

**Council**

**Public minutes of the 137th meeting of the Health and Care Professions  
Council as follows:-**

**Date:** Thursday 1 July 2021

**Time:** 10am

**Venue:** Videoconference

**Present:** Christine Elliott (Chair)  
Stephen Cohen  
Maureen Drake  
Kathryn Foreman  
Sue Gallone  
Helen Gough  
Nicola Hunt\*  
Sonya Lam  
Eileen Mullan  
Pameleta Ricketts\*  
David Stirling  
Kathryn Thirlaway  
Stephen Wordsworth

**In attendance:**

Claire Amor, Secretary to Council  
John Barwick, Chief Executive and Registrar  
Olivia Bird, Policy Manager  
Matthew Clayton, Senior Policy Officer  
Laura Coffey, Head of Fitness to Practice  
Kellie Green, Head of Professionalism and Upstream Regulation  
Colette Higham, Professional Standards Authority  
Naomi Nicholson, Executive Director of Professional Practice and Insight  
James Penry-Davey, Capsticks  
Charlotte Rogers, Policy Lead  
Andrew Smith, Executive Director of Regulation

\*Council Apprentice

## Public Agenda

### **Item 1. 21/81 Chair's welcome and introduction**

1.1 The Chair welcomed those present to the 137<sup>th</sup> meeting of Council.

### **Item 1.i. 21/82 Apologies for absence**

1.i.1 No apologies for absence were received.

### **Item 1.ii. 21/83 Approval of Agenda**

1.ii.1 The Council approved the agenda.

### **Item 1iii. 21/84 Declaration of Members' interests**

1.iii.1 No interests were declared.

### **Item 1iv. 21/85 Minutes of the Council meeting of 27 May 2021**

1.iv.1 The Council approved the minutes of its meeting of 27 May 2021.

### **Item 1.v. 21/86 Matters arising**

1.v.1 The Council noted those matters arising from previous meetings.

## Standing reports

### **Item 2. 21/87 Chair's report**

2.1 The Council noted the report.

### **Item 3. 21/89 Chief Executive's performance report**

3.1 The Council received a paper from the Chief Executive.

3.2 The Council noted the following points:-

- the report included new Key Performance Indicators (KPIs) agreed by the Council at its May 2021 meeting, as well as the first Corporate Plan 2021-22 deliverables progress report and the first iteration of the new Strategic Risk Register;
- registration responsiveness remained an area of concern. This was largely due to a significant increase in international applications as well

as remote telephony system limitations. A larger proportion of the Registration Team was working from the HCPC to mitigate this;

- the HCPC fee rise was implemented from 1 July 2021. The Chief Executive thanked the Project Team for their excellent work in smoothly implementing the change;
- in the reporting period there had been considerable engagement on the Professional Qualifications Bill which provided for the mutual recognition of qualifications. The HCPC and other regulators had concerns about the drafting of the Bill which would have led to a reduction of regulatory autonomy to determine if standards and requirements were met by applicants. The HCPC's engagement had improved the Bill and raised the HCPC's profile;
- the HCPC had responded to the government's consultation: 'Regulating healthcare professionals, protecting the public'. Following the Queen's Speech in May, the publication of the Health and Care Bill was expected imminently, and the Department of Health and Social Care (DHSC) had commissioned KPMG to undertake an independent review on how the regulatory landscape might be simplified. The timeline for this review was approximately six months; and
- the new FtP Case Management System successfully launched on 7 June. The Chief Executive thanked the Project Team for delivering a significant system at pace, a test case for the HCPC's Digital Transformation Strategy.

3.3 The Council discussed the Corporate Plan 2021-22 deliverables. It was noted that the Executive aimed to balance maintaining momentum for developing new areas of work while ensuring that the Plan remained affordable. The Executive provided assurance that resource to support the development of the HCPC's equality diversity and inclusion work was included in the budget.

3.4 The Council noted that, though the tone of voice project had been postponed due to resource pressures, organisation wide customer service training was due to take place, and that FtP would commence its own template correspondence review.

3.5 The Council noted the performance issues with registration responsiveness. Concern was raised that any future pandemic lockdowns would similarly result in service disruptions. The Executive Director of Regulation advised that the telephony system was under review to fix the capacity issues. He added that additional resource had been agreed to address the backlog, and that a project to move international applications online, rather than a paper application, was being initiated. The Council suggested that an online application tracking function, or automatic messaging at key stages be explored as system enhancements to improve customer experience and reduce contacts.

