

Council, 29 March 2012

Policy and Standards Department work plan 2012/2013

Executive summary and recommendations

#### Introduction

A draft work plan for the Policy and Standards Department for April 2012 to March 2013 is attached.

The Department also produces a 'standards workplan'. This is revised every year and appended to the main workplan.

#### **Decision**

The Council is invited to discuss and agree the attached work plan (subject to any changes arising from the Council's discussion).

## **Background information**

None

#### **Resource implications**

The resource assumptions for the attached draft workplan are detailed in the introduction and form part of the assumptions that make up the HPC five year plan.

#### **Financial implications**

The financial assumptions of the attached draft workplan form part of the assumptions for the Policy and Standards budget for 2011/2012.

## **Appendices**

Standards workplan

## Date of paper

19 March 2012



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#### 1. Introduction

1.1 This document sets out the work of the Policy and Standards Department in the financial year 2012/2013.

#### The Policy and Standards Department

- 1.2 The Department's main responsibilities are:
  - assisting the Council in developing strategy and policy;
  - assisting the Council in setting and reviewing standards;
  - assisting the Council in drafting guidance;
  - managing and supporting Professional Liaison Groups (PLG);
  - running consultations;
  - liaising with the Council for Healthcare Regulatory Excellence on their annual performance review, and other cross-regulatory projects; and
  - helping to ensure consistency of approach across all HPC departments.

## Policy and Standards planning

- 1.3 The nature of the issues that the Department deals with are such that work undertaken will consist of both planned projects and work which arises as a result of external factors, such as changes in legislation, changes to the professions, and other developments that are often unpredictable. Hence, in allocating resources, maintaining the ability to respond to the external environment is an important factor.
- 1.4 The following projects have been identified as relative priorities for the Department in the coming year.
  - Service user involvement in the design and delivery of education and training programmes approved by the HPC
  - Review of the standards of proficiency
  - Student fitness to practise and registration
  - Approved Mental Health Professional (AMHP) criteria
  - Herbal practitioners
  - Standards for prescribing
  - Revalidation
- 1.5 The following projects have been identified as of relatively low priority.
  - CPD standards, audits, process
  - Threshold level of qualification for entry to the Register
  - Review of guidance documents
  - CPD sample profiles

## Resourcing

1.6 The Department currently consists of four employees.

Michael Guthrie	Director of Policy and Standards
Sarah Oliver	PA to Director of Policy and Standards and PA to Director of Communications
Charlotte Urwin	Policy Manager
Alison Croad	Policy Officer

- 1.7 The Director of Policy and Standards is responsible for devising and writing the Department work plan, and overseeing its resourcing and implementation, the day-to-day running of the department, managing and development the policy team, developing new projects and stakeholder management.
- 1.8 The PA provides PA support to the Director of Policy and Standards and to the Director of Communications. They also provide administrative support for the Policy and Standards Department including handling incoming correspondence, maintaining databases and handling consultation responses.
- 1.9 The Policy Manager often takes particular responsibility for a broad area of work and the projects in that area (e.g. standards) or work across different areas, taking responsibility for more complex projects or pieces of work and supporting the work of the Director of Policy and Standards.
- 1.10 The Policy Officer takes on a variety of different projects to enable them to gain a breadth of experience, including education, standards, Europe, and other areas of the Department's work. Their work comprises responsibility for (typically) smaller projects and assisting the Director / Policy Manager in undertaking tasks within their area of responsibility.

#### **About this document**

- 1.11 This document is divided into ten sections.
  - Section 2 provides a summary of some of the projects successfully delivered in 2012/2013.
  - Sections 3 to 6 describe the projects for 2012/2013 in more detail, grouped in four areas: developing and maintaining the existing business; the Health and Social Care Bill 2011 and the Command Paper; other projects; and department activities.
  - Section 7 looks at equality and diversity.
  - Section 8 outlines potential projects for the period 2013-2015.
  - Section 9 looks at the risks owned by the Department.
- 1.12 Annex A provides a summary table of projects for the 2012/2013 financial year, referenced against the HPC's strategic objectives. This includes timescales for the overall project areas where applicable and for key milestones. The activities outlined in sections 3 to 6 of this document are subject to discussion / approval by the Council or a Committee as appropriate.

## 2. Projects delivered in 2011/2012

2.1 This section outlines some of the projects successfully delivered in the last financial year.

#### **Developing and maintaining the existing business**

- Kingston University and St George's (University of London) were commissioned to undertake research looking at service user involvement in the design and delivery of education and training programmes, the outcomes of which were reported to the Education and Training Committee in March 2012.
- The review of the standards of proficiency continued. The first six professions' standards were reviewed and were considered by the Education and Training Committee and the Council in March 2012.
- A consultation was held on revised 'Guidance on health and character', with revised guidance due to be published by the end of March 2012.
- The analysis of responses to the consultation on post-registration qualifications was completed. The Education and Training Committee agreed its response to the consultation; a policy statement setting out in clear terms its approach to annotation of the Register; and that podiatric surgeons should in the future be annotated on the Register.
- The Department continued to be involved in reviewing fitness to practise case to answer and final hearing decisions. Two reports on the final hearing decision audit were written for the Fitness to Practise Committee.
- CPD sample profiles were published on the HPC website for hearing aid dispensers, music therapists and practitioner psychologists.

# Health and Social Care Bill 2011 and the Command Paper 'Enabling Excellence'

- The work exploring the regulation of psychotherapists and counsellors concluded, with the Council considering a final paper in May 2011.
- A number of activities have taken place to prepare for the regulation of social workers in England from 2012.
  - The work of the Professional Liaison Group (PLG) which put together draft standards of proficiency for social workers in England concluded. Consultations were held on the draft standards of proficiency and the proposed threshold level of qualification for entry to the Register for social workers in England.
  - Our broad approach to approving Approved Mental Health Professional (AMHP) training following the opening of the register of social workers in England was agreed.
  - Our approach to recognition and reciprocity of training and registration in Scotland, Wales and Northern Ireland was agreed. This will facilitate the HPC registration of social workers trained and/or registered elsewhere in the UK.
  - The Department participated in the cross-department project to open the Register to social workers in England and continued to meet with external stakeholders and participate in external groups.
- In light of the Bill and the forthcoming regulation of social workers in England, a consultation was launched seeking the views of stakeholders on student fitness to practise and registration. An impact assessment was also prepared to accompany the consultation.
- The Council considered a number of papers on the subject of voluntary registration and a policy statement setting out the Council's initial thinking was produced.

#### Other

 We have continued to participate in Department of Health work to extend independent prescribing to physiotherapists and chiropodists /podiatrists. Work has commenced to draft standards for prescribing which we plan to use in the future to approve supplementary and independent prescribing programmes.

- The work on revalidation progressed well with reports published on international and UK revalidation models. The Picker Institute Europe undertook a literature review looking at service user feedback tools and their potential use in the HPC's processes. Multi-variant analysis of fitness to practise data continued.
- The Department co-ordinated the HPC's CHRE performance review submission for 2011/2012 and wrote some of the content.
- The HPC's Welsh Language Scheme received approval from the Welsh Language Board.
- A number of articles have appeared in the 'In Focus' newsletter on standards related topics over the course of the year.
- The Department participated as members of various working groups and attended numerous other groups and meetings with stakeholders, including delivering presentations on topics such as CPD and the regulation of social workers in England.
- The Department responded to six external consultations and five consultations commenced in 2011/2012.

