

Health Professions Council – 13 December 2007

Reports from Council Representatives at External Meetings

Executive summary and recommendations

Introduction

The attached feedback forms have been received from the following members of Council, reporting back from meetings at which they have represented the HPC;

Annie Turner
Anna van der Gaag (3)
Neil Willis (2)

Decision

The Council is requested to note the document. No decision is required.

Background information

None

Resource implications

None

Financial implications

None

Appendices

None

Date of paper

3 December 2007

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2007-08-29	a	SEC	AGD	Reportsfromexternalmeetingsexecsummary	Final DD: None	Public RD: None

FEEDBACK SHEET TO BE COMPLETED AFTER THE MEETING

Name of Council Member	Annie Turner
Title of Conference/Meeting	Practice Educators' Conference, Cardiff
Date of Conference	25th October 2007
Approximate number of people at the conference/meeting	60
Issues of Relevance to HPC The audience were occupational therapy practice educators throughout Wales. My talk related to the role and function of HPC and it's impact on practice. The main questions related to CPD and the requirements for the portfolio. There are still several misconceptions and some widespread concern. It was very useful to be able to address these and to supply a range of material from HPC. Other issues related to Fitness for Practice, particularly supporting colleagues who are involved in the process.	
Key Decisions Taken N/A	

Please complete as much of the above as you can and return by post to Niamh O'Sullivan, Council and Committee Secretariat, Health Professions Council, Park House, 184 Kennington Park Road, London, SE11 4BU, or alternatively by e-mail to niamh.osullivan@hpc-uk.org.

December 2006

FEEDBACK SHEET TO BE COMPLETED AFTER THE MEETING

Name of Council Member	Anna van der Gaag
Title of Conference/Meeting	Annual Professional Development Meeting
Date of Conference	1 November 2007
Approximate number of people at the conference/meeting	50 Therapists and Managers
Issues of Relevance to HPC Talk covered HPC update and White Paper/future of regulation. This group have very low exposure to HPC staff as they work in the south west of England (non had attended our recent listening event in North Devon. CPD Despite lack of contact they seemed familiar with the CPD requirements and there were no negative comments on the standards. Most questions were about the practicalities of recording CPD, formats, time allowance for submitting the profile and implications for registration. Future of regulation A number of concerns about the lack of representation on the new Council, and what guarantees there were that the government would simply appoint 'like minded individuals' – concerns about the loss of democracy in regulation and its impact long term. Emphasised the need for health professionals to continue to be involved in decisions and to play a full part in regulation. Good feedback on the notion that HPC regulation is underpinned by personal responsibility, and that HPC works with professionals to protect the public.	
Key Decisions Taken	

FEEDBACK SHEET TO BE COMPLETED AFTER THE MEETING

Name of Council Member	Anna van der Gaag
Title of Conference/Meeting	Our NHS, Our future
Date of Conference	22 November 2007
Approximate number of people at the conference/meeting	500 delegates
Issues of Relevance to HPC This conference was a key part of the Darzi Review of the NHS. It focused on innovation and change within healthcare, drawing on examples from within the UK and on Kaiser Permanant in the US. Key developments within the NHS (and likely to impact on regulation) in the future include <ul style="list-style-type: none">• The move to integrated care, with allied health professionals taking a lead role in implementation• Increased use of IT by clinicians and patients• Changing infrastructures (relationships between primary and secondary care)• More emphasis on patient centred care• A desire to shift the emphasis from ‘treatment’ to ‘service’ There was also an emphasis on the different types of ‘incentives’ or ‘enablers’ for bringing about change, and the importance of understanding the relationships between national ‘levers’ (standards, guidance, policy, regulation) and local incentives. Regulation as described by the speakers related to systems regulation , rather than individual regulatory bodies. Professionalism was also seen as an important enabler, but under researched and little understood compared with others. I spoke to Lord Darzi about the role of individual regulatory bodies in the reform programme and he agreed that this needed to be addressed.	
Actions/follow up Respond to Lord Darzi’s invitation to submit policy ideas Request meeting with Lord Darzi Contact Anna Dixon, Kings Fund, to discuss research on regulatory issues and professionalism	

