# Health Professions Council 29 March 2007

## REPORTS FROM COUNCIL REPRESENTATIVES AT EXTERNAL MEETINGS

# **Executive Summary and Recommendations**

#### Introduction

The attached feedback forms have been received from the following members of Council, reporting back from meetings at which they have represented the HPC;

Dr Anna van der Gaag Diane Waller Annie Turner Jackie Pearce x 2 Sue Griffiths

#### **Decision**

The Council is requested to note the document. No decision is required.

## **Background information**

None

**Resource implications** 

None

**Financial implications** 

None

**Background papers** 

None

**Appendices** 

Copies of feedback forms

Date of paper

15 March 2007

## FEEDBACK SHEET TO BE COMPLETED AFTER THE MEETING

## ATTENDANCE AT MEETINGS TO REPRESENT HPC

Name of Council Member	Dr Anna van der Gaag
Organisation hosting Conference/Meeting	ESTeL, Lisbon
Title of Meeting	National Conference
Venue	Lisbon
Date of Meeting	13 January 2007
Who asked you to attend?	CEO
Title of Talk/Presentation given (if any)	Regulation of healthcare professions: the UK case
Approximate costs (subject to budget)	Attendance allowance plus Taxi fare from airport to home
Authorisation by Chief Executive (not required if HPC has asked that you attend the meeting)	
Signature of member (not required if returned by email)  Date	

This form has been prepared for those Council and Committee members who represent the Health Professions Council at meetings or conferences. Please complete as much of the

above as you can and return by post to Olive Cooper, Council and Committee Secretariat, Health Professions Council, Park House, 184 Kennington Park Road, London, SE11 4BU,

This will be passed to the Chief Executive if authorisation is required. <u>Completed forms</u> should be received before the meeting takes place.

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

Name of Council Member	Dr Anna van der Gaag
Title of Meeting	ESTeL National conference
<b>Date of Conference</b>	13 January 2007
Approximate number of people at the conference/meeting	300

#### **Issues of Relevance to HPC**

ESTeL is a government funded allied health professions training school in Lisbon. They invited us to give a presentation at their national conference celebrating 25 years since the school was established. Eighteen professional courses are delivered at the school and most students receive some of their education in interdisciplinary classes. The school has polytechnic status but has plans to merge with the University of Lisbon. They have no research track record but are increasing this year on year in order to achieve university status. A purpose built school with excellent facilities compared with many UK HEIs (except for poor disabled access and a small physio lab!).

In addition to HPC's presentation, there were presentations from colleagues in Brazil, Mozambique, Angola as well as presentations by the Portuguese Commissioner for Health, and many clinicans, lecturers and students. The presentations from Brazil and the Afican nations reflected the close links that ESTeL has with trainings schools in these countries.

I had conversations with the Portuguese Commissioner for Health, the Dean, Vice Dean and senior lecturers on the radiography and biomedical sciences courses. They were interested in the HPC model because they are in the process of reviewing their own system of regulation. The current system is based on a crude legal framework which allows police some powers to control private practitioners. For example, clinicians who work in private practice can be 'closed down' if they are reported as 'incompetent' This is a rare occurence and the system does not satisfy the majority of clinicians who would like to see profession led regulation in Portugal. Many would like a regulator for each profession. One proposal is an overarching Council and each profession with its own disciplinary board (with representation from the professional bodies). Much of the conversations were around the advantages and disadvantages of this approach.

This was primarily a visit to explain HPC processes and to promote the concept of

multi professional regulation. The British system was held in high regard and therefore representation from HPC was important to the school as they try to influence policy in Portugal. There was an awareness that South Africa and Ireland have similar systems to the UK, in contrast with US, Canada, Australia who have uni-professional and/or state specific regulatory systems. There is scepticism over the multi professional model, mainly because there is no precedent for it in Portugal (doctors, dentists and nurses have their own regulatory body) and many do not think it will work in Portugal because the medical hierarchies are still very strong and therefore the other health professions tend to model their systems on the doctors.

### Learning points;

**Workforce planning**: Radiography has 22 schools in the country, half of them privately run. There were an increasing number of unemployed radiographers as a result but the government had no powers to limit the number of schools – the feeling was that they would close for economic reasons eventually.

**Interprofessional learning**: In the school itself, extensive and well established. No links with nursing school next door. ESTeL probably unusual – a centre of excellence – most schools do not use this model. They have concerns about Bologna – would prefer not to have a limit of 3 years on all their courses for example but are committed to making it work and have good networks in this arena it seems.

**Practice placements**: Similar difficulties to the UK. No patients seen on site.

**Biomedical scientists**: favour a competency driven model of learning which starts from 'what the provider wants' rather than the specialisation found in other countries such as the US.

**Paramedics**: There is no paramedic profession in Portugal – emergencies are dealt with by the fire service plus doctors on call.

**Health service management**: presentation by a senior health service manager suggests that the Portuguese are implementing many of the same health policies (e.g. increased accountability, outsourcing, IT reviews, management control systems, improved PR and use of benchmark statements) and that on a clinical level efficiency and effectiveness are key messages.

**UK higher education**: Held in high regard. English is the second language of Portugal and many of the text books and almost all the online journals are in English.

**Training cost comparisons** (Amadeu Ferro's paper on costs and duration of courses in US, Canada, South Africa and Australia) found average cost of training allied health professionals in these countries is around 30,000 euros.

