

Education and Training Committee, 4 June 2015

The use of visitors in the approval and monitoring of education and training programmes for podiatrists practicing podiatric surgery

Executive summary and recommendations

Introduction

This paper sets out proposals for the use of visitors in the approval and monitoring of education and training programmes for podiatrists practising podiatric surgery.

Decision

The Committee is invited to discuss the attached paper.

The Committee is invited to agree the following:

- the visitor role brief to assess podiatric surgery programmes in Appendix 1; and
- the criteria for the selection of visitors to assess podiatric surgery programmes, set out in Appendix 2.

Background information

- Council paper – 26 March 2015 – [‘Results of the consultation on standards for podiatric surgery’](#)
- Education and Training Committee paper – 5 June 2014 – [‘Annotation of the Register of Podiatrists practicing podiatric surgery’](#)

Resource implications

The resource implications of this paper include the following.

- Recruitment and training of visitors with the necessary knowledge and experience to assess podiatric surgery education and training programmes

Financial implications

The financial implications of this paper include the following.

- Recruitment and training of visitors

The recruitment and training costs have been accounted for in the Partners Department budget for 2014-15.

Appendices

- Appendix 1 – Role brief and requirements for visitors with necessary knowledge and experience to assess podiatric surgery programmes
- Appendix 2 – Criteria for the appointment of visitors to assess podiatric surgery programmes

Date of paper

26 May 2015

The use of visitors in the approval and monitoring of education and training programmes for podiatric surgery

1 Standards for podiatric surgery and the approval of programmes

- 1.1 The standards for podiatric surgery were consulted on between October 2014 and January 2015. The final version of the standards were approved by the Council at its meeting on 26 March 2015.
- 1.2 The standards are split into two sections; section 1: standards for education providers and section 2: standards for podiatrists practising podiatric surgery. We will use the both sections of the standards to approve and monitor programmes delivering training in podiatric surgery. As with all programmes we approve, we will visit podiatric surgery programmes to conduct a full assessment against the standards. Education providers will need to demonstrate how they meet all the standards set out in section 1 and 2 through the approval process. A programme which did not meet one or more of the standards would have conditions placed on their approval which must be met before the programme can be approved. Once approved, the programmes would be subject to continued engagement with our monitoring processes to ensure adherence to the standards. Where appropriate to do so, we will also investigate any concerns raised about a programme once it is approved by us.
- 1.3 The Health and Social Work Professions Order 2001 requires that we select visitors with the appropriate knowledge and experience to assess programmes for initial approval and the ongoing confirmation of that approval. We must also appoint at least one registrant visitor from the appropriate part of the Register in relation to the programme(s) being assessed.
- 1.4 For most post-registration areas of practice, annotation would normally be relied upon to satisfy the requirement that visitors hold the necessary knowledge and experience. Selection on this basis also means visitors with the appropriate annotations are also registrants, thus fulfilling our statutory requirements regarding the appointment of registrant visitors also. We have used this approach in the past to appoint visitors to assess supplementary prescribing programmes, local anaesthesia and prescription only medicine programmes.
- 1.5 At its June 2014 meeting, the Committee decided that annotation for podiatrists practising podiatric surgery will only commence once existing programmes delivering podiatric surgery training are assessed and approved. As a consequence, the selection of registrant visitors based on their relevant

annotations held will not be possible in this instance to support the approval process.

2 Criteria for appointing visitors to assess podiatric surgery programmes

2.1 Alternative criteria must be used to ensure visitors are appointed with appropriate knowledge and experience to assess podiatric surgery programmes for approval. It is likely that the role would be suitable for registered chiropodist/podiatrists who have completed training and gained a qualification to practise podiatric surgery. The normal training route includes the completion of:

- an HCPC approved programme in chiropody and podiatry leading to eligibility to apply for registration, normally a three year BSc degree with honours;
- at least one year's post-registration clinical practice;
- a master's degree in the theory of podiatric surgery;
- a minimum of two years surgical training to achieve fellowship of the Faculty of Podiatric Surgery of the College of Podiatry;
- competitive entry to specialist Registrar training posts; and normally a further three years of surgical training, leading to successful award of the Certificate of Completion of Podiatric Surgery Training (CCPST) by the College of Podiatry.

