

## Education and Training Committee – 8 June 2010

### Consultation on proposed changes to the generic standards of proficiency

#### Executive summary and recommendations

#### **Introduction**

On 25 March this year Council agreed to the recommendations of the Generic Standards of Proficiency Review Group that the standards of proficiency required some changes to ensure the generic standards are applicable to all professions regulated by the HPC.

In the attached consultation document we are proposing changes to the structure and wording of the generic standards of proficiency.

#### **Decision**

The Committee is invited to agree and recommend to Council the text of the attached consultation document (subject to minor editing changes).

#### **Background information**

Paper agreed by the Education and Training Committee on 10 March 2010 (enclosure 6 at [http://www.hpc-uk.org/aboutus/committees/educationandtraining\\_archive/index.asp?id=489](http://www.hpc-uk.org/aboutus/committees/educationandtraining_archive/index.asp?id=489))

#### **Resource implications**

The resource implications for the Policy and Standards Department are accounted for in department planning for 2010/11.

#### **Financial implications**

The financial implications include the costs associated with running the public consultation, such as the printing and mailing of the consultation document. These are accounted for in the Policy and Standards workplan for 2010/11.

#### **Appendices**

None

**Date of paper**

25 May 2010

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## **Consultation on proposed changes to the generic standards of proficiency**

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# 1. Introduction

- 1.1 We are consulting on proposed changes to the generic standards of proficiency.

## About this consultation

- 1.2 Our legislation requires the Council to establish standards of proficiency which are the standards necessary for safe and effective practice for each part of the Register.
- 1.3 In this document we are proposing changes to the structure and wording of the generic standards of proficiency.
- 1.4 The changes are being proposed to ensure that the generic standards are applicable to all the professions we regulate.
- 1.5 We are consulting for 12 weeks in accordance with guidance set out in the Government Code of Practice on Consultation.
- 1.6 The deadline for responses to this consultation is **13 October 2010**.
- 1.7 You can download further copies of this document from our website or please contact us if you would like us to send you a copy.

## About us

- 1.8 We are the Health Professions Council (HPC). We are a regulator and we were set up to protect the public. To do this, we keep a register of health professionals who meet our standards for their professional skills and behaviour.
- 1.9 We currently regulate 15 professions:
- Arts therapists
  - Biomedical scientists
  - Chiropodists / podiatrists
  - Clinical scientists
  - Dietitians
  - Hearing aid dispensers
  - Occupational therapists
  - Operating department practitioners
  - Orthoptists
  - Paramedics
  - Physiotherapists
  - Practitioner psychologists
  - Prosthetists / orthotists
  - Radiographers
  - Speech and language therapists

## **About this document**

- 1.10 We are seeking the views of stakeholders on our proposal to change the generic standards of proficiency.
- 1.11 In this document we provide a background to the standards of proficiency and outline the structure we currently have in place. We then explain the process we used to review the standards. In the next section we set out the proposed changes and our reasoning for the changes.
- 1.12 The final section includes a number of consultation questions that respondents may choose to address, which are also listed below.

## **Consultation questions**

1. Do you agree that generic standards of proficiency should be retained? Please provide reasons for your response.
2. Do you agree with the proposed new structure of the standards of proficiency? Please provide reasons for your response.
3. Do you agree with the proposed new wording of the generic standards of proficiency? Please provide reasons for your response.
4. Do you agree with the proposed order of the generic standards? Please provide reasons for your response.
5. Do you have any additional comments?

## **How to respond**

- 1.13 Please send your response to:

Consultation on proposed changes to the standards of proficiency  
Policy and Standards Department  
Health Professions Council  
Park House  
184 Kennington Park Road  
London  
SE11 4BU

You may also email responses to [consultation@hpc-uk.org](mailto:consultation@hpc-uk.org) or send a fax to +44 (0)20 7820 9684.

- 1.14 Please note that we are not normally able to accept responses by telephone or in person. We normally ask that consultation responses are made in writing to ensure that we can accurately record what the respondent would like to say. However, if you are unable to respond in

writing please contact us on +44 (0)20 7840 9815 to discuss any reasonable adjustments which would help you to respond.

