THE HEALTH PROFESSIONS COUNCIL

Chief Executive and Registrar: Mr Marc Seale

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MINUTES of the seventeenth meeting of the Health Professions Council held at **11am on Thursday 13 May 2004** at Park House, 184 Kennington Park Road, London, SE11 4BU.

PRESENT: Mr J Camp

Mrs S Chaudhry (part)

Mr R Clegg

Miss M. Crawford

Ms H Davis Ms C Farrell Mr P Frowen Prof. J. Harper Professor T Hazell Mr C Lea (in the Chair)

Ms R Levenson Miss M MacKellar Ms J Manning

Dr J Old Mr K Ross Mrs J Stark Mrs. B. Stuart Miss E Thornton Professor D Waller

Mr N Willis Mr A Yule

IN ATTENDANCE:

Mr P Baker, Finance Director

Mrs A Barnes, Director of Fitness to Practise

Mr T Berrie, Director

Mr. J. Bracken, Bircham, Dyson, Bell

Mr M Caplan, Kingsley and Napley Solicitors

Mr R Dunn, Director of Information

Ms N O'Sullivan, Secretary to Council

Mr M Seale, Chief Executive and Registrar

Ms C Savage, Director

Ms D Thompson, Human Resources Director

Item 1.04/35INTRODUCTION AND WELCOME

1.1 Mr Lea noted that in the absence of Professor Brook he would be chairing the meeting. He welcomed all members and non-members and drew the attention of non-members to the guidance notes for attending committee meetings and requested they follow the guidance contained therein.

Item 2.04/36 APOLOGIES FOR ABSENCE

2.1 Apologies for absence were received from the following Council members: Professor N Brook, Professor J Lucas, Mrs C McGartland (Ms H Davis attending) Mr W Munro, Miss P Sabine (Mr P Frowen attending) Dr A Van Der Gaag.

Item 3.04/37 APPROVAL OF AGENDA

3.1 The Council approved the agenda.

Item 4.04/38 MINUTES

- 4.1 It was agreed that the minutes of the sixteenth meeting of the Health Professions Council be confirmed as a true record and signed by the Vice-President subject to the following amendment;
- 4.2 15.4 The Committee agreed that Mr Lea should become a full member of the Finance and Resources Committee and that Mr Sutehall should become a full member of the Registration Committee.

Item 5.04/39 MATTERS ARISING

- 5.1 <u>Item 5 Matters Arising Structure of the Register</u>
 The Council noted that the consultation document had been issued.
- 5.2 <u>Item 5 Matters Arising Minutes of the Registration Committee held on 10 September 2003</u>

The Council noted that the draft framework on disabilities, health and registration had been considered by the three practice committees and the Education and Training Committee and would be considered by the Council at a future meeting.

5.3 Item 6.3 President's Report

The Council noted that Professor Brook had reported to the Education and Training Committee regarding the first meeting of the Workforce Development Board which she had attended. Details of the report were included in the minutes of the Education and Training Committee held on 28 April 2004.

5.4 Item 7.3 Chief Executive's Report

A meeting the discuss the consultation document on the regulation of healthcare staff in England and Wales would be held on Tuesday 15 June 2004.

5.5 <u>Item 16.7 Process for Recruitment of Screeners</u>

The Chief Executive would report back on progress on the recruitment of screeners at the July Council meeting.

5.6 <u>Item 19 – Approvals Committee – Standing Orders</u> The first meeting of the Approvals Committee would be held on Monday 24 May 2004.

5.7 <u>Item 27 – Council Membership</u>

The Executive had been informed that an announcement by the Department of Health (DH) on the appointment of a replacement alternate paramedic member would be made shortly.

5.8 The Council noted that members who wished to comment on typographical or grammatical issues in minutes or papers as against matters of principle should contact the Secretary to the relevant committee or the author of the paper.

