# Health Professions Council Council meeting, 6<sup>th</sup> July 2006 Review of the standards of proficiency

# **Executive Summary and Recommendations**

#### Introduction

At its meeting on 2<sup>nd</sup> March 2005, the Council agreed to establish a Professional Liaison Group (PLG) to review the standards of proficiency for the first 12 professions regulated by HPC.

The PLG has met five times from October 2005 and considered evidence about the standards from a wide range of stakeholders including:

- Registration Assessors
- Panel chairs (who chair fitness to practise panels);
- Professional bodies; and
- Market research carried out with registrants from a variety of different areas of practice.

During the review the group also considered the legal context to the standards, the language of the standards and the relationship of the standards to standards and frameworks produced by other organisations.

At its meeting on 19<sup>th</sup> June 2006, the PLG finalised its recommendations to Council. The proposed changes to the standards are relatively minor in nature and are to:

- reflect standard safe and effective practice or changes in the scope of practice of a profession;
- reflect the standard content of pre-registration education programmes;
- reflect changes in current use of terminology; and
- to correct errors, omissions or to avoid duplication

The group has also produced a new introduction to the standards which seeks to more clearly explain the role of the standards, scope of practice and ways of meeting the standards.

The consultation document including the new introduction and standards is appended.

## **Decision**

The Council is asked to agree to consult on the proposed new standards.

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

# **Background information**

The standards of proficiency for operating department practitioners were published in July 2004. The register for operating department practitioners opened on 18<sup>th</sup> October 2004. The Council committed to keeping their standards the same during the grandparenting period which will end on 17<sup>th</sup> October 2006.

The PLG took account of the views of the Association of Operating Department Practitioners (AODP) and other operating department practitioner stakeholders in considering whether changes were necessary to the generic standards.

The Education and Training Committee will consider a paper on 28<sup>th</sup> September 2006 about reviewing the profession-specific standards of proficiency for operating department practitioners.

# **Resource implications**

- Mailing standards to consultation list
- Posting information online including press release
- Writing consultation responses document

# **Financial implications**

- Laying out and production of consultation document
- Mailing to consultation list c.300 people.

Background	papers
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None

### **Appendices**

Appendix 1

### Date of paper

None

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

#### (i) Appendix 1

#### (ii) Introduction

I am pleased to introduce this consultation on revised standards of proficiency.

The standards of proficiency are the standards that we consider necessary for the safe and effective practice of each of the professions we regulate. We published the standards for the first 12 professions we regulated in July 2003. We said that we would try not to make any changes for at least the first two years (during the transitional 'grandparenting' period) but that we would keep the standards under review and update them if necessary to take account of changes in practice.

We set-up a Professional Liaison Group (PLG) in October 2005 to review the standards of proficiency. The group's role was to look at how the existing standards were working and whether they continued to reflect current practice as experienced by registrants, employers, educators and others.

#### (iii) The standards

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).

This means that we must publish standards for each of the professions that we regulate which are the 'necessary' or 'minimum' that we consider to be essential for safe and effective practice.

The standards play a central role in how someone becomes and remains registered with us.

We approve education programmes to make sure that they allow students to meet these standards when they graduate. We also assess applications from applicants who have trained overseas and some applications via our grandparenting process against these standards. If an applicant meets these standards they are eligible to be registered.

If a registrant's competence is called into question we will look at these standards in deciding whether we need to take any action.

<sup>1</sup> Operating Department Practitioners became regulated by HPC on 18<sup>th</sup> October 2004 with a grandparenting period for two years until 17<sup>th</sup> October 2006. As these standards must stay the same during this period, they are not the subject of this consultation.

						2
Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

3

Every time a health professional registered with us 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.

### (iv) About the review

The PLG met five times and considered information from a number of different stakeholders and sources. These included:

- Registration Assessors (who make decisions about applications made by applicants who qualified overseas or applications made under the grandparenting arrangements);
- Visitors (who visit education providers to help us to decide whether a course should be approved);
- Panel chairs (who chair fitness to practise panels);
- Professional bodies; and
- Market research carried out with registrants from a variety of different areas of practice.

In considering all the comments and suggestions we received, the main consideration of the group was that any changes or new standards had to be necessary for safe and effective practice. The changes to the standards proposed in this document are to:

- reflect standard safe and effective practice or changes in the scope of practice of a profession;
- reflect the standard content of pre-registration education programmes;
- clarify the intention of the existing standards;
- reflect changes in current use of terminology; and
- correct errors, omissions or to avoid duplication

We also reviewed the introduction to the standards. We have revised the introduction so that we can explain more clearly the role of the standards in admission to the register and in renewal of registration. We have also explained how the standards apply to registrants who have specialised and the role of professional bodies, education providers and others in helping registrants to meet the standards.

### (v) Acknowledgements

We are very grateful for the feedback we received from our stakeholders, which has informed our review of the standards.

						•
Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential
				proficiency	DD: None	RD: None

We would like to thank the following people for their involvement as members of the PLG:

Paul Acres	Lay member of Council		
Mary Clarke-Glass	Lay member of Council		
Sheila Drayton	Lay member of Council		
Mary Embleton	Professional Officer,		
	Society and College of		
	Radiographers		
	(on behalf of the		
	Federation of Allied		
	Health Professions)		
Michael English	Chair, Lambeth Patient		
	Public Involvement Forum		
Sally Gosling	Head of Quality and		
	standards, Chartered		
	Society of Physiotherapists		
	(On behalf of the		
	Federation of Allied		
	Health Professions)		
Daisy Haggerty	Registrant member of		
	Council		
Jacqueline Pearce	Registrant member of		
	Council		
Pamela Sabine	Registrant member of Council		
Gordon Sutehall	President, Institute of		
	Biomedical Scientists		
	(on behalf of the		
	Federation for Healthcare		
	Science)		
Annie Turner	Registrant member of		
	Council		
Diane Waller	Registrant member of		
	Council		

However, we would like to emphasise that this document remains the property of the Health Professions Council; any queries about its content should be directed to us. Any mistakes in this document remain our responsibility and are not the fault of this group.

# (vi) Your responses

We would welcome your responses to this consultation in whatever format is convenient for you. However, you might wish to address the questions below:

						5
Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential
				proficiency	DD: None	RD: None

- 1. Do you think the introduction clearly explains the role and purpose of the standards?
- 2. Do you agree with the changes we have made to the existing standards?
- 3. Do you think any additional standards are necessary?
- 4. Do you think any standards are redundant?
- 5. Do you think there are any standards which might be reworded?
- 6. Following discussion about the use of terminology in the standards (please see page x), we decided to replace the phrase 'patients, clients and users' with 'service users'. We would welcome your comments and suggestions on this change.

Any further comments on the content of the standards would be very welcome.

This consultation will put the Council's proposed standards before a wide range of stakeholders, including professional bodies, employers, higher education institutions and others with an interest in our work. We would like to invite any individual or organisation with an interest in these issues to respond to this consultation. The consultation will run until .... and further copies of the documents will be available on our website to download.

If you would like to respond to this consultation, please send your response to:

Standards of proficiency consultation Policy and Standards department Health Professions Council Park House 184 Kennington Park Road London SE11 4BU

E-mail: consultation@hpc-uk.org

Phone: 020 7840 9760

Website: www.hpc-uk.org/aboutus/consultations

If you would prefer your response not to be made public, please indicate this when you respond. We will publish on our website a summary of the responses we receive, and the decisions we have taken as a result.

We look forward to receiving your comments

Yours sincerely

Mary Clarke-Glass Chair of Standards of Proficiency PLG

						O
Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential
				proficiency	DD: None	RD: None

## (vii) The structure of this document

The main part of this document has been divided into fourteen sections.

**Section one** is a new introduction to the standards. The introduction is the same for all 12 professions' standards.

**Sections two to fourteen** are the new standards. We have kept the format of the new standards the same as the existing standards.

**Section two** details the new generic standards. **Sections three to fourteen** detail each individual profession's standards. The generic standards are repeated so that you can see how they relate to the profession-specific standards.

In a small number of places where we think this might be helpful, we have included an explanation of the reasons behind the proposed change or addition to the standards. This is shown in the boxes.

You can access copies of the existing standards by visiting our website: <a href="http://www.hpc-uk.org/aboutregistration/standards/standardsofproficiency/">http://www.hpc-uk.org/aboutregistration/standards/standardsofproficiency/</a>

Once the new standards are published, we will also publish on our website a document which clearly shows how the standards have changed.

# Key:

*In this document:* 

The generic standards are shown in black type

The profession-specific standards are shown in *blue italicised type* 

Deleted words or standards are shown in black or *blue italicised type* struckthrough

New standards or additional wording is shown in **bold type** (for the generic

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

#### **Section one: introduction**

#### Introduction

This document sets out the **standards of proficiency**. These are the standards we have produced for the safe and effective practice of the professions we regulate. They are the minimum standards we consider necessary to protect members of the public.

You must meet these standards when you first become registered. After that, every time you renew your registration you will be asked to sign a declaration that you continue to meet the standards of proficiency that apply to your scope of practice.

We also expect you to keep to our **standards of conduct, performance and ethics** which are published in a separate document.

The standards of proficiency in this document include both generic elements, which apply to all our registrants, and profession-specific elements which are relevant to registrants belonging to one of the professions we currently regulate. The generic standards are written in black, and the profession-specific standards are written in blue italics to help you distinguish between them.

The generic standards explain the key obligations that we expect of you. Occasionally, we have pointed out specific elements of those key obligations. We have not attempted to create exhaustive lists of all the areas that each generic standard covers; we have simply highlighted specific elements where we consider this to be helpful.

As a student, you may only have practised under supervision and not independently. Nonetheless, you must be confident that you will be able to meet these standards when you begin to practise autonomously.

#### A note about our expectations of you

The standards of proficiency play a central role in how you can gain admission to, and remain on, the Register and thereby gain the right to the protected title(s) of your profession.

It is important that you read and understand this document. If your practice is called into question we will consider these standards (and our **standards of conduct, performance and ethics**) in deciding what action, if any, we need to take.

The standards set out in this document complement information and guidance issued by other organisations, such as your professional body or your employer.

						0
Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

### Your scope of practice

Your scope of practice is the area or areas of your profession in which you have the knowledge, skills and experience to practise lawfully, safely and effectively, in a way that meets our standards and does not pose any danger to the public or to yourself.

We recognise that a registrant's scope of practice will change over time and that the practice of experienced registrants often becomes more focused and specialised than that of newly registered colleagues. This might be because of specialisation in a certain clinical area or with a particular client group, or a movement into roles in management, education or research.

Your particular scope of practice may mean that you are unable to continue to demonstrate that you meet all of the standards that apply for the whole of your profession. As long as you make sure that you are practising safely and effectively within your given scope of practice and do not practise in the areas where you are not proficient to do so, this will not be a problem. If you want to move outside of your scope of practice you should be certain that you are capable of working lawfully, safely and effectively. This means that you need to exercise personal judgement by undertaking any necessary training and experience.

### Meeting the standards

It is important that our registrants meet our standards and are able to practise lawfully, safely and effectively. However, we don't dictate how you should meet our standards. There is normally more than one way in which each standard can be met and the way in which you meet our standards might change over time because of improvements in technology or changes in your practice. As an autonomous professional you need to make informed, reasoned decisions about your practice to ensure that you meet the standards that apply to you. This includes seeking advice and support from education providers, employers, colleagues and others to ensure that the wellbeing of patients, clients and users is safeguarded at all times.

In particular, we recognise the valuable role played by professional bodies in representing and promoting the interests of their members. This often includes guidance and advice about best practice which can help you meet the standards laid out in this document.

## These standards may change in the future

We have produced this new version of our standards after speaking to our stakeholders about how the standards were working and how relevant they were to registrants' practice.

We will continue to listen to our stakeholders and will keep our standards under continual review. So we may make further changes in the future to take into account changes in practice.

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential
				proficiency	DD: None	RD: None

We will always publicise any changes to the standards that we make by, for instance, publishing notices on our website and informing professional bodies.

						10
Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of	Final DD: None	Confidential BD: None

#### **Section two: Generic standards**

These are the generic standards which are the same for all 12 professions.

#### **Expectations of a health professional**

## 1a: Professional autonomy and accountability

## Registrants must:

- 1a.1 be able to practise within the legal and ethical boundaries of their profession
  - understand the need to act in the best interests of service users at all times
  - understand what is required of them by the Health Professions Council
  - understand the need to respect, and so far as possible uphold, the rights, dignity, **values** and autonomy of every <del>patient, client and user service user</del> including their role in the diagnostic and therapeutic process and **in maintaining health**
  - be aware of current UK legislation applicable to the work of their profession  $% \left( 1\right) =\left( 1\right) \left( 1\right) \left$

In the existing generic standards we used the term 'patients, clients and users'. When we put together the standards we recognised that professionals may use different terms to refer to those who use their services. This might be because of the nature of their profession or their particular area of practice.

During our review we discussed whether the use of the term was sufficiently clear and whether it was an appropriate term for all the professions we regulate. We also discussed changes in the use of terminology in particular professions and noted some inconsistencies in our use of terminology in the existing standards.

In our standards for continuing professional development we use the term 'service user' to describe anyone who is affected by the work of a registrant. If a registrant was working in education their service users may be their students or colleagues. Similarly, the service users of a registrant in clinical practice may be their clients, patients or customers.

We have decided to use 'service user' because we feel that it is a more inclusive term which is applicable to all the professions we regulate and the variety of ways in which registrants practice.

- 1a.2 be able to practise in a non-discriminatory **and non-oppressive** manner
- 1a.3 be able to maintain confidentiality and obtain informed consent
- 1a.3 understand the importance of and be able to maintain confidentiality

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

#### 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

- be able to assess a situation, determine the nature and severity of the problem and call upon the required knowledge and experience to deal with the problem
- be able to initiate resolution of problems and be able to exercise personal initiative
- know the limits of their practice and when to seek advice or refer to another professional
- recognise that they are personally responsible for and must be able to justify their decisions
- 1a.7 recognise the need for effective self-management of workload **and resources** and be able to practise accordingly

#### 1a.8 understand the need for career-long self-directed learning

- 1a.8 understand the obligation to maintain fitness to practise
  - understand the need to practise safely and effectively within their scope of practice
  - understand the importance of maintaining health and care for themselves their own health
  - understand both the need to keep skills and knowledge up to date and the importance of career-long learning

When we say that someone is fit to practise we mean that they have the necessary skills, knowledge, character and health in order to practise safely and effectively.

We have added to this standard (formally 1a.7 in the previous standards) to include the important concept of a professional staying within their evolving scope of practice. We have incorporated standard 1a.8 in the previous standards so that we acknowledge the role of career-long learning in maintaining fitness to practise.

#### 1b: Professional relationships

Registrants must:

- 1b.1 know the professional and personal scope of their practice and be able to make referrals
- 1b.1 be able to work, where appropriate, in partnership with other professionals, support staff, patients, clients and users service users and their relatives and carers
  - understand the need to build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential BD: None

- understand the need to engage <del>patients</del>, <del>clients</del>, <del>users</del> service users and carers in planning and evaluating diagnostics, treatments and interventions to meet their needs and goals
- be able to make appropriate referrals
- 1b.2 be able to contribute effectively to work undertaken as part of a multidisciplinary team
- 1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users patients, clients, users, their relatives and carers
  - be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
  - understand how communication skills affect the assessment of <del>patients</del>, <del>clients and users, service users</del> and how the means of communication should be modified to address and take account of factors such as age, physical and learning disability
  - be able to select, move between and use appropriate forms of verbal and non-verbal communication with patients, clients, users service users and others
  - be aware of the characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status
  - understand the need to provide <del>patients, clients and users</del> service users (or people acting on their behalf) with the information necessary to enable them to make informed decisions
  - understand the need to use an appropriate interpreter to assist <del>patients</del> **service users** whose first language is not English, wherever possible
  - recognise that relationships with patients, clients and users service users should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility
- 1b.2 be able to contribute effectively to work undertaken as part of a multidisciplinary team
- 1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users patients, clients, users, their relatives and carers
  - be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
  - understand how communication skills affect the assessment of <del>patients</del>, <del>clients and users, service users</del> and how the means of communication should be modified to address and take account of factors such as age, physical and learning disability
  - be able to select, move between and use appropriate forms of verbal and non-verbal communication with patients, clients, users service users and others
  - be aware of the characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- understand the need to provide patients, clients and users service users (or people acting on their behalf) with the information necessary to enable them to make informed decisions
- understand the need to use an appropriate interpreter to assist patients whose first language is not English, wherever possible
- recognise that relationships with patients, clients and users service users should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility
- 2a.2 be able to **select and** use appropriate assessment techniques
  - be able to undertake and record a thorough, sensitive and detailed assessment, using appropriate techniques and equipment
- 2a.3 be able to undertake or arrange elinical 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

# Registrants must:

- 2b.1 be able to use research, reasoning and problem solving skills to determine appropriate actions (and, in the case of clinical scientists, conduct fundamental research)
  - recognise the value of research to the systematic evaluation of practice
  - be able to <del>conduct</del> **engage in** evidence-based practice, evaluate practice systematically, and participate in audit procedures
  - be aware of methods commonly used in health and social care research a range of research methodologies
  - be able to demonstrate a logical and systematic approach to problem solving
  - be able to evaluate research and other evidence to inform their own practice
- 2b.2 be able to draw on appropriate knowledge and skills in order to make professional judgements
  - be able to change their practice as needed to take account of new developments
  - be able to demonstrate a level of skill in the use of information technology appropriate to their profession practice
- 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 elient groups distinguished by, for example, physical, psychological, environmental, cultural or socio-economic factors
- 2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential
				proficiency	DD: None	RD: None

- understand the need to maintain the safety of both <del>patients, clients and users</del> **service users** and those involved in their care
- 2b.5 be able to maintain records appropriately
- be able to keep accurate, legible records and recognise the need to handle these records and all other <del>clinical</del> information in accordance with applicable legislation, protocols and guidelines
- understand the need to use only accepted terminology (which includes abbreviations) in making <del>clinical</del> records

Throughout our review of the standards we have tried to ensure that the generic standards are as inclusive as possible of variations in the use of terminology in each of the professions we regulate.

