

Health Professions Council's Strategic Intent

Park House, 184 Kennington Park Road, London, December 2003

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I. Introduction

The Health Professions Council (HPC) is an independent UK regulator of healthcare professionals

- **Statutory professional self regulation**
- **Reports to Privy Council**
 - Not part of Department of Health
 - Not part of NHS, (E,NI S & W)
- **Body Corporate**
- **Self financing**
- **Not a Charity**
- **Eight other independent UK regulators of healthcare professionals**

HPC currently regulates twelve autonomous professions

- 1. Arts Therapists**
- 2. Biomedical Scientists**
- 3. Chiropodists**
- 4. Clinical Scientists**
- 5. Dietitians**
- 6. Occupational Therapists**
- 7. Orthoptists**
- 8. Paramedics**
- 9. Physiotherapists**
- 10. Prosthetists & Orthotists**
- 11. Radiographers**
- 12. Speech & Language Therapists**

HPC powers derive from Primary, Secondary & Tertiary legislation and Rules all of which are approved by Parliament

- **Health Act 1999**
 - Chapter 8
 - CRHP
- **Health Professions Order 2001**
 - 1st April 2002
 - Statutory Instrument No. 254
 - Replaced the Council for Professions Supplementary to Medicine (CPSM) & 12 Boards which had been established 1961
- **Rules**
 - Came into force on 9th July 2003
- **Standards & Guidance**
 - Published by HPC following consultation

II. HPC's Purpose

HPC main objective

“To safeguard the health and well-being of persons using or needing the services of registrants”

Health Professions Order 2001

Article 3 (4)

To achieve the objective of protecting the public HPC manages four key processes

- 1. Approval of HEI courses**
- 2. Operates a Register**
- 3. Sets Standards**
 - Education & Training
 - Standards of Proficiency
 - Conduct, Performance, & Ethics
 - Continuing Professional Development
- 4. Intervenes if registrants Fitness to Practise may be below standard**

HPC is also required to communicate & consult with its stakeholders

“The Council shall inform and educate registrants, and shall inform the public, about its work”

“The Council shall consult”

Health Professions Order 2001

Article 3 (13)

Article 3 (14)

HPC's responsibilities are separate from those of Professional Bodies, Trade Unions & Trade Associations

- **Professional Body**
 - Body of knowledge or “Learned Society”
 - Promotion of profession
 - Development of the profession
- **Trade Union & Trade Association**
 - Terms & conditions of employment
- **Regulator**
 - Course approval
 - Register
 - Standards
 - Fitness to Practise

III. Strategic Intent

HPC's Strategic Intent is to create an independent healthcare regulator with a leading reputation using six guiding principles

- 1. Transparency**
- 2. Communication & Responsiveness**
- 3. Value for money & Audit**
- 4. Protect the public**
- 5. Collaboration**
- 6. Quality service**

HPC pays due regard to the five principles of Good Regulation (www.brta.gov.uk)



HPC's six guiding principles, (contd.)

- **Transparency – the Council will**
 - Have wide public & patients/clients representation
 - Have fast & transparent procedures
 - Commit to following the UK Government's Code of Practice on Consultation
 - Consult on and then publish any standards it establishes or general guidance it gives

HPC's six guiding principles, (contd.)

- **Communication & Responsiveness – the Council will**
 - Develop meaningful accountability to the public and health & social services
 - Inform & educate the public and registrants about its work
 - Collaborate with and consult key stakeholders
 - Treat the health and welfare of patients/clients as paramount

HPC's six guiding principles, (contd.)

- **Value for Money & Audit – the Council will**
 - Provide a value for money service for its registrants and the public
 - Be open & proactive in accounting to the public & professions for its work

HPC's six guiding principles, (contd.)

- **Protecting the Public – the Council will**
 - Have wide powers to deal effectively with individuals who pose an unacceptable risk to patients/clients
 - Have clear & well published complaints and appeals procedures whereby the public or registrants dissatisfied by Council rulings can respond

HPC's six guiding principles, (contd.)

