

Managing your fitness to practise

Introduction

This guidance stems from the work being done by the Council in the area of health, disability and registration.

The Council's over-arching policy for dealing with this area recommends several separate areas in which more detailed work needs to be done in order to ensure that we issue guidance and implement processes which uphold the standards of the professions and are fair to registered professionals, applicants, programme providers, and the public.

This policy specifically recommends that we produce guidance about how registrants can manage their fitness to practise, putting into clear, plain English the processes and the steps that a registrant may take in order to manage their fitness to practise.

Decision

The Registration committee is asked to review the text of this guidance and to suggest any additions / amendments as appropriate.

They are also asked to approve the following course of action:

That this guidance should be supplemented with additional information

- Information for employers: guidance on when to disclose information to the HPC

- A definition of 'scope of practice'

These three pieces of guidance could then form one document:

'Managing fitness to practise: a guide for registrants and employers'

We could consult on this document for three months, then publish it in hard copy and online. This would be a valuable addition to the information we produce, and a useful explanation of our role.

Managing your fitness to practise

The Council's expectations of all registrants

Our standards of conduct, performance and ethics say that, 'You must always... limit your work or stop practising if your performance or judgement is affected by your health'. (p.2)

Our generic standards of proficiency say that every registrant must 'know the professional and personal scope of their practice...' (1b.1)

We expect all registrants to restrict or to adapt their practice where *any* factor, including health, disability, competence, or anything else, may affect their fitness to practise.

This is a general expectation which applies to all registrants, not only those who consider themselves to have a health or disability issue, or those registrants who have made us aware of their health or a disability.

Example

An example of how this might work in practice is the section of the Standards of proficiency which states that registrants must:

'2b.5 be able to maintain records appropriately

be able to keep accurate, legible records and recognise the need to handle these records'

A registrant who knows that her handwriting is normally considered to be illegible may take steps to print her notes in block capitals, or to type them up, to ensure that they can be used effectively by her colleagues. In this way, she takes reasonable steps to adjust her practice to ensure that she meets the standard.

Other examples of registrants who may make adjustments to meet this standard include a visually impaired registrant who needs an assistant or special software to help them take their notes, or a dyslexic registrant who might prefer to keep electronic notes. In each case, whether or not the adjustments stem from a disability issue, or any other issue, the registrant would have taken reasonable steps to ensure that they met this part of the Standards of Proficiency.

Professional self-regulation

The first stage in the effective regulation of health professionals who feel that their fitness to practise may be impaired is professional self-regulation.

Specifically, we expect that a registrant who feels that their fitness to practise may be impaired would in the first instance take steps themselves which might include:

- seeking medical help or other support;
- negotiating reasonable adjustments to their working conditions with their employer;
- restricting their scope of practice to those areas where they are sure that their practice fully meets the Standards of Proficiency for their profession; and / or
- removing themselves from practice, or from the Register if appropriate, while an issue is addressed.

There is no need for us to take an active role in any of the above steps, as the registrant is judging their own fitness to practise, and making professional opinions as appropriate. Our primary concern is where difficulty arises, and a registrant is not effectively managing their fitness to practise.

We would only have a regulatory role to play if an allegation was submitted against a registrant who was managing their fitness to practise in this way.

This involvement of individual registrants in managing their own fitness to practise, is an important part of professional accountability and responsibility, and a vital principle by which professional self-regulation works.

Insight and understanding

Whether a registrant has *insight and understanding* into their own fitness to practise will be a key factor on whether the HPC is needs to play a regulatory role in order to protect the public.

A registrant is judged to have insight and understanding of their fitness to practise if they have a realistic, informed idea of the limits of their safe practice, and they understand the need to remain within their scope of practice, to ensure that there their patients, clients and users are not put at risk and that there is not any danger to themselves.

In almost all cases where the registrant has a good understanding of their personal scope of practice, they can remain registered and need have no interaction with the HPC.

In cases where a registrant does not have insight and understanding, then a registered colleague may feel that they must make an allegation against them to the HPC, and indeed they have a duty to do so.

Specifically, our standards of conduct, performance and ethics say that:

‘you must protect patients if you believe that they are threatened by a colleague’s conduct, performance or health. The safety of patients, clients and users must come before any personal and professional loyalties at all times. As soon as you become aware of any situation that puts a patient, client or user at risk, you should discuss the matter with a senior professional colleague. If you feel that you cannot raise the matter with a senior colleague, you can contact our Registrar.’ (p. 3)

‘you must also tell us (and other relevant regulators and professional bodies) if you have any important information about your conduct or competence, or about other registrants and health professionals you work with.’ (p.5)

Irrespective of what action you are taking, if disciplinary action is taken against you by somebody else (for example, an employer, professional body), then you must inform us. There may be matters in relation to an employment relationship which are not relevant to us, but if you are in any doubt you should contact us.

Rachel Tripp
6th July 2004