Managing visitor conflicts and a limited recruitment pool

2.2 Confining recruitment of visitors to podiatrists practising podiatric surgery alone increases the risk that suitable candidates have significant conflicts with one of the two podiatric surgery programmes currently being delivered. Until recently, the only available training route for podiatric surgery training was through the Faculty of Podiatric Surgery. This means most podiatrists practising podiatric surgery have at some point been involved with the Faculty's surgical training programme. A further issue to consider is the low number of trained and practising podiatric surgeons, which limits the available pool that can be recruited from to perform the visitor role.

2.3 To address potential conflicts and a limited recruitment pool, the role could also be opened to medically qualified orthopaedic surgeons. This group of registered professionals complete a defined route of surgical training leading to specialist registration with the General Medical Council (GMC). Orthopaedic surgeons use similar techniques as podiatrists practising podiatric surgery, with some specialising in foot and ankle surgery. In addition, orthopaedic surgeons

often work within multidisciplinary teams, sometimes alongside podiatrists practising podiatric surgery. Given the approach taken to include groups such as British Orthopaedic Foot and Ankle Society (BOFAS), the British Orthopaedic Association (BOA) and the Royal College of Surgeons (RCS) in the development of the standards, the inclusion of these groups of registered professionals within the target audience for visitor recruitment would also be appropriate to support the approval process.

- 2.4 We have adopted a broader approach to the recruitment of visitors on a previous occasions to support our work in approving programmes. At the time of introducing new legislation which allowed independent prescribing for some HCPC professions there were no HCPC registrants who held the independent prescribing annotation. Furthermore, there were no registrants who had undertaken an approved programme of training to be eligible to receive the new annotation. To address this knowledge and experience gap, we recruited registered nurses and pharmacists who held the independent prescribing annotation to perform the visitor role.
- 2.5 We have also successfully recruited visitors based on broader criteria where no annotation exists in relation to programmes we are approving. Most recently, approved mental health professionals (AMHP) were appointed on the basis of their training and qualifications in this post-registration area of practice, and their appointment to the AMHP role with a local authority.

3 Visitor role brief for podiatric surgery

3.1 The proposed podiatric surgery visitor role brief is set out in Appendix 1. The brief has been adapted from the existing visitor role brief and therefore includes common visitor requirements regarding knowledge and experience of education and training development and delivery, collaborative working, decision making and working in accordance with the seven principles of public life. The brief has been specifically adapted taking into account the considerations detailed in section 2 of this paper for the purposes of assessing podiatric surgery programmes. The changes to the essential criteria for this visitor role are listed below.

- Candidates must be registered as a chiropodist/podiatrist with the Health and Care Professions Council or as a doctor in the specialist part of the Register for orthopaedic surgery with the General Medical Council
- Candidates must be currently or recently employed as a podiatrist practising podiatric surgery or medically qualified orthopaedic surgeon

- Candidates must hold the necessary qualifications required to practise as a medically qualified orthopaedic surgeon or podiatrist practising podiatric surgery

3.2 The Committee is asked to approve the role brief set out in Appendix 1, subject to any further amendments made following discussions at this meeting.

4 Criteria for the selection of visitors to assess podiatric surgery programmes

4.1 Should the Committee agree the visitor role brief in Appendix 1, further consideration must be given to the overall panel of visitors required to conduct an approval visit. This will ensure we continue to meet our statutory requirements through the appointment of visitors to approval panels and will continue to embed HCPC policy initiatives regarding the use of lay visitors across the breadth of programmes (pre and post registration) considered for approval.

4.2 The criteria for the selection of visitors to assess podiatric surgery programmes is set out in Appendix 2. Once approved, this criteria will be used by the Education Department to inform visitor selection for the approval process.

4.3 The Committee is asked to approve the selection criteria set out in Appendix 2, subject to any further amendments made resulting from discussions at this meeting.

5 Appendix 1: Visitor role brief – podiatric surgery

Role brief and requirements for Podiatric surgery visitors

Context

The Health and Care Professions Council (HCPC) is an independent statutory regulator whose main function is to safeguard the health and care of persons using or needing the services of its registrants.

Visitors make up one of a range of “Partners” who provide the expertise the HCPC needs for its decision-making.

The Partner shall provide the services to the HCPC as an independent contractor under the terms of the Partner Agreement.

Purpose of role

- To visit and assess podiatric surgery programmes of education and training delivered (or proposing to be delivered) by education providers.
- To assess approved podiatric surgery programmes of education and training using established monitoring processes.
- To provide recommendations to the Education and Training Committee regarding the approval/ongoing approval of podiatric surgery programmes.