In this standard we recognised that the word 'clinical' may not be applicable to every profession or registrant. The amended standard is inclusive of a range of different types of records which registrants may produce and keep in the course of their practice.

# 2c: Critical evaluation of the impact of, or response to, the registrant's actions

# Registrants must:

- 2c.1 be able to monitor and review the ongoing effectiveness of planned activity and modify it accordingly
- be able to gather information, including qualitative and quantitative data that helps to evaluate the responses of <del>patients clients and users</del> **service users** to their care
- be able to evaluate management intervention plans against treatment milestones using recognised health outcome measures and revise the plans as necessary in conjunction with the patient, client or user service user
- recognise the need to monitor and evaluate the quality of practice and the value of contributing to the generation of data for quality assurance and improvement programmes
- be able to make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately
- understand that outcomes may not always conform to expectations but may still meet the needs of patients, clients or users
- 2c.2 be able to audit, reflect on and review practice
- understand the principles of quality control and quality assurance
- be aware of the role of audit and review in quality management, including quality control, quality assurance and the use of appropriate outcome measures
- be able to maintain an effective audit trail and work towards continual improvement
- participate in quality assurance programmes, where appropriate

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- understand the value of reflection on clinical practice and the need to record the outcome of such reflection
- recognise the value of case conferences and other methods of review

### Knowledge, understanding and skills

3a:

Registrants must:

- 3a.1 know and understand the key concepts of the biological, physical, social, psychological and clinical sciences bodies of knowledge which are relevant to their profession-specific practice
  - understand the structure and function of the human body, relevant to their practice, together with a knowledge of health, disease, disorder and dysfunction
  - be aware of the principles and applications of scientific enquiry, including the evaluation of treatment efficacy and the research process
  - recognise the role of other professions in health and social care
  - understand the theoretical basis of, and the variety of approaches to, assessment and intervention

We decided to amend this generic standard so that it was more inclusive of the knowledge base of each of the different professions we regulate. The profession-specific standards then provide more detail relevant to the individual profession.

- 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
  - 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 <del>clinical</del>-practice, which minimise risks to <del>patients, clients and users</del> **service users**, those treating them, and others, including the use of hazard control and particularly infection control

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

#### **Section three: Arts therapists**

# **Expectations of a health professional**

## 1a: Professional autonomy and accountability

- 1a.1 be able to practise within the legal and ethical boundaries of their profession
  - understand the need to act in the best interests of service users at all times
  - understand what is required of them by the Health Professions Council
  - understand the need to respect, and so far as possible uphold, the rights, dignity, **values** and autonomy of every <del>patient, client and user service user</del> including their role in the diagnostic and therapeutic process and **in maintaining health**
  - be aware of current UK legislation applicable to the work of their profession
  - understand the role of the art, music or drama therapist in different settings
- 1a.2 be able to practise in a non-discriminatory **and non-oppressive** manner
- 1a.3 be able to maintain confidentiality and obtain informed consent
- 1a.3 understand the importance of and be able to maintain confidentiality
  - be aware that the concepts of confidentiality and informed consent extend to illustrative records such as video and audio recordings, paintings, digital images and other art work
- 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
  - be able to assess a situation, determine the nature and severity of the problem and call upon the required knowledge and experience to deal with the problem
  - be able to initiate resolution of problems and be able to exercise personal initiative
  - know the limits of their practice and when to seek advice or refer to another professional
  - recognise that they are personally responsible for and must be able to justify their decisions
- 1a.7 recognise the need for effective self-management of workload **and resources** and be able to practise accordingly
  - understand the value of therapy in developing insight and self-awareness through their own personal experience

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential BD: None

- 1a.8 understand the need for career-long self-directed learning
- 1a.8 understand the obligation to maintain fitness to practise
  - understand the need to practise safely and effectively within their scope of practice
  - understand the importance of maintaining health and care for themselves their own health
  - understand both the need to keep skills and knowledge up to date and the importance of career-long learning
  - recognise that the obligation to maintain fitness for practice includes engagement in their own arts-based process

## 1b: Professional relationships

- 1b.1 know the professional and personal scope of their practice and be able to make referrals
- 1b.1 be able to work, where appropriate, in partnership with other professionals, support staff, patients, clients and users service users and their relatives and carers
  - understand the need to build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team
  - understand the need to engage <del>patients, clients, users</del> **service users** and carers in planning and evaluating diagnostics, treatments and interventions to meet their needs and goals
  - be able to make appropriate referrals
  - recognise the role of arts therapists and the contribution they can make to health and social care
- 1b.2 be able to contribute effectively to work undertaken as part of a multidisciplinary team
- 1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users patients, clients, users, their relatives and carers
  - be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
  - understand how communication skills affect the assessment of <del>patients,</del> <del>clients and users,</del> **service users** and how the means of communication should be modified to address and take account of factors such as age, physical and learning disability
  - be able to select, move between and use appropriate forms of verbal and non-verbal communication with patients, clients, users service users and others

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential
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- be aware of the characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status
- understand the need to provide <del>patients, clients and users</del> service users (or people acting on their behalf) with the information necessary to enable them to make informed decisions
- understand the need to use an appropriate interpreter to assist <del>patients</del> **service users** whose first language is not English, wherever possible
- recognise that relationships with patients, clients and users service users should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility
- be able to explain the nature, purpose and techniques of therapy to elients service users and carers
- understand the need to establish and sustain a therapeutic relationship within a creative and containing environment
- 1b.4 understand the need for effective communication throughout the care of the patient, client or user-service user
  - recognise the need to use interpersonal skills to encourage the active participation of patients, clients and users service users

# The skills required for the application of practice

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

- 2a.1 be able to gather appropriate information
  - understand the need to take account of psychological, social, cultural, economic and other factors when collecting case histories and other appropriate information
- 2a.2 be able to **select and** use appropriate assessment techniques
  - be able to undertake and record a thorough, sensitive and detailed assessment, using appropriate techniques and equipment
- 2a.3 be able to undertake or arrange elinical investigations as appropriate
  - be able to observe and record <del>clients'</del> **service users'** responses and assess the implication for diagnosis and intervention
  - be able to undertake or arrange investigations, for example setting up an assessment period in order to ascertain the appropriateness of an intervention
- 2a.4 be able to analyse and **critically** evaluate the information collected

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

# 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 (and, in the case of clinical scientists, conduct fundamental research)
  - recognise the value of research to the systematic evaluation of practice
  - be able to <del>conduct</del> **engage in** evidence-based practice, evaluate practice systematically, and participate in audit procedures
  - be aware of methods commonly used in health and social care research a range of research methodologies
  - be able to demonstrate a logical and systematic approach to problem solving
  - be able to evaluate research and other evidence to inform their own practice
- 2b.2 be able to draw on appropriate knowledge and skills in order to make professional judgements
  - be able to change their practice as needed to take account of new developments
  - be able to demonstrate a level of skill in the use of information technology appropriate to their profession practice
- 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 elient groups distinguished by, for example, physical, psychological, environmental, cultural or socio-economic factors
- 2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully
  - understand the need to maintain the safety of both <del>patients, clients and users</del> **service users** and those involved in their care
  - be able to work with <del>clients</del> -service users both to define a clear end for the therapy, and to evaluate the therapy's strengths, benefits and limitations Art therapist only
  - be able to use a range of art and art-making **materials and** techniques competently and be able to help a <del>client</del> **service user** to work with these Dramatherapist only
  - be able to use a range of dramatic concepts, techniques and procedures (including games, activities, styles and structures) competently Music therapist only
  - be able to use a range of music and music-making techniques competently and be able to help a client service user to work with these
  - 2b.5 be able to maintain records appropriately

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential
				proficiency	DD: None	RD: None

- be able to keep accurate, legible records and recognise the need to handle these records and all other <del>elinical</del> information in accordance with applicable legislation, protocols and guidelines
- understand the need to use only accepted terminology (which includes abbreviations) in making <del>clinical</del> records

## 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
- be able to gather information, including qualitative and quantitative data, that helps to evaluate the responses of <del>patients clients and users</del> service users to their care
- be able to evaluate management intervention plans against treatment milestones using recognised health outcome measures and revise the plans as necessary in conjunction with the patient, client or user service user
- recognise the need to monitor and evaluate the quality of practice and the value of contributing to the generation of data for quality assurance and improvement programmes
- be able to make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately
- understand that outcomes may not always conform to expectations but may still meet the needs of patients, clients or users

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- 2c.2 be able to audit, reflect on and review practice
- understand the principles of quality control and quality assurance
- be aware of the role of audit and review in quality management, including quality control, quality assurance and the use of appropriate outcome measures
- be able to maintain an effective audit trail and work towards continual improvement
- participate in quality assurance programmes, where appropriate
- understand the value of reflection on clinical practice and the need to record the outcome of such reflection
- recognise the value of case conferences and other methods of review
- recognise the role and value of clinical supervision in an arts therapy context

When we refer to 'supervision', we normally mean the process of an accountable, autonomous practitioner overseeing the work of someone who is normally either an assistant practitioner, a student, or a health professional who is learning new skills.

However, within arts therapy, the term 'supervision' is used in a different context, to mean a process where the arts therapy process and the relationship with the client is supervised by another practitioner. Within arts therapy, the term 'supervision' does not infer that the person being supervised is not autonomous, or that they are learning, but is instead viewed by the professional bodies as a regular part of art therapists' practice.

We have added a profession-specific standard here to reflect the role and value of clinical supervision in arts therapy. This is one way in which arts therapy professionals reflect on and review their practice in partnership with their colleagues.

## Knowledge, understanding and skills

3a:

- 3a.1 know and understand the key concepts of the biological, physical, social, psychological and clinical sciences bodies of knowledge which are relevant to their profession-specific practice
  - understand the structure and function of the human body, relevant to their practice, together with  $\frac{1}{2}$  knowledge of health, disease, disorder and dysfunction
  - be aware of the principles and applications of scientific enquiry, including the evaluation of treatment efficacy and the research process
  - recognise the role of other professions in health and social care

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential
		1	1	proficiency	DD: None	RD: None

- understand the theoretical basis of, and the variety of approaches to, assessment and intervention
- understand the psychological and cultural background to health, and be aware of influences on the <del>client therapist</del> service user-therapist relationship
- understand core processes in therapeutic practice, such as the therapeutic frame, transference and counter-transference and concepts from other therapeutic models, and be able to engage these to achieve productive therapeutic outcomes
- understand the therapeutic relationship, including its limitations
- be able to employ a coherent approach to the therapeutic process
- understand how uses of the arts in arts therapy differs from uses of the arts for other purposes
- know theories of group work and the management of group process
- know theories relevant to work with an individual
- know about normal human development; normal and abnormal psychology; normal and abnormal human communication and language development; mental illness, psychiatric assessment and treatment; congenital and acquired disability; disorders of social functioning; the principal psychotherapeutic interventions and their theoretical bases; the nature and application of other major interventions
- recognise methods of distinguishing between human health and sickness, including diagnosis, symptoms and treatment, particularly of mental health disorders and learning disabilities and be able to critique these systems of knowledge from different socio-cultural perspectives

  Art therapist only
- understand that while art therapy has a number of frames of reference, they must adopt a coherent approach to their therapy, including the relationship between theory and practice and the relevant aspects of connected disciplines including visual arts, aesthetics, anthropology, psychology, psychiatry, sociology, psychotherapy and medicine

#### Dramatherapist only

- understand core processes and forms of creativity, movement, play and dramatic representation pertinent to practice with a range of client service user groups
- understand both the symbolic value and intent inherent in drama as an art form, and with more explicit forms of enactment and re-enactment of imagined or lived experience
- know a range of theatrical representation techniques and be able to engage clients in a variety of performance-derived roles
- recognise that dramatherapy is a unique form of psychotherapy in which creativity, play, movement, voice, storytelling, dramatisation and the performance arts have a central position within the therapeutic relationship
- recognise that different approaches to the discipline have developed from different histories in Eastern and Western Europe and the Americas
- recognise that the discipline has deep foundations within the many cultural traditions that use ritual, play, drama and performance for the enhancement of health
- know the key principles of influential theatre practitioners and their relevance to the therapeutic setting

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

#### Music therapist only

- be able to improvise music in a variety of styles and idioms
- be able to use musical improvisation to interact and communicate with the patient/client service user
- know a broad range of musical styles and be aware of their cultural contexts
- be able to play at least one musical instrument to a high level
- 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
  - 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 elinical-practice, which minimise risks to patients, clients and users service users, those treating them, and others, including the use of hazard control and particularly infection control

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

#### **Section four: Biomedical scientists**

# Expectations of a health professional

## 1a: Professional autonomy and accountability

- 1a.1 be able to practise within the legal and ethical boundaries of their profession
  - understand the need to act in the best interests of service users at all times
  - understand what is required of them by the Health Professions Council
  - understand the need to respect, and so far as possible uphold, the rights, dignity, **values** and autonomy of every <del>patient, client and user service user</del> including their role in the diagnostic and therapeutic process and **in maintaining health**
  - be aware of current UK legislation applicable to the work of their profession
  - be aware of the British, European and International Standards that govern and affect pathology laboratory practice
- 1a.2 be able to practise in a non-discriminatory **and non-oppressive** manner
- 1a.3 be able to maintain confidentiality and obtain informed consent
- 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
  - be able to assess a situation, determine the nature and severity of the problem and call upon the required knowledge and experience to deal with the problem
  - be able to initiate resolution of problems and be able to exercise personal initiative
  - know the limits of their practice and when to seek advice or refer to another professional
  - recognise that they are personally responsible for and must be able to justify their decisions
- 1a.7 recognise the need for effective self-management of workload **and resources** and be able to practise accordingly
- 1a.8 understand the need for career long self-directed learning

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- 1a.8 understand the obligation to maintain fitness to practise
  - understand the need to practise safely and effectively within their scope of practice
  - understand the importance of maintaining health and care for themselves their own health
  - understand both the need to keep skills and knowledge up to date and the importance of career-long learning
- 1a.8 understand the need for career-long self-directed learning

# 1b: Professional relationships

- 1b.1 know the professional and personal scope of their practice and be able to make referrals
- 1b.1 be able to work, where appropriate, in partnership with other professionals, support staff, patients, clients and users service users, and their relatives and carers
  - understand the need to build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team
  - understand the need to engage <del>patients, clients, users</del> service users and carers in planning and evaluating diagnostics, treatments and interventions to meet their needs and goals
  - be able to make appropriate referrals
  - understand the team and discipline approach to the provision of pathology services
  - be aware of the general working of a hospital
- 1b.2 be able to contribute effectively to work undertaken as part of a multidisciplinary team
- 1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, patients, clients, users service users, their relatives and carers
  - be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
  - understand how communication skills affect the assessment of <del>patients</del>, <del>clients and users service users</del>, and how the means of communication should be modified to address and take account of factors such as age, physical and learning disability
  - be able to select, move between and use appropriate forms of verbal and non-verbal communication with patients, clients, users service users and others
  - be aware of the characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- understand the need to provide patients, clients and users service users (or people acting on their behalf) with the information necessary to enable them to make informed decisions
- understand the need to use an appropriate interpreter to assist <del>patients</del> **service users** whose first language is not English, wherever possible
- recognise that relationships with <del>patients, clients and users</del> service users should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility
- be able to inform colleagues and relevant members of the clinical team of outcomes of biomedical procedures to unambiguous standards
- 1b.4 understand the need for effective communication throughout the care of the patient, client or user service users
  - recognise the need to use interpersonal skills to encourage the active participation of patients, clients and users service users

# The skills required for the application of practice

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

- 2a.1 be able to gather appropriate information
  - be able to select suitable specimens and procedures relevant to patients' service users clinical needs, including collection and preparation of specimens as and when appropriate
- 2a.2 be able to **select and** use appropriate assessment techniques
  - be able to undertake and record a thorough, sensitive and detailed assessment, using appropriate techniques and equipment
  - be able to demonstrate practical skills in the essentials of measurement, data generation, and analysis
  - be aware of the need to assess and evaluate new diagnostics prior to routine use
- 2a.3 be able to undertake or arrange elinical investigations as appropriate
- 2a.4 be able to analyse and **critically** evaluate the information collected
  - be able to investigate and monitor disease processes and normal states
  - be able to use tables and graphs in order to analyse experimental data
  - be able to use standard operating procedures for analyses including point of care in vitro diagnostic devices
  - be able to use statistical packages and present data as graphs and tables

