

Health Professions Council
Council meeting, 31st May 2007

**Responses and decisions from the consultation on parts of the guidance notes for
applicant occupations seeking regulation by HPC**

Executive Summary and Recommendations

Introduction

The Council consulted between 1st December 2006 and 1st March 2007 on proposals for amendments to the guidance notes for applicant occupations seeking regulation by HPC.

The responses to the consultation have now been analysed and the attached document summarises the responses we received.

Decision

The Council is invited to:

- agree the text of the attached document and agree that it should be published online; and
- agree that the guidance notes for applicant occupations should be amended and re-published, in line with the decision outlined in the document.

Background information

None

Resource implications

None

Financial implications

None

Background papers

None

Appendices

None

Date of paper

21st May 2007

Responses and decisions from the consultation on parts of the Guidance Notes for applicant occupations seeking regulation by HPC

Proposed addition to parts of the Guidance Notes for applicant occupations seeking regulation by HPC

Introduction

The Health Professions Council regulates 13 professions:

- Arts therapists
- Biomedical scientists
- Chiropodists / Podiatrists
- Clinical scientists
- Dietitians
- Occupational therapists
- Operating departmental practitioners
- Orthoptists
- Paramedics
- Physiotherapists
- Prosthetists and Orthotists
- Radiographers
- Speech and lingual therapists

Health Professions Order 2001 provides that we may regulate other professions. The Council has been operating the process of accepting applications from applicant occupations (also known as aspirant groups) since spring 2003.

For a new profession to enter the register they must meet the following 10 criteria:

- Cover a discrete area of activity displaying some homogeneity
- Apply a defined body of knowledge
- Practise based on evidence of efficacy
- Have at least one established professional body which accounts for a significant proportion of that occupational group
- Operate a voluntary register
- Have defined routes of entry to the profession
- Have independently assessed entry qualifications
- Have standards in relation to conduct, performance and ethics
- Have Fitness to Practise procedures to enforce those standards
- Be committed to continuous professional development (CPD)

Aspirant groups begin the process with an informal meeting with the HPC to discuss the application process. Applications are made by completing the application form available on the HPC website and attaching all necessary documentation.

The full application details are processed and scored against the criteria then submitted to Council. The Council consider the degree to which the aspirant group meet the 10 criteria for becoming a new profession. If the Council are satisfied the criteria are met they can make a recommendation to the Secretary of State that the profession should be regulated.

In order to assist the Council in its decision-making process we proposed additions to two of the criteria for professions seeking regulation that will be effective from July 2007.

The proposed additions to criterion 1 and criterion 6 are as follows:

Criterion 1: The occupation must cover a discreet area of activity displaying some homogeneity	
Current	<p>This criterion covers what a profession's scope of practice is. The council will assess applications for evidence that demonstrates that the applicant occupation practices activities that:</p> <ul style="list-style-type: none"> • Are distinctly its own • Are common across the occupation • Are distinct from the scope of practice of other occupations, although there may be some overlap.
Proposed change: original wording + additional wording (in italics)	<p>This criterion covers what a profession's scope of practice is. The council will assess applications for evidence that demonstrates that the applicant occupation practices activities that:</p> <ul style="list-style-type: none"> • Are distinctly its own • Are common across the occupation • Are distinct from the scope of practice of other occupations, although there may be some overlap. <p><i>The applicant occupation must submit the draft Standards of Proficiency for the proposed profession. The Standards of Proficiency are the threshold standards which will allow for safe and effective practice.</i></p>

Criterion 6: The occupation must have defined routes of entry	
Current	<p>This criterion covers how a profession ensures its practitioners have the requisite knowledge and skills on entry. The Council will assess evidence of how entry to the applicant occupation is controlled. The Council will seek evidence that only individuals who have chosen defined routes of entry are recognised as being practitioners of the profession, in the eyes of educational institutions, employers, professional bodies and (where appropriate) the public at large. The Council will also assess evidence that the applicant occupation either already has a Subject Benchmark from the Quality Assurance Agency or equivalent body, or intends to work towards one as part of the process of becoming a regulated profession.</p>
Proposed change: original wording + additional wording (in italics)	<p>This criterion covers how a profession ensures its practitioners have the requisite knowledge and skills on entry. The Council will assess evidence of how entry to the applicant occupation is controlled. The Council will seek evidence that only individuals who have chosen defined routes of entry are recognised as being practitioners of the profession, in the eyes of educational institutions, employers, professional bodies and (where appropriate) the public at large. The Council will also assess evidence that the applicant occupation either already has a Subject Benchmark from the Quality Assurance Agency or equivalent body, or intends to work towards one as part of the process of becoming a regulated profession.</p> <p><i>The applicant occupation must state what the <u>actual</u> threshold entry qualifications are on the day that the HPC Register opens.</i></p> <p><i>The applicant occupation must provide documentary evidence of where (i.e. education providers) the threshold entry qualifications are delivered.</i></p> <p><i>The applicant occupation must provide documentary evidence of external quality assurance of the threshold entry qualification.</i></p>

The changes to criterion 1 were proposed to ensure the Standards of Proficiency for any new profession accurately reflects those required by the profession. Representatives from the new profession are best placed to inform what the threshold standards for safe and effective practice are.

The changes to criterion 6 were proposed to allow the new profession to identify the threshold entry qualifications on the day of entry, thus becoming the minimum entry

level onto the register. This is the threshold entry level for UK approved courses which would apply from the date of the opening of the register. Documentary evidence of where the qualification is provided and evidence of external quality assurances must be supplied to allow HPC to assess and review education programmes.

