

Education and Training Committee, 12 November 2020

Update on timeline for public consultation on SET 1 for Operating Department Practitioners

Executive summary and recommendations

### **Introduction**

This paper provides a background to the SET 1 threshold for ODPs and the early engagement we have undertaken with stakeholders. It also highlights some of the significant issues we foresee going forward and sets out the plans for the public consultation on this issue.

The current threshold for ODPs is Diploma of Higher Education (Dip HE). This equates to Level 5 in the Framework for Higher Education Qualifications (England, Wales and Northern Ireland) and Level 8 in the Scottish Credit and Qualifications Framework. The public consultation will ask if respondents agree that SET 1 for ODPs should be increased from diploma level to degree level (that is, a move from Level 5 to Level 6 for FHEQ and from Level 8 to Level 9/10 for SCQF)

At June ETC we presented findings from a survey for education providers on the provision of ODP education and their support for increasing the threshold to BSc Hons. The survey made clear that there was a significant difference between providers in England and the single provider in Scotland, the University of West Scotland. Following this, the Policy and Standards team have undertaken further targeted stakeholder engagement in order to understand the potential impact of the proposed changes and how we can work to mitigate negative outcomes.

This preliminary engagement has included discussions with: professional bodies, education providers in Scotland, England and Wales, NHS Education Scotland, and Public Health England.

Senior Management have begun conversations with the Scottish Government. We have also requested a legal opinion on the options the HCPC may have reduce the friction of this proposed change while maintaining a four-country approach. Our consultation survey will include specific questions to collect EDI information about respondents to further inform the impact assessment of the proposals.

### **Decision**

ETC is asked to recommend the paper to Council for approval.

## **Resource implications**

Resource implications are factored into the Policy and Standards workplan for 2020-21.

## **Financial implications**

Financial implications are factored into the Policy and Standards workplan for 2020-21.

## **Appendices**

- Appendix A - Update on public consultation on SET 1 for Operating Department Practitioners and initial stakeholder engagement
- Appendix B – Profile of pre-registration ODP programmes (as of 30 January 2020)
- Appendix C – Consultation document
- Appendix D – Equality and Diversity Impact Assessment

## **Author**

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12 November 2020

## **Update on public consultation on SET 1 for Operating Department Practitioners and initial stakeholder engagement**

At June ETC we presented findings from a survey for education providers on the provision of ODP education and their support for increasing the threshold for ODP education to Degree level. The survey made clear that there was a significant difference between providers in England and the single provider in Scotland, the University of West Scotland.

This document provides a background to the SET 1 threshold for ODPs and the early engagement we have undertaken with stakeholders. It also highlights some of the significant issues we foresee going forward and sets out the plans for the public consultation on this issue.

### **Background to SET 1 for ODPs**

The first of the standards of education and training ('SET 1') sets out the threshold level of qualification required for entry to the Register for each of the professions we regulate. SET 1 does this by specifying types of academic awards.

In March 2018, we changed SET 1 for a profession for the first time; the education threshold for paramedics was increased from equivalent to Certificate of Higher Education to Bachelor degree with honours, following a public consultation. For most of the professions, the level specified in SET 1 was established when the SETs were first developed and published. This was based on the level specified by the CPSM as part of its joint-validation arrangements with the professional bodies.

The current threshold for ODPs is Diploma of Higher Education (Dip HE). This equates to Level 5 in the Framework for Higher Education Qualifications (England, Wales and Northern Ireland) and Level 8 in the Scottish Credit and Qualifications Framework.

Increasing the threshold for SET1 for ODPs is not a new matter. A 2014 paper to the HCPC's Education and Training Committee considered SET1 for ODPs and paramedics. At that stage, the SET1 for ODP was not considered for change as very few of the programmes were being offered at the level of BSc.

## **Provision in Scotland**

As mentioned in previous governance papers, the standout issue in this process is the provision of ODP education in Scotland.