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

# 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 (and, in the case of clinical scientists, conduct fundamental research)
  - recognise the value of research to the systematic evaluation of practice
  - be able to conduct engage in evidence-based practice, evaluate practice systematically, and participate in audit procedures
  - be aware of methods commonly used in health and social care research a range of research methodologies
  - be able to demonstrate a logical and systematic approach to problem solving
  - be able to evaluate research and other evidence to inform their own practice
  - be able to design experiments, report, interpret and present data using scientific convention, including application of SI units and other units used in biomedical practice
- 2b.2 be able to draw on appropriate knowledge and skills in order to make professional judgements
  - be able to change their practice as needed to take account of new developments
  - be able to demonstrate a level of skill in the use of information technology appropriate to their profession practice
- 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 elient groups distinguished by, for example, physical, psychological, environmental, cultural or socio-economic factors
  - be able to identify the cause of procedural anomalies and implement remedies
- 2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully
  - understand the need to maintain the safety of both <del>patients, clients and users</del> **service users**, and those involved in their care
  - ensure patients, clients and users service users are positioned (and if necessary immobilised) for safe and effective interventions
  - be able to perform and supervise scientific and technical procedures to reproducible standards
  - be able to operate and utilise specialist equipment according to discipline
  - be able to validate scientific and technical data and observations according to pre-determined quality standards
  - be able to demonstrate proficiency in liquid handling methodologies, including preparation of standard solutions and buffers
  - be able to demonstrate practical skills in instrumentation and techniques in: microscopy; spectroscopy; centrifugation; electrophoresis; chromatography;

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

electroanalytical techniques; automated analysis; immunological techniques; enzyme assays and molecular biology techniques; sterilisation techniques and microbial culture; identification and quantitation of microorganisms; microtomy

- be able to demonstrate practical skills in the processing and analysis of specimens including specimen identification, the effect of storage on specimens and the safe retrieval of specimens
- be able to demonstrate practical skills in the investigation of disease processes
- be able to work in conformance with standard operating procedures and conditions
- be able to work with accuracy and precision
- be able to prepare reagents accurately and consistently
- be able to perform calibration and quality control checks
- be able to check that equipment is functioning within its specifications and to respond appropriately to abnormalities
- understand the implications of non-analytical errors
- be aware of near-patient testing and non-invasive techniques

## 2b.5 be able to maintain records appropriately

- be able to keep accurate, legible records and recognise the need to handle these records and all other <del>elinical</del> information in accordance with applicable legislation, protocols and guidelines
- understand the need to use only accepted terminology (which includes abbreviations) in making <del>clinical</del> records
- recognise the risks and possible serious consequences of errors in both requests for, and results of, laboratory investigations
- recognise the value of test results for clinical audit and as a reference source
- be able to use systems for the accurate and correct identification of patients service users and laboratory specimens
- understand the need to adhere to protocols of specimen identification, including bar coding and electronic tag systems
- be able to use computer systems for test requesting and reporting
- understand the importance of backup storage of electronic data

### 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
  - be able to gather information, including qualitative and quantitative data, that helps to evaluate the responses of <del>patients, clients and users</del> service users to their care
  - be able to evaluate management intervention plans against treatment milestones using recognised health outcome measures and revise the plans as necessary in conjunction with the patient, client or user service user

	Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
ſ	2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential
۱					proficiency	DD: None	RD: None

- recognise the need to monitor and evaluate the quality of practice and the value of contributing to the generation of data for quality assurance and improvement programmes
- be able to make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately
- understand that outcomes may not always conform to expectations but may still meet the needs of patients, clients or users
- be able to select and apply quality and process control measures that have a statistical or measurable output
- be able to identify and respond appropriately to abnormal outcomes from quality indicators
- 2c.2 be able to audit, reflect on and review practice
  - understand the principles of quality control and quality assurance
  - be aware of the role of audit and review in quality management, including quality control, quality assurance and the use of appropriate outcome measures
  - be able to maintain an effective audit trail and work towards continual improvement
  - participate in quality assurance programmes, where appropriate
  - understand the value of reflection on clinical practice and the need to record the outcome of such reflection
  - recognise the value of case conferences and other methods of review

## Knowledge, understanding and skills

3a:

- 3a.1 know and understand the key concepts of the biological, physical, social, psychological and clinical sciences bodies of knowledge which are relevant to their profession-specific practice
  - understand the structure and function of the human body, relevant to their practice, together with  $\frac{1}{2}$  knowledge of health, disease, disorder and dysfunction
  - be aware of the principles and applications of scientific enquiry, including the evaluation of treatment efficacy and the research process
  - recognise the role of other professions in health and social care
  - understand the theoretical basis of, and the variety of approaches to, assessment and intervention
  - know the structure, function and metabolism of molecules of biological importance
  - understand the structure, function and control of normal and altered genetic material and associated investigative techniques
  - understand the immune response in health and disease
  - understand the basic structure, classification, biochemistry and control of pathogenic agents
  - know the role of the laboratory in the diagnosis and monitoring of specific disease conditions

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- -understand the role of cellular pathology in the diagnosis and treatment of disease
- understand the role of the following in the diagnosis and treatment of disease: cellular pathology; clinical biochemistry; clinical haematology; clinical immunology; medical microbiology
- be able to evaluate analyses using qualitative and quantitative methods to aid the diagnosis, screening and monitoring of health and disorders
- understand the investigation of different elements that constitute blood in normal and diseased states including the identification of blood group antigens and antibodies
- understand the techniques and associated instrumentation used in the practice of biomedical science
- -understand the role of clinical biochemistry and medical microbiology in the diagnosis and treatment of disease

We have incorporated two of the existing standards into a new standard which clarifies the scientific knowledge base necessary to practise as a biomedical scientist.

- 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
  - 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 <del>clinical</del> practice, which minimise risks to <del>patients, clients and users, service users</del> 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 dealing with waste and spillages correctly
  - know the use and application of engineering controls e.g. 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

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

### **Section five: Chiropodists and Podiatrists**

## **Expectations of a health professional**

### 1a: Professional autonomy and accountability

- 1a.1 be able to practise within the legal and ethical boundaries of their profession
  - understand the need to act in the best interests of service users at all times
  - understand what is required of them by the Health Professions Council
  - understand the need to respect, and so far as possible uphold, the rights, dignity, **values** and autonomy of every <del>patient, client and user service users</del> including their role in the diagnostic and therapeutic process and **in maintaining health**
  - be aware of current UK legislation applicable to the work of their profession
- 1a.2 be able to practise in a non-discriminatory **and non-oppressive** manner
- 1a.3 be able to maintain confidentiality and obtain informed consent
- 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
  - be able to assess a situation, determine the nature and severity of the problem and call upon the required knowledge and experience to deal with the problem
  - be able to initiate resolution of problems and be able to exercise personal initiative
  - know the limits of their practice and when to seek advice or refer to another professional
  - recognise that they are personally responsible for and must be able to justify their decisions
- 1a.7 recognise the need for effective self-management of workload **and resources** and be able to practise accordingly
- 1a.8 understand the need for career-long self-directed learning
- 1a.8 understand the obligation to maintain fitness to practise
  - understand the need to practise safely and effectively within their scope of practice

I	Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
Ī	2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- understand the importance of maintaining health and care for themselves their own health
- understand both the need to keep skills and knowledge up to date and the importance of career-long learning

## 1b: Professional relationships

- 1b.1 know the professional and personal scope of their practice and be able to make referrals
- 1b.1 be able to work, where appropriate, in partnership with other professionals, support staff, patients, clients and users service users, and their relatives and carers
  - understand the need to build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team
  - understand the need to engage <del>patients, clients, users</del> **service users** and carers in planning and evaluating diagnostics, treatments and interventions to meet their needs and goals
  - be able to make appropriate referrals
- 1b.2 be able to contribute effectively to work undertaken as part of a multidisciplinary team
- 1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, patients, clients, users service users, their relatives and carers
  - be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
  - understand how communication skills affect the assessment of patients, elients and users service users, and how the means of communication should be modified to address and take account of factors such as age, physical and learning disability
  - be able to select, move between and use appropriate forms of verbal and non-verbal communication with patients, clients, users service users and others
  - be aware of the characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status
  - understand the need to provide <del>patients</del>, <del>clients and users</del> service users (or people acting on their behalf) with the information necessary to enable them to make informed decisions
  - understand the need to use an appropriate interpreter to assist <del>patients</del> **service users** whose first language is not English, wherever
  - recognise that relationships with patients, clients and users service users should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- 1b.4 understand the need for effective communication throughout the care of the patient, client or user
  - recognise the need to use interpersonal skills to encourage the active participation of patients, clients and users—service users
  - understand the need to empower patients service users to manage their foot health and related issues and recognise the need to provide advice to the patient on self-treatment where appropriate

## The skills required for the application of practice

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

Registrant chiropodists and podiatrists must:

- 2a.1 be able to gather appropriate information
- 2a.2 be able to **select and** use appropriate assessment techniques
   be able to undertake and record a thorough, sensitive and detailed assessment, using appropriate techniques and equipment
- 2a.3 be able to undertake or arrange elinical investigations as appropriate

   be able to conduct neurological, vascular, biomechanical, dermatological
  and podiatric assessments in the context of chiropody and podiatry
- 2a.4 be able to analyse and **critically** evaluate the information collected be able to interpret physiological, medical and biomechanical data in the context of chiropody and podiatry

# 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 (and, in the case of clinical scientists, conduct fundamental research)
  - recognise the value of research to the systematic evaluation of practice
  - be able to <del>conduct</del> **engage in** evidence-based practice, evaluate practice systematically, and participate in audit procedures
  - be aware of methods commonly used in health and social care research a range of research methodologies
  - be able to demonstrate a logical and systematic approach to problem solving
  - be able to evaluate research and other evidence to inform their own practice
- 2b.2 be able to draw on appropriate knowledge and skills in order to make professional judgements
  - be able to change their practice as needed to take account of new developments

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- be able to demonstrate a level of skill in the use of information technology appropriate to their profession practice
- know and be able to interpret the signs and symptoms of systemic disorders as they manifest in the lower limb and foot with particular reference to:
- · diabetes mellitus
- · rheumatoid arthritis and other arthropathies
- · cardiovascular disorders
- · dermatological disorders
- · infections
- · neurological disorders
- · renal disorders
- · developmental disorders
- · malignancy
- 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 elient groups distinguished by, for example, physical, psychological, environmental, cultural or socio-economic factors
- 2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully
  - understand the need to maintain the safety of both <del>patients, clients and users</del> service users, and those involved in their care
  - ensure patients, clients and users service users are positioned (and if necessary immobilised) for safe and effective interventions
  - be able to use a systematic approach to formulate and test a preferred diagnosis, including being able to:
  - · carry out mechanical debridement of nails and intact and ulcerated skin
  - · prescribe and manufacture of foot orthoses
  - · make and use chair-side foot orthoses
  - · administer relevant prescription-only medicines, interpret any relevant pharmacological history and recognise potential consequences for patient service user treatment.

This standard applies only to registrants who wish to be certified as competent under the Medicines Act 1968 by the HPC

· apply local anaesthesia techniques.

This standard applies only to registrants who wish to be certified as competent under the Medicines Act 1968 by the HPC

- · carry out surgical procedures for skin and nail conditions
- · use appropriate physical and chemical therapies
- be able to use basic life support skills and to deal safely with clinical emergencies
- know and be able to apply the key concepts which are relevant to safe and effective practice as a supplementary prescriber in order to have their name annotated on the register.

This standard applies only to registrants who wish to have their name annotated on the register.

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- 2b.5 be able to maintain records appropriately
  - be able to keep accurate, legible records and recognise the need to handle these records and all other <del>clinical</del>-information in accordance with applicable legislation, protocols and guidelines
  - understand the need to use only accepted terminology (which includes abbreviations) in making elinical records

### 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
  - be able to gather information, including qualitative and quantitative data that helps to evaluate the responses of <del>patients, clients and users</del> **service users** to their care
  - be able to evaluate management intervention plans against treatment milestones using recognised health outcome measures and revise the plans as necessary in conjunction with the patient, client or user service user
  - recognise the need to monitor and evaluate the quality of practice and the value of contributing to the generation of data for quality assurance and improvement programmes
  - be able to make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately
  - understand that outcomes may not always conform to expectations but may still meet the needs of patients, clients or users
- 2c.2 be able to audit, reflect on and review practice
  - understand the principles of quality control and quality assurance
  - be aware of the role of audit and review in quality management, including quality control, quality assurance and the use of appropriate outcome measures
  - be able to maintain an effective audit trail and work towards continual improvement
  - participate in quality assurance programmes, where appropriate
  - understand the value of reflection on clinical practice and the need to record the outcome of such reflection
  - recognise the value of case conferences and other methods of review

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

## Knowledge, understanding and skills

3a:

Registrant chiropodists and podiatrists must:

- 3a.1 know and understand the key concepts of the biological, physical, social, psychological and clinical sciences bodies of knowledge which are relevant to their profession-specific practice
  - understand the structure and function of the human body, relevant to their practice, together with  $\alpha$  knowledge of health, disease, disorder and dysfunction
  - be aware of the principles and applications of scientific enquiry, including the evaluation of treatment efficacy and the research process
  - recognise the role of other professions in health and social care
  - understand the theoretical basis of, and the variety of approaches to, assessment and intervention
  - understand, in the context of chiropody and podiatry:
  - · anatomy and human locomotion
  - · histology
  - · physiology
  - · immunology
  - · podiatric orthopaedics and biomechanics
  - · systemic and podiatric pathology
  - · podiatric therapeutic sciences
  - · behavioural sciences
  - · foot health promotion and education
- 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
  - 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 <del>clinical</del> practice, which minimise risks to <del>patients, clients and users</del> service users, those treating them, and others, including the use of hazard control and particularly infection control

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- know the correct principles and applications of disinfectants, methods for sterilisation and decontamination and dealing with waste and spillages correctly
- be aware of immunisation requirements and the role of occupational health

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential
				proficionav	DD: None	PD: None

#### **Section six: Clinical scientists**

## **Expectations of a health professional**

#### 1a: Professional autonomy and accountability

Registrant clinical scientists must:

- 1a.1 be able to practise within the legal and ethical boundaries of their profession

   understand the need to act in the best interests of service users at all
  - understand the need to act in the best interests of service users at all times
  - understand what is required of them by the Health Professions Council
  - understand the need to respect, and so far as possible uphold, the rights, dignity, **values** and autonomy of every <del>patient, client and user service user</del> including their role in the diagnostic and therapeutic process and **in maintaining health**
  - be aware of current UK legislation applicable to the work of their profession
- 1a.2 be able to practise in a non-discriminatory **and non-oppressive** manner
- 1a.3 be able to maintain confidentiality and obtain informed consent
- 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
  - be able to assess a situation, determine the nature and severity of the problem and call upon the required knowledge and experience to deal with the problem
  - be able to initiate resolution of problems and be able to exercise personal initiative
  - know the limits of their practice and when to seek advice or refer to another professional
  - recognise that they are personally responsible for and must be able to justify their decisions
- 1a.7 recognise the need for effective self-management of workload **and resources** and be able to practise accordingly
- 1a.8 understand the need for career-long self-directed learning
- 1a.8 understand the obligation to maintain fitness to practise
  - understand the need to practise safely and effectively within their scope of practice

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- understand the importance of maintaining health and care for themselves their own health
- understand both the need to keep skills and knowledge up to date and the importance of career-long learning

## 1b: Professional relationships

Registrant clinical scientists must:

- 1b.1 know the professional and personal scope of their practice and be able to make referrals
- 1b.1 be able to work, where appropriate, in partnership with other professionals, support staff, patients, clients and users service users, and their relatives and carers
  - understand the need to build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team
  - understand the need to engage <del>patients, clients, users</del> **service users** and carers in planning and evaluating diagnostics, treatments and interventions to meet their needs and goals
  - be able to make appropriate referrals
  - be able to respond to enquiries regarding the service they provide when dealing with clinical colleagues
- 1b.2 be able to contribute effectively to work undertaken as part of a multidisciplinary team
- 1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, patients, clients, users service users, their relatives and carers
  - be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
  - understand how communication skills affect the assessment of <del>patients,</del> <del>clients and users</del> **service users**, and how the means of communication should be modified to address and take account of factors such as age, physical and learning disability
  - be able to select, move between and use appropriate forms of verbal and non-verbal communication with patients, clients, users service users and others
  - be aware of the characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status
  - understand the need to provide patients, clients and users service users (or people acting on their behalf) with the information necessary to enable them to make informed decisions
  - understand the need to use an appropriate interpreter to assist <del>patients</del> **service users** whose first language is not English, wherever possible
  - recognise that relationships with patients, clients and users service users should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential BD: None

- 1b.4 understand the need for effective communication throughout the care of the patient, client or user service users
  - recognise the need to use interpersonal skills to encourage the active participation of patients, clients and users service users
  - be able to communicate the outcome of problem solving and research and development activities
  - be able to summarise and present complex scientific ideas in an appropriate form

#### The skills required for the application of practice

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

Registrant clinical scientists must:

- 2a.1 be able to gather appropriate information
  - be able to identify the clinical decision which the test or intervention will inform
- 2a.2 be able to **select and** use appropriate assessment techniques
  - be able to undertake and record a thorough, sensitive and detailed assessment, using appropriate techniques and equipment
- 2a.3 be able to undertake or arrange elinical 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