**Please contact us to request a copy of this document in an alternative format, or in Welsh.**

- 1.15 If you would prefer your response not to be made public, please indicate this when you respond.
- 1.16 Once the consultation period is completed, we will analyse the responses we have received. We will then publish a document which details the comments received and explains the decisions we have taken as a result. This will be available on our website.
- 1.17 We are striving to improve our consultation process to ensure the best policy outcomes. You can find more information about our consultation process and contact details to tell us how we can improve our consultations on our website:

[www.hpc-uk.org/aboutus/consultations/about](http://www.hpc-uk.org/aboutus/consultations/about)

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## 2. Standards of proficiency

### Legal background

- 2.1 The standards of proficiency are the standards that we consider necessary for the safe and effective practice of professions we regulate.
- 2.2 Article 5(2)(a) of the Health Professions Order 2001 (the **Order**) says that we must:

“...establish the standards of proficiency **necessary** to be admitted to the different parts of the Register being the standards it considers **necessary** for **safe and effective practice** under that part of the Register” (emphasis added).
- 2.3 This means that we must publish standards for each of the professions which are the ‘necessary’ or ‘minimum’ that we consider to be essential for safe and effective practice. This is reflected in the language used in the standards.

### How we use the standards

#### Registration

- 2.4 The standards of proficiency describe what registrants should know, understand and be able to do at the time they apply to join the HPC Register.
- 2.5 The standards play a central role in how someone becomes and remains registered with us. Every new registrant must demonstrate that they meet our standards of proficiency. There are different ways that a registrant can meet the standards, depending on which application route they apply through.
- 2.6 Most applicants complete their study within the UK and apply for registration through our UK approved programme route. All approved programmes have been assessed by the HPC to ensure that students who successfully complete them meet the standards of proficiency and are therefore eligible for registration.
- 2.7 International and grandparenting applications are also assessed against the standards of proficiency. Each application is assessed by assessors from the relevant profession to determine whether the applicant’s education, training and experience mean that they meet the standards.

## Registration renewal

- 2.8 Every time a registrant renews their registration, we ask them to sign a declaration to confirm that they continue to meet the standards of proficiency which apply to them. This does not mean that registrants must continue to meet all of the standards once they are registered. We understand that most registrants' scope of practice will change over time and this may mean that they do not meet all of the standards of proficiency that apply for the whole of their profession. This does not cause us concern as long as they are practising safely and effectively within their scope of practice.

## Fitness to practise

- 2.9 If a registrant's competence is called into question we may look at the standards of proficiency in deciding whether we need to take any action. This does not mean that we will take action if a registrant does not meet all of the standards. But we may use the standards to determine whether a registrant is practising safely and effectively within their scope of practice.

## How registrants meet the standards

- 2.10 The standards of proficiency complement our other standards as well as policies and protocols developed by employers and guidance or codes of conduct produced by professional bodies.
- 2.11 There is normally more than one way in which the standards can be met. Registrants can make their own informed decisions about the best way in which they can meet our standards. This might be by following the guidance provided by their professional body which is often aimed at promoting best practice.
- 2.12 Employers also develop their own policies or ways of working that allow registrants to meet the standards, while taking account of local circumstances such as the need for a specific area of practice or the availability of resources.

## Current structure of the standards of proficiency

- 2.13 Our standards of proficiency include generic elements, which apply to all our registrants, and profession-specific elements which are unique to each profession.
- 2.14 The following example is from the standards of proficiency for hearing aid dispensers:



### **2b.3 be able to formulate specific and appropriate management plans including the setting of timescales**

- understand the requirement to adapt practice to meet the needs of different client groups distinguished by, for example, physical, psychological, environmental, cultural or socio-economic factors
- *be able to formulate and provide appropriate advice regarding hearing aids and associated technologies and their use to facilitate informed choices by service users*

2.15 The bold standard above is the overarching generic standard. The first bullet point is a detailed generic standard that applies to all professions. The standard in italics is a profession-specific standard that applies only to hearing aid dispensers (this appears as blue text in the published standards).