3.6 The Council noted that a review of the international comparable qualifications list was included on the Registration workplan for 2021-22.

- 3.7 The Council asked if the responsiveness performance issues had been clearly communicated externally so that registrants and applicants were aware of what to expect. The Executive Director of Regulation agreed to review this communication. **Action – Executive Director of Regulation**
- 3.8 The Council welcomed the launch of the new FtP CMS system. It was noted that benefits tracking measures had been agreed and would be monitored as the system embedded.
- 3.9 The Council asked if the Executive was engaging on the issue of declining new entrants into at risk professions, such as podiatry. The Chief Executive confirmed that the Executive was connected to the NHS People Plan and Health Education England's work in this area. The HCPC was able to contribute data on age demographics of the professions.
- 3.10 The Council discussed the new KPIs. It was noted that employee turnover remained high and that the take up of exit interviews was low. The Council agreed that this intelligence was important to understand the health of the HCPC culture and the actions would positively impact on it. The Council suggested a less intensive method be offered to leavers such as an online survey. The Executive noted that the Council would take part in a workshop on 22 July to inform the HCPC's developing People Strategy.
- 3.11 The Council requested that the presentation of the KPIs be reviewed for the next presentation. The following elements were requested:-
- more historical data provided for measures where possible;
  - annual cumulative totals for measures such as complaints; and
  - colour coding provided for measures without a target for Council's understanding the Executive's view of the performance.

**Action – Executive Leadership Team**

- 3.12 The Council requested that a summary of the nature and use of the HCPC's agreed memoranda of understanding be provided in the September 2021 report. **Action – Head of Governance**

**Item 4. 21/90 Fitness to Practice Improvement Plan – progress report**

- 4.1 The Council received a paper from the Executive Director of Regulation.
- 4.2 The Council noted the following points:-
- since the last report in May, a further four projects had completed and moved into the benefits realisation stage. 10 of the original 16 projects were complete. Of the remaining projects, two were designated as amber;

- in early June, the new FtP case management system went live. Some post launch bugs were being resolved, this risk had been mitigated by putting in place a period of post launch 'hyper care' from the supplier. None of the issues had significantly impacted on business as usual work;
- perform plus programme had reached the end of the cycle one. Cycle two was underway with the embedding of longer term plans as part of the sustainability phase with less intensive support provided by PwC;
- the programme had delivered a tangible impact by increasing productivity, developing leadership capacity, improving quality and consistency of output and increasing employee engagement and collaboration;
- of the two amber projects, one related to hearings. This project remained amber due to external factors, namely the continuing impact of the pandemic, and the uncertainty around whether powers to hold remote hearings would continue beyond October 2021.;
- the other amber project was the production of a suite of guidance documents. This delay was intentional to ensure that the guidance reflected the new CMS ways of working; and
- performance across the majority of teams' was on target. One area of concern was the threshold process. Additional management resource had been put in place to prioritise cases and other teams are providing additional support while the new Case Managers brought in to bring the team up to capacity..

4.3 The Council welcomed the positive results from the perform plus programme, in particular the impact on employee turnover. The Council asked if the new Case Managers recently recruited were permanent employees, temporary or agency. The Executive Director of Regulation confirmed these were permanent appointments and that the Executive wished to end reliance on agency workers to cover peaks due to the impact on the overall FtP culture. Notice periods for permanent employees were being reviewed to better mitigate the risk of resourcing gaps.

4.4 The Council asked how the positive learning from the perform plus programme would be embedded into the business as usual for the FtP Team and if wider organisational roll out was planned. The Executive Director of Regulation confirmed that organisation wide sharing of the methodology was taking place, and that this was in place for the Executive and Senior Leadership Teams. An FtP Operational Manager was the designated lead for the perform plus methodology and champions were embedded in each of the FtP Teams'.

4.5 The Council asked if stakeholders had been engaged in the return to in person hearings. The Executive Director of Regulation advised that this engagement had taken place and that views varied on the continuing use of virtual hearings and that the HCPC Rules did not explicitly preclude the use of

remote hearings. DHSC had indicated a permanent change to the HCPC's Rules to explicitly allow virtual hearings was possible. This would require consultation.

