

**ATTENDANCE AT MEETINGS TO REPRESENT HPC**

<b>Name of Council Member</b>	<b>Diane Waller</b>
<b>Organisation hosting Conference/Meeting</b>	<b>Centre for Medical Humanities, University College, London and Royal Free and UCL Medical School</b>
<b>Title of Conference/Meeting</b>	<b>The Healing Humanities: Contextualising and Conceptualising Medicine</b>
<b>Venue</b>	<b>University College, London</b>
<b>Date of Conference</b>	<b>14 and 15 September 2004</b>
<b>Who asked you to attend?</b>	<b>Dean of the Medical School, UCL</b>
<b>Title of Talk/Presentation given (if any)</b>	<ol style="list-style-type: none"> <li><b>1. The Culture of Dementia: Words and Images</b></li> <li><b>2. Multi-disciplinary health education (discussion group)</b></li> </ol>
<b>Approximate costs (subject to budget)</b>	<b>Conference:</b> <b>Attendance Allowance £260</b>  <b>Expenses:</b>  <b>Travel Allowance:</b>
<b>Authorisation by Chief Executive (not required if HPC has asked that you attend the meeting)</b>	<b>Already authorized</b>
<b>Signature of member (not required if returned by email)</b> <b>Date</b>	

**This form has been prepared for those Council and Committee members who represent the Health Professions Council at meetings or conferences. Please complete as much of the above as you can and return by post to Olive Cooper, Council and Committee Secretariat, Health Professions Council, Park House, 184 Kennington Park Road, London, SE11 4BU, or alternatively by e-mail to [olive.cooper@hpc-uk.org](mailto:olive.cooper@hpc-uk.org). This will be passed to the Chief Executive if authorisation is required. Completed forms should be received before the meeting takes place.**

**April 2004**

**FEEDBACK SHEET TO BE COMPLETED AFTER THE MEETING**

Name of Council Member	Diane Waller
Title of Conference/Meeting	The Healing Humanities: Contextualising and Conceptualising Medicine
Date of Conference	14 and 15 September 2004
Approximate number of people at the conference/meeting	200
<p><b>Issues of Relevance to HPC</b></p> <p>The participants came from medical education, medical anthropology, sociology, anthropology, communications, history, literature and the visual and performing arts. Many specialists attended from the USA, Canada and Australia. The conference was supported by the Wellcome Trust. There was a good mix from GPs, professors of medicine, junior doctors, medical students, artists and academics and researchers from humanities. UCL has been pioneering the introduction of humanities teaching into medical education and this is extremely popular. The role of medical anthropology has become highly significant. There is a noticeable shift in medical education towards really valuing the patient's voice – interestingly this was also evident in a conference I attended the previous week at SOAS entitled Narrative Research in Health and Illness – and in recognising that medical education, and indeed the education of health professionals may be over-technical. The interdisciplinary workshops and discussion groups, deliberately mixed, were extremely useful in thinking about what constitutes a 'good' basis for working with patients. The arts and humanities are increasingly introduced to enable trainees to work on issues arising from their patient contacts, as well as to emphasize the need for well-rounded socially aware graduates. The difficulties of multi-professional education were discussed – blurring boundaries while at the same time not creating a mish-mash. The importance of being clear about the scope of one's profession was emphasized (here the HPC's SoPs were a good example) in order to co-operate with others. Of particular relevance for arts therapists was the continuing confusion in the NHS and elsewhere about the difference between 'artists' who engaged in different arts activities with patients, and 'arts therapists' who had a specific therapeutic role where 'quality' in art was not the issue. As some members of the Arts Council were present, it was an ideal opportunity to clarify as they had also been rather confused. As there is no regulation of 'artists' and the 'Arts for health' movement is not well defined, it is worrying that people who are not supervised nor necessarily familiar with the 'dangers' as well as the benefits of image making, performance arts etc, are able to have such close connexion with vulnerable patients. As a result of some of the discussions, it is possible that arts therapists might be asked to supervise these artists. The point was certainly taken. The necessity to view health care professionals' education as a living, developing process, which took into account social and cultural context, was agreed by all to be paramount.</p>	

**Key Decisions Taken: Not applicable – but:**

**A participants list with contact details was given to all. This will be an annual event and the aim is to develop medical humanities modules in medical faculties in other universities (Swansea already has one and there may be others).**

**HPC needs to continue to keep an eye on multi-professional education as it seems this move within medicine will involve (positively) some of our professions.**

**Agreement that the patients' voice really needs to be heard, and that the health professional needs to be able to listen to it but that the emotional needs of the hp also have to be recognised.**

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**July 2004**