2.16 There are currently 26 overarching generic standards and 53 detailed generic standards. Each profession has a different number of profession-specific standards.

### **Language used in the standards**

2.17 As discussed on page 4, the standards of proficiency are the minimum standards for safe and effective practice. This means that they have to be relevant and applicable to prospective registrants applying to come on to the Register for the first time, as well as existing registrants and their practice.

2.18 The language used in the standards plays an important role in ensuring that they meet the above requirements. We intentionally use verbs such as 'understand', 'know' and 'be able to' rather than 'must'.

2.19 For example: *be able to practise in a non-discriminatory manner*. By using 'be able to' we can ensure that:

- the standard is applicable to prospective registrants - i.e. those who have not yet started practising and are applying to be registered for the first time; and
- the standard is relevant and applicable to existing registrants. It could also be used in a fitness to practise case where a registrant's conduct or competence was called in to question.

2.20 If we changed the wording of this standard, for example, to 'registrants must practise in a non-discriminatory manner' it could no longer be met by prospective registrants who have not yet practised in their profession.

2.21 We write the standards in a way that means they are relevant to all our registrants, regardless of practice. We also use language that can take

into account changes in the law, technology or working practices which might take place over time.

- 2.22 We have received some feedback to suggest that the language and terminology used in the generic standards is not applicable to all professions. We are hoping that our proposals to change the standards of proficiency will address these concerns. This is discussed in more detail in Section 5 of the document.

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### 3. Review of the standards of proficiency

#### How we review standards

- 3.1 We review our standards in two different ways.
- 3.2 **Ongoing review** means the 'day-day-day' review of the standards by the Council, Committees and the Executive. This is primarily to ensure that the standards do not limit effective ways of working for registrants and education providers. Ongoing review might indicate that a specific change to a standard was necessary or indicate that a more detailed 'periodic' review should be brought forward.
- 3.3 **Periodic review** refers to when we review the standards in more detail to ensure that they:
- remain fit for purpose – for example in making decisions about education programmes and in making fitness to practise decisions;
  - are well understood by our stakeholders including registrants, patients, education providers and the public; and
  - take account of change including changes in practice, legislation, technology, guidelines and wider society.
- 3.4 We aim to review our standards approximately every five years. We last reviewed the standards of proficiency in 2005.

#### Current review

- 3.5 In September 2009, we set up a group comprising of seven HPC Council members to review the generic standards of proficiency and to recommend to the HPC Council whether any changes needed to be made. A list of members can be found at Appendix A.
- 3.6 Our review focussed on the generic standards only. This is because profession-specific standards sit underneath the overarching generic standards. Any changes to the generic standards are likely to have implications for the profession specific standards. It is therefore logical to review the generic standards before considering the profession specific standards. More information about the review of the profession specific standards can be found on page 14.
- 3.7 When reviewing the standards, we considered feedback from a variety of stakeholders. This included a small number of comments from individuals and organisations that were sent to us on an ad hoc basis since the last review of the standards. These comments mainly focussed on the wording of specific standards.

- 3.8 We also considered comments about the generic standards that had been submitted through previous consultations on profession specific standards of proficiency. Finally, we considered feedback from the professional bodies of the professions currently regulated by the HPC.
- 3.9 A number of external stakeholders raised concerns that not all of the generic standards apply to all professions regulated by the HPC for the following reasons:
- some generic standards have a health and social care focus, which is not appropriate for all professions on the Register; and
  - some of the terminology used in the generic standards is not relevant for all professions on the Register.

### **Our conclusions**

- 3.10 The generic standards of proficiency must be applicable to all professions we regulate. After reviewing the available information and considering the current wording and structure of the standards of proficiency, we have reached the following conclusions:
- generic standards of proficiency should be retained as they recognise important commonalities shared by the professions regulated by the HPC;
  - one of our strengths as a multi-profession regulator is our ability to have common processes that are applicable across all our professions;
  - significant changes to both the structure and wording of the standards of proficiency are required to address the concerns that have been raised; and
  - the most appropriate new structure for the standards of proficiency is that which is outlined in Section 5 of this document.

