

- 1 -

# **Health Professions Council's Strategic Intent**

**Park House, 184 Kennington Park Road, London, 2nd  
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- 2 -

## **Contents**

**I. Foreword**

**II. Purpose of HPC**

**III. The working of the HPC**

**IV. Function of the HPC**

**V. Structure of the HPC**

**VI. Development of the HPC**

- 3 -

## **Foreword**

- 4 -

**The Health Professions Council (HPC)** is a new regulatory body which, from 1st April 2002, will replace the Council for Professions Supplementary to Medicine (CPSM) and its 12 Boards. The Government's aim in making this change was to create a health care Regulator that had new functions, new structures and a new way of working in keeping with the modern needs of the public, patients, professionals and the health and social services

In order to prepare for this role:

- **A Shadow Health Professions Council (SHPC)** of 25 members, with a similar composition to the HPC, was set up (1<sup>st</sup> May 2001)
- **A Registrar and Chief Executive Designate** was appointed (1<sup>st</sup> November 2001).

The SHPC has during this time:

- Put in place arrangements to enable the HPC to take on its responsibilities on 1<sup>st</sup> April 2002
- Agreed how the functions of the CPSM will be continued during the first transition period (April 2002 – March 2003)

This document has been produced by the HPC to describe in brief the HPC, its purpose,

approach, composition and future plans

During the next twelve months the Council will develop this further into a more detailed strategy to be published in April 2003

- 5 -

## **II. Purpose of the HPC**

- 6 -

**The Health Professions Council is an independent health care Regulator whose purpose is to promote and safeguard the health and well-being of people\* using or needing the services of its registered health professionals\*\*. The Council will do this by:**

1. Maintaining and publishing a register of properly qualified members of the professions
2. Approving and upholding high standards of education and training and continuing good practice
3. Investigating complaints and taking appropriate action
4. Working in partnership with the public, and a range of other groups including professional bodies
5. Promoting awareness and understanding of the aims of the HPC

\* Hereafter referred to as patients/clients

\*\* Arts Therapists, Chiropodists, Clinical Scientists, Dietitians, Medical Laboratory Scientific Officers, Occupational Therapists, Orthoptists, Paramedics, Physiotherapists, Prosthetists & Orthotists, Radiographers, Speech & Language Therapists

- 7 -

### **III. The Working of the HPC**

- 8 -

**1. Transparency – the Council will**

- Have wide public and patients/clients representation
- Have fast and transparent procedures
- Consult on and then publish any standards it establishes or general guidance it gives

**2. Communication and Responsiveness – the Council will**

- Develop meaningful accountability to the public and health and social services
- Inform and educate the public and registrants \* about its work
- Collaborate with and consult key stakeholders
- Treat the health and welfare of patients/clients as paramount

**3. Value for Money and Audit – the Council will**

- Provide a value for money service for its registrants and the public
- Be open and proactive in accounting to the public and professions for its work

\* Registrants are individuals from the health professions who are on the HPC register



**4. Protecting the Public – the Council will**

- Have wide powers to deal effectively with individuals who pose an unacceptable risk to patients/clients

- Have clear and well published complaints and appeals procedures whereby the public or registrants dissatisfied by Council rulings can respond

**5. Working Collaboratively – the Council will**

- Enable best practice in any one profession to be accessed by all
- Providing a unified service where issues are common and focus individual activity on issues

which are significantly different between professions

- Work with other regulators and professional bodies to safeguard the interests of patients/clients

**6. Providing a High Quality Service – the Council will**

- Ensure that its user needs are met, namely the public, patients, health professionals and the health and social services

- Seek regular feedback from its users and utilise the information and opinion it receives

- Support personnel training and development of its own staff as well as registrants

- 10 -

**In practice this will mean:**

▪ **Publishing an Annual Report, including statistics detailing the efficiency and effectiveness of the arrangements the HPC has put in place for the protection of the public, together with the Council observations on these**

• **Implementing quality standards to protect both users and staff**

– ISO9001 accreditation

– Investor In People accreditation

– Crystal Mark accreditation

• **Making efficient use of all resources, including staff and maintaining an effective information system**