## 3. Developing and maintaining the existing business

- 3.1 This section outlines the department's activities in 2012/2013 which are focused on developing and maintaining the existing business. For example, this includes the following.
  - Reviewing and revising standards, guidance and other documents.
  - Reviewing processes, approaches and policy positions.
  - Undertaking or commissioning research to identify areas for further development or improvement.

# Service user involvement in design and delivery of education and training programmes approved by the HPC

- 3.2 Research was commissioned in 2011/2012 looking at the involvement of service users in the design and delivery of HPC approved programmes.
- 3.3 The Education and Training Committee discussed the research at its meeting in March 2012 and agreed in principle (subject to consultation) that the standards of education and training should be amended to more expressly require service user involvement in the design and/or delivery of HPC approved education and training programmes.
- 3.4 The activities in this area in the coming year will include the following.
  - Developing proposals for the terms of a new standard, supporting quidance and for implementation.
  - A public consultation on the proposals will be held.
  - The results of the consultation will be analysed and discussed by the Education and Training Committee.

#### Review of the standards of proficiency

- 3.5 This is an on-going piece of work.
- 3.6 The review is being taken forward on a rolling basis, with standards for the professions being reviewed in batches. The review involves the following.
  - Producing a collated draft of the existing profession-specific and detailed generic standards against the new structure of 15 generic standards.
  - Seeking the views and comments of the professional bodies on changes that they consider may be necessary to the standards.
  - Considering that information to produce a proposed draft for consultation (for discussion / approval by the Education and Training Committee and the Council).
  - Publicly consulting on a draft set of standards for each profession.
  - Revising the draft standards after consultation.
  - Republishing the new standards and implementing them on an appropriate basis in the operational processes.
- 3.7 In 2012/2013, consultations are planned on standards for the following professions arts therapists; chiropodists / podiatrists; dietitians; operating department practitioners; occupational therapists; orthoptists; physiotherapists; prosthetists and orthotists; radiographers; speech and language therapists.
- 3.8 This work is planned to continue into 2013/2014.

#### Review of the standards of conduct, performance and ethics

- 3.9 The standards of conduct, performance and ethics (SCPE) were last reviewed in 2007/2008 and republished in July 2008. The standards are reviewed on an on-going basis and periodically on a five year cycle with the next planned review of the SCPE due to commence in 2013/2014.
- 3.10 However, given the growth in the register since 2008 and the forthcoming regulation of social workers in England, it is proposed to bring forward the commencement of the review. The review would be able to take account of feedback already received about the existing standards, particularly from professions that have recently joined the register, as well as other relevant policy developments

- 3.11 The review would be delivered in three phases.
- 3.12 Phase one: Research. This would include a combination of internally delivered and externally commissioned research activities to seek the views of key stakeholders on the content and accessibility of the existing standards.
- 3.13 Phase two: Professional Liaison Group (PLG). A PLG would be convened to comprise of Council / Committee members, professional bodies, service user representatives and other relevant stakeholders. The outcomes of the activities described above would be reported to the PLG which would help put together a revised draft of the standards for consultation.
- 3.14 Phase three: Consultation. A public consultation would be held on the proposed standards.

## Review of CPD – standards, audits and process

- 3.15 The CPD audits commenced in July 2008. In March 2009 following the audits of the first two professions, the audit sample size was reduced to 2.5%.
- 3.16 In March 2012, the Education and Training Committee approved the second CPD report, reporting on the outcomes of the audits for 11 professions audited in 2009 and 2010. In 2012/2013, multi-variant analysis of CPD data and profile information is planned to take place as part of the revalidation programme of work (please see paragraphs 5.6 to 5.10).
- 3.17 In late 2012/2013, the Executive plans to produce a paper for the Education and Training Committee to begin the process of reviewing the HPC's approach. This might include the following.
  - A discussion of the purpose of the CPD standards and audits and whether this guides our approach to sampling.
  - The outcomes of the past audits.
  - The outcomes of analysis commissioned from a researcher at Oxford Brookes University looking at risk profiling and the outcomes of the CPD audits. This analysis forms part of the revalidation programme of work.
  - Any relevant information from other parts of the revalidation project, including the review of approaches adopted in Ontario, Canada.
- 3.18 The Executive plans to commission research in 2013/2014, to engage with registrants who have been audited, other registrants and key stakeholders in order to gather information about individuals' and

organisations' experiences and perspectives of the CPD standards and audit process. This would build on similar research commissioned by the Fitness to Practise Department into the expectations of complainants.

## **Review of guidance documents**

- 3.19 'Managing your fitness to practise' and 'A disabled person's guide to becoming a health professional' were published in 2006. Both publications now need to be reviewed and revised to ensure that they are up to date with changes in the HPC's processes and standards, consistent with other more recent publications and consistent with changes in legislation.
- 3.20 The decision to remove the health reference requirement for registration means that the 'Information about the health reference' document is now obsolete. However, this document contains some very useful general guidance regarding managing health issues and this provides an opportunity to incorporate the relevant content into a more comprehensive document. 'A disabled person's guide' now includes references to standards which have been changed and also needs to be revised to take account of the implementation of the Equality Act 2010.
- 3.21 Dependent on the scope of the changes, a public consultation may be required.
- 3.22 This project was not completed in 2011/2012 owing to other priorities and continues to be a relatively low priority in the coming year.

#### Threshold level of qualification for entry to the Register

- 3.23 In 2010, the Education and Training Committee reviewed the threshold level of qualification for entry to the Register outlined in the standards of education and training (SET 1).
- 3.24 The Committee decided that the Department might consider producing further guidance to strengthen understanding of SET 1 in three areas: the purpose and function of SET 1; setting the threshold for a new group joining the Register; and decisions about changing the level set for an existing profession.
- 3.25 This was included in the work plan 2011/2012 but was not completed because of other priorities and because of work to set the threshold level for social workers in England. This area continues to be a relatively low priority and will only be completed if other priorities change.

#### **Annotation of the Register**

- 3.26 In 2010/2011, a consultation was held on our approach to annotating the HPC Register. The Education and Training Committee and Council have now agreed a statement of policy on the subject of annotation of the Register. At its meeting in March 2012, the Committee agreed that in the future podiatric surgeons should be annotated on the HPC Register.
- 3.27 In order to facilitate the HPC's ability to annotate the Register when necessary, an upgrade to the NetRegulate registration system will be completed by the end of 2012/2013. This upgrade will allow the future flexibility to add, amend or remove annotations of the Register without the need for a separate technology upgrade on each occasion.
- 3.28 In 2012/2013, a paper will be prepared inviting the Education and Training Committee to discuss whether the Register should be annotated to indicate neuropsychologists. This was the second group included as part of the public consultation.
- 3.29 Other activities in this area will include.
  - Identification of next steps, including planning for how the decision to annotate the Register for podiatric surgeons will be implemented.
  - Liaison with key stakeholders.
  - Participation in the project to develop NetRegulate to allow greater flexibility in annotating the Register.

#### Review of fitness to practise decisions

- 3.30 This is a continuing project area from 2011/2012. In addition to the audit of final hearing decisions described below, the Department is also currently involved in the audit of case to answer decisions. It is anticipated that this will pass back to the Fitness to Practise Department in 2012/2013.
- 3.31 The review of final hearing decisions is aimed at providing a systematic way through which the Executive can review the decision making quality of final hearing panels, including checking adherence to the applicable law and to HPC policy in a given area.
- 3.32 The review involves involve completing an audit form for each decision. The audit forms are then reviewed and a report written. The emerging recommendations are then discussed with the Fitness to Practise Department who identify action points.

