

Council, 26 March 2015

Consultation on revised standards of conduct, performance and ethics

Executive summary and recommendations

Introduction

The Professional Liaison Group (PLG) established to assist in putting together draft revised standards of conduct, performance and ethics for consultation concluded its work in December 2014.

Since the last meeting of the PLG, the draft standards for consultation have been finalised and an introduction and glossary drafted. These are appended together with a copy of the existing standards and a commentary describing the proposed changes in more detail, for reference.

The consultation will run between 1 April 2015 and 26 June 2015. An analysis of the consultation responses and a final draft of proposed standards will be brought to the Education and Training Committee and the Council at their meetings in September 2015. The new standards will be published and effective from January 2016.

This paper was considered by the Education and Training Committee at its meeting on 5 March 2015 (and subject to a minor amendment to the consultation document which has now been made) was recommended for approval by the Council.

Decision

The Council is invited to discuss and approve the attached documents for public consultation:

- the text of the consultation document (subject to minor editing amendments); and
- the text of the draft revised standards for consultation (subject to minor editing amendments).

Background information

None; see paper.

Resource implications

Resource implications include arranging the consultation, analysing the responses, revising the draft standards as necessary and arranging for publication.

These implications have been accounted for in Policy and Standards Department and Communications Department planning for 2015-2016.

Financial implications

The financial implications include publication of the revised standards once agreed. This has been accounted for in Policy and Standards Department budgeting for 2015-2016.

Appendices

- Consultation document.
- Draft revised standards for consultation.
- Standards of conduct, performance and ethics (2008; updated 2012) – for reference.
- Commentary on draft revised standards of conduct, performance and ethics – for reference.

Date of paper

5 March 2015

Consultation on revised standards of conduct, performance and ethics

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1. Introduction

- 1.1 We are the Health and Care Professions Council (HCPC). This consultation seeks the views of our stakeholders on draft revised Standards of conduct, performance and ethics ('the Standards').
- 1.2 In this document, you can find out information about the Standards, the changes we are proposing to the existing standards and how to respond to this consultation.
- 1.3 The draft standards for consultation are published alongside this document on our website. Easy Read versions of this consultation document and the draft standards are also available. Please see: <http://www.hcpc-uk.org/aboutus/consultations/>
- 1.4 The consultation runs from **1 April 2015 to 26 June 2015**.

2. About the HCPC

- 2.1 We are a regulator and were set up to protect the public. To do this, we keep a register of professionals who meet our standards for their professional skills and behaviour. Individuals on our Register are called 'registrants'.
- 2.2 We currently regulate 16 professions.
 - Arts therapists
 - Biomedical scientists
 - Chiropodists / podiatrists
 - Clinical scientists
 - Dietitians
 - Hearing aid dispensers
 - Occupational therapists
 - Operating department practitioners
 - Orthoptists
 - Paramedics
 - Physiotherapists
 - Practitioner psychologists
 - Prosthetists / orthotists
 - Radiographers
 - Social workers in England
 - Speech and language therapists

3. About the Standards of conduct, performance and ethics

- 3.1 The Standards are the high level ethical standards we set for all the professionals we register. They set out in broad terms the behaviour we expect of our registrants. They need to reflect both public expectations of professionals and the high standards that professionals expect of each other.¹
- 3.2 The Standards are intended to provide a useful framework which can assist registrants in making ethical decisions.
- 3.3 We use the Standards in a number of ways.
- Our standards of education and training require education providers to ensure that the Standards are included in their curricula so that students understand what they mean for practice.
 - The Standards apply to 'prospective registrants' – this includes people applying for registration with us. When someone applies for registration with us they are required to complete a declaration about their character and to declare any relevant information, including any criminal convictions or cautions. They are also required to declare that they have read and will meet the Standards when they are registered. If someone does declare any relevant information, we will decide, having regard to the Standards, whether we are able to register them.
 - The Standards are used in our fitness to practise process. Panels use the standards when deciding whether we need to take any action about a complaint to protect members of the public.

4. About the review

- 4.1 The Standards were last reviewed from 2006 and re-published in 2008. We started reviewing the Standards from late 2012. We wanted to make sure that the Standards continued to be fit for purpose, up-to-date and well understood by registrants and the public.
- 4.2 We undertook a range of activities to gather feedback about the existing standards and how we might improve them. They included the following.
- **Employers.** We held workshops at our events for employers.
 - **Panel chairs.** We carried out a survey of chairs of our fitness to practise panels, and employees in our Fitness to Practise Department, to find out about their experiences of using the Standards in their work.

¹ You can find the existing standards here:

<http://www.hcpc-uk.org/aboutregistration/standards/standardsofconductperformanceandethics/>

- **Registrants.** We worked with a market research agency, The Focus Group, who undertook interviews and focus groups for us with registrants. We also held a workshop with registrants at one of our 'Meet the HCPC' events.
- **Service users and carers.** We worked with Macmillan Cancer Support and Hearing Link to hold workshops with service users and carers. Connect, a charity which works with people with communication disabilities, carried out focus groups for us with service users with communication disorders and their carers about their expectations of health and care professionals and how accessible the Standards were. We also worked with Shaping our Lives, a service user led organisation. They carried out interviews and focus groups with service users in social care and their carers. They also worked with another organisation who looked at how accessible the Standards were to people with learning disabilities.²

4.3 In June 2014, we convened a working group, known as a Professional Liaison Group (PLG). The group helped us in putting together a revised set of the Standards for consultation.

4.4 The members of the group and their organisations are listed in appendix one.

4.5 We would like to thank all of those who helped us by giving us their time and input during the course of the review.

5. About the draft revised standards

5.1 We have used the feedback we received to put together draft revised standards for consultation.

5.2 We have made a range of different changes to improve the content and accessibility of the Standards. We have outlined the main improvements we have made below.