ODP education in Scotland was previously provided by Glasgow Caledonian University at the BSc level, with its first intake in September 2012. GCU announced that they would have their final intake in 2017 citing various reasons including the university's interest in focusing on research and ensuring academic coherence among its programmes.

Provision of ODP education went out on tender and the University of West Scotland was selected but only on Diploma level. The UWS has a five-year SLA to train ODPs for the Scottish NHS and begun the second year of the SLA in academic year 2020/21. This would mean the last cohort of Diploma level ODPs would graduate in 2025.

UWS is the only provider of ODP education in Scotland. The SLA guarantees between 57-65 graduates a year and the students are directly employed at NHS Band 7 by health boards in Scotland while they study. As there are no tuition fees in Scotland, the funding for this comes directly from the health boards themselves and is supplemented by grants from the Scottish Government.

## **Stakeholder engagement to date**

Following on from our survey with education providers in May, we have had numerous discussions with stakeholders, with a special focus on stakeholders based in (or whose work focuses on) Scotland.

We have spoken to the College of ODPs, Association for Perioperative Practice, University of Cardiff, NHS Scotland and College of Deans of Health. Sonya Lam (in her capacity as a Council member) has spoken to representatives of NHS Education Scotland and been in email contact with a representative of the Scottish government.

The Scottish government representative noted the discussion the HCPC was having around SET 1 but still had to consult internally before responding.

## **Support for increasing threshold**

### ***In England and Wales***

While support for increasing the threshold is complicated by provision in Scotland, it should be noted that the vast majority of respondents in England and Wales are in favour of the move.

Almost all providers in England and Wales (there are no providers in Northern Ireland) are very supportive of the move to BSc Honours. The single provider in Wales (the University of Cardiff) already provides at BSc only (having previously offered Dip HE) and its programme enjoys wide support from the NHS in Wales and the Welsh government.

HEIs in England support the move to BSc and are concerned that failing to increase the standard runs the risk of losing existing capacity to provide BSc Hons provision

as Diploma courses undercut longer and more expensive courses. One education provider responding to our survey noted: “[the] variance in levels / approaches created an unsustainable open market approach / competition between education providers and unclear service workforce strategies.”

### ***In Scotland***

There is support for the status quo in Scotland, this is partly due to workforce pressures on health boards in Scotland and the need for more ODPs to enter the workforce. While the UWS’s provision of Dip HE only is likely to be phased out in the future, this move is not yet planned for.

### ***From professional bodies***

The professional bodies (CODP and AfPP) are understandably in favour of the increase in threshold and have been calling for this for some time. The key reasons for the support include:

- The continued growth of the profession requires ODPs to learn the kind of research and analysis skills which are not available at Diploma level.
- BSc includes various skills such as leadership, intravenous drug administration, venepuncture and all gender catheterisation not included in the DipHE.
- The role of ODPs has evolved quickly and in England in particular, ODPs are being asked to work in complicated settings and practise many different skills. There is a concern that without increasing the education standard, the Diploma will not equip ODPs for the work that will be expected of them.
- These skills are reflected in the upcoming revised SOPs so a lower threshold could hold back potential ODPs learning and exercising skills now being put into use in England.
- In 2011, the CODP’s own curriculum set the threshold BSc (Hons) degree level in England, Wales and Northern Ireland and non-honours degree level provision in Scotland.

## **Significant issues going forward**

### ***Scottish workforce***

There are comparatively few ODPs working in Scotland (despite its smaller population, there are more ODPs registered in Wales than in Scotland). We will have to carefully consider how increasing SET 1 could impact on the provision of ODP education in Scotland and what support UWS may require in making the transition. Another possibility is UWS declining to offer a BSc programme which would require the provision to go out to tender for a new provider, who we would also need to be support.

### ***Funding***

We will have to carefully work on the issue of affordability for Scottish health boards and the Scottish government (who are ultimately responsible for the costs of longer programmes).

### ***Implementation period***

This issue has been ongoing for several years and prolonging uncertainty can be damaging for the provision of the ODP courses across the UK.

