

Education and Training Committee, 11 September 2014

Review of the standards of education and training

Executive summary and recommendations

Introduction

We aim to carry out a periodic review of all our standards approximately every 5 years, to ensure they remain effective and up to date. The standards of education and training (SETs) were last updated in 2009, and are now due to be reviewed again.

This paper provides the background and proposed scope, content and process for a periodic review of the SETs and supporting guidance document. It is anticipated that the review will be conducted on a staged basis over approximately three years, comprising a range of research and stakeholder engagement activities to gather the views of stakeholders; a Professional Liaison Group (PLG) to discuss potential changes to the standards; and a public consultation. The review was included in the Policy and Standards Department Work Plan for 2014-15.

In June 2014 the Education and Training Committee approved the commissioning of external research to examine the nature and extent of interprofessional education (IPE) within approved education and training programmes, which will be used to inform the review. An additional piece of external research is proposed on preparation for practice among newly qualified professionals at the end of an approved education or training programme (see separate agenda item at this meeting).

Decision

The Committee is invited to discuss and agree the attached paper.

Background information

- Council, 26 March 2014. Policy and Standards Department Work Plan 2014-2015. http://www.hcpc-uk.org/assets/documents/10004547Enc08-
 PolicyandStandardsworkplan2014-15.pdf
- Education and Training Committee, 5 June 2014. Interprofessional education research.

http://www.hpc-uk.org/assets/documents/10004645Enc04-Interprofessionnaleducationresearch.pdf

Other background information: see attached paper.

Resource implications

The resource requirements associated with the review are accounted for in Policy and Standards Department planning for the 2014-2015 financial year and will be accounted for in the 2015-2016 and 2016-2017 financial years.

Financial implications

The financial implications include the cost of commissioning two pieces of external research (maximum of £90,000 in total). This is accounted for in the Policy and Standards Department budget for 2014-2015 and will be included in the budget for the 2015-2016 financial year.

Appendices

- Appendix 1: HCPC standards of education and training (current version, published 2009 / amended 2014).
- Appendix 2: Education and Training Committee Stakeholder Event (30 April 2014) Feedback from the discussion groups.
- Appendix 3: Summary of considerations for reviewing the SETs and guidance
- Appendix 4: Timetable for standards of education and training review (2014-2017)

Date of paper

29 August 2014



Review of the standards of education and training

1. Introduction

- 1.1 The HCPC standards of education and training (SETs) set out the requirements for pre-registration education and training programmes which are approved by us. They are common across all 16 professions and cover areas such as admissions, curricula, programme management, resources and assessment. A programme that successfully meets the SETs will enable a student to meet the HCPC standards of proficiency (SOPs) by its completion. A student successfully completing an approved programme will be eligible to apply for registration with us.
- 1.2 The guidance supporting the standards has been written to provide advice to education and training providers on how programmes will be assessed and monitored against the standards.
- 1.3 We periodically review all of our standards to ensure they remain up to date and fit for purpose. The SETs were last re-published five years ago in 2009 and are now due to be reviewed again. This paper provides the background and context for a review of the SETs and supporting guidance, and also proposes the scope, process and timeline.

2. Background to the review

- 2.1 We review our standards in two different ways (this paper proposes a review of the second type):
 - On-going review means the 'day-to-day' review of the standards by the Council, Committees and the Executive. This is primarily to ensure that the standards do not limit effective ways of working for registrants and education providers. On-going review might indicate that a specific change to a standard was necessary or indicate that a more detailed 'periodic' review should be brought forward.
 - **Periodic review** refers to when we review the standards in more detail to ensure that they:
 - remain fit for purpose;
 - are well understood by our stakeholders including registrants, service users and carers, education providers and the public; and
 - take account of change including changes in practice, legislation, technology, guidelines and wider society.

- 2.2 We aim to carry out periodic reviews of all our standards approximately every five years. The SETs were last reviewed starting in 2007, and the current standards came into effect in July 2009. These are attached at Appendix 1.
- 2.3 The Policy and Standards Department Work Plan 2014-15 includes a periodic review of the SETs and supporting guidance to commence during the year. The Executive's initial assessment is that the existing standards generally work well, and therefore the forthcoming review is likely to focus on strengthening rather than radically changing them.

Threshold level of qualification (SET 1)

- 2.4 Standard 1 of the SETs (referred to as SET 1) provides the threshold levels of qualification 'normally' expected for a qualifying student to meet the SOPs for each profession.
- 2.5 The Education and Training Committee (ETC) has been presented with a paper to discuss increasing the threshold level of qualification for paramedics, given the revised SOPs for this profession, and the fact that there has been a move to develop more education and training for paramedics in higher education in recent years. If the ETC agrees to increase the SET 1 level for paramedics, it would be an 'outside of cycle' change, to be consulted on separately and therefore does not form part of this review.

Other standards reviews

- 2.6 The standards of conduct, performance and ethics (SCPE) are also currently being reviewed, with amendments being considered by a Professional Liaison Group (PLG), and they are on track to be re-published in 2016. In addition we are in the midst of a phased review of the profession-specific SOPs for 15 of the professions which should be completed in early 2015-16. A review of the SOPs for social workers in England is planned to commence in mid-2015.
- 2.7 In light of these other priorities, the timing of the review of the SETs has been planned to ensure best use of resources and stakeholder input. We have also tried to avoid reviewing too many sets of standards at once and having more than one PLG process running at the same time.