- 4.6 The Council welcomed the extensive coaching delivered as part of the perform plus programme. The Executive noted that a coaching apprenticeship was being developed to build coaching skills internally.
- 4.7 The Council thanked the Executive Director of Regulation and the Head of FtP for the comprehensive report and noted that the Executive had committed to presenting a trajectory for the improvement programme at the September meeting of Council.

### Items for discussion / decision

#### **Item 5. 21/91 Consultation on the revised Guidance on Health and Character**

- 5.1 The Council received a paper from the Senior Policy Officer. The paper presented the results of a recent public consultation on proposed changes to the HCPC's Guidance on Health and Character.
- 5.2 The Council noted the following points:-
- the HCPC consulted between 18 January and 12 April 2021 on proposed changes to the Guidance on Health and Character;
  - the changes aimed to align the guidance with recent developments in other guidance and research. The changes also merged the guidance with the Health and Character Declarations Policy to create a single public document;
  - the consultation responses showed strong support for the changes, with the majority of respondents agreeing that the guidance gave clear explanations of when applicants or registrants needed to declare matters;
  - respondents who disagreed wanted the HCPC to provide more specificity than was possible to provide in the Guidance; and
  - the Education and Training Committee (ETC) considered the paper at its June meeting and agreed to recommend the revised guidance to the Council for approval.
- 5.3 The Council welcomed the revised guidance and agreed that the right balance had been struck on the level of prescription to ensure a focus on personal judgement.
- 5.4 The Council discussed the response to the consultation, noting that registrant response levels were low. The Executive confirmed that the response rate was in line with previous similar consultations, given the length of the guidance this was expected. The HCPC had reached out directly to key stakeholders to ensure their views were captured.

- 5.5 The Council agreed that the consultation had been visible on social media and that promotion of consultations had greatly improved from where it was. It was suggested that the consultation being live at the time of the second national lockdown likely impacted on response rates.
- 5.6 The Council suggested that responders be asked how they heard about consultations as a standard question to inform future consultation promotion activity. The Executive agreed to do this. **Action – Executive Director of Professional Practice and Insight.**
- 5.7 The Council suggested further discussion to explore how best to meaningfully engage stakeholders in consultations. Council Apprentice Pameleta Ricketts agreed to share her experiences of consultation engagement with the Executive.
- 5.8 The Council approved the revised Guidance on Health and Character.

**Item 6. 21/92 Consultation on the revised threshold level of qualification for entry to the Register (SET 1) for Operating Department Practitioners**

- 6.1 The Council received a paper from the Senior Policy Officer. The paper presented the results of a recent public consultation on changing the threshold level of qualification for entry to the Register (SET 1) for Operating Department Practitioners (ODPs).
- 6.2 The Council noted the following points:-
- the HCPC consulted between 25 January and 26 April 2021 on proposed changes to SET 1 for ODPs;
  - the proposed change was supported by the majority of respondents. 20% did not support a change;
  - if the Council approved the change, the HCPC would cease accreditation of new ODP programmes below degree-level after 2 July 2021. Approved programmes delivering below degree-level would not be able to take on new cohorts from 1 September 2024;
  - the Executive believed this phasing struck the right balance between safeguarding service user safety and providing education providers, employers, and other stakeholders adequate time to plan for the transition;
  - there were significant differences between Scotland and the rest of the UK in the provision of ODP education. The Executive had undertaken extensive engagement with Scottish Stakeholders through the development and consultation process to manage any anticipated negative impacts of increasing ODP SET 1; and

- ETC considered the paper at its June meeting and agreed to recommend the change to SET1 for ODPs to the Council for approval.
- 6.3 The Chair of the ETC noted the significant amount of work undertaken by the Executive to ensure that the proposal received support and that stakeholder concerns were anticipated and addressed.
- 6.4 The Council welcomed the positive response to the consultation and thanked the Senior Policy Officer for the excellent engagement work undertaken to ensure the proposal was supported across the four countries, in particular Scotland.
- 6.5 The Council approved the increase of SET 1 for ODPs from Diploma of Higher Education to Degree-level.

