Work plan for the health, disability and registration professional liaison group

Executive Summary and Recommendations
This document sets out a work plan for the professional liaison group, including terms of reference, mission statement, plan of activities (way of working) and timetable of activities.

Introduction
As above.

Decision
This paper is for information.

Background information
None

Resource implications
None

Financial implications
None

Background papers
None

Appendices
None.
Mission statement
To advise the Council when a health condition or a disability does or does not prevent someone meeting the Standards of Proficiency. This advice will take the form of draft guidance documents, produced according to the timetable at the end of this paper.

About this guidance
Once approved by the Council, and subject to the results of a consultation, this guidance would be of assistance to doctors completing health references for applicants.

It would also aid university admissions staff, who could use the guidance to supplement the information available to them in making decisions concerning admission to an approved course.

HPC Staff could also use the contents of the document to give advice to applicants to the Register or applicants to courses.

Information to note
The guidance might be useful to panels in hearings, but will not dictate a panel’s decision as to whether someone’s fitness to practise is impaired by their health or a disability. (In particular, someone who has been registered as a health professional may develop a disability or a health condition which prevents them from meeting the whole of the standards of proficiency. They can then restrict their practice so that they remain fit to practise and they are not breaking any of the HPC’s standards.) These panel decisions will still be made by looking at the evidence of each individual case.

This guidance will need to be consulted on.

All guidance will be kept under review by the Education and Training committee so as to reflect changes in the professions, advancements in technology, developments in treatment, legislation, or any other factors which may necessitate the guidance being re-drafted.

All registration decisions made by the Health Professions Council are subject to an appeal, first to the Education and Training committee, then to the courts.
Terms of reference of the PLG

The professional liaison group will:
- call upon advice and input from groups / individuals as needed;
- consider evidence and presentations;
- discuss the implications for meeting the Standards of Proficiency; and
- make recommendations to the Council in the form of draft guidance documents, compiled on individual health issues / disabilities.
Plan of activities
The group can initially meet to consider disabilities or health conditions individually. (The group might decide later on to consider certain issues together, depending on the success of the first few meetings.)

It can consider each issue at two meetings, the first of which will be a discussion with presentations, the second of which will be considering and re-working draft guidance.

For example, in one meeting it might consider visual impairments. At the first meeting, it might ask a representative from the RNIB to present, and a representative from the Association of Visually Impaired Chartered Physiotherapists. It might also invite certain specific professional bodies to submit information on issues which are specific to their profession. After the presentations, the group could consider issues raised, and relate these to aspects of the Standards of Proficiency during discussion.

At the next meeting, the group would consider a first draft of guidance prepared by the Executive, arising out of the information and discussion from the previous meeting. The group would provide detailed feedback on the draft guidance, suggesting where clarification was needed, or where more input was required. After a break for lunch, the group could then consider another disability or health condition, with various presentations and submissions.

The group will initially meet for seven months, considering those issues which could most practically and straightforwardly be covered by the issuing of guidance. If the Council agrees, the guidance will then go out to consultation, and in the light of the responses from the consultation, it could then be tested for an agreed period (say, a year). At the end of this period, we would have a more accurate idea of whether this approach is useful, and whether the group, or another group, should re-form to consider other issues. At this point the Council could consider whether it wants to take this approach for other issues which might lend themselves less well to general guidance such as substance abuse, or mental health issues.
**PLG timetable of activities**
This will be kept under review, as meetings progress.

**October**
Introductory meeting. Introduction to current processes.

**December**
Discussion and presentations on meeting the Standards of Proficiency with a hearing impairment.

**January**
First part of meeting
Discussion of draft guidelines on meeting the Standards of Proficiency with a hearing impairment.

Second part of meeting
Discussion and presentations on meeting the Standards of Proficiency with a visual impairment.

**March**
Mary Crawford, PLG Convenor to report to the Council on work undertaken so far, and effectiveness of format.

First part of meeting
Discussion of draft guidance on meeting the Standards of Proficiency with a visual impairment.

Second part of meeting
Discussion and presentations on meeting the Standards of Proficiency with limited upper and/or lower body movement.

**May**
First part of meeting
Discussion of draft guidelines on meeting the Standards of Proficiency with dyslexia.

Second part of meeting
Discussion and presentations on meeting the Standards of Proficiency with epilepsy.

**June**
Discussion of draft guidelines on meeting the Standards of Proficiency with epilepsy. Review all guidelines so far. Mary Crawford, PLG convenor, to present guidance to Council.
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