## **4. Proposed changes to the standards of proficiency**

### **Changes to the structure**

- 4.1 The current structure of the generic standards of proficiency is 26 overarching generic standards and 53 detailed generic standards. Each profession has a different number of profession specific standards.
- 4.2 We are proposing to reduce the number of generic standards to 15. Each of these generic standards would be overarching and applicable to all professions. Each profession would then have a new set of profession specific standards that sit underneath the overarching standards. These new profession specific standards would include the existing profession specific standards and the detailed generic standards that are applicable to each profession.
- 4.3 We do not expect all professions to retain all of the current detailed generic standards. For example, 'be able to select appropriate personal protective equipment and use it correctly' would most likely be retained for biomedical scientists, but is less likely to be retained for arts therapists.

### **Why the new structure is being proposed**

- 4.4 We believe that the new structure will address the concerns that have been raised by our external stakeholders.
- 4.5 The new structure and wording of the overarching generic standards will mean that they are applicable to all the professions we regulate. The proposed new generic standards are more simple and broader than the current generic standards and can be applied across all professions.
- 4.6 The new structure will also ensure that the terminology used is appropriate and applicable to all professions. Under the new model the majority of standards would be profession specific, which would allow professions to use their own language and ensure that the standards are relevant and applicable.
- 4.7 We believe that the flexibility the new structure offers would mean that the standards could more easily be applied to new professions if the HPC were to regulate additional professions in the future.

## **Changes to the wording of the generic standards**

- 4.8 The current overarching generic standards of proficiency are provided at Appendix B.
- 4.9 We are proposing significant changes to the wording of the current overarching generic standards. This includes adding, removing and modifying the existing standards. Our proposed new standards of proficiency are provided below.

### **Registrants must**

1. be able to practise safely and effectively within their scope of practice
2. be able to practise within the legal and ethical boundaries of their profession
3. be able to maintain fitness to practise
4. be able to practise as an autonomous professional, exercising their own professional judgement
5. be able to practise in a non-discriminatory manner
6. be aware of the impact of culture, equality and diversity on practice
7. be able to maintain confidentiality
8. be able to communicate effectively
9. be able to work appropriately with others
10. be able to maintain records appropriately
11. be able to reflect on and review practice
12. be able to assure the quality of their practice
13. be able to draw on appropriate knowledge and skills to inform practice
14. understand the key concepts of the bodies of knowledge which are relevant to their profession
15. be able to establish and maintain a safe practice environment

## **Why the changes to the wording are being proposed**

- 4.10 The main reason that standards have been removed or reworded is to ensure that they are applicable across all professions. This means that we are proposing that some standards be removed from the overarching generic standards but retained as profession specific standards for those professions where it is appropriate to do so.
- 4.11 We are aiming to make the new structure simpler than the current structure with less overarching standards. Some skills (for example communication) previously had more than one generic standard and we are proposing that they be combined into one broad standard.
- 4.12 We are also proposing that some standards be removed from the generic standards where there is overlap with another generic standard. For example, we believe that 'recognise the need for effective self-management of workload and resources and be able to practise accordingly' is inherent in 'be able to practise as an autonomous professional, exercising their own professional judgement'. It is not necessary to retain both as generic standards.
- 4.13 We are proposing the addition of two new overarching generic standards. We believe these standards are core elements of professional practice which apply to all of our registrants.
- 4.14 Detailed reasons for the changes to each existing overarching generic standard are provided at Appendix C. We have also given reasons where we are proposing the addition of new standards.

## **The order of the standards**

- 4.15 We are seeking feedback on the order of the standards. We have tried to order the standards in a logical way that is similar to the current structure. The standards begin with skills and knowledge that are applicable to the individual's responsibilities as an autonomous professional and move on to their responsibilities in their wider working environment.

## **How the new structure would look in practice**

- 4.16 On the following page is an example of how the new structure might look in practice. You will see that the three professions used have different profession specific standards. There is some overlap, but each profession has only retained the detailed generic standards and profession specific standards that are applicable to them.
- 4.17 This is not intended to be the final version and is provided only as an example. We expect that changes will be made to the wording of the profession specific standards following further consultation and this is likely to differ across the professions.