## **Continuing Professional Development (CPD) sample profiles**

- 3.33 The Department will continue to work with the professional bodies to produce sample profiles. We have now published at least one sample profile for all 15 parts of the Register.
- 3.34 The Department is also currently working with the relevant professional bodies to publish more profiles for the following professions.
  - Occupational therapists (additional profile)
  - Physiotherapists (additional profile)
  - Practitioner psychologists (additional profiles)
  - Social Workers in England (first audit anticipated in August 2014)

#### Research strategy

- 3.35 In December 2009, the Council agreed a document setting out the HPC's research strategy. Since then the HPC has commissioned a number of pieces of research.
- 3.36 The Council has previously discussed the importance of reflecting on the research that has been undertaken and the value this has contributed to the organisation.
- 3.37 In 2012, the Executive will prepare a paper for the Council which will review the research activity over recent years, indicate the impact it has had and invite discussion on future priorities.

# 4. The Health and Social Care Bill 2011 and the Command Paper 'Enabling excellence'

- 4.1 In January 2011, the Health and Social Care Bill 2011 ('the Bill') was published. This was followed by publication of the Command Paper: 'Enabling Excellence Autonomy and Accountability for Healthcare Workers, Social Workers and Social Care Workers.'
- 4.2 This section outlines the key project areas for 2012/2013 but a degree of flexibility will be necessary in setting on-going priorities and in allocating resources.

#### Social workers in England

- 4.3 The HPC Register of social workers in England is now expected to open (subject to legislation and parliamentary approval) on 1 August 2012.
- 4.4 In 2012/2013, the Department's activities will include the following.
  - Participation in the cross-department project team to transfer the regulation of social workers in England from the GSCC to the HPC.
  - Liaison with key stakeholders including continued attendance at working groups and other meetings associated with the work of the Social Work Reform Board (SWRB).
  - Work on any other emerging policy issues as required.
  - Working with the Communications Department to write content for the HPC website and for relevant professional publications and attendance and participation at HPC information and employer events aimed at social workers.
- 4.5 Please also see following sections on student fitness to practise and registration and approved mental health professionals.

#### Student fitness to practise and registration

4.6 In March 2012, the consultation on student fitness to practise and registration closed. The consultation sought the views of stakeholders across the existing HPC regulated professions, and for social workers in England, on a number of different options for assuring the fitness to practise of students on programmes which lead to registration with the HPC. In addition, a literature review on this topic was also commissioned.

- 4.7 In early 2012/2013, the Executive will analyse the responses to the consultation and present the results to the Council.
- 4.8 The further work necessary in this area (both within the Department and across the organisation) will be directly dependent upon the outcomes of the consultation and the Council's resulting discussion and decisions. This may include, for example, the following:
  - HPC's maintains its existing approach to student fitness to practise.
    The Education and Training Committee may wish to give further
    consideration to whether the consultation responses indicate that
    further work is necessary (for example, development of guidance or
    changes to other policies).
  - A voluntary register of social work students in England is maintained. It would be necessary to determine the interim basis upon which the register of social work students in England would be maintained from August 2012, including, for example, the policies and procedures associated with voluntary registration of this group.
  - Voluntary registers of students should be established for some or all
    of the existing HPC regulated professions. It would be necessary to
    determine the basis upon which students might be registered,
    including, for example, the fee that would be charged and the
    timescales for implementation.

#### Approved mental health professionals (AMHPs)

- 4.9 AMHPs exercise functions under mental health legislation including being involved in making decisions about individuals with mental health disorders such as applications for compulsory admission to hospital or guardianship. Social workers, occupational therapists, mental health and learning disabilities nurses and practitioner psychologists can undertake training to become AMHPs.
- 4.10 When the register of social workers in England opens, we will also become responsible for approving AMHP training. As part of this we are required to set criteria to use in approving programmes. The Executive will develop draft criteria for approving AMHP training drawing on the requirements as set out in legislation and the existing GSCC criteria. Specific proposals for how stakeholders might be engaged in the development process will be developed and presented to the Education and Training Committee but we anticipate that this might include engaging with the AMHP Lead National Network, and meeting with and seeking the input of the relevant professional bodies and/or regulators across the four professions. A public consultation would be required on the criteria.

#### Voluntary registration including registration of social care workers

- 4.11 The Council has discussed voluntary registration on a number of occasions and has previously agreed a policy statement. In its most recent discussion, the Council has agreed that the issue of voluntary registration will need to be considered further and explored in the context of a specific group, namely adult social care workers in England. The Command Paper says that the government will, by the end of 2013, explore with the HPC the feasibility of establishing a voluntary register for this group.
- 4.12 The specific work required in this area will to a large extent depend upon further discussions with the Department of Health and at Council level but will include producing further papers for the Council.

#### **Herbal practitioners**

- 4.13 The Command Paper says that the government plans to introduce HPC regulation of herbal practitioners. The paper says that the focus of regulation will be 'solely on minimising risk to the public' and that the register will be a register of people who are able to dispense unlicensed herbal medicines.
- 4.14 We expect a consultation in early 2012/2013 and we understand that the current ministerial commitment is to have legislation in place by the end of 2012, with a register opening sometime in 2013.
- 4.15 The work required in this area in the coming year is likely to include.
  - Liaison with the Department of Health and meeting with key stakeholders.
  - Responding to the joint administrations' consultation.
  - Participating in a cross-department project to bring herbal practitioners into regulation.
  - Developing standards and processes as may be required.
- 4.16 Given the current government timescales, this will be a priority project for the Department in 2012/2013.

#### **Professional indemnity insurance**

- 4.17 The government has had a long standing policy that when harm has been caused through negligence on the part of a registered professional, service users should be able to receive any redress to which they are entitled.
- 4.18 The government has said that it wishes to achieve this policy by making holding professional indemnity insurance (PII) a condition of professional registration. This would mean that a registrant would be required to demonstrate that they were either covered by their employer's vicarious liability or held their own indemnity insurance. Some regulators already have this requirement in their legislation.
- 4.19 The Department of Health previously reviewed this policy and a series of recommendations were made for how the regulators should handle the issues involved. We understand that the government intends to bring forward legislation in this area, with implementation by the regulators in 2013.
- 4.20 The Secretary to Council will lead this project and the exact work involved is likely to become clearer as the Department of Health's intentions become known. However, activities for the Department in this coming year may include.
  - Providing input into papers for the Council and the Education and Training Committee.
  - · Meeting with stakeholders.
  - Preparing consultation documents as may be required.

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<sup>1</sup> This policy is also related to the implementation of a European Directive. Our current understanding is that social workers in England do not fall within the scope of the proposed legislation.

## 5. Other

5.1 This section outlines the other projects the Department will undertake in 2012/2013. This includes routine, regular or on-going pieces of work, and work which has arisen due to external factors (other than the Bill or the Command Paper).

#### Standards for prescribing

- 5.2 In 2011/2012 the Executive continued to participate in the Allied Health Professions Prescribing Board and its working groups. This Board is looking at proposals to extend independent prescribing rights to chiropodists/podiatrists and to physiotherapists.
- 5.3 The Commission on Human Medicines is due to consider the case for extending prescribing rights to these professions. A final ministerial decision would also be required.
- 5.4 The Executive has already developed a working draft of standards for prescribing and has sought the input of the Prescribing Board on those standards.
- 5.5 In 2012/2013, the activities in this area may include the following (subject to a final decision to proceed by government and legislative approval).
  - Further refinement of the draft proposed standards.
  - A public consultation on the draft standards.
  - Analysis of the consultation responses and revision of the draft standards.
  - Publication of final standards for prescribing.
  - Continued participation in the AHP Prescribing Project Board.