### **Action points**;

- 1. Contact radiography Council members and suggest a contact with Luis Lanca, who is keen to develop radiography contacts in the UK.
- 2. Send copy of HPO to Luis Lanca for Dr Antonia Santos, Commissioner of Health, Portuguese government
- 3. Copies of Erasmus Propectus (English) and history of the school (Portuguese). We were also given a paperweight and an ESTeL medal.

#### Conclusion

This was a useful visit, both in terms of promoting the reputation of the HPC and in learning more about the similarities and differences in education and health in another European country.

Travel and accommodation was paid for by ESTeL.

Please complete as much of the above as you can and return by post to Council and Committee Secretariat, Health Professions Council, Park House, 184 Kennington Park Road, London, SE11 4BU July 2004

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

Name of Council Member	Diane Waller
Title of Conference/Meeting	The Age Agenda
Date of Conference	Tues 20 <sup>th</sup> February 2007
Approximate number of people at the	500 plus
conference/meeting	

#### Issues of Relevance to HPC

The morning was taken up by presentations from speakers from statutory and voluntary services concerned with older people's health and well-being, and ended with a speech from Ivor Lewis MP. The workshops I attended focussed on service delivery, mainly mental health services, and on care. The Health Care Commission representative described their role. But the most useful workshop from HPC perspective was that given by Dr June Crown (Chair of Inquiry into Older People's Mental Health and Well-Being) and Professor Subu Banerjee from the Inst of Psychiatry, who confirmed the poor and patchy level of services for older people with mental health problems and dementia. Attitude change was highlighted as essential and that could come from training of health and social care professionals

and research.

The final session was a panel, at which Sir Derek Wanless and others presented their views.

I think it will be important for the HPC and other health regulators to see if and how training programmes are addressing service delivery to older people with MH problems.

It is common knowledge that the population of over 65s is growing rapidly but the current cut-off from adult services at this age (still quite common in many areas) causes many problems. However, if 'elderly services' are merged with adult services, this might mean even less attention, and non-specialist attention, is available.

It was an extremely well attended and important occasion and complements the work of the Age Concern Inquiry.

**Key Decisions Taken** 

To continue to press government for urgent attention to be given to older people's health and well-being and to attend to issues such as housing, poverty, appropriateness and accessibility of services.

To encourage anyone connected with training and regulation to examine how trainees are being taught about older people's health, especially mental health.

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

Name of Council Member	Annie Turner
Title of Conference/Meeting	COT Council
<b>Date of Conference</b>	9 <sup>th</sup> January 2007
Approximate number of people at the conference/meeting	25

Issues of Relevance to HPC
My role at this meeting is to update the COT Council on HPC issues and activities. The main areas of debate related to the Council's view on the raise in membership fees proposed by COT and the implications for COT income from its membership.
Interest was expressed in the Fitness for Practice report and the allegations and sanctions imposed on occupational therapists. There was also debate around the possible implications of the response to the Foster review
Key Decisions Taken
No decisions were taken that effect HPC.

Please complete as much of the above as you can and return by post to Sabrina Donaldson, Council and Committee Secretariat, Health Professions Council, Park House, 184 Kennington Park Road, London, SE11 4BU, or alternatively by e-mail to niamh.osullivan@hpc-uk.org.

February 2007

## FEEDBACK SHEET TO BE COMPLETED AFTER THE MEETING

Name of Council Member	Jacki Pearce
Title of Conference/Meeting	ISB Meeting
Date of Conference	31 January 2007
Approximate number of people at the conference/meeting	20
Issues of Relevance to HPC	
Discussion/approval of submissions to the Ni agenda).  Discussion with other Board members around an agreed list of accepted abbreviations to be future.	d record keeping standards and the need for
Key Decisions Taken	

Please complete as much of the above as you can and return by post to Sabrina Donaldson, Council and Committee Secretariat, Health Professions Council, Park House, 184

**Date** 2007-03-15

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Dept/Cmte

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MeetingsMarch2007

Status Final DD: None Int. Aud. Public RD: None Kennington Park Road, London, SE11 4BU, or alternatively by e-mail to niamh.osullivan@hpc-uk.org.

February 2007

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

Name of Council Member	Jacki Pearce
Title of Conference/Meeting	NHS ISB Training
Date of Conference	7 March 2007
Approximate number of people at the conference/meeting	30
Issues of Relevance to HPC	
Open standards	
Online appraisal of standards	
<b>Key Decisions Taken</b>	
N/a	

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## FEEDBACK SHEET TO BE COMPLETED AFTER THE MEETING

Title of Conference/Meeting	
	Radiotherapy Weekend Conference College of Radiographers
<b>Date of Conference</b>	3 – 4 February 2007
Approximate number of people at the conference/meeting	Approx. 120
Issues of Relevance to HPC	
This years conference featured new develops treatment incidents. Presentations included: The radiotherapy incident group gave an upon Also outlines of various initiatives from the Health level for radiotherapy resourcing and The need for staff to have research skills and Presentation and discussion on accreditation only the HPC initial qualifying standard laid Presentations on clinical findings using new Much of the above will be useful for the radiopresently undertaking.  Conference was useful and interesting.  I am grateful to the HPC for the chance to at	date. National Group working at Department of I staffing. d qualifications. of higher level/advanced skills as there is I down. technology. iotherapy textbook rewrite which I am
Key Decisions Taken	

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