## **15. be able to establish and maintain a safe practice environment**

### *Biomedical scientists:*

- be aware of applicable health and safety legislation, and any relevant safety policies and procedures in force at the workplace, such as incident reporting, and be able to act in accordance with these
- be able to work safely, including being able to select appropriate hazard control and risk management, reduction or elimination techniques in a safe manner in accordance with health and safety legislation
- be able to select appropriate personal protective equipment and use it correctly
- be able to establish safe environments for practice, which minimise risks to service users, those treating them, and others, including the use of hazard control and particularly infection control
- understand sources of hazard in the workplace, including specimens, raw materials, clinical waste and equipment
- be aware of immunisation requirements and the role of occupational health
- know the correct principles and applications of disinfectants, methods for sterilisation and decontamination, and for dealing with waste and spillages correctly
- know the use and application of engineering controls, eg mechanical ventilation systems such as fume cupboards or microbiological safety cabinets
- understand the application of principles of good laboratory practice relevant to health and safety

### *Operating departmental practitioners*

- be aware of applicable health and safety legislation, and any relevant safety policies and procedures in force at the workplace, such as incident reporting, and be able to act in accordance with these
- be able to work safely, including being able to select appropriate hazard control and risk management, reduction or elimination techniques in a safe manner in accordance with health and safety legislation
- be able to select appropriate protective equipment and use it correctly
- be able to establish safe environments for practice, which minimise risks to service users, those treating them, and others, including the use of hazard control and particularly infection control
- understand the nature and purpose of sterile fields, and the practitioner's individual role and responsibility for maintaining them
- understand and be able to apply appropriate moving and handling techniques

### *Speech and language therapists*

- be aware of applicable health and safety legislation, and any relevant safety policies and procedures in force at the workplace, such as incident reporting, and be able to act in accordance with these
- be able to establish safe environments for practice, which minimise risks to service users



## **Profession specific standards**

- 4.18 At this stage we are not consulting on the wording of profession specific standards, or which standards should be retained for each profession. However, we are seeking your views about our proposal to combine the existing profession specific standards and detailed generic standards into new profession specific standards for each profession.
- 4.19 Once the new structure and generic standards have been agreed, we will then begin the process of reviewing the profession specific standards and detailed generic standards to create new profession specific standards. The new generic standards will not be implemented or published until the profession specific standards have been finalised.
- 4.20 We anticipate that the review of the profession specific standards will begin in early 2011.

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## 5. Consultation questions

5.1 We have asked some consultation questions below which you may wish to address. However, if there are any other comments you would like to make we will be happy to take these on board.

1. Do you agree that generic standards of proficiency should be retained? Please provide reasons for your response.
2. Do you agree with the proposed new structure of the standards of proficiency? Please provide reasons for your response.
3. Do you agree with the proposed new wording of the generic standards of proficiency? Please provide reasons for your response.
4. Do you agree with the proposed order of the generic standards? Please provide reasons for your response.
5. Do you have any additional comments?

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### **Members of the Generic Standards of Proficiency Review Group**

Miss Eileen Thornton (Chair)  
Registrant member of Council (Physiotherapist)

Mrs Joy Tweed  
Lay member of Council

Professor Diane Waller  
Registrant member of Council (Arts therapist)

Dr Arun Midha  
Lay member of Council

Mr John Donaghy  
Registrant member of Council (Paramedic)

Professor Annie Turner  
Registrant member of Council (Occupational therapist)

Mrs Penny Renwick  
Registrant member of Council (Chiropodist/podiatrist)

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### Current wording of the overarching generic standards of proficiency

#### 1a. Professional autonomy and accountability

- 1a.1 be able to practise within the legal and ethical boundaries of their profession
- 1a.2 be able to practise in a non-discriminatory manner
- 1a.3 understand the importance of and be able to maintain confidentiality
- 1a.4 understand the importance of and be able to obtain informed consent
- 1a.5 be able to exercise a professional duty of care
- 1a.6 be able to practise as an autonomous professional, exercising their own professional judgement
- 1a.7 recognise the need for effective self-management of workload and resources and be able to practise accordingly
- 1a.8 understand the obligation to maintain fitness to practise

