

The review is aimed at providing a systematic way through which the Executive can review the decision making quality of final hearing panels, including checking adherence to the applicable law and to HPC policy in a given area.

The review involves involve completing an audit form for each decision. The audit forms are then reviewed and a narrative report written. The emerging

recommendations are then discussed with the Fitness to Practise Department who identify action points.

The completion of audit forms and the writing of the report is undertaken by a Policy Officer in the Policy and Standards Department. The report is then considered by the Fitness to Practise Committee.

Case to answer decisions

A similar process is followed for pre-final hearing 'case to answer' decisions. The forms reviewing case to answer decisions by the Investigating Committee are completed by the PA/Administrator in the Policy and Standards Department and a Hearings Officer in the Fitness to Practise Department. The report is then written by the Director of Fitness to Practise or Head of Case Management.

The audits have been scheduled so that final hearing decision and case to answer decision audits take place in different periods on a rolling basis.

4.12 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 14 parts of the HPC register (with the exception of hearing aid dispensers).

We are currently working with the representative organisations in the following professions to produce sample profiles. Where we have not yet published a profile for a profession, this is denoted with an '*', with information about when the next audit cycle commences for that profession. Publishing at least one profile for these professions will be a priority for 2011/2012. For practitioner psychologists, we aim to produce at least one profile for each domain of practice prior to the commencement of the audit in 2013.

- Art therapists (next audit: March 2012)*
- Dietitians (additional profile)
- Hearing aid dispensers first audit (first audit: February 2012)*
- Music therapists (next audit: March 2012)*
- Occupational therapists (additional profile)
- Physiotherapists (additional profile)
- Practitioner psychologists (additional profiles; first audit: March 2013)*

5. The Health and Social Care Bill 2011 and the Command Paper 'Enabling excellence'

In January 2011, the Health and Social Care Bill 2011 was published. In February, this was followed by publication of the Command Paper: 'Enabling Excellence – Autonomy and Accountability for Healthcare Workers, Social Workers and Social Care Workers'.

At the time of writing, the full implications for the HPC of the Bill and the Command Paper were under discussion by the Council and by the Executive Management Team.

This section outlines the key project areas for 2011/2012 but a degree of flexibility will be necessary in setting ongoing priorities and in allocating resources.

5.1 Social workers in England

Social workers are currently regulated by regulators in each of the four countries. The Health and Social Care Bill 2011, if passed by parliament, will abolish the General Social Care Council (GSCC) and transfer the regulation of social workers in England to the newly named Health and Care Professions Council (HCPC). The Register is expected to open (subject to legislation and parliamentary approval) in April 2012.

The Department's activities include the following:

- Standards of proficiency for social workers in England. A Professional Liaison Group (PLG) has been established and is meeting to assist in putting together draft standards of proficiency for social workers in England. A consultation will then be held on the draft standards, the responses analysed and standards agreed in good time for the opening of the Register.
- Threshold level of qualification for entry to the Register ('SET 1'). The current threshold level for entry for registration as a social worker is an honours degree. A consultation will be held alongside the consultation on draft standards of proficiency to amend the first standard of education and training to add the threshold level of entry for the new profession.
- Registration and Fees Rules. Each time a new profession joins the Register it is necessary to amend the Health Professions Council (Registration and Fees) Rules Order of Council 2003 in order to set the registration cycle for the new profession. A consultation will be held on the registration cycle for social workers and this may include a shorter first registration period in order to facilitate future renewal in an optimum period.

