

THE HEALTH PROFESSIONS COUNCIL

Chief Executive and Registrar: Mr Marc Seale

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MINUTES of the seventeenth meeting of the Health Committee held at **11a.m. on Tuesday 7 November 2006** at Park House, 184 Kennington Park Road, London, SE11 4BU.

Professor T Hazell (Chairman)

Mrs P Blackburn

Mr M Davies

Mrs S Drayton

Mrs J Pearce

IN ATTENDANCE:

Miss S Butcher, Secretary to Committees

Mr M Guthrie, Policy Officer

Miss K Johnson, Director, Fitness to Practise

Mr M Seale, Chief Executive and Registrar

Ms R Tripp, Director, Policy & Standards (1.06 – 10.3)

Dr A van der Gaag, President

Item 1.06/35 WELCOME AND INTRODUCTION

- 1.1 The Chairman welcomed Dr van der Gaag, Mr Seale and Ms Tripp to the meeting.

Item 2.06/36 APOLOGIES FOR ABSENCE

- 2.1 Apologies for absence were received from the following committee members; Mr O Altay, Dr C Kenny and Mrs A Turner.

Item 3.06/37 APPROVAL OF AGENDA

- 3.1 The Health Committee approved the agenda.

Item 4.06/38 MINUTES OF THE HEALTH COMMITTEE MEETING HELD ON THURSDAY 7 SEPTEMBER 2006

- 4.1 It was agreed that the minutes of the sixteenth meeting of the Health Committee be confirmed as a true record and signed by the Chairman.

Item 5.06/39 MATTERS ARISING/ACTIONS LIST

- 5.1 Item 7.6 – Matters Arising – Strategic Based Projects
The Committee noted that a move towards more strategic based projects where the expertise of the Committee could be utilised was considered by Council.
- 5.2 Item 8.5 – Matters Arising – Procurement of Fitness to Practise Legal Services
The Committee noted that the Health Professions Council (HPC) was in the middle of a tendering exercise for legal services.
- 5.3 Item 8.9 – Matters Arising – Fitness to Practise Workplan and Process Document
The Committee noted that the fitness to practise workplan and process document was on the agenda for their discussion.
- 5.4 Item 9.11 – Matters Arising – Standards of Conduct, Performance and Ethics Review (SCPE)
The Committee noted that the review of the SCPE was on the agenda for their discussion and approval.

Item 6.06/40 CHAIRMAN’S REPORT

- 6.1 The Chairman reported that he had given a presentation to the British Society of Human Genetics at York University which took place on the 19 September 2006. The presentation was about accountability and the Health Professions Council. The Committee noted that the Chairman was acting in an informal capacity as advisor to Genetic Counsellors who are seeking to become a registered profession.

Item 7.06/41 DIRECTOR OF FITNESS TO PRACTISE REPORT

- 7.1 The Committee received the Director of Fitness to Practise Report.
- 7.2 The case to answer rate had now reached 70% and represented a significant increase from last year’s figures of 55%. Hearings had been scheduled well into May 2007. A hearing with regard to the costs incurred in the High Court Appeal of Mohammed Khokhar was to be heard shortly. It was anticipated that the costs incurred of up to £50,000 could be recouped by the HPC.
- 7.3 The Fitness to Practise team had recently undertaken particulars training on the processing of allegations, interview and diversity training. One new hearing officer had also been appointed.
- 7.4 The Committee noted that the instance of protection of title cases was constant and generally increased when a new edition of the Yellow Pages was published. The Enterprise Act was identified as a means by which the rate of incidence of protection of title cases could be reduced.

- 7.5 A review day for Legal Assessors was held on the 11 October 2006 which was used to provide updates on fitness to practise procedures and CHRE learning points. The main points under review were referrals, decision making processes, case law and particularisation.

Item 8.06/42 FITNESS TO PRACTISE WORKPLAN AND PROCESS DOCUMENT

- 8.1 The Committee received a verbal update from the Director of Fitness to Practice on the fitness to practise workplan and process document.
- 8.2 The Committee noted that the fitness to practise budget was currently being set for 2006/07 and the workplan was to be an integral part of this. The fitness to practise tracking system was a priority. Training of employees had already begun in October whilst a BTEC related to ftp practices would be undertaken by all members of the ftp team as of February 2007.
- 8.3 The Committee was in agreement that it would be helpful if the main priorities of the workplan were drafted in a one page document so that the work in progress could be acknowledged.

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Item 9.06/43 REVIEW OF THE STANDARDS OF CONDUCT, PERFORMANCE AND ETHICS (SCPE) : REPORTS FROM THE DISCUSSION MEETINGS AND COUNCIL AWAY DAY 2006

- 9.1 The Committee received a paper from the Policy Officer for discussion/approval.
- 9.2 Meetings had been held in September with representatives from patient groups, professional bodies and unions to discuss the review and invite feedback on the standards. The Standards had also been a topic of discussion at the Council Away Day. The broad consensus was that only minimal changes to the Standards were required.
- 9.3 The need to encourage active participation from external groups in such meetings was highlighted. The Joint Regulators group was a means through which such relationships could be developed. The Communications Committee was also looking at how to develop a strategy for Public Patient Involvement (PPI).

Item 10.06/44 DRAFT STANDARDS

- 10.1 The Committee received a paper from the Policy Officer for discussion/approval.