Item 6.04/40 PRESIDENT'S REPORT

6.1 Mr Lea stated that in the absence of the President there would be no President's report. .

Item7. 04/41 CHIEF EXECUTIVE'S REPORT

- 7.1 Mr Seale thanked all members who had participated in the Standards of Education and Training and the Approvals Process Consultation. The consultation process was coming to an end. As wide a response as possible was encouraged.
- 7.2 Interviews for the post of Director of Education and Policy would be held on Friday 21 May 2004.
- 7.3 The Chief Executive reported that Physiotherapists were currently in the renewal period for registration. There were approximately 37,000 registered physiotherapists of which 32,000 had paid their retention fee and signed their declaration, 3,000 had paid their fee but not signed their declaration and 1,500 had neither paid nor signed. It was extremely difficult to follow up those who had not contacted the HPC as it was likely that the address on record was incorrect. It was likely that the deadline for Physiotherapy renewals would be extended.

- As a result of the exceptional number of telephone calls which had been received during the Physiotherapists re-registration period, service standards in the Registrations Department had fallen. The HPC was working with the Chartered Society of Physiotherapy to try to inform as many Physiotherapists as possible as what they were required to do in order to re-register. Mr Seale noted that the HPC were not blaming registrants for problems which had arisen and acknowledged that in many instances the quality of the service they had received was below expectations. Registrants certificates were issued in batches and those who had not received their certificate to date would to do in the near future.
- 7.5 Council noted that there were certain situations where HPC partners were required to be resident in one of the four home countries in order to act on behalf of the HPC. It was agreed that information on the breakdown of the partners recruited by country would be provided in time for the next meeting.

Action: DT

- 7.6 It was noted that corporate governance training was being offered to Council members and that issues such as registrant members attendance at their profession's annual conference could be raised for discussion.
- 7.7 The Council noted that employers were required to have a flagging system in place to highlight employees who were not fulfilling their requirement to be on the register. The register was available on line. Those health professionals who had come off the register and who wished to reregister were required to complete all the necessary documentation and to provide a character reference.

Item 8.04/42 REGULATION OF NEW PROFESSIONS BY THE HPC

(Application and Presentation from the Voluntary Register of Clinical Technologists)

- 8.1 The Council received an application for regulation from the Voluntary Register of Clinical Technologists.
- 8.2 The Council received a presentation from Mr J Methven, Voluntary Register of Clinical Technologists. Mr D Gandy and Mr M Wingell were also in attendance.
- 8.3 The Council noted that in general Clinical Technologists contact with the public was in the role of health professional to patient.
- 8.4 The Council also noted that an important area of practice for the profession was the design and manufacture of equipment for the disabled. A Clinical Technologist working in this role was responsible for the universal quality assurance marking of the equipment.

- 8.5 Clinical Technologists saw themselves as members of an individual profession with an education and skills base which was very different to that of Clinical Scientists. There were also life scientists working as clinical technologists and these could be included as part of the register.
- 8.6 There were approximately 3,000 members in the profession throughout the United Kingdom of which approximately 40% were medical physicists and 60% were clinical engineers. In a poll of those currently on the voluntary register 93% of those who voted (50% of registrants) were in favour of regulation.
- 8.7 The Voluntary Register had a Code of Conduct however to date there had been no complaints against registrants.
- 8.8 The Council noted that medical physicists undertook an honours degree and clinical engineers entered the profession at HNC/HND level. There would be one standard of proficiency for both medical physicists and clinical engineers. The difference in qualification leading to entry to the register would not prevent this.

8.9 **RESOLVED:**

That Clinical Technologists should be regulated but that, before a recommendation to that effect was made to the Secretary of State:

- 1. The VRCT submit further evidence to satisfy HPC that an appropriate Standard of Proficiency could be established for Clinical Technologists as a single profession; and
- 2. Further consideration would be given to the Part in the HPC register in which Clinical Technologists should be regulated, having regard to the proposed re-structuring of the HPC register.
- 8.10 It was agreed that the evidence requested would be considered at the September meeting of Council.
- 8.11 The Council also noted that it would be reviewing the process by which professions gained entry to the register at the July meeting of Council.