Reporting concerns

5.3 We have created a dedicated standard about registrants reporting and escalating concerns that they might have about the safety and wellbeing of service users (standard 7).

5.4 We received a lot of feedback during the review about the importance that registrants should report concerns that they have about the safety and wellbeing of service users and take action to follow-up on their concerns wherever necessary.

5.5 There is already an expectation about raising concerns set out in the existing standards, but we wanted to strengthen this requirement and make our expectations as clear as possible. We have also proposed that as well as

² You can read the reports of the research we commissioned on our website here: <http://www.hcpc-uk.org/publications/research/>

raising concerns themselves, registrants should support others to raise concerns.

Being open when things go wrong ('candour')

- 5.6 The report of the Francis Inquiry proposed that health and care professionals should have a 'duty of candour'. This means that they should be open and honest with service users and their carers when something has gone wrong with the care, treatment or other services they have provided to them. The existing standards are consistent with the spirit of the 'duty of candour' but do not include a specific requirement about informing service users and their carers where mistakes or errors are made.
- 5.7 We have proposed a dedicated standard in this area (standard 8). Registrants would be expected to tell service users and carers when they become aware that something has gone wrong with the care, treatment or other services that they provide and to take action to put matters right wherever possible. They would also be required to consider making an apology and to make sure that the service user receives an explanation of what happened.
- 5.8 We have not used the term 'candour' because we heard during the review that the meaning of this term was not always well understood by our stakeholders, including registrants and service users and carers. Instead we have referred to registrants being 'open when things go wrong'. We have asked a consultation question about this proposed standard.

Structure and language of the standards

- 5.9 We have made substantial changes to the structure of the Standards to improve their accessibility.
- 5.10 The existing standards have 14 overarching standards with paragraphs underneath which set out additional standards in each area. The draft revised standards have ten overarching standards. We have then broken down the paragraphs into numbered statements and used sub-headings to group like standards together.
- 5.11 We have reordered the Standards so that they should now be more logically ordered. We have also tried to improve the language used in the Standards so that, as far as possible, they are easy to understand for both registrants and members of the public. We have reworded or removed some content where it is now out of date or covered in other publications.

Other changes

- 5.12 The following provides a brief summary (not exhaustive) of some of the other changes we have made.
- We have strengthened the expectations of registrants to treat service users and carers with respect by working in partnership with them to support informed decisions (1.1-1.3).

- The 'stand-alone' standard on consent in the existing standards has been removed and replaced with standard under standard one (1.4). The new wording is intended to be applicable to all professions and inclusive of situations where consent may not apply in the same way, such as in emergency situations or where registrants are carrying out statutory work.
- We have been clearer about our expectations that registrants communicate appropriately and effectively, including by being polite and considerate with others (2.1-2.6).
- We have added a new standard (2.7) about appropriate and responsible use of social networking sites.
- The dedicated standards in the existing standards about dealing with the risks of infection and managing health conditions have been removed. We received feedback in the review that the existing standard about infection control was out of date and may not be relevant to all registrants. We have made sure that the principle – that registrants should manage risks to service users and others appropriately and make sure that their health does not adversely affect their practice – is adequately covered in the draft (standard 6).

5.13 If you are interested in finding out more about the changes we have made to the existing standards, we have published a more detailed commentary. You can find this alongside this consultation document on our website:

<http://www.hcpc-uk.org/aboutus/consultations/>

6. Changes to other publications

- 6.1 Once the consultation has closed we will consider the feedback we received in finalising the standards. We expect that new standards will be in place in early 2016.
- 6.2 We will also make corresponding changes to other HCPC publications where they quote the Standards. For example, we will update the HCPC's 'Guidance on health and character'.
- 6.3 We also plan to revise the 'Guidance on conduct and ethics for students', which takes the Standards and explains what they mean for students and trainees on HCPC approved programmes. We will consult on these changes once the revised Standards have been agreed.

7. How to respond to the consultation

7.1 We welcome your comments on the draft revised standards. We have listed some questions to help you below. The questions are not designed to be exhaustive and we would welcome your comments on any aspect of the draft.

Q1. Do you think that the introduction clearly explains the role and purpose of the Standards for different groups who might be interested in them? How might we improve it?

Q2. Do you agree that the new structure is more accessible? If not, how could we improve it?

Q3. Do you agree with the proposed standard on being open when something goes wrong (standard 8)? If not, why not, or how could we improve it?

Q4. Do you have any comments on any of the other standards?

Q5. Do you think that any additional standards are necessary?

7.2 You can respond to this consultation in the following ways:

- By completing our easy-to-use online survey:
[link will appear here]
- By emailing us at: consultation@hcpc-uk.org.
- By writing to us at the following address:

Consultation on standards of conduct, performance and ethics
Policy and Standards Department
Health and Care Professions Council
Park House
184 Kennington Park Road
London
SE11 4BU
Fax: +44(0)20 7820 9684

7.3 Please note that we do not normally accept responses by telephone or in person. We normally ask that consultation responses are made in writing. However, if you are unable to respond in writing, please contact us on +44(0)20 7840 9815 to discuss any reasonable adjustments that would help you to respond.

7.4 Please complete the online survey or send us your response by **26 June 2015**.

7.5 **Please contact us to request a copy of this document in Welsh or in an alternative format.**

- 7.6 Once the consultation period is completed, we will analyse the responses we receive. We will then publish a document which summarises the comments we received and explains the decisions we have taken as a result. This will be published on our website.