- **Working Collaboratively – the Council will**
 - Enable best practice in any one profession to be accessed by all
 - Provide a unified service where issues are common and focus individual activity on issues which are significantly different between professions
 - Work with all stakeholders (including other regulators and professional bodies) to safeguard the interests of patients/clients

HPC's six guiding principles, (contd.)

- **Providing a High Quality Service – the Council will**
 - Ensure that its user needs are met, namely the public, patients, health professionals & the health and social services
 - Seek regular feedback from its users and utilise the information & opinion it receives
 - Support personnel training & development of its own employees & partners as well as registrants

IV. Structure & Organisation

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- I. Council**
- II. Partners**
- III. Professional Liaison Groups**
- IV. Committees**
- V. Education & Training Committee**
- VI. Fitness to Practise Committees**
- VII. Standards of Performance, Conduct & Ethics**
- VIII. Non Statutory Committees**
- IX. Register**
- X. Aspirant Groups**
- XI. Grandparenting**
- XII. Executive**

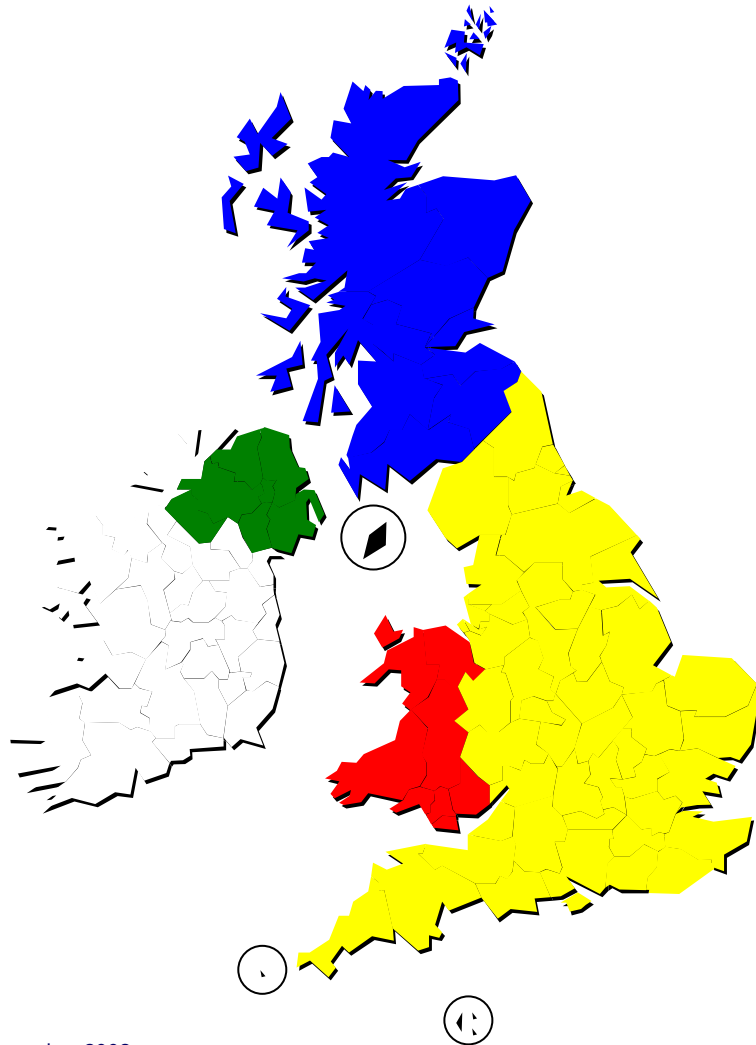
The membership of the HPC reflects professions it regulates & the public interest

- **One Registrant member of Council from each profession**
 - Each Registrant has an Alternate
 - From July 2005 will be elected by Registrants
- **One lay member for each Registrant**

R=L-1

 - Public appointment via Privy Council
- **If President is a Registrant add one lay member**
- **Registrant members can be practitioners, teachers, managers or researchers**

The HPC is a UK regulator & covers all four home countries



- At least one Registrant member from each of the four Home Countries
- At least one Lay member from each of the four Home Countries