Action: MJS

Item 9.04/43 HEALTH PROFESSIONS COUNCIL'S DRAFT ELECTION RULES

9.1 The Council received the draft consultation paper and the draft election rules.

- 9.2 The Council noted the method for dealing with the home country requirement as set out in the rules. This method would only ensure that an alternate home country candidate was elected which raised the possibility that a home country could have no registrant representative at Council meetings. However all home countries would have lay representation.
- 9.3 The Council noted the need to explain the requirements of the legislation with regard to home country representation clearly to registrants.
- 9.4 The Council approved the consultation document and the rules and agreed that it should be issued for consultation for a period of six weeks. The consultation period had been reduced from the usual three months because the Council had already consulted on the draft rules in 2002.

Action: NO'S

Item 10.04/44 OPERATING DEPARTMENT PRACTITIONERS DRAFT STANDARDS OF PROFICIENCY

- 10.1 The Council received the operating department practitioners draft standards of proficiency.
- 10.2 The Council noted that it was required to set and publish standards of proficiency for each part of the register and these had to be consulted upon. A new part of the Register could not be opened before these standards had been set.
- 10.3 The Council noted that the consultation period had been reduced from three months to six weeks as the generic elements of the standard had already been out to consultation.
- 10.4 The Council approved the proposed standards and agreed that they should be issued for consultation for a period of six weeks.

Action: TB

Item 11.04/45 OPERATING DEPARTMENT PRACTITIONERS – AMENDMENTS TO HPC RULES

- 11.1 The Council received a paper from the Executive.
- 11.2 The Council noted that in order to enable the HPC to regulate ODPs, the Health Professions Council (Registration and Fees) Rules 2003 would need to be amended and this was a power which can on be exercised by Council.
- 11.3 The required changes to the Rules were as follows:

- Rule 10 would need to be amended to provide for the first registration period of those who are automatically entered onto the HPC register by transferring from the AODP register. Related changes would need to be made to Schedule 5 to the Rules, fixing the registration renewal date for ODPs.
- The registration and renewal forms prescribed by Rule 4 and set out in Schedules 1 and 2 would need to be revised to provide for ODPs being a new Part of the register.
- Rule 10 and the forms would also be needed to be amended to make provision for those who come onto the register via the proposed provision relating to "lapsed" AODP members.

In addition, it might also be possible to use this opportunity to make a number of miscellaneous amendments to the Rules, including:

- further amending rule 10 to enable registration renewal cycles to be linked to alternate years, providing HPC with an optimum 24 renewal months;
- amending Rule 17 to clarify that the scrutiny fee paid by Art. 12(1)(c) international applicants is also payable by Art.12(1)(b) (EEA) applicants;
- further amending the renewal form to include an appropriate declaration of compliance with return to practice requirements.

11.4 The Council;

RESOLVED:

- 1. That amendments to the Health Professions Council (Registration and Fees) Rules 2003 be drafted to reflect changes which were necessary to give effect to the proposed Health Professions Council (Operating Department Practitioners and Miscellaneous Amendments) Order 2004 and such other miscellaneous amendments as the Chief Executive considered appropriate;
- 2. That the proposed amendments be approved by Council (by electronic means) before being issued for consultation and submitted to the Privy Council for confirmation.

11.5 Format of Council Papers

11.5.1 The Council also agreed that the format used of the paper which set out the background information, resources implications, financial implications, background papers appendices and the decision required should be adopted for all papers being presented to Council in the future.

