

Education and Training Committee

Minutes of the 55th meeting of the Education and Training Committee held as follows:

Date: Thursday 15 November 2012

Time: 10:30 am

Venue: The Council Chamber, Health and Care Professions Council, Park House,

184 Kennington Park Road, London SE11 4BU

Members:

Eileen Thornton (Chair) Arun Midha Jo-anne Carlyle Penny Renwick Mary Clark-Glass Robert Smith June Copeman Jois Stansfield Helen Davis Hilary Tompsett Joy Tweed John Donaghy Sheila Drayton Diane Waller Stephen Hutchins Joanna Watson Jeff Lucas (items 1-14) Stephen Wordsworth

Stuart Mackay

In attendance:

Colin Bendall, Acting Secretary to the Committee

Liz Craig, PA to the Director of Education

Alison Croad, Policy Officer

Julia Drown, Council member (observer)

Brendon Edmonds, Head of Educational Development

Abigail Gorringe, Director of Education

Michael Guthrie, Director of Policy and Standards

Daniel Knight, Communications Officer (Publishing)

Paula Lescott, Education Manager Matthew Nelson, Education Officer

Angela Scarlett Newcommen, Communications Officer (Media and PR)

Charlotte Urwin, Policy Manager Anna van der Gaag, Chair of Council

Part 1 – Public Agenda

Item 1 Chair's welcome and introduction

1.1 The Chair welcomed the Committee and employees in attendance to the meeting. The Chair welcomed Sheila Drayton, Hilary Tompsett and Joanna Watson as new members of the Committee. The Chair also welcomed two observers: Julia Drown (Council member) and Joy Rosenberg (hearing aid dispenser).

Item 2 Apologies for absence

2.1 Apologies were received from Marc Seale and Jeff Seneviratne.

Item 3 Approval of agenda

3.1 The Committee approved the agenda, subject to receiving a tabled paper at item 14.

Item 4 Declaration of members' interests

4.1 Members had no interests to declare in connection with the items on the agenda.

Item 5 Minutes of the meeting of 13 September 2012 (ETC 60/12)

5.1 The minutes were accepted as a correct record and signed by the Chair, subject to an amendment to correct Jois Stansfield's name in paragraph 2.1.

Item 6 Matters arising from previous meetings (ETC 61/12)

- 6.1 The Committee noted the list of actions agreed at previous meetings.
- 6.2 The Committee noted that the paper on lay visitor and service user involvement in decisions to approve programmes was due to be considered at its meeting on 7 March 2013.

Item 7 Director of Education's report (ETC 62/12)

- 7.1 The Committee received a paper from the Director of Education detailing the work of the Education Department between September and November 2012, providing updates on ongoing projects, progress against the Department's workplan for 2012-13 and statistics on the approval and monitoring processes.
- 7.2 The Committee noted that the Department continued to schedule visits for the 2012-13 academic year. The scheduling of social worker visits in the 2012-13 academic year had been very successful. Social worker and Approved Mental Health Professional programmes requiring a visit in the

- 2013-14 and 2014-15 academic years had been reminded to schedule their visits by 31 January 2013. The Committee noted that the number of social worker programmes might decrease over the next two years, as education providers adjusted their provision in the light of changes to the social work bursary for students.
- 7.3 The Committee noted that the Department had delivered the first three of the annual education seminars. The Committee noted that the Department had increased the capacity at the seminars and would consider further increases in capacity for seminars in 2013-14, although there was a need to balance resources between approvals and monitoring processes and communications work.
- 7.4 The Committee noted that the number of major change notifications received since September 2012 continued to be slightly higher than anticipated, although no particular reason had been identified for the increase. The increase had been addressed in the budget reforecast and would be included in the proposed budget for 2013-14.
- 7.5 The Committee noted that the Department had begun discussions with professional and system regulators, in order to agree memoranda of understanding (or the equivalent) on sharing information between regulators. A memorandum of understanding had already been agreed with the care councils.