COUNCIL 26032015

Appendix 1

Members of the Professional Liaison Group (PLG) for the review of the Standards of conduct, performance and ethics

Name	Organisation / representing
Elaine Buckley	HCPC Council member (Chair of the PLG)
Mary Clark-Glass*	HCPC Council member
Sheila Drayton*	HCPC Council Member
Anna Gupta	Joint University Council Social Work Education Committee (JUCSWEC)
Dreengah Lyle	Carer
Steve McNeice	Service user
Henny Pearmain	Allied Health Professions Federation
Helga Pile	Unison
Nanik Pursani	Service user
Joy Tweed	HCPC Council member
Caroline Waterfield	NHS Employers
Steve Wordsworth**	College of Operating Department Practitioners

Please note:

*Terms of office as Council members ended on 31 December 2014

**Appointed as a Council member from 1 January 2015

The content of this consultation, including any errors or omissions, remain our responsibility.

DRAFT FOR PUBLIC CONSULTATION

Standards of conduct, performance and ethics

Registrants must:

- promote and safeguard the interests of service users and carers;
- communicate appropriately and effectively;
- work within the limits of their knowledge and skills;
- delegate appropriately;
- respect confidentiality;
- manage risk;
- report concerns about safety;
- be open when things go wrong;
- be honest and trustworthy; and
- keep records of their work.

Introduction

This document sets out the Standards of conduct, performance and ethics ('the Standards'). The Standards set out in broad terms how we expect our registrants (people on our Register) to behave.

About the HCPC

We are a regulator and were set up to protect the public. To do this, we keep a register of professionals who meet our standards for their professional skills and behaviour.

We currently regulate 16 professions.

- Arts therapists
- Biomedical scientists
- Chiropodists / podiatrists
- Clinical scientists
- Dietitians
- Hearing aid dispensers
- Occupational therapists
- Operating department practitioners
- Orthoptists
- Paramedics
- Physiotherapists
- Practitioner psychologists
- Prosthetists / orthotists
- Radiographers
- Social workers in England
- Speech and language therapists

What the Standards mean for:

Registrants and applicants for registration

If you are registered with us, you must make sure that you are familiar with the Standards and that you keep to them. If you are applying to be registered, you will be asked to sign a declaration to confirm that you have read and will keep to the Standards once you are registered.

Students

If you are a student or trainee studying on a HCPC approved programme, we have published 'Guidance on conduct and ethics for students' which sets out what these standards mean for you.

Service users, carers and the public

If you are receiving care, treatment or other services from one of our registrants, are caring for someone who is, or you or someone you care for might do so in the future, the Standards will help you understand how our registrants should behave towards you.

If you have concerns about the behaviour or practice of a registrant, you can raise these with us through our fitness to practise process. We use these standards to help us decide whether we need to take any action to protect the public. Please see the back of this document for more information.

Information for registrants: meeting the Standards

As a registrant, you are personally accountable for your behaviour and practice. You will need to use your judgement so that you make informed and reasonable decisions about your practice and meet the Standards. You must always be prepared to justify your decisions and actions.

Making informed and reasonable decisions might include getting advice and support from education providers, employers, professional bodies, colleagues and other people. In particular, we recognise the valuable role professional bodies play in representing and promoting the interests of their members. This often includes providing guidance and advice about good practice, which can help you meet the Standards.

Language

Our registrants work in a range of different settings, which include direct practice, management, education, research and roles in industry. We have tried to use terms which are as broad as possible and which everyone can understand. We have used the phrase 'care, treatment or other services' in the Standards to describe the different work that our registrants carry out.

Our registrants work with a variety of different people, including patients, clients, carers and other professionals. In the Standards we have used 'service users' as a broad term to refer to anyone who uses or is affected by the work of registrants. We have also used 'carers' as a broad term to refer to someone who looks after, or provides support to, a family member, partner or friend.

In the Standards, we use the terms 'You must' and 'You should' in the following ways.

- 'You must' is used where a standard needs to always be met.
- 'You should' is used where a standard will not apply in all situations or circumstances, or where there might be factors outside of your control that affect whether you meet the standard.

A glossary is available on page 14 to explain some of the terms used in the Standards.

As a registrant, you must:

1. Promote and safeguard the interests of service users and carers

Treat service users and carers with respect

- 1.1 You must treat service users and carers as individuals, respecting their privacy and dignity.
- 1.2 You must work in partnership with service users and carers, where appropriate, involving them in decisions about the care, treatment or other services to be provided.
- 1.3 You must empower service users, where appropriate, to maintain their own health and wellbeing and support them to make informed decisions.

Make sure you have consent

- 1.4 You must make sure that you have the informed consent of service users or other appropriate authority before you provide care, treatment or other services.

Challenge discrimination

- 1.5 You must not discriminate against service users, carers and colleagues by allowing your personal views to affect your professional relationships or the care, treatment or other services that you provide.¹
- 1.6 You must challenge discriminatory attitudes or behaviours.

Maintain appropriate boundaries

- 1.7 You must maintain appropriate professional boundaries in your relationships with service users and carers.

¹ This includes your views about someone's lifestyle, culture or their social or economic status, as well as the characteristics protected by law: age, disability, gender reassignment, race, marriage and civil partnership, pregnancy and maternity, religion or belief, sex and sexual orientation.

2. Communicate appropriately and effectively

Communicate with service users and carers

- 2.1 You must be polite and considerate.
- 2.2 You must listen to service users and carers and take account of their needs and wishes.
- 2.3 You must give service users and carers the information they want, or need to know, in a way they can understand.
- 2.4 You must make sure that arrangements are made, where possible, to meet service users' and carers' language and communication needs.

Work with colleagues

- 2.5 You must collaborate with colleagues, sharing your skills, knowledge and experience for the benefit of service users and carers.
- 2.6 You should share relevant information with colleagues involved in your service user's care, treatment or other services.

Use of social networking sites

- 2.7 You must make sure that you use social networking sites and other forms of electronic communication appropriately and responsibly.