Item 12.04/46 COUNCIL FOR THE REGULATION OF HEALTHCARE PROFESSIONALS – OUTCOME OF SECTION 29 REFERRALS

12.1 The Council received a paper from the Executive.

- 12.2 The Council were advised that the paper would be presented by Mr M Caplan, Kingsley and Napley Solicitors, advisors to the Council.
- 12.3 The Council noted that the Council for the Regulation of Health Care Professionals (CRHP) had referred two Fitness to Practise decisions to the Courts. The two cases concerned were from the General Medical Council (GMC) and the Nursing and Midwifery Council (NMC). As a result of the judgments one of the cases would be sent to the Court of Appeal.
- One of these cases 'the Ruscillo case' was important to HPC because it concerned the extent of the powers that CRHP had in reviewing cases.
- 12.5 CRHP could review a case if they considered any order imposed was 'unduly lenient'. However they also believed that they could do so in appropriate cases where a panel had concluded that an allegation was not well founded and that furthermore they could possibly look at information that was not presented to a panel when considering the allegation or the order to impose. Mr Caplan advised the Council that he did not believe that CHRP had this power in relation to HPC but that the courts could decide otherwise. Such a judgement would have huge implications for HPC as it could prevent the panels taking a decision to consider specimen charges thereby creating a situation where panels would be required to look at every charge and interview every witness, thereby increasing costs and length of time a panel would sit.
- 12.6 A registered medical practitioner involved in the above case had lodged an appeal in the Court of Appeal. In the High Court the Judge had encouraged other regulators to consider joining in the appeal.
- 12.7 The Council was asked to decide whether the HPC should seek to be heard as an interested party if permission to appeal was given to the doctor and if so the position it could take.
- 12.8 Mr Caplan noted that the decision taken by the Court of Appeal could impact on the HPC even though it was an appeal from another regulator. Also that applying to intervene would raise the profile of the HPC as a regulator. The Court could decide not to allow other regulators to take part.
- 12.9 The Council agreed that it was unlikely that the position taken by the HPC would be different to another regulator and that therefore it would not seek to be heard as an interested party in the Court of Appeal.

Item 13.04/47 SUPPLEMENTARY PRESCRIBING FOR ALLIED HEALTH PROFESSIONALS

13.1 The Council received a paper from the Executive.

- 13.2 The Council noted that in the first quarter of 2005 the Medicines and Healthcare products Regulatory Agency (MHRA) intended to amend the existing legal framework to extend Supplementary Prescribing to Chiropodists, Physiotherapists and Radiographers who had been on the register for a minimum of three years.
- 13.3 The MHRA and Department of Health England (DH) required the register of regulators of health professions to be annotated so that patients and other health professionals, such as pharmacists, could ascertain if a registrant had a supplementary prescribing qualification.
- 13.4 It was therefore proposed that the Health Professions Council (HPC) published Standards of Proficiency and Standards of Education and Training for Supplementary Prescribing. This was so that courses could be approved by the HPC, thus allowing registrants who had successfully completed a course to be issued with appropriate certificates and the HPC register to be amended accordingly.
- 13.5 The Council noted the project and requested the Executive to prepare three documents for approval by the Education and Training Committee. They are as follows:
 - (i) Standards of Education and Training
 - (ii) Standards of Proficiency
 - (iii) A consultation document

Action: MJS

Item 14.04/48 USE OF HPC REGISTER

- 14.1 The Council received a paper from the Executive.
- 14.2 The Council noted that following the 2002 consultation the HPC had adopted a policy of not allowing the home and/or work addresses of registrants to be made available to other organisations or individuals. The only exception to this policy was where the HPC was required to release the information due to legal processes being undertaken by the courts or the police.
- 14.3 The HPC had received a request from the Department of Health that they be allowed access to the addresses of registrants. The information would not be released directly to the DH but would be provided on a confidential basis to a Mailing House. Letters would then be dispatched to selective registrants and ex-registrants as part of a campaign to encourage radiographers to "Return to Work".

14.4 The Council agreed that it would not change its current policy of not allowing other organisations to have access to registrants' home or work addresses.

Item 15.04/49 NON-COUNCIL MEMBERS APPOINTMENT TO COMMITTEES

- 15.1 The Council received a paper from the Executive.
- 15.2 The Council noted that the Health Professions Order 2001 provided for a situation whereby non-Council members can be appointed to any committee of Council. In making this provision the Order stated that 'the Council shall have regard, where appropriate and subject to other provisions of this Order, to the guidance issued by the Commissioner for Public Appointments'.
- 15.3 The Order also stated that 'the Council should ensure that such members of the committee who were not Council members should have such qualifications, interests or experience as, in the opinion of the Council, were relevant to the field with which the Committee was mainly concerned'.
- 15.4 The Council agreed to the procedure for appointment of non-Council members as laid out in the paper.