Item 8 Consultation on criteria for approving Approval Mental Health Professional programmes in England (ETC 63/12)

- 8.1 The Committee received a paper for discussion/approval from the Executive regarding a proposed consultation on criteria for approving Approval Mental Health Professional (AMHP) programmes in England.
- 8.2 At its meeting in June 2012, the Committee had agreed a paper setting out interim arrangements for managing changes to, and approving, the programmes. The Executive had developed the criteria for approving the programmes, drawing on the HCPC's standards and General Social Care Council documents. Stakeholders in the AMHP field had also helped to draft the criteria. The consultation on the criteria was planned to take place between January and April 2013 and it was expected that the criteria would be published in autumn 2013.
- 8.3 The Committee discussed the paper, during which discussion the following points were raised:
 - 8.3.1 The Committee agreed that the consultation document should include an explanation of the wording used in the criteria, such as the reasons for using the phrase 'be able to' in the requirements for professionals who completed the AMHP training;

- 8.3.2 The Committee agreed that a footnote should be added to paragraph 2.9 of the consultation document, to explain the combination of Visitors who would conduct visits to programmes;
- 8.3.3 The Committee agreed that the Executive should check whether it was appropriate to use the phrase 'mental disorder' in the consultation document; and
- 8.3.4 The Committee agreed that a footnote should be added to paragraph 3.13 of the consultation document, to explain how service users might be involved in approved programmes in the future.

8.4 The Committee:

- agreed that a consultation should be held on criteria for AMHP programmes;
- (2) approved the consultation document attached to the paper (subject to minor editing amendments, the changes arising from the Committee's discussion and legal scrutiny) and recommended its approval by the Council.
- **ACTION: Policy Manager** to present the consultation document to the Council for discussion and approval at its meeting on 4 December 2012.

Item 9 Standards of proficiency consultation for chiropodists/podiatrists (ETC 64/12)

- 9.1 The Committee received a paper for discussion/approval from the Executive providing a proposed consultation document and draft standards of proficiency for chiropodists/podiatrists.
- 9.2 The review of profession-specific standards had followed from the Council's approval of new generic standards of proficiency in March 2011. The Committee noted that the Executive was reviewing the profession-specific standards of proficiency in groups of several professions at a time. Following the second round of reviews, the Executive was ready to consult on the draft standards of proficiency for the next group of professions, comprising chiropodists/podiatrists and prosthetists/orthotists.
- 9.3 The Committee held a discussion regarding the consultation document and draft standards of proficiency, during which discussion the following points were raised:
 - 9.3.1 The Committee agreed that the draft standards of proficiency should be amended to include a standard reading 'understand the importance of participation in training, supervision and mentoring'. The Committee noted that this standard had been included in the draft standards of proficiency for other professions.

- 9.4 The Committee agreed and recommended to the Council that it approve the consultation document and draft standards of proficiency for chiropodists/podiatrists (subject to minor editing changes and formal legal scrutiny).
- **ACTION: Policy Officer** to present the consultation document and draft standards of proficiency for chiropodists/podiatrists to the Council for discussion and approval at its meeting of 4 December 2012.

Item 10 Standards of proficiency consultation for prosthetists/orthotists (ETC 65/12)

- 10.1 The Committee received a paper for discussion/approval from the Executive providing a consultation document and draft standards of proficiency for prosthetists/orthotists.
- 10.2 The review of profession-specific standards followed from the Council's approval of new generic standards of proficiency in March 2011, as outlined in paragraph 9.2.
- 10.3 The Committee held a discussion regarding the consultation document and draft standards of proficiency, during which discussion the following points were raised:
 - 10.3.1 The Committee agreed that the draft standards of proficiency should be amended to include a standard reading 'understand the importance of participation in training, supervision and mentoring'. The Committee noted that this standard had been included in the draft standards of proficiency for other professions.
- 10.4 The Committee agreed and recommended to the Council that it approve the consultation document and draft standards of proficiency for prosthetists/orthotists (subject to minor editing changes and formal legal scrutiny).
- **ACTION: Policy Officer** to present the consultation document and draft standards of proficiency for prosthetists/orthotists to the Council for discussion and approval at its meeting of 4 December 2012.

Item 11 Standards of proficiency consultation analysis and revised standards for dietitians (ETC 66/12)

11.1 The Committee received a paper for discussion/approval from the Executive providing the results and analysis by the Executive of a consultation on the profession-specific standards of proficiency for dietitians. The review of profession-specific standards followed from the Council's approval of new generic standards of proficiency in March 2011.