3. Activity undertaken to date

- 3.1 The ETC hosted a stakeholder event in April 2014. The event included updates from the Executive and from the Chair of the Committee, as well as opportunity for group discussion and feedback from those in attendance.
- 3.2 Some of the themes which emerged during the group discussion and feedback sessions of this event are relevant to the review of the SETs, and these have been incorporated in section 4 below on possible content for the

¹ See separate agenda item and enclosure from ETC meeting on 11 September 2014.

- review. A document summarising feedback from the event is attached at Appendix 2.
- 3.3 It is planned to hold at least one ETC stakeholder event per year. We propose using events in subsequent years to continue gathering feedback from stakeholders as the review of the SETs progresses.

4. Scope and content of the review

- 4.1 As with other standards reviews, the review of the SETs will be an opportunity to make sure that the standards and supporting guidance remain clear and accessible. The continued applicability of the standards and supporting guidance should also be considered, with regard to the professions which have become regulated by the HCPC since the last review (i.e., practitioner psychologists, hearing aid dispensers and social workers in England).
- 4.2 In addition to these general considerations, the activity undertaken to date and the wider policy context (including commitments made by the Council, third-party reports and recommendations) have informed what we propose as possible content for the review. The possible themes listed below are a starting point but are likely to be revised and/or added to as the review progresses.
- 4.3 The table at Appendix 3 provides an outline of considerations in each of these areas and also gives further detail about possible amendments. This list is not exhaustive.

Structure, format, language and tone

- 4.4 Discussion at the ETC stakeholder event in April 2014 addressed the structure and format of the SETs and supporting guidance. In general stakeholders commented that the current structure of both documents works well. However there were some concerns about the large number of standards, and some stakeholders saw value in consolidating some of the standards in order to reduce duplication.
- 4.5 Stakeholders also suggested that the tone of the guidance could be made more encouraging of innovation and variation among programmes. This would help prevent the SETs from being interpreted too rigidly or being used to inhibit change.
- 4.6 The review should look to ensure that the language and terminology used in the SETs and supporting guidance are appropriate across all of our regulated professions; in particular that it is equally applicable to programmes for health professions as well as for social work.
- 4.7 In addition, the SETs supporting guidance has in the past been amended in a somewhat piecemeal way, so any revisions arising from this review should seek to increase its coherence and consistency.

4.8 We will explore the topics of structure, format, language and tone of the documents further with stakeholders during the course of the review.

Professionalism in healthcare professionals

- 4.9 An on-going research programme commissioned from Durham University is looking at aspects of professionalism. The report 'Professionalism in healthcare professionals', published in 2011, explored how professionalism was perceived by students and educators across three HCPC-regulated professions (paramedics, occupational therapists and chiropodists/podiatrists).²
- 4.10 The report found that many participants saw professionalism as a reflection of personal attributes, beliefs or attitudes rather than simply a knowledge-based competency. However, educators also saw the need to develop and bring out the best of students as an important part of their role, meaning they needed to engage with professionalism as something that can be taught or at least improved in an educational setting. The report suggested that these perceptions may have implications for the ways in which health or social care professionals are selected, taught and developed in training.
- 4.11 We will consider during this review whether the SETs and supporting guidance can be strengthened to further promote the teaching and/or development of professionalism during pre-registration education and training.

Interprofessional education

- 4.12 The topic of interprofessional education (IPE) was debated by the PLG convened the last time the SETs were reviewed. At that time, the PLG did not consider it appropriate to mandate IPE in approved programmes, based on concerns about whether all approved programmes would be able to meet such a requirement.
- 4.13 The existing SET 4.9 is 'negatively framed' in that it currently focuses on ensuring that, where IPE takes place, it is not to the detriment of profession-specific skills. Our initial view is that it is appropriate to consider making a more positive requirement for IPE in approved programmes. This was a position generally supported at the ETC stakeholder event in April 2014.
- 4.14 We are commissioning external research on the extent and nature of IPE in the programmes we approve, in order to inform the text of a possible standard and supporting guidance which may require this in the future (see 5.3 below).

Student fitness to practise

4.15 Student fitness to practise is about students having the necessary health and character so they will be able to practise safely and effectively once they

² The full report is available here: HCPC (2011). Professionalism in healthcare professionals. http://www.hcpc-uk.org/assets/documents/10003771Professionalisminhealthcareprofessionals.pdf

become registered. It is also about students' ability to act appropriately with those they come into contact with when they are training, including service users.

- 4.16 In September 2012, the ETC was presented with a paper discussing the area of student fitness to practise in light of an HCPC public consultation on this topic in late 2011 to early 2012 and the outcomes of a commissioned literature review.³ The literature review concluded that regulators should require that a range of both proactive and reactive measures are in place to ensure student fitness to practice in approved programmes. However, responses to the public consultation did not indicate any clear consensus on whether additional guidance or advice from HCPC on this topic would be helpful.
- 4.17 While many of the recommendations of the literature review and consultation were thought to be well reflected in the existing SETs and supporting guidance, the Executive identified some areas as potentially meriting further consideration during the next review of the SETs (more detail is provided in the table at Appendix 3).