### **Item 7. 21/93 Review of regulation of advanced practice – options analysis and recommendations**

- 7.1 The Council received a paper from the Policy Lead. The paper presented the Executive's analysis of the findings of the HCPC's review of the case for the regulation of advanced practice and its recommendations to Council.
- 7.2 The Council noted that:-
- the review found that, at the present time, there was not sufficient evidence to meet the high threshold required for a new regulatory framework to be developed;
  - the review identified the complexity of the advanced practice landscape. There was no overall stakeholder consensus on what advanced practice was or if regulation was proportionate;
  - no clear evidence was identified that suggested public safety concerns could be addressed through regulation;
  - the review highlighted the risk that regulation could stifle innovation before the sector had matured; and
  - there was strong consensus that regulators, registrants and other stakeholders would benefit from a clearer, shared definition of advanced practice;
  - the Executive recommendation was for the HCPC to continue to provide thought leadership by leading the development of a definition and guiding principles for advanced practice in collaboration with stakeholders. The HCPC should also continue to monitor the development of advanced practice and respond to changes where necessary.
- 7.3 The Policy Lead thanked those Council members who took part in the expert reference group to steer the review. Helen Gough, the Council member lead



for the review, noted the extensive work undertaken by the Executive to bring clarity and balance to a complex and contentious area.

- 7.4 The Council agreed that the evidential case for regulation of advanced practice had not been made from the review findings.
- 7.5 The Council discussed the Executive's recommendation for further action. The Council agreed that engagement with stakeholders was central to the HCPC's thought leadership on advanced practice and that a communications campaign should take place to promote the definition and principles once developed. The Council also welcomed the proposal that a review point be agreed following five years, or before if needed due to changes to advanced practice.
- 7.6 The Council agreed that any advanced practice principles should be high level so as not to impede the still developing area.
- 7.7 The Council noted that, while the majority of stakeholders engaged supported a monitor and review approach, a significant number of stakeholders held the view that regulation was needed for public safety, and that the communication of the Council's decision not to pursue regulation at this time would require clear reasoning. The Policy Lead noted that the communication would be clear that the HCPC would continue to review the evidence for regulation of advanced practice and would take forward proposals if this case emerged.
- 7.8 The Council emphasised its ambition that the HCPC strongly lead in developing a joint and multi-professional understanding of advanced practice scope through stakeholder collaboration and engagement. The Executive agreed that a cross sector agreement was essential to the acceptance of any developed principles or definition. The Policy Lead confirmed that this engagement would include other health care professional regulators.
- 7.9 The Council agreed that future HCPC standards reviews should include reflection on their applicability to advanced practice.
- 7.10 The Council agreed that the HCPC should proceed in line with option two as set out in paragraph 72, Annex A of the paper as follows:-
- lead the development of a definition and guiding principles for advanced practice in collaboration with key stakeholders; and
  - continue to monitor the developing advanced practice landscape and review and respond to changes where necessary.
- 7.11 The Council noted that Charlotte Rogers, Policy Lead, who had led the HCPC's work on advanced practice, would shortly be leaving the HCPC for an external opportunity. The Council thanked Charlotte for her excellent work. The Executive Director of Professional Practice and Insight noted that resourcing of the Policy and Standards Team had been reviewed to ensure capacity.

