Health Professions Council
Council 29th March 2007

TRUST, ASSURANCE AND SAFETY – THE REGULATION OF HEALTH PROFESSIONALS IN THE 21ST CENTURY

Executive Summary and Recommendations

Introduction

The White Paper 'Trust, Assurance and Safety – The Regulation of Health Professionals in the 21st Century' was published on 21st February 2007.

The White Paper makes 62 groups of recommendations. It is anticipated that the Department of Health will publish shortly an implementation timetable and legislative timetable. It is envisaged that the HPC will have to undertake a considerable amount of work to ensure that we successfully implement all the relevant recommendations in time for the anticipated review of the regulation of healthcare professionals in 2011.

To assist in this process the attached document has been prepared. It details the 62 groups of recommendations and the secondary implications in the eight chapters of the White Paper.

Decision

The Council is requested to consider recommendations of the White Paper when it meets to review HPC's Strategic Intent on 30th May 2007.

Background information
White Paper – HPC's Tasks

Resource implications
-

Financial implications
-

Appendices
None

Date of paper
19th March 2007

White Paper – HPC's Tasks

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29th March 2007

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1.10 2	25 5	**Council composition**	Parity - No registrant majority		HPC	Yes	Yes	
1.12	26		Legislative changes					
1.11	25		Consider further measures		HPC			
	25		PPI panels		HPC			
	25		Proactive stakeholder engagement		HPC			
	25		Open governance					
1.13	26		Review 2011 (only parity)					
1.22	27		GMC model membership significant step					
1.14	26	**Lay Members**	Definition	Consult				
1.19	27	**Size of Councils**	Smaller size					
4.34	66		Act as a strategic board		HPC			
4.34	66		Not to engage in operational matters		HPC			
1.20	27		Strategic not operational					
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1.20	27		Size consistent across regulators					
1.17	27	**Reporting Arrangements**	Accountable & report to UK Parliaments		HPC			
2	5		Annual report to Parliament					7 Regulators
1.17	27		Report to devolved administrations		HPC	Yes	Yes	
1.18	27	**Council Appointments**	Appointments Commission		HPC			Apps Comm
1.21	27	**Alternates**	Remove		HPC	Yes	Yes	
1.23	28	**Presidents**	Change name to Chair		HPC	Yes	Yes	
1.23	28		Review 2011	DH				

Chapter 1   <u>Governance</u>

Ref No.	Page	Issue - General	Issue - Specific	Dept Health	HPC	Rules & Standards	Consult	Other
1.27	28		Appointment criteria					
1.27	28		Chair appointed					
1.27	28		Members not nominated by Regulators		HPC			
1.26	28		Include views of all UK stakeholders	DH/Statute				
1.25	28		Extend work on best practise					
				DH Discuss				
1.28	29	**Number of regulators**	No changes for time being					
2	6		No mergers	DH				
1.28	29		Review 2011	DH				
1.28	29		Consider future of PSNI+D95 & RPSGB	DH				PSNIRPSGB
1.33	30	**Pharmacy**	Establish GPC	DH				
1.33	30		Premises inspection					GPC
1.34	30		RPSGB important role in Revalidation					RPSGB
1.36	30		**Working Party - Short term**					
2	6		Future PSNI					
1.36	30		Report end March 2007					

Ref No.	Page	Issue - General	Issue - Specific	Dept Health	HPC	Rules & Standards	Consult	Other
2.4	32	**Revalidation**	In place by 2011for all health professionals		**HPC**	Yes	Yes	9 Regulators
3	6		Revalidation **DEFINITION**		**HPC**			
2.18	34		Up to two stages					
13	8		RMRST quality assure Doctors process					
2.39	41		**UK Revalidation Steering Group**	Establish				
2.37	40		**Pilot Revalidation & Appraisal processes**					
2.37	40		**Pilot standards**					
2.35	40	**Licence to Operate**	Link to revalidation arrangements					
2.35	40		Devolved arrangements	Consider				NI/S/W
2.8	32	**Relicensure - Doctors**	Doctors only					GMC
2.9	33		Renew every 5 years					
2.9	33		NHS appraisals					
2.9	33		Specialist standards	Discuss				
2.1	33		Enhance information gathering powers					GMC
2.10	33		Implementation details	Discuss				
2.10	33		Devolved arrangements	Consider				NI/S/W
2.28	37		Failure = supervised practise					
2.16	34	**Appraisal Doctors**	Summative & formative					
2.17	34		Regular assurance of process					GMC
2.8	32	**Specialist Recertification - Dr.**	Doctors only					GMC
2.11	33							
2.18	34		At least once every 5 years@regular intervals					
2.19	34		Undertaken by Royal Medical College					GMC + RCs
2.19	34		Fees to RMC &/or GMC	Discuss				
2.19	34		GMC to assure process					GMC
2.20	35		Development funding					RCs
2.20	35		**UK Working Group**					
2.20	35		**Pilot**					
2.12	33	**National Feedback Tool - Dr**	Generic &/or specialist tool	Consult				
2.13			Communications important					
			Standardised record					

