

Scoring new professions -- SST: Overview

Part	Number	Criteria	Score	Comments
A		At least 1 of invasive procedures, clinical intervention with potential for harm, exercise of judgement by unsupervised professionals	Met	The profession meets the criteria: exercising professional judgment by unsupervised professionals and clinical intervention with a potential for harm.
B	1	Discrete area of activity displaying some homogeneity	Partly met	The extent to which their activity is already regulated by the HPC and other bodies needs to be considered.
B	2	Defined body of knowledge	Met	The profession has defined the body of knowledge in documents but the question of overlap with other practitioners remains to be resolved.
B	3	Evidence of efficacy	Partly met	The practice of the applicant occupation is evidence-based but how are the outcomes measured?
B	4	At least 1 established professional body a/c for significant proportion of occupation	Partly met	The SST was established in 1990.
B	5	Voluntary register(s)	Failed to meet	No indication as to when the voluntary register was established.
B	6	Defined routes of entry to the profession	Partly met	There are defined routes of entry to the profession.
B	7	Independently assessed entry qualifications	Partly met	This exists for the academic qualifications.
B	8	Conduct, performance and ethics standards	Met	These standards are in place.
B	9	Disciplinary procedures to enforce those standards	Met	SST has a formal disciplinary and appeals procedure in place.
B	10	Commitment to continuous professional development (CPD)	Met	There is good evidence of commitment to CPD.
		The applicant occupation presents a moderate case for regulation. The shortfalls identified may be due to lack of understanding as to the documentary evidence which should have been submitted to support the Society's application and stated claims. The recommendation is that the applicant occupation should be regulated but Council must determine whether this application might well have been strengthened by means of a joint application from other similar professions within this field . Similarly, even though the profession shares a scope of practice with physiotherapists, the Council will need to satisfy itself that the body of knowledge is distinctly its own and the scope of practice is unique to this profession. There are several letters of support from Members of Parliament, a professional body, the British Association of Sports & Exercise Medicine, a number of football clubs, NHS Trusts and a number of athletes, sportsmen, and user groups. The Council will need to request from the Society whether the views of other professional bodies such as the Chartered Society of Physiotherapists (CSP), the British Association of Sports Rehabilitators & Trainers (BASRaT) and the Sports Massage Association (SMA)		
	Overall			

Scoring new professions -- SST: A

CRITERIA: <i>Either invasive procedures or clinical intervention with the potential for harm or exercise of judgment by unsupervised professionals which can substantially impact on patient health or welfare</i>	SCORE: Met
Summary comments (10 words max.)	
The profession meets the criteria: exercising professional judgment by unsupervised professionals and clinical intervention with a potential for harm.	
Detailed comments	
Sports Therapists exercise professional judgment by unsupervised practitioners.	
The majority of Sports therapists are employed in healthcare, gyms and fitness centres and in private practice.	
The practitioner may work autonomously or in private practice.	
Some examples of clinical intervention include: performing CPR, first aid, manual therapy, remedial massage and electrotherapy.	
Some examples of exercising judgement include: decision making relating to first aid, CPR and spinal conditions.	
Questions to be asked by Council and comments:	
Does the practitioner have full responsibility for any diagnosis made or is diagnosis made in conjunction with another healthcare practitioner?	