Registrant clinical scientists must:

- 2b.1 be able to use research, reasoning and problem solving skills to determine appropriate actions (and, in the case of clinical scientists, conduct fundamental research)
  - recognise the value of research to the systematic evaluation of practice
  - be able to <del>conduct</del> **engage in** evidence-based practice, evaluate practice systematically, and participate in audit procedures
  - be aware of methods commonly used in health and social care research a range of research methodologies
  - be able to demonstrate a logical and systematic approach to problem solving
  - be able to evaluate research and other evidence to inform their own practice
  - be able to conduct fundamental research
  - be able to interpret data and provide diagnostic and therapeutic opinions, including any further action which the individual directly responsible for the care of the patient service user should take
  - be able to search and to appraise scientific literature and other sources of information critically

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- be able to develop the aims and objectives associated with a project
- be able to develop an experimental protocol to meet the aims and objectives in a way that provides objective and reliable data (free from bias)
- be able to perform the required experimental work and be able to produce and present the results (including statistical analysis)
- be able to interpret results in the light of existing knowledge and the hypothesis developed, and be able to formulate further research questions
- be able to present data and a critical appraisal of it to peers in an appropriate form
- 2b.2 be able to draw on appropriate knowledge and skills in order to make professional judgements
  - be able to change their practice as needed to take account of new developments
  - be able to demonstrate a level of skill in the use of information technology appropriate to their <del>profession</del> **practice**
- 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 elient groups distinguished by, for example, physical, psychological, environmental, cultural or socio-economic factors
  - be able to develop an investigation strategy which takes account of all the relevant clinical and other information available
- 2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully
  - understand the need to maintain the safety of both <del>patients, clients and users</del> **service users**, and those involved in their care
  - ensure patients, clients and users service users are positioned (and if necessary immobilised) for safe and effective interventions
  - be able to perform a range of techniques employed in the modality
  - understand the need to conform to standard operating procedures and conditions
  - understand the need to work with accuracy and precision
  - be able to solve problems that may arise during the routine application of techniques (troubleshooting)
- 2b.5 be able to maintain records appropriately
  - be able to keep accurate, legible records and recognise the need to handle these records and all other <del>clinical</del> information in accordance with applicable legislation, protocols and guidelines
  - understand the need to use only accepted terminology (which includes abbreviations) in making <del>clinical</del> records

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

#### 2c: Critical evaluation of the impact of, or response to, the registrant's actions

Registrant clinical scientists must:

- 2c.1 be able to monitor and review the ongoing effectiveness of planned activity and modify it accordingly
  - be able to gather information, including qualitative and quantitative data that helps to evaluate the responses of <del>patients, clients and users</del> **service users** to their care
  - be able to evaluate management intervention plans against treatment milestones using recognised health outcome measures and revise the plans as necessary in conjunction with the patient, client or user service user
  - recognise the need to monitor and evaluate the quality of practice and the value of contributing to the generation of data for quality assurance and improvement programmes
  - be able to make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately
  - understand that outcomes may not always conform to expectations but may still meet the needs of patients, clients or users service users
  - be able to make judgements on the effectiveness of procedures
  - be able to use quality control and quality assurance techniques, including restorative action
- 2c.2 be able to audit, reflect on and review practice
  - understand the principles of quality control and quality assurance
  - be aware of the role of audit and review in quality management, including quality control, quality assurance and the use of appropriate outcome measures
  - be able to maintain an effective audit trail and work towards continual improvement
  - participate in quality assurance programmes, where appropriate
  - understand the value of reflection on clinical practice and the need to record the outcome of such reflection
  - recognise the value of case conferences and other methods of review
  - understand the importance of participating in accreditation systems related to the modality
  - recognise the need to be aware of emerging technologies and new developments

## Knowledge, understanding and skills

3a:

Registrant clinical scientists must:

3a.1 know the key concepts of the biological, physical, social, psychological and clinical sciences which are relevant to their profession-specific practice

- understand the structure and function of the human body, relevant to their practice, together with a knowledge of health, disease, disorder and dysfunction

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential
				proficiency	DD: None	RD: None

- be aware of the principles and applications of scientific enquiry, including the evaluation of treatment efficacy and the research process
- recognise the role of other professions in health and social care
- understand the theoretical basis of, and the variety of approaches to, assessment and intervention
- know the basic science underpinning the modality in which the registrant practises, understand relevant basic clinical medicine, and be aware of the fundamental principles of clinical practice
- understand the wider clinical situation relevant to the <del>patients</del> service users presenting to the specialty
- 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** 
  - understand the clinical applications of the speciality and the consequences of decisions made upon actions and advice
  - understand the evidence base that underpins the use of the procedures employed by the service
  - understand the principles associated with a range of techniques employed in the modality
  - know the standards of practice expected from techniques
- 3a.3 understand the need to establish and maintain a safe practice environment
  - 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 elinical practice, which minimise risks to patients, clients and users 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 **and special** 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 dealing with waste and spillages correctly

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

**Section seven: Dietitians** 

## **Expectations of a health professional**

## 1a: Professional autonomy and accountability

Registrant dietitians must:

- 1a.1 be able to practise within the legal and ethical boundaries of their profession
  - understand the need to act in the best interests of service users at all times
  - understand what is required of them by the Health Professions Council
  - understand the need to respect, and so far as possible uphold, the rights, dignity, **values** and autonomy of every <del>patient, client and user service user</del> including their role in the diagnostic and therapeutic process and **in maintaining health**
  - be aware of current UK legislation applicable to the work of their profession
  - understand the ethical and legal implications of withholding or withdrawing feeding **including food and fluids**
- 1a.2 be able to practise in a non-discriminatory **and non-oppressive** manner
- 1a.3 be able to maintain confidentiality and obtain informed consent
- 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
  - be able to assess a situation, determine the nature and severity of the problem and call upon the required knowledge and experience to deal with the problem
  - be able to initiate resolution of problems and be able to exercise personal initiative
  - know the limits of their practice and when to seek advice or refer to another professional
  - recognise that they are personally responsible for and must be able to justify their decisions
- 1a.7 recognise the need for effective self-management of workload **and resources** and be able to practise accordingly
- 1a.8 understand the need for career-long self-directed learning

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential
				proficiency	DD: None	RD: None

- 1a.8 understand the obligation to maintain fitness to practise
  - understand the need to practise safely and effectively within their scope of practice
  - understand the importance of maintaining health and care for themselves their own health
  - understand both the need to keep skills and knowledge up to date and the importance of career-long learning

## 1b: Professional relationships

Registrant dietitians must:

- 1b.1 know the professional and personal scope of their practice and be able to make referrals
- 1b.1 be able to work, where appropriate, in partnership with other professionals, support staff, patients, clients and users service users, and their relatives and carers
  - understand the need to build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team
  - understand the need to engage <del>patients, clients, users</del> service users and carers in planning and evaluating diagnostics, treatments and interventions to meet their needs and goals
  - be able to make appropriate referrals
- 1b.2 be able to contribute effectively to work undertaken as part of a multidisciplinary team
- 1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, patients, clients, users service users, their relatives and carers
  - be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
  - understand how communication skills affect the assessment of <del>patients</del>, <del>clients and users</del> **service users**, and how the means of communication should be modified to address and take account of factors such as age, physical and learning disability
  - be able to select, move between and use appropriate forms of verbal and non-verbal communication with patients, clients, users service users and others
  - be aware of the characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status
  - understand the need to provide <del>patients</del>, <del>clients and users</del> service users (or people acting on their behalf) with the information necessary to enable them to make informed decisions
  - understand the need to use an appropriate interpreter to assist <del>patients</del> **service users** whose first language is not English, wherever possible

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- recognise that relationships with patients, clients and users service users should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility
- 1b.4 understand the need for effective communication throughout the care of the patient, client or user-service users
  - recognise the need to use interpersonal skills to encourage the active participation of patients, clients and users service users

## The skills required for the application of practice

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

Registrant dietitians must:

- 2a.1 be able to gather appropriate information
- 2a.2 be able to **select and** use appropriate assessment techniques
  - be able to undertake and record a thorough, sensitive and detailed assessment, using appropriate techniques and equipment
  - be able to choose, undertake and record the most appropriate method of dietary and nutritional assessment, using appropriate techniques and equipment
- 2a.3 be able to undertake or arrange elinical investigations as appropriate
- 2a.4 be able to analyse and **critically** evaluate the information collected be able to use nutritional analysis programmes to analyse food intake, records and recipes **and interpret the results**

## 2b: Formulation and delivery of plans and strategies for meeting health and social care needs

Registrant dietitians must:

- 2b.1 be able to use research, reasoning and problem solving skills to determine appropriate actions (and, in the case of clinical scientists, conduct fundamental research)
  - recognise the value of research to the systematic evaluation of practice
  - be able to <del>conduct</del> **engage in** evidence-based practice, evaluate practice systematically, and participate in audit procedures
  - be aware of methods commonly used in health and social care research a range of research methodologies
  - be able to demonstrate a logical and systematic approach to problem solving
  - be able to evaluate research and other evidence to inform their own practice
  - be able to use statistical, epidemiological and research skills to gather and interpret evidence in order to make reasoned conclusions and judgements with respect to dietetic practice in disease prevention and management

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- 2b.2 be able to draw on appropriate knowledge and skills in order to make professional judgements
  - be able to change their practice as needed to take account of new developments
  - be able to demonstrate a level of skill in the use of information technology appropriate to their profession practice
  - be able to choose the most appropriate strategy to influence nutritional behaviour and choice
  - be able to undertake and explain dietetic treatment, having regard to current knowledge and evidence-based practice
  - -be able to advise on safe procedures for food preparation, menu planning, manufacture and handling and be able to interpret food labels which may have nutritional or clinical implications
  - be able to advise on safe procedures for food preparation and handling, food processing and menu planning, and the resulting impact on nutritional quality and menu planning
  - be able to interpret nutritional information including food labels which may have nutritional or clinical implications

We have restructured and reworded the above standards for clarity.

- 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 elient groups distinguished by, for example, physical, psychological, environmental, cultural or socio-economic factors *affect diet, lifestyle and health*
  - understand the need to be sensitive to social, economic and cultural factors that affect diet, lifestyle and health
  - understand the significance and potential impact of non-dietary factors when helping individuals, **groups and communities** to make informed choices about their dietary treatment and health care.
  - be able to assist individuals, groups **and communities** to undertake and to become committed to self-care activities including diet, **physical activity** and other lifestyle adjustments
  - understand the need to demonstrate sensitivity to the factors which shape individual food choice and lifestyle which may impact on the individual's health and affect the interaction between client and dietitian
- 2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully
  - understand the need to maintain the safety of both <del>patients, clients and users</del> **service users**, and those involved in their care
- 2b.5 be able to maintain records appropriately
  - be able to keep accurate, legible records and recognise the need to handle these records and all other <del>clinical</del>-information in accordance with applicable legislation, protocols and guidelines

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential BD: None

- understand the need to use only accepted terminology (which includes abbreviations) in making elinical records

## 2c: Critical evaluation of the impact of, or response to, the registrant's actions

## Registrant dietitians must:

- 2c.1 be able to monitor and review the ongoing effectiveness of planned activity and modify it accordingly
  - be able to gather information, including qualitative and quantitative data, that helps to evaluate the responses of <del>patients clients and users</del> service users to their care
  - be able to evaluate management intervention plans against treatment milestones using recognised health outcome measures and revise the plans as necessary in conjunction with the patient, client or user service users
  - recognise the need to monitor and evaluate the quality of practice and the value of contributing to the generation of data for quality assurance and improvement programmes
  - be able to make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately
  - understand that outcomes may not always conform to expectations but may still meet the needs of patients, clients or users
- 2c.2 be able to audit, reflect on and review practice
  - understand the principles of quality control and quality assurance
  - be aware of the role of audit and review in quality management, including quality control, quality assurance and the use of appropriate outcome measures
  - be able to maintain an effective audit trail and work towards continual improvement
  - participate in quality assurance programmes, where appropriate
  - understand the value of reflection on clinical practice and the need to record the outcome of such reflection
  - recognise the value of case conferences and other methods of review
  - be able to evaluate nutritional and dietetic information critically, and to engage in the process of reflection in order to inform dietetic practice
  - be able to adapt dietetic practice as a result of unexpected outcomes or further information gained during the dietetic interview intervention

## Knowledge, understanding and skills

3a:

Registrant dietitians must:

3a.1 know and understand the key concepts of the biological, physical, social, psychological and clinical sciences bodies of knowledge which are relevant to their profession-specific practice

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential
				proficiency	DD: None	RD: None

- understand the structure and function of the human body, relevant to their practice, together with  $\frac{1}{4}$  knowledge of health, disease, disorder and dysfunction
- be aware of the principles and applications of scientific enquiry, including the evaluation of treatment efficacy and the research process
- recognise the role of other professions in health and social care
- understand the theoretical basis of, and the variety of approaches to, assessment and intervention
- understand, in the context of dietetics, biochemistry, clinical medicine, diet therapy, food hygiene, food science, genetics, immunology, microbiology, nutrition, pathophysiology, pharmacology and physiology
- be aware of catering and administration
- understand sociology, social policy, psychology, public health and educational methods relevant to the dietetic management of individuals, clients, patients or groups or communities
- understand the methods commonly used in nutrition research and be able to evaluate research papers critically
- 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
  - 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 <del>clinical</del>-practice, which minimise risks to <del>patients, clients and users</del> **service users**, those treating them, and others, including the use of hazard control and particularly infection control
  - be able to advise on safe procedures for food preparation

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

#### **Section eight: Occupational therapists**

## **Expectations of a health professional**

## 1a: Professional autonomy and accountability

Registrant occupational therapists must:

- 1a.1 be able to practise within the legal and ethical boundaries of their profession understand the need to act in the best interests of service users at all
  - times
  - understand what is required of them by the Health Professions Council
  - understand the need to respect, and so far as possible uphold, the rights, dignity, **values** and autonomy of every <del>patient, client and user service user</del> including their role in the diagnostic and therapeutic process and **in maintaining health**
  - be aware of current UK legislation applicable to the work of their profession
- 1a.2 be able to practise in a non-discriminatory **and non-oppressive** manner
- 1a.3 be able to maintain confidentiality and obtain informed consent
- 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
  - be able to assess a situation, determine the nature and severity of the problem and call upon the required knowledge and experience to deal with the problem
  - be able to initiate resolution of problems and be able to exercise personal initiative
  - know the limits of their practice and when to seek advice or refer to another professional
  - recognise that they are personally responsible for and must be able to justify their decisions
- 1a.7 recognise the need for effective self-management of workload **and resources** and be able to practise accordingly
- 1a.8 understand the need for career-long self-directed learning

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential
				proficiency	DD: None	RD: None

- 1a.8 understand the obligation to maintain fitness to practise
  - understand the need to practise safely and effectively within their scope of practice
  - understand the importance of maintaining health and care for themselves their own health
  - understand both the need to keep skills and knowledge up to date and the importance of career-long learning

## 1b: Professional relationships

Registrant occupational therapists must:

- 1b.1 know the professional and personal scope of their practice and be able to make referrals
- 1b.1 be able to work, where appropriate, in partnership with other professionals, support staff, patients, clients and users service users, and their relatives and carers
  - understand the need to build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team
  - understand the need to engage <del>patients, clients, users</del> **service users** and carers in planning and evaluating diagnostics, treatments and interventions to meet their needs and goals
  - be able to make appropriate referrals
  - understand the need to work with those who provide services in both the statutory and non-statutory sectors

We have added this standard to reflect the role of occupational therapists in working with a range of different professionals in both the statutory (public) and non-statutory (private) sectors.