Preparation for practice

- 4.18 We define preparation for practice as the ability of students at the end of an approved education or training programme to meet the SOPs for their profession and to practise safely and effectively. Preparation for practice among newly qualified professionals can be seen as a key measure of the effectiveness of the SETs. As such this is not a distinct theme in and of itself, but a way of thinking about the outcome that the SETs are designed to achieve.
- 4.19 Two independent reviews of social work education (by Martin Narey and David Croisdale-Appleby) published in February 2014 were critical of the SETs, concluding that the standards are neither specific enough to social work and social work education, nor sufficiently demanding of education providers. ⁴ In response to these critiques about the robustness of the SETs, the Executive suggested that the next periodic review could include examination of newly qualified registrants' preparation for practice, in order to consider whether the existing standards and guidance need to be strengthened in some way.
- 4.20 We are proposing that external research be commissioned to examine preparation for practice among newly qualified registrants across the professions we register (see paragraph 5.3 below). This research will focus on the role of the SETs and guidance in ensuring preparation for practice. By better understanding this role we hope to be able to identify whether or how

³ The paper with the full literature review in appendix is available here: ETC meeting, 13 September 2012. Student fitness to practise. http://www.hcpc-uk.org/assets/documents/10003C4808-studentfitnesstopractise.pdf

⁴ In March 2014 the Council considered these reports along with the Executive's analysis of them; see: Council meeting, 27 March 2014. Reviews of social work education in England. http://www.hcpc-uk.org/assets/documents/1000452AEnc01-ReviewsofsocialworkeducationinEngland.pdf

these documents might be amended to better ensure that students are fit to practise at entry to the Register.

Practice placements

- 4.21 The standards on practice placements (SET 5) have historically been the area with the most conditions set during the approval process for education and training programmes (although the 2013-2014 academic year represented a slight departure from the norm).⁵ The accepted analysis is that this is because practice placements are the area where education providers must work with a large number of stakeholders and invest both time and resources.
- 4.22 In response to the Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry (published in February 2013), we committed to using this review to consider amendments to the SETs and supporting guidance that would better set out expectations for education providers in ensuring the safety of service users in the practice learning environment. ⁶
- 4.23 Additionally, the Narey and Croisedale-Appleby reviews of social work education expressed concerns about the quality and availability of appropriate practice placements in social work and about the HCPC's approach in placing responsibility with education providers for the quality assurance of placements. Based on feedback from the ETC stakeholder event, this is an area relevant across the regulated professions which will be important to consider during the review.
- 4.24 We expect that this review will include further examination of the requirements contained in SET 5, and consideration of whether and how the standards and/or guidance may be amended to strengthen the quality assurance of practice placements.

Values

- 4.25 Findings from the research conducted by Durham University indicate that, while professionalism is viewed as often contextual, participants recognised that it may also require innate attributes or values, which can exist even prior to a student commencing an education or training programme. This raises questions about whether it is possible to teach values, or whether students should be selected based on the values they already possess.
- 4.26 The inclusion of values in education and training programmes was another topic of discussion at the ETC stakeholder event in April 2014. A number of attendees commented that the link between the SETs and SCPE needed

⁵ These data are available in the Education annual reports published on the HCPC website: http://www.hcpc-uk.org/publications/reports/

⁶ The HCPC's response and action plan can be found here: Council meeting, 9 May 2013. HCPC response to the Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry http://www.hcpc-uk.org/assets/documents/10003FDCenc05-
MidStaffordshireNHSFoundationTrustPublicInquiryactionplan.pdf

- strengthening, in particular the links between behaviour and values and admissions, curriculum and assessment.
- 4.27 There was less agreement, however, on the inclusion of standards relating to values-based recruitment, which some stakeholders considered to be a short-term political response in the wake of recent scandals and reviews of the health and care sectors. Related comments were that values are best reflected as an output from approved programmes rather than prescribed as part of admissions in the SETs.
- 4.28 It should be noted that Health Education England is implementing a mandate from the Department of Health which includes delivery of a national values-based recruitment framework and associated resources by October 2014; and a requirement that by March 2015 recruitment to all new NHS-funded training posts (in England) will incorporate some form of assessment related to the values of the NHS Constitution.⁸

5. Review process

5.1 The Executive proposes that this periodic review of the SETs be carried out in three phases, as set out below. We are planning to complete the review in 2017, with the new standards applicable to education and training programmes from the 2017-2018 academic year. An indicative timeline is attached at Appendix 4; it is possible that these dates may change as the review progresses.

Phase 1: Research and stakeholder engagement

- 5.2 The first phase of the review would comprise a range of activities aimed at gathering views from a number of stakeholder groups; and at exploring specific topics in more depth via research. The results of these activities may indeed bring new themes to light which need examining during the review.
- 5.3 The Executive plans to commission two pieces of external research, related to themes mentioned above, to inform possible amendments:
 - As agreed by the ETC in June 2014, we are in the process of commissioning external research on the extent and nature of IPE in HCPC-approved programmes. We expect to have appointed a researcher/research team by 19 September 2014, and the target date for completion is May 2015.9

⁷ In addition to the Mid Staffordshire public inquiry, the importance of values on patient care and experience was emphasised by the review of hospital mortality rates by Professor Sir Bruce Keogh; the review of healthcare assistants and social care support workers by Camilla Cavendish; and the review into patient safety by Don Berwick (all published 2013).