A further long delay is also not desirable given the arguments of the HCPC, professional bodies and others that the provision of ODP education at Dip HE level is not in keeping with the increasingly complex tasks an ODP undertakes.

### ***Interests of ODPs***

While we have only had limited engagement with ODPs during this pre-consultation window, we are confident that there is support for this move from professionals.

While workforce and other considerations in Scotland are significant, it is important that the concerns of ODPs are taken into account, especially their concerns about the professional development of their profession and their career progression. The fact that Scottish ODP education was tendered out at Dip HE level also means that, where ODPs who are practicing in Scotland have attained higher qualifications, the ability for health boards in Scotland to make use of those skills is currently limited.

### ***Next steps***

We are preparing for the launch of the consultation on January 25<sup>th</sup> which will run to April 26<sup>th</sup>.

We will work with colleagues in our Communications team to ensure that the rollout of the consultation reaches key groups we are trying to target and that our messaging on the issue is clearly delivered.

We are confident that the response to the consultation will provide us with the information we need to decide on the right time and implementation of the increased threshold for ODP SET 1.

We are also aware that the discussions going forward are likely to be politically sensitive. To this end, we have briefed John Barwick and Jacqueline Ladds on further direct engagement with the Scottish government and other high-level stakeholders in Scotland.

## Profile of pre registration operating department practitioner programmes

Figures correct as 0.01.2020

**Table 1** All open approved programmes by type of award

Type of award	Number of programmes	
Bachelors	1	2
Bachelors with Honours		77
Diploma of Higher Education		21
<b>Total</b>	4	

**Table** All approved programmes by level of award<sup>1</sup>

Level of award	Number of programmes	
Level 6/ /10	4	7
Level 5/8		21
<b>Total</b>	4	

**Table** All approved programmes by type of award and country

Type of award	England	Scotland	Wales	N
Bachelors	1	0	0	0
Bachelors with Honours	2	0	1	0
Diploma of Higher Education	8	1	0	0
<b>Total</b>	41	1	1	0

**Table** Summary of proposed new programmes by type of award

Type of award	Number of programmes	
Bachelors with Honours	7	100
Bachelors	0	0
Diploma of Higher Education	0	0
<b>Total</b>	7	

All proposed programmes are in England

**Table** Summary of provision by provider and level

Type of award	Number of providers	
Level 6 provision only	18	6
Level 5 provision only		12
Mixture of level 6 and 5 provision	5	1
<b>Total</b>	26	

<sup>1</sup> Levels are from the Framework for Higher Education Qualifications and then after '/' the Scottish Credit and Qualifications Framework. Level 4/7 includes Certificates of Higher Education; Level 5/8 Diplomas of Higher Education and Foundation degrees; level 6/ /10 Bachelor's degrees.

**Consultation on the revised threshold level of qualification for entry to the register SET 1 for Operating Department Practitioners**  
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# 1 Introduction

## about this consultation

- 1.1 This consultation seeks the views of stakeholders on a revised threshold level of qualification for entry to the Register (SET 1) for Operating Department Practitioners (ODPs).
- 1.2 This document explains the current level for SET 1 for ODPs as well as the process for assessing the threshold and the argument for raising it.
- 1.3 The consultation will be of particular interest to HCPC registrants, professionals applying to be on the register, professional bodies, employers, education providers and stakeholders, legal representatives, and service users and carers.
- 1.4 The consultation will run from 25 January 2021 to 26 April 2021

## about this document

- 1.5 This document is divided into 4 sections.
  - **Section 1** introduces the document.
  - **Section 2** provides background to the current threshold for SET 1 as well as outlining the discussions surrounding the threshold since 2014.
  - **Section 3** explains the consultation proposal and questions.
  - **Section 4** sets out the next steps following the consultation.