Scoring new professions -- SST: 1

CRITERIA:	SCORE:
<i>Discrete area of activity displaying some homogeneity</i>	Partly met
Summary comments (10 words max.)	
The extent to which their activity is already regulated by the HPC and other bodies needs to be considered.	
Detailed comments	
Sports therapists clearly undertake work that falls within a discrete area of activity, i.e. sports and exercise. There is a substantive overlap between the work undertaken by sports therapists and the work undertaken by professions regulated by the HPC such as physiotherapists or perhaps to a lesser extent, occupational therapists. It may be possible for physiotherapists to also work solely within sports therapy. The SST has failed to address which practices amongst the scope of practices listed are the sole preserve of sports therapists.	
Questions to be asked by Council and comments:	
Is there any overlap with professions regulated by other bodies such as osteopaths and chiropractors? It may be that some of these functions can be carried out by a physiotherapist with an extended scope of practice as well.	
To what extent is the work of a sports therapists distinct to that of a sports rehabilitator or a sports massage therapist? The extent of overlap with currently regulated professions will need to be determined by the Council. The SST submits that no other profession undertakes all aspects of the sports therapists role. It will be important, for example, to understand the extent to which the work of sports therapists are separate from the work of physiotherapists or other related sports practitioners or osteopaths.	
It may be that these are very different roles, but advice may need to be sought from the Society.	
Does the practitioner use problem solving skills to determine appropriate action?	
In what profession specific areas would the Standards of Proficiency for a sports therapist differ from that of a physiotherapist?	

Scoring new professions -- SST: 3

CRITERIA: <i>Evidence of efficacy</i>	SCORE: Partly met
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Summary comments (10 words max.)
The practice of the applicant occupation is evidence-based but how are the outcomes measured?

Detailed comments
Evidence was submitted of evidence based improvements (as opposed to initiation of evidence based practice). Documentary evidence was submitted of research undertaken and published in journals such as the British Journal of Sports Medicine. References were submitted of involvement by Society members presenting evidence of research into sports therapy practice in national and European journals and at international conferences/symposia. Examples of extracts were also submitted. The Society submitted in evidence, European Resuscitation Council Guidelines 2005 for resuscitation and a number of extracts but did not indicate what was unique to the sports therapist that had influenced changes in treatment strategies in these areas of activity. No evidence of measurable outcome-based practice.

Questions to be asked by Council and comments:
Not clear as to the autonomy that a sports therapist would have in the implementation of evidence based practice. It may be that this must be overseen by a registered practitioner.
Is SST involved in expert groups to develop new ways of working, roles and practice? If so, with whom does it have a collaborative relationship?

The professional body should be asked to provide explicit data/description as to how the profession measures outcomes of practice.

Scoring new professions -- SST: 4

CRITERIA:	SCORE:
At least 1 established professional body a/c for significant proportion of occupation	Partly met
Summary comments (10 words max.)	
The SST was established in 1990.	
Detailed comments	
The SST was established in 1990. SST was incorporated in August 2002 as a Company Limited by Guarantee. The aims of SST are:-	
(i) to provide a professional body for sports therapists	
(ii) to validate educational qualifications and use these as a basis for membership with the Society	
(iii) to accredit vocational and post-registration courses	
(iv) to act as an advisory body and	
(v) to provide insurance facilities for its members (such as professional indemnity and public liability). Documentary evidence was submitted of the organisation's Memorandum & Articles of Association. There are 4 Directors of the Society including the Chairman.	
There is a Company Secretary and an appointed solicitor and auditor. SST has undertaken a wide ranging communications campaign primarily via newsletter & the SST website to members regarding the proposals and consequences of statutory regulation. Members are able to submit comments via the website on their views on regulation.	
Questions to be asked by Council and comments:	
No documentary evidence was submitted of a recent ballot of members regarding the issue of seeking statutory regulation.	
There is evidence submitted of a newsletter sent to members in September 2005 informing them of the Society's intention to seek statutory regulation.	
No evidence submitted as to work undertaken from amongst the wider profession to gauge the attitude to the proposals to seek regulation.	
What other numbers of sports therapy practitioners are currently practising in the UK?	
What other professional bodies exist that represent sports therapy or have a section of their membership who may specialise in sports therapy?	
Are the Society's elections to the Board carried out by an external body and if so whom?	
No evidence of the views of those who are not members of the professional body in relation to regulation.	