- Approved mental health professionals (AMHPs). The HPC will become responsible for approving training which allows social workers, practitioner psychologists, occupational therapists and mental health and learning disabilities nurses to become AMHPs. The Education and Training Committee and the Council will be asked to discuss this area and invited to agree to annotate the Register.
- CPD audits. The Education and Training Committee and the Council will be asked to consider when social workers should be audited for the first time and the sample size of the audit. This will need to take into account decisions about the registration cycle for social workers (as an audit cannot take place until a registrant has been on the HPC register for 2 years or more) and the Education and Training Committee's review of the CPD audit outcomes and sample sizes (outlined in section 4.4 of this document).
- Work on any other emerging policy issues such as Social Work Reform Board (SWRB) proposals regarding an assessed and supported year in employment
- Liaison with key stakeholders including the GSCC and attendance at working groups and other meetings associated with the work of the Social Work Reform Board (SWRB). This includes provision of information to stakeholders such as working with the Communications Department to write content for the HPC website and for relevant professional publications.
- Participation in the cross-department project team to transfer the regulation of social workers from the GSCC to HPC.

5.2 Psychotherapists and Counsellors

The Psychotherapists and Counsellors Professional Liaison Group (PLG) has met 10 times over 13 days since 2008 to make recommendations about the structure of the Register, protected titles, voluntary registers, grandparenting, education and training and standards of proficiency. The PLG met for the last time in February 2011. Two consultations have also been held over this period.

In May 2011 the Council will consider a report from the Executive about the work of the PLG and its progress against its terms of reference agreed by the Council at its March 2010 meeting.

5.3 Establishing new registers

The Health and Social Care Bill 2011 includes provisions which would allow the regulators to set up voluntary registers. The Command Paper says that the Government will only regulate on a statutory basis in exceptional circumstances, viewing a system of 'assured voluntary registration' as a 'more proportionate' approach. Alongside the powers of regulators to set-up voluntary registers, the CHRE will have powers to accredit voluntary registers.

The Command paper also says that the HPC should establish a voluntary register of adult social care workers by 2013. The regulators can only set up voluntary registers once they have undertaken an impact assessment and consulted stakeholders.

The work in this area (already ongoing) will cover the development of the Council's approach in this area – from establishing and agreeing principles to developing a process for deciding which groups might be considered for voluntary registration and how the HPC will conduct an impact assessment and consultation.

As this is recent announcement, the work that may be necessary in 2011/2012 is currently under discussion but is likely to include some or all of the following activities:

- producing papers, reports and briefings for the Council and its Committees;
- meeting with external stakeholders, including, in particular, discussion with the Department of Health regarding the registration of adult social care workers in England;
- undertaking desk research including researching the social care workforce in England and the approach of the other care councils in the UK;
- considering how this work should take account of the existing new professions process and the HPC's ongoing powers to recommend statutory regulation;
- developing an approach and process for prioritising groups and for undertaking impact assessment and consultation; and
- planning for future work and participating in internal discussion.

5.4 Student registration

The Health and Social Care Bill 2011 provides discretionary powers for the regulators to set up voluntary registers relating to students, subject to impact assessment and consultation. In addition, social work students in England are currently registered on a voluntary basis by the GSCC.

It is anticipated at this stage that the Department will manage the process of undertaking an impact assessment and consultation in order to inform a decision by the Council about student registration. The exact scope and timescales for this work are currently under development and will be presented to the Council for approval.

5.5 Herbal medicine practitioners

In April 2011 Europe legislation will mean that manufactured herbal medicines will need to have a licence, in the same way as conventional medicines. Under the legislation the only exemption from this requirement to obtain a licence is if a practitioner is regulated. As many practitioners make-up bespoke unlicensed medicines for individual patients, it would not be feasible to obtain a licence for every medicine they dispense.

The Command Paper says that the Government plans to introduce HPC regulation for these practitioners but does not go into detail about how these groups will be regulated.

The paper says that the focus of regulation will be 'solely on minimising risk to the public' and that the register will be a register of people who are able to dispense unlicensed herbal medicines. A consultation is expected in 2011.

As this is recent announcement, the work that may be necessary in 2011/2012 is currently under discussion but is likely to include some or all of the following activities:

- responding to the joint administrations' consultation;
- producing papers, reports and briefings for the Council and its Committees;
- meeting with external stakeholders;
- participating as part of an internal project team; and
- planning for any policy or standards development work as may be required.