⁸ See http://hee.nhs.uk/work-programmes/values-based-recruitment/.

⁹ The approved research brief and call for proposals can be found here: Education and Training Committee, 5 June 2014. Interprofessional education research. http://www.hpc-uk.org/assets/documents/10004645Enc04-Interprofessionnaleducationresearch.pdf

- We are also proposing to commission an external researcher/research team to explore the topic of preparation for practice. A research brief has been prepared for approval by the ETC.¹⁰
- 5.4 We will seek ways of engaging with a range of external stakeholders including education providers, students, practice placement educators and service users to obtain views on the themes above and any other aspects of the SETs and supporting guidance which may require re-examination. Planning is already underway to make best use of existing groups, meetings and other forums to discuss the review and gather feedback from attendees. Where necessary, we will also look at developing other means of targeting specific groups, such as surveys or questionnaires, workshops, focus groups or themed meetings.
- 5.5 Additionally we will conduct internal engagement activities in order to utilise the expertise of ETC members, HCPC visitors and Education Department employees with experience of using the SETs operationally in approval and monitoring of programmes. These internal stakeholders will be a valuable source of information about what does or does not work well in practice and what additional risks, if any, may be addressed via the standards.

Phase 2: Professional Liaison Group

- We are proposing that a PLG be convened to consider the outcomes from the activities in the first phase and any potential amendments to the SETs and supporting guidance. The on-going review of the SCPE includes a PLG, and our initial assessment is that this process has been valuable and well received.
- 5.7 If this is agreed, a PLG work plan, terms of reference and proposed membership will be produced for approval by the ETC and Council in mid-2015.

Phase 3: Public consultation

- 5.8 The third phase of the review would be a public consultation on the proposed revised SETs and supporting guidance. This will be an opportunity to seek views across a broader range of stakeholders including those not targeted during the earlier phases.
- 5.9 An analysis of the responses received during the public consultation, as well as any final amendments to the revised standards, will be presented to the ETC and the Council for approval.

¹⁰ See separate agenda item and enclosure from ETC meeting, 11 September 2014.



Your duties as an education provider

Standards of education and training

Contents

Introduction 1
Level of qualification for entry to the Register 2
Programme admissions 4
Programme management and resources 5
Curriculum 7
Practice placements 8
Assessment 10

Introduction

This document sets out the standards of education and training (SETs). These are the standards against which we assess education and training programmes.

A programme which meets the SETs allows a student who successfully completes that programme to meet the standards of proficiency. They are then eligible to apply to the Health and Care Professions Council (HCPC) for registration.

The Education Department is responsible for conducting approval visits to education providers to ensure their programmes meet the SETs. If a programme meets the SETs we grant open-ended approval, subject to ongoing monitoring.

Annual monitoring is a retrospective, documentary process to determine whether a programme continues to meet the standards of education and training. If any changes are made which significantly impact on the provision of the programme we consider these via our major change process to make sure that the SETs continue to be met.

We have also produced supplementary information documents for education providers when preparing for an approval visit, completing annual monitoring submissions, or making significant changes to programmes. These documents give more information about the processes we use to assess and monitor programmes against the SETs.

Level of qualification for entry to the Register

1.1 The Council normally expects that the threshold entry routes to the Register will be the following:

Bachelor degree with honours for:

- biomedical scientists (with the Certificate of Competence awarded by the Institute of Biomedical Science, or equivalent);
- chiropodists / podiatrists;
- dietitians;
- occupational therapists;
- orthoptists;
- physiotherapists;
- prosthetists / orthotists;
- radiographers;
- social workers in England; and
- speech and language therapists.

Masters degree for arts therapists.

Masters degree for clinical scientists (with the Certificate of Attainment awarded by the Association of Clinical Scientists, or equivalent).

Foundation degree for hearing aid dispensers.

Diploma of Higher Education for operating department practitioners.

Equivalent to Certificate of Higher Education for paramedics.

Professional doctorate for clinical psychologists.

Professional doctorate for counselling psychologists, or equivalent.

Professional doctorate for educational psychologists, or equivalent.

Masters degree for forensic psychologists (with the award of the British Psychological Society qualification in forensic psychology, or equivalent).

Masters degree for health psychologists (with the award of the British Psychological Society qualification in health psychology, or equivalent).

2

Masters degree for occupational psychologists (with the award of the British Psychological Society qualification in occupational psychology, or equivalent).

Masters degree for sport and exercise psychologists (with the award of the British Psychological Society qualification in sport and exercise psychology, or equivalent).

Programme admissions

- 2.1 The admissions procedures must give both the applicant and the education provider the information they require to make an informed choice about whether to take up or make an offer of a place on a programme.
- 2.2 The admissions procedures must apply selection and entry criteria, including evidence of a good command of reading, writing and spoken English.
- 2.3 The admissions procedures must apply selection and entry criteria, including criminal convictions checks.
- 2.4 The admissions procedures must apply selection and entry criteria, including compliance with any health requirements.
- 2.5 The admissions procedures must apply selection and entry criteria, including appropriate academic and / or professional entry standards.
- 2.6 The admissions procedures must apply selection and entry criteria, including accreditation of prior (experiential) learning and other inclusion mechanisms.
- 2.7 The admissions procedures must ensure that the education provider has equality and diversity policies in relation to applicants and students, together with an indication of how these will be implemented and monitored.