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3. Work within the limits of your knowledge and skills

Keep within your scope of practice

- 3.1 You must keep within your scope of practice by only practising in the areas in which you have appropriate knowledge, skills and experience to do so.
- 3.2 You must refer a service user to another practitioner if the care, treatment or other services they require are beyond your scope of practice.

Maintain and develop your knowledge and skills

- 3.3 You must keep your knowledge and skills up to date and relevant to your scope of practice, including by undertaking continuing professional development.
- 3.4 You must keep up to date with, and follow, any law, regulations or guidance which applies to your practice.
- 3.5 You should seek and listen to feedback from others and use it to improve your practice.

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4. Delegate appropriately

Delegation, oversight and support

- 4.1 You must make sure that anyone you delegate work to has the knowledge, skills and experience to carry it out safely and effectively.
- 4.2 You must continue to provide appropriate oversight and support to those you delegate work to.

Delegation and scope of practice

- 4.3 You must not ask other people to do work which is outside their scope of practice.

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5. Respect confidentiality

Use of information

5.1 You must treat information about service users as confidential and use it only for the purposes for which it is provided.

Disclosure of information

5.2 You must only release confidential information:

- where you have permission;
- where required to do so by law; or
- in exceptional circumstances, where there is an overriding public interest need to do so, such as where this is necessary to protect public safety or prevent harm to other people.

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6. Manage risk

Identify and minimise risk

- 6.1 You must take all reasonable steps to minimise the risk of harm to service users, carers and colleagues.
- 6.2 You must not do anything, or allow someone else to do anything, which could put the health or safety of a service user or carer at unacceptable risk.

Manage your health

- 6.3 You must make changes to your practice or stop practising if your physical or mental health could affect adversely your performance or judgement or otherwise put others at risk.

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7. Report concerns about safety

Report concerns

- 7.1 You must report any concerns about the safety and wellbeing of service users promptly and appropriately and support others to do the same.
- 7.2 You must take appropriate action if you have concerns about the safety and wellbeing of children and vulnerable adults.
- 7.3 You must make sure that the safety and wellbeing of service users always comes before any professional or other loyalties.

Follow-up concerns

- 7.4 You must follow-up concerns you have reported and escalate them wherever necessary.

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8. Be open when things go wrong

Openness with service users and carers

- 8.1 You must tell service users and carers when you become aware that something has gone wrong with the care, treatment or other services that you provide and take action to put matters right.
- 8.2 You should apologise to service users and carers when something has gone wrong.
- 8.3 You must make sure that those affected receive a full and prompt explanation about what has happened and any likely effects.

Deal with concerns and complaints

- 8.4 You must support service users and carers if they want to raise concerns about the care, treatment or other services they have received.
- 8.5 You must give a constructive and honest response to anyone who complains about the care, treatment or other services they have received.

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9. Be honest and trustworthy

Personal and professional behaviour

- 9.1 You must make sure that your conduct justifies public trust and confidence in you and your profession.
- 9.2 You must be honest about your experience, qualifications and skills.
- 9.3 You must make sure that any promotional activities you are involved in are accurate and are not liable to mislead.
- 9.4 You must declare issues that might create conflicts of interest and make sure that they do not influence your judgement or practice.

Important information about your conduct and competence

- 9.5 You must tell us as soon as possible if:
 - you accept a caution from the police or you have been charged with, or found guilty of, a criminal offence;
 - another organisation responsible for regulating a health or social care profession has taken action or made a finding against you;
 - you have had any restriction placed on your practice, or been suspended or dismissed, by an employer because of concerns about your conduct or competence.
- 9.6 You must co-operate with any investigation into your conduct or competence, the conduct or competence of others or the care, treatment or other services provided to service users.

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10. Keep records of your work

Keep accurate records

- 10.1 You must keep full, clear, accurate and legible records for everyone you care for, treat, or provide other services to.
- 10.2 You must complete all records promptly and as soon as possible after providing care, treatment or other services.

Keep records secure

- 10.3 You must keep information in records secure by protecting them from loss, damage or inappropriate access.

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Glossary

Colleague

By colleague we mean other health and care professionals, students, support workers, paid carers and others involved in the care, treatment or other services provided to service users.

Delegation, delegate

When a registrant asks someone else to carry out a task on their behalf.

Discriminate

Someone discriminates when they unfairly treat a person or group of people differently from other people or groups of people.

Escalate

By escalate we mean passing on a concern about the safety or wellbeing of a service user to someone else who might be able to act on it, for example, a more senior manager or a regulator.

Informed consent

When a service user has all the necessary information in a way that they can understand so that they can make a decision about their care, treatment or other services.

Refer

When a registrant asks that someone else provides care, treatment or other services to a service user which are beyond their scope of practice or, where relevant, because the service user has asked for a second opinion.

Registrant

A person who is currently on our Register.

Scope of practice

The areas in which a registrant has the knowledge, skills and experience necessary to practise safely and effectively.

Service user and carer

Anyone who uses or is affected by the services of registrants, and those that care for them.

Fitness to practise

When we say someone is 'fit to practise', we mean that they have the skills, knowledge, character and health to practise their profession safely and effectively.

We are able to consider concerns raised about the fitness to practise of registrants by members of the public, employers, professionals, the police and other people. When we consider a concern about a registrant, we look at whether these standards have been met to decide whether we need to take any action to protect the public.

You can find out more information about our fitness to practise process in our Brochures including 'How to raise a concern' and 'What happens if a concern is raised about me'. You can download these from our website or you can contact us to ask for a copy.

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Your duties as a registrant

Standards of conduct, performance and ethics

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Foreword

I am pleased to present the Health and Care Professions Council's standards of conduct, performance and ethics.