6. Other

This section outlines the other projects the Department will undertake in 2011/2012. This includes routine, regulator or ongoing pieces of work, and work which has arisen due to external factors (other than the Health and Social Care Bill 2011 or the Command Paper).

6.1 Standards for independent and supplementary prescribing

In 2010/2011 the Executive participated as part of the Allied Health Professions Prescribing Board and its working groups. In particular, this Board is looking at proposals to extend independent prescribing rights to chiropodists/podiatrists and to physiotherapists. In September 2010 the Department of Health (DH) published a stakeholder engagement exercise seeking stakeholder views on extending independent prescribing responsibilities to chiropodists/ podiatrist and physiotherapists. The DH consulted on 6 options, 5 of which would necessitate the HPC annotating the Register.

Separately, in May 2010 the Ambulance Policy Team of the DH also published a stakeholder engagement exercise seeking stakeholder views on extending independent prescribing responsibilities to paramedics. The DH consulted on 6 options, 5 of which would necessitate the HPC annotating the Register.

Working with the AHP prescribing board the Executive identified that should the ability to train as independent prescribers be extended to any or all of these professions it would be necessary to produce standards for these entitlements, particularly to ensure that programmes could be approved. At its meeting in September 2010 the Education and Training Committee agreed the following:

- that the Executive should draft standards for independent prescribing depending upon the outcomes of the public consultation by the Department of Health; and
- that the standards should sit alongside standards for supplementary prescribing in a separate document.

This project would need to be commenced following any decision by the Department of Health to progress independent prescribing responsibilities for chiropodists and physiotherapists and/or paramedics. The required activities would include the following.

- Drafting standards of proficiency, seeking external input as appropriate. This may include drawing on expertise from members of the AHP Prescribing Board and its working groups.

- A public consultation on the standards.
- Revising the standards in light of the consultation.
- Approval / publication of finalised standards prior to first approval visit.

However, any introduction of prescribing would be subject to a decision by the Committee on Safety of Medicines, which advises the Medicines and Healthcare Products Regulatory Agency (MHRA), and changes to secondary legislation. This project may therefore be subject to delay or cancellation owing to Department of Health and parliamentary timescales / policy decisions.

The organisational consequences of a decision to extend independent prescribing rights to HPC registered professions, including the impact on the Policy and Standards Department, described above, and upon the Education Department, for example, will be managed as part of the Annotation of the Register major project, described in section 4.8.

6.2 Revalidation

This work continues from 2010/2011 and is funded by a Department of Health grant. In 2011/2012 the next phase of planned work will be completed.

The Command Paper says that the regulators should over the coming year continue to develop an evidence base for revalidation, focusing on costs, benefits and proportionality. The paper is clear that changes to legislation will only be considered 'where there is evidence to suggest significant added value in terms of increased safety or quality of care for users of health care'.

The timescales of been revised in light of other organisational priorities but will complete within the timescale envisaged in the Command paper.

The projects included in this work are outlined below. Externally commissioned research is denoted with an '*' symbol. 'TBC' denote where the scope of the project or how it might be delivered is currently under review by the Executive.

- The link between conduct during pre-registration education and training and subsequent fitness to practise action*
- Piloting a pre-registration education and training 'professionalism tool'*.
- 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 and other professions (TBC).
- Review of existing revalidation processes that have been implemented or are being developed by other UK regulators – September 2011 Council (TBC).
- Exploration of patient feedback tools currently being developed by other health regulators* - December 2011.
- Final report – consolidation of all projects and recommendations – December 2011 Council.