#### Revalidation

- 5.6 This work continues from 2011/2012 and is funded by a Department of Health grant.
- 5.7 The Command Paper says that the regulators should continue to develop an evidence base for revalidation, focusing on costs, benefits and proportionality. The paper is clear that changes to legislation will only be considered 'where there is evidence to suggest significant added value in terms of increased safety or quality of care for users of health care'.
- 5.8 The following projects have completed to date.
  - Review of existing revalidation processes that have been implemented by international regulators.
  - Review of existing revalidation processes that have been implemented or are being developed by other UK regulators.
  - Professionalism in healthcare professions (qualitative study undertaken by Durham University informing the on-going professionalism tool study).
  - Service user feedback tools (literature review and Delphi consultation exercise undertaken by the Picker Institute Europe).
- 5.9 The following projects are currently on-going.
  - Professionalism tool (quantitative study undertaken by Durham University to measure professionalism and track students after graduation; on-going to 2014/2015).
  - Fitness to practise multi-variant analysis (to be completed in early 2012/2013).
  - Analysis of HPC's CPD audit profiles to identify trends regarding CPD profiles and assessment results across the Register (yet to be initiated).
- 5.10 In 2012/2013, the Council will need to begin making conclusions about revalidation which might include identifying any additional areas for further research or analysis.

#### CHRE performance review 2012/2013

5.11 Every year, the Council for Healthcare Regulatory Excellence (CHRE) reviews the performance of all nine health regulators against its standards of good regulation. The Policy and Standards Department is responsible for co-ordinating the HPC's submission including writing some of the content and reviewing content from colleagues across the organisation. This process involves submitting a report to CHRE, attending meetings, providing additional information as required, and approving the final report(s).

## **European policy**

- 5.12 This area is shared with the Communications Department and in particular the Stakeholder Communications Manager.
- 5.13 In 2011/2012, the European Commission reviewed the Professional Qualifications Directive (PQD) which affects movement of professionals between member states. In 2012/2013, the proposed changes to the PQD are due to be scrutinised by the European parliament. In summary, these proposed changes include improvements to how competent authorities across Europe share information and possible changes to the ability of competent authorities to language test applicants for registration.
- 5.14 In 2012/2013, activities will include the following.
  - Continued membership of the Alliance of UK Health Regulators in Europe (AURE).
  - Attendance at meetings and events in the UK and in Europe as appropriate.
  - Producing papers and briefings as may be required.
  - Participating in internal discussion to ensure that the operational implications of any changes are captured.

#### Welsh language scheme

- 5.15 The HPC's Welsh language scheme received the approval of the Welsh Language Board in September 2011.
- 5.16 In 2012/2013, the Department will monitor the implementation of the scheme. The Department is also aware of the changes taking place following the implementation of the Welsh Language (Wales) Measure 2011 and will consider the impact of these changes on the HPC.

#### Mid Staffordshire NHS Foundation Trust Public Inquiry

- 5.17 On 9 June 2010 the Secretary of State for Health, Andrew Lansley MP, announced a full public inquiry into the role of the commissioning, supervisory and regulatory bodies in the monitoring of Mid Staffordshire Foundation NHS Trust. This was a result of instances of poor patient care and high mortality levels at Staffordshire Hospital over a number of years.
- 5.18 The inquiry concluded hearing evidence in December 2011. The final report is now being compiled and, although no definitive date is given on the inquiry website, it is reasonable to assume that publication will occur early in 2012/2013.
- 5.19 The Executive will produce a paper for the Council following publication of the Inquiry report, highlighting the main recommendations with a particular focus on those of direct relevance to the profession's regulated by the HPC and its regulatory role.

#### Fitness to practise research

- 5.20 The CHRE considers that regulators should require a registrant who has been convicted or cautioned for a drink or drug related offence to undergo a routine medical examination, in order to establish whether or not their fitness to practise is impaired as a result of an underlying drink or drug dependency.
- 5.21 In the Fitness to Practise Department work plan for 2012/2013, the Department sets out that it intends, through commissioned research, to explore the concept of public protection and the information about individuals which would be relevant to the regulator in making decisions about fitness to practise. The Department will work with the Fitness to Practise Department to support their activities in this area including developing a research brief and managing the process of commissioning research.

## 6. Department activities

6.1 This section records on-going departmental activities which do not fall directly into a discrete project area, and also outlines any specific activities which are about improving the way the department functions.

#### **On-going activities**

- 6.2 In 2012/2013 the Department will also continue to perform the following on-going 'operational' activities.
  - Responding to emails into the policy inbox and consultation inboxes and to hard copy correspondence.
  - Producing internal briefings and reports as required.
  - Responding to consultations. The Department will continue to respond to other organisations' consultations where relevant to the HPC's wider role and remit.
  - Producing articles for the HPC In Focus newsletter, for Education Update, for the HPC blog, and for the HPC intranet.
  - Working closely with the Communications Department including undertaking planned speaking commitments, participating at HPC events and assisting with press enquiries.
  - Stakeholder liaison on regulatory / policy matters including undertaking both reactive and proactive meetings with stakeholders (including board and working group participation).

#### **Department improvements**

- 6.3 In 2011/2012, the Department undertook a review of its approach to managing consultations, the outcomes of which were reported to the Communications Committee. In 2012/2013 the Department plans to start delivering the recommendations of its review.
- 6.4 This will include purchasing a subscription to an online survey tool, such as 'Survey Monkey' and trialling it as a method for collecting consultation responses and analysing the results.

# 7. Equality and Diversity

- 7.1 In carrying out its activities, the Department needs to ensure that any equality and diversity implications are taken into account and brought to the Council or a Committee's attention as appropriate.
- 7.2 For example, in its standards work, the Department will continue to highlight to PLGs, the Education and Training Committee, and the Council, the need to consider any potential adverse impact in setting standards.

## **Equality and diversity scheme**

- 7.3 In 2008, the Council published an equality and diversity scheme.
- 7.4 At the time of writing this paper, the Department was seeking legal advice about the HPC's obligations under the Equality Act 2010. Therefore, further papers or work on this area may be necessary in the coming year or may be planned for 2013/2014.

#### **Demographic data collection**

- 7.5 The HPC collects equality and diversity demographic data from applicants for employment and employees; parties involved in fitness to practise cases; and from applicants applying for admission to the Register.
- 7.6 In 2012/2013, the Executive will review the existing approach in this area; report on the data collected; and seek legal advice about the HPC's on-going obligations. A paper will be brought to the Council for discussion.

## 8. Projects for 2013/2014 to 2014/2015

8.1 In addition to the on-going priorities attached to projects that arise from the Bill and the Command Paper, throughout this period, the following projects are identified as potential priorities for 2013/2014 (subject to relative priorities, budget and resourcing).

#### Review of the standards of conduct, performance and ethics (SCPE)

8.2 As outlined in paragraphs 3.9 to 3.14 in 2013/2014 and 2014/2015 we will continue the review of the standards of conduct, performance and ethics resulting in the publication of new standards.

#### **CPD** research (in partnership with the Registration Department)

8.3 As outlined in paragraphs 3.15 to 3.18, in 2013/2014 the Executive plans to commission research into stakeholders' experiences of and perspectives on the CPD standards and audit process.

