Education and Training Committee, 10 March 2020

The use of Expert advisors to support Visitors in the approval and monitoring of education and training programmes

Executive summary and recommendations

Introduction

This paper sets out proposals for the use of Expert advisors in the approval and monitoring of education and training programmes.

Decision

- The Committee is invited to discuss the attached paper.

- The Committee is invited to agree the Competence framework for Expert advisors in Appendix 1.

Resource implications

The resource implications of this paper include the following.

- Recruitment and training (as and when needed) of Expert advisors to support the approval and monitoring of education and training programmes.

Financial implications

The financial implications of this paper include the following.

- Recruitment and training of Expert advisors (where necessary).

Appendices

- Appendix 1 – Competence Framework for Expert advisors.

Date of paper

27 February 2020

The use of Expert advisors in the approval and monitoring of education and training programmes

1   Background to the requirement for Expert advisors

1.1   Within the last ten years, new and emerging areas of practice have been developed within HCPC regulated professions. This has been seen particularly within the clinical science profession and the Education Department has been asked to review new programmes or changes to approved programmes (e.g. to introduce a new pathway).

1.2   The development of new programmes and/or changes to approved programmes has presented some challenges to the Education and Partners Departments. The allocation of Visitors with appropriate knowledge and understanding of the new and emerging area of practice to undertake the assessment of the programme against our standards has been challenging.

1.3   On occasion, this has meant that when a new and emerging area of practice is proposed, we have been unable to allocate an individual with appropriate knowledge and understanding from within our existing Partner pool. When this occurred, we undertook wider recruitment campaigns which involved liaising with our clinical science registrants and our contacts at the professional bodies.

1.4   Once a potentially suitable individual was identified, they were asked to complete a shortened recruitment process which included a statement explaining why they felt they meet the full Visitor competency framework. This process is insufficient as not all of the Visitor competencies are applicable to the services the individuals were asked to provide.

1.5   From the initial receipt of the request to approve the programme or to make the required changes, these actions significantly extended the length of time needed to allocate suitable individuals to provide the required services.

1.6   There are currently four clinical science programmes approved. Due to the number of modalities already within this profession, there are over ten clinical science Visitors providing services within this profession. This means we are unable to utilise our clinical science Visitors on a regular basis.

1.7   Due to the nature of new and emerging areas of practice, it is difficult to identify areas of expertise which will be required and to recruit individuals as Visitors before a programme is approved.

1.8   Rather than continue to recruit Visitors and rarely allocate them to work, we have considered a different approach which aims to use the specific knowledge

and understanding of the new and emerging area of practice in a different way.

1.9 We therefore propose to create the role of Expert advisor. When changes to the curriculum occur, these individuals would be asked to review electronic documentation remotely to make a recommendation about how the curriculum meets the relevant proficiency standards. We would not expect the Expert advisor to attend assessment days or visits as part of their role.

1.10 This recommendation would be considered by an experienced clinical science Visitor. The Visitor will not be from the new and emerging area of practice but will have experience of our processes and standards. They would consider the recommendation from the Expert advisor as part of their wider review of the programme and continue to make the recommendation to the Education and Training Panel.

1.11 This proposal continues to meet the requirements of the Health and Care Professions Order 2001. This 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.

2   Criteria for appointing Expert advisors to visitors

2.1 Alternative criteria will therefore be needed to ensure Expert advisors are able to demonstrate their knowledge and understanding of their area of expertise in the relevant new and emerging area of practice.

2.2 In addition, as these individuals would be working remotely and providing very specific advice around the relevant proficiency standards to an experienced clinical science Visitor, the competency framework should focus on the attributes needed for remote working.

2.3 While the reason for this proposal has been borne out of developments within the clinical science profession, it is conceivable that other professions we currently regulate, or may regulate in the future, may benefit from this new role.

3   Decision

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

Health and Care Professions Council

Competence Framework for Expert advisors

Introduction

Competency heading	Expert advisors
Specific Knowledge and Skills	• Demonstrates sound knowledge and understanding within their area of expertise of new and emerging areas of practice within a HCPC regulated profession. • Keeps up-to-date with any new developments relevant to new and emerging areas of practice.
Analytical ability	• Within their area of expertise, is able to identify learning outcomes to ensure the relevant proficiency standards have been demonstrated at a threshold level.
Interpersonal skills	• Recognises and deals appropriately with actual or potential conflicts of interest. • Explains and justifies advice when presenting work to a visitor and / or HCPC executive. • Demonstrates openness to feedback and constructive challenge.
Decision making and sound judgement	• Considers a wide range of issues to provide informed, independent, and sound advice, ensuing the relevant proficiency standards have been demonstrated at a threshold level.
Communication skills	• Adopts a clear and succinct oral and written communication style and seeks clarification where necessary. • Delivers work within the set timelines.