6.3 CHRE performance review 2011/2012

Every year, the Council for Healthcare Regulatory Excellence (CHRE) reviews the performance of all nine health regulators against its standards of good regulation. The Policy and Standards Department is responsible for co-ordinating the HPC's submission including writing some of the content and reviewing content from colleagues across the organisation. This process involves submitting a report to CHRE, attending meetings, providing additional information as required, and approving the final report(s).

6.4 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.

6.5 Safeguarding vulnerable groups

Legislation has been introduced to implement the recommendations of the Bichard report around the protection of children and of vulnerable adults. This was implemented via the Safeguarding Vulnerable Groups legislation in England, Wales and Northern Ireland, and the Protection of Vulnerable Groups (PVGGS) legislation in Scotland.

This legislation has created 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. Being barred under either system would prevent many registrants from practising their profession. The scheme will impact particularly on fitness to practise processes as the Department will need to pass information to the organisation making the barring decisions and could also receive barring information back. As a result, it is important that the Council remains up to date with developments in both schemes.

The scheme in Scotland created under the PVGS went live on 28 February 2011 and is being implemented on a phased basis. The scope of the scheme for England, Wales and Northern Ireland has recently been reviewed and revised legislation is currently being discussed within the Houses of Parliament.

The Department has worked with the Fitness to Practise Department to respond to initial consultations on the setting up of barring arrangements. 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.

Activities may include: responses to consultations / reviews; attendance at regulatory forums; articles for the HPC 'In Focus' newsletter; and briefings.

6.6 European Union

This area is shared with the Communications Department and in particular the Public Affairs and Stakeholder Communications Manager.

In 2010/2011 the European Commission reviewed the mutual recognition directives and recently sought views from the regulators via a consultation. The results of the consultation once known might have implications in the future for how the HPC manages applicants from those seeking mutual recognition

In 2011/2012, activities will include:

- continued membership of the Alliance of UK Health Regulators in Europe (AURE);
- attendance at meetings and events in the UK and in Europe as appropriate; and
- monitoring developments including responding to consultations or producing papers as appropriate.

7. Department activities

This section records ongoing departmental activities which do not fall directly into a discrete project area, and also outlines any specific activities which are about improving the way the department functions.

7.1 Ongoing activities

In 2011/2012 the Department will also continue to perform the following ongoing 'operational activities'.

- Responding to emails into the policy inbox and consultation inboxes and to hard copy correspondence.
- Producing internal briefings and reports as required.
- Responding to consultations. The Department will continue to respond to other organisations' consultations where relevant to the HPC's wider role and remit.
- Managing the new professions ('aspirant groups') process, including meeting with groups, responding to correspondence and providing comments on draft applications.
- Producing articles for the HPC In Focus newsletter, for Education Update and for the HPC intranet.
- Working closely with the Communications Department including undertaking planned speaking commitments, participating at HPC events and assisting with press enquiries.
- Stakeholder liaison on regulatory / policy matters including undertaking both reactive and proactive meetings with stakeholders.

7.2 Department improvements

In 2011/2012 the following work is planned to improve the operation of the Department.

Review of consultation methodology and analysis

This area was included in the workplan for 2010/2011 and continues into 2011/2012. The Department plans to continue to 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.

This will include the following activities.

- To review the existing template / produce an 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 2010, a response form which could be downloaded and emailed to the HPC was provided as part of a consultation to help facilitate responses and had a promising take-up rate. Some other organisations 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 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.

8. Equality and Diversity

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

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

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.

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9. Projects for 2012/2013 to 2013/2014

The Policy and Standards Department will continue to work flexibly, adapting plans for delivering work in response to changes in the external environment.

In addition to the ongoing priorities attached to projects that arise from the Health and Social Care Bill and the Command Paper, throughout this period, the following projects are identified as potential priorities for 2012/2013 (subject to relative priorities, budget and resourcing).

- **Review of the standards of conduct, performance and ethics (SCPE)**

These standards were previously reviewed and republished in 2008 but given the expansion of the register in the period since, it is suggested that the next review should be brought forward.