4

Programme management and resources

- 3.1 The programme must have a secure place in the education provider's business plan.
- 3.2 The programme must be effectively managed.
- 3.3 The programme must have regular monitoring and evaluation systems in place.
- 3.4 There must be a named person who has overall professional responsibility for the programme who must be appropriately qualified and experienced and, unless other arrangements are agreed, be on the relevant part of the Register.
- 3.5 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.
- 3.6 Subject areas must be taught by staff with relevant specialist expertise and knowledge.
- 3.7 A programme for staff development must be in place to ensure continuing professional and research development.
- 3.8 The resources to support student learning in all settings must be effectively used.
- 3.9 The resources to support student learning in all settings must effectively support the required learning and teaching activities of the programme.
- 3.10 The learning resources, including IT facilities, must be appropriate to the curriculum and must be readily available to students and staff.
- 3.11 There must be adequate and accessible facilities to support the welfare and wellbeing of students in all settings.
- 3.12 There must be a system of academic and pastoral student support in place.
- 3.13 There must be a student complaints process in place.
- 3.14 Where students participate as service users in practical and clinical teaching, appropriate protocols must be used to obtain their consent.

- 3.15 Throughout the course of the programme, the education provider must have identified where attendance is mandatory and must have associated monitoring mechanisms in place.
- 3.16 There must be a process in place throughout the programme for dealing with concerns about students' profession-related conduct.
- 3.17 Service users and carers must be involved in the programme.

Curriculum

- 4.1 The learning outcomes must ensure that those who successfully complete the programme meet the standards of proficiency for their part of the Register.
- 4.2 The programme must reflect the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance.
- 4.3 Integration of theory and practice must be central to the curriculum.
- 4.4 The curriculum must remain relevant to current practice.
- 4.5 The curriculum must make sure that students understand the implications of the HCPC's standards of conduct, performance and ethics.
- 4.6 The delivery of the programme must support and develop autonomous and reflective thinking.
- 4.7 The delivery of the programme must encourage evidence-based practice.
- 4.8 The range of learning and teaching approaches used must be appropriate to the effective delivery of the curriculum.
- 4.9 When there is interprofessional learning the profession-specific skills and knowledge of each professional group must be adequately addressed.

Practice placements

- 5.1 Practice placements must be integral to the programme.
- 5.2 The number, duration and range of practice placements must be appropriate to support the delivery of the programme and the achievement of the learning outcomes.
- 5.3 The practice placement settings must provide a safe and supportive environment.
- 5.4 The education provider must maintain a thorough and effective system for approving and monitoring all placements.
- 5.5 The placement providers must have equality and diversity policies in relation to students, together with an indication of how these will be implemented and monitored.
- 5.6 There must be an adequate number of appropriately qualified and experienced staff at the practice placement setting.
- 5.7 Practice placement educators must have relevant knowledge, skills and experience.
- 5.8 Practice placement educators must undertake appropriate practice placement educator training.
- 5.9 Practice placement educators must be appropriately registered, unless other arrangements are agreed.
- 5.10 There must be regular and effective collaboration between the education provider and the practice placement provider.
- 5.11 Students, practice placement providers and practice placement educators must be fully prepared for placement which will include information about an understanding of:
- the learning outcomes to be achieved;
- the timings and the duration of any placement experience and associated records to be maintained;
- expectations of professional conduct;
- the assessment procedures including the implications of, and any action to be taken in the case of, failure to progress; and
- communication and lines of responsibility.

- 5.12 Learning, teaching and supervision must encourage safe and effective practice, independent learning and professional conduct.
- 5.13 A range of learning and teaching methods that respect the rights and needs of service users and colleagues must be in place throughout practice placements.

Assessment

- 6.1 The assessment strategy and design must ensure that the student who successfully completes the programme has met the standards of proficiency for their part of the Register.
- 6.2 All assessments must provide a rigorous and effective process by which compliance with external-reference frameworks can be measured.
- 6.3 Professional aspects of practice must be integral to the assessment procedures in both the education setting and practice placement setting.
- 6.4 Assessment methods must be employed that measure the learning outcomes.
- 6.5 The measurement of student performance must be objective and ensure fitness to practise.
- 6.6 There must be effective monitoring and evaluation mechanisms in place to ensure appropriate standards in the assessment.
- 6.7 Assessment regulations must clearly specify requirements for student progression and achievement within the programme.
- 6.8 Assessment regulations, or other relevant policies, must clearly specify requirements for approved programmes being the only programmes which contain any reference to an HCPC protected title or part of the Register in their named award.
- 6.9 Assessment regulations must clearly specify requirements for an aegrotat award not to provide eligibility for admission to the Register.
- 6.10 Assessment regulations must clearly specify requirements for a procedure for the right of appeal for students.
- 6.11 Assessment regulations must clearly specify requirements for the appointment of at least one external examiner who must be appropriately experienced and qualified and, unless other arrangements are agreed, be from the relevant part of the Register.