• **Developing a Human Resources Strategy which will address:**

– Recruitment and retention of HPC staff

– Training and development of HPC staff

– Equal opportunities

- 11 -

**In practice this will mean (contd)**

**• Developing an openness and transparency policy which will address:**

- Functions of all committees
- Appointment of all Council members and advisors
- All business processes

**• Developing a communication strategy which will:**

- Inform the Public and Registrants about its work
- Involve public and patients/clients in decision making
- Consult regularly with the public, patients/clients and registrants
- Ensure equitable access to all of HPC's external publications

**• Developing, monitoring and reporting on performance standards**

**• Developing and publishing a robust budget that balances service levels and costs**

- 12 -

#### **IV. Function of the HPC**

- 13 -

**The HPC will set and monitor Standards of professional education, training, performance and conduct for members of the relevant professions and ensure that these standards are met in three key areas:**

**Firstly, in relation to Registration the Council will**

- Establish and maintain a register of qualified members of the relevant professions which it will make available for inspection by the public
- Establish the standard of proficiency necessary to be admitted to the register
- Deal with applications for registration, renewal and re-admittance to the register and provide a certificate of registration to all registrants
- Remove from the Register any Registrant that has breached its Code of Conduct

**A professional will qualify for registration if**

- They have an approved qualification awarded in the UK
- They are a non-UK trained applicant whose qualifications and experience has been found to be equivalent to that of a newly qualified UK graduate
- They hold another qualification which has been validated by the Council

- 14 -

**The Council will also**

- Provide procedures by which a professional who has practised to a satisfactory standard for a number of years but does not have an approved qualification may meet the requirements for registration
- Define the characteristics of those professions which it will regulate and extend regulation to new professional groups
- Determine which professional titles only registrants will hold. This will enable the public to identify which professionals are registered and thus those which they can rely on to offer them a high standard of care

- 15 -

**The HPC will set and monitor Standards of professional education, training, performance and conduct for members of the relevant professions and ensure that these standards are met in three key areas, (contd)**

**Secondly, in relation to Fitness to Practise the Council will**

- Establish and keep under review standards of conduct, performance and ethics expected of registrants
- Establish and keep under review effective arrangements to protect the public from professionals whose fitness to practise is impaired by reason of misconduct, lack of competence or ill health

- 16 -

**The HPC will set and monitor Standards of professional education, training, performance and conduct for members of the relevant professions and ensure that these standards are met in three key areas, (contd)**

**Thirdly, in relation to Education and Training the Council will**

- Establish standards of education and training necessary for admission to the register
- Make arrangement to ensure these standards are met
- Approve qualifications, courses and institutions which meet the required standards

**The Council will also**

- Link continued registration to the demonstration of continued competence as evidence of Continuous Professional Development (CPD) in a post-registration scheme of education and training
- Require a person who has not practised for a fixed period of time to undertake additional training before returning to practice
- Liase with educational and training providers in performing these functions



- 17 -

## **V. Structure of the HPC**

- 18 –

### **The Nature of the Council**

- It comprises members drawn from Registrant and lay fields
- All professions regulated by the Council are represented on it
- The proportion of lay to professional members is such that Registrant professionals will always outnumber lay members by one
- Registrant members of the Council are professionals who continue to practise, teach or manage in their profession
- A least one member of the Council will be appointed from each of the four countries of the UK
- Each council member will have a four year tenure and a quarter of the council will be re-elected each year

- 19 -

### **Composition of Council**

- 12 Registrant members (elected by the professions)
- 11 lay members (appointed by the Privy Council)
- 12 alternate Registrant members who attend instead of Registrant members when they are absent
- A president elected by Council members from one of their number

The Council will develop and publish the process by which members will be elected as part of the Consultation process

- 20 -

## **The Council is required to have four Statutory Committees**

### ▪ Three Fitness to Practice Committees

– Investigation

– Conduct and Competence

– Health

### ▪ The Education and Training Committee

• The chairman of each of the statutory committees must be a member of the Council and each

