#### THE HEALTH PROFESSIONS COUNCIL

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#### PROFESSIONAL LIAISON GROUP FOR STANDARDS OF PROFICIENCY

MINUTES of the fourth meeting of the Professional Liaison Group for Standards of Proficiency held at **11.00 a.m. on Monday 19 June 2006** at Park House, 184 Kennington Park Road, London, SE11 4BU.

#### PRESENT:

Mrs M Clark-Glass (Chairman)

Ms M Embleton

Dr S Gosling

Mrs D Haggerty

Mrs J Pearce (part)

Mr G Sutehall

Mrs A Turner

Professor D Waller

# IN ATTENDANCE:

Ms S Butcher, Secretary to the PLG Mr M Guthrie, Policy Officer

# Item 1.06/40 CHAIRMAN'S WELCOME AND INTRODUCTION

1.1 The Chairman thanked Professor Waller for chairing the previous meeting in her absence. This was the last meeting of the Group and was anticipated to be a refining session of the amendments which had so far been made to the standards.

# Item 2.06/41 APOLOGIES FOR ABSENCE

2.1 Apologies were received from Mr P Acres, Mrs S Drayton, Mr M English and Miss P Sabine.

#### Item 3.06/42 APPROVAL OF AGENDA

3.1 The Group approved the agenda.

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# Item 4.06/43 MINUTES OF THE SOPS PLG MEETING HELD ON TUESDAY 25 APRIL 2006

4.1 It was agreed that the minutes of the fourth meeting of the Professional Liaison Group for the Standards of Proficiency (SoP) be confirmed as a true record and signed by the Chairman.

#### Item 5.06/44 MATTERS ARISING

- 5.1 The Group noted the matters arising and agreed that all of the items raised had been incorporated in the papers for the Groups consideration.
- 5.2 The Group noted that at its previous meeting they had discussed the issue of whether the local anaesthetic and prescription only medicines entitlements (LA and POM) of chiropodists and podiatrists should cease to become optional in the standards. Advice had been sought from HPC's Parliamentary Agent, Mr J Bracken who had clarified the position of language requirements in the standards of proficiency. The Group accepted the advice.
- 5.3 The Group noted that a legal explanation should be included in the introduction to the SoPs by way of setting them in context. Detailed background information would also be supplied via the HPC website and in the covering letter accompanying the final document when sent out to registrants.

#### Item 6.06/45 INTRODUCTION TO THE STANDARDS OF PROFICIENCY

- 6.1 The Group received a paper for discussion/approval from the Policy Officer, Mr Guthrie.
- 6.2 The Group reviewed the introduction to the SoPs for any final amendments, and the following changes were made:
- P3 First paragraph replace 'think' with 'consider'.
- P3 Second paragraph, amend last sentence so that it reads '...that apply to your scope of practice.'
- P3 Last paragraph Replace 'if you are' with 'As' and amend last sentence so that it read '... when you begin to practice autonomously' replacing 'supervision'. The Group agreed to this amendment as supervision was actually a requirement due to the psychotherapy element involved.
- P4 amend typo protect to 'protected' titles.

- P4 remove reference to 'work with children' as it was considered to be profession specific and not generically applicable.
- P4 remove 'outside' and replace with 'change' or 'develop their scope of practice'. It was agreed that this would thereby place greater emphasis on the positive aspect of such a change.
- P4 Where reference had been included to the necessity to working lawfully, safely and effectively it was agreed that other such references should include all three elements for standardisation purposes.
- P4 The Group agreed that emphasis should be placed on the fact that it was the registrants' responsibility to exercise personal judgement when changing their scope of practice and undertake any further training as necessary.
- The Group agreed that the section which dealt with 'Meeting the Standards' was very good as it showed a recognition of the invaluable partnership which had been forged between HPC and the professional bodies.
  - 6.3 The Group approved the Introduction to the SoPs subject to the amendments as detailed above.

#### Item 7.06/46 STANDARDS OF PROFICIENCY – DRAFT STANDARDS

- 7.1 The Group received a paper for discussion/approval from the Policy Officer, Mr Guthrie.
- 7.2 The Group discussed the generic standards first and considered what would be the most appropriate terminology when referring to 'patients'; this was because 'patients' was not a generically accepted terminology across all of the professions which HPC regulated. Only one third of HPC registrants worked within the NHS where 'patient' was the predominant terminology. 'Patient' was not applicable for example in fields of work such as preventative care. The Group recommended that the term 'service user' was adopted in the interim to cover all possible scenarios. It was agreed that this issue would be addressed more specifically as a consultation question.

**Action: MG** 

- 7.3 The Group agreed to the following amendments in the generic standards:
- (1a.1) The Group agreed to the recommendation that the speech and language therapy standard was made a generic standard subject to some revisions: 'be aware of current education, social and health legislation, which is applicable to current UK legislation and is applicable to the work of your profession'.