Notes

Notes



Park House 184 Kennington Park Road London SE11 4BU tel +44 (0)845 300 6184 fax +44 (0)20 7820 9684 www.hcpc-uk.org

This document is available in alternative formats and Welsh on request.

Call +44 (0)20 7840 9806 or email publications@hcpc-uk.org





Education and Training Committee Stakeholder Event

Wednesday 30 April 2014

Feedback from the discussion groups

Question:

What should the priority areas be for reviewing the standards of education and training (SETs), and its guidance?

- · What works well now?
- What is missing?
- What could be improved?

Summary of feedback:

Admissions	
Language testing	 Need to clarify the expectations of language testing and proficiency at the point of admission onto the programme (e.g. IELTs) as well as on entry to the Register/completion of the programme (standards of proficiency). HCPC could benefit from the current review of language testing in the medical profession.
Criminal conviction checks	Guidance on DBS/CRB needs updating in light of legislative changes.
Diversity	 Can the standards be used to help ensure diversity in the future workforce? (i.e. diversity of ethnicity, gender, socio-economics etc.)
Values-based recruitment	 Agreement that values based recruitment is important, however substantial questions and concerns raised. Concerns over the poor evidence base and the focus on the person applying to a programme and not what happens to them on the programme. Concerns over regulators and national bodies being pressurised to take a stance because of a short term political agenda. HCPC needs to consider supporting this principle carefully before integrating it into their standards. Would welcome further discussion about values more generally. Is there a role for values based recruitment in the SETs? Can values be taught or does a student already need to have certain values when recruited to a programme?

Cummingulum	 How can values key to working in health and care be recognised or assessed in prospective students? Values are best reflected as a required output from approved programmes (through standards of proficiency and conduct, performance and ethics) rather than a prescriptive element within the admissions standards of the standards of education and training.
Curriculum	
Currency of curriculum	 How do the HCPC ensure education providers are up to date with the latest technology, research and profession- specific knowledge/good practice? Is this achievable through an approval visit? Is there a role for professional bodies to play?
Evidence base	The standards should be more closely linked with the evidence base in a particular profession. The evidence base/body of knowledge is most often produced in higher education institutions but programmes are often forced to focus on delivery and service. Further support is needed to ensure that the curriculum reflects the most up-to-date evidence base and research.
Standards of conduct, performance and ethics (SCPEs)	 Can the relationship between the SCPEs and SETs be made stronger? In particular, the links between behaviour and values and recruitment/admissions, curriculum and assessment. Can the SCPEs have higher prominence in the SETs given they underpin ethical practice? The current requirement regarding the SCPEs integration into curriculum is not far reaching enough. At present, education providers can make reference to the SCPEs as part of a reading list to satisfy the standard. The focus should require education providers to demonstrate how the programme embeds the SCPEs throughout the programme covering admissions, curriculum and assessment standards.
Interprofessional learning	 Would welcome a more positive/encouraging position on inter-professional learning. Standard needs to reflect that professions no longer work in isolation and inter-professional learning is important and necessary. Standard and guidance need to be realigned so language and intent is the same. Need to recognise the difficulties/practicalities in organising interprofessional learning. Emphasis needs to be on learning to work interprofesionally, as opposed to learning about the work of other professions. Need to be sure of the outcomes. How does interprofessional learning enhance practice/benefit the service user?

 Can further guidance and training be made available to support providers, especially those outside of large health and care faculties in universities, if interprofessional learning is made mandatory? Inter-professional learning should not affect or take away from the necessary skills and proficiencies required for a particular profession **Practice placements** Practice educators Could practice educator training standards link more explicitly with the professional responsibility of registrants in supporting and developing new professionals? • The current practice educator training standards are too vague and lack prescription. There is no differentiation between practice educators and the different roles that play a part in the teaching, learning and assessment process. There should be more robust / advanced requirements for those practice educators who play a key role in student evaluation and assessing fitness for practice. • Changes to practice educator standards should not be pushed through too quickly, as practice (individuals and employers) need to be involved. It is important that practice is not alienated and good quality placements are not lost. • Unclear who is ultimately responsible for practice educators and their training – is it education providers, individuals or employers? Type and range of • The standards are written particularly for NHS placements placements and do not reflect the complexity of placements nowadays. They need to be broadened to encourage placements elsewhere (especially mental health and education). The guidance needs to convey the changing context of placements and differences across the professions and the UK countries. There is a growing inconsistency in placements. This is due largely to the fact that many of the traditional placement providers in certain professions are no longer available (because of changes in the NHS etc.). The practice placements that do exist are sometimes with organisations that have limited understanding of what is needed in educating a professional. Role and • Many organisations (in the independent / third sector) are responsibilities of wary of placements and how the actions of a student placement providers / may impact on their business. This often results in these employers placements are restricted to being just observational. Limited understanding from employers as to the regulatory requirements for the provision of placements. Perhaps HCPC can support education providers by