## about us

- 1.6 We are a regulator and were set up to protect the public. To do this, we keep a Register of professionals who meet our standards for their professional skills and behaviour. Individuals on our Register are called 'registrants', while those applying to be on the register are called 'applicants'.
- 1.7 We currently regulate 15 professions.
  - Arts therapists
  - Biomedical scientists
  - Chiropodists / podiatrists
  - Clinical scientists
  - Dietitians
  - Hearing aid dispensers
  - Occupational therapists

- Operating department practitioners
- Orthoptists
- Paramedics
- Physiotherapists
- Practitioner psychologists
- Prosthetists / orthotists
- Radiographers
- Speech and language therapists

## **Background**

### **2.1 Background for SET 1**

2.1.1 The first of the standards of education and training ('SET 1') sets out the threshold level of qualification required for entry to the Register for each of the professions we regulate. SET 1 does this by specifying types of academic awards.

2.1.2 In March 2018, we changed SET 1 for a profession for the first time; the education threshold for paramedics was increased from equivalent to Certificate of Higher Education to Bachelor degree with honours, following a public consultation.

2.1. For most of the professions, the level specified in SET 1 was established when the SETs were first developed and published. This was based on the level specified by the CPSM as part of its joint-validation arrangements with the professional bodies.

2.1.4 For most professions the level in SET 1 has therefore been uncontroversial. It simply reflected the unanimous consensus position that the professions, education providers and commissioners had reached over a number of years. However, determining the (continuing) level set out in SET 1 has been more problematic where there is variation in the awards and/or levels of existing entry level education and training, or where the level of education and training for an existing regulated profession is changing.

### **2.2 Background for SET 1 for ODPs**

2. The current threshold for ODPs is Diploma of Higher Education (Dip HE). This equates to Level 5 in the Framework for Higher Education Qualifications (England, Wales and Northern Ireland) and Level 8 in the Scottish Credit and Qualifications Framework.

- 2.4 Increasing the threshold for SET1 for ODPs is not a new matter. A 2014 paper to the HCPC's Education and Training Committee considered SET1 for ODPs and paramedics. At that stage, the SET1 for ODP was not considered for change as very few of the programmes were being offered at the level of BSc.
- 2.5 Since last reviewing the threshold for ODPs, we have continued to monitor the profile of pre-registration ODP programmes. In June 2014, only 2 of ODP programmes were delivered above the threshold (at either BSc Hons or BSc level). Since then, the percentage of programmes delivered above the threshold has steadily increased to 54 in January 2018, 77 in June 2018 and, at the time of writing, 7 (out of a total of 4 programmes, only are delivered at diploma level). Of these, three education providers have diploma level provision only and the remaining deliver mixed diploma / degree level training. All proposed new programmes will be delivered above the threshold.
- 2.6 This is now at similar levels to the number of paramedic programmes above the threshold when we first considered changing SET 1; 8 (although at the point we made the decision to take forward the consultation this had increased to 6 ). It also is significantly higher than the number of paramedic programmes at degree level when we decided to increase the threshold to degree level (4 ).<sup>1</sup>
- 2.7 Our stakeholder engagements have highlighted the increasing advanced practise within the ODP profession and the growth of their roles particularly in England. We have also seen ODPs being asked to perform a wide range of tasks during the response to CO ID-1 and have dealt with a number of enquiries from ODP registrants about their expanding scope of practise.
- 2.8 It is clear that the profession has developed, and the norm for ODP training is now at degree level. With further developments to the profession to be reflected in the SOPs, it is our view that following this there will be clear need for us to consider if SET 1 needs to be revised.
2. We are also aware that the ODP education in Scotland presents challenges which are special to that country when compared to the rest of the UK. Scotland is the only country where there is a single provider which provides at the Diploma of Higher Education only. This means that a move to increase the threshold will have implications specifically for Scotland.
- 2.10 Should the proposal to increase the threshold go forward, the HCPC would work with all stakeholders on an implementation timeframe which continues to protect service users, allows providers to manage their programmes, and allows employers to plan their workforce needs.
- 2.11 The HCPC would therefore propose increasing the threshold BSc Honours or Level 6 in the Framework for Higher Education Qualifications (England, Wales

<sup>1</sup> <https://www.hcpc-uk.org/globalassets/consultations/2017/threshold-level-for-paramedics/consultation-on-threshold-level-of-qualification-for-entry-to-the-register-for-paramedics---consultation-analysis.pdf> para 5.7

and Northern Ireland) and Level -10 in the Scottish Credit and Qualifications Framework.