TERMINOLOGY, STRUCTURE, APPROACH

10.2 The Committee agreed to the following:

- i) No changes were necessary to the structure of the Standards.
- ii) References to ‘patients, clients and users’ should be replaced by ‘service users’. The term ‘service user’ had also been used in the Standards of Proficiency (SoPs). Its applicability would be reviewed in January 2007 once the consultation on the SoPs had ended. A footnote would be added to clarify which groups ‘service user’ encompassed and to acknowledge the fact that some registrants may not be in agreement with the chosen terminology.
- iii) The inclusion of a glossary.

INTRODUCTION

10.3 The Committee agreed to the following:

- i) The creation of a mapping document to illustrate the relationship and cross over points between the SoPs and the SCPE and published on the HPC website.
- ii) The removal of abbreviated terminologies as their inclusion in public documents was not considered appropriate.
- iii) Removal of sentence ‘if we feel that they are relevant’ from the introduction.

STANDARD 1

10.4 The Committee agreed to the following:

- i) Inclusion of information about child protection issues.
- ii) To consider the removal of the list of the different types of service users that could be discriminated against as there was the potential to inevitably leave a group out. The phraseology adopted was the same as that which appeared in HPC’s legislation. It therefore needed to be confirmed whether any alterations to this could in fact be made.

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STANDARD 2

10.4 The Committee agreed that no changes were necessary and noted the Conduct and Competence Committee’s recommendation that separate guidance on confidentiality should be produced.

STANDARD 3

10.5 The Committee agreed to the following:

- i) The removal of drink driving offences, to add child pornography and to retain all other changes that had been made.

STANDARD 4

- 10.6 The Committee discussed the requirement for registrants to report to the HPC if they had experienced a change to their health which impaired their ability to continue to carry out their job safely and effectively. Often registrants were not aware that their abilities had become impaired and therefore a balance had been retained between the two scenarios. The Committee agreed that the reference to disclosing health conditions ought to be removed.

STANDARD 5

- 10.7 The Committee agreed to the following:
 - i) The Standard had been rewritten to show consistency with the consultation draft of the introduction to the SoPs.
 - ii) The removal of the reference to ‘testing’ registrants.

STANDARD 6

- 10.8 The Committee agreed to the following:
 - i) Further details added about referrals and duty of care.
 - ii) Use of the word ‘professional’ has been substituted by ‘practitioner’.
 - iii) The removal of the word ‘task’ as the word’s definition minimised its importance.

STANDARD 7

- 10.9 The Committee agreed with the recommendation that no changes were necessary.

STANDARD 8

- 10.10 The Committee agreed to the following:
 - i) To make clear the distinction between referral and delegation. The inclusion of a glossary was agreed for these purposes.

STANDARD 9

- 10.11 The Committee agreed with the recommendation that no changes were necessary.

STANDARD 10

- 10.12 The Committee discussed the appropriateness of requiring registrants to countersign the records of students and was in agreement that this responsibility should rather lie with the educational institutions and not the regulatory body.

STANDARD 11

- 10.13 The Committee noted that the HPC did receive a lot of queries about the risks of infection and on that basis it was agreed that the standard should not change. It was agreed that the words 'fairly' and 'safely' should be removed from the title.

STANDARD 12

- 10.14 The Committee was in agreement that this standard needed to be read in conjunction with Standard 4 to ensure that no aspect of each overlapped.

STANDARDS 13, 14, 15 & 16 THE ETHICAL STANDARDS

- 10.15 The Committee agreed that standard 13 should be removed and linked into Standard 14 where health professionals were encouraged to behave with integrity and honesty. It was agreed that Standard 15 would be retained as it was useful for reference when providing guidance on conflict of interest matters and advertising queries to registrants. It agreed the change to standard 16, so that it referred to public confidence in the profession, rather than the reputation of the profession.

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Item 11.06/45 STANDARDS WORKPLAN

- 11.1 The Committee received a paper from the Policy Officer for discussion/approval.
- 11.2 A Standards Workplan had been devised to set the aims and objectives of the Council's work in this area. A review of HPC's standards largely took place every 2-3 years to ensure their ongoing relevance and applicability. The Committee agreed that it was very useful to have a timetable of when HPC would be reviewing the Standards and to know when new ones would be created.
- 11.3 The Committee approved the Standards Workplan. The Workplan was to be also considered by the other fitness to practise committees, Investigating, Conduct and Competence and the Education and Training Committee who will be asked to recommend its approval by Council.

Item 12.06/46 HEALTH COMMITTEE MEETING DATES 2007/08

- 12.1 The Committee received a paper to note from the Secretary to the Committee.

- 12.2 The Committee noted the Health Committee dates proposed for 2007/08 which the Chairman had approved. The dates would be approved by Council at their next meeting in December.

Item 13.06/47 ANY OTHER BUSINESS

- 13.1 There was one item of any other business.
- 13.2 The Chairman reported that Dr Kenny had forwarded an email with points to be raised at the meeting. One of which concerned whether there was a relationship between HPC and the National Clinical Assessment Service (which is part of the National Patient Safety Agency). The Committee noted that HPC was very active in the promotion of this work.

Item 14.06/48 DATE AND TIME OF NEXT MEETING

- 14.1 The next meeting of the Health Committee will be held at 11:00am on Tuesday 16 January 2007 at the Oval Cricket Ground.

Item 15.06/49 MINUTES OF THE PRIVATE HEALTH COMMITTEE MEETING ON THURSDAY 7 SEPTEMBER 2006

- 15.1 It was agreed that the minutes of the private sixteenth meeting of the Health Committee be confirmed as a true record and signed by the Chairman.
- 15.2 The Committee noted that there were no matters arising and no items of any other business.