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FEEDBACK SHEET TO BE COMPLETED AFTER THE MEETING

Name of Council Member	Anna van der Gaag
Title of Conference/Meeting	Telemed and Ehealth 2007
Date of Conference	27 November 2007
Approximate number of people at the conference/meeting	50 delegates
Issues of Relevance to HPC	
<p>The conference included papers and keynotes from colleagues in Australia, Finland, Spain, Italy and significant contributions from Scotland. Examples of eHealth included, physiotherapists delivering neonatal care, radiographers, and psychologists, as well as doctors, nurses and social workers. Ehealth covers a range of activities, from use of email and digital photographs, to video links, telephone support and internet sites. Services include diagnostic, therapeutic and training of others in clinical delivery.</p> <p>Ehealth is likely to increase and has been shown to be cost effective in many settings. The benefits include increased patient access to knowledge and clinical services, lower costs, faster diagnosis and treatment for those in remote areas, and increased sharing of expertise. The problems encountered are with failures in technology, insufficient training in use of equipment for staff, lack of guidance and protocols, and patients unwilling to use/assist with the use of these tools.</p> <p>Regulation and eHealth: One view from a medical expert is that there are no significant regulatory implications to the development of eHealth, as it is a tool in the hands of professionals. The practitioner who has a duty of care to the patient is the one who takes responsibility for that care, and third party involvement via telemedicine is no different from utilising second opinion. However, there were other experts at the conference who did think there were regulatory implications that had not been sufficiently explored.</p>	
Actions/follow up	
<p>HPC should keep a watching brief on the development of ehealth within the 13 professions. When the SoPs are reviewed, eHealth users and providers should be consulted as to whether there should be explicit reference to this tool in the Standards.</p> <p>HPC might usefully refine its knowledge of existing guidance and protocols for use of E tools in clinical care (in collaboration with the professional bodies) and look at whether undergraduate programmes are addressing this development.</p> <p>One possible way of stimulating debate might include an HPC sponsored conference</p>	

on Ehealthcare. The conference could address implications of ehealth – ethical, technical, interpersonal, curriculum implications). How will eHealthcare change professional practice? Does HPC need to set standards for this area? Will Ehealthcare increase inequity of access for those from low income families/older people/those with disabilities who have a much lower usage of internet than that general population?

Useful contacts

Scottish Centre for Telehealth

UCL Research Group – Cecily Kerr

Professor Richard Wooton, University of Brisbane

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July 2007

Feedback sheet to be completed after the meeting

Name of Council Member	Neil Willis
Title of Conference/Meeting	Institute of Biomedical Sciences Biennial Congress
Date of Conference	24-25 September 2007
Approximate number of people at the conference/meeting	1500
<p>Issues of Relevance to HPC</p> <p>Lord Carter of Coles opened the IBMS congress and delivered the plenary lecture where he outlined the preliminary findings from the Collinson Grant Healthcare data collected from the 12 pilot sites following his "Report of the Review of NHS Pathology Services in England". Lord Carter provided interesting figures associated with staffing skill mix, varying costs for similar tests in different laboratories, areas where costs arise and information on turnaround times for urgent investigations, Lord Carter closed by outlining the implementation of the second stage of the independent review. The possible reorganisation, of how and where Pathology/Laboratory medicine is delivered could become a registration issue.</p> <p>Biomedical Scientists complete a Certificate of Competence in addition to their academic qualification for HPC registration and HEIs are moving towards integrating the CoC or SOPS directly into their programs, I discussed the various approaches taken in the different parts of the UK. I also had the opportunity to discuss at length a number of issues with the speakers on topics including pre and post registration issues, specialist portfolios, Clinical Pathology Accreditation, the use of associate practitioners and a vocational curriculum for stage 3 support workers, there was also an interesting presentation on multidisciplinary training and registration in the military.</p> <p>Rachel Tripp addressed the Congress with a talk entitled "HPC and CPD audit –are you ready?". This was followed by a number of discussions with different groups of Biomedical Scientists all of whom appeared to be better informed on the process required for CPD and registration, the publication of examples of the CPD profiles that would be required by the HPC were particularly welcomed.</p>	
<p>Key Decisions Taken</p> <p>The IBMS Congress is a forum for all Laboratory Medicine issues where the different disciplines mix with education providers and professional body representative and as such is not a decision making event, however the IBMS Council will continue to work closely with the HPC on all matters of registration particularly on CPD and education matters.</p>	

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April 2007

Feedback sheet to be completed after the meeting

Name of Council Member	Neil Willis
Title of Conference/Meeting	Institute of Biomedical Sciences, Council meeting
Date of Conference	7 September 2007
Approximate number of people at the conference/meeting	41
<p>Issues of Relevance to HPC</p> <p>The IBMS Council welcomed me to the meeting having had minimal contact with the HPC registrant member for Biomedical Science over the last two years.</p> <p>I reminded the meeting of the role of HPC Council Member and outlined the work of the Statutory and non-statutory Committees I will join.</p> <p>I outline current topics under discussion at the HPC noting that a number of issues under discussion were prompted by the White paper – Trust Assurance and Safety, The regulation of Health Professionals in the 21st Century - February 2007.</p> <p>The 'Implementation of the European Directive 2005/36/EC for Health and Social Care Professions in the UK' was discussed and it was announced that C.Sci (Chartered Scientist) will be included alongside C.Eng and others under directive 89/848/EC</p> <p>I informed the meeting that Council members will no longer act as registration assessors or HEI program approvers.</p> <p>The £35 added to the registrants pay in lieu of part of the registration fees was discussed and although it was welcomed it was noted that those in A4C Band 8C and above would not receive the money.</p> <p>The Review of NHS Pathology Service in England chaired by Lord Carter was discussed and the preliminary analysis of the data from the Collinson Grant Healthcare survey was presented highlighting the activity of the twelve Laboratory Medicine pilot sites.</p> <p>The consultation for the review of the SETs was discussed and the IBMS were keen to be involved in the process.</p>	
<p>Key Decisions Taken</p> <p>The IBMS would like to continue to strengthen its relationship with the HPC particularly with matters concerned with the HEI approvals/accreditation issues.</p>	

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