## consultation questions

.1 The HCPC welcomes your response to this consultation. We have listed some consultation questions below to help you. These questions are not exhaustive, and we would also welcome your comments on any related issue. Please provide reasons alongside your answers where possible.

Q1. Do you agree that SET 1 for ODPs should be increased from diploma level degree level (that is, a move from Level 5 to Level 6 for FHEQ and from Level 8 to Level /10 for SCQF) If so, why If not, why not

Q2. If the threshold were to increase, what length of time would be needed for the implementation period

Q . If the threshold were to increase, what support do you think the HCPC should provide to:

- a. ODP professional bodies
- b. Education Providers
- c. Employers
- d. The UK government and the Devolved Administrations
- e. Any other stakeholders

Q4. Do you consider there are any aspects of our proposals that could result in equality and diversity implications for groups or individuals based on one or more of the following protected characteristics, as defined by the Equality Act 2010 and equivalent Northern Irish legislation<sup>2</sup> If yes, please explain what could be done to change this.

We would particularly be interested in any reflections on how different groups may be impacted by the removal of the Diploma Higher Education programmes and whether closing this pathway will disproportionately impact different groups.

- Age
- Disability
- Gender reassignment
- Marriage and Civil Partnership
- Pregnancy and maternity
- Race
- Religion or belief
- Sex

<sup>2</sup> <http://www.equalityni.org/Footer-Links/Legislation>

- Sexual orientation

Q5. Do you have any other comments about the SET 1 threshold for ODPs

### How to respond to the consultation

2. The consultation closes on 16 April 2021. We look forward to receiving your comments.

You can respond to this consultation in one of the following ways:

- By completing our easy-to-use online survey:

[LINK](#)

- By emailing us at: [consultation@hcpc-uk.org](mailto:consultation@hcpc-uk.org)

- By writing to us at:

Consultation on Guidance on Health and Character  
Policy and Standards Department  
The Health and Care Professions Council  
Park House  
184-186 Kennington Park Road  
London  
SE11 4BU

4. Please note, due to COVID-19, the organisation is partly working from home and so post is not checked frequently. If you are able to respond by email or online survey, we would encourage you to do so.

5. Please note that, due to COVID-19, this telephone line is not staffed. However, you will be able to leave a message for the team to review and get back to you as soon as possible.

6. Please note that we do not normally accept responses by telephone or in person. We ask that consultation responses are made in writing to ensure that we can accurately record what the respondent would like to say. However, if you are unable to respond in writing please contact us on 044 (0)20 7840 815 to discuss any reasonable adjustments which would help you to respond.

7. **Please contact us to request a copy of this document in an alternative format or in Braille**

8. If you would prefer we do not make your response public, please indicate this when you respond.

## **Next steps**

- 4.1 Once the consultation period has finished, we will analyse the responses we have received. We will then publish a document detailing the comments received and explaining the decisions we have taken as a result, including any further amendments needed. This will be available on our website.

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## Equality reflection level 1

For background information on how to complete this form, read **Appendix 1**. Delete [guidance text](#) as you complete the form. Guidance text is suggested (not required) content.

### Section 1 Project overview

<b>Project title</b> revised threshold level of qualification for entry to the register SET 1 for Operating Department Practitioners	
<b>Version</b>	<b>Previous approved versions</b>

#### What are the intended outcomes of this work

To seek the views of stakeholders on a revised threshold level of qualification for entry to the Register (SET 1) for Operating Department Practitioners (ODPs). This would increase the threshold from a Diploma of Higher Education to a BSc Honours.