The consultation

A consultation was held from 1st December 2006 to 1st March 2007, during which we circulated our proposals to a wide variety of stakeholders asking for their agreement of the proposed changes and for their comments.

Responses

Responses in favour of our proposals

Of 21 respondents to the consultation, 20 agreed with the proposed changes with one noting the proposed changes to criterion 1 and 6 for professions seeking regulation. Comments indicated that the additional wording would provide further guidance and clarification for professions.

Amicus said: 'Our aspirant professions agree with the proposed additional wording as it provides further helpful guidance to professions in their preparation for any future application to HPC.' The Nutrition Society welcomed the proposal that applicant occupations should include draft standards of proficiency in their applications.

A number of respondents agreed that the wording added to criterion 6 would assist HPC in making decisions regarding aspirant groups and provided clarification and guidance to aspirant groups. In particular Neath & Port Talbot Community Health Council said: 'The Board of Welsh Community Health Councils has no objections to the changes as proposed and the additional wording is helpful in clarifying what is required. The Board is confident that the collective responses will ensure that all aspects will have been considered and that the safety of patients and the public will not be compromised.' NHS Borders added: 'The additional wording enables HPC to make decisions in a more informed way and/or give opportunities for HPC to explore if required.'

The Society of Sports Therapists said that including standards of proficiency would strengthen applications from applicant occupations. They said that they 'unequivocally' supported the changed wording.

Other comments

The British Association of Counsellors and Psychotherapists (BACP) made a number of comments about the criteria. With reference to the standards of proficiency they said: 'This change transfers the responsibility for the production of draft Standards of Proficiency from the HPC to the aspirant occupation. However, we are aware that this is not an onerous task as it requires the occupation to modify the HPC's existing standards of proficiency with occupational/professional specifics.'

However, they were concerned about the possible impact of the change to criterion 6. In particular, they told us that training in psychotherapy and counselling was very varied and often delivered outside of traditional education institutions. They concluded: 'BACP does not object to the proposed changes to the criteria. However,

we feel that we should stress that the change to criterion 6 is likely to delay substantially the regulation of counselling/psychotherapy and other psychological therapies.'

The Society and College of Radiographers stressed that it was important that the individual situation of each applicant occupation was looked at carefully. They cited sonography as an area where care would need to be taken in establishing an appropriate threshold level.

The Institute of Chiropractors and Podiatrists were concerned about situations where there was more than one organisation or association representing the applicant occupation. They said: 'We would hope that all relevant related professional bodies pertaining to, or compatible with, the applicant occupation would be consulted and/or invited to submit draft standards of proficiency for the proposed profession.'

We also received the following suggestions and comments:

- NHS Borders said: 'Having an HPC template when drafting the Standards of Proficiency for the proposed profession is fully supported as this standardises applications.'
- The British Association of Prosthetists and Orthotists suggested: '...it may be useful to suggest the standards of proficiency are submitted in the same format as other HPC proficiency standards.'
- The Nutrition Society suggested that criterion 6 might be revised to read: 'The applicant occupation must provide documentary evidence of where the courses leading to the award of the threshold entry qualifications are delivered.' They also sought further clarification on what we meant by asking applicant occupations to provide '...documentary evidence of external quality assurance of the threshold entry qualifications'.
- The Institute of Chiropractors and Podiatrists said: 'We feel that the HPC's objective should be to set out documentation to help and encourage all associations/disciplines involved in health to register and not to make the process too onerous. Particular attention should be directed at individuals who for one reason or another are not members of 'recognized' professional bodies.'
- With reference to criterion 6, The Society of Sports Therapists said we should give consideration as to '...whether the wording on the second paragraph should be changed to cover where entry qualifications are awarded as well as delivered'.

Our comments

We always consider each application we receive very carefully, taking into account the particular circumstances of each group before making our decision. If we are to regulate a new profession, we will consult prior to the opening of our register on what the threshold entry level should be. The input of the profession into this is absolutely vital and we acknowledge that the circumstances in which education and training is delivered may vary between different professions.

We are always interested in speaking with and working with all relevant stakeholders. Where there are two or more professional bodies the HPC will consult with all the relevant professional bodies. We encourage professional bodies to work together in drafting the Standards of Proficiency for a proposed profession. If a profession is to be regulated, we will always work with all parties to ensure, as far as possible, that all views are taken into account in the finalised standards of proficiency.

Following your comments, we propose to supply a template that aspirant groups can use when developing standards of proficiency.

Decision

We are confident that the across the board support for our proposals indicates that the changes are sensible and will provide further clarification for aspirant groups. Therefore the decision has been made to proceed with the proposed additions to criterion 1 and criterion 6 of the Guidance Notes for applicant occupations seeking regulation by HPC.

Respondents

We received a total of 21 responses from the following organisations.

We would like to thank all those who took the time to respond to the consultation.

- Amicus
- Association of Child Psychotherapists
- British Association for Counselling and Psychotherapy
- British Association of Prosthetists and Orthotists
- British Society of Echocardiography
- Ceredigion, Local Health Board
- Chartered Society of Physiotherapy
- College of Occupational Therapists
- Department of Immunology, Chelsea & Westminster Hospital
- Flintshire Local Health Board
- General Dental Council
- Neath and Port Talbot Community Health Council
- NHS Borders
- North West Ambulance Service
- South Western Ambulance Service
- The Institute of Chiropractors and Podiatrists
- The Society and College of Radiographers
- The Society of Sports Therapists
- UK Council for Psychotherapy
- UK Voluntary register for Public Health Specialists
- Welsh Scientific Advisory Committee