#### Non-medical public health specialists

8.4 In February 2012, the Government announced that public health specialists from non-medical backgrounds would become regulated by the HPC. The earliest we currently expect work to be necessary on the regulation of this group is 2014/2015.

#### Adult social care workers in England

8.5 This period is likely to include work to prepare for the voluntary registration of some groups of adult social care workers in England.

## 9. Risk management

9.1 Managing risks is also a vital part of the Department's work over the coming year. The main risks that are owned by, or most directly relevant to, the Department set out in the HPC's Risk Register are outlined below, together with the mitigations for each risk.

# 14.1 Incorrect process followed to establish standards/guidance/policy (i.e. no relevant Council decision)

- Legal advice sought on processes.
- Appropriately experienced and trained members of the Policy team.
- Quality management system and processes.

# 14.2 Inappropriate standards/guidance published e.g. standards are set at inappropriate level, are too confusing or are conflicting

- Use of Professional Liaison Groups, and Council and committees including members with appropriate expertise.
- Appropriately experienced and trained members of the Policy team.
- Consultation with stakeholders and legal advice sought.

# 14.3 Changing/evolving legal advice rendering previous work inappropriate

- Use of well qualified legal professionals. Regular reviews.
- Legal advice obtained in writing.
- Appropriately experienced and trained members of Policy team and others, e.g. HR.

#### 14.5 PLG member recruitment without requisite skills and knowledge.

- Skills and knowledge identified in work plan.
- Recruitment policy.
- Council scrutiny of PLG result.

Ref	Project area	Objectives / description	Key deliverables / milestones	Timescale(s)	Strategic intent
	Developing and maintaining the existing business				
3.2 to 3.4	Service user involvement in design and delivery of education programmes*	To develop, consult on, and implement a new SET to require the involvement of service users in approved programmes.	Consultation completed; decision made by ETC about new standard and guidance.	March 2013	To influence the policy agenda on regulation reforms proactively.  To build the evidence base of regulation.
3.5 to 3.8	Review of the standards of proficiency*	To continue to review, consult on and roll-out revised standards of proficiency.	Consultations held on standards for ten professions.	April to July 2012  December to March 2013	To maintain and develop efficient business processes throughout the organisation as it grows.
3.9 to 3.14	Review of the standards of conduct, performance and ethics	To commence the review of the standards of conduct, performance and ethics.	Completion of externally commissioned research.	By March 2013	To maintain and develop efficient business processes throughout the organisation as it grows.
3.15 to 3.18	Review of CPD standards, audits and process	To commence a review of the CPD standard, audits and process.	Initial discussion paper to ETC.	March 2013	To maintain and develop efficient business processes throughout the organisation as it grows.

Ref	Project area	Objectives / description	Key deliverables / milestones	Timescale(s)	Strategic intent
3.19 to 3.22	Review of guidance documents	To review and revise 'Managing your fitness to practise' and 'A disabled person's guide'	Documents reviewed and revised and consultation held if necessary.	On-going 2012/2013	To maintain and develop efficient business processes throughout the organisation as it grows.
3.23 to 3.25	Threshold level of qualification for entry to the Register	To produce further information about the approach taken in SET 1.	This area is a low priority and work will only be completed if priorities change.	On-going 2012/2013	To maintain and develop efficient business processes throughout the organisation as it grows.
3.26 to 3.29	Annotation of the Register	To agree a clear position on annotation of neuropsychologists on the Register.  To plan for how the decision to annotate podiatric surgeons would be implemented.	Papers to the Education and Training Committee and Council as required.	On-going 2012/2013	To maintain and develop efficient business processes throughout the organisation as it grows.
3.30 to 3.32	Review of fitness to practise decisions	Review of final hearing decisions.	Audits undertaken with papers to the Fitness to Practise Committee.	On-going 2012/2012	To maintain and develop efficient business processes throughout the organisation as it grows.
3.33 to 3.34	CPD sample profiles	To maintain and develop efficient business processes throughout the organisation as it grows.	CPD sample profiles joint- badged with professional bodies.	On-going 2012/2013	To maintain and develop efficient business processes throughout the organisation as it grows.

Ref	Project area	Objectives / description	Key deliverables / milestones	Timescale(s)	Strategic intent
3.35 to 3.37	Research strategy	To review the success of the HPC's research activity and its on-going approach.	Discussion paper to Council.	July 2012	To build the evidence base of regulation.

Ref	Project area	Objectives / description	Key deliverables / milestones	Timescale(s)	Strategic intent
	The Bill and the Command Paper 'Enabling excellence'				
4.3 to 4.5	Social workers in England	Regulation of social workers in England from August 2012.	Completion of project to bring social workers in England onto the HPC register.	To August 2012 and on-going.	To increase understanding and awareness of regulation amongst all stakeholders.  To influence the policy agenda on regulation reforms proactively.
4.6 to 4.8	Student fitness to practise and registration	To reach decisions about the voluntary registration of students including social work students in England.	Consultation response analysis to Council.  Further work required dependent upon Council decision.	May 2012 On-going 2012/2013	To build the evidence base of regulation.
4.9 to 4.10	AMHPs	To develop criteria for the approval of AMHP training.	Criteria developed and consultation commenced.	By March 2013	To maintain and develop efficient business processes throughout the organisation as it grows.
4.11 to 4.12	Voluntary registration	To continue to develop the HPC's approach to voluntary registration with particular reference to adult social care workers in England.	Council papers throughout the year.	On-going 2012/2013	To influence the policy agenda on regulation reforms proactively.  To maintain and develop efficient business processes throughout the organisation as it grows.

Ref	Project area	Objectives / description	Key deliverables / milestones	Timescale(s)	Strategic intent
4.13 to 4.16	Herbal practitioners	Regulation of practitioners using unlicensed herbal medicines.	Work to support the regulation of herbal practitioners.	On-going 2012/2013	To maintain and develop efficient business processes throughout the organisation as it grows.
4.17 to 4.20	Professional indemnity insurance	To provide input into the internal project to prepare for PII becoming a mandatory requirement for registration.	Input into papers as required; meeting with stakeholders; preparing consultation documents as may be required.	On-going 2012/2013	To influence the policy agenda on regulation reforms proactively.  To maintain and develop efficient business processes throughout the organisation as it grows.

Project area	Objectives / description	Key deliverables / milestones	Timescale(s)	Strategic intent
Other				
Standards for prescribing	To prepare for the possible extension of independent prescribing rights to physiotherapists and chiropodists / podiatrists, including producing standards.	Milestones and timescales dependent on external factors; likely to include public consultation on standards.	On-going 2012/2013	To maintain and develop efficient business processes throughout the organisation as it grows.  To influence the policy agenda on regulation reforms proactively.
Revalidation	A series of research projects to explore revalidation for the HPC (phase one).	Fitness to practise multi-variant analysis.  CPD audit multi-variant analysis.  Professionalism tool (Durham University research).	Early 2012/2013  TBC  On-going to 2014/2015	To influence the policy agenda on regulation reforms proactively.
CHRE performance review 2012/2013	To co-ordinate HPC's performance review submission.	Submit performance review for 2012/2013.	December 2012	To maintain and develop efficient business processes throughout the organisation as it grows.
	Other  Standards for prescribing  Revalidation  CHRE performance	Other  Standards for prescribing  To prepare for the possible extension of independent prescribing rights to physiotherapists and chiropodists / podiatrists, including producing standards.  Revalidation  A series of research projects to explore revalidation for the HPC (phase one).  CHRE performance  To co-ordinate HPC's performance review	Standards for prescribing  Standards for prescribing  To prepare for the possible extension of independent prescribing rights to physiotherapists and chiropodists / podiatrists, including producing standards.  Revalidation  A series of research projects to explore revalidation for the HPC (phase one).  CHRE performance  To co-ordinate HPC's performance review  Milestones and timescales dependent on external factors; likely to include public consultation on standards.  Fitness to practise multi-variant analysis.  CPD audit multi-variant analysis.  Professionalism tool (Durham University research).	Standards for prescribing