- 1b.2 be able to contribute effectively to work undertaken as part of a multidisciplinary team
- 1b.3 be able to demonstrate effective and appropriate skills in communicating Information, advice, instruction and professional opinion to colleagues, patients, clients, users service users, their relatives and carers
  - be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
  - understand how communication skills affect the assessment of <del>patients,</del> <del>clients and users</del> **service users**, and how the means of communication should be modified to address and take account of factors such as age, physical and learning disability
  - be able to select, move between and use appropriate forms of verbal and non-verbal communication with patients, clients, users service users and others

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- be aware of the characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status
- understand the need to provide <del>patients, clients and users</del> service users (or people acting on their behalf) with the information necessary to enable them to make informed decisions
- understand the need to use an appropriate interpreter to assist <del>patients</del> **service users** whose first language is not English, wherever possible
- recognise that relationships with patients, clients and users service users should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility
- 1b.4 understand the need for effective communication throughout the care of the patient, client or user service users
  - recognise the need to use interpersonal skills to encourage the active participation of patients, clients and users service users
  - understand the need to adopt a client-centred approach and establish rapport appropriate professional relationships in order to motivate and involve the client in meaningful occupation
  - understand the value, when working with and for disabled people of empowering them with the aim of enhancing access and opportunities for all of enabling and empowering service users with the aim of enhancing access and opportunities for all
  - understand group dynamics and roles, and be able to facilitate group work, in order to maximise support, learning and change within groups **and** communities
  - understand the need to capitalise, where appropriate, on the dynamics within groups **and communities** in order to harness motivation and active involvement of participants

## The skills required for the application of practice

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

Registrant occupational therapists must:

- 2a.1 be able to gather appropriate information
- 2a.2 be able to **select and** use appropriate assessment techniques
  - be able to undertake and record a thorough, sensitive and detailed assessment, using appropriate techniques and equipment
  - be able to use observation to gather information about the functional abilities of clients service users
  - understand the need to make provision for identification and assessment of identify and assess occupational, physical, psychological, cultural and environmental needs/problems of service users, and their families and carers
  - be able to listen to a client's service user's story and analyse the content in order to plan for the future

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- be able, through interview and individual personal discussion, to understand the values, beliefs and interests of elients service users and their families and carers
- be able to **select and** use standardised and non-standardised assessments **appropriately** to gather information in relation to dysfunction and environmental barriers about the service user's occupational performance, taking account of the environmental context
- be able to select **and use** relevant assessment tools to identify occupational **performance** and functional needs in the areas of self-care, productivity and leisure
- understand the need to consider the assessment of **the** both health and social care needs of **both** clients and carers service users and carers
- 2a.3 be able to undertake or arrange elinical investigations as appropriate
- 2a.4 be able to analyse and **critically** evaluate the information collected
  - be able to use skills of evaluation and analysis in relation to therapeutic media and to conduct occupational and activity analysis
  - be able to use graded occupations as a framework for evaluation and analysis

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

## Registrants must:

- 2b.1 be able to use research, reasoning and problem solving skills to determine appropriate actions (and, in the case of clinical scientists, conduct fundamental research)
  - recognise the value of research to the systematic evaluation of practice
  - be able to conduct engage in evidence-based practice, evaluate practice systematically, and participate in audit procedures
  - be aware of methods commonly used in health and social care research a range of research methodologies
  - be able to demonstrate a logical and systematic approach to problem solving
  - be able to evaluate research and other evidence to inform their own practice
- 2b.2 be able to draw on appropriate knowledge and skills in order to make professional judgements
  - be able to change their practice as needed to take account of new developments
  - be able to demonstrate a level of skill in the use of information technology appropriate to their profession practice
  - be able to use understand and use the established theories, sciences, models, frameworks and concepts of occupational therapy
- 2b.3 be able to formulate specific and appropriate management plans including the setting of timescales

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- understand the requirement to adapt practice to meet the needs of different elient groups distinguished by, for example, physical, psychological, environmental, cultural or socio-economic factors
- understand the need to agree the goals and priorities of intervention in relation to self care productivity and leisure, and to base such decisions on assessment results in partnership with the client
- understand the need to agree the goals and priorities of intervention in relation to occupational needs in partnership with service users, basing such decisions on assessment results
- be able to select individual occupational therapy interventions as appropriate, taking into account the specific therapeutic needs of clients and carers as appropriate, the specific occupations and/or activities for use as therapeutic media, taking into account the particular therapeutic needs of service users and carers
- be able to analyse select, develop or modify therapeutic media and/or environments to that enable elients service users to build on their abilities and to limit dysfunction enhance their occupational performance
- be aware of the full range of occupations and/or activities used in intervention, including creative and practical activities and environmental adaptations, and that the occupations used and how these should reflect the individual's occupational needs Recognise self care, productivity and leisure as outcomes
- 2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully
  - understand the need to maintain the safety of both <del>patients, clients and users</del> service users, and those involved in their care
  - understand the specific local context of practice, including the socio-cultural diversity of the community
- 2b.5 be able to maintain records appropriately
  - be able to keep accurate, legible records and recognise the need to handle these records and all other elinical information in accordance with applicable legislation, protocols and guidelines
  - understand the need to use only accepted terminology (which includes abbreviations) in making <del>clinical</del> records

#### 2c: Critical evaluation of the impact of, or response to, the registrant's actions

Registrant occupational therapists must:

- 2c.1 be able to monitor and review the ongoing effectiveness of planned activity and modify it accordingly
  - be able to gather information, including qualitative and quantitative data that helps to evaluate the responses of <del>patients, clients and users</del> service users to their care
  - be able to evaluate management intervention plans against treatment milestones using recognised health outcome measures and revise the plans as necessary in conjunction with the patient, client or user service user

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- recognise the need to monitor and evaluate the quality of practice and the value of contributing to the generation of data for quality assurance and improvement programmes
- be able to make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately
- understand that outcomes may not always conform to expectations but may still meet the needs of patients, clients or users
- be able to work in appropriate partnership with the service user in order to evaluate the effectiveness of occupational therapy intervention
- 2c.2 be able to audit, reflect on and review practice
  - understand the principles of quality control and quality assurance
  - be aware of the role of audit and review in quality management, including quality control, quality assurance and the use of appropriate outcome measures
  - be able to maintain an effective audit trail and work towards continual improvement
  - participate in quality assurance programmes, where appropriate
  - understand the value of reflection on clinical practice and the need to record the outcome of such reflection
  - recognise the value of case conferences and other methods of review
  - be able to recognise the potential of occupational therapy in new and emerging areas of practice

## Knowledge, understanding and skills

3a:

Registrant occupational therapists must:

- 3a.1 know and understand the key concepts of the biological, physical, social, psychological and clinical sciences bodies of knowledge which are relevant to their profession-specific practice
  - understand the structure and function of the human body, relevant to their practice, together with  $\frac{1}{4}$  knowledge of health, disease, disorder and dysfunction
  - be aware of the principles and applications of scientific enquiry, including the evaluation of treatment efficacy and the research process
  - recognise the role of other professions in health and social care
  - understand the theoretical basis of, and the variety of approaches to, assessment and intervention
  - understand activity and occupation as it relates and their relation to health and well-being
  - understand the theoretical concepts underpinning occupational therapy, specifically the occupational nature of human beings and how they function in everyday activities
  - be aware of the origins and development of occupational therapy, including the evolution of the profession towards the current emphasis on autonomy and empowerment of individuals, groups and communities

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- understand the use of the current philosophical framework for occupational therapy that focuses on <del>client-centeredness</del> service users and the social model of disability
- -be able to analyse human occupation form a holistic perspective and the demands made on individuals in order to engage in occupations
- understand the impact of occupational dysfunction and deprivation on individuals, families, groups and communities and recognise the importance of restoring opportunities
- -be able to use utilise the foundation sciences fundamental to everyday practice and be able to interpret them in relation to human functioning and dysfunction
- recognise the socio-cultural environmental issues that influence the context within which people live and work
- recognise the impact of inequality, poverty, exclusion, identity, social difference and diversity on occupational performance
- recognise the value of the diversity and complexity of human behaviour through exploring the exploration of different physical, psychological, environmental, social, emotional and spiritual perspectives
- be aware of social, housing environmental and work related policies and services and their impact on human needs within a diverse society
- understand the impact of legislation on the delivery of care
- 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** 
  - know how to meet the social, psychological and physical health based occupational needs of service users across a range of practice areas
- 3a.3 understand the need to establish and maintain a safe practice environment
  - 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 elinical practice, which minimise risks to patients, clients and users service users, those treating them, and others, including the use of hazard control and particularly infection control
  - know and be able to apply appropriate moving and handling techniques

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential
				proficiency	DD: None	RD: None

#### **Section nine: Orthoptists**

## **Expectations of a health professional**

## 1a: Professional autonomy and accountability

Registrant orthoptists must:

- 1a.1 be able to practise within the legal and ethical boundaries of their profession
  - understand the need to act in the best interests of service users at all times
  - understand what is required of them by the Health Professions Council
  - understand the need to respect, and so far as possible uphold, the rights, dignity, values and autonomy of every patient, client and user service users including their role in the diagnostic and therapeutic process and in maintaining health
  - be aware of current UK legislation applicable to the work of their profession
- 1a.2 be able to practise in a non-discriminatory and non-oppressive manner
- 1a.3 be able to maintain confidentiality and obtain informed consent
- 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
- be able to practise as an autonomous professional, exercising their own 1a.6: professional judgement
  - be able to assess a situation, determine the nature and severity of the problem and call upon the required knowledge and experience to deal with the problem
  - be able to initiate resolution of problems and be able to exercise personal initiative
  - know the limits of their practice and when to seek advice or refer to another professional
  - recognise that they are personally responsible for and must be able to justify their decisions
- 1a.7 recognise the need for effective self-management of workload and resources and be able to practise accordingly
- 1a.8 understand the need for career-long self-directed learning

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

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- 1a.8 understand the obligation to maintain fitness to practise
  - understand the need to practise safely and effectively within their scope of practice
  - understand the importance of maintaining health and care for themselves their own health
  - understand both the need to keep skills and knowledge up to date and the importance of career-long learning

## 1b: Professional relationships

Registrant orthoptists must:

- 1b.1 know the professional and personal scope of their practice and be able to make referrals
- 1b.1 be able to work, where appropriate, in partnership with other professionals, support staff, patients, clients and users service users, and their relatives and carers
  - understand the need to build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team
  - understand the need to engage patients, clients, users service users and carers in planning and evaluating diagnostics, treatments and interventions to meet their needs and goals
  - be able to make appropriate referrals
  - be able to diagnose a range of ocular defects and instigate referrals where appropriate
  - recognise the need to participate effectively in the planning, implementation and evaluation of multi-professional approaches to health care delivery by liaising with ophthalmologists, optometrists, and other health care professionals
- 1b.2 be able to contribute effectively to work undertaken as part of a multidisciplinary team
- 1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, patients, clients, users service users, their relatives and carers
  - be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
  - understand how communication skills affect the assessment of <del>patients,</del> <del>clients and users</del> **service users**, and how the means of communication should be modified to address and take account of factors such as age, physical and learning disability
  - be able to select, move between and use appropriate forms of verbal and non-verbal communication with patients, clients, users service users and others
  - be aware of the characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- understand the need to provide patients, clients and users service users (or people acting on their behalf) with the information necessary to enable them to make informed decisions
- understand the need to use an appropriate interpreter to assist <del>patients</del> **service users** whose first language is not English, wherever possible
- recognise that relationships with patients, clients and users service users should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility
- 1b.4 understand the need for effective communication throughout the care of the patient, client or user service users
  - recognise the need to use interpersonal skills to encourage the active participation of patients, clients and users
  - recognise the need to modify interpersonal skills for the assessment and management of children

## The skills required for the application of practice

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

Registrant orthoptists must:

- 2a.1 be able to gather appropriate information
- 2a.2 be able to **select and** use appropriate assessment techniques
  - be able to undertake and record a thorough, sensitive and detailed assessment, using appropriate techniques and equipment
  - be able to use investigative techniques to identify ocular defects within a specific population to form a diagnosis and devise an appropriate course of action
  - be able to conduct thorough investigation of ocular motility
  - be able to diagnose conditions and select appropriate management
  - understand the principles and techniques used to perform an objective and subjective refraction
  - understand the principles and techniques used to examine anterior and posterior segment of the eye
  - understand the principles and techniques used to assess visual function
- 2a.3 be able to undertake or arrange elinical investigations as appropriate
- 2a.4 be able to analyse and **critically** evaluate the information collected
  - be able to identify pathological changes and related clinical features of conditions commonly encountered by orthoptists

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.		
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None		

## 2b: Formulation and delivery of plans and strategies for meeting health and social care needs

## Registrant orthoptists must:

- 2b.1 be able to use research, reasoning and problem solving skills to determine appropriate actions (and, in the case of clinical scientists, conduct fundamental research)
  - recognise the value of research to the systematic evaluation of practice
  - be able to conduct engage in evidence-based practice, evaluate practice systematically, and participate in audit procedures
  - be aware of methods commonly used in health and social care research a range of research methodologies
  - be able to demonstrate a logical and systematic approach to problem solving
  - be able to evaluate research and other evidence to inform their own practice
- 2b.2 be able to draw on appropriate knowledge and skills in order to make professional judgements
  - be able to change their practice as needed to take account of new developments
  - be able to demonstrate a level of skill in the use of information technology appropriate to their profession practice
  - be aware of the orthoptist's role in the promotion of visual health by others, such as the training of health visitors in the practice of 'visual screening'
- 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 elient groups distinguished by, for example, physical, psychological, environmental, cultural or socio-economic factors
  - be able to identify and assess physical, psychological and cultural needs, such as considering the educational as well as visual needs of a school-aged child undergoing occlusion therapy
- 2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully
  - understand the need to maintain the safety of both <del>patients, clients and users</del> **service users**, and those involved in their care
  - ensure patients, clients and users service users are positioned (and if necessary immobilised) for safe and effective interventions
  - be able to use diagnostic and therapeutic procedures to address anomalies of binocular vision, visual function and ocular motility defects
  - be able to effect a change in visual stimuli resulting in a clinically defined outcome, which can be recorded and monitored in a manner appropriate to safe orthoptic practice
- 2b.5 be able to maintain records appropriately

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.	
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None	

- be able to keep accurate, legible records and recognise the need to handle these records and all other elinical-information in accordance with applicable legislation, protocols and guidelines
- understand the need to use only accepted terminology (which includes abbreviations) in making <del>clinical</del> records

### 2c: Critical evaluation of the impact of, or response to, the registrant's actions

## Registrant orthoptists must:

- 2c.1 be able to monitor and review the ongoing effectiveness of planned activity and modify it accordingly
  - be able to gather information, including qualitative and quantitative data that helps to evaluate the responses of <del>patients, clients and users</del> **service users** to their care
  - be able to evaluate management intervention plans against treatment milestones using recognised health outcome measures and revise the plans as necessary in conjunction with the patient, client or user service users
  - recognise the need to monitor and evaluate the quality of practice and the value of contributing to the generation of data for quality assurance and improvement programmes
  - be able to make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately
  - understand that outcomes may not always conform to expectations but may still meet the needs of patients, clients or users
- 2c.2 be able to audit, reflect on and review practice
  - understand the principles of quality control and quality assurance
  - be aware of the role of audit and review in quality management, including quality control, quality assurance and the use of appropriate outcome measures
  - be able to maintain an effective audit trail and work towards continual improvement
  - participate in quality assurance programmes, where appropriate
  - understand the value of reflection on clinical practice and the need to record the outcome of such reflection
  - recognise the value of case conferences and other methods of review
  - understand research undertaken in the field of ocular motility, visual function and binocular disorders and how it could affect practice

#### Knowledge, understanding and skills

3a:

Registrant orthoptists must:

3a.1 know and understand the key concepts of the biological, physical, social, psychological and clinical sciences bodies of knowledge which are relevant to their profession-specific practice

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- understand the structure and function of the human body, relevant to their practice, together with  $\frac{1}{4}$  knowledge of health, disease, disorder and dysfunction
- be aware of the principles and applications of scientific enquiry, including the evaluation of treatment efficacy and the research process
- recognise the role of other professions in health and social care
- understand the theoretical basis of, and the variety of approaches to, assessment and intervention
- understand ocular alignment and binocular single vision
- know the principles of uniocular and binocular perception
- understand the attaining and maintaining of binocular functions
- understand the development of the sensory functions of ocular alignment, binocular single vision and uniocular and binocular perception
- know the role of refractive error and its effect on ocular alignment and visual development
- understand binocular vision and its disruption
- understand ocular motility systems and their control
- know the adaptive mechanisms that occur in order to compensate for strabismus or abnormalities of binocular vision
- understand human anatomy and physiology, emphasising the dynamic relationships of human structure and function and focusing on the central nervous systems, brain and ocular structures
- understand human growth and development across the lifespan, as it relates to the practice of orthoptics
- understand other medical conditions and their association with the eye, including paediatric, endocrine, autoimmune, oncological and neurological disease
- understand ophthalmic disease and neuro-ophthalmology
- know the factors which influence individual variations in human ability and development
- know the detailed anatomy and physiology which enables the development of visual sense, visual performance and visual perception
- understand neuroanatomy and the subsequent effects of disruption of neural pathways
- understand the development of anatomical substrates and their relevance to the development of binocular single vision and visual function
- know how psychology and sociology can inform an understanding of health, illness and health care in the context of orthoptics and know how to take this into account in orthoptic practice
- be aware of human behaviour and recognise the need for sensitivity to the psychosocial aspects of strabismus
- know the principles governing binocular vision, its investigation and the significance of its presence or absence, and be able to apply them to clinical practice
- know the principles governing ocular motility and its relevance to patient service user management, and be able to apply them to clinical practice
- know the principles governing visual function and the development of vision, and be able to apply them to clinical practice

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	proficiency	DD: None	RD: None

- recognise the functional and perceptual difficulties that may arise as a result of defective visual function
- be able to plan, operate and evaluate appropriate vision screening programmes
- 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** 
  - know the role and appropriate selection of pharmacological agents and how they may be utilised in orthoptic practice
  - understand orthoptic and ophthalmological equipment used during the investigative process
  - know the tests required to aid in differential diagnosis
  - know the effects of orthoptic and ophthalmological intervention on visual development
  - know the means by which refraction and optics can influence vision and binocular vision
  - know the principles and application of measurement techniques used to assess binocular vision and other ocular conditions
- 3a.3 understand the need to establish and maintain a safe practice environment
  - 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 elinical practice, which minimise risks to patients, clients and users service users, those treating them, and others, including the use of hazard control and particularly infection control

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud
2006-06-22	а	POL	PPR	Review of the standards of	Final	Confide
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**Section ten: Paramedics** 

## **Expectations of a health professional**

## 1a: Professional autonomy and accountability

Registrant paramedics must:

