

2 August 2005

Marc Seale  
Chief Executive & Registrar  
Health Professions Council  
Park House  
184 Kennington Park Road  
London  
SE11 4BU

Quarry House  
Quarry Hill  
Leeds  
LS2 7UE

Tel: 0113 254 5000

Dear Marc,

### **Restructuring of HPC Council**

You will recall that following discussions about HPC's consultation on your proposals for amending the structure and composition of HPC, I said I would seek the views of Heath Ministers on this matter. I am sorry for the delay in doing so. This was due to the intervention of the General Election and appointment of new ministers.

Any amendment of HPC's structure would need to be effected through Government sponsored legislation so it will be necessary that it is in line with Government policy. This itself may be refined in the light of the current review of non-medical regulation, but that may take some time to reach conclusions and implement them. In the meantime, it may be necessary to proceed with restructuring the HPC to enable the Council to deal effectively with the addition of several new professions within the next year.

Jane Kennedy, Minister for Quality and Patient Safety, has approved the following principles to be applied in restructuring HPC, to give effect to Government policy objectives:

- Patient safety is the guiding reason for regulation, not professional interest;
- The regulator should contain some members elected by the regulated professions to provide professional buy-in and the justification for registrants to fund statutory regulation, which would otherwise fall to the Government;
- There should be no automatic link between professions regulated and dedicated membership of HPC's Council;
- There is consequently no need for alternate registrant members of Council, nor for provision to elect an extra registrant member from the same profession as a registrant Council President;
- As the HPC is a UK-wide body, there must be minimum representation from all four home countries guaranteed;
- The chosen election scheme should be as democratic as possible, once four country representation has been guaranteed;

- The election scheme should provide the most efficient model possible, achieving the best balance of continuity and introduction of new members;
- The election scheme should be as open and transparent as possible.

She has considered the following four options:

1. single big election,
2. grouped professional elections,
3. annual conference, and
4. geographical elections

and rejected 3 & 4 as not meeting the principles for restructuring. Her preference is for Options 1 & 2 to be offered for public consultation within the draft Healthcare Scientist Section 60 order. A final decision will be taken in the light of the responses to that consultation.

I hope this is helpful as an indication of the way forward. We are happy to discuss this further with you and your Council if you wish.

Yours sincerely,

*pp Alexandra Mortimer*

Rosalind Mead  
Project Manager: New Regulation Projects

cc: Graham Donald, Privy Council Office



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