#### 1b. Professional relationships

- 1b.1 be able to work, where appropriate, in partnership with other professionals, support staff, service users and their relatives and carers
- 1b.2 be able to contribute effectively to work undertaken as part of a multi-disciplinary team
- 1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users, their relatives and carers

#### 2a. Identification and assessment of health and social care needs

- 2a.1 be able to gather appropriate information
- 2a.2 be able to select and use appropriate assessment techniques
- 2a.3 be able to undertake or arrange investigations as appropriate
- 2a.4 be able to analyse and critically evaluate the information collected

**2b. Formulation and delivery of plans and strategies for meeting health and social care needs**

- 2b.1 be able to use research, reasoning and problem solving skills to determine appropriate actions
- 2b.2 be able to draw on appropriate knowledge and skills in order to make professional judgements
- 2b.3 be able to formulate specific and appropriate management plans including the setting of timescales
- 2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully
- 2b.5 be able to maintain records appropriately

**2c. Critical evaluation of the impact of, or response to, the registrant's actions**

- 2c.1 be able to monitor and review the ongoing effectiveness of planned activity and modify it accordingly
- 2c.2 be able to audit, reflect on and review practice

**3a. Knowledge, understanding and skills**

- 3a.1 know and understand the key concepts of the bodies of knowledge which are relevant to their profession-specific practice
- 3a.2 know how professional principles are expressed and translated into action through a number of different approaches to practice, and how to select or modify approaches to meet the needs of an individual, groups or communities
- 3a.3 understand the need to establish and maintain a safe practice environment

Reasoning behind the proposed changes to standards

Current wording	Proposed changes	Reasoning
1a.1 be able to practise within the legal and ethical boundaries of their profession	We are proposing no changes to the wording of this standard.  (Standard 2 of the proposed new standards)	We believe that this is an important standard that is applicable across all professions and should be retained.
1a.2 be able to practise in a non-discriminatory manner	We are proposing no changes to the wording of this standard.  (Standard 5 of the proposed new standards)	We believe that this is an important standard that is applicable across all professions and should be retained.
1a.3 understand the importance of and be able to maintain confidentiality	We are proposing no changes to the wording of this standard.  (Standard 7 of the proposed new standards)	We believe that this is an important standard that is applicable across all professions and should be retained.  We received some feedback that this standard should include ‘...while understanding the limits and potential ethical concerns that may arise’. To be consistent with the simplified approach to the standards we are proposing that this not be included in the generic standard, but instead be a profession specific standard for those professions which it’s applicable to.

<p>1a.4 understand the importance of and be able to obtain informed consent</p>	<p>We are proposing that this standard be removed from the overarching generic standards.</p> <p>We believe that this standard would be more appropriate as a profession specific standard for the professions where it is appropriate to do so.</p>	<p>Feedback suggested that this standard is not applicable to all professions regulated by HPC (for example, occupational psychologists working with organisations) and should not be an overarching generic standard.</p>
<p>1a.5 be able to exercise a professional duty of care</p>	<p>We are proposing that this standard be removed from the overarching generic standards.</p> <p>We believe that this standard would be more appropriate as a profession specific standard for the professions where it is appropriate to do so.</p>	<p>Feedback suggested that this standard is not applicable to all professions and that the term 'duty of care' is outdated and not used by all professions.</p> <p>We also believe that the principle of exercising a 'duty of care' is inherent in the new standard 1 and to retain this as a generic standard would be duplication.</p>
<p>1a.6 be able to practise as an autonomous professional, exercising their own professional judgement</p>	<p>We are proposing no changes to the wording of this standard.</p> <p>(Standard 4 of the proposed new standards)</p>	<p>We believe that this is an important standard that is applicable to all professions and should be retained.</p>