- 1a.1 be able to practise within the legal and ethical boundaries of their profession
  - understand the need to act in the best interests of service users at all times
  - understand what is required of them by the Health Professions Council
  - understand the need to respect, and so far as possible uphold, the rights, dignity, **values** and autonomy of every <del>patient, client and user</del> *service user* including their role in the diagnostic and therapeutic process and **in maintaining health**
  - be aware of current UK legislation applicable to the work of their profession
  - be able to practise in accordance with current legislation governing the use of prescription-only medicines by paramedics
- 1a.2 be able to practise in a non-discriminatory **and non-oppressive** manner
- 1a.3 be able to maintain confidentiality and obtain informed consent
- 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
  - be able to assess a situation, determine the nature and severity of the problem and call upon the required knowledge and experience to deal with the problem
  - be able to initiate resolution of problems and be able to exercise personal initiative
  - know the limits of their practice and when to seek advice or refer to another professional
  - recognise that they are personally responsible for and must be able to justify their decisions
  - be able to use a range of integrated skills and self-awareness to manage clinical challenges effectively in unfamiliar circumstances or situations
- 1a.7 recognise the need for effective self-management of workload **and resources** and be able to practise accordingly
- 1a.8 understand the need for career-long self-directed learning

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential
				proficiency	DD: None	RD: None

- 1a.8 understand the obligation to maintain fitness to practise
  - understand the need to practise safely and effectively within their scope of practice
  - understand the importance of maintaining health and care for themselves their own health
  - understand both the need to keep skills and knowledge up to date and the importance of career-long learning
  - be able to maintain a high standard of professional effectiveness by adopting strategies for physical and psychological self-care, critical self-awareness, and by being able to maintain a safe working environment

## 1b: Professional relationships

Registrant paramedics must:

- 1b.1 know the professional and personal scope of their practice and be able to make referrals
- 1b.1 be able to work, where appropriate, in partnership with other professionals, support staff, patients, clients and users *service users*, and their relatives and carers
  - understand the need to build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team
  - understand the need to engage <del>patients, clients, users</del> **service users** and carers in planning and evaluating diagnostics, treatments and interventions to meet their needs and goals
  - be able to make appropriate referrals
  - understand the range and limitations of operational relationships between paramedics and other health care professionals
  - recognise the principles and practices of other health care professionals and health care systems and how they interact with the role of a paramedic
- 1b.2 be able to contribute effectively to work undertaken as part of a multidisciplinary team
- 1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, patients, clients, users service users, their relatives and carers
  - be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
  - understand how communication skills affect the assessment of <del>patients,</del> <del>clients and users service users</del>, and how the means of communication should be modified to address and take account of factors such as age, physical and learning disability
  - be able to select, move between and use appropriate forms of verbal and non-verbal communication with patients, clients, users service users and others

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- be aware of the characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status
- understand the need to provide <del>patients, clients and users</del> service users (or people acting on their behalf) with the information necessary to enable them to make informed decisions
- understand the need to use an appropriate interpreter to assist <del>patients service</del> **users** whose first language is not English, wherever possible
- recognise that relationships with patients, clients and users service users should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility
- be able to identify anxiety and stress in service users, carers and others and recognise the potential impact upon communication
- 1b.4 understand the need for effective communication throughout the care of the patient, client or user service user
  - recognise the need to use interpersonal skills to encourage the active participation of patients, clients and users service users

## The skills required for the application of practice

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

Registrant paramedics must:

- 2a.1 be able to gather appropriate information
- 2a.2 be able to **select and** use appropriate assessment techniques
  - be able to undertake and record a thorough, sensitive and detailed assessment, using appropriate techniques and equipment
  - be able to undertake and record a thorough, sensitive and detailed assessment, using appropriate techniques and equipment
  - be able to conduct a thorough and detailed physical examination of the patient—using observations, palpation, auscultation and other assessment skills to inform clinical reasoning and to guide the formulation of a diagnosis across all age ranges, including calling for specialist help where available
  - be able to use observation to gather information about the functional abilities of service users
  - understand the need to consider the assessment of both the health and social care needs of service users and carers

We have added two further profession-specific standards to acknowledge observation as an paramedic assessment technique and the role of paramedics in considering the social care and health needs of those who use their services.

#### 2a.3 be able to undertake or arrange-elinical investigations as appropriate

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	Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
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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

Registrant paramedics must:

- 2b.1 be able to use research, reasoning and problem solving skills to determine appropriate actions (and, in the case of clinical scientists, conduct fundamental research)
  - recognise the value of research to the systematic evaluation of practice
  - be able to <del>conduct</del> **engage in** evidence-based practice, evaluate practice systematically, and participate in audit procedures
  - be aware of methods commonly used in health and social care research a range of research methodologies
  - be able to demonstrate a logical and systematic approach to problem solving
  - be able to evaluate research and other evidence to inform their own practice
- 2b.2 be able to draw on appropriate knowledge and skills in order to make professional judgements
  - be able to change their practice as needed to take account of new developments
  - be able to demonstrate a level of skill in the use of information technology appropriate to their profession practice
- 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 elient groups distinguished by, for example, physical, psychological, environmental, cultural or socio-economic factors
  - understand the need to demonstrate sensitivity to the factors which shape lifestyle which may impact on the individual's health and affect the interaction between the service user and paramedic
- 2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully
  - understand the need to maintain the safety of both <del>patients, clients and users</del>, **service users** and those involved in their care
  - ensure patients, clients and users service users are positioned (and if necessary immobilised) for safe and effective interventions
  - know the indications and contra-indications of using specific paramedic techniques, including their modifications
  - be able to modify and adapt practice to emergency situations
- 2b.5 be able to maintain records appropriately
  - be able to keep accurate, legible records and recognise the need to handle these records and all other elinical information in accordance with applicable legislation, protocols and guidelines

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- understand the need to use only accepted terminology (which includes abbreviations) in making elinical records

## 2c: Critical evaluation of the impact of, or response to, the registrant's actions

Registrant paramedics must:

- 2c.1 be able to monitor and review the ongoing effectiveness of planned activity and modify it accordingly
  - be able to gather information, including qualitative and quantitative data that helps to evaluate the responses of <del>patients, clients and users</del> service users to their care
  - be able to evaluate management intervention plans against treatment milestones using recognised health outcome measures and revise the plans as necessary in conjunction with the patient, client or user service user
  - recognise the need to monitor and evaluate the quality of practice and the value of contributing to the generation of data for quality assurance and improvement programmes
  - be able to make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately
  - understand that outcomes may not always conform to expectations but may still meet the needs of patients, clients or users
- 2c.2 be able to audit, reflect on and review practice
  - understand the principles of quality control and quality assurance
  - be aware of the role of audit and review in quality management, including quality control, quality assurance and the use of appropriate outcome measures
  - be able to maintain an effective audit trail and work towards continual improvement
  - participate in quality assurance programmes, where appropriate
  - understand the value of reflection on clinical practice and the need to record the outcome of such reflection
  - recognise the value of case conferences and other methods of review

#### Knowledge, understanding and skills

3a:

Registrant paramedics must:

- 3a.1 know and understand the key concepts of the biological, physical, social, psychological and clinical sciences bodies of knowledge which are relevant to their profession-specific practice
  - understand the structure and function of the human body, relevant to their practice, together with  $\frac{1}{2}$  knowledge of health, disease, disorder and dysfunction
  - be aware of the principles and applications of scientific enquiry, including the evaluation of treatment efficacy and the research process
  - recognise the role of other professions in health and social care

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	Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
ĺ	2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- understand the theoretical basis of, and the variety of approaches to, assessment and intervention
- know human anatomy and physiology, sufficient to understand the nature and effects of injury or illness, and to conduct assessment and observation in order to establish patient service user management strategies
- understand the following aspects of biological science:
- · human anatomy and physiology, especially the dynamic relationships of human structure and function and the musculoskeletal, cardiovascular, cardio-respiratory, digestive and nervous systems
- · how the application of paramedic practice may cause physiological and behavioural change
- . human growth and development across the lifespan
- · the main sequential stages or normal development, including cognitive, emotional and social measures of maturation through the human life-span
- · normal and altered anatomy and physiology throughout the human lifespan
- · relevant physiological parameters and how to interpret changes from the norm
- · disease and trauma processes and how to apply this knowledge to the planning of the service user's pre-hospital care
- . the factors influencing individual variations in human function
- understand the following aspects of physical science:
- · principles and theories of physics, biomechanics, electronics and ergonomics that can be applied to paramedic practice
- the means by which the physical sciences can inform the understanding and analysis of information used to determine a diagnosis
- · the principles and application of measurement techniques based on biomechanics or electrophysiology
- understand the following aspects of behavioural science:
- $\cdot$  psychological and social factors that influence an individual in health and illness
- · how psychology and sociology can inform an understanding of physical and mental health, illness and health care in the context of paramedic practice and the incorporation of this knowledge into paramedic practice

## ·how aspects of psychology and sociology are fundamental to the role of the Paramedic in developing and maintaining effective relationships

- understand the following aspects of clinical science:
- $\cdot$  pathological changes and related clinical features of conditions commonly encountered by paramedics
- · the changes that result from paramedic practice, including physiological, pharmacological, behavioural and functional
- $\cdot$  the theoretical basis of assessment and treatment and the scientific evaluation of effectiveness
- · principles of evaluation and research methodologies which enable the integration of theoretical perspectives and research evidence into the design and implementation of effective paramedic practice
- the theories supporting problem solving and clinical reasoning

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- 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** 
  - know the theory and principles of paramedic practice
  - be able to use the following airway management techniques, as well as knowledge of when and how each airway adjunct can be utilised to best effect:
  - · endotracheal tube placement
  - · laryngeal mask airway
  - · needle thoracocentesis
  - · needle cricothyroidotomy
  - · oropharyngeal and nasopharyngeal airways
  - · hand powered and battery powered suction devices
  - be able to apply the following cardio-pulmonary resuscitation techniques:
  - · basic life support for new-borns, infants, children and adults patients
  - · advanced life support for new-borns, infants, children and adults patients
  - · the use of both Automated External Defibrillators and Manual Defibrillators
  - be able to apply the following fluid resuscitation and replacement techniques:
  - · IV access
  - · external jugular vein cannulation
  - · Intra Osseous access
  - · fluid therapy
  - know how and when to administer drugs as appropriate, including knowing the relevant indications, contraindications, therapeutic effects, side effects and dosages, and the relevant basic pharmacology, including the pharmacodynamics and pharmacokinetics
  - know how and when to use the full range of immobilisation and support equipment in line with current care guidelines, across all age ranges
  - know how and when to use the full range of ambulance equipment found on a typical emergency ambulance in line with current care guidelines, across all age ranges
  - know how to deal with situations involving multiple casualties, including road traffic accidents and fires involving trapped or injured persons, and know the principles of major incident management
  - be able to measure blood pressure using manual and electronic methods
  - be able to undertake auscultation to assess respiratory, cardiac and digestive functions
  - be able to give intra-muscular and subcutaneous injections
  - be able to use blood glucose monitoring to analyse glucose levels
- 3a.3 understand the need to establish and maintain a safe practice environment
  - 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

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- be able to select appropriate personal protective equipment and use it correctly
- be able to establish safe environments for <del>clinical</del>-practice, which minimise risks to <del>patients, clients and users</del> service users, those treating them, and others, including the use of hazard control and particularly infection control
- understand and be able to apply appropriate moving and handling techniques
- understand the nature and purpose of sterile fields and the paramedic's role and responsibility for maintaining them

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

#### **Section eleven: Physiotherapists**

#### **Expectations of a health professional**

## 1a: Professional autonomy and accountability

Registrant physiotherapists must:

- 1a.1 be able to practise within the legal and ethical boundaries of their profession
  - understand the need to act in the best interests of service users at all times
  - understand what is required of them by the Health Professions Council
  - understand the need to respect, and so far as possible uphold, the rights, dignity, values and autonomy of every patient, client and user service user including their role in the diagnostic and therapeutic process and in maintaining health
  - be aware of current UK legislation applicable to the work of their profession
- 1a.2 be able to practise in a non-discriminatory and non-oppressive manner
- <del>1a.3</del> be able to maintain confidentiality and obtain informed consent
- 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
  - be able to assess a situation, determine the nature and severity of the problem and call upon the required knowledge and experience to deal with the problem
  - be able to initiate resolution of problems and be able to exercise personal initiative
  - know the limits of their practice and when to seek advice or refer to another professional
  - recognise that they are personally responsible for and must be able to justify their decisions
- 1a.7 recognise the need for effective self-management of workload and resources and be able to practise accordingly
- 1a.8 understand the need for career-long self-directed learning

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2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential
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73

- 1a.8 understand the obligation to maintain fitness to practise
  - understand the need to practise safely and effectively within their scope of practice
  - understand the importance of maintaining health and care for themselves their own health
  - understand both the need to keep skills and knowledge up to date and the importance of career-long learning

#### 1b: Professional relationships

Registrant physiotherapists must:

- 1b.1 know the professional and personal scope of their practice and be able to make referrals
- 1b.1 be able to work, where appropriate, in partnership with other professionals, support staff, patients, clients and users service users, and their relatives and carers
  - understand the need to build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team
  - understand the need to engage <del>patients, clients, users</del> service users and carers in planning and evaluating diagnostics, treatments and interventions to meet their needs and goals
  - be able to make appropriate referrals
  - understand the structure and function of health, education and social care services in the UK and current developments, and be able to respond appropriately
- 1b.2 be able to contribute effectively to work undertaken as part of a multidisciplinary team
- 1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, patients, clients, users service users, their relatives and carers
  - be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
  - understand how communication skills affect the assessment of <del>patients</del>, elients and users service users, and how the means of communication should be modified to address and take account of factors such as age, physical and learning disability
  - be able to select, move between and use appropriate forms of verbal and non-verbal communication with patients, clients, users service users and others
  - be aware of the characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- understand the need to provide patients, clients and users service users (or people acting on their behalf) with the information necessary to enable them to make informed decisions
- understand the need to use an appropriate interpreter to assist <del>patients</del> **service users** whose first language is not English, wherever possible
- recognise that relationships with <del>patients, clients and users</del> service users should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility
- 1b.4 understand the need for effective communication throughout the care of the patient, client or user service users
  - recognise the need to use interpersonal skills to encourage the active participation of patients, clients and users service users

## The skills required for the application of practice

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

Registrant physiotherapists must:

- 2a.1 be able to gather appropriate information
- 2a.2 be able to **select and** use appropriate assessment techniques
  - be able to undertake and record a thorough, sensitive and detailed assessment, using appropriate techniques and equipment
    - be able to recognise the need to identify and take account of the physical, psychological, social and cultural needs of individuals and communities during the assessment process
- 2a.3 be able to undertake or arrange clinical **or scientific** 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

Registrant physiotherapists must:

- 2b.1 be able to use research, reasoning and problem solving skills to determine appropriate actions (and, in the case of clinical scientists, conduct fundamental research)
  - recognise the value of research to the systematic evaluation of practice
  - be able to <del>conduct</del> **engage in** evidence-based practice, evaluate practice systematically, and participate in audit procedures
  - be aware of methods commonly used in health and social care research a range of research methodologies
  - be able to demonstrate a logical and systematic approach to problem solving
  - be able to evaluate research and other evidence to inform their own practice

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.	
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None	

- recognise the need to discuss, and be able to explain the rationale for, the use of physiotherapy interventions
- be able to form a diagnosis on the basis of physiotherapy assessment
- 2b.2 be able to draw on appropriate knowledge and skills in order to make professional judgements
  - be able to change their practice as needed to take account of new developments
  - be able to demonstrate a level of skill in the use of information technology appropriate to their profession practice
- 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 elient groups distinguished by, for example, physical, psychological, environmental, cultural or socio-economic factors
  - be able to set goals and construct specific individual and group physiotherapy programmes
  - understand the need to agree the goals, priorities and methods of physiotherapy intervention in partnership with the service user
  - be able to apply problem-solving and clinical reasoning to assessment findings to plan and prioritise appropriate physiotherapy
  - be able to select, plan, implement and manage physiotherapy treatment aimed at the facilitation and restoration of movement and function
- 2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully
  - understand the need to maintain the safety of both <del>patients, clients and users,</del> **service users** and those involved in their care
  - ensure patients, clients and users service users are positioned (and if necessary immobilised) for safe and effective interventions
  - be able to deliver and evaluate physiotherapy programmes
  - be able to select and apply safe and effective therapeutic exercise, manual therapy and electrotherapies in order to alleviate patient symptoms and restore optimum function
  - be able to use mobilisation, respiratory physiotherapy, neuro-therapeutic handling and massage techniques
  - know and be able to apply the key concepts which are relevant to safe and effective practice as a supplementary prescriber in order to have their name annotated on the register.

This standard applies only to registrants who wish to have their name annotated on the register.