Ref	Project area	Objectives / description	Key deliverables / milestones	Timescale(s)	Strategic intent
5.12 to 5.14	European policy	To ensure that the HPC understands the implications of changes to the professional qualifications directive.	Attendance at meetings and papers as may be required.	On-going 2012/2013	To influence the policy agenda on regulation reforms proactively.  To maintain and develop efficient business processes throughout the organisation as it grows.
5.15 to 5.16	Welsh language scheme	To monitor the implementation of the scheme and produce an annual progress report.	Annual progress report.	On-going 2012/2013	To maintain and develop efficient business processes throughout the organisation as it grows.
5.17 to 5.19	Mid Staffordshire NHS Foundation Trust Public inquiry	To respond to the recommendations of the public inquiry (when published).	Paper to Council once published.	TBC	To influence the policy agenda on regulation reforms proactively.
5.20 to 5.21	Fitness to practise research	To assist the Fitness to Practise Department with research into to explore the concept of public protection.	Research commissioned and completed.	By end of 2012/2013	To build the evidence base of regulation.

Ref	Project area	Objectives / description	Key deliverables / milestones	Timescale(s)	Strategic intent
	Department improvements				
6.3 to 6.4	Review of consultation methodology and	To implement recommendation of review of approach to	Purchase and trial of online consultation tool.	By end of 2012/2013.	To maintain and develop efficient business processes throughout the organisation
	analysis	consultations.	Completion of other recommendations.	On-going 2012/2013	as it grows.

Ref	Project area	Objectives / description	Key deliverables / milestones	Timescale(s)	Strategic intent
	Equality and diversity				
7.3 to 7.4	Equality and diversity scheme	To seek legal advice on and identify further actions in relation to the HPC's obligations under the Equality Act 2010.	Legal advice received.	May 2012	To maintain and develop efficient business processes throughout the organisation as it grows.
7.5 to 7.6	Demographic data collection	To review the HPC's approach to collecting equality and diversity demographic data	Discussion paper to the Council.	By September 2012	To maintain and develop efficient business processes throughout the organisation as it grows.

# Notes

Some projects may arguably map to a number of strategic objectives. Those most directly relevant are referenced here.

<sup>\*</sup>denotes a priority project



# **Appendix 1**

# Policy and Standards Department Standards workplan 2012/2013

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# 1. About this document

- 1.1 This document sets out broad areas for the future direction of the Council's work in the area of standards. It brings together information about the background to the Council's standards, establishes some broad principles, particularly around standards development and review, and indicates past, present and possible future activities, linked to the overarching Policy and Standards Department workplan. The Council should read this in conjunction with the workplan.
- 1.2 The Council first approved this document in December 2006, and the document has been revised for 2012/2013. It will be revised and brought back to the Council alongside the Policy and Standards Department workplan in future years.

#### The standards

- 1.3 The Council produces four key standards which are the subject of this document. They are the:
  - standards of proficiency;
  - standards of conduct, performance and ethics;
  - •standards of education and training; and
  - •standards of continuing professional development.
- 1.4 The Council also publishes requirements for returning to practice.
- 1.5 Setting standards is one of the Council's key processes and the standards are central to how individuals become and remain registered.

#### **Overall aims**

- 1.6 The Council's standards should:
  - effectively protect the public;
  - not hinder the development by education providers, registrants and others of innovative and pragmatic ways of working;
  - be applicable to all or most registrants (except in the case of professionspecific standards of proficiency);
  - be written in broad terms to allow for developments in best practice, technology and legislation;
  - be set at a 'threshold' level e.g. the level which is necessary for safe and effective practice, and public protection; and

 describe outcomes or broad principles and not be prescriptive about ways of meeting the standards.

# **Overarching aims**

- 1.7 The overarching aims of the work identified in this document are as follows.
  - To review the HPC's standards, guidance and policies, engaging with and consulting stakeholders, to gain feedback and to make improvements to ensure that these continue to reflect the HPC's purpose and principles.
  - To engage with and consult stakeholders, and take account of their input in its work, to ensure that the HPC's work is informed by the wider healthcare and regulatory landscape, and that our knowledge of multiprofessional regulation can be shared.
  - To build on the HPC's growing reputation as a respected voice within the policy arena of the regulation of healthcare professionals and other healthcare workers, and to use this reputation to influence the external agenda pro-actively, in the interests of protecting the public.

# 2. Background to the standards

This section explores the legal background and purpose of the standards we produce.

# Standards of proficiency Legal background

2.1 Article 5 (2) (a) of the Health Professions Order 2001 says that the Council shall:

'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.'

#### **Summary**

- 2.2 The standards are set at a threshold or 'necessary' level and play a central role in entry to the Register. The standards set out the abilities necessary to practice in a profession. They describe what someone needs to be able to do, to know and to understand in order to be registered for the first time.
- 2.3 The HPC uses the standards in the following ways:
  - in making decisions against the standards about international and grandparenting (route b) applications;
  - in assessing education programmes to decide whether the learning outcomes meet the standards of proficiency; and
  - in making decisions about lack of competence fitness to practise cases.
- 2.4 The standards include generic standards, which are common to all professions on the Register, and profession-specific standards.
- 2.5 Although the standards are threshold standards for entry to the Register, the interaction between the standards and the standards of education and training means that a small number of standards relate to additional or post-registration entitlements and are therefore 'optional'. For example, the standards for radiographers, physiotherapists and chiropodists and podiatrists currently include a standard which relates to supplementary prescribing entitlements. It is only necessary for registrants to meet this standard if they wish to practise as a supplementary prescriber. The Executive is undertaking work to review these standards (see paragraph 3.11).

# Standards of conduct, performance and ethics Legal background

2.8 Article 21 (a) says that the Council shall -

'establish and keep under review the standards of conduct, performance and ethics expected of registrants and prospective registrants and give them such quidance on these matters as it sees fit.'.

- 2.9 Article 27 (a) (i) further provides the Conduct and Competence Committee with the role of advising the Council on the 'performance of the Council's functions in relation to standards of conduct, performance and ethics expected of registrants and prospective registrants'.
- 2.10 Rule 8 of The Health Professions Council (Practice Committees)
  (Constitution) Rules Order of Council 2003 says that the Conduct and
  Competence Committee (now Fitness to Practise Committee) must review
  the standards each year.

# **Summary**

- 2.11 The standards describe our expectations of registrants in terms of their professional attitudes and behaviour. They:
  - may be taken into account by fitness to practise panels in deciding whether the fitness to practise of a registrant is impaired; and
  - are used in making health and character decisions on admission to the Register.
- 2.12 The standards are generic across all registered professionals and specifically apply to prospective registrants. When individuals apply for registration they confirm that they have read and understood the standards and will keep to them once registered.

# Standards of education and training Legal background

2.13 Article 15 (1) (a) says that:

The Council shall from time to time establish—

'the standards of education and training necessary to achieve the standards of proficiency it has established under article 5 (2).'

2.14 Article (6) (a) further provides that -

'In respect of additional qualifications which may be recorded on the register the Council may establish standards of education and training'.

