

Education and Training Committee, 8 September 2016

The use of visitors in the approval and monitoring of education and training programmes for orthoptist exemptions

Executive summary and recommendations

#### Introduction

This paper sets out proposals for the use of visitors in the approval and monitoring of education and training programmes for orthoptist exemptions.

#### Decision

The Committee is invited to discuss the attached paper.

The Committee is invited to agree the following:

- the visitor role brief to assess podiatric surgery programmes in Appendix 1; and
- the criteria for the selection of visitors to assess podiatric surgery programmes, set out in Appendix 2.

# **Background information**

- Council paper 6 July 2016 'Outcomes on consultation on draft standards for use of exemptions by OR to sell, supply and administer medicine'
- Outline curriculum framework for education programmes to prepare orthoptists to use exemptions – February 2016

## **Resource implications**

The resource implications of this paper include the following.

 Recruitment and training of visitors (where necessary) to support approval and monitoring of orthoptist exemption programmes

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# **Financial implications**

The financial implications of this paper include the following.

• Recruitment and training of visitors (where necessary)

The recruitment and training costs have been accounted for in the Partners Department budget for 2015-16.

# **Appendices**

- Appendix 1 Role brief and requirements for visitors with necessary knowledge and experience to assess orthoptist exemption programmes
- Appendix 2 Criteria for the appointment of visitors to assess orthoptist programmes

# Date of paper

17 August 2016

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The use of visitors in the approval and monitoring of education and training programmes for orthoptist exemptions

- 1 Standards for the use of exemptions by orthoptists to sell, supply and administer medicines
- 1.1 The standards for orthoptist exemptions were consulted on between March and May 2016. The final version of the standards were approved by the Council at its meeting on 6 July 2016.
- 1.2 The standards are split into two sections; section 1: standards for education providers and section 2: standards for orthoptists using exemptions in legislation for the sale, supply and administration of medicines. We will use both sections of the standards to approve and monitor programmes delivering training in orthoptist exemptions. As with all programmes we approve, we will visit orthoptist exemptions programmes to conduct a full assessment against the standards. Education providers will need to demonstrate how they meet all the standards set out in section 1 and 2 through the approval process. A programme which did not meet one or more of the standards would have conditions placed on their approval which must be met before the programme can be approved. Once approved, the programmes would be subject to continued engagement with our monitoring processes to ensure adherence to the standards. Where appropriate to do so, we will also investigate any concerns raised about a programme once it is approved by us.
- 1.3 The Health and Social Work Professions Order 2001 requires that we select visitors with the appropriate knowledge and experience to assess programmes for initial approval and the ongoing confirmation of that approval. We must also appoint at least one registrant visitor from the appropriate part of the Register in relation to the programme(s) being assessed.
- 1.4 For most post-registration areas of practice, annotation would normally be relied upon to satisfy the requirement that visitors hold the necessary knowledge and experience. Selection on this basis also means visitors with the appropriate annotations are also registrants, thus fulfilling our statutory requirements regarding the appointment of registrant visitors also. We have used this approach in the past to appoint visitors to assess supplementary prescribing programmes, local anaesthesia and prescription only medicine programmes.
- 1.5 However, as legislative amendments introducing exemptions for orthoptists only came into effect on 1 April 2016, there are currently no orthoptist

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registrants who hold the annotation. Therefore the selection of orthoptist registrant visitors based on their relevant annotations held will not be possible in this instance to support the approval process.

## 2 Criteria for appointing visitors to assess orthoptist exemption programmes

- 2.1 Alternative criteria will be needed to ensure visitors are appointed with appropriate knowledge and experience to assess orthoptist exemption programmes for approval. In the absence of any orthoptists who hold the relevant annotation, we suggest that the role would be suitable for:
  - registered orthoptists who have experience of medicines supply working under Patient Group Directions and/or Patient Specific Directions, or other similar arrangements.
- 2.2 Under these arrangements, individuals with such experience will already be administering medicines the same or similar to that which are now included under the relevant exemptions for this profession.