	speaking directly to employers about their expectations
	regarding their engagement with education providers
	when providing placements.
	Can the role of employers be more explicit in the
	placement standards?
	Can the HCPC promote placement education more?
Practical skills	Unclear who is responsible for practical skills delivery
	and where it should take place – at the education
A 111	provider or on placement?
Audits	 Could the HCPC produce, or require an audit tool for all placements?
HCPC's quality	Generally, the placement standards work well and focus
assurance of	on the right things. However, do the quality assurance
placements	processes ensure that education providers are doing
	what they say they are doing?
	 HCPC need to consider how it assures itself that an
	education provider is 'doing what they say they do' in
	relation to the quality assurance of placements.
	HCPC could re-consider what evidence is required from
	education providers on their quality assurance of
0	placement settings on an on-going regular basis.
General format of star	
SET 1	Recommend that this standard is removed as it does not hold the same status as other standards (i.e. same because).
	hold the same status as other standards (i.e. can be
	 overridden if all the other standards are met). The current information in this standard would be more
	appropriate as guidance.
Structure of standards	Current structure works well and compliments the
	biomedical science professional body standards (IBMS),
	which makes it easier to facilitate joint working at
	approval visits.
	 Need to be careful about the number of standards
	(currently 57) we expect education providers and visitors
	to work with. Adding additional standards may have a
	'knock-on effect' on the effectiveness of the current
	standards and assurance process. They will certainly
	increase the complexity of the process.
	The forthcoming review should look to consolidate some standards, particularly in SET 3: admissions, SET 3:
	standards, particularly in SET 2: admissions, SET 3: Programme management and resources. There seems
	to be unnecessary duplication of the same or closely
	related issues.
Structure and role of	Current model of providing guidance to each standard
guidance	works well.
	Current guidance uses accessible English which is
	positive and encouraging.
	In some areas, the guidance is disconnected with the
	spirit and/or intention of the standard.
	Guidance would benefit from referring to specific

	 professions in certain areas. If the language is too generic and broad, it will not resonate with any reader and become meaningless. Guidance should encourage innovation and variation. Occasionally the standards are used by some people to inhibit change and/or innovation and are interpreted very rigidly. It is recommended that the guidance acknowledges that the education, health and care sectors are always developing and that innovative ways of doing things can still meet the standards.
Miscellaneous	
Preceptorship	 Could a standard on preceptorship be included in the standards? Could an additional set of standards and guidance be published on preceptorship and supervision? There are increased expectations of health and care professionals to have clinical business skills (i.e. delegation and supervision). Newly qualified professionals need the appropriate support to achieve these. Preceptorship should be the joint responsibility of the education provider and employer. Preceptorship should feed into the continuing professional development of registrants. Preceptorship should ensure that newly qualified professionals have a diverse caseload in their first two years of practice, so that they can understand and manage an increasingly large and complex workload. Preceptorship should ensure that newly qualified professionals can access good quality supervision and training.
Role of professional body Service user and carer involvement in	 It is good practice for education providers to involve professional bodies in their programmes. Some professional bodies are rarely involved; whilst others participate in programme design and accreditation as a matter of routine. Can the HCPC promote or require the involvement of professional bodies through the SETs, and/or facilitate it through their processes? Guidance should encourage education providers to use service user and carer associations rather than
programmes	 individuals. Can the HCPC play a role in the sharing of good practice in service user and carer involvement in programmes? Guidance should encourage education providers to adopt a broad definition of service users and carers relevant to the profession of the programme.
Mentorship	 Would welcome a wider discussion about where the HCPC stands on mentorship and whether it is necessary

	and/or appropriate for HCPC professions.
Assistant /support -	Could the HCPC facilitate progression from support and
regulation	assistant practitioners' roles to professional roles, by, for
	example, allowing accreditation of practice experience
NAM 1 11 11 1	and encouraging part time programmes?
Whistleblowing	 Acknowledge that 'whistleblowing/reporting concerns' will be reflected in the HCPC's revised standards of conduct, performance and ethics but would welcome discussion about what role education providers play in this process and whether something needed to be integrated into programmes in this area. Could encourage student reflection and empowerment and and had practice more.
	on good and bad practice more.
	Could inculcate the different ways of reality of practicing
Draeder tenice	the profession before learning the right ways of doing this
Broader topics	of the standards of education and training and its
•	of the Standards of education and training and its
quidance)	
guidance) Stakeholder	There is a need for the HCPC to communicate and
•	There is a need for the HCPC to communicate and engage further with independent health and care
Stakeholder	
Stakeholder	engage further with independent health and care providers, schools and other places where professionals may work. Many of these organisations are not even aware of the HCPC or related statutory regulatory
Stakeholder engagement Visitors reports Routes into	 engage further with independent health and care providers, schools and other places where professionals may work. Many of these organisations are not even aware of the HCPC or related statutory regulatory requirements on their employed professionals. The accessibility of visitors' reports on the HCPC website could be improved. There are currently two 'libraries' of reports – via the Committee papers and the education section. Can this be streamlined? Can there be direct links from the list of approved programmes? In some professions, the majority of students train via
Stakeholder engagement Visitors reports	 engage further with independent health and care providers, schools and other places where professionals may work. Many of these organisations are not even aware of the HCPC or related statutory regulatory requirements on their employed professionals. The accessibility of visitors' reports on the HCPC website could be improved. There are currently two 'libraries' of reports – via the Committee papers and the education section. Can this be streamlined? Can there be direct links from the list of approved programmes? In some professions, the majority of students train via one programme offered by the professional body. Could
Stakeholder engagement Visitors reports Routes into	 engage further with independent health and care providers, schools and other places where professionals may work. Many of these organisations are not even aware of the HCPC or related statutory regulatory requirements on their employed professionals. The accessibility of visitors' reports on the HCPC website could be improved. There are currently two 'libraries' of reports – via the Committee papers and the education section. Can this be streamlined? Can there be direct links from the list of approved programmes? In some professions, the majority of students train via one programme offered by the professional body. Could the HCPC encourage a more diverse range of training
Stakeholder engagement Visitors reports Routes into	 engage further with independent health and care providers, schools and other places where professionals may work. Many of these organisations are not even aware of the HCPC or related statutory regulatory requirements on their employed professionals. The accessibility of visitors' reports on the HCPC website could be improved. There are currently two 'libraries' of reports – via the Committee papers and the education section. Can this be streamlined? Can there be direct links from the list of approved programmes? In some professions, the majority of students train via one programme offered by the professional body. Could