- 11.2 The Committee noted that, on 18 October 2012, the Council had discussed the issue of including a generic standard of proficiency relating to leadership. The Council would have an opportunity to discuss the issue more fully in due course.
- 11.3 The Committee noted that the consultation had received some comments from stakeholders about the generic standards of proficiency and the standards of conduct, performance and ethics (SCPE). While the SCPE had not been the subject of the consultation, the comments would be considered when each set of standards was reviewed.
- 11.4 The Committee recommended that the Council approve the consultation response analysis and draft standards of proficiency for dietitians, subject to any necessary minor editing changes and formal legal scrutiny.
- **ACTION: Policy Officer** to present the response analysis and draft standards of proficiency to the Council for discussion and approval at its meeting of 4 December 2012.
- Item 12 Standards of proficiency consultation analysis and revised standards for occupational therapists (ETC 67/12)
 - 12.1 The Committee received a paper for discussion/approval from the Executive providing the results and analysis by the Executive of a consultation on the profession-specific standards of proficiency for occupational therapists. The review of profession-specific standards followed from the Council's approval of new generic standards of proficiency in March 2011.
 - 12.2 The Committee noted that the College of Occupational Therapists had raised concerns about the ordering of the standards under generic standards 13 and 14. The Executive had discussed possible ordering of these standards with the previous occupational therapist member of the Council and would discuss possible ordering with the occupational therapist members of the Education and Training Committee and the Council. The standards would be subject to approval by the Council.
 - 12.3 The Committee discussed whether it would be possible to encourage stakeholders to respond to consultations. The Committee noted that stakeholders were being encouraged to respond using an online response form and this had increase responses. The Committee noted that more employers and practitioners were responding to consultations.
 - 12.4 The Committee recommended that the Council approve the consultation response analysis and draft standards of proficiency for occupational therapists, subject to any necessary minor editing changes and formal legal scrutiny.
- **ACTION: Policy Officer** to present the response analysis and draft standards of proficiency to the Council for discussion and approval at its meeting of 4 December 2012.

Item 13 Standards of proficiency consultation analysis and revised standards of proficiency for physiotherapists (ETC 68/12)

- 13.1 The Committee received a paper for discussion/approval from the Executive providing the results and analysis by the Executive of a consultation on the profession-specific standards of proficiency for physiotherapists. The review of profession-specific standards followed from the Council's approval of new generic standards of proficiency in March 2011
- 13.2 The Committee noted that some minor changes would be made to the draft standards before they were considered by the Council. For example, the term 'intervention' would be used instead of 'treatment'. In addition, draft standards 14.18 and 14.19 would be amalgamated, as responses to the consultation indicated that these standards had the same meaning.
- 13.3 The Committee recommended that the Council approve the consultation response analysis and draft standards of proficiency for physiotherapists, subject to any necessary minor editing changes and formal legal scrutiny.
- **ACTION: Policy Officer** to present the response analysis and draft standards of proficiency to the Council for discussion and approval at its meeting of 4 December 2012.

Item 14 Standards of proficiency consultation analysis and revised standards of proficiency for radiographers (ETC 69/12)

- 14.1 The Committee received a paper for discussion/approval from the Executive providing the results and analysis by the Executive of a consultation on the profession-specific standards of proficiency for radiographers. The review of profession-specific standards followed from the Council's approval of new generic standards of proficiency in March 2011.
- 14.2 The Committee received a tabled paper from the Executive, reporting concerns from the Society and College of Radiographers about some of the standards which had been revised following consultation. The concerns were about the content or positioning of some standards and, given the nature of their concerns, the Executive felt that it was appropriate to share the issues with the Committee.
- 14.3 The Committee discussed the concerns raised by the Society and College of Radiographers:
 - standard 13.27 (a proposed new standard for diagnostic radiographers, reading 'be able to assist with imaging procedures involving the use of radionuclides'): The Society was happy for the proposed new standard to be added to the requirements for diagnostic radiographers, but considered its current position within the standards to be inappropriate. The Society suggested that it should be positioned after standard 14.33. The Committee

agreed that the standard could be appropriately located under generic standard 14:

