

## **Executive Summary**

The current position on HPC's project plan will be reported verbally and the consultation paper template is presented for discussion and agreement.

## **HPC Education and Training Committee Decisions required re Consultation Document**

This paper has been produced by Newchurch, in consultation with the Education and Training Committee Chairman and Secretary, as an aid to the Committee in reviewing the decisions that they will need to make in order that we can assist them in drafting elements of the consultation document that relate to education and training.

The paper reviews Part IV (only articles 14-20) of the OIC, which refers to education and training. Under each part of the article is set out:

- What the OIC requires the Education and Training committee to do
- The previous approach to this issue by the CPSM, where we have been able to gather this information at this time
- The point in the decision making process that the HPC E&T Committee have reached thus far
- Any decisions, with possible options, the committee are required to make in order to enable the consultation document to be published in July 2002.

We would like input from the committee in reviewing and commenting on the completeness and accuracy of the information in the paper. In particular in; **Either** confirming the approach the committee means to take to any item where this is known

**Or** where an approach has not been agreed

- reviewing the options suggested
- determining if there are any others
- deciding on the committee's preferred option.

### **1. Standards of Proficiency**

**Requirement** - The Committee must establish standards of proficiency

**Previous approach by CPSM** – new role for HPC as CPSM boards did not set separate standards of proficiency but instead approved courses as below which would deliver appropriately qualified professionals (see below). Registration was by completion of a validated course.

**Approach** – HPC have contracted with QAA to facilitate the development of standards of proficiency, by April 2003, for all 12 professions, which will be based on subject benchmarks, where these exist. Subject benchmarks are available for 9/12 professions (not arts therapists, clinical scientist – though QAA now have funding to develop these) and can utilise occupational standards, which have been developed for paramedics.

**Decision** - E&T Committee to determine if the standards of proficiency being developed with assistance from QAA are the approach they wish to set out in the consultation document. These standards will be published and used for purposes such as assessing non-UK qualified applicants and grandfathering. How will the standards be published?

**Requirement** – the E&T committee must have mechanisms for giving advice to registrant, employers and others in respect of education, supervision and performance of those who supply services in connection to those provided by registrants..

**Previous approach by CPSM** – such advice was given by professional bodies and in variety of different ways by different Boards.

**Approach** –non yet agreed

**Decision** – what kind of advice the article covers, how will the committee deliver such advice and what will this entail?

## **2. Standards of Education and Training**

**Requirement** - The Committee must establish standards for education and training including outcomes.

**Previous approach by CPSM** – each board had to have its own separate approach. These are now informed by QAAs subject benchmarks. 10-12 boards have published detailed handbooks for course validation and these include standards of education and training.

**Approach** – non-yet agreed by E&T committee

**Discussion** – QAA has developed subject benchmarks (for 9 out of the 12 professions, 2 more now funded for the future). These benchmarks include standards for education in a common format; A - expectations in providing client services, B – the application of principles and concepts, C- knowledge, understanding and skills.

**Decision** – the committee must determine what options are available to it to establish these standards and its preferred option.

**Possible Options**

1. Continue with individual standards developed for each profession by the previous boards
2. Develop new HPC standards with common core for all professions plus profession specific elements
3. Adopt QAA subject benchmarks or equivalent in national occupational standards, as standards for education the HPC expects.

Will the timeframe for implementation will be set to coincide with QAAs 2003 – 2006 subject benchmark reviews?

## **3. Requirements for Admission**

**Requirement** - The Committee must establish requirements for admission to and continued participation in education and training.

**Previous approach by CPSM** – varied by board, some boards with published quality assurance processes for education covered admission criteria but in a variety of different ways. All entrants to courses must be appropriately equipped intellectually and motivationally to complete the course.

**Approach** – non-yet agreed by E&T committee

**Decision** - the committee must determine what options are available to it to establish these requirements and its preferred option.

(Standards of health and good character will be as for registration and defined by the practice committees)

**Possible Options**

1. No further requirements other than those of health and good character
2. Additional academic requirements for admission which could be
  - a. Either the specification of detailed entry criteria
  - b. Or issue general guidance with a benchmark of 3 appropriate "A" levels in 3 appropriate subjects

#### **4. Course Approval**

**Requirement** - The Committee must determine a mechanism for approving courses, publish the criteria by which it makes its decisions and keep and publish a list of courses that have been approved.

**Previous approach by CPSM** – each board has its own approach, detailed for 10 professions, in their Quality Assurance Handbook. Many have JVCs with professional bodies though several do not, some approve clinical placements integrally with course approval others approved them separately.

**Approach** – non-yet agreed by E&T committee

**Discussion** - QAA has developed an academic review process and handbook and during 2002, is piloting its use in assessing institutions and programmes at 6 sites in England, which deliver health education courses. The plan is then to review the pilots and role the process out to all institutions delivering courses for PSMs during 2003 – 2006. The pilots do not look at the assessment of clinical placements.

**Decision** - the committee must determine what options are available to it to establish criteria and mechanisms for approval and its preferred options.

Is the committee going to approve courses outside the UK?

Will there be a different system for Wales? (see section 4 below)

Does the committee intend to work with professional bodies in a joint approvals process?

What criteria will the committee use in assessing courses and institutions?