The increasing diversity of the professions regulated by the HPC means that it will be important to ensure that the views of service users and registrants are taken account of in the review process. The involvement of service users in the development and review of standards and guidance was also identified in the CHRE performance review 2010/2011 as an important area. It is therefore planned that the periodic review should commence early in 2012/2013 to include externally commissioned focus group research.

- **CPD research (in partnership with the Registration Department)**

The CPD standards have been effective since July 2006 and the CPD audits commenced in 2008. 2012/2013 therefore seems an appropriate point to externally commission research similar to the Fitness to Practise Department's 'Expectations of Complainants research' into HPC's approach to CPD. For example, this might gather the views of experiences of registrants who have and have not been audited and the views of professional bodies and other stakeholders.

- **Consultation recording and analysis**

The current method of consultation recording and analysis is resource intensive. In 2012/2013 it is suggested that a small project might be a find an IT solution to improve this.

10. 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 set out in the HPC's Risk Register are outlined below, together with the mitigations for each risk.

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

- Legal advice sought on processes.
- Appropriately experience and trained members of the policy team.
- Quality management system and processes.

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

- Use of Professional Liaison Groups, and Council and committees including members with appropriate expertise.
- Appropriately experience and trained members of the Policy team.
- Consultation with stakeholders and legal advice sought.

14.3 Changing/evolving legal advice rendering previous work inappropriate

- Use of well qualified legal professionals. Regular reviews.
- Legal advice obtained in writing.
- Appropriately experienced and trained members of Policy team and others, e.g. HR.

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

- EMT responsible for remaining up to date relationships with government departs and agencies.
- HPC's five year planning process.
- Legal advice sought.

14.5 PLG member recruitment without requisite skills and knowledge.

- Skills and knowledge identified in work plan.
- Recruitment policy.
- Council scrutiny of PLG result.

Appendix 1

Policy and Standards Department Standards workplan

2011/2012

1. This document

- 1.1 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.
- 1.2 This document was first approved by the Council in December 2006, and has been revised for 2011/2012. It will be revised and brought back to the Council alongside the Policy and Standards Department workplan in future years.

The standards

- 1.3 The Council produces four key standards which are the subject of this document. They are the:
- Standards of proficiency
 - Standards of conduct, performance and ethics
 - Standards of education and training
 - Standards of continuing professional development
- 1.4 The Council also publishes requirements for returning to practice.
- 1.5 Setting standards is one of the Council's key processes and the standards are central to how individuals become and remain registered.

Overall aims

- 1.6 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.

Overarching aims

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

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.

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

Standards of proficiency

Legal background

- 2.1 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

- 2.2 The standards are set at a threshold or 'necessary' level and play a central role in entry to the register. The standards set out the abilities necessary to practice in a profession. They describe what someone needs to be able to do, to know and to understand in order to be registered for the first time.
- 2.3 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.
- 2.4 The standards include a 'generic core' which is common to all professions on the register and profession-specific standards.
- 2.5 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.
- 2.6 The Executive is currently undertaking a project looking at our approach to post-registration qualifications and annotation of the Register. Subject to decisions by the Education and Training Committee and the Council, the Executive may develop additional standards related to post-registration qualifications.
- 2.7 In addition, the Executive is involved in a project run by the Department of Health to allow physiotherapists and chiropodists/podiatrists to prescribe independently. The HPC would need to set standards for independent prescribing if these professions gained these prescribing rights.

Standards of conduct, performance and ethics

Legal background

2.8 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.’

2.9 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’*.

2.10 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

2.11 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.

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

Standards of education and training

Legal background

2.13 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).’

2.14 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

2.15 The standards ensure that education programmes allow those who successfully complete the programme to meet the standards of proficiency. The standards cover such areas as admissions, assessments and practice placements.