Chapter 2　　　　<u>Revalidation</u>

Ref No.	Page	Issue - General	Issue - Specific	Dept Health	HPC	Rules & Standards	Consult	Other
2.2	35		Equivalent standards					RCs
2.21	35	**Standards - Recertification**	For each specialism					RCs
2.23	35		Non-hospital standards	Discuss				
2.25	36	**Clinical Audit**	**Advisory Group**	Fund				
2.25	36		Devolved arrangements	Consider				NI/S/W
2.26	36	**Retired Doctors**	Consider register	Discuss				
2.80	32		Retired doctors to remain registered but no right to practise					GMC
2.29	37	**Non-Medical Revalidation**	Introduce	Discuss	HPC	Yes	Yes	8 Regulators
2.30	37		Establish standards		HPC	Yes	Yes	
8.00	7		PCT revalidation arrangements	Discuss	HPC			
2.33	39							
2.30	37		CHRE to support the work	Ask CHRE				
2.30	36		Establish post registration standards		HPC	Yes	Yes	
2.32	39		Process 1 - Approved Body		HPC	Yes	Yes	
2.32	39		Process 2 - NHS Commissioner or Regulator		HPC	Yes	Yes	
2.32	39		Process 3 - Regulator Alone		HPC	Yes	Yes	
2.31	37		Revalidation of non-medical specialists					
2.31	37		**Short-Term working Group**		HPC	Yes	Yes	Stakeholders
2.38	41		Timetable	Discuss				
2.34	39	**Revalidation Standards**	Appraisal central to revalidation	Discuss	HPC	Yes	Yes	
2.34	39		Formative & Summative	Discuss	HPC	Yes	Yes	
2.34	39		Use KSF Information	Discuss	HPC	Yes	Yes	
2.34	39		Use of Non KSF information justified by risk	Discuss	HPC	Yes	Yes	

Chapter 3   GMC Affiliates

Ref No.	Page	Issue - General	Issue - Specific	Dept Health	HPC	Rules & Standards	Consult	Other
3.10	45	**Local F2P investigation**	Extend to Non-medical professions	Consult	HPC	Yes	Yes	
3.11	46	Common protocol	All regulators		HPC	Yes	Yes	CHRE
3.44	56				HPC	Yes	Yes	
3.11	46	Finding of fact	To be relied on by 9 Regs		HPC			CHRE
3.16	47	**Performance lists**		Review				
3.16	47	Separate PCT lists	Regulatory burden	Consider				
3.31	52	**GMC Affiliates**	Establish network in England only	Bill				
2.1	33		Submit information to Affiliate					GMC
12	8		Appointed by & accountable to GMC					GMC
12	8		Regional medical regulation support teams					GMC
3.31	52	Pilot	Before full scale role out	**Pilot**				
3.31	52	Implementation		Bill				
3.32	52	Extend to NI,S & W	Post Pilot	Consider				
3.33	52	Registrant & Lay affiliates	Appoint					GMC (?)
3.33	53	Random sampling						GMC (?)
3.33	53	Publish annual report						GMC (?)
3.34	53	Avoid duplication of effort		Discuss				GMC/NCAS
3.35	53	**Medical Director**	Doctors to report to MD England only					
14	8		Doctors to relate to medical directors					GMC
3.36	53	Medical Director	Oversee revalidation processes	Discuss				
3.37	54	Arrangements in NI,S & W	Devolved administrations	Consider				
3.37	54	Establish competences of MD		**Project**				
3.38	54	PCT - England only	Establish similar role as MD	Discuss				PCTs
3.45	56	**Recorded Concerns**	Conduct or practice	Discuss				
3.46	56		Devolved administration	Discuss				NI,S & W
3.42	55	GMC to establish Committee	Review & Sample					GMC
3.43	55	Register	Removing & publication	Discuss				GMC
3.44	56	Establish procedures						GMC
3.46	56	Establish Pilot	Practical Implementation	**Pilot**				