- 2b.5 be able to maintain records appropriately
  - be able to keep accurate, legible records and recognise the need to handle these records and all other <del>clinical</del>-information in accordance with applicable legislation, protocols and guidelines
  - understand the need to use only accepted terminology (which includes abbreviations) in making elinical records

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

#### 2c: Critical evaluation of the impact of, or response to, the registrant's actions

Registrant physiotherapists must:

- 2c.1 be able to monitor and review the ongoing effectiveness of planned activity and modify it accordingly
  - be able to gather information, including qualitative and quantitative data, that helps to evaluate the responses of <del>patients clients and users</del> service users to their care
  - be able to evaluate management intervention plans against treatment milestones using recognised health outcome measures and revise the plans as necessary in conjunction with the patient, client or user service user
  - recognise the need to monitor and evaluate the quality of practice and the value of contributing to the generation of data for quality assurance and improvement programmes
  - be able to make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately
  - understand that outcomes may not always conform to expectations but may still meet the needs of patients, clients or users
  - be able to evaluate treatment plans to ensure that they meet the physiotherapy needs of service users, informed by changes in circumstances and health status
- 2c.2 be able to audit, reflect on and review practice
  - understand the principles of quality control and quality assurance
  - be aware of the role of audit and review in quality management, including quality control, quality assurance and the use of appropriate outcome measures
  - be able to maintain an effective audit trail and work towards continual improvement
  - participate in quality assurance programmes, where appropriate
  - understand the value of reflection on clinical practice and the need to record the outcome of such reflection
  - recognise the value of case conferences and other methods of review

#### Knowledge, understanding and skills

3a:

Registrant physiotherapists must:

3a.1 know and understand the key concepts of the biological, physical, social, psychological and clinical sciences bodies of knowledge which are relevant to their profession-specific practice

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- understand the structure and function of the human body, relevant to their practice, together with  $\frac{1}{4}$  knowledge of health, disease, disorder and dysfunction
- be aware of the principles and applications of scientific enquiry, including the evaluation of treatment efficacy and the research process
- recognise the role of other professions in health and social care
- understand the theoretical basis of, and the variety of approaches to, assessment and intervention
- understand the following aspects of biological science:
- · normal human anatomy and physiology, especially the dynamic relationships of human structure and function and the neuro-muscular, musculo-skeletal, cardio-vascular and respiratory systems
- · patterns of human growth and development across the lifespan
- · factors influencing individual variations in human ability and health status
- · how the application of physiotherapy can cause physiological and structural change
- understand the following aspects of physical science:
- · the principles and theories from physics, biomechanics, applied exercise science and ergonomics that can be applied to physiotherapy
- · the means by which the physical sciences can inform the understanding and analysis of movement and function
- $\cdot$  the principles and application of measurement techniques based on biomechanics or electrophysiology
- · the application of anthropometric and ergonomic principles
- understand the following aspects of clinical science:
- $\cdot$  pathological changes and related clinical features commonly encountered in physiotherapy practice
- · physiological, structural, behavioural and functional changes that can result from physiotherapy intervention and disease progression
- the specific contribution that physiotherapy can potentially make to enhancing individuals' functional ability, together with the evidence base for this
- · understand the different concepts and approaches that inform the development of physiotherapy interventions
- understand the following aspects of behavioural science:
- . psychological, social and cultural factors that influence an individual in health and illness, including their responses to the management of their health status and related treatment
- . how psychology, sociology and cultural diversity inform an understanding of health, illness and health care in the context of physiotherapy and the incorporation of this knowledge into physiotherapy practice
- . theories of communication relevant to effective interaction with service users, carers, colleagues, managers and other health and social care professionals
- . theories of team working and leadership

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Title	Status	Int. Aud.
Review of the standards of	Final	Confidential
proficiency	DD: None	RD: None

The new profession-specific standards shown above are similar to those found in the profession-specific standards for paramedics. They have been added to reflect the standard content of pre-registration programmes in physiotherapy.

- 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
  - 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 elinical practice, which minimise risks to patients, clients and users service users, those treating them, and others, including the use of hazard control and particularly infection control
  - know and be able to apply appropriate moving and handling techniques

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.	
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None	

#### Section twelve: Prosthetists and Orthotists

## **Expectations of a health professional**

## 1a: Professional autonomy and accountability

Registrant prosthetists and orthotists must:

- 1a.1 be able to practise within the legal and ethical boundaries of their profession
  - understand the need to act in the best interests of service users at all times
  - understand what is required of them by the Health Professions Council
  - understand the need to respect, and so far as possible uphold, the rights, dignity, values and autonomy of every patient, client and user service user including their role in the diagnostic and therapeutic process and in maintaining health
  - be aware of current UK legislation applicable to the work of their profession
  - be aware of quality guidelines that apply to the specification of componentry
- 1a.2 be able to practise in a non-discriminatory and non-oppressive manner
- 1a.3 be able to maintain confidentiality and obtain informed consent
- 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
- be able to practise as an autonomous professional, exercising their own 1a.6: professional judgement
  - be able to assess a situation, determine the nature and severity of the problem and call upon the required knowledge and experience to deal with the problem
  - be able to initiate resolution of problems and be able to exercise personal initiative
  - know the limits of their practice and when to seek advice or refer to another professional
  - recognise that they are personally responsible for and must be able to justify their decisions
- recognise the need for effective self-management of workload and resources 1a.7 and be able to practise accordingly
- 1a.8 understand the need for career long self-directed learning

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

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- 1a.8 understand the obligation to maintain fitness to practise
  - understand the need to practise safely and effectively within their scope of practice
  - understand the importance of maintaining health and care for themselves their own health
  - understand both the need to keep skills and knowledge up to date and the importance of career-long learning

## 1b: Professional relationships

- 1b.1 know the professional and personal scope of their practice and be able to make referrals
- 1b.1 be able to work, where appropriate, in partnership with other professionals, support staff, patients, clients and users service users, and their relatives and carers
  - understand the need to build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team
  - understand the need to engage <del>patients, clients, users</del> **service users** and carers in planning and evaluating diagnostics, treatments and interventions to meet their needs and goals
  - be able to make appropriate referrals
  - recognise the need for effective communication with technical staff to ensure the appropriateness and quality of prostheses and orthoses
- 1b.2 be able to contribute effectively to work undertaken as part of a multidisciplinary team
- 1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, patients, clients, users service users, their relatives and carers
  - be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
  - understand how communication skills affect the assessment of <del>patients,</del> <del>clients and users</del> **service users**, and how the means of communication should be modified to address and take account of factors such as age, physical and learning disability
  - be able to select, move between and use appropriate forms of verbal and non-verbal communication with patients, clients, users service users and others
  - be aware of the characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status
  - understand the need to provide <del>patients, clients and users</del> service users (or people acting on their behalf) with the information necessary to enable them to make informed decisions

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- understand the need to use an appropriate interpreter to assist <del>patients</del> **service users** whose first language is not English, wherever possible
- recognise that relationships with patients, clients and users service users should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility
- 1b.4 understand the need for effective communication throughout the care of the patient, client or user service user
  - recognise the need to use interpersonal skills to encourage the active participation of patients, clients and users service users

#### The skills required for the application of practice

#### 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
  - be able to undertake and record a thorough, sensitive and detailed assessment, using appropriate techniques and equipment
  - be able to use contemporary technologies that aid in patient the assessment of service users, such as computerised gait analysis equipment
  - be able to complete an accurate clinical assessment and be able to analyse normal and abnormal gait, locomotor function and movement using both qualitative and quantitative means
  - be aware of patient the weight and potential level of activity of service users, and the uses that prostheses or orthoses will be subject to, as part of health and safety assessments
  - be able to measure and cast for prostheses and orthoses and, where necessary, rectify them
  - be able to prescribe orthoses or prostheses including, where necessary, the specification for manufacture, and recognise the need to carry out risk analyses when prescribing a non-approved combination of components from differing manufacturers
- 2a.3 be able to undertake or arrange elinical investigations as appropriate
- 2a.4 be able to analyse and **critically** evaluate the information collected be able to analyse normal and abnormal gait, locomotor function and movement using both qualitative and quantitative means

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

## 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 (and, in the case of clinical scientists, conduct fundamental research)
  - recognise the value of research to the systematic evaluation of practice
  - be able to <del>conduct</del> **engage in** evidence-based practice, evaluate practice systematically, and participate in audit procedures
  - be aware of methods commonly used in health and social care research a range of research methodologies
  - be able to demonstrate a logical and systematic approach to problem solving
  - be able to evaluate research and other evidence to inform their own practice
  - understand the psychology of loss and disability as it affects and influences prosthetic and orthotic management, and be able to apply such understanding to clinical decision-making
- 2b.2 be able to draw on appropriate knowledge and skills in order to make professional judgements
  - be able to change their practice as needed to take account of new developments
  - be able to demonstrate a level of skill in the use of information technology appropriate to their profession practice
  - be able to assess factors important to the relevant material specification of prostheses and orthoses and apply these when designing a device
  - recognise the social factors affecting the rehabilitation of patients service users
- 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 elient groups distinguished by, for example, physical, psychological, environmental, cultural or socio-economic factors
- 2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, Therapy or other actions safely and skilfully
  - understand the need to maintain the safety of both <del>patients, clients and users</del> **service users**, and those involved in their care
  - ensure patients, clients and users service users are positioned (and if necessary immobilised) for safe and effective interventions
  - understand the need to maintain all equipment to a high standard
  - be able to use equipment and machinery to undertake data collection and manufacture where and when required in a safe and competent manner
  - be able to provide, where appropriate, a suitable cast **or electronic data** to accompany the written information
- 2b.5 be able to maintain records appropriately

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.				
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None				

- be able to keep accurate, legible records and recognise the need to handle these records and all other elinical-information in accordance with applicable legislation, protocols and guidelines
- understand the need to use only accepted terminology (which includes abbreviations) in making <del>clinical</del> records

#### 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
  - be able to gather information, including qualitative and quantitative data, that helps to evaluate the responses of <del>patients, clients and users</del> **service users** to their care
  - be able to evaluate management intervention plans against treatment milestones using recognised health outcome measures and revise the plans as necessary in conjunction with the patient, client or user service user
  - recognise the need to monitor and evaluate the quality of practice and the value of contributing to the generation of data for quality assurance and improvement programmes
  - be able to make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately
  - understand that outcomes may not always conform to expectations but may still meet the needs of patients, clients or users
  - be able to evaluate the supply, fit and delivery of any device on an ongoing basis as part of the review mechanism, including the body-device interface, functional alignment, mechanical integrity, functional suitability, cosmesis, patient needs, clinical effectiveness, and patient's the needs and expectations of service users
- 2c.2 be able to audit, reflect on and review practice
  - understand the principles of quality control and quality assurance
  - be aware of the role of audit and review in quality management, including quality control, quality assurance and the use of appropriate outcome measures
  - be able to maintain an effective audit trail and work towards continual improvement
  - participate in quality assurance programmes, where appropriate
  - understand the value of reflection on clinical practice and the need to record the outcome of such reflection
  - recognise the value of case conferences and other methods of review

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential
				proficiency	DD: None	RD: None

#### Knowledge, understanding and skills

3a:

- 3a.1 know and understand the key concepts of the biological, physical, social, psychological and clinical sciences bodies of knowledge which are relevant to their profession-specific practice
  - understand the structure and function of the human body, relevant to their practice, together with  $\frac{1}{4}$  knowledge of health, disease, disorder and dysfunction
  - be aware of the principles and applications of scientific enquiry, including the evaluation of treatment efficacy and the research process
  - recognise the role of other professions in health and social care
  - understand the theoretical basis of, and the variety of approaches to, assessment and intervention
  - know human structure and function, especially the human musculoskeletal system
  - know the aetiology and pathophysiology of human disease and general genetic principles relevant to prosthetic or orthotic practice, and recognise when disorders are not amenable to prosthetic or orthotic treatment
  - understand the relevant materials including their properties structure and properties of materials and their appropriate application to prosthetic or orthotic hardware and clinical practice
  - understand biomechanical principles and the appropriate application of forces to the human body following prescription and supply of a prosthesis or orthosis in a manner which makes the application of such forces safe and effective in an episode of treatment
  - demonstrate a sound knowledge and understanding of the theoretical basis of prosthetic and orthotic science
- 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
  - 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 clinical practice, which minimise risks to patients, clients and users service users, those treating them, and others, including the use of hazard control and particularly infection control

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.			
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None			

- understand and be able to apply appropriate moving and handling techniques

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.				
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None				

#### **Section three: Radiographers**

#### **Expectations of a health professional**

## 1a: Professional autonomy and accountability

Registrant radiographers must:

- 1a.1 be able to practise within the legal and ethical boundaries of their profession
  - understand the need to act in the best interests of service users at all times
  - understand what is required of them by the Health Professions Council
  - understand the need to respect, and so far as possible uphold, the rights, dignity, **values** and autonomy of every <del>patient, client and user service user</del> including their role in the diagnostic and therapeutic process and **in maintaining health**
  - be aware of current UK legislation applicable to the work of their profession
  - be able to practise in accordance with current legislation governing the use of ionising **and non-ionising** radiation for medical and other purposes
- 1a.2 be able to practise in a non-discriminatory **and non-oppressive** manner
- 1a.3 be able to maintain confidentiality and obtain informed consent
- 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
  - be able to assess a situation, determine the nature and severity of the problem and call upon the required knowledge and experience to deal with the problem
  - be able to initiate resolution of problems and be able to exercise personal initiative
  - know the limits of their practice and when to seek advice or refer to another professional
  - recognise that they are personally responsible for and must be able to justify their decisions
- 1a.7 recognise the need for effective self-management of workload **and resources** and be able to practise accordingly
- 1a.8 understand the need for career-long self-directed learning
- 1a.8 understand the obligation to maintain fitness to practise

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.			
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None			

- understand the need to practise safely and effectively within their scope of practice
- understand the importance of maintaining health and care for themselves their own health
- understand both the need to keep skills and knowledge up to date and the importance of career-long learning

#### 1b: Professional relationships

Registrant radiographers must:

- 1b.1 know the professional and personal scope of their practice and be able to make referrals
- 1b.1 be able to work, where appropriate, in partnership with other professionals, support staff, patients, clients and users service users and their relatives and carers
  - understand the need to build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team
  - understand the need to engage <del>patients, clients, users</del> service users and carers in planning and evaluating diagnostics, treatments and interventions to meet their needs and goals
  - be able to make appropriate referrals
  - be able to interpret and act upon information from other health care professionals, in order to maximise health gain whilst minimising radiation dose to the patient
  - be aware of the general working of health and social care services
- 1b.2 be able to contribute effectively to work undertaken as part of a multidisciplinary team
- 1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users patients, clients, users, their relatives and carers
  - be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
  - understand how communication skills affect the assessment of <del>patients</del>, <del>elients and users, service users</del> and how the means of communication should be modified to address and take account of factors such as age, physical and learning disability
  - be able to select, move between and use appropriate forms of verbal and non-verbal communication with patients, clients, users service users and others
  - be aware of the characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status
  - understand the need to provide patients, clients and users service users (or people acting on their behalf) with the information necessary to enable them to make informed decisions

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- understand the need to use an appropriate interpreter to assist <del>patients</del> **service users** whose first language is not English, wherever possible
- recognise that relationships with <del>patients, clients and users</del> service users should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility
- 1b.2 be able to contribute effectively to work undertaken as part of a multidisciplinary team
- 1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users patients, clients, users, their relatives and carers
  - be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5
  - understand how communication skills affect the assessment of <del>patients,</del> <del>clients and users,</del> **service users** and how the means of communication should be modified to address and take account of factors such as age, physical and learning disability
  - be able to select, move between and use appropriate forms of verbal and non-verbal communication with patients, clients, users service users and others
  - be aware of the characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status
  - understand the need to provide <del>patients, clients and users</del> service users (or people acting on their behalf) with the information necessary to enable them to make informed decisions
  - understand the need to use an appropriate interpreter to assist patients whose first language is not English, wherever possible
  - recognise that relationships with patients, clients and users service users should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility
  - be able to advise other health care professionals about the relevance and application of radiotherapy or imaging modalities to the patient's needs Therapeutic radiographers only
  - understand the behaviour of people undergoing radiotherapy within the oncology setting, as well as that of their families and carers
  - understand the information and psychosocial needs of patients, their families and carers

Diagnostic radiographers only

- understand the psychology of illness, anxiety and uncertainty and the likely behaviour of patients undergoing diagnostic <del>radiographic</del> **imaging** procedures, as well as that of their families and carers
- 1b.4 understand the need for effective communication throughout the care of the patient, client or user service user
  - recognise the need to use interpersonal skills to encourage the active participation of patients, clients and users service users

89
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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- be aware of the need to empower patients to participate in the decisionmaking processes related to their radiotherapy or diagnostic imaging examination

## The skills required for the application of practice

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

Registrant radiographers must:

- 2a.1 be able to gather appropriate information
  - be able to use physical, graphical, verbal and electronic methods to collect information from a range of sources including patient history, radiographic images and biochemical reports
- 2a.2 be able to **select and** use appropriate assessment techniques
  - be able to undertake and record a thorough, sensitive and detailed assessment, using appropriate techniques and equipment
  - be able to assess, monitor and care for the patient before, during and after irradiation
- 2a.3 be able to undertake or arrange elinical investigations as appropriate
- 2a.4 be able to analyse and **critically** evaluate the information collected
  - be able to interrogate and process data and information gathered accurately in order to conduct the imaging procedure or radiotherapy most appropriate to the patient's needs

# 2b: Formulation and delivery of plans and strategies for meeting health and social care needs

Registrant radiographers must:

- 2b.1 be able to use research, reasoning and problem solving skills to determine appropriate actions (and, in the case of clinical scientists, conduct fundamental research)
  - recognise the value of research to the systematic evaluation of practice
  - be able to <del>conduct</del> **engage in** evidence-based practice, evaluate practice systematically, and participate in audit procedures
  - be aware of methods commonly used in health and social care research a range of research methodologies
  - be able to demonstrate a logical and systematic approach to problem solving
  - be able to evaluate research and other evidence to inform their own practice
  - understand the problems encountered at the patient-radiation patient or client radiation / technology interface and be able to find appropriate solutions to such problems
  - be able to select and explain the rationale for examination and treatment techniques and immobilisation procedures appropriate to the patient's physical and disease management requirements

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- 2b.2 be able to draw on appropriate knowledge and skills in order to make professional judgements
  - be able to change their practice as needed to take account of new developments
  - be able to demonstrate a level of skill in the use of information technology appropriate to their profession practice
  - be able to apply the risk-benefit philosophy to radiation exposure to protect both individual patients and the population gene pool
  - be able to calculate radiation doses and exposures
- 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 elient groups distinguished by, for example, physical, psychological, environmental, cultural or socio-economic factors
- 2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully
  - understand the need to maintain the safety of both <del>patients, clients and users</del> service users and those involved in their care
  - ensure patients, clients and users are positioned (and if necessary immobilised) for safe and effective interventions
  - be able to manage complex and unpredictable situations including the ability to adapt planned diagnostic imaging examinations, interventions or treatments and to manage adverse and critical care incidents, to prioritise workload and use of resources
  - be able to use independent methods to establish and confirm patient identity prior to treatment or imaging
  - recognise the need for spatial awareness, visual precision and manual dexterity in the precise and safe manipulation of treatment units or imaging equipment and related accessory equipment
  - be able to operate radiotherapy or diagnostic imaging equipment safely and accurately
  - be able to check that equipment is functioning accurately and within the specifications, and to take appropriate action in the case of faulty functioning and operation
  - know and be able to apply the key concepts which are relevant to safe and effective practice as a supplementary prescriber in order to have their name annotated on the register.