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

Standards of continuing professional development

Legal background

2.17 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

- 2.18 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.
- 2.19 The standards are generic and focus on the outcomes of registrants' learning.
- 2.20 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 second annual report for CPD, which includes information on the audit process and the outcomes of the process.

Requirements for returners to practice

Legal background

2.21 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

- 2.22 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.
- 2.23 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

- 3.1 This workplan is divided into five areas relevant to the Department's standards work.
- 3.2 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.

Develop and review standards

Aims / Objectives

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

Standards for new professions

- 3.3 Whenever a new part of the HPC Register is opened, the Council needs to publish standards of 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.
- 3.4 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.
- 3.5 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.
- 3.6 The Council is required to consult before publishing or amending any standards.
- 3.7 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.

- 3.8 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 then held between July and October 2009 on the proposed statutory regulation of psychotherapists and counsellors. Following the consultation the PLG was reconvened to address outstanding areas within its terms of reference, which included further work on the draft standards of proficiency.
- In autumn 2010 we established a PLG to help to prepare draft standards of proficiency for social workers in England. We will consult on these standards in summer 2011, in preparation for the Register opening in April 2012.

Ongoing and periodic review

- 3.9 Ongoing and periodic review will ensure that the standards continue to be fit for purpose and that their content is well understood by the Council's stakeholders.
- 3.10 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.
- 3.11 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.
- 3.12 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.

- 3.13 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.
- 3.14 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.
- 3.15 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 consultation was held between April and July 2010 on a minor change to the standards of proficiency for health psychologists. This change was agreed by the Education and Training Committee and Council and was effective from 1 October 2010.
- A review group was established in September 2009 to review the generic standards of proficiency. A consultation was held on the outcomes of the review in summer 2010. The revised standards will be brought to Education and Training Committee and Council in March 2011. Once the revised generic standards have been agreed, they will be implemented on a staggered basis across all the professions.

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.
- 3.16 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’.¹
- 3.17 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
- 3.18 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.
- 3.19 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.
- 3.20 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.
- 3.21 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.
- 3.22 Where a need for guidance might be identified, but such guidance would not be sufficiently substantial to justify separate published guidance, the

¹ 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>.

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

3.23 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.

- In summer 2010 the Executive audited responses sent to emails to the departmental inbox. The audit identified a number of topics which the department is regularly contacted about. The department is developing a series of articles for the HPC newsletter 'In Focus', based on these frequently asked about topics.
- In spring 2010 a consultation was held on removing the requirement to provide a health reference when applying for registration. This change will be effective from 1 April 2011. The 'Guidance on health and character' will be revised following this decision and a consultation held on the revised guidance in spring 2011.

Standards and ethics queries

Aims / Objectives

- 3.24 Responses to standards and ethics queries are appropriate and consistent.
- 3.25 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.)
- 3.26 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.
- 3.27 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.
- 3.28 In 2010/2011 the Executive audited responses sent to emails to the departmental inbox. The audit identified a number of topics which the department regularly receive queries about. These topics are now the subject of a series of articles in the HPC newsletter. In addition, the department is working to develop a series of documents to support a consistent approach to replying to emails. This includes a bank of useful links and factsheets on relevant queries.

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.
- 3.29 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.
- 3.30 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.
- 3.31 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.
- 3.32 The Council is often involved in the development of standards and guidance by other organisations.
- 3.33 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'

Communicate

Aims and Objectives

- To communicate effectively the role and purpose of the Council's guidance to its stakeholders.
- 3.34 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.
- 3.35 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.
- 3.36 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	2012/13*
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**	TBC	TBC

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

*These standards were previously reviewed and republished in 2008 but given the expansion of the register in the period since, it is suggested that the next review should be brought forward. We intend to have two phases for the review – the first phase to undertake a review of the standards and commission appropriate research, the second stage for consultation and republication (subject to budgeting and planning).

**The returners to practice requirements are not one of the core sets of standards but are nonetheless included here as they will need to be reviewed at an appropriate future point.