

Education and Training Committee 25 September 2008

Reports from Education and Training Committee representatives at external meetings

Executive summary and recommendations

Introduction

The Committee has agreed that representatives of the Committee should formally report back from meetings at which they have represented the Committee, by completing a standard form outlining the meeting attended and the key decisions taken.

Feedback forms, which are attached, have been received from the following members:

- (1) Daisy Haggerty (two reports)
- (2) Tony Hazell
- (3) Neil Willis

Decision

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

Background information

Minute 5.6.1 of the Education and Training Committee meeting, 23 June 2004.

Resource implications

None.

Financial implications None.

Background papers

None.

Appendices

Copies of feedback forms.

Date of paper

11 September 2008

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2008-09-11	а	ETC	PPR	Executive summary reports from	Final	Public
				external meetings Education and	DD: None	RD: None
				Training Committee 25 September		
				2008		



FEEDBACK SHEET TO BE COMPLETED AFTER THE MEETING

Name of Council Member	Daisy Haggerty	
Title of Conference/Meeting	Association of Clinical Scientists Board Meeting and AGM	
Date of Conference	10 th March 2008	
Approximate number of people at the conference/meeting	16 members and representatives	
incorporated into them were discuss ACS) had attended a meeting at HPC qualifications. The ACS are expecting an audit from yet.	HPC but no date has been agreed as	
the HPC. As the president of HPC is non-medical revalidation I stressed t	Id the possible effects on the work of a member of the working group on he importance of input from the had been set up by HPC to discuss and	
The new Chair of ACS is Dr Neil Lew Sheldon.	is and the Secretary is Dr Joanna	
Key Decisions Taken		
Please complete as much of the abo	ve as you can and return by post to	

Please complete as much of the above as you can and return by post to Alison Roberts, Council and Committee Secretariat, Health Professions Council, Park House, 184 Kennington Park Road, London, SE11 4BU, or alternatively by e-mail to <u>alison.roberts@hpc-uk.org</u>

February 2008



FEEDBACK SHEET TO BE COMPLETED AFTER THE MEETING

Name of Council Member	Daisy Haggerty		
Title of Conference/Meeting	Association of Clinical Scientists Board Meeting		
Date of Conference	1 st July 2008		
Approximate number of people at			
the conference/meeting	20		
Issues of Relevance to HPC			
A good proportion of the meeting wa			
Graham Beestall on 'Modernising Sc	· · ·		
The MCS programme has been put for			
regulation establishing general, spec			
requirements linked to registration a			
• •	bust discussion between the members		
and the representatives from the Dol	around the proposed model of		
training and the timetable.			
An information document, 'Next Step			
September 2008, curriculum development is proposed during 2009			
followed by a pilot of the programme			
programme to become operational is			
Following concerns expressed rega			
	ional Chinese medicine practitioners,		
my presentation to the ACS in the se			
	hether an aspirant group is eligible for		
regulation which is done in two parts			
A- listing the types of activities the and	nat may be undertaken by that group		
	nto that apph appunction wishing to be		
regulated should be able to de	nts that each occupation wishing to be		
regulated should be able to de	monstrate.		
I also informed them of the establish	ment of PI Gs to consider issues		
relevant to the statutory regulation o			
Key Decisions Taken			
These proposed changes to the qual	ification and training of a new		
'Healthcare Scientist' group that will			
registration is of particular relevance			
Education and Training Committee.			
			
Please complete as much of the above	ve as you can and return by post to		
Alison Roberts, Council and Commit	tee Secretariat. Health Professions		

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Feedback sheet to be completed after the meeting

Name of council member	Professor Tony Hazell		
Title of conference/meeting	PSRB/QAA Forum		
Date of conference	24 th June 2008		
Approximate number of people at the conference/meeting	30		
Issues of relevance to HPC			
The forum was attended by representatives Regulatory Bodies' (PSRBs) from a number were: General Osteopathic Council British Psychological Society Healthcare Commission Postgraduate Medical Education & British Association for Counselling & Council for Healthcare Regulatory E Nursing & Midwifery Council General Medical Council	er of sectors. Those from the health sector Training Board & Psychotherapy		
The forum had been convened by the QAA from the Higher Education Regulation Revi was to discuss whether the overall structur well, particularly from the perspective of PS	iew Group (HERRG). The main objective e of HE quality assurance is functioning		
Of particular interest was the rather different 'regulation' is carried out by professional bo regulators such as the HPC (e.g. architects liaising with the UK Inter-professional Group by Tom Berry.	odies rather than by independent s, surveyors, accountants). QAA has been		
"The UKIPG was founded in 1977 to act as Regulatory Bodies in the United Kingdom. reach across the healthcare, legal, financia professions. Some are statutory bodies; ot Royal Charter. Major areas of interest inclu Education and Training, the impact of Euro Professional Ethics and Values." (an extra	There are 30 bodies in membership. They al, scientific, engineering and construction hers regulate under the terms of their ude Professional Regulation, Professional opean and International Affairs, and		
From the discussion that took place it was ahead of the game!!	clear that, in most areas, HPC is well		
particularly within the same sector.	cross the different regulatory bodies,		

- Tensions between regulatory bodies and professional bodies.
 The sharing of reports undertaken on education providers.
- The issue of competition between HEIs.
- Single practitioners as employer. •

- The need for external review to be aligned with internal review cycle.
- Issues relating to practice-based assessment.
- The involvement of 'end users' in assessment.
- The role of external examiners and the possible need for 'commonality' across health programmes.
- The possible sharing of 'causes for concern' information between different regulators.
- Problems arising from the multiplicity of 'Sector Skills Councils'.

Key decisions taken

The only 'decision' taken was that QAA would consider all the points raised during the discussion and would probably convene another forum later in the year.

Feedback sheet to be completed after the meeting

Date of C	Conference/Meeting	Institute of Biomedical Sciences Executive	
	Conference		
Approxin		27 August 2008	
	nate number of people at the meeting	6	
Issues c	of Relevance to HPC		
Scie Hea The viev cha	entific Careers and to clarify the vie althcare Scientists. a review was welcomed but the IBMS ws the MSC as a retrograde step, as	uss the implications of the Modernising ews of the IBMS and the Federation of S is unable to support the initiative and the specific details appear to regularly core issues of which there were a number	
	e review does not take into account th blved over time.	e maturity of current programs that have	
	e Masters level programs for general c. with evidence of acquired skills is a	registration are not necessary Honours a more appropriate level.	
	s not clear how HEIs and training ntrolled.	centres will be accredited and quality	
	hree year training period is expens blicants.	sive and discouraging to well qualified	
• The	suggested framework is too rigid and	d should aim to promote best practice.	
	e Healthcare Scientist Career Pathway professional bodies appears have bee	bases on meritocracy and supported by n disregarded.	
	pirant groups have been disregarde vards registration held up for an unacc	d, ignored or have had their progress eptable period.	
	feel that it is very important that ther groups of staff	e is a clear route to state registration for	
Key Dec	cisions Taken		
The Inst form	itute of Biomedical Sciences is unable	e to support the MSC project in its existing	