The HPC has established a Partners programme to recruit members of the professions to assist with the delivery of many of its functions

- **350 Partners recruited to date with target of 500**
 - Train & monitor
- **Legal Assessors**
 - Assist with Fitness to Practise process
- **Mediators**
- **Medical Assessors**
- **Registration Assessors**
 - Contribute to the Registration process
- **Visitors**
 - Assist with HEI Approval process

Professional Liaison Groups have been established to provide professional advice

- **Project specific**
- **Adequately funded**
- **Comprise Council members & stakeholders**
- **Three PLGs established to date**
 - HEI Approvals
 - Standards of Education & Training
 - CPD

HPC discharges some of its duties via two types of committees - statutory committees & non-statutory committees

- **Statutory Committees**

- Education & Training
- Fitness to Practise Committees
 - » Investigating
 - » Conduct & Competence
 - » Health

- **Required by legislation**

- **Non-Statutory Committees**

- Audit
- Communications
- Finance & Resources
- Registration
- Remuneration

- **Reflect good corporate governance**

Education & Training Committee has completed two key tasks

- **Standards of Proficiency**
- **Requirements for returnees to practice**
 - Less than two years
 - Between two & five years
 - More than five years

Standards of Proficiency have been published for all professions regulated by the HPC

- **Threshold standards for entry to Register**
- **Two components**
 - Shared generic
 - Profession specific
- **Three standards**
 - Expectations of a Health Professional
 - Skills required for application of practice
 - Knowledge
- **The Standards of Proficiency will be reviewed in July 2004**

HPC is using CPSM powers while three outstanding tasks are being completed by the Education & Training Committee

- **Standards of Education & Training**
 - PLG established
 - Target completion date July 2004
- **Course Approvals**
 - PLG established
 - Devise & implement process
 - Target completion date July 2004
- **Post registration training**
 - Link CPD to re-registration
 - PLG established
 - Target completion date July 2005

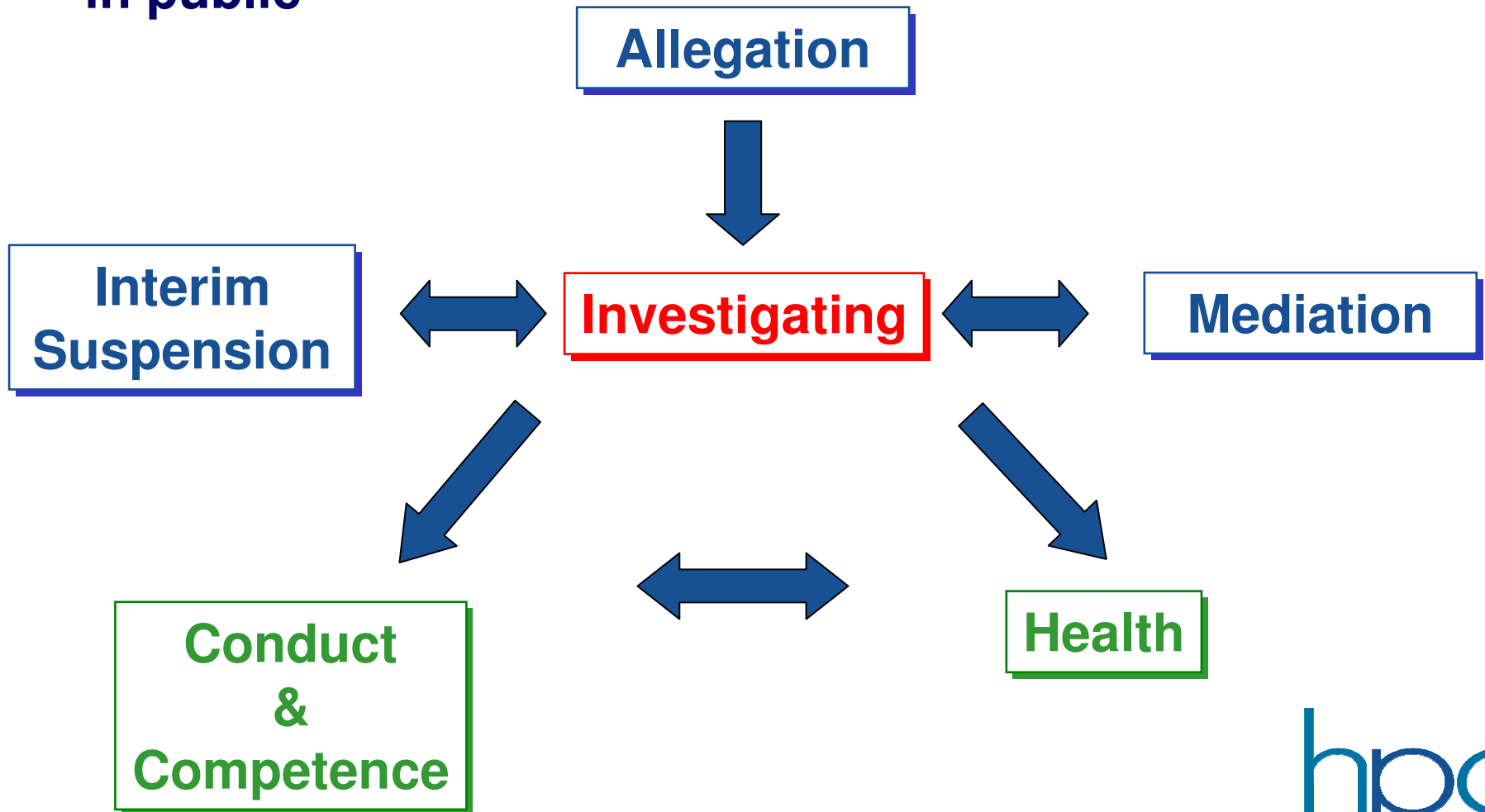
The Council on the advice of the Conduct & Competence Committee has published Standards of Conduct, Performance & Ethics

