Further centralising the service user



Updated standards of proficiency: themes of the key changes

Registrants must:

- **2.2:** promote and protect the service user's interests at all times
- **2.5:** respect and uphold the rights, dignity, values, and autonomy of service users, including their role in the assessment, diagnostic, treatment and/or therapeutic process
- **2.6:** recognise that relationships with service users, carers and others should be based on mutual respect and trust, maintaining high standards of care in all circumstances
- **6.4:** understand the need to ensure confidentiality is maintained in all situations in which service users rely on additional communication support (such as interpreters or translators)
- **7.1:** use effective and appropriate verbal and non-verbal skills to communicate with service users, carers, colleagues and others
- **7.4:** work with service users and / or their carers to facilitate the service user's preferred role in decision-making, and provide service users and carers with the information they may need where appropriate
- **7.5:** modify their own means of communication to address the individual communication needs and preferences of service users and carers, and remove any barriers to communication where possible
- **7.6:** understand the need to support the communication needs of service users and carers, such as through the use of an appropriate interpreter
- **7.8:** understand the need to provide service users or people acting on their behalf with the information necessary in accessible formats to enable them to make informed decisions
- **8.1:** work in partnership with service users, carers, colleagues and others
- **8.5:** identify anxiety and stress in service users, carers and colleagues, adapting their practice and providing support where appropriate
- **11.2:** gather and use feedback and information, including qualitative and quantitative data, to evaluate the responses of service users to their care
- **11.5:** evaluate care plans or intervention plans using recognised and appropriate outcome measures, in conjunction with the service user where possible, and revise the plans as necessary
- 13.11: engage service users in research as appropriate

What does this mean for registrants?

Every service user is unique, and HCPC registrants are required to think broadly about their best interests. Registrants must provide care that upholds their rights, dignity, values, and autonomy in an appropriate and effective way. They are also required to identify instances in which service users' needs might require closer scrutiny.

Registrants must be especially mindful of the needs of service users living with a disability or a health condition that impacts their ability to communicate. (You may wish to read the fact sheet on equality, diversity and inclusion for more information on this.)

Registrants should take steps to ensure that a service user is fully and appropriately involved in their care. Where a service user is not able to be involved, registrants should document the steps they have taken to involve the service user's carers, family members, and/or

individual on the
HCPC Register is
required to meet the
standards of proficiency
as far as they relate
to their scope of
practice

Background

representatives.

Since the HCPC's previous standards of proficiency were published, many aspects of service delivery have evolved. In the updated standards, requirements have been expanded around consent, communication, confidentiality, EDI and quality assurance, to bring them up to date with current understanding and practice.

The updated standards ask registrants to take a wide range of factors into account when delivering care, putting the service user and their unique needs at the centre of it.

Service users have reported enhanced quality of care, improved quality of life and improved relationships with staff when they have input into their own care.

The updated standards are in effect from 1 September 2023.

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Case study

Carmen is a paramedic who responds to a call for urgent medical attention for a service user with a severe pressure ulcer. The service user, Jan, lives with paraplegia and experiences challenges with verbal communication. He relies on a wheelchair for mobility and receives assistance from a carer for some activities.

Carmen understands that trust and respect is vital in effective care provision. Carmen takes note of Jan's body language, which suggests anxiety. She makes a conscious effort to use body language that is open and non-threatening, and a tone that is calm and reassuring. First, she introduces herself to Jan, and asks who he is joined by. She speaks directly to Jan, listens with respect and allows time for his response. She encourages the use of physical gestures with which he can reply by using these herself.

When Jan responds that he is accompanied by Leon, who is his carer, she asks if Jan is happy for Leon to stay during the assessment and treatment. Jan consents. Carmen introduces herself to Leon, before asking Jan whether he is happy for Leon to contribute to the discussion, as she could ask him about the background to his condition. When Jan consents, Carmen asks Leon some questions. She conducts the conversation collaboratively, ensuring that Leon's insights and observations are heard and valued. Leon outlines the background of Jan's condition and his communication support needs. Carmen thanks Leon. She asks Jan whether his preferred role is as the decision-maker in his care, which he confirms.

Next, Carmen gives Jan a clear summary of the situation and her proposed treatment. She asks him to confirm whether he understands the proposed treatment or if he has any questions. She asks whether he is willing to consent to the proposed treatment, which he does.

These updates to the standards of proficiency were made after a detailed review process, to ensure they reflect the reality of current practice.

Resources

Inclusive communication training and resources https://communication-access.co.uk

E-learning on communication

https://learning.publichealthscotland.scot/course/view.php?id=573

RCSLT resources on inclusive communication https://www.rcslt.org/speech-and-language-therapy/inclusive-communication-overview

Information on decision-making for others and the Mental Capacity Act (MCA)

https://www.nhs.uk/conditions/social-care-and-support-guide/making-decisions-for-someone-else/mental-capacity-act/

HCPC's gap analysis tool: identify and address gaps in your current practice https://www.hcpc-uk.org/gap-analysis-tool

HCPC's webinar on centralising the service user https://www.youtube.com/the_hcpc

Further information in the updated standards of proficiency around centralising the service user https://www.hcpc-uk.org/updated-sop/further-centralising-the-service-user

For full information on the updated standards of proficiency, see the HCPC website.

Registrants should use their **professional judgement** when applying these standards.

The key changes in the updated standards of proficiency can be grouped into a number of themes, of which this is one. The other themes are: digital skills and new technologies, equality, diversity and inclusion, leadership, registrants' mental health, and promoting public health and preventing ill-health.

The changes in the updated standards extend beyond these themes. The full standards for all professions can be downloaded from the HCPC website.