

Education and Training Committee

Minutes of the 98th meeting of the Education and Training Committee held as follows:

Date: Thursday 11 March 2021

Time: 10am

Venue: MS Teams

Members: Maureen Drake (Chair)
Helen Gough
Luke Jenkinson
Penny Joyce
Kathryn Thirlaway

In attendance:

Claire Amor, Head of Governance
Zoe Allan, Governance Coordinator
John Archibald, Education Officer
Patrick Armsby, Education Officer
Matthew Clayton, Senior Policy Officer
Virginia de La Hamayde, National School of Healthcare Science
Brendon Edmonds, Head of Education
Jacqueline Ladds, Executive Director of Policy and External Relations
Tracey Samuel Smith, Education Manager
Niall Gooch, Education Officer
Charlotte Rogers, Policy Lead
Andy Smith, Executive Director of Regulation
Katherine Timms, Head of Policy and Standards
Sam Vale, Insight and Intelligence Manager

Public Agenda

Item 1 – Chair’s welcome and introduction

- 1.1 The Chair welcomed members and the Executive to the meeting, noting it was the first meeting of the new membership of the Committee. She extended a welcome to Virginia de La Hamayde, National School of Healthcare Science who had joined the meeting as an observer.

Item 2 - Apologies for absence

- 2.1 No apologies were received

Item 3 - Approval of agenda

- 3.1 The Committee approved the agenda

Item 4 - Declaration of members’ interests

- 4.1 No public interests were declared.

Item 5 - Public minutes of the Education and Training Committee meeting of 12 November 2020 (ETC 01/21)

- 5.1 The Committee approved the public minutes of its meetings of 12 November 2020

Item 6 - Matters arising (ETC 02/21)

- 6.1 The Committee noted the matters arising.

Items for discussion/approval

Item 7 - Online Materials for Reflective Practice (ETC 03/21)

- 7.1 The Committee received a paper from the Senior Policy Officer.
- 7.2 The Committee noted the following points:-
 - the materials aimed to communicate the importance of reflective practice for CPD as well as giving clarity on how the HCPC would treat reflective practice statements in FtP cases;
 - the HCPC had committed to producing materials on reflective practice following the Williams Review, the rapid policy review into gross negligence manslaughter in healthcare. The materials also supported the delivery of the HCPC’s Professionalism and Prevention Framework;
 - stakeholder workshops were held to inform the development of the materials; and

- the online case studies would be kept current.
- 7.3 The Committee welcomed the materials, in particular the case studies, noting the particular benefit to sole practitioners without wider system support.
- 7.4 The Committee questioned the absence of a case study from an NHS setting. The Executive noted that a previous NHS setting case study had been removed due to quality, and that not having an NHS setting case study was unintentional. The Executive agreed that this oversight would be rectified before presentation to Council.
- 7.5 The Committee discussed how the materials would be promoted. It was noted that a communications plan had been developed to launch as soon as Council approved the publication of the materials. This would include the all-registrant newsletter, as well as direct engagement with key sector stakeholders including Chief AHPs, Chief Scientific Officers and professional bodies.
- 7.6 The Committee welcomed the materials and agreed to recommend that the Council publish the materials subject to the inclusion of an NHS setting case study.

Item 8 - Advance Practice update (ETC 04/21)

- 8.1 The Committee received a paper from the Policy Lead.
- 8.2 The Committee noted the following points:-
- at the end of February and beginning of March 2020, the HCPC hosted a two-part workshop with key stakeholders to identify evidential gaps and further work needed before the Council could make an informed decision on an advance practice regulatory approach;
 - one of the evidence gaps identified would be met through targeted research with employers from a cross-section of employer types, across settings and geographies led by Community Research; and
 - other evidence would be sought through further exploration of data sources in relation to potential additional risk to patient safety presented by advanced practice, including engagement with medical colleges.
- 8.3 The Committee noted that the workshop did not include participation from the Northern Ireland (NI) Chief Allied Health Professions Officer, who was unable to attend. The Executive would ensure the NI perspective was engaged in its further work on the evidence base.
- 8.4 The Committee welcomed engagement with the medical colleges. It was noted that the workshop had crystallised understanding of sector concern on the use of advance practice as a medical substitution rather than a specialism within a discipline. The Committee agreed that engagement with the colleges would also help in the definition of advance practice as the practice of complex risk decision making rather than solely an additional set of skills.

- 8.5 The Committee discussed service user engagement undertaken. It was noted that research in the autumn of 2020 had shown that service users wanted to be able to look up their advance practice practitioners on a register to ensure they had the correct education and training.
- 8.6 The Executive noted that the workshops had surfaced the need to build consensus on a definition of advance practice as a starting point as there were significantly differing views from stakeholders. The Committee agreed, noting that this consensus needed to be four country consensus also.
- 8.7 The Executive noted that advance practice could require a more iterative implementation, in contrast to the approach taken to podiatric surgery.
- 8.8 The Committee noted that the education and training requirements for advance practice was a strong theme in the workshops. There was no consensus on a level 7 award, and strong arguments for the importance instead of experiential learning.
- 8.9 The Committee asked if the planned further research would fill the evidence gaps for the regulatory approach to advance practice. The Executive noted its confidence that these activities would provide what was required.

Item 9 - Continuing Professional Development Review (ETC 05/21)

- 9.1 The Committee received the paper from the Insight and Intelligence Manager
- 9.2 The Insight and Intelligence manager provided the Committee with an overview of his remit. It was noted that his priorities were EDI data analysis, the varying FtP risks for registrant cohorts, as well as the HCPC's approach to CPD and any link to FtP.
- 9.3 The Committee noted that in 2017, the HCPC commissioned research into the link between CPD and FtP cases with the result that no link could be established. The Executive wished to revisit this area to interrogate the data in more depth, in the context of reviewing the HCPC's approach to CPD.
- 9.4 The Executive sought the Committee's view on the proposed intelligence gathering steps for the review of the HCPC's approach to CPD.
- 9.5 The Committee noted the difference between, and need to differentiate between, CPD activity undertaken to ensure ongoing threshold safe practice, and CPD activity focused on gaining additional skills and career development.
- 9.6 Helen Gough noted that the Audit and Risk Committee had, at its most recent meeting, considered an internal audit of the HCPC's planned approach to intelligence gathering. Those discussions had focused on the need to ensure effective governance of the data, but had concluded that the HCPC's proposed approach was sound.
- 9.7 The Committee asked if benchmarking