- **Conduct**
 - Four requirements
 - e.g. "Maintain high standards of personal conduct"
- **Performance**
 - Eight requirements
 - e.g. "Keep accurate patient, client and user records"
- **Ethics**
 - Four requirements
 - e.g. "Behave with integrity & honesty"
- **They apply to both registrants & prospective registrants**

The HPC Fitness to Practise process has been operational from 9th July 2003

- **Deals with Allegations against Registrants**
- **Balances**
 - Protection of public
 - Human Rights of Registrants
- **Allegations are handled in parallel with other organisations**
- **Uses two key principles**
 - Proportionality
 - Reasonableness

The first two stages of the Fitness to Practise process are undertaken in private the rest are held in public



The Fitness to Practise Committees have different but linked functions

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

The HPC also uses Panels to undertake work related to the committees

- **Committees**
 - Strategy & policy
- **Panels**
 - Undertake Fitness to Practise process
 - Composition dictated by OIC
 - Minimum of three members
 - Have to have registrant & lay membership

Council discharges some duties via non-statutory Committees

- **Audit Committee**
- **Communications Committee**
 - Responsible for developing & monitoring the HPC communications strategy
- **Finance & Resources Committee**
 - Five year plan
 - Annual budget
- **Registration Committee**
 - Sub-Committee of the education & Training committee
- **Remuneration Committee**

The HPC has established how the Register will be structured

- **Does not indicate skill levels or modalities of care**
- **Renew registration every two years**
- **Registrants are required to self certify their ability to meet the standards of proficiency**
- **Public register**
 - Confirms registration status
 - Approximate geographical location of registrant
- **Fees**
 - One payment of £120 or £30 Direct Debit every six months
 - Tax deductible
 - Newly qualified UK Registrants pay £60 for two years

Market research indicates that the public requires specific titles to be protected

- **Limited number of protected titles aids public recognition**
- **“State Registration” or SR**
 - The use of the phrase or abbreviation to be actively discouraged once Grandparenting completed
- **Communicate sanctions for misuse**