Chapter 3   **GMC Affiliates**

Ref No.	Page	Issue - General	Issue - Specific	Dept Health	HPC	Rules & Standards	Consult	Other
3.48	57	**Locums**	More effective system of registering & Inspecting agencies	Consider				
3.48	57		Exit reports	Consider				
3.48	57	Devolve administrations	Consider	Consider				NI,S & W

Ref No.	Page	Issue - General	Issue - Specific	Dept Health	HPC	Rules & Standards	Consult	Other
4.1	59	**Standards of Proof**	General principle					3 Regulators
4.8	60		Civil, sliding scale					
		Investigation						
4.14	62		Shipman recommendations in F2P process	Consult	HPC			9 Regulators
4.14	62		Extend investigation powers to HC & HSO					HC & HSO
4.15	62		Additional safeguards	Discuss				
4.15	62		Possible MOU	Consider				
4.16	62		CHRE review a sample of cases		HPC			
4.16	62		Review CHRE powers	DH				
4.16	62		CHRE annual report to Parliament	To ask CHRE	HPC			
4.17	63		Common protocol for investigation	To ask CHRE	HPC			
4.17	63		Guidance for referral	To ask CHRE	HPC			
4.18	63	**Clinical Assessment**	GMC & GDC to use NCAS					NCAS
4.18	63		Criteria for referral	DH				
4.19	63		Extend NCAS scope other professions	DH to work	HPC			7 Regulators
4.20	63		Handling concern of professionals		HPC			
4.22	64	**Rehabilitation & Support**	GMC & NCAS to work together					
4.23	64		Employers expected to work GMC & others					
4.25	65		Cost	Discuss				
4.28	65		**National Advisory Group**	Establish	HPC			Stakeholders
19	9		Task details					
4.29	66		Consider piloting					
4.31	66		Devolved arrangements	Consider				NI/S/W
4.34	66	**Adjudication**	Council members not to sit on F2P panels		HPC	Yes	Yes	
4.36	67		GMC remove adjudication function					
4.36	67		Establish **Independent Body** for Doctors					New Co
4.36	67		GMC right of appeal to High Court & CoS					
4.37	67		**Independent Body** F2P panellists list		HPC	Yes	Yes	
4.37	67		Appointments Commission to recruit		HPC	Yes	Yes	
4.37	67		May consider GMC model		HPC			8 Regulators

Ref No.	Page	Issue - General	Issue - Specific	Dept Health	HPC	Rules & Standards	Consult	Other
4.38	68	**Equality & Diversity**	Regulators to report annually to Parliament		HPC Yes	Yes		9 Regulators
			Provide relevant information		HPC Yes	Yes		9 Regulators
			Analyse trends in ethnicity in F2P cases		HPC Yes	Yes		9 Regulators
			Action taken to ensure fairness		HPC Yes	Yes		9 Regulators

Ref No.	Page	Issue - General	Issue - Specific	Dept Health	HPC	Rules & Standards Consult	Other
5.3	69	**Education standards assurance**	Regulators to continue to be responsible		**HPC**		
	69		Collaborate with Skills for Health		**HPC**		
5.8	70	**PMETB**	No structural changes				
5.9	70		No structural changes				
	70	GMC	Establish Undergraduate board	Work with GMC			
	70	GMC	Establish CPD board	Work with GMC			
5.10		**GMC education committee**	Membership/composition becomes statutory committee	Review			GMC
23	10		Principle of 3 boards				
23	10		Undergraduates Board	Work with GMC			GMC
5.11	71	**Post graduate education**	Consider integration	Review 2011			
5.12	71	**CPD**	Establish GMC board	Work			GMC
23	10						
			Consult	Ask GMC			GMC
5.19	73	**Selective language testing**	Develop arrangements with NHS employers	Ask	**HPC**		9 Regulators
	73		Standard test				
5.21	73	Independent providers	Testing of language	Request			
	73	Home countries	Testing of language	Consider			E/NI/S/W