We first published the standards of conduct, performance and ethics when our Register opened in July 2003. We began to review them in July 2006 to make sure that they continued to be fit for purpose and meet the expectations of the public, registrants and other stakeholders. The review was led by the Conduct and Competence Committee. We also held a formal consultation process on the draft standards. The review process and consultation produced extremely valuable feedback and we are grateful to everyone who gave their time to help us in shaping the standards that follow.

As part of that consultation process, we agreed some broad principles which have influenced the standards laid out in this document.


We decided that the standards should:

- focus, where possible, on providing guidance to registrants, based on our expectations of their behaviour;
- be based on over-arching principles with some more detail on important points (with more detailed guidance available elsewhere, if necessary);
- apply to all registrants (as far as possible), including those involved in direct practice, management, education, research and roles in industry; and
- be written in broad terms to be able to take account of changes in best practice, technology, the law and wider society in the future.

We made a number of changes to the previous standards, mainly to set out our aims more clearly or to correct any mistakes. We also revised the introduction to focus less on the role of the standards in fitness to practise procedures and we added more information on how registrants can use and meet the standards.

I am confident that the standards are both fit for purpose and reflect both professional and public expectations of the behaviour of registrants.

These standards were adopted in July 2008. Some minor changes were made to them on 1 August 2012, when we became the Health and Care Professions Council. The revised standards apply from that date.

A handwritten signature in black ink that reads "Anna van der Gaag". The signature is written in a cursive style with a prominent initial 'A' and a long, sweeping underline.

Anna van der Gaag
Chair

Introduction

Your duties as a registrant

The standards of conduct, performance and ethics you must keep to

- 1 You must act in the best interests of service users.
- 2 You must respect the confidentiality of service users.
- 3 You must keep high standards of personal conduct.
- 4 You must provide (to us and any other relevant regulators) any important information about your conduct and competence.
- 5 You must keep your professional knowledge and skills up to date.
- 6 You must act within the limits of your knowledge, skills and experience and, if necessary, refer the matter to another practitioner.
- 7 You must communicate properly and effectively with service users and other practitioners.
- 8 You must effectively supervise tasks that you have asked other people to carry out.
- 9 You must get informed consent to provide care or services (so far as possible).
- 10 You must keep accurate records.
- 11 You must deal fairly and safely with the risks of infection.
- 12 You must limit your work or stop practising if your performance or judgement is affected by your health.
- 13 You must behave with honesty and integrity and make sure that your behaviour does not damage the public's confidence in you or your profession.
- 14 You must make sure that any advertising you do is accurate.

This document sets out the standards of conduct, performance and ethics we expect from our registrants. The standards also apply to people who are applying to become registered.

If you are registered, you must make sure that you are familiar with the standards and that you keep to them. If you are applying to be registered, you will be asked to sign a declaration to confirm that you have read and will keep to the standards once you are registered.

We also publish standards of proficiency, which are standards we use to make sure the professions we regulate work safely and effectively. We set these standards at a level we think is necessary to protect members of the public.

What we expect of you

The standards of conduct, performance and ethics play an important role in helping us make decisions about the character of the people who apply to our Register, and also in cases where we decide whether someone is fit to practise.

It is important that you read and understand this document. If someone raises concerns about your practice, we will consider these standards (and our standards of proficiency) when we decide whether we need to take any action. Please see the back of this document for more information about how we use the standards when we consider concerns raised about registrants.

The standards and your practice

The standards are written in broad terms and designed to apply to all registrants as far as possible. **However, we recognise that some of the standards may not apply to all the professions that we regulate or to the practice of some registrants.** The standards that might not directly apply to all registrants include standard eleven, which says that ‘You must deal fairly and safely with the risks of infection’.

If we receive a complaint about you, the fitness to practise panel will consider the individual circumstances of the case (for example, the profession you work in and your scope of practice).

Meeting the standards

It is important that you meet our standards and are able to practise safely and effectively. We also want to make sure that you maintain high standards of personal conduct and do not do anything which might affect the public's confidence in you or your profession. However, we do not dictate how you should meet our standards.

Each standard can normally be met in more than one way. The way in which you meet our standards might change over time because of improvements in technology or changes in your practice.

As an autonomous and accountable professional, you need to make informed and reasonable decisions about your practice to make sure that you meet the standards that are relevant to your practice. This might include getting advice and support from education providers, employers, professional bodies, colleagues and other people to make sure that you protect the wellbeing of service users at all times.

In particular, we recognise the valuable role professional bodies play in representing and promoting the interests of their members. This often includes providing guidance and advice about good practice, which can help you meet the standards in this document.

Making informed and reasonable decisions

We often receive questions from registrants who are concerned that something they have been asked to do, a policy, or the way in which they work might mean that they cannot meet our standards. They are often worried that this might have an effect on their registration.

If you make informed, reasonable and professional judgements about your practice, with the best interests of your service users as your prime concern, and you can justify your decisions if you are asked to, it is very unlikely that you will not meet our standards.

By ‘informed’, we mean that you have enough information to make a decision. This would include reading these standards and taking account of any other relevant guidance or laws. By ‘reasonable’, we mean that you need to make sensible, practical decisions about your practice, taking account of all relevant information and the best interests of the people who use or are affected by your services. You should also be able to justify your decisions if you are asked to.

Language

Our registrants work in a range of different settings, which include direct practice, management, education, research and roles in industry. We have tried to use terms which are as broad as possible and which everyone can understand.

Throughout these standards, we have used the term ‘service user’ to refer to anyone who uses or is affected by a registrant’s services. Who your service users are will depend on how and where you work. For example, if you work in clinical practice, your service users might be your patients. In some circumstances, your service users might be organisations rather than individuals. The term also includes other people who might be affected by your practice, such as carers and relatives.

We have used the phrase ‘care or services’ in most places in this document to describe the different work that registrants carry out. Where appropriate to the standard we have used the word ‘treatment’.