Scoring new professions -- SST: 5

CRITERIA:	SCORE:
Voluntary register(s)	Failed to meet
Summary comments (10 words max.)	
No indication as to when the voluntary register was established.	
Detailed comments	
The number of registered SST members are: Students - 1,060 Members - 1,426 TOTAL : 2,486	
No documentary evidence was submitted that the membership figures are independently audited.	
No estimates from the Department of Health or the Department for Education & Skills as to the total number of practitioners in the UK	
No documentary evidence submitted of the percentage of the workforce to which the membership accounts for.	
Entry onto the register is via an accredited BSc (Hons) Sports Therapy from one of the SST accredited universities or colleges of higher education.	
No documentary evidence (i.e. application form, process and criteria) submitted that the Society operates a grandparenting scheme for the indicative register.	
Questions to be asked by Council and comments:	
What percentage of the total sports therapy workforce are members of the Society?	
Where did the Society gain its information/estimate at to the number of practitioners? (SST estimated that some 70,000 practitioners would be practising in 10 years time) but no documentary evidence from an external body was submitted to substantiate this claim.	
[Note: the date that the Society was established is not necessarily the date at which a voluntary register was instituted.]	

Scoring new professions -- SST: 6

CRITERIA:	SCORE:
Defined routes of entry to the profession	Partly met
Summary comments (10 words max.)	
There are defined routes of entry to the profession.	
Detailed comments	
Historically entry to the profession was via a diploma though since 1996 entry to the profession has been through a first degree. Degrees are delivered through education providers who undergo the normal quality assurance processes. In 1993 the SST explored the development of occupational standards with an external organisation but no further evidence was submitted with this application as to the progress/outcome of this project. Evidence in the Society's own literature of a "grandparenting scheme" (see (iii) below).	
Routes of entry into the profession as at November 2003:-	
(i) Graduates with a degree from an education provider with a collaborative agreement with SST are eligible for member status and insurance,	
(ii) Graduates with a degree from an education provider with a non-collaborative agreement with SST are eligible for member status without insurance though they may move to member status on completion of 25 CPD hours over a 1 year period;	
(iii) Holders of another sports therapy qualification or persons who have been working as sports therapists are eligible for member status without insurance, though they may move to member status on completion of 80 CPD hours over a 2 year period.	
Membership/Registration Procedure:	
No documentary evidence (i.e. application form, guidance notes) submitted of the membership/registration procedures.	
Other information:	
Documentary evidence was submitted of communications with members via newsletter, letter and website regarding moves to statutory regulation.	
Questions to be asked by Council and comments:	
Have National Occupational Standards been developed?	
Does the degree programme combine theory with the practice placement element and ongoing work based training? If so, who accredits the practice placement?	
Who within the Society approves applications for membership?	

Scoring new professions -- SST: 7

CRITERIA:	SCORE:
Independently assessed entry qualifications	Partly met
Summary comments (10 words max.)	
This exists for the academic qualifications.	
Detailed comments	
<p>The documentation states that 3 universities are developing in collaboration with the Society an MSc Sports Therapy for commencement in 2006/7. 10 education providers offering the BSc(Hons) Sports Therapy degree in collaboration with SST: <i>Universities</i> of London Metropolitan, Central Lancashire, Teesside, Huddersfield, Hertfordshire, Kent, University College Chichester and <i>Colleges</i> : Birmingham College of Food, Tourism and Creative Studies, Edgehill College of Higher Education and North East Sussex College of Technology.</p> <p>Entry requirements to the degree qualifications range from standard universities entry requirements or alternative qualifications* The Society has developed its own award: * Advanced Diploma in Academic & Clinical Sports Therapy.</p> <p>In relation to the degree qualifications these would be quality assured through the further education sector.</p> <p>SST appoints moderators and examiners whose role is to accredit the degree programmes which would enable a graduate to apply for membership of The Society.</p>	
Questions to be asked by Council and comments:	
Who accredits the Society's own award - Advanced Diploma in Academic & Clinical Sports Therapy ?	
No documentary evidence submitted of the accreditation process between the education provider and SST.	
There is no evidence of the SST accreditation scheme being assessed or externally verified by an independent body.	
There is no evidence of QAA Benchmark Statements in sports therapy nor a commitment to develop these in conjunction with QAA.	
Has the profession produced a Curriculum Guidance Document?*	
What does the profession propose to be the threshold entry level standard for those entering onto the HPC Register?	
(* the Society submitted examples of a mapping exercise against competencies for the degree programme)	