<p>1a.7 recognise the need for effective self-management of workload and recourses and be able to practise accordingly</p>	<p>We are proposing that this standard be removed from the overarching generic standards.</p> <p>We believe that this standard would be more appropriate as a profession specific standard for the professions where it is appropriate to do so.</p>	<p>We believe this standard is inherent in the new standard 4 and to retain this as a generic standard would create duplication.</p>
<p>1a.8 understand the obligation to maintain fitness to practise</p>	<p>We are proposing that the wording be changed to:</p> <p>be able to maintain fitness to practise</p> <p>(Standard 3 of the proposed new standards)</p>	<p>We believe that this is an important standard that is applicable to all professions and should be retained.</p> <p>Maintaining fitness to practise is an essential part of registration. We believe that the standard should not just require registrants to 'understanding the obligation', but instead they must demonstrate that they are able to maintain fitness to practise.</p>



<p>1b.1 be able to work, where appropriate, in partnership with other professionals, support staff, service users and their relatives and carers</p>	<p>We are proposing that this standard be combined with standard 1b.2 and the wording changed to:</p> <p>be able to work appropriately with others</p> <p>(Standard 9 of the proposed new standards)</p>	<p>Creating one broad standard will ensure that it is applicable to all professions. New profession specific standards with more detail that are applicable for each profession can then sit underneath.</p> <p>Feedback suggested that standards 1b.1 and 1b.2 as they currently stand are not applicable to all professions. We believe that broadening the standard addresses this concern.</p> <p>This standard does not mean that all registrants must work with others. It means that registrants must <i>be able</i> to work appropriately with others if required.</p>
<p>1b.2 be able to contribute effectively to work undertaken as part of a multi-disciplinary team</p>	<p>See 1b.1</p>	<p>See1b.1</p>

<p>1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users, their relatives and carers</p>	<p>We are proposing that this standard be combined with standard 1b.4 and the wording changed to:</p> <p>be able to communicate effectively</p> <p>(Standard 8 of the proposed new standards)</p>	<p>Creating one broad standard will ensure that it is applicable to all professions. New profession specific standards with more detail that are applicable for each profession can then sit underneath.</p> <p>We have received feedback that the terminology used and the way the standards are currently expressed are not appropriate for all professions.</p>
<p>1b.4 understand the need for effective communication throughout the care of the service user</p>	<p>See 1b.3</p>	<p>See 1b.3</p>
<p>2a.1 be able to gather appropriate information</p>	<p>We are proposing that this standard be removed from the overarching generic standards.</p> <p>We believe that this standard would be more appropriate as a profession specific standard for the professions where it is appropriate to do so.</p>	<p>Feedback suggested that this standard is not applicable to all professions and should not be retained as a generic standard.</p>

<p>2a.2 be able to select and use appropriate assessment techniques</p>	<p>We are proposing that this standard be removed from the overarching generic standards.</p> <p>We believe that this standard would be more appropriate as a profession specific standard for the professions where it is appropriate to do so.</p>	<p>Feedback suggested that this standard is not applicable to all professions and should not be retained as a generic standard.</p>
<p>2a.3 be able to undertake or arrange investigations as appropriate</p>	<p>We are proposing that this standard be removed from the overarching generic standards.</p> <p>We believe that this standard would be more appropriate as a profession specific standard for the professions where it is appropriate to do so.</p>	<p>Feedback suggested that this standard is not applicable to all professions and should not be retained as a generic standard.</p>
<p>2a.4 be able to analyse and critically evaluate the information collected</p>	<p>We are proposing that this standard be removed from the overarching generic standards.</p> <p>We believe that this standard would be more appropriate as a profession specific standard for the professions where it is appropriate to do so.</p>	<p>Feedback suggested that this standard is not applicable to all professions and should not be retained as a generic standard.</p>