Changing these standards in the future

We produced these standards after speaking to our stakeholders about how the standards were working, how they were seen and how relevant they were to registrants’ practice. We also made some minor changes (to the language but not the principle of the standards) when we became the Health and Care Professions Council.

We will continue to listen to our stakeholders and review our standards. We may make changes to the standards in the

future to take account of changes in practice or public and professional expectations.

Contact us

If you are not sure how to interpret the standards, you should write to our Director of Policy and Standards at the following address.

Policy and Standards Department
The Health and Care Professions Council
Park House
184 Kennington Park Road
London
SE11 4BU

Email: policy@hcpc-uk.org

The standards of conduct, performance and ethics

1 You must act in the best interests of service users.

You are personally responsible for making sure that you promote and protect the best interests of your service users. You must respect and take account of these factors when providing care or a service, and must not abuse the relationship you have with a service user. You must not allow your views about a service user's sex, age, colour, race, disability, sexuality, social or economic status, lifestyle, culture, religion or beliefs to affect the way you deal with them or the professional advice you give. You must treat service users with respect and dignity. If you are providing care, you must work in partnership with your service users and involve them in their care as appropriate.

You must not do anything, or allow someone else to do anything, that you have good reason to believe will put the health, safety or wellbeing of a service user in danger. This includes both your own actions and those of other people. You should take appropriate action to protect the rights of children and vulnerable adults if you believe they are at risk, including following national and local policies.

You are responsible for your professional conduct, any care or advice you provide, and any failure to act. You are responsible for the appropriateness of your decision to delegate a task. You must be able to justify your decisions if asked to.

You must protect service users if you believe that any situation puts them in danger. This includes the conduct, performance or health of a colleague. The safety of service users must come before any personal or professional loyalties at all times. As soon as you become aware of a situation that puts a service user in danger, you should discuss the matter with a senior colleague or another appropriate person.

2 You must respect the confidentiality of service users.

You must treat information about service users as confidential and use it only for the purposes they have provided it for. You must not knowingly release any personal or confidential information to anyone who is not entitled to it, and you should check that people who ask for information are entitled to it.

You must only use information about a service user:

- to continue to care for that person; or
- for purposes where that person has given you permission to use the information or the law allows you to do so.

You must also keep to the conditions of any relevant data-protection laws and always follow best practice for handling confidential information. Best practice is likely to change over time, and you must stay up to date.

3 You must keep high standards of personal conduct.

You must keep high standards of personal conduct, as well as professional conduct. You should be aware that poor conduct outside of your professional life may still affect someone's confidence in you and your profession.

4 You must provide (to us and any other relevant regulators) any important information about your conduct and competence.

You must tell us (and any other relevant regulators) if you have important information about your conduct or competence, or about other registrants and health and care professionals you work with. In particular, you must let us know straight away if you are:

- convicted of a criminal offence, receive a conditional discharge for an offence, or if you accept a police caution;
- disciplined by any organisation responsible for regulating or licensing a health or social care profession; or
- suspended or placed under a practice restriction by an employer or similar organisation because of concerns about your conduct or competence.

You should cooperate with any investigation or formal inquiry into your professional conduct, the conduct of others, or the care or services provided to a service user, where appropriate. If anyone asks for relevant information in connection with your conduct or competence, and they are entitled to it, you should provide the information.

We can take action against you if you are convicted of a criminal offence or have accepted a police caution. We will always consider each case individually to decide whether we need to take any action to protect the public.

However, we will consider rejecting an application for registration, or removing you from the Register if you are already registered, if you are convicted of a criminal offence or accept a police caution that involves one of the following types of behaviour.

- Violence
- Abuse
- Sexual misconduct
- Supplying drugs illegally
- Child pornography
- Offences involving dishonesty
- Offences for which you received a prison sentence

This is not a full list. We will always look at any convictions or cautions we find out about, and we have arrangements in place to be told about convictions and cautions involving registrants.

5 You must keep your professional knowledge and skills up to date.

You must make sure that your knowledge, skills and performance are of a good quality, up to date, and relevant to your scope of practice.

You must be capable of meeting the standards of proficiency that apply to your scope of practice. We recognise that your scope of practice may change over time.

We acknowledge that our registrants work in a range of different settings, including direct practice, management, education or research. You need to make sure that whatever your area of practice, you are capable of practising safely and effectively.

Our standards for continuing professional development link your learning and development to your continued registration. You also need to meet these standards.

6 You must act within the limits of your knowledge, skills and experience and, if necessary, refer the matter to another practitioner.

You must keep within your scope of practice. This means that you should only practise in the areas in which you have appropriate education, training and experience. We recognise that your scope of practice may change over time.

When accepting a service user, you have a duty of care. This includes the duty to refer them to others for care or services if it becomes clear that the task is beyond your own scope of practice. If you refer a service user to another practitioner, you must make sure that the referral is appropriate and that, so far as possible, the service user understands why you are making the referral.

In some circumstances, a person is entitled to be referred to another practitioner for a second opinion. In these cases, you must accept the request and make the referral as soon as you can.

If you accept a referral from another practitioner, you must make sure that you fully understand the request. You should only provide the care or services if you believe that this is appropriate. If this is not the case, you must discuss the referral with the practitioner who made the referral and, as appropriate, the service user, before you provide any care or services.

7 You must communicate properly and effectively with service users and other practitioners.

You must take all reasonable steps to make sure that you can communicate properly and effectively with service users. You must communicate appropriately, cooperate, and share your knowledge and expertise with other practitioners, for the benefit of service users.

8 You must effectively supervise tasks you have asked other people to carry out.

People who receive care or services from you are entitled to assume that you have the appropriate knowledge and skills to provide them safely and effectively. Whenever you give tasks to another person to carry out on your behalf, you must be sure that they have the knowledge, skills and experience to carry out the tasks safely and effectively. You must not ask them to do work which is outside their scope of practice.