- standard 14.11 (the proposed standard would read 'be able to manage complex and unpredictable situations involving the ability to adapt interventions or treatments'): The Society was content that the second part of the standard should be removed, but were concerned about the proposed removal of the phrase 'planned diagnostic imaging examinations' from the standard. The Society felt that the proposed standard's use of the word 'interventions' did not adequately describe the work of diagnostic radiographers. The Committee agreed that the phrase 'planned diagnostic imaging examinations' could be returned to the standard, so that it would read 'be able to manage complex and unpredictable situations including the ability to adapt planned diagnostic imagining examinations, interventions or treatments':
- standard 14.26 (a proposed standard for diagnostic radiographers, with the wording 'be able to calculate radiation exposure and record and understand the significance of the radiation dose'): The Society supported the separation of the requirements of this standard into distinct standards of each modality. However, the Society was concerned by the wording of the standard for diagnostic radiographers, as they felt it weakened the requirement for diagnostic radiographers to understand the relationship between exposure factors used and radiation dose received by the patient. The Society suggested the amendment 'be able to calculate radiation exposure and the resulting radiation dose, and record and understand the significance of the radiation dose'. The Committee noted that students were taught these aspects of practice, although, in practice, calculations were often automatically made by equipment. The Committee agreed that the standard should read 'be able to calculate radiation dose and exposure and record and understand the significance of radiation dose';
- standard 14.34 (the proposed standard would read 'be able to distinguish disease and trauma processes as they manifest on diagnostic images'): The Society was concerned about the lack of change to this standard. It considered that diagnostic radiographers were able to provide a written report identifying abnormalities in diagnostic images. This requirement had been part of the Society's professional policy since 2006 and the Society stated that they had recently agreed guidelines with the Royal College of Radiologists on this issue. The Committee noted that the guidelines mentioned by the Society related to team working in clinical imaging, including team work in reporting. The Committee also noted that some respondents to the consultation, including the Royal College of Radiologists, had raised concerns that the consultation version of the standard ('be able to distinguish disease and trauma processes as they manifest on diagnostic images and form a preliminary view on the imaging appearances') was set beyond the threshold level for newly qualified radiographers. The Committee agreed that the standard should read 'be able to distinguish disease and trauma processes as they manifest on diagnostic images';

- standard 14.42 (the standard 'be able to perform standard CT planning procedures' would be removed, as some respondents to the consultation felt that this requirement was beyond threshold level for newly qualified radiographers). The Society was concerned that this standard would not be included and considered that all centres should be delivering this requirement. The Society suggested that if the standard consulted on was too strong, the following amendment could be included instead: 'be able to assist in planning standard CT planning procedures'. The Committee noted that the Society's suggestion reflected training for students and practice and agreed that the standard should be worded as suggested by the Society; and
- standard 14.43 (the proposed standard 'be able to construct appropriate immobilisation devices, individualised to the specific needs of each patient and the treatment regime prescribed' would be removed, as the HCPC had been advised that this area was considered to be more specialist practice for therapeutic radiographers and was not offered by all education providers, nor was it required in every workplace. The Executive considered that standard 14.24 was sufficient at present and recommended that standard 14.43 would be removed). The Society was concerned that this standard would not be included and considered that all education programmes should be delivering this requirement. It suggested that if the standard consulted on was too strong, the following amendment could be included instead: 'be able to assist in the construction of appropriate immobilisation devices, individualised to the specific needs of each patient and the treatment regime prescribed.' The Committee agreed that the Society's suggestion was appropriate and agreed that the standard should be worded as suggested by the Society.
- 14.4 The Committee recommended that the Council approve the consultation response analysis and draft standards of proficiency for radiographers, subject to the changes indicated above, any necessary minor editing changes and formal legal scrutiny.
- **ACTION: Policy Officer** to present the response analysis and draft standards of proficiency to the Council for discussion and approval at its meeting of 4 December 2012.
 - 14.5 The Committee thanked Alison Croad for her work on the review of the standards of proficiency to date.
- Item 15 Implementation of revised standards of proficiency for education providers (ETC 70/12)
 - 15.1 The Committee received a paper for discussion/approval from the Executive, providing details of how the Education Department would ensure that the programmes continued to meet the revised standards of proficiency as they were introduced to each profession.

- 15.2 The Committee agreed the process and timescale for assessing how currently approved programmes continue to meet the revised standards of proficiency as they were introduced to each profession.
- **ACTION: Education Department** to implement process and timescale (ongoing to 2018)

Item 16 Criteria and eligibility of Visitor Partners to supplementary prescribing approval and monitoring work (ETC 71/12)

- 16.1 The Committee received a paper for discussion/approval from the Executive, providing a proposed amendment to the criteria to be used for Visitor Partners to supplementary prescribing approval and monitoring work.
- 16.2 The Committee noted that, on 13 September 2012, it had approved the criteria that would be used to allocate visitors for the approval and monitoring activities for independent prescribing programmes. The criteria for visitors allocated to supplementary prescribing programmes now need to be updated to reflect these requirements.
- 16.3 The Committee agreed the text of the framework of considerations for the allocation of visitors to the supplementary prescribing and approval and monitoring work, provided as appendix one to the paper.