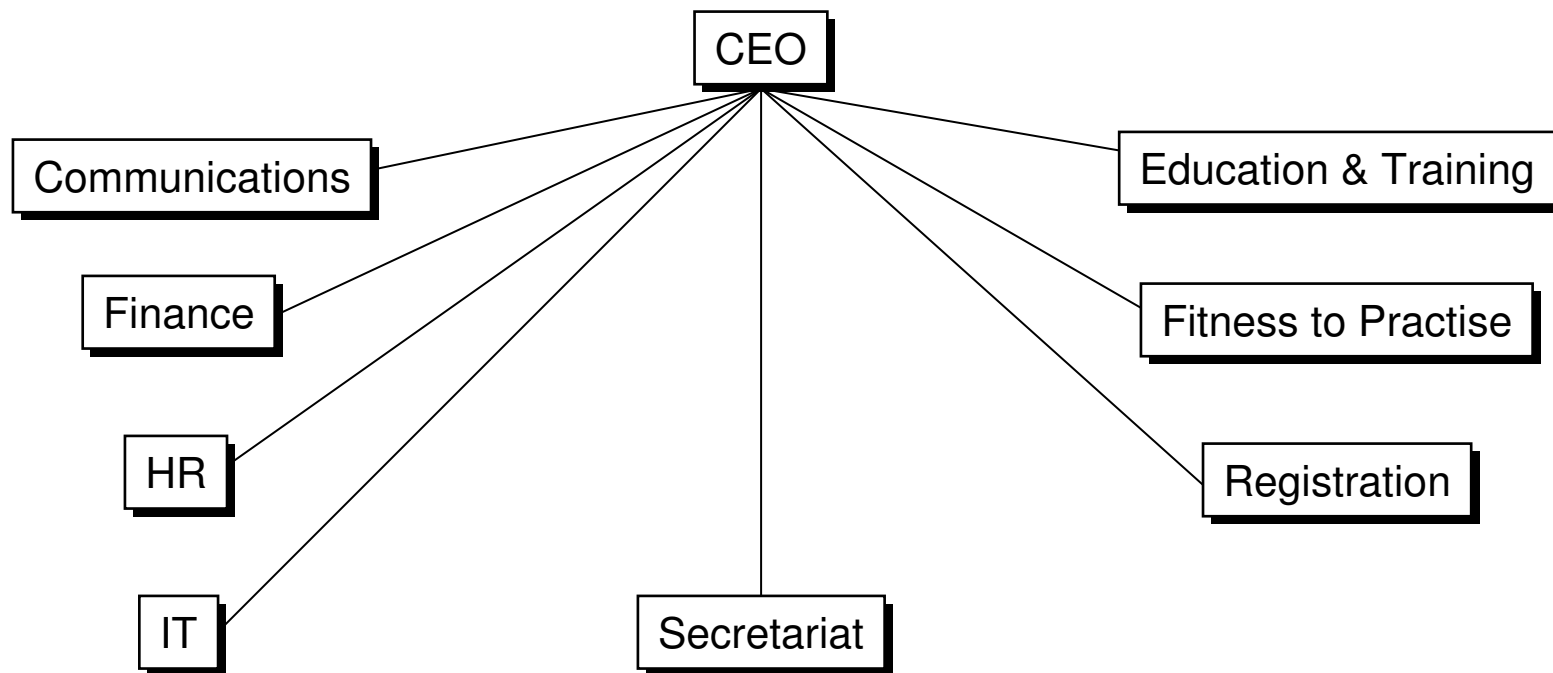
HPC & the DoH have established a two stage process to allow aspirant groups to apply to be regulated

- **HPC**
 - Assess aspirant group by reference to ten criteria
- **DoH**
 - Three month public consultation process
 - Amends legislation
- **HPC can make a recommendation for regulation even though no application received**
- **No limit on the number of professions that HPC could regulate**

HPC has established a Grandparenting process to admit unqualified prospective registrants to the register as new professions titles are protected