<p>2b.1 be able to use research, reasoning and problem-solving skills to determine appropriate actions</p>	<p>We are proposing that this standard be removed from the overarching generic standards.</p> <p>We believe that this standard would be more appropriate as a profession specific standard for the professions where it is appropriate to do so.</p>	<p>Feedback suggested that this standard is not applicable to all professions and should not be retained as a generic standard.</p>
<p>2b.2 be able to draw on appropriate knowledge and skills in order to make professional judgements</p>	<p>We are proposing that the wording be changed to:</p> <p>be able to draw on appropriate knowledge and skills to inform practice</p> <p>(Standard 13 of the proposed new standards)</p>	<p>We believe the proposed change will make the standard applicable to all areas of a registrant's practice, rather than just professional judgements.</p>
<p>2b.3 be able to formulate specific and appropriate management plans including the setting of timescales</p>	<p>We are proposing that this standard be removed from the overarching generic standards.</p> <p>We believe that this standard would be more appropriate as a profession specific standard for the professions where it is appropriate to do so.</p>	<p>Feedback suggested that this standard is not applicable to all professions and should not be retained as a generic standard.</p>

<p>2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully</p>	<p>We are proposing that this standard be removed from the overarching generic standards.</p> <p>We believe that this standard would be more appropriate as a profession specific standard for the professions where it is appropriate to do so.</p>	<p>Feedback suggested that this standard is not applicable to all professions and should not be retained as a generic standard.</p>
<p>2b.5 be able to maintain records appropriately</p>	<p>We are proposing no changes to the wording of this standard.</p> <p>(Standard 10 of the proposed new standards)</p>	<p>We believe that this is an important standard that is applicable across all professions and should be retained.</p> <p>We received some feedback that this standard should include ‘...in accordance with applicable legislation, protocols and guidelines’. To be consistent with the simplified approach to the standards we are proposing that this not be included in the generic standard, but instead be a profession specific standard for those professions which it’s applicable to.</p>

<p>2c.1 be able to monitor and review the ongoing effectiveness of planned activity and modify it accordingly</p>	<p>We are proposing that the wording be changed to: be able to assure the quality of their practice (Standard 12 of the proposed new standards)</p>	<p>Feedback suggested that the wording of the standard as it stands is not applicable to all professions. We believe the proposed change will allow registrants to quality assure their practice in a way which is appropriate for them.</p>
<p>2c.2 be able to audit, reflect on and review practice</p>	<p>We are proposing that the wording be changed to: be able to reflect on and review practice (Standard 11 of the proposed new standards)</p>	<p>Feedback suggested that not all professions have their practice audited and we believe that the amendment will make the standard applicable to all professions.</p>
<p>3a.1 know and understand the key concepts of the bodies of knowledge which are relevant to their profession-specific practice</p>	<p>We are proposing that the wording be changed to: understand the key concepts of the bodies of knowledge which are relevant to their profession (Standard 14 of the proposed new standards)</p>	<p>Feedback suggested that some registrants are confused about what this standard means. We believe that the amendment will simplify the standard and make the meaning clearer to registrants.</p>

<p>3a.2 know how professional principles are expressed and translated into action through a number of different approaches to practice, and how to select or modify approaches to meet the needs of an individual, groups or communities</p>	<p>We are proposing that this standard be removed from the overarching generic standards.</p> <p>We believe that this standard would be more appropriate as a profession specific standard for the professions where it is appropriate to do so.</p>	<p>We believe that this standard is inherent in standards 1 and 13 and to retain this as a generic standard would create duplication.</p>
<p>3a.3 understand the need to establish and maintain a safe practice environment</p>	<p>We are proposing no changes to the wording of this standard.</p> <p>(Standard 15 of the proposed new standards)</p>	<p>We believe that this is an important standard that is applicable across all professions and should be retained.</p>

**We are proposing the following new standards:**

<p>be able to practise safely and effectively within their scope of practise</p> <p>(Standard 1 of the proposed new standards)</p>	<p>The new standard is similar to a detailed generic standard that currently sits under 1a.8.</p> <p>We are proposing that it become an overarching generic standard as we feel that it is an important standard that is applicable across the whole register.</p>
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be aware of the impact of culture, equality and diversity on practice

(Standard 6 of the proposed new standards)

We are proposing that this standard be added to reflect the importance of culture, equality and diversity considerations for professionals and their practice.

We believe that there is more to culture, equality and diversity consideration than just practicing in a non-discriminatory manner and that the additional standard is important.

DRAFT