Item 17 Supplementary and independent prescribing programmes – approval and monitoring plans (ETC 72/12)

- 17.1 The Committee received a paper for discussion/approval from the Executive, setting out proposals for processes which would be used to approve supplementary/independent prescribing programmes and monitor current supplementary prescribing programmes against the new standards for prescribing.
- 17.2 The Committee noted that the draft stand-alone standards for supplementary and independent prescribing were currently out for public consultation until 4 January 2013. The responses to the consultation and final standards for prescribing were due to be presented to the Education and Training Committee and Council meetings in March 2013, with the intention of publishing the standards in April 2013.
- 17.3 The Committee noted that, when the standards were finalised, they would be used to approve training programmes which delivered training in supplementary and/or independent prescribing. HCPC would also use these standards to monitor those programmes on an ongoing basis.

17.4 The Committee:

 agreed that the approval process was the most appropriate mechanism for approving supplementary/independent prescribing programmes for new education providers;

- (2) agreed the mechanisms for approving supplementary/independent prescribing programmes for current education providers:
 - that the most proportionate process to assess these changes was through a paper based assessment;
 - that all of the standards for prescribers would need to be evidenced through this process;
 - that some standards for education providers would need to be evidenced through this process;
 - that the process and any exemptions on the standards for education providers would be determined by the Executive (with professional input where required); and
- (3) agreed that the annual monitoring process was the most appropriate mechanism to assess current approved supplementary prescribing programmes.

Item 18 Professionalism in nursing, midwifery and the allied health professions in Scotland (ETC 73/12)

- 18.1 The Committee received a paper for discussion/approval from the Executive about an external report on 'Professionalism in nursing, midwifery and the allied health professions in Scotland'.
- 18.2 The Committee noted that following the publication in 2010 of the 'Healthcare Quality Strategy for NHS Scotland' which held a vision of a 'world class healthcare system', the Chief Nursing Officer of the Scottish Government, Ros Moore, and the NMAHP (Nursing, Midwifery and Allied Health Professions) Coordinating Council had commissioned a report on professionalism as they agreed that it was a good opportunity 'to consider how we could re-energise the concept.'
- 18.3 The Committee noted that the Chair of the Council had been appointed to the working group. This group was chaired by a lay member, Dr Frances Dow, former Vice Principal at the University of Edinburgh. The working group had been tasked with exploring the issue of professionalism and the focus was on the NMAHP workforce, although not exclusively, and had been carried out in parallel to the ongoing work in this area within Scottish medicine. The working group formulated a series of recommendations which were summarised in the report appended to the paper. The Coordinating Council had considered the report and further work on implementing the recommendations was under development.
- 18.4 The Committee noted that the Council had discussed the report at its meeting on 9 February 2012 and had agreed that the report should be forwarded onto the Committee for further consideration. In particular, the

Committee had been tasked with looking at those recommendations in the report that could be taken forward by the HCPC.

- 18.5 In discussion, the following points were made:
 - the Committee agreed that the paper was interesting and that the recommendations in the report could be used to encourage individual professionals to develop their professionalism through supervision, which might as a result develop the understanding of professionalism within organisations; and
 - education provision and practice placements might develop in smaller organisations in the voluntary and charity sectors over the next few years and these sectors would need to engage with concepts of professionalism.

Item 19 Nomination of representative to external organisation (ETC 74/12)

- 19.1 The Committee received a paper for discussion/approval from the Executive, asking the Committee to nominate a representative of the HCPC to sit on the Higher Education Academy's Health and Social Care Reference Group.
- 19.2 The Committee noted that details of the position had been circulated to members of the Committee by e-mail on 31 October, seeking expressions of interest in the role by 6 November. Several expressions of interest had been received and, as a result, members were asked to provide a paragraph setting out their suitability for the role. These statements had been considered by the Chair of the Committee in order for her to make a recommendation to the Committee.
- 19.3 The Committee agreed to recommend to the Council that Stephen Wordsworth should be the representative of the HCPC on the Higher Education Academy's Health and Social Care Reference Group.
- **ACTION:** Secretary to Council to present a paper to the Council, recommending Stephen Wordsworth as the HCPC's representative, at the Council meeting on 4 December 2012.

The Committee noted the following items:

Item 20 Hearing aid dispensers: Review of approval visits 2011-12 (ETC 75/12)

Item 21 Panel decisions September-October 2012 (ETC 76/12)

The Committee received the following papers for information:

Item 22 Health and Character report (ETC 77/12)

Item 23 Education systems and process review major project (ETC 78/12)

Item 24 Any other business

- 24.1 The Chair reported that Colin Bendall would be leaving the HCPC, thanked him for supporting the Committee and wished him well for the future.
- 24.2 The Chair reported that Abigail Gorringe would be taking maternity leave in early 2013 and wished her well.

Item 25	Date a	nd time c	of next	meeting:
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10.30 am, 7 March 2013

Chair

Date