# Supporting orthoptists around the delivery model of exemptions programmes

- 2.3 Whilst we can appoint orthoptists with relevant experience of medicines supply, they will not have any experience specifically around the design and delivery of orthoptist exemption training. In preparing for the legislative change, the British and Irish Orthoptic Society (BIOS) have developed an outline curriculum framework which will guide the development of programmes. We would ensure orthoptists visitors are cognisant of this curriculum guidance in considering how our standards are met through the approval process. The availability of this guidance, like all forms of curriculum guidance, should provide a useful basis to inform our orthoptist visitors understanding of the professions expectations around the delivery of exemptions training.
- 2.4 However, to provide further balance, knowledge and experience to an approval panel, we propose to include a second visitor from our existing visitor pool who meets the following criteria:
  - a registered chiropodist / podiatrist whose current registration is annotated with both the Local Anaesthetics and Prescription Only Medicines entitlements under the Prescriptions Only Medicines (Human Use) Order 1997; or

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- an individual whose current registration record is annotated with the independent prescribing entitlement.
- 2.5 Their inclusion on an approval visit panel would ensure we have individuals involved who are more broadly experienced in the delivery models around exemptions and prescribing programmes. These visitors could use their knowledge and experience to inform their assessment of orthoptist exemption programmes. They would also already be familiar with the overall content of the orthoptist exemptions outline curriculum framework, as this is based on the single prescribing competency framework for other allied health, nursing and pharmacy professions.

## Managing visitor conflicts

- 2.6 For orthoptist preregistration training, there has historically been three approved programmes providing the recognised training route to the profession. We assume these programmes will probably be best placed and interested in delivering exemptions training. We also assume that it is fairly unlikely that other education providers will want to seek to deliver specific post-registration training for orthoptist exemptions. However, it is worth noting that there may be some education providers currently delivering similar exemptions programmes for optometrists and training routes for ophthalmologists, who may be interested in delivering new programmes for orthoptist exemptions.
- 2.7 Generally, this means most orthoptists have at some point been involved with the recognised education providers delivering orthoptist training (either as students and/or as educators or placement providers). Our view on this basis is that confining the appointment of visitors to assess orthoptist exemptions programmes to orthoptists alone, increases the risk that suitable candidates have significant conflicts with relevant education providers seeking approval from us.
- 2.8 We contend that the addition of a second visitor to manage any potential conflicts, as set out in paragraph 2.4, would provide reasonable assurances to involved parties around the management of expected conflicts through the approval process. In addition, including a third visitor from a lay background would provide further assurance in this area.

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# 3 Additions to the visitor role brief for orthoptists assessing exemption programmes

- 3.1 We propose the following changes to the visitor role brief, as set out in Appendix 1, to appoint orthoptists to specifically assess exemptions programmes. The standard visitor role brief is generic, covering all the professions we recruit visitors from. It therefore includes common visitor requirements regarding knowledge and experience of education and training development and delivery, collaborative working, decision making and working in accordance with the seven principles of public life.
- 3.2 The changes for orthoptists assessing exemptions programmes takes into account the considerations detailed in section 2.1-2.2 of this paper. Provisions have also been made to enable the appointment of visitors who hold the relevant annotation, once programmes are approved and individual orthoptists successfully complete their training and receive the relevant annotation.

#### Decision

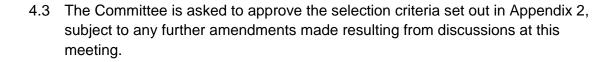
3.3 The Committee is asked to approve the role brief set out in Appendix 1, subject to any further amendments made following discussions at this meeting.

# 4 Criteria for the selection of visitors to assess podiatric surgery programmes

- 4.1 Should the Committee agree the visitor role brief in Appendix 1, further consideration must be given to the overall panel of visitors required to conduct an approval visit. This will ensure we continue to meet our statutory requirements through the appointment of visitors to approval panels and will continue to embed HCPC policy initiatives regarding the use of lay visitors across the breadth of programmes (pre and post registration) considered for approval.
- 4.2 The criteria for the selection of visitors to assess orthoptist exemption programmes is set out in Appendix 2. Once approved, this criteria will be used by the Education Department to inform visitor selection for the approval process.

#### **Decision**

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## 5 Appendix 1: Visitor role brief – orthoptist exemptions

Role brief and requirements

#### Context

The Health and Care Professions Council (HCPC) is an independent statutory regulator whose main function is to safeguard the health and care of persons using or needing the services of its registrants.

Visitors make up one of a range of "Partners" who provide the expertise the HCPC needs for its decision-making.

The Partner shall provide the services to the HCPC as an independent contractor under the terms of the Partner Agreement.

### Purpose of role

- To visit and assess orthoptist exemption programmes of education and training delivered (or proposing to be delivered) by education providers.
- To assess approved orthoptist exemption programmes of education and training using established monitoring processes.
- To provide recommendations to the Education and Training Committee regarding the approval/ongoing approval of orthoptist exemption programmes.