# **Summary**

- 2.15 The standards ensure that education programmes allow those who successfully complete the programme to meet the standards of proficiency. The standards cover such areas as admissions, assessments and practice placements.
- 2.16 The standards are generic and are monitored via the Council's approvals monitoring processes.

# Standards of continuing professional development Legal background

2.17 Article 19 (1) says that:

'The Council may make rules requiring registrants to undertake such continuing professional development as it shall specify in standards.'

#### **Summary**

- 2.18 The standards of continuing professional development (CPD) link the learning and development of registrants to continued registration, meaning that registrants must continue to learn while they are registered, to help ensure that they remain safe and effective practitioners.
- 2.19 The standards are generic and focus on the outcomes of registrants' learning.
- 2.20 All registrants are required to confirm when renewing their registration that they understand and meet the Council's standards for CPD. Since 2008, the Council has audited registrants to ensure that they meet the standards.

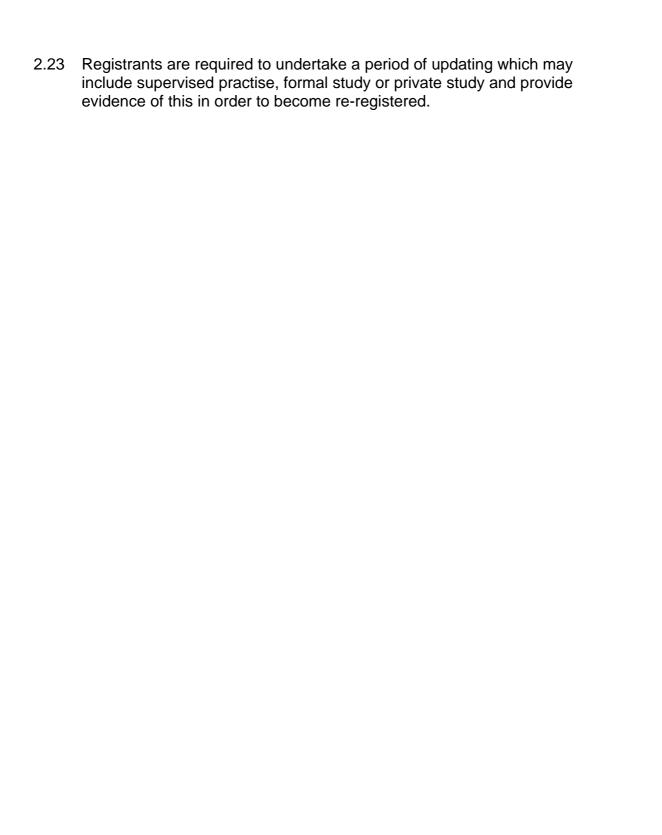
# Requirements for returners to practice Legal background

2.21 Article 19 (3) says that:

'The Council may by rules require persons who have not practised or who have not practised for or during a prescribed period, to undertake such education or training or to gain such experience as it shall specify in standards.'

#### **Summary**

2.22 The Council has defined the practise of a profession as someone drawing on their professional skills in some way in the course of their work. The returners to practice requirements make additional requirements of registrants who have been out of practise for more than two years in order to remain registered or readmit to the register. The requirements also apply to someone who has never been registered, who has been out of practise for more than two years and who holds an approved qualification which is over five years old.



# 3. Workplan

- 3.1 This workplan is divided into five areas relevant to the Department's standards work.
- 3.2 An aim / objective for each area of the Department's standards work is identified, background provided for that area and general principles established that will influence the Department's approach in this area.

# **Develop and review standards**

# Aims / Objectives

• All standards reviewed on an on-going and periodic basis in accordance with review policy and timetable.

#### Standards for new professions

- 3.3 Whenever a new part of the HPC Register is opened, the Council needs to publish standards of proficiency and amend standard one of the standards of education and training ("SET 1") to establish the threshold level of qualification for entry to the Register.
- 3.4 A Professional Liaison Group (PLG) was established to put together draft standards of proficiency for practitioner psychologists and the psychotherapists and counsellors PLG was also tasked with putting together draft standards. However, this approach has not been followed in relation to other professions. For example, the standards of proficiency for hearing aid dispensers were put together by a group convened by the Hearing Aid Council, on which the Executive was represented.
- 3.5 The Council will normally establish a Professional Liaison Group (PLG) to draft the standards of proficiency for a new part of the Register. However, where substantial work has already been undertaken to draft standards of proficiency (for example, by a professional body or bodies), a PLG may not be necessary.
- 3.6 The Council is required to consult before publishing or amending any standards.
- 3.7 When a new profession is regulated, there will normally be a time-limited grandparenting period. The HPC has in the past committed to keeping the standards the same during the grandparenting period to ensure consistency and fairness. The standards of proficiency for the first 12 professions regulated, and the standards for operating department practitioners, were reviewed following the end of their respective grandparenting periods.
- 3.8 The Education and Training Committee should consider at the end of the grandparenting period whether it is necessary to review the standards of proficiency for new professions.

#### Standards for areas of practice

- 3.9 Very occasionally, we must set standards linked to a specific area of practice. In most cases, the standards are linked to an annotation on the Register, in that a registrant has demonstrated that they have met the appropriate standards before being annotated on the Register.
- 3.10 The Executive is currently undertaking a project looking at our approach to post-registration qualifications and annotation of the Register. Subject to decisions by the Education and Training Committee and the Council, the Executive may develop additional standards related to post-registration qualifications which would then be annotated on the Register.
- 3.11 In addition, the Executive is involved in a project run by the Department of Health to allow physiotherapists and chiropodists/podiatrists to prescribe independently. The HPC would need to set standards for independent prescribing if these professions gained these prescribing rights. In addition, the change in prescribing rights offers a good opportunity to review the existing standards for supplementary prescribing. The Executive has started work on preparing these standards.
- 3.12 We are currently preparing to take over the regulation of social workers in England. The General Social Care Council currently has statutory responsibility for approving Approved Mental Health Professional (AMHP) training programmes. We will take over responsibility for approving these programmes and will need to develop the criteria that we will use to develop those programmes.
  - In autumn 2010, we established a PLG to help to prepare draft standards of proficiency for social workers in England. We consulted on these standards in summer 2011 and Council will consider the revised standards in March 2012. We anticipate that the Register for social workers in England will open in August 2012.
  - We have prepared draft standards for prescribing, which have been shared with colleagues working on the Department of Health Allied Health Professions Prescribing Project Board to introduce independent prescribing.

# On-going and periodic review

- 3.13 On-going and periodic review will ensure that the standards continue to be fit for purpose and that stakeholders understand their content.
- 3.14 On-going review should focus on ensuring that the standards continue to be fit for purpose. 'On-going review' is the 'day-to-day' reviewing of the standards by the Council, its Committees and the Executive. This will ensure that the standards do not limit effective ways of working for registrants and education providers.