Options

1. Continue with individual criteria developed by each profession and used by previous boards
2. Develop a new HPC approach with common criteria, developed for the sole use of HPC, for all professions plus profession specific elements
3. Work with QAA and Funding Council to utilise their academic review process (and handbook) as criteria for the purposes of HPC course approval and develop HPC criteria for clinical placement review

What system will the committee use for assessing courses?

Options

1. Document assessment only
2. Visits only
3. A combination of documentary evidence and visits

How will the E&TC assess academic courses and clinical placements?

Options

1. Together as part of the same programme
2. Separately as different assessments
3. A different combination of the two above for each profession

How will the E&TC gather documentary evidence?

Options

1. Use only the evidence submitted to the QAA (as defined in the academic reviewers handbook and the recommendations on information for quality assurance)
2. Develop a evidence request form of its own
  - a. Common to all professions
  - b. Specific for each profession
  - c. With elements of both the above
3. Combination of both 1 and 2

Who will assess documentary evidence?

#### Options

1. Only members of the committee
2. Only visitors
3. Only registrant assessors (who the OIC states cannot be visitors)
4. Only E&T subcommittees
5. A combination of the above?

How will the E&TC conduct visits?

#### Options

1. Develop its own programme undertaken by HPC representatives
2. Use the QAA programme of visits
3. A combination of both

What mechanism will the E&TC use to coordinate its approval work?

#### Options

1. All the detailed work for all 12 professions, will be coordinated by the E&T committee itself
2. Joint quality assurance sub committees, with membership from HPC E&TC and professional bodies, who would each coordinate the work of one profession
3. The E&T Committee will set up a subcommittee / working groups to coordinate this work

How will the committee publish its criteria for approval and list of approved courses?

#### Options

1. On the HPC website
2. In a document available to health education and general libraries

Will the E&T committee assess non-UK courses?

If yes, will it use the same mechanisms as for UK courses?

If yes, how would this be undertaken with the available resources ( money and personnel)?

If the mechanism is to be different then this need to be detailed?

### **5. Different Approaches across Four Countries**

The OIC requires that HPC procedures must allow for different systems in each of the four countries of the UK. This is because the delivery of Education and Training is a devolved function. At the same time however HPC is responsible for carrying out its functions a UK wide level. This means that the ways procedures are implemented under the OIC may be different in each of the four countries. At present the majority of piloting work in new mechanism for delivering education and training has occurred in England thus it is likely that this will be reflected in the consultation document.

### **6. Visitors**

**Requirement** - The Committee must confirm whether it will be appointing and using visitors and if so for what purpose. It must define how it will select visitors and how it will reimburse them. (We assume that the issue of reimbursement will fall under the remit of the finance committee)

**Previous approach by CPSM** – each board had its own process for selection, training and use of visitors.

**Approach** – non-yet agreed

**Decision** – Will the committee be appointing and using visitors?

If yes the OIC requires the committee to develop a “job description” and “person specification” for the role, which is based on references in the OIC.

What will the role of visitors be?

Will the committee provide training for visitors? If yes then the following options are possible:

1. Utilise in house training
2. Use QAA reviewers training
3. Use CHI reviewers training
4. Use another external training provider
5. A combination of the above

Does the Committee plan to use lay visitors?

If yes all the questions posed above need to be answered in relation to these visitors too.

## **7. Working with Educational and Training Providers**

**Requirement** - The Committee must determine how it will work with educational and training providers and confirm its commitment to notifying them of any standards it published and any decisions it makes.

The Committee must have processes in place to notify institutions of its decisions in relation to course approvals, and then consider any response received. It must also use its best endeavours to secure that any student whose course has approval withdrawn is given the opportunity to complete an approved course or qualification..

**Previous approach by CPSM** – HEIs were informed but on an adhoc basis, again mechanism varied between boards.

**Approach** – non-yet agreed

**Decision** – The committee may wish to make a general statement about its intentions to work with the educational and training institutions in the ways set out in the OIC.

Will this be a partnership between HPC and HEIs?

What general principles will apply to the relationship?

How much notice will HPC give institutions of changes to its standards? How long will it give them to comply?

How much time will institutions have to respond to HPCs judgments?

If approval is withdrawn how much time will an institution have to respond to this judgment?

How much time/notice will it give of withdrawal of approval?

## **8. Post Registration Training (CPD)**

**Requirement** - The Committee may require all registrants to undertake CPD in order to maintain their registration and may require some registrants who have not practiced for a period of time to undertake training to retain registration. In either case standards for such education will be established, published and assessed as are general E&T requirements

**Previous approach by CPSM** – not a role for CPSM though many professional bodies have CPD guidance and return to practice courses.

**Approach** – non yet agreed.

**Decision** – The committee must make statement as to its intentions in relation to CPD.

Will it be making such rules?

If so by when? – guidance to be sought from full council.

Will this apply to all registrants or just those who have had a time away from clinical practice?

The committee needs to define what it means by CPD in order to clarify this in the consultation document. What is the committees' definition of CPD?

Options

1. Training required to demonstrate continued competence in line with standards of proficiency (as in the explanatory notes for the health act).
2. Additional academic requirements year on year
3. A means of requiring registrants to keep up to date with developments in practice of their profession over time
4. A means of continuing professional development i.e. continuously expanding skills, knowledge, etc.
5. Other