You must always continue to give appropriate supervision to whoever you ask to carry out a task. You will still be responsible for the appropriateness of the decision to delegate. If someone tells you that they are unwilling to carry out a task because they do not think they are capable of doing so safely or effectively, you must not force them to carry out the task anyway. If their refusal raises a disciplinary or training issue, you must deal with that separately, but you should not put the safety or wellbeing of the service user in danger.

9 You must get informed consent to provide care or services (so far as possible).

You must explain to service users the care or services you are planning to provide, any risks involved and any other possible options. You must make sure that you get their informed consent to any treatment you do carry out. You must make a record of the person's decisions and pass this on to others involved in their care. In some situations, such as emergencies or where a person lacks decision-making capacity, it may not be possible for you to explain what you propose, get consent or pass on information. However, you should still try to do all of these things as far as you can.

A person who is capable of giving their consent has the right to refuse to receive care or services. You must respect this right. You must also make sure that they are fully aware of the risks of refusing care or services, particularly if you think that there is a significant or immediate risk to their life.

You must keep to your employers' procedures on consent and be aware of any guidance issued by the appropriate authority in the country you practise in.

10 You must keep accurate records.

Making and keeping records is an essential part of providing care or services and you must keep records for everyone you treat or for whom you provide care or services. You must complete all records promptly. If you are using paper-based records, they must be clearly written and easy to read, and you should write, sign and date all entries.

You have a duty to make sure, as far as possible, that records completed by students under your supervision are clearly written, accurate and appropriate.

Whenever you review records, you should update them and include a record of any arrangements you have made for the continuing care of the service user.

You must protect information in records from being lost, damaged, accessed by someone without appropriate authority, or tampered with. If you update a record, you must not delete information that was previously there, or make that information difficult to read. Instead, you must mark it in some way (for example, by drawing a line through the old information).

11 You must deal fairly and safely with the risks of infection.

You must not refuse to treat someone just because they have an infection. Also, you must keep to the rules of confidentiality when dealing with people who have infections. For some infections, such as sexually transmitted infections, these rules may be more restrictive than the rules of confidentiality for people in other circumstances. We discussed confidentiality in more detail earlier in this document.

You must take appropriate precautions to protect your service users and yourself from infection. In particular, you should protect your service users from infecting one another. You must take precautions against the risk that you will infect someone else.

This is especially important if you suspect or know that you have an infection that could harm other people. If you believe or know that you may have this kind of infection, you must get medical advice and act on it. This may include the need for you to stop practising altogether, or to change your practice in some way in the best interests of protecting your service users.

12 You must limit your work or stop practising if your performance or judgement is affected by your health.

You have a duty to take action if your physical or mental health could be harming your fitness to practise. You should get advice from a consultant in occupational health or another suitably qualified medical practitioner and act on it. This advice should consider whether, and in what ways, you should change your practice, including stopping practising if this is necessary.

13 You must behave with honesty and integrity and make sure that your behaviour does not damage the public's confidence in you or your profession.

You must justify the trust that other people place in you by acting with honesty and integrity at all times. You must not get involved in any behaviour or activity which is likely to damage the public's confidence in you or your profession.

14 You must make sure that any advertising you do is accurate.

Any advertising you do in relation to your professional activities must be accurate. Advertisements must not be misleading, false, unfair or exaggerated. In particular, you should not claim your personal skills, equipment or facilities are better than anyone else's, unless you can prove this is true.

If you are involved in advertising or promoting any product or service, you must make sure that you use your knowledge, skills and experience in an accurate and responsible way. You must not make or support unjustifiable statements relating to particular products. Any potential financial reward should not play a part in the advice or recommendations of products and services you give.

Fitness to practise

When we say someone is 'fit to practise', we mean that they have the skills, knowledge, character and health to practise their profession safely and effectively.

We consider concerns raised about registrants by members of the public, employers, professionals, the police and other people and take action to protect the public. This can include cautioning a registrant, placing conditions on their registration, suspending them from practice or, in the most serious cases, removing them from the Register.

When we consider a concern about a registrant, we take account of whether the standards have been met when we decide whether we need to take any action to protect the public. We will also take account of any guidance or codes of practice produced by professional bodies.

You can find more information about the fitness to practise process in our brochures *How to raise a concern* and *What happens if a concern is raised about me?*. These brochures are available to download from our website or you can contact us to ask for a copy.

Glossary

You may not be familiar with some of the terms we use throughout this document, so we have explained them below.

Accountable

As an accountable professional, you will be responsible for the decisions you make and you may also be asked to justify them.

Autonomous

As an autonomous professional, you make your own decisions based on your own judgement.

Delegate, delegation

When a registrant asks someone else (such as a colleague, student or support worker) to carry out a task on their behalf.

Fit to practise

When someone has the skills, knowledge, character and health to do their job safely and effectively.

Informed consent

When a service user has all the necessary information in a format they can understand so that they can make an informed decision about receiving care or a particular service.

Referral

When a registrant asks another practitioner to provide care or services to a service user which are beyond the registrant's scope of practice or, where relevant, because the service user has asked for a second opinion.

Scope of practice

The area or areas of a registrant's profession where they have the knowledge, skills and experience to practise safely and effectively.

Service user

Anyone who uses or is affected by the services of registrants.

Standards for continuing professional development

Standards which link a registrant's ongoing learning and development with their continued registration.

Standards of proficiency

Standards which set out what individuals should know, understand and be able to do, in order to practice safely and effectively. Applicants must meet these standards to become registered.