Ref No.	Page	Issue - General	Issue - Specific	Dept Health	HPC	Rules & Standards	Consult	Other
6.3	75	**Good Character**	Single approach	Ask CHRE	**HPC**	Yes	Yes	CHRE
26	10		single standard definition					
6.3	75	**Promote information sharing**	Across Europe					
6.4	76	**Entry to employment**	Harmonise & simplify	Ask CHRE	**HPC**			
			Complete by April 2008		**HPC**			CHRE
6.6	76	**Student/Trainee Registration**	Regulators to report back with proposals	Ask CHRE	**HPC**			9 Regulators
6.7	76		Complete by January 2008		**HPC**			CHRE
28	10		Risk based approach		**HPC**			
6.5	76		Record qualifications		**HPC**			
6.8	77	**Medical register**	Change GMC register	Review				
6.10	78		Develop register	Ask GMC/BMA				
6.10	78		Performance lists					
6.1	78		Tiered approach					
6.11	78	**Post Registration qualifications**	Record on register	Ask regulators	**HPC**			8 Regulators
			What to register		**HPC**			
	78		Consider other changes to the register	Ask regulators	**HPC**			
6.15	79	**Information Sharing**	Draw up Protocol	DH	**HPC**			9 Regulators

Ref No.	Page	Issue - General	Issue - Specific	Dept Health	HPC	Rules & Standards	Consult	Other
7.1	81	**Regulate existing professions**	General principle		HPC	Yes	Yes	
7.2	81	Regulate existing professions	Applied Psychologists	Section 60	HPC	SoP E&T	Yes	
31	11		Healthcare Scientists (several groups)	Section 60	HPC	SoP E&T	Yes	
			Psychotherapists	Section 60	HPC	SoP E&T	Yes	
			Counsellors	Section 60	HPC	SoP E&T	Yes	
			Other Psychological Therapists	Section 60	HPC	SoP E&T	Yes	
None	81	**Regulation CAM**	Acupuncture	Consider report	HPC	SoP E&T(?)	Yes **(?)**	Pittilo
			Herbal Medicine	Consider report	HPC	SoP E&T(?)	Yes **(?)**	Pittilo
			Traditional Chinese Medicine	Consider report	HPC	SoP E&T(?)	Yes **(?)**	Pittilo
7.6	82	**Emerging Professions**	Sonographers	To discuss	HPC			
7.7	82		Surgical care practitioners	To consider	HPC			
7.9	82		Who to regulate	**Working Party**	HPC			
7.10	83		Formal mechanism	Discussion	HPC			E/NI/S/W
7.15	84	**New regulators**	No additional regulators		HPC			
7.16	85	New regulators	No additional regulators		HPC			
7.15	84	New regulator	Create GPC	Bill	HPC			RPSGB
7.17	85	**Harmonisation**	Harmonising regulation		HPC			
33	11		Harmonising regulation	Consider	HPC			
7.18	86	**Distributed regulation**		Explore	HPC			
7.19	86	Distributed regulation	Dual registration	Consider	HPC			
7.20	86	**Assistants**	**Evaluate Scottish Pilot**	To evaluate	HPC			
7.20(sic)	86	Assistants	Demand for regulation of assistants	To consider	HPC			

Ref No.	Page	Issue - General	Issue - Specific	Dept Health	HPC	Rules & Standards	Consult	Other
31	21	**Lasting Settlement**						
32	21	**Independence of regulators**						9 Regulators
8.3	87	**Implementation programme**	Publish	Publish				
8.10	89	Integrated implementation plan	Terms of reference & membership	Consult				
8.8	88	Timetable	Legislation					
36	12		Devolve administrations	Consult				
8.5	88	**Primary legislation**	Lay majorities	Consider				
	88		CHRE changes	Consider				
	88		Establishing GPC	Consider				
	88		Independent adjudication	Consider				
	88		Revalidation	Consider	HPC		Yes	
	88		GMC affiliates	Consider				
	88		Medical director powers	Consider				
8.6	88	**Secondary legislation**	Composition of councils	Consider	HPC	Yes	Yes	
	88		Appointed registrant council members	Consider	HPC	Yes	Yes	
	88		Size of Council	Consider	HPC	Yes	Yes	
	88		Civil standards of proof	Consider				
	88		Prohibition of council members in F2P	Consider	HPC	Yes	Yes	
	88		Single definition of good character	Consider	HPC	Yes	Yes	
	88		Information held & available on registers	Consider	HPC	Yes	Yes	
	88		Existing professions	Consider	HPC	Yes	Yes	E/NI/S/W
	88		Emerging professions	Consider	HPC	Yes	Yes	E/NI/S/W
8.10	89	**Working Group**	Revalidation		HPC	Yes	Yes	
	89		Health of healthcare professionals		HPC	Yes	Yes	
	89		Emerging professions		HPC	Yes	Yes	
	89		Oversight of national clinical audit					
	89		Terms of reference	Consult	HPC			
	89		Membership	Consult	HPC			
2.31	37	**Short-Term Working party**	Non-medical professions	Work with				NI/S/W

