health & care professions council

Agenda Item 11 (i)

Enclosure 11

Health and Care Professions Council 21 March 2018

Minutes of the Committee meeting held on 1 March 2018

For information

From Stephen Wordsworth, Chair of the Education and Training Committee

Council, 21 March 2018

Minutes of the Education and Training Committee Meeting 1 March 2018

Executive Summary

The Education and Training Committee (ETC) met on 1 March 2018. This was the first meeting for the newly appointed independent members of the Committee. The draft public minutes of the meetings are enclosed. A summary of business considered is set out below.

Threshold level of qualification for paramedics

The Committee agreed to recommend to Council that SET 1 for paramedics change to degree level (level 6/9/10). This is item is on the Council's agenda for 21 March.

HCPC approach to auditing CPD

The Committee discussed the issue of registrants being selected for CPD audit consecutively. It was noted that some complaints arise from this but that CPD is an ongoing obligation and all registrants are expected to keep up to date CPD records.

The Committee agreed not to change the HCPC's approach to sampling.

Independent prescribing programmes - QA approach

The Committee agreed to allow education providers to admit new professions into their approved prescribing programmes once medicines legislation passes. Significant changes to programmes being made as a result will be required to notify the HCPC through the major change process.

The Committee agreed to receive a paper in June 2018 on proposals to consult on removing the HCPC specific standards in this area, instead relying on universal prescribing programme standards.

Registration performance reporting

The Committee agreed its reporting requirement for registration performance. It was noted that reporting will be refined over the coming year.

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Education and Training Committee

Minutes of the 80th meeting of the Education and Training Committee held as follows:

Date: Thursday 1 March 2018

Time: 1:30 pm

- Venue: Room N, Health and Care Professions Council, Park House, 184 Kennington Park Road, London SE11 4BU
- Members: Maureen Drake Luke Jenkinson Penny Joyce Sonya Lam Joanna Mussen Stephen Wordsworth (Chair)

In attendance:

Claire Amor, Secretary to the Committee Brendon Edmonds, Head of Educational Development Abigail Gorringe, Director of Education Tamara Wasylec, Education Manager Olivia Bird, Policy Officer Sarah Ritchie, Policy Officer Michael Guthrie, Director of Policy and Standards

Public Agenda

Item 1 - Chairs welcome and introduction

- 1.1 The Chair welcomed the Committee and Executive to the meeting.
- 1.2 The Committee welcomed Luke Jenkinson and Penny Joyce to their first meeting of the Committee as members.
- 1.3 The Committee noted that this would be the last meeting of the Education and Training Committee for Michael Guthrie, Director of Policy and Standards. The Committee thanked Michael for his invaluable support and guidance over many years.

Item 2 - Apologies for absence

2.1 There were no apologies received.

Item 3 - Approval of agenda

- 3.1 The Committee noted that item 6, Presentation by Katerina Kolyva, Council of Deans of Health, has been deferred to the Committee's meeting in June 2018.
- 3.2 The Committee approved the agenda.

Item 4 - Declaration of members' interests

4.1 Members had no interests to declare.

Item 5 - Minutes of the meeting of 18 January 2018 (ETC 04/18)

- 5.1 The Committee considered the minutes of the 79th meeting of the Education and Training Committee.
- 5.2 The minutes were accepted as a correct record to be signed by the Chair.

Item 6 - Threshold level of qualification for paramedics (ETC 05/18)

- 6.1 The Committee received a paper from the Executive.
- 6.2 The Committee noted the following points:-
 - the current threshold for paramedics is 'Equivalent to Certificate of Higher Education';
 - the HCPC consulted on change to this level between 25 September and 15 December 2017;

- a change in SET 1 will not directly affect existing registered paramedics or students' part way through their pre-registration education and training programmes;
- the vast majority of approved pre-registration programmes across the UK are delivered above the current threshold, with just 3 of 73 programmes resulting in an award which is a Certificate of Higher Education;
- there is evidence that practice has changed over time, with paramedics requiring an increased depth of skills and knowledge which are out of step with the descriptors of qualifications at the current threshold;
- there appears to be wide consensus amongst stakeholders that the existing threshold does not reflect the needs of contemporary practice and the existing SET 1 is out of step with the level of education and training of the majority of entrants to the profession; and
- the consultation received a very high number of responses for a consultation about a single profession issue 98% of responses were made by individuals.
- 6.3 The Committee noted that as a result of the consultation the Executive proposes the following-
 - the threshold level for paramedics to change to degree level (level 6/9/10 on the qualification frameworks);
 - from 1 December 2018, HCPC will not accept any new applications for approval of paramedic programmes that are delivered at below degree level; and
 - from 1 September 2021, HCPC will withdraw approval from existing programmes delivered below the new threshold level. They will not be able to take on any new cohorts.
- 6.4 The Committee discussed the implications of making a change to SET 1 for other HCPC regulated professions. It was noted that the Executive are developing a policy statement on the factors taken into account in deciding to propose a change to SET level. It was noted that parity with other Allied Health professions is not a relevant consideration.
- 6.5 The Committee noted that the timescales for education approval changes appear to be long and concern was raised that this delay may impact on practice needs for example prescribing rights. It was noted that the current SET level has not been a barrier to introducing prescribing rights.
- 6.6 The Committee noted that the Executive expects that no providers will consider it desirable to now create a programme that will only see two cohorts

before change is required. The Education team will proactively ask education providers what their plans are in light of the decision as the HCPC did not specifically consult on a change to degree level, some providers may not be as aware of the change.