- (2a.4) 'Be able to analyse and critically evaluate the information collected.
- (2c.1) The Group agreed to delete out this standard as it was not meaningful or easily measured.
- (3a.1) 'understand the key concepts of the bodies of knowledge which are relevant to their profession-specific practice.' Body of knowledge was to replace the previous reference to the various different types of sciences which was cumbersome and not succinct.
- The Group agreed that any changes made to the generic changes would also be incorporated into the profession specific standards so that there was uniformity.
- (1a.8) include the word 'both' so that it read 'understand both the need to keep skills and knowledge up to date and the importance of career-long learning.'
- **(1b.2)** correct the typo 'multi-disciplinary'.
- (2a.3) 'clinical or scientific' was still included in the occupational therapists standards and was to be removed.
- 7.4 The Group reviewed the profession specific standards:

#### ARTS THERAPISTS

The Group agreed that students needed to be made aware of the importance of undertaking clinical supervision in their arts-based practice. There was no provision to enforce this in the standards or legislation however the professional body for Arts Therapists required clinical supervision to be undertaken as a necessity. The amendment agreed was 'recognise that the obligation to maintain fitness to practice includes engagement in their own arts-based process and clinical supervision.'

#### **BIOMEDICAL SCIENTISTS**

The Group agreed to the amendments that had been made.

#### CHIROPODISTS AND PODIATRISTS

The Group agreed to the amendments that had been made.

#### **CLINICAL SCIENTISTS**

The Group agreed to delete out (2c.1) as had been agreed in the generic standards.

#### **DIETITIANS**

The Group noted that amendments recommended by the British Dietetic Association (BDA) had already been incorporated.

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Status Draft DD: None

Int. Aud. Public RD: None (1a.1) The Group agreed that acknowledgement should be included of the fact that dietitians are participating in the decision making process to withhold food and drink. The same paragraph was agreed to be included in the speech and language therapists' standards as it was applicable to them too. '...-understand the legal and ethical implications to participating in the decision to withhold or withdraw feeding including foods and fluids.'

# **OCCUPATIONAL THERAPISTS**

- (2a.2) the Group noted the typo which needed to be corrected where the following text had been duplicated; 'taking account of the environmental context'.
- (2b.3) 'Be aware of the range of occupations and or activities used in intervention and or activities and how these should reflect the individuals' occupational needs.'

(3a.1) – delete ('including housing').

## **ORTHOPTISTS**

The Group noted that the professional body had requested no changes to be made.

## **PARAMEDICS**

The Group agreed to the amendments which had been made.

#### **PHYSIOTHERAPISTS**

(2c.1) – the Group agreed to the following amendment: 'be able to evaluate treatment plans to ensure that they meet the physiotherapy needs of patients and clients, informed by changes in circumstances and health status.

# **PROSTHETISTS & ORTHOTISTS**

The Group agreed to the amendments which had been made.

#### RADIOGRAPHERS

The Group agreed to the amendments which had been made.

# **SPEECH AND LANGUAGE THERAPISTS**

The Group agreed that standards (1a.1) and (1a.3) were adapted to the corresponding arts therapists' standards as they correlated with each other. The reference to paintings was to be removed.

(**1b.3**) – the Group agreed that the equivalent standard in the English Language Testing System needed to be corrected from level 7 to level 8.

Public

RD: None

7.5 The Group approved the standards subject to the amendments as detailed above.

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#### Item 8.06/47 WORK PLAN

- 8.1 The Group received a paper to note from the Policy Officer, Mr Guthrie.
- 8.2 The Group noted the work plan for their information and thanked the Policy Officer, Mr Guthrie for all of his hard work on the revision of the Standards of Proficiency (SoPs). It was thanks to Mr Guthrie that the Group had kept to the timetable as originally set out.

#### Item 9.06/48 ANY OTHER BUSINESS

- 9.1 The Group noted that the research findings of Opinion Leader Research (OLR) had been presented to the Communications Committee. The research findings had indicated that some registrants were not aware of the importance of the Standards in the undertaking of their professional career. The Communications Committee were currently reviewing and undertaking more promotional activities in highlighting the work of the HPC to both the public and its registrants. Council had also been made aware of the research findings at its meeting in March 2006.
- 9.2 The Group discussed the communication of the SoPs once published. The Group noted that it was important to emphasise the differences between the HPC SoPs and the knowledge and skills framework/competency standards that were more NHS driven targets. HPC was an independent regulator and not an arm of the NHS, it was therefore important to promote this fact at the launch of the SoPs. The Chairman recommended that the new President promoted the fact that the SoPs were multi-professionally orientated.
- 9.3 The Group agreed that in the covering letter to be sent with the final publication of the SoPs the difference between the threshold and practicing standards needed to clarified from a legal perspective.

#### Item 10.06/49 DATE & TIME OF NEXT MEETING

10.1 This was the last meeting of the Group.