Chapter 8 Implementation

Ref No.	Page	Issue - General	Issue - Specific	Dept Health	HPC	Rules & Standards	Other Consult
8.10	89	**National Advisory Group**	Professional Regulation	Establish			
	89		Terms of reference	Consult	HPC		
	89		Membership	Consult	HPC		
37	12		Advise DH on detailed implementation	DH			

TRUST, ASSURANCE AND SAFETY – THE REGULATION OF HEALTH PROFESSIONALS IN THE 21ST CENTURY

INFORMAL FEEDBACK – GOVERNANCE SECTION 60

Introduction

Since the publication of the White Paper, there has been considerable activity around the timetabling of recommendations and HPC has been working with the Department of Health (DH) and the other regulatory bodies on this. At a meeting on 20th March, the nine regulators were invited to provide informal feedback on a range of issues and options relating to Governance, as this is viewed as an important first stage in the implementation of the reforms. It is the intention of the DH to include the proposed changes in the initial Section 60s that may be brought into force during the first half of 2008 in parallel with the new Bill.

Issues

There are eight issues, all of which are listed in Enclosure 7 of Council papers. Please note that the HPC Executive have drafted the questions relating to the issues. They are as follows:

I Council Composition

Parity of the number of Lay and Registrant Council members is envisaged (1.10 page 25). Arrangements will be reviewed in 2011 (1.13 page 26).

Questions: Does the HPC want a majority of Lay members in the initial Section 60?

               If not, what alterative proposal(s) would be acceptable?

II Lay Members of Council

A definition of Lay is required (1.14 page 26).

Questions: What could the definition of "Lay" be?

               If not, what alternative proposal(s) would be acceptable?

III Size of Council

Smaller Councils are envisaged (1.19 page 27). The size of the Council will be consistent across all the regulators (1.20 page 27). However, this section of the White Paper does not apply to the GMC (1.23 page 28).

Questions: Does the HPC agree with the proposed change?

               If not, what alterative proposal(s) would be acceptable?

               What size should the HPC Council be?

IV Reporting Arrangements

Councils regulating professions whose regulation is a devolved matter, including the HPC, will report to the Devolved administrations (1.17 page 27).

Questions: Does the HPC agree with the proposed change?

                      If not, what alterative proposal(s) would be acceptable?

V Council Appointments

The Appointments Commission will appoint all Council members (1.18 page 27) against clearly specified criteria and competencies.

Questions: Does the HPC agree with the proposed change?

                      If not, what alterative proposal(s) would be acceptable?

VI Alternates

Alternates will be removed from the Councils (1.21 page 27) as all Council members must demonstrate that they have the time and commitment to attend assiduously and frequently.

Questions: Does the HPC agree with the proposed change?

                      If not, what alterative proposal(s) would be acceptable?

It is assumed that a smaller Council will mean an increase in non-Council membership of Committees.

VII President

The names of the heads of the Councils will be changed from the current "President" to "Chair" (1.23 page 28). The arrangements will be reviewed in 2011 (1.23 page 28).

Questions: Does the HPC agree with the proposed change?

                      If not, what alterative proposal(s) would be acceptable?

VIII Equality and Diversity

All the Regulators will be required to report annually to Parliament (4.38 page 68).

Questions: Does the HPC agree with the proposed change?

                      If not, what alterative proposal(s) would be acceptable?

Decision
The Council is requested to provide informal feedback to the Department of Health on the eight governance issues.