- 6.7 The Committee discussed the communication plan supporting the consultation response and any agreed change. It was noted that all paramedics and education providers will receive email communication and a set of frequently asked questions will be published on the HCPC website. Post Council decision in March 2018, a further email will be sent providing assurance to existing paramedics that the decision does not affect their registration.
- 6.8 The Committee agreed that employers should be included in this tailored communication and requested that the messages are shared with Committee members for information.
- 6.9 The Committee agreed to recommend to Council the following:-
 - SET 1 for paramedics to change to degree level (level 6/9/10);
 - the arrangements for implementation summarised of the change to the SET as set out in the paper and consultation response document; and
 - the text of the consultation response document, subject to minor editing amendments.

Item 7 - HCPC approach to auditing CPD (ETC 06/18)

- 7.1 The Committee received a paper from the Executive.
- 7.2 The Committee noted the following points:-
 - HCPC registrants are required to maintain a continuous, up-to-date and accurate record of their CPD activities by the CPD standards;
 - the HCPC audit a random sample of 2.5% of registrants at every registration renewal period in order to ensure continued compliance with CPD standards;
 - the audit pool is generated at random, meaning registrants can be selected for CPD audit multiple times in a row or, conversely, never be selected during their professional career;
 - HCPC receive a small number of complaints annually regarding multiple or consecutive CPD audits; and
 - in some cases, registrants have been selected three times in a row, or three out of a possible five audits;

- CPD audits can be deferred in some unavoidable circumstances. Consecutive CPD audits, however, is not an accepted reason for deferral; and
- meeting the CPD standards is an ongoing professional requirement for all registrants, whether or not they have been selected for audit in the past. If certain registrants are selected multiple times in a row, this is not a problem as such as the HCPC expects registrants to be continually meeting the standards.
- 7.3 The Committee noted that the HCPC is not able to remove those selected twice in a row from the sample as net regulate records only the most recent CPD selection. This would require a manual review of correspondence logs. A project is underway to replace this system but this will not be in place for a number of years.
- 7.4 The Committee considered a wider question of whether any link between CPD completion and FTP involvement requires focus.
- 7.5 The Committee discussed the option of multiple CPD selection being a valid reason for deferral. It was noted that this would not be a systematic method as some registrants wouldn't defer. It would also reduce the sample size in a given year.
- 7.6 The Committee agreed that if CPD audits were not random and previously selected registrants were removed from the audit pool, there would be a risk of disengagement from these registrants. It would also damage the HCPC's message that CPD is an ongoing obligation as part of professional practise.
- 7.7 The Committee agreed to remain with the current system of selection and not make any changes regarding deferment.

Item 8 – Independent prescribing programmes - QA approach (ETC 07/18)

- 8.1 The Committee received a paper from the Executive.
- 8.2 The Committee noted the following points:-
 - prescribing programmes are based on a multi-professional model which is structured to support a number of regulated professions;
 - the Executive recommends the current mandatory requirement that approved prescribing programmes seek further approval to admit additional professions be removed;
 - experience in this area indicates this requirement is not proportionate to the changes that programmes may need to make to ensure HCPC standards are met; and

- a move to routine monitoring engagement is seen as proportionate. This approach would enable education providers to adapt and change their programmes flexibly without impacting unnecessarily on their ability to start new cohorts through approved programmes.
- 8.3 The Committee discussed the current HCPC requirements for further approval. It was noted that this requirement introduces a delay to on boarding new professions on prescribing programmes of around 3 to 6 months.
- 8.4 The Committee agreed that HCPC requiring its own standards for prescribing programmes could be seen as an example of regulatory burden on multi-profession programmes. The Committee agreed to receive a paper in June 2018 on proposals to consult on removing the HCPC specific standards in this area, instead relying on universal prescribing programme standards.
- 8.5 The Committee agreed to allow education providers to admit new professions into their approved prescribing programmes once medicines legislation passes. Significant changes to programmes being made as a result will be required to notify the HCPC through the major change process.

Item 9 - Registration performance reporting (ETC 08/18)

- 9.1 The Committee received a paper from the Executive.
- 9.2 The Committee discussed the proposals within the paper. It was agreed that reporting at every meeting would not be proportionate and instead a bi-annual report in June and November should be received by the Committee. The Committee agreed to refine its reporting requirements when discussing the first report.
- 9.3 The Committee noted that the proposed annual registration report will not go to Council. The Council receive specific information through their performance reporting arrangements.
- 9.4 The Committee agreed that a clear link to the HCPC Council KPIs is required to enable escalation to be identified readily. However, the Committee noted that it had its own statutory remit to fulfil outside of assurance to Council.
- 9.5 The Committee agreed that long term trends and analysis would be more useful than commentary of performance against forecast. It was noted that the Executive would be unable to be conclusive on the reasons for shifts in trends, but the Committee agreed that should concern arise a deeper investigation into an issue could be agreed.
- 9.6 The Committee agreed to receive an annual report on registration performance in a year's time.

Item 10 – Any other business

10.1 There was no further business.

Item 11 – Date and time of next meeting

11.1 Thursday 7 June 2018, 10:30am at Park House, SE11 4BU

Chair
Chair Date