- 3.15 A periodic review should be more thorough and comprehensive. The purpose of periodic review is to:
  - ensure that the standards remain fit for purpose in making decisions about education programmes and in making fitness to practise decisions, for example;
  - ensure that they are well understood by our stakeholders including registrants, patients, education providers and the public; and
  - ensure that they take account of change including changes in practice, legislation, technology, guidelines and wider society.
- 3.16 Ideally, no more than one periodic review of the Council's standards should take place in any one financial year. This ensures that any confusion is avoided, allows the Council to more effectively engage with its stakeholders, and allows for the effective use of resources.
- 3.17 Any periodic review should have a clear workplan. A periodic review might involve establishing a Professional Liaison Group (PLG) if the Council and/or a sponsoring Committee considered this to be helpful approach.
- 3.18 Periodic reviews should take place no more than once every five years. This five year period will normally be from the date of the republication of the standards following the last review.
- 3.19 Whilst the principle is established that a periodic review should normally not take place more than once every five years (subject to the provisions of on-going review), the exact timing of a review may be subject to change. The timing of any review would be influenced by the Council's priorities in any given year and therefore the budget and resource considerations of the Policy and Standards Department.
  - The generic standards of proficiency have now been reviewed and agreed following consultation. The standards of proficiency are now being revised on a rolling basis across the professions. It is anticipated that this process will continue until 2014.
  - Work to revise the standards of conduct, performance and ethics will start this year. This work will take place over three years and will involve research, work with service users, a professional liaison group and consultation.

# Standards guidance and information

- To improve understanding of, and compliance with, the standards amongst registrants.
- To improve understanding of the standards amongst other stakeholders.
- 3.20 The Hampton review concluded that regulators place insufficient focus on providing advice to ensure compliance and recommended that regulators should provide more advice as 'better advice leads to better regulatory outcomes'.<sup>1</sup>
- 3.21 The Council presently publishes guidance on topics in a small number of areas directly related to the standards or on topics building upon the principles expressed in the standards.
- 3.22 A distinction is drawn between publications providing information about the Council's processes and publications which provide specific guidance on standards or standards related issues.
- 3.23 In particular, the Executive has identified the potential need for guidance to the standards of conduct, performance and ethics in a small number of discrete areas.
- 3.24 Formal guidance should be produced if:
  - there is good evidence to suggest that guidance would be helpful;
  - the topic is not substantially covered in another HPC publication or another authoritative sources;
  - the topic is relevant to most professionals who are registered; and
  - the topic builds upon the existing standards.
- 3.25 Whilst links to the Council's key fitness to practise functions should be clear, any guidance should be positive in nature by focusing on ways of meeting the standards rather than situations which would not meet the standards or the possible consequences of a failure to meet them.

  Guidance should focus on the importance of registrants making individual decisions which are informed and reasonable.
- 3.26 Where a need for guidance might be identified, but such guidance would not be sufficiently substantial to justify separate published guidance, the Executive might consider published information on the HPC website with links to other sources of guidance.

<sup>&</sup>lt;sup>1</sup> Hampton, Philip (HM Treasury), Reducing administrative burdens: effective inspection and enforcement, March 2005, p.10 and p.15.

http://www.hm-treasury.gov.uk/media/A63/EF/bud05hamptonv1.pdf.

- 3.27 The Council recognises the important role of professional bodies and other organisations in publishing guidance and information to assist registrants in meeting the standards. Any guidance should not seek to replace this role and should provide signposts to other information available where possible.
  - In summer 2010 the Executive audited responses sent to emails to the departmental inbox. The audit identified a number of topics which the department is regularly contacted about. The department is developing a series of articles for the HPC newsletter 'In Focus', based on these frequently asked about topics.
  - In spring 2010, a consultation was held on removing the requirement to provide a health reference when applying for registration. This change will be effective from 1 April 2011. The 'Guidance on health and character' has been revised following this decision and an updated version has been published.
  - 'A disabled person's guide to becoming a health professional' and 'Managing fitness to practise' will be updated in 2012/2013 to reflect the decision to remove the requirement to provide a health reference on entry to the Register.

# Standards and ethics queries

- Responses to standards and ethics queries are appropriate and consistent.
- 3.28 We regularly receive letters and e-mails from registrants and employers asking questions about our standards, particularly the standards of conduct, performance and ethics. Most commonly, we receive enquiries asking about how to interpret the standards, particularly registrants and employers seeking assurances that their working practices meet our standards. (The Fitness to Practise Department answers queries received from individual registrants on matters related to fitness to practise.)
- 3.29 We are also regularly asked for information on topics with some relevance to the standards such as the drug administration entitlements of those we register.
- 3.30 The Policy and Standards Department will work with the Fitness to Practise Department to ensure consistency and best practice in answering standards and ethics queries.
- 3.31 In 2010/2011 the Executive audited responses sent to emails to the departmental inbox. The audit identified a number of topics which the department regularly receive queries about. These topics are now the subject of a series of articles in the HPC newsletter.

#### Involve

- To involve stakeholders in developing standards and guidance.
- To be involved in the development of standards and guidance by other organisations where this is relevant to the Council's aims.
- 3.32 The Council will involve its stakeholders in the production of its standards and guidance. For example, the Council invited input from charities and disability groups when it established a PLG to consider issues around health, disability and registration.
- 3.33 The involvement of external stakeholders benefits the Council in developing its standards and guidance in a number of ways. The Council benefits from the knowledge and expertise of its stakeholders, often profession-specific and drawn from a wide range of practice areas. Involving our stakeholders in the development of standards and guidance (rather than simply at the consultation stage) also ensures 'buy-in' from stakeholders and improved dissemination of the completed work. It also raises the profile of the organisation.
- 3.34 The Council also involves its stakeholders by consulting whenever it produces guidance or standards. It also provides input into other standards development by others by responding to external consultations where appropriate.
- 3.35 The Council is often involved in the development of standards and guidance by other organisations.
- 3.36 Becoming involved in the development of standards and guidance by other organisations will:
  - allow sharing of knowledge, expertise and best practice for mutual benefit;
  - provide opportunities for networking; and
  - raise our profile.
  - Regular participation in cross-regulatory fora, which often consider standards related matters.
  - The Executive met with a service user and carer representative during the consultation on standards of proficiency for social workers in England.
  - Public consultation and responding to other organisations consultations on standards related matters.

#### Communicate

- To communicate effectively the role and purpose of the Council's guidance to its stakeholders.
- 3.37 The Council should aim to communicate effectively the role and purpose of its standards to a variety of different stakeholders including employers, registrants and education providers.
- 3.38 The Policy and Standards Department will work with the Communications Department to develop effective ways of communicating the purpose and function of the Council's standards and guidance.
- 3.39 This could include:
  - using opportunities to promote the Council's standards work at events;
  - producing content for the newsletter which explores standards and ethics type issues;
  - developing the HPC website; and
  - exploring possibilities of standards focused consultation events in the future.
  - Press releases for reviews and consultations
  - Regular 'HPC In Focus' articles on standards consultations and other related matters.
  - Working with the Communications Department to highlight areas of interest.
  - Numerous presentations given to stakeholders on topics including the standards of conduct, performance and ethics, CPD standards and returners to practice requirements.

# 4. Indicative periodic review timetable

Standard	Date of first publication	Date of first review (financial year)	Date of republication	Date of subsequent review (financial year)
Standards of proficiency	2003	2005/06	2007	2009/2010 (on-going)
Standards of conduct, performance and ethics	2003	2007/08	2008	2012/13*
Standards of education and training	2004	2007/08	2009	2014/15
Standards for continuing professional development	Effective 2006	TBC	n/a	TBC
Returners to practice requirements	2005	TBC**	TBC	TBC

NB: The above timescales are subject to the information in section 3 of this document.

<sup>\*</sup>These standards were previously reviewed and republished in 2008 but given the expansion of the register in the period since, it is suggested that the next review should be brought forward. This work will take place over three years (subject to budgeting and planning) and will involve research, work with service users, a professional liaison group and consultation.

<sup>\*\*</sup>The returners to practice requirements are not one of the core sets of standards but are nonetheless included here as they will need to be reviewed at an appropriate future point.