Next steps:

The HCPC will use this feedback to help plan their review of the standards of education and training and its guidance. It is anticipated that the potential scope, content and timetable for this review will be discussed and approved by the Education and Training Committee in September 2014. The feedback will also be used to develop future stakeholder events.

Appendix 3: Outline of considerations for reviewing the SETs and supporting guidance

(Please note that this list is not intended to be exhaustive.)

Theme	Standard	Considerations
Structure, format, language and tone	All	We will look to ensure coherence and consistency between and within the documents. Stakeholders have commented on the large number
		of standards and suggested that there may be room for removing duplication. Other feedback indicates that the tone of the guidance could be made more encouraging of innovation and variation among programmes. Language and terminology needs to be applicable across all professions.
Professionalism in healthcare professionals	All	We will consider whether and how to further promote the teaching and/or development of professionalism during education and training via the SETs and supporting guidance.
Interprofessional education (IPE)	SET 4.9	Our initial view is that it is appropriate to amend this standard to make a more positive requirement for IPE in approved programmes. We are commissioning research to inform this decision and the text of any future standard requiring IPE. Stakeholders have commented that the standard
		should also reflect that the professions no longer work in isolation; as well as acknowledge the difficulties in organising IPE.
Student fitness to practice	SET 3.16	The standard and/or the related guidance could include more specific requirements regarding expectations of a formal process (e.g. the separation of investigation and adjudication or the composition of panels).
		We will consider the balance between 'should' and 'must' statements. We will also examine the wording of the standard with a view to including more common terminology (e.g. 'student fitness to practise') and to enabling visitors to make qualitative judgments about the effectiveness or appropriateness of the processes in place.
Preparation for practice	All	We will consider the role of the SETs in ensuring newly qualified registrants are prepared for practice by completion of an approved education and training programme. We will in particular look to the results of the commissioned research on this topic for any

		recommended amendments.
Practice placements	SET 5	We have committed to use this review to better set out expectations for education providers in ensuring the safety of service users in the practice learning environment.
		Feedback from stakeholders is that the current standards may not be sufficiently robust in that they do not set requirements for practice placement educators, particularly those who play a key role in student evaluation and assessing fitness to practice.
		Other comments were that the existing standards were written with NHS practice placements in mind and need to be broadened to reflect the reality of placement settings nowadays; they should be relevant for placements in other sectors and within organisations which may have a lesser understanding of what is needed to support and train students effectively.
Values	SET 2	All new NHS-funded training posts in England will be required to operate some form of values-based recruitment by March 2015.
		Some stakeholders support the inclusion of a standard relating to values-based recruitment; while others have commented that values are best reflected as an output from approved programmes rather than prescribed as part of admissions processes. There are also acknowledged difficulties associated with assessing values in prospective students.
	SET 4.5	Our view, supported by comments from stakeholders, is that the link between the SETs and SCPE may need strengthening. With regard to inclusion of the SCPE in programme curricula, we will consider whether to include more detailed requirements similar to those in SET 4.1 (requiring education providers to map curricula against specific SOPs).
	SET 6.3	We will consider whether and how to make this standard more explicit with regard to the importance of the SCPE being embedded in assessment of students.

Timetable for standards of education and training review (2014-2017)

Dates	Activity	
June 2014	Call for external research proposals on interprofessional education (IPE)	
September 2014	SETs review paper to ETC	
September 2014	Research brief on preparation for practice to ETC	
September 2014	Call for external research proposals on preparation for practice	
October 2014	Begin internal research and stakeholder engagement activities	
June 2015	Professional Liaison Group (PLG) terms of reference to ETC	
July 2015	Council approval of PLG terms of reference	
June – August 2015	Selection of Professional Liaison Group members and preparation of papers for consideration	
September 2015	IPE research final report to ETC	
November 2015	Preparation for practice research final report to ETC	
Late September 2015 – early March 2016	PLG meetings (x4)	
June 2016	Draft standards and consultation document to ETC	
July 2016	Council approval of draft standards and consultation document	
September – November 2016	Public consultation	
March 2017	Consultation response and revised standards to ETC	
March 2017	Council approval of revised standards for publication	
May 2017	New standards published	
2017-2018 academic year	New standards phased into operational processes	