

Health Professions Council – 25 March 2010

Reports from Council representatives at external meetings

Executive Summary and Recommendations

Introduction

The attached feedback forms have been received from the following members of Council, reporting back from meetings at which they have represented the HPC:-

Joy Tweed
Anna van der Gaag
Diane Waller

Decision

The Council is requested to note the documents.

Background information

None

Resource implications

None

Financial implications

None

Background papers

None

Appendices

Copies of feedback forms

Date of paper

15 March 2010

Name of Council Member	Joy Tweed
Title of event	Public and Patient Involvement Group UK Health and Social Care regulators
Date of event	1 st February 2010
Approximate attendance at event	14 people
Issues of Relevance to HPC	
<ul style="list-style-type: none"> • The plans for the seminar looking at issues around mental health were discussed. The proposed dates are in mid-May. It was agreed that a number of relevant organisations would be invited to attend and asked to help identify 1) What do you want from us (regulatory bodies)? 2) What would best practice in patient and public participation look like? The proposed outcome is a clear set of criteria to help plan and evaluate future engagement with those who use mental health services. • There was feedback on the PPI presentations being held for each council (to come to HPC sometime this year). • It was agreed that it would be useful to have a joint workshop looking at how PPI activities can be evaluated. It was noted there is a new S60 order coming whereby regulators have to measure PPI outcomes and report back to CHRE. 	
Key Decisions Taken	
<p>As this PPI joint-regulators group has a number of new members it was proposed that a facilitated event take place in the summer. This would be to discuss the role of the group and to identify a proposed work plan for the coming year.</p>	

Name of Council Member	Anna van der Gaag
Title of Conference/Meeting	Second World Health Professions Conference on Regulation
Date of Conference	18/19 February 2010
Approximate number of people at the conference/meeting	250 from 31 countries
<p>Conference was organised by the World Health Professions Alliance (www.whpa.org) and was the second world conference on health regulation. The Theme of 'Shaping the future' was explored through presentations, posters and workshop sessions. The majority of presentations were from uni-professional regulators.</p> <p>Key message of relevance to HPC:-</p> <ol style="list-style-type: none"> 1. One keynote reported on a WHO sponsored international survey of regulation which identified 161 different systems of regulation. One third of these were self regulatory (profession led). These models were more common in the Americans and Asia than in Europe. The scope and range 	

of regulatory activities differed widely, as did definitions eg physiotherapy regulators were much less likely to regulate practice settings than nurse regulators.

2. Although there was a call from some delegates for more 'accountable governance structures in regulation and a Global Patient Safety Authority' (Ireland). The speakers from Germany, US, India and Israel showed little appetite for government led or government agency led regulation, and most saw regulation as the domain of the professions. Other countries (eg Australia) are moving away from state led systems to national systems of registration. It was evident that the UK and Ireland lead the way in lay involvement in regulation. In the US, legislation defines scope of practise for health professionals and regulation is via function not title. In 2009 alone the American Medical Association tracked 300 pieces of state legislature driven by the professions and destined to increase scope of practise. The system of regulation via state boards and licensure was described by one US speaker as 'complex', not meaningful to the public and lacking in transparency – for example over who in the US is entitled to use the title 'physician' and who is not. It was also described as the most robust system of quality assuring medical practise.

Conclusions

The conference did not appear to address its theme very effectively. It raised more questions than it answered (probably a good outcome for an international conference). It was weighted towards presentations from northern hemisphere countries with little reference to the role of regulation in parts of the world where resources are much more scarce. However, the conference did provide a wider context for the work of HPC and other UK regulators, setting the UK at the forefront of independent, transparent systems of health care regulation. It also drew attention to common themes e.g. the influence of changing technology on practice (eg telehealth), the importance of sharing information across borders, and the growth of collaborative working and inter-professional learning – all of which are important to the work of HPC.

Name of Council Member	Diane Waller
Title of event	We need to talk: Campaign for Psychological Therapy
Date of event	1 st March 2010
Approximate attendance at event	50
Issues of Relevance to HPC	
<p>Mind joined with the Royal College of GPs and two other Royal Colleges to demand a new deal for children and adults with mental health problems. Together with the We need to talk coalition and the New Savoy Partnership they are calling for the NHS to offer evidence-based psychological therapies to those who need them. The event was chaired by Paul Farmer from Mind, and Professor Lord Richard Layard and Jeremy Clarke set out the case. There were presentations from representatives of the three main political parties, service users and Royal Colleges all of whom deplored the continuing lack of readily available mental health services despite IAPT initiatives.</p> <p>Many representatives of psychological therapies professional bodies were present and it was helpful to be able to feedback about the current position regarding regulation of psychotherapists and counsellors (seen as extremely important to the presenters and many people I spoke to). Once again the arts therapies were not mentioned (I took the opportunity to point out that the arts therapies professions, now regulated by HPC had pioneered mental health/psychological therapies in the NHS especially for service users who had not traditionally been seen as 'suitable' for psychotherapy). This was warmly supported by the service users present.</p>	
Key Decisions Taken	
<p>To lobby members of parliament, and parliamentary candidates, about their intentions regarding mental health services. To keep this issue high on the political agenda.</p>	