- **Sets aside normal educational requirements**
- **Applicants need to demonstrate lawful, safe & effective practice**
- **Applications limited to two year period**
- **£200 fee**

HPC's Executive is organised into three process groups & five support functions



The Executive are also responsible for delivering

- **Strategic Intent**
- **Five year plan**
- **Annual budget**
- **Other tasks to be managed**
 - Performance indicators
 - Customer service
 - Data protection
 - Freedom of information

V. Communications

HPC is required to communicate on specific issues with all its stakeholders

“The Council shall inform and educate registrants, and shall inform the public, about its work”

Health Professions Order 2001

Article 3 (13)

HPC's stakeholders are numerous with potentially different & incompatible agendas

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

The HPC Communications Committee has developed a communications strategy which will be implemented over the next five years

- **Cost effective**
- **Targeted**
- **Initial themes**
 - Who HPC is
 - What HPC does
 - How to contact the HPC

The Communications strategy will deliver a range of products

- **Organise “Listening Events”**
- **Publish brochures & leaflets**
- **Document all HPC’s processes**
- **Maintain & develop the HPC web site www.hpc-uk.org**
- **Annual conference**
- **Produce annual reports**
 - Annual report on exercise of functions
 - Statistics report detailing the HPC’s efficiency and effectiveness
 - Article 44 HPO

VI. Issues to Resolve

HPC will devise Standards of Education & Training & implement an approval process for HEI courses by July 2004

- **Standards of Education & Training**
 - Draft & consult
 - Implement by July 2004
 - Article 15 HPO

- **HEI Course Approvals**
 - Devise process & consult
 - Implement by July 2004
 - Article 15 HPO

HPC will establish Rules for CPD & the Council election scheme by July 2005

- **Post registration training**
 - Link CPD to re-registration
 - Devise process & consult
 - Resolve HPC ability to revalidate registrants
 - Rules to be approved by Parliament
 - Implement by July 2005
 - Article 19 HPO

- **Council Election scheme**
 - Rules to be approved by Parliament
 - Implement by July 2005
 - Schedule 2 HPO

A range of other issues will be addressed

- **Structure of Register** (Article 6)
 - The need to open new parts of the register as aspirant groups become regulated by the HPC
- **Equivalent qualifications** (Article 12)
 - Identify non-UK qualifications that will allow international registrants speedier access to the HPC register
- **Establish policy on the treatment of registrants & prospective registrants with health &/or disabilities problems**
- **Refines established processes & standards**

HPC will continue to implement two strategies in 2004 & develop two others during 2004

- **Communications Strategy**
 - Target members of the public
- **IT Strategy**
 - First stage completed, (Registration)
 - Second stage, (Fitness to Practise & assessments etc)
 - Research, prioritise, approve & implement
- **Customer Service Strategy**
 - Devise, monitor, publish & adapt
- **External international Quality standards**
 - Devise & implement

HPC will continue to make investments in people & infrastructure to improve the quality of the service it provides

- **Organisation & Structure**
 - Fitness for purpose, quality & number of employees, systems, equipment & building
 - Able to deliver Strategic Intent

- **Team Development**
 - Council, Executive & Partners
 - Recruitment & retention of HPC employees & Partners
 - Training & development of HPC employee & Partners
 - Equal opportunities

- **External accreditation**
 - *Investor In People*

HPC will monitor & participate in a range of issues linked to the regulation of healthcare workers in the UK, EEA and internationally

- **Extending Regulation**
 - Supervised Assistants
 - Non-professional healthcare workers
- **Mitigate necessity for registration with two UK regulators of healthcare professions**
- **International Migration**
 - European freedom of movement proposals
- **Detection of “Problem” international registrants**
 - Letter of Good Standing
 - Cooperation with international regulators

HPC will monitor & participate in a range of issues linked to the regulation of healthcare workers in the UK, EEA and internationally, (contd.)

- **Regulation of Complementary Medicine**
- **Regulation of Teams**
- **The need for flexible healthcare workforces to be regulated appropriately**
- **The desirability for reducing the number of UK Regulators**
 - Communications, Energy, Financial