# This standard applies only to registrants who wish to have their name annotated on the register.

Diagnostic radiographers only

- be able to perform the full range of plain film and standard contrast agent examinations, including those undertaken on patients suffering from acute trauma, and where the

patient's medical, physical or mental health needs require examinations to be carried out in non-standard imaging environments

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- be able to manage and assist with fluoroscopic and complex contrast agent procedures
- be able to assist with perform a standard head computed tomographic (CT) examination, assist with CT examinations of the spine, chest and abdomen in acute trauma and to contribute effectively to other CT studies
- be able to manipulate exposure and image recording parameters to optimal effect
- be able to use to best effect the processing and related technology supporting film-based and computer-based imaging systems
- be able to distinguish disease and trauma processes as they manifest on diagnostic images
- be able to appraise the diagnostic image information for clinical manifestations and technical accuracy, and take further action as required Therapeutic radiographers only
- be able to scrutinise and interpret the radiation prescription in such a way that radiotherapy is delivered accurately and reproducibly
- be able to undertake complex radiation dose delivery calculations involving a range of radiation types and energies
- be able to generate a treatment plan and verify treatment parameters ensuring optimal radiotherapy prescription delivery
- be able to perform the full range of radiotherapy processes and techniques accurately and safely
- be able to localise the target volume precisely in relation to external surface markings and anatomical reference markings
- be able to interpret and evaluate images obtained during radiotherapy planning and treatment
- be able to recognise changing signs and symptoms and the progression of disease, decide not to treat (if necessary) and make appropriate referrals before administering any further radiation treatment

We have added an additional profession-above standard for therapeutic radiographers, as shown above. This relates to ensuring safe, effective and appropriate treatment for those undergoing radiation treatment.

- 2b.5 be able to maintain records appropriately
- be able to keep accurate, legible records and recognise the need to handle these records and all other <del>elinical</del> information in accordance with applicable legislation, protocols and guidelines
- understand the need to use only accepted terminology (which includes abbreviations) in making elinical records

#### 2c: Critical evaluation of the impact of, or response to, the registrant's actions

#### Registrants must:

2c.1 be able to monitor and review the ongoing effectiveness of planned activity and modify it accordingly

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- be able to gather information, including qualitative and quantitative data that helps to evaluate the responses of <del>patients clients and users</del> service users to their care
- be able to evaluate management intervention plans against treatment milestones using recognised health outcome measures and revise the plans as necessary in conjunction with the patient, client or user service user
- recognise the need to monitor and evaluate the quality of practice and the value of contributing to the generation of data for quality assurance and improvement programmes
- be able to make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately
- understand that outcomes may not always conform to expectations but may still meet the needs of patients, clients or users
- 2c.2 be able to audit, reflect on and review practice
- understand the principles of quality control and quality assurance
- be aware of the role of audit and review in quality management, including quality control, quality assurance and the use of appropriate outcome measures
- be able to maintain an effective audit trail and work towards continual improvement
- participate in quality assurance programmes, where appropriate
- understand the value of reflection on clinical practice and the need to record the outcome of such reflection
- recognise the value of case conferences and other methods of review

#### Knowledge, understanding and skills

3a:

Registrant radiographers must:

- 3a.1 know and understand the key concepts of the biological, physical, social, psychological and clinical sciences bodies of knowledge which are relevant to their profession-specific practice
  - understand the structure and function of the human body, relevant to their practice, together with  $\frac{1}{4}$  knowledge of health, disease, disorder and dysfunction
  - be aware of the principles and applications of scientific enquiry, including the evaluation of treatment efficacy and the research process
  - recognise the role of other professions in health and social care
  - understand the theoretical basis of, and the variety of approaches to, assessment and intervention
  - know the physical principles of radiation generation, interaction, modification and protection underpinning the use of radiation for diagnosis or treatment
  - understand the risk benefit philosophy and principles involved in the practice of diagnostic or therapeutic radiography
  - understand the radiobiological principles on which the practice of radiography is based

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- understand concurrent and common pathologies and mechanisms of disease
- understand the capability, applications and range of technological equipment used in diagnostic imaging or radiotherapy
- understand radiation dosimetry and the principles of dose calculation
- know the pharmacology of drugs used in diagnostic imaging, or oncology as it relates to radiotherapy practice
- understand the methods of administration of drugs
- understand the philosophy underpinning the development of the profession of radiography
- understand the role of the radiographer in the promotion of health and health education in relation to healthy living and health screening for disease detection
- be aware of the current developments and trends in the science and practice of radiography
- understand the quality assurance processes in place within diagnostic imaging or radiotherapy
- understand the legislative, policy, ethical and research frameworks that underpin, inform and influence practice
- know the concepts and principles involved in the practice of diagnostic imaging orradiotherapy and how these inform and direct clinical judgement and decision-making
- be able to formulate and provide information to patients and their carers about the treatment or imaging process and procedures, with regular reappraisal of their information needs, as appropriate
- be able to remove and re-apply dressings and supports appropriately and in a safe, effective and considerate manner
- distinguish between normal and abnormal appearances evident on images
- know the physical and scientific principles on which image formation using ionising and non-ionising radiation is based

Therapeutic radiographers only

- know the biochemical science of radiation pathophysiology
- know the structure and function of the human body in health and disease, especially regional and cross sectional anatomy of the head and trunk, histology, haematology,

and the lymphatic and immune systems

- know the diagnostic procedures, investigations and physiological symptoms which result in patients being referred for radiotherapy
- understand oncology, the pathophysiology of solid and systemic malignancies, epidemiology, aetiology and the management and impact of cancer

Diagnostic radiographers only

- know the signs and symptoms of disease and trauma that result in patients being referred for diagnostic imaging procedures
- know the structure and function of the human body in health, disease and trauma, especially the musculo-skeletal system, the soft tissue organs, regional and cross-sectional anatomy of the head and trunk, and the cardiovascular, respiratory, genito-urinary, gastro-intestinal and neuro-endocrine systems
- -know the physical and scientific principles on which image formation using Ionising radiation is based

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.		
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None		

- 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 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 elinical practice, which minimise risks to patients, clients and users service users, those treating them, and others, including the use of hazard control and particularly infection control
  - understand the need to ensure the physical and radiation safety of all individuals in the immediate work environment at all times
  - 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 dealing with waste and spillages correctly
  - know and be able to apply appropriate moving and handling techniques
  - be able to use basic life support techniques and be able to deal safely with clinical emergencies

	76						
Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.	
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None	

#### Section fourteen: Speech and language therapists

## **Expectations of a health professional**

## 1a: Professional autonomy and accountability

Registrant speech and language therapists must:

- 1a.1 be able to practise within the legal and ethical boundaries of their profession
  - understand the need to act in the best interests of service users at all times
  - understand what is required of them by the Health Professions Council
  - understand the need to respect, and so far as possible uphold, the rights, dignity, values and autonomy of every patient, client and user service users including their role in the diagnostic and therapeutic process and in maintaining health
  - be aware of current UK legislation applicable to the work of their profession
  - -be aware of current education, health and social care legislation in the UK applicable to the work of speech and language therapists
  - understand the ethical and legal implications of withholding and withdrawing feeding
- 1a.2 be able to practise in a non-discriminatory and non-oppressive manner
- be able to maintain confidentiality and obtain informed consent
- 1a.3 understand the importance of and be able to maintain confidentiality - be aware that the concepts of confidentiality and informed consent extend to illustrative records such as video and audio recordings
- 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
  - be able to assess a situation, determine the nature and severity of the problem and call upon the required knowledge and experience to deal with the problem
  - be able to initiate resolution of problems and be able to exercise personal initiative
  - know the limits of their practice and when to seek advice or refer to another professional
  - recognise that they are personally responsible for and must be able to justify their decisions
- 1a.7 recognise the need for effective self-management of workload and resources and be able to practise accordingly

96							
Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.	
2006-06-22	а	POL	PPR	Review of the standards of	Final DD: None	Confidential	

- 1a.8 understand the obligation to maintain fitness to practise
  - understand the need to practise safely and effectively within their scope of practice
  - understand the importance of maintaining health and care for themselves their own health
  - understand both the need to keep skills and knowledge up to date and the importance of career-long learning

## 1b: Professional relationships

Registrant speech and language therapists must:

- 1b.1 know the professional and personal scope of their practice and be able to make referrals
- 1b.1 be able to work, where appropriate, in partnership with other professionals, support staff, patients, clients and users service users, and their relatives and carers
  - understand the need to build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team
  - understand the need to engage <del>patients, clients, users</del> **service users** and carers in planning and evaluating diagnostics, treatments and interventions to meet their needs and goals
  - be able to make appropriate referrals
  - be able to apply appropriate referral practices within health, social services and educational settings
  - recognise that the need to work with others includes health, social and educational professionals
  - recognise the importance of working in partnership with <del>clients</del> **service users** and their families
  - understand health education and how it relates to communication and swallowing
  - be aware of the structure and function of the education, social and healthcare services in the UK, and current developments
- 1b.2 be able to contribute effectively to work undertaken as part of a multidisciplinary team
- 1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, patients, clients, users service users, their relatives and carers
  - be able to communicate in English to the standard equivalent to level 8 of the International English Language Testing System, with no element below 7.5

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

This requirement is stricter for speech and language therapists than for all other professions, as communication in English is a core professional skill: see 2h 4

- understand how communication skills affect the assessment of <del>patients</del>, <del>clients and users</del> **service users**, and how the means of communication should be modified to address and take account of factors such as age, physical and learning disability
- be able to select, move between and use appropriate forms of verbal and non-verbal communication with patients, clients, users service users and others
- be aware of the characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status
- understand the need to provide patients, clients and users service users (or people acting on their behalf) with the information necessary to enable them to make informed decisions
- understand the need to use an appropriate interpreter to assist <del>patients</del> **service users** whose first language is not English, wherever possible
- recognise that relationships with <del>patients, clients and users</del> **service users** should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility
- 1b.4 understand the need for effective communication throughout the care of the patient, client or user service users
  - recognise the need to use interpersonal skills to encourage the active participation of patients, clients and users service users

#### The skills required for the application of practice

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

Registrant speech and language therapists must:

- 2a.1 be able to gather appropriate information
- 2a.2 be able to **select and** use appropriate assessment techniques
  - be able to undertake and record a thorough, sensitive and detailed assessment, using appropriate techniques and equipment
  - be able to administer, record, score and interpret a range of published and self-generated assessment tools to describe and analyse clients' service users' abilities and needs using, where appropriate, phonetic transcription, linguistic analysis, instrumental analysis and psycholinguistic assessment
- 2a.3 be able to undertake or arrange <del>clinical</del> investigations as appropriate
- 2a.4 be able to analyse and **critically** evaluate the information collected

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential
				proficiency	DD: None	RD: None

98

## 2b: Formulation and delivery of plans and strategies for meeting health and social care needs

Registrant speech and language therapists must:

- 2b.1 be able to use research, reasoning and problem solving skills to determine appropriate actions (and, in the ease of clinical scientists, conduct fundamental research)
  - recognise the value of research to the systematic evaluation of practice
  - be able to conduct engage in evidence-based practice, evaluate practice systematically, and participate in audit procedures
  - be aware of methods commonly used in health and social care research a range of research methodologies
  - be able to demonstrate a logical and systematic approach to problem solving
  - be able to evaluate research and other evidence to inform their own practice
- 2b.2 be able to draw on appropriate knowledge and skills in order to make professional judgements
  - be able to change their practice as needed to take account of new developments
  - be able to demonstrate a level of skill in the use of information technology appropriate to their profession practice
  - be able to apply knowledge of communication disorder, linguistics, phonetics, psychology and biomedical sciences to the identification, assessment and differential diagnosis of a range of communication and swallowing disorders
- 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 elient groups distinguished by, for example, physical, psychological, environmental, cultural or socio-economic factors
  - be able to recognise the influence of situational contexts on communicative functioning and swallowing status
  - recognise the possible contribution of social, psychological and medical factors to clients' communication difficulties and swallowing status
  - be able to evaluate the effects of communication difficulties and swallowing status on the psychosocial well-being of clients and their families and carers
- 2b.4 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully
  - understand the need to maintain the safety of both <del>patients, clients and users,</del> **service users** and those involved in their care
  - be able, as a core professional skill for speech and language therapists, to

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

communicate in English to the standard equivalent to level 8 of the International English Language Testing System, with no element below 7.5

- 2b.5 be able to maintain records appropriately
  - be able to keep accurate, legible records and recognise the need to handle these records and all other elinical information in accordance with applicable legislation, protocols and guidelines
  - understand the need to use only accepted terminology (which includes abbreviations) in making elinical records

#### 2c: Critical evaluation of the impact of, or response to, the registrant's actions

Registrant speech and language therapists must:

- 2c.1 be able to monitor and review the ongoing effectiveness of planned activity and modify it accordingly
  - be able to gather information, including qualitative and quantitative data that helps to evaluate the responses of patients, clients and users service users to their care
  - be able to evaluate management intervention plans against treatment milestones using recognised health outcome measures and revise the plans as necessary in conjunction with the patient, client or user service user
  - recognise the need to monitor and evaluate the quality of practice and the value of contributing to the generation of data for quality assurance and improvement programmes
  - be able to make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately
  - understand that outcomes may not always conform to expectations but may still meet the needs of patients, clients or users
- 2c.2 be able to audit, reflect on and review practice
  - understand the principles of quality control and quality assurance
  - be aware of the role of audit and review in quality management, including quality control, quality assurance and the use of appropriate outcome measures
  - be able to maintain an effective audit trail and work towards continual
  - participate in quality assurance programmes, where appropriate
  - understand the value of reflection on clinical practice and the need to record the outcome of such reflection
  - recognise the value of case conferences and other methods of review

100						
Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of	Final	Confidential

#### Knowledge, understanding and skills

3a:

Registrant speech and therapists must:

- 3a.1 know and understand the key concepts of the biological, physical, social, psychological and clinical sciences bodies of knowledge which are relevant to their profession-specific practice
  - understand the structure and function of the human body, relevant to their practice, together with a-knowledge of health, disease, disorder and dysfunction
  - be aware of the principles and applications of scientific enquiry, including the evaluation of treatment efficacy and the research process
  - recognise the role of other professions in health and social care
  - understand the theoretical basis of, and the variety of approaches to, assessment and intervention
  - understand linguistics, including phonetics, psycholinguistics, sociolinguistics and all levels of normal processing
  - understand biomedical and medical sciences as relevant to the development and maintenance of communication and swallowing
  - understand psychology, as relevant to normal and impaired communication, psychological and social well-being
  - understand, in relation to the practice of speech and language therapy, sociology, including its application to educational, health and workplace settings and within multi-cultural societies
  - understand educational philosophy and practice and the relationship between language and literacy
  - understand therapeutic contexts, models and processes, relevant to the practice of speech and language therapy
  - understand developmental and acquired disorders of speech, language, communication and swallowing
- 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** 
  - be able to use knowledge of speech and language therapy to assess and manage people with the following disorders:
    - · developmental speech and language disorders
    - · acquired speech and language disorders
    - · voice disorders
    - · fluency disorders
    - · swallowing disorders
    - · developmental or acquired cognitive disorders
- 3a.3 understand the need to establish and maintain a safe practice environment

	101						
	Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
ĺ	2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

- 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 clinical practice, which minimise risks to patients, clients and users service users, those treating them, and others, including the use of hazard control and particularly infection control

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Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-06-22	а	POL	PPR	Review of the standards of proficiency	Final DD: None	Confidential RD: None

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