### Main Responsibilities

Visitors will give expert advice and contribute to discussions and decision making as directed by the Council or relevant committee.

## Specific tasks include:

- Preparing visitor reports from approval visits and monitoring activities which include recommendations for the Education and Training Committee about the approval/ongoing approval of orthoptist exemption programmes.
- Working collaboratively with other visitors, the HCPC executive, education providers and other relevant stakeholders.
- Visiting education providers who are normally based within the UK.
- Attending annual monitoring assessment days.
- Considering annual monitoring submissions, by correspondence.
- Considering major change submissions, by correspondence.

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- Considering (when required) complaints made about education providers, by correspondence.
- Reporting directly to and attending (in exceptional circumstances) meetings of the Education and Training Committee and its subordinate bodies.
- Undertaking any other duties arising from visits or monitoring activities as directed by the Education and Training Committee and its subordinate bodies.

## Person specification

# Skills, knowledge and abilities

#### Essential

• Candidates must be registered as an orthoptist with the Health and Care Professions Council, with their registration record annotated with the orthoptists Prescription Only Medicines – sale and supply entitlement,

#### or

- Candidates must be registered as an orthoptist with the Health and Care Professions Council, with experience of medicines supply working under Patient Group Directions and/or Patient Specific Directions, or other similar arrangements
- Ability to consider a wide range of issues in order to make informed and sound decisions.
- Commitment to the Seven Principles of Public Life (see Appendix one).
- Understanding of the principles of quality assurance in Higher Education or Further Education or in a practice environment.
- Understanding of teaching, learning and assessment strategies, developed in either an education or practice environment.
- Ability to explain and justify decisions and promote HCPC interests to all stakeholders concerned.
- Excellent oral and written communication skills and interpersonal skills, including the ability to communicate professionally with a range of stakeholders.

#### Desirable

• Previous experience as a visitor, reviewer, inspector, moderator or external examiner.

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- Previous experience as a programme leader or placement educator, or equivalent.
- Previous experience of attending large meetings and/or drafting formal reports.
- Proven knowledge of the legal and/or policy context affecting delivery and development of professional training in a health care, social care or therapeutic setting.

#### Time commitment

The time commitment is estimated as being in the region of 5 -10 working days each year. This includes preparation, attendance and travel time. The number of submissions and visits will vary from year to year and will also depend upon each profession.

#### Training

The HCPC is committed to the training of its partners. If your application to become a visitor is successful you will receive full comprehensive training for this partner role.

## Fee and expenses

The role attracts a daily fee of £194 per day and a submission fee (by correspondence) of £77.

Travel, accommodation and subsistence expenses are also payable in line with the Partner Expenses Policy.

For further information on the HCPC, please visit www.hcpc-uk.org

### The seven principles of public life

#### Selflessness

Holders of public office should take decisions solely in terms of the public interest. They should not do so in order to gain financial or other material benefits for themselves, their family, or their friends.

#### Integrity

Holders of public office should not place themselves under any financial or other obligation to outside individuals or organizations that might influence them in the performance of their official duties.

#### Objectivity

In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office should make choices on merit.

#### Accountability

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Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

# **Openness**

Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.

# Honesty

Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interests.

## Leadership

Holders of public office should promote and support these principles by leadership and example.

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# 6 Appendix 2 – considerations for orthoptist exemptions visitor allocation to approval and monitoring work

Always or	Consideration
normally	
Always	At least one visitor, recruited on the following criteria:
	a registered orthoptist whose current registration record is annotated with the appropriate entitlement for the programme in question,
	or
	a registered orthoptist with experience of medicines supply working under Patient Group Directions and/or Patient Specific
	Directions, or other similar arrangements.
Normally	Two visitors, recruited on the following criteria:
	a registered orthoptist whose current registration record is annotated with the appropriate entitlement for the programme in question,
	or
	One visitor, recruited on the following criteria:
	a registered orthoptist with experience of medicines supply working under Patient Group Directions and/or Patient Specific
	Directions, or other similar arrangements, and
	a second visitor recruited on the following criteria:
	a registered chiropodist / podiatrist whose current registration is annotated with both the Local Anaesthetics and Prescription Only
	Medicines entitlements under the Prescriptions Only Medicines (Human Use) Order 1997.
	Where needed, a second visitor will be recruited on the following criteria:
	an individual whose current registration record is annotated with the independent prescribing entitlement.
	For approval visit panels, the third visitor will be:
	a lay visitor.

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