Item 16.04/50 APPOINTMENT TO STATUTORY AND NON-STATUTORY COMMITTEES

- 16.1 The Council received a paper from the Executive.
- 16.2 The Council noted the members should be considered for appointment to committees on the basis of their potential, their interests and their skills.
- 16.3 The Council also noted that the current system where new members were appointed to the vacancies on committees which the resignation of a member of Council they were replacing created could preclude new members making best use of their skills and experience.
- 16.4 The Council agreed to adopt the system proposed subject to the inclusion of a provision that where a situation arose where there was more than one application for membership of a committee, members should be asked to state their reasons for applying for membership and the President should make the decision regarding appointment.

16.5 The Council agreed that the Executive should prepare a paper regarding a process for appointment to statutory and non-statutory committees after the elections in July 2005 for consideration at the next Council meeting.

Action: NO'S

16.6 The Council also agreed that the method by which current non-Council members on Committees had been appointed should be clarified and that this information should be circulated to members as soon as possible.

Action: MJS

Item17.04/51 MINUTES OF THE REGISTRATION COMMITTEE HELD ON 10 MARCH 2004

17.1 The Council received the minutes of the Registration Committee held on 10 March 2004.

Item 18.04/52 MINUTES OF THE FINANCE AND RESOURCES COMMITTEE HELD ON 17 MARCH 2004

18.1 The Council received the minutes of the Finance and Resources Committee held on 17 March 2004.

Item 19.04/53 MINUTES OF THE FINANCE AND RESOURCES COMMITTEE HELD ON 29 APRIL 2004

19.1 The Council received the minutes of the Finance and Resources Committee held on 29 April 2004.

Item 20.04/54 PRESENTATION OF COMMITTEE DECISIONS TO COUNCIL FOR RATIFICATION

- 20.1 The Council received a paper from the Executive.
- 20.2 The Council noted that the new system for the presentation of decisions to Council for ratification as detailed in the paper would be adopted at all future Council and committee meetings.

Item 21.04/55 REGULATION OF HERBAL MEDICINE AND ACUPUNTURE-PROPOSALS FOR STATUTORY REGULATION

21.1 The Council noted the consultation document.

Item 22.04/56 ADVERTISING CAMPAIGN

22.1 The Council noted the paper. Approximately 200 advertising packs had been sent out to different organisations. Feedback would be considered by the Communications Committee which would also consider alternative methods for communicating with all groups in society.

Item 23.04/57 MINUTES OF THE CONDUCT AND COMPETENCE COMMITTEE HELD ON 23 MARCH 2004

23.1 The Council received the minutes of the Conduct and Competence Committee held on 23 March 2004.

Item 24.04/58 MINUTES OF THE EDUCATION AND TRAINING COMMITTEE HELD ON 24 MARCH 2004

24.1 The Council received the minutes of the Education and Training Committee held on 24 March 2004.

Item 25.04/59 MINUTES OF THE INVESTIGATING COMMITTEE HELD ON 15 APRIL 2004

- 25.1 The Council received the minutes of the Investigating Committee held on 15 April 2004.
- 25.2 The Council noted that the committee had discussed the establishment of a Professional Liaison Group (PLG) on disability issues. Mr Seale noted that the HPC had agreed a policy on the establishment on PLGs and would make this available on request.

Action: MJS

Item 26.04/60 MINUTES OF THE HEALTH COMMITTEE HELD ON 21 APRIL 2004

26.1 The Council received the minutes of the Health Committee held on 21 April 2004.

Item 27.04/61 PRESENTATIONS TO HIGHER EDUCATION INSTITUTIONS BY THE HPC

- 27.1 The Council received a paper from the Executive.
- 27.2 The Council noted the contents of the paper.

Item 28.04/62 ANY OTHER BUSINESS

28.1 There was no other business.

Item 29.04/63 DATE AND TIME OF NEXT MEETING

- 29.1 The next meeting of the Council would be held at 11am on Thursday 15 July 2004.
- 29.2 Further meetings would be held on the following dates;

Tuesday 14 September 2004

Wednesday 6 October 2004 and Thursday 7 October 2004 - 'away day' -

Tuesday 7 December 2004

Wednesday 2 March 2005