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Commentary on draft standards of conduct, performance and ethics for consultation

The extent of the changes we are proposing to the structure and content of the existing standards would make tracked changes difficult to read. So we have produced this document to provide more information about the differences between the draft standards for consultation and the existing standards. We have identified where the content of the existing standards can be found in the consultation draft. We have also provided a short commentary of the main changes we have made.

Note: In the commentary column, references in brackets are to the draft standards for consultation.

Existing standard	Draft standard	Commentary
<p>1. You must act in the best interests of service users</p>	<p>1. Promote and safeguard the best interests of service users</p> <p>6. Manage risk</p> <p>7. Report concerns about safety</p>	<ul style="list-style-type: none"> • We have strengthened the requirements to treat service users and carers with respect by working in partnership with them to support informed decisions (1.1-1.3). • We have proposed a new standard (1.6) which sets a higher expectation for registrants – not only to avoid unfair discrimination in their own practice, but also to challenge discriminatory attitudes of behaviours in others. • We have replaced the requirement in the existing standard ‘not to abuse the relationship you have

		<p>with a service user' with a more positive requirement to maintain appropriate professional boundaries (1.7).</p> <ul style="list-style-type: none"> • We have created a dedicated standard on reporting concerns (7). Standard one of the existing standards refers to taking action in situations where there was 'danger' to service users. The draft standards refer to reporting concerns about 'safety and wellbeing'. We also created a dedicated standard about being open with service users and carers when things go wrong (8). • The content of standard three of the existing standards (about personal accountability and justifying decisions) has been removed and is addressed in the draft introduction.
<p>2. You must respect the confidentiality of service users</p>	<p>5. Respect confidentiality</p>	<ul style="list-style-type: none"> • We have made some relatively minor amendments to improve the clarity of this standard. • We have added in a new bullet point which reflects that in rare situations it may be legitimate to

		disclose confidential information without consent where there is an overriding public interest reason to do so (5.2).
<p>3. You must keep high standards of personal conduct</p> <p>4. You must provide (to us and any other relevant regulators) any important information about your conduct and competence.</p> <p>13. You must behave with honesty and integrity and make sure that your behaviour does not damage the public's confidence in you or your profession.</p> <p>14. You must make sure that any advertising you do is accurate</p>	9. Be honest and trustworthy	<ul style="list-style-type: none"> • We have combined the content (where still needed) of these four standards into one revised standard. • We have modernised reference to 'personal conduct' in the existing standards to refer to registrants making sure that their conduct justifies public trust and confidence in them and their profession (9.1). • We have taken the principles articulated in the existing standard on advertising to set out standards which apply to all registrants – about being honest in their practice (9.2 to 9.4). • We have removed the content in standard four in the existing standards, which was about the circumstances in which we might remove someone from the Register or decline an application for registration. This content is

		<p>guidance rather than a standard and is now found in the 'Guidance on health and character'.</p> <ul style="list-style-type: none"> • We have updated the information that we require registrants to give us to include if they are charged with a criminal offence (9.5).
<p>5. You must keep your professional knowledge and skills up to date</p> <p>6. You must act within the limits of your knowledge, skills and experience and, if necessary, refer the matter to another practitioner.</p>	<p>3. Work within the limits of your knowledge and skills</p>	<ul style="list-style-type: none"> • We have combined the content of these two standards into one revised standard. • We have removed some of the content on referrals in standard six of the existing standards. We have proposed a standard which we consider is applicable to all of the professions we regulate (3.2). • We have added a new standard about registrants keeping up to date and following any law, regulations or guidance which apply to their practice (3.4). This replaces inconsistent references to other legislation and guidance in the existing standards. • We have added a new standard about the importance of registrants seeking and listening to feedback

		from others to improve their practice (3.5).
7. You must communicate properly and effectively with service users and practitioners	2. Communicate appropriate and effectively	<ul style="list-style-type: none"> • We have set out what we mean by appropriate and effective communication with service users and carers (2.1-2.4). • We have added a new standard to be more explicit about the expectation that registrants will share relevant information with colleagues (for example, when they are working as part of a multi-disciplinary team which is treating or caring for a service user) (2.6). • We have added a new standard about appropriate and responsible use of social networking sites (2.7).
8. You must effectively supervise tasks that you have asked other people to carry out	4. Delegate appropriately	<ul style="list-style-type: none"> • We have reworded the standard to focus on its content – delegation. The existing standard is sometimes not well understood because it refers to ‘supervision’. • We have replaced references to ‘supervision’ with ‘oversight and support’ (4.2).

<p>9. You must get informed consent to provide care or services (so far as possible).</p>	<p>Make sure you have consent (1.4)</p>	<ul style="list-style-type: none"> • A dedicated standard on consent has been removed and replaced with 1.4 under standard one. • We have proposed the wording in 1.4 to make sure that the standard is applicable to all of the professions we register including those where service users do not always engage freely. The new wording is also inclusive of emergency situations where consent may not be possible or necessary or other situations where service users may lack capacity to consent.
<p>10. You must keep accurate records</p>	<p>10. Keep records of your work</p>	<ul style="list-style-type: none"> • The content of this standard has been updated to be clearer and applicable to both paper-based and electronic record keeping. • Some content, for example, requirements to countersign records of students, has been removed. We considered that this content was in excess of that required in standards of this type and would be better determined locally.

<p>11. You must deal fairly and safely with the risks of infection.</p> <p>You must limit your work and stop practising if your performance or judgement is affected by your health.</p>	<p>6. Manage risk (in particular 6.3 on managing your health)</p>	<ul style="list-style-type: none"> • We have removed the standard on infection control because we consider that it is unnecessary and that some of the content is out of date and not applicable to all professions. The dedicated standard on health has also been removed. • The relevant content / underlying principles of these standards are captured elsewhere in the draft. The wording of 6.3 in particular requires registrants to manage their health. The wording is inclusive of all health conditions which might put others at risk, including infectious diseases.
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