Registrants’ mental health

Updated standards of proficiency; themes of the key changes

Registrants must:

3.2: understand the importance of their own mental and physical health and wellbeing strategies in maintaining fitness to practise.

3.4: develop and adopt clear strategies for physical and mental self-care and self-awareness, to maintain a high standard of professional effectiveness and a safe working environment.

What does this mean for registrants?

Registrants should assess their health and proactively take steps to keep their practice safe and effective. In addition to the standards of proficiency, standard 6.3 of the standards of conduct, performance and ethics requires registrants to make changes to how they practise, or to stop practising, if their physical or mental health is affecting their performance or judgement, or putting others at risk.

If they are unable able to practise safely and effectively, registrants should stop practising and seek advice and support that is appropriate for their needs.

These standards do not mean that experiencing ill health or poor mental health automatically makes you unfit to practise, especially if you are able to manage your condition well, for example with medical care or medication.

It also does not mean that seeking assistance for your health, including from your employer, will automatically mean that you will be referred to the HCPC. Just as managing their health is each registrant’s responsibility, it is the responsibility of registrants’ employers to provide a working environment in which registrants are able to meet the standards. This may include providing support for a registrant’s health condition or accommodating their accessibility needs.

There is no set way to meet this standard, but you may find it helpful to include wellness goals in your personal assessments and specific observations about your health, and how you manage it, in your notes.

Background

The HCPC’s previous standards of proficiency included an expectation for registrants to manage their own health in order to remain fit to practise. However, they focused more on fitness to practise than the registrant’s personal health, and they required registrants to ‘maintain’ their health, suggesting that changes in health would automatically mean registrants were no longer meeting the standard.

The emphasis in the updated standards is on registrants assessing their own level of health, managing it effectively and seeking support when needed. The standards aim to recognise the current pressures on the healthcare workforce and the emotional burden this places on registrants. The updated wording clarifies the HCPC’s stance on mental and physical health, which are vital components of safe and effective practice.

How can I tell if my health is affecting my fitness to practise?

The HCPC’s Health and Character webpages include a flowchart to help guide registrants through an assessment of their health in relation to their fitness to practise. This includes four questions that registrants can ask themselves or go through with their employer.

1. Does your health condition impact your ability to practise safely?

2. Are you able to manage your condition so that it does not impact your ability to practise safely and effectively? Could it be managed through medication or treatment, for example?

3. Can you adapt, limit or change your practice to fit with your health needs, so that you can practise safely and effectively?

4. Can reasonable adjustments be made to your workplace that will enable you to practise safely and effectively?

If the answer to questions 2, 3 or 4 is ‘no’, then your health may be affecting your fitness to practise in a way that requires a referral, a self-referral or a health declaration.
James has been practising as a paramedic for ten years, and after seeking medical advice for occurrences of tremors and dizziness he is diagnosed with Parkinson’s Disease. The doctor explains that the condition is caused by areas of the brain degenerating, meaning that symptoms will worsen over time. James begins experiencing depression soon after the diagnosis.

James books a meeting with his manager to let her know about the diagnosis and the effect it is having on him. James’s manager asks if he feels physically and mentally able to keep practising. James is not sure: the physical symptoms are not preventing him from operating but they may get worse, and while he has recently had mental health concerns, maintaining good mental health is a challenge faced by his profession as a matter of course in their role as first responders to emergencies. James does not feel comfortable with the idea of receiving special treatment when his colleagues and his Trust are under pressure.

James’s manager assures him that his mental and physical health is crucial to providing patient care, that safeguarding them is vital, and that time off from work is a legitimate measure to take in doing that. Together, James and his manager go through the questions suggested by the HCPC to establish what actions they may need to take to ensure he can practise safely and effectively. They agree that James will take time off from work and engage in talking therapy, which will help his mental health. They agree that engaging in physical therapies will support James physically.

For the future they commit to meeting regularly to discuss James’s health, to monitor how he is coping with his work, and to make any changes as and when needed. They agree that they will also need to revisit the statements in the HCPC health and character guidance at each review conversation and if needed discuss any further changes needed to ensure James can continue to practise safely, including making reasonable adjustments to his workplace.

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