## **Item 8. 21/94 Professional liaison service year one evaluation**

- 8.1 The Council received a paper from the Head of Professionalism and Upstream Regulation. The paper provided an evaluation of the first year of the HCPC's Professional Liaison Service (the Service).
- 8.2 The Council noted the following points:-
- the pandemic had impacted on the HCPC's ability to hold face to face engagements. Instead, a series of online workshops and webinars were held. The Service also led the delivery of a wellbeing campaign to support registrants;
  - engagement with workshops had been excellent. 90% of attendees had agreed that their knowledge of the HCPC's role and resources had improved and 50% felt that their practice would change as a result;
  - due to pressures on employers as a result of the pandemic, only one employer partnership was pursued, an ambulance trust placed in special measures, this had been at the employer's request. Positive feedback had been received from the Trust on the impact of the HCPC's engagement;
  - positive engagement had been achieved through the HCPC's online employer hub and dedicated newsletter; and
  - performance against the agreed success measures for the Service had been strong in the first year, while impacted by limited resource and the impact of the pandemic.
- 8.3 The Council welcomed the evaluation results, agreeing that the Service was central to the success of the HCPC's Corporate Strategy 2021-26.
- 8.4 The Council discussed the link between prevention activity and a decrease in FtP concerns. The Head of Professionalism and Upstream Regulation advised that to achieve the ultimate aim of causing a relative change in the nature and volume of received fitness to practise concerns, there was a need to scale up the Service and widen its reach. The Executive aimed to increase the number of Professional Liaison Consultants from one to five by the end of 2022-23.
- 8.5 The Council discussed collaborative engagement with other organisations in the sector as well as influencing at a policy level. The Head of Professionalism and Upstream Regulation agreed that working in collaboration with stakeholders enabled the Service to amplify its reach. This had been demonstrated by the success of a remote consultation webinar delivered in collaboration with the Scottish Government's lead for Near Me Network. Additionally, a joint initiative was being developed with the NMC. At a policy level the Service was engaged with Health Education England and was seeking engagement with all four country equivalents. The Executive agreed to explicitly add 'working with other organisations' to the

professionalism and prevention framework action plan. **Action - Head of Professionalism and Upstream Regulation.**

- 8.5 The Council suggested that the Executive could seek to utilise HCPC's Partners networks to further the reach of the Service. The Executive agreed to explore this. **Action - Head of Professionalism and Upstream Regulation.**
- 8.6 The Council noted the spikes in traffic to the HCPC's online resources. The Head of Professionalism and Upstream Regulation advised that these resources were used as part of webinars and workshops. Resources for students had received particularly positive feedback on their usefulness.
- 8.7 The Council thanked the Professional Liaison Service Team for their excellent work establishing the HCPC's work in this area. The Council reconfirmed its support of the continuing development of the Service.

### Items to note

The Council noted the following items:

#### **Item 9. 21/95 Unconfirmed minutes of the People and Resources Committee of 3 June 2021**

- 9.1 The Chair of the People and Resources Committee noted that the Committee had inputted into the developing People Strategy. He added that the Chairs of the Committees had attended the other Committees in June to observe, as well as meeting together with the Chair of Council to discuss cross committee matters.

#### **Item 10. 21/96 Unconfirmed minutes of the Education and Training Committee of 10 June 2021**

- 10.1 The Chair of the Education and Training Committee noted that the Committee had made recommendations to Council on the consultations on the meetings agenda. She noted that the Committee had a focus on improving the performance reporting it received from the Registration and Education Departments.

#### **Item 11. 21/97 Unconfirmed minutes of the Audit and Risk Assurance Committee of 11 June 2021**

- 11.1 The Chair of the Audit and Risk Assurance Committee noted that improvements to the HCPC's approach to risk management had been evident at the recent Committee meeting, with a comprehensive discussion on the HCPC's strategic risks and how these were being mitigated. She added that it had been encouraging to hear positive feedback from other areas of the HCPC for the internal Quality Assurance function.
- 11.2 The Council noted the impact of the recent Committee governance review was evident and thanked the Senior Council Member and the Head of Governance for their work in achieving this.

**Item 12. 21/98 Any other business**

12.1 There was no further business.

**Item 13. 21/99 Date and time of next meeting:**

13.1 Wednesday 22 September 2021

**Item 14. 21/100 Resolution**

The Council adopted the following resolution:

‘The Council hereby resolves that the remainder of the meeting shall be held in private, because the matters being discussed relate to the following;

- (a) information relating to a registrant, former registrant or application for registration;
- (b) information relating to an employee or office holder, former employee or applicant for any post or office;
- (c) the terms of, or expenditure under, a tender or contract for the purchase or supply of goods or services or the acquisition or disposal of property;
- (d) negotiations or consultation concerning labour relations between the Council and its employees;
- (e) any issue relating to legal proceedings which are being contemplated or instituted by or against the Council;
- (f) action being taken to prevent or detect crime to prosecute offenders;
- (g) the source of information given to the Council in confidence; or
- (h) any other matter which, in the opinion of the Chair, is confidential or the public disclosure of which would prejudice the effective discharge of the Council’s functions.

Item	Reason for Exclusion
15	H
16	H
17	H
18	H
19	C, H
20	C, H
21	C, H
22	C

Chair: .....

Date: .....