Committee will have at least one lay member

• The Council will investigate when an allegation is made that a registrant's fitness to practise is

impaired. Panels of the practice committees when considering allegations in relation to fitness to

practise will consist of both lay and registrant members

• The Council can also investigate whether an entry on the register has been made fraudulently or

incorrectly and the Investigation Committee will take action if this has occurred

## **The functions of the Statutory Committees**

### **1. The Investigating Committee**

This Committee &/or an appropriately qualified “Screeners” first look at an allegation and determine if there is a case to answer. If this is so then the matter is considered by the Conduct and Competence Committee or Health Committee, except in the case of fraudulent entry

### **2. The Conduct and Competence Committee**

This Committee advises the Council on:

- What constitutes appropriate conduct, performance and ethics of registrants and prospective registrants
- The requirements of good character and good health to be met by registrants
- Cases where these standards are alleged to have been breached by a registrant

### **3. The Health Committee**

This committee advises the Council when an allegation is made that a registrant is unfit to practise due to physical or mental ill health

## **The functions of the Statutory Committees, (contd)**

### **4. Education and Training Committee**

This Committee advises the Council on:

- Establishing standards of proficiency
- Establishing standards and requirements in respect of education and training for both registration and CPD

The Committee will:

- Inform Higher Education Institutions of standards and requirements for registration and CPD
- Ensure that these institutions meet these requirements by approving
  - Training courses
  - Institutions which can deliver approved training
  - Training and experience which would lead to approved qualifications

It will do this by a variety of means including the use of appropriately qualified visitors to make assessments of the above

**The Council also has the capacity to establish other Non-Statutory Committees as it sees fit to discharge its functions. At present it has the following Non-Statutory Committees**

- **Finance and Resources Committee**
  - Responsible for monitoring the budget of the HPC
- **Audit Committee**
- **Communications Committee**
  - Responsible for development and monitoring the Council's communications strategy
- **Registration Committee**
  - A sub-committee of the Education and Training Committee
  - Responsible for advising that committee on matters relating to registration

- 24 -

## **VI. Development of the HPC**



- 25 -

**The HPC will during the First Transition period (April 2002 – March 2003)**

▪ **At the start of the First Transition period transfer to the HPC**

– Staff employed by the CPSM

– CPSM's assets and liabilities

▪ **During the First transitional Period**

– Ensure that the professions continue to be regulated by exercising the functions of the Council at CPSM and Boards, with modifications as necessary. This will continue until such time that relevant orders and legislation relating to the HPC come into force, which is assumed will not be later than April 2003

– Secure funding from the Department of Health, as appropriate, to ensure that the new HPC processes can be developed without compromising the Council's ability to run the existing CPSM processes

– Consult widely on these Processes, Rules and Standards and the strategic issues

– Develop Processes, Rules and Standards to run the HPC and address the eight strategic issues listed on the next two pages

**The HPC will resolve the following eight strategic issues by conducting a UK wide Public consultation Process**

**1. Common Title**

Define which professional titles will be included on the register

**2. New Registrant Professions**

Define the characteristics of those professions which it will regulate and extend regulation to new professional groups

**3. Grandfathering**

This is a process by which members who have practised at an appropriate standard for a period of time, but do not have an approved (registered) qualification can seek to be admitted to the register.

The HPC will define the process by which this occurs

**4. The Unregulated Sector**

The Council will identify those groups of professionals previously using a title to be protected and who will remain unregulated as a result of the preservation of the relevant common title and put in place processes to address any ensuing issues

**The HPC will resolve the following eight strategic issues by conducting a UK wide Public consultation Process, (contd)**

**5. Continuing Professional Development, (CPD)**

In the past registration of professionals with the CPSM has not required any specific commitment to CPD. The Council will develop processes and rules to ensure that in the future all registrants undertake CPD

**6. Professional advice and input**

The Council will identify the means by which it will gain access to advice on profession-specific issues, including the screening of complaints cases and visiting educational institutions. The Council will also identify the selection process for individuals to provide such advice and the process and rules to be implemented in the case of screening and visiting

**7. Processes**

Establish the processes that the HPC will use, including the role and function of Screeners, Assessors and Mediators and their likely costs

**8. Charitable Status**

The Council will investigate the implications of obtaining charitable status



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