#### Who will be affected

- the public, including service users and colleagues in health and care;
- registrants and potential registrants, including students or trainees;
- education and training providers, and;
- health and care providers, professional bodies and consumer groups

### Section 2 Equality information

The following are protected characteristics under the Equality Act 2010.

- **Age** children, younger and older people
- **Disability** physical and mental health conditions. Think: 'invisible disabilities'
- **Gender reassignment** includes individuals at all stages of transition
- **Race** includes nationality, citizenship, ethnic or national origins.
- **Religion or belief** religious and philosophical beliefs, including lack of belief
- **Sex** gender; men, women and non-binary identities
- **Sexual orientation** heterosexual, lesbian, gay, bi-sexual and other orientations
- **Pregnancy and maternity** people who are pregnant, expecting a baby, up to 26 weeks post-natal or breastfeeding
- **Marriage and civil partnerships** all unions, including same-sex

## Section 2 Reflective Summary

Describe any possible impacts to groups or individuals with the characteristics listed at section 2 that may arise from this work. You may also consider connected issues or characteristics such as socio-economic group, area inequality, income, resident status and other barriers to access.

### What do you consider to be the possible ED implications of this work

#### Explain how you have come to these conclusions

##### Age (includes children, young people and older people)

We believe that there will be low impact based on the characteristic of age. At writing we do not have sufficient evidence to argue that increase SET1 will have a positive or negative impact based on this characteristic.

Unfortunately, the HCPC does not keep data on the students of approved programmes. Our consultation will ask respondents to provide information about any differential impact based on age.

##### Disability (includes physical and mental health conditions. Remember 'invisible disabilities')

We believe that changes to SET 1 may have a low impact on people living with physical and mental health conditions. As a group which experiences significant discrimination in workplace settings, we are aware that any changes to the SET 1 threshold are likely to impact them.

Disability may negatively impact upon ability to access and respond to the consultation, where they have difficulties using computers or the web pages. To make the website easy to view, we have designed it in accordance with guidelines laid down by the Web Accessibility Initiative (WAI) and we strive, wherever possible, to conform to Double-A standards. Should anyone require assistance in renewing online, reasonable adjustments will be made where appropriate, in line with the HCPC's reasonable adjustments policy.

##### Sex (includes men and women)

We believe that there will be low impact based on this characteristic. We will specifically target the consultation process towards groups we want to ensure we receive feedback from. While we will encourage inputs from all stakeholders, we are particularly interested in how proposed changes to the programme will impact on men and women with caring responsibilities and whether the sex of students influences the programme they choose to study.

##### Our countries diversify

A key part of our early consultation on this work related to the impact across the four nations. While there was significant support for increasing the threshold for ODP SET1 among respondents in England, respondents in Scotland were strongly opposed.

Scotland has concerns that the increase to BSc only provision could impact negatively on its workforce planning because of the increased length of a BSc programme. The funding mechanism in Scotland also means that health boards and the Scottish Government will have

to secure the additional funding required for the longer BSc programme compared to the Dip HE programme they currently fund.

While some Scottish stakeholders have noted concerns about the negative impact of increasing the threshold, some stakeholders in England have also noted a negative impact of continuing the status quo.

HEIs have argued that allowing the Dip HE to continue has jeopardises the sustainability of their own BSc programmes and would allow some providers to 'undercut' the more expensive and rigorous BSc programme.

Professional associations (UK-wide) argue that the status quo has a negative impact for their members in England. They argue that the development of the profession, especially in England, places new challenges of ODPs and their ways of working. They feel that, without an increased and standardised minimum threshold, the further development and professionalisation of the ODP profession will be impeded.

Our consultation will ask respondents which country they are based in and this information will enable us to understand how ODPs, HEIs, employers and other stakeholders across the four nations view the increased threshold proposal. Our SMT is also engaging with representatives of the Scottish government ahead of the formal consultation process which will begin in January 2021. The purpose of this engagement is to understand the position of the Scottish government and how the HCPC and other stakeholders in Scotland can work to mitigate negative impacts of the proposed change.

We have gathered the above evidence by engaging with various stakeholders including:

- Direct contact with education providers in England, Scotland and Wales (there is currently no education provider for the ODP programme in Northern Ireland).
- Council member Sonya Lam held discussions with representatives of NHS Education Scotland (NES) and this information was fed back into our document.
- representatives of the CODP and AfPP which included their representatives either based in or working on issues relating to Scotland.
- Representatives of Public Health England.
- Internal discussions with the Education team.

We also made use of a survey, responded to by the 14 education providers in England, Scotland and Wales who offer the Dip HE (this includes those who offer both the Dip HE and the BSc level). The survey included questions relating to

- the appetite for a move from Dip HE to BSc only provision.
- the estimated time it would take for providers to make this change.
- any issues (workforce or other) that education providers foresaw if they made this change.
- what support education providers would need in order to make this change.

Analysis of this short survey initially highlighted the different concerns of education providers and employers based in Scotland and those based in England and was the driver of the other early consultation work discussed above.



## Section Welsh Language Scheme

### How might this project engage our commitments under the Welsh Language Scheme

We do not believe this project will engage with our Welsh language scheme. We have invited respondents to request the consultation document in Welsh and will welcome responses in Welsh.

## Section Action plan

Summarise the key actions required to improve the project plan based on any gaps, challenges and opportunities you have identified through this reflection.

In developing your action plan, consider:

- **How will the project eliminate discrimination harassment and victimisation**
- **How will the project advance equality of opportunity**
- **How will the project promote good relations between groups**
- **How will you monitor equality impacts arising from this work going forwards**

## Summary of action plan

- Promote ability to request alternative formats of consultation and HCPC to make reasonable adjustments
- EDI and proportionality questions in the consultation
- Review the EIA following consultation feedback
- Work with communications team to target key groups who have experience in the areas we want more information in. For example, we would like to understand how the current ODP education provision is being used by mature students and students with caring responsibilities.
- EDI section in consultation analysis

Our consultation will ask respondents which country they are based in and we hope that this information will enable us to understand how ODPs, HEIs, employers and other stakeholders across the four nations view the increased threshold proposal. Our SMT is also engaging with representatives of the Scottish government ahead of the formal consultation process which will begin in January 2021. The purpose of this engagement is to understand the position of the Scottish government and how the HCPC and other stakeholders in Scotland can work to mitigate negative impacts of the proposed change.

Engagement with wide range of stakeholders (including service user groups) and on a range of formats (not just social media and the website). While it is uncertain what level of CO ID-1 restrictions will be in place across the UK during the consultation period, we will be engaging stakeholders using tools such as Zoom as well as more traditional methods where possible.

**You may choose to use the action plan template in the EDI Impact Assessment document for new or major projects or policies to develop specific action points**



EDI should be an ongoing consideration throughout any project.

Where EDI issues are raised after this reflection and action plan have been agreed, you should make a note and update this document if necessary.

**Any project identified as unlawful discriminator must not be progressed**

<b>Reflection completed by</b>	<b>Date</b>
<b>Reflection approved by</b>	<b>Date</b>

## Appendix 1 How to complete this form

This form is intended for use in **minor or updating** projects. It is designed to consider the protected characteristics set out in the Equality Act 2010. It is therefore important that you complete every section of the form.

You should consider and document **positive and negative** impacts which might result from the proposed project. Impacts might be **indirect**. If you consider that there will be **no impact** to groups or individuals with a particular protected characteristic, this **should still be documented**.

The EDI reflection is not intended as a 'tick box' exercise. Instead, it offers a tool to help you embed equality, diversity and inclusion throughout your work planning and delivery. We encourage you to consult with colleagues, stakeholders and where possible, people with protected characteristics as part of this process.

For more guidance and information, please refer to the **Equality impact assessment guidance** document.

Should you have any queries or suggestions, please contact the Policy and Standards team on 0207 840 815 or [policy@hcpc-uk.org](mailto:policy@hcpc-uk.org). Our EDI Manager is Katherine Timms.