Scoring new professions -- SST: 8

CRITERIA:	SCORE:
<i>Conduct, performance and ethics standards</i>	Met
Summary comments (10 words max.)	
These standards are in place.	
Detailed comments	
The SST has a Code of Conduct, Performance & Ethics which was revised in 2003 and covers health, competence and conduct.	
The Code of Code of Conduct, Performance & Ethics is regularly reviewed.	
Members are advised of the need to maintain high professional standards, to keep their skills and knowledge current and to act within their scope of practice.	
The Code sets out what is required of a registered practitioner in terms of respectable behaviour, and their knowledge and understanding.	
Questions to be asked by Council and comments:	
Who reviews the Code of Performance, Conduct & Ethics?	
Does the Code also apply to Students? If so, are students given a copy of the Code at the commencement of the programme.	

Scoring new professions -- SST: 9

CRITERIA:	SCORE:
Disciplinary procedures to enforce those standards	Met
Summary comments (10 words max.)	
SST has a formal disciplinary and appeals procedure in place.	
Detailed comments	
Process of investigating a complaint: -	
A complaint is initially reviewed by the solicitor appointed by and representing the Society.	
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If there is a case to answer the matter is referred to the Chairperson of the Preliminary Hearing Board Panel.	
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The complaint is then heard by the Preliminary Hearing Board Panel comprising not less than 6 members appointed by the Executive Committee.	
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If the complaint is unresolved the matter is referred to the Preliminary Hearing Board comprising 3 members of Preliminary Hearing Board Panel.	
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If mediation by the Preliminary Hearing Board is unsuccessful then the matter of referred to the Chairperson of the Professional Conduct Board Panel.	
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The Professional Conduct Board Panel will then appoint a Professional Conduct Board comprising 3 members of the Professional Conduct Board Panel to hear the matter and carry out any further investigations that it sees fit.	
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The Professional Conduct Board will assess the complaint against the member against the Standards of Conduct, Performance and Ethics.	
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There are four options open to the Professional Conduct Board: to strike the member off the register; suspension of the member for a specified time period; order imposing conditions of membership for a specified time period; a caution with indication on the register of members as to the conditions of the caution.	
The Disciplinary and Appeals Procedure was adopted in 2004 and is available on the Society's website.	
To date only one case (still ongoing) has been heard under the new disciplinary procedure and the anonymised details were submitted in evidence.	
Members do have a right of appeal to an Appeals Board.	
There are full guidelines in place for the appeals process.	
Question to be asked by Council and comment:	
As it appears that the current system has only been in place a short while, the Society may need to provide documentary evidence or allude to it, at a subsequent meeting of HPC Council, as to the previous system used.	

Scoring new professions -- SST: 10

CRITERIA:	SCORE:
Commitment to continuous professional development (CPD)	Met
Summary comments (10 words max.)	
There is good evidence of commitment to CPD.	
Detailed comments	
It is a requirement of membership since 1996 that members are committed to undertaking CPD.	
All members receive an information leaflet on the requirements of CPD.	
Members at the point of renewal must submit their CPD portfolio with supporting evidence for the preceding 12 months.	
Each member must complete a minimum of 15 hours of relevant CPD per annum.	
The CPD portfolio is scrutinised by the Society's CPD officer.	
The SST CPD scheme is aimed at advancing the therapists body of knowledge.	
There is evidence submitted of what form CPD should take.	

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