Main Responsibilities

Visitors will give expert advice and contribute to discussions and decision making as directed by the Council or relevant committee.

Specific tasks include:

- Preparing visitor reports from approval visits and monitoring activities which include recommendations for the Education and Training Committee about the approval/ongoing approval of podiatric surgery programmes.
- Working collaboratively with other visitors, the HCPC executive, education providers and other relevant stakeholders.
- Visiting education providers who are normally based within the UK.
- Attending annual monitoring assessment days.
- Considering annual monitoring submissions, by correspondence.
- Considering major change submissions, by correspondence.

- Considering (when required) complaints made about education providers, by correspondence.
- Reporting directly to and attending (in exceptional circumstances) meetings of the Education and Training Committee and its subordinate bodies.
- Undertaking any other duties arising from visits or monitoring activities as directed by the Education and Training Committee and its subordinate bodies.

Person specification

Skills, knowledge and abilities

Essential

- Candidates must be registered as a chiropodist/podiatrist with the Health and Care Professions Council or as a doctor in the specialist part of the Register for orthopaedic surgery with the General Medical Council
- Candidates must be currently or recently employed as a podiatrist practising podiatric surgery or medically qualified orthopaedic surgeon
- Candidates must hold the necessary qualifications required to practise as a medically qualified orthopaedic surgeon or podiatrist practising podiatric surgery
- Ability to consider a wide range of issues in order to make informed and sound decisions.
- Commitment to the Seven Principles of Public Life (see Appendix one).
- Understanding of the principles of quality assurance in Higher Education or Further Education or in a practice environment.
- Understanding of teaching, learning and assessment strategies, developed in either an education or practice environment.
- Ability to explain and justify decisions and promote HCPC interests to all stakeholders concerned.
- Excellent oral and written communication skills and interpersonal skills, including the ability to communicate professionally with a range of stakeholders.

Desirable

- Previous experience as a visitor, reviewer, inspector, moderator or external examiner.

- Previous experience as a programme leader or placement educator, or equivalent.
- Previous experience of attending large meetings and/or drafting formal reports.
- Proven knowledge of the legal and/or policy context affecting delivery and development of professional training in a healthcare, social care or therapeutic setting.

Time commitment

The time commitment is estimated as being in the region of 5 -10 working days each year. This includes preparation, attendance and travel time. The number of submissions and visits will vary from year to year and will also depend upon each profession.

Training

The HCPC is committed to the training of its partners. If your application to become a visitor is successful you will receive full comprehensive training for this partner role.

Fee and expenses

The role attracts a daily fee of £190 perday and a submission fee (by correspondence) of £75.

Travel, accommodation and subsistence expenses are also payable in line with the Partner Expenses Policy.

For further information on the HCPC, please visit www.hcpc-uk.org

The seven principles of public life

Selflessness

Holders of public office should take decisions solely in terms of the public interest. They should not do so in order to gain financial or other material benefits for themselves, their family, or their friends.

Integrity

Holders of public office should not place themselves under any financial or other obligation to outside individuals or organizations that might influence them in the performance of their official duties.

Objectivity

In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office should make choices on merit.

Accountability

Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

Openness

Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.

Honesty

Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interests.

Leadership

Holders of public office should promote and support these principles by leadership and example.

6 Appendix 2 – considerations for visitor selection for podiatric surgery programme approval work

Always or normally	Consideration
Always	<p>At least one visitor from a HCPC profession:</p> <ul style="list-style-type: none"> • a HCPC registered chiropodist / podiatrist currently practising podiatric surgery, or; <p>recruited on the following criteria:</p> <ul style="list-style-type: none"> • a medically qualified practicing orthopaedic surgeon who is currently registered in the specialist register for orthopaedic surgery of the General Medical Council.
Normally	<p>Two visitors from a HCPC profession made up of individuals:</p> <ul style="list-style-type: none"> • whose registration is as a chiropodist / podiatrist, and; • who are currently practicing podiatric surgery, or; <p>recruited on the following criteria:</p> <ul style="list-style-type: none"> • who are medically qualified practising orthopaedic surgeons, and; • are currently registered in the specialist register for orthopaedic surgery of the General Medical Council. <p>If needed, the second visitor can come from the following background:</p> <ul style="list-style-type: none"> • a HCPC registered chiropodist / podiatrist who has not undertaken the training required to be eligible to receive the podiatric surgery annotation. <p>A third visitor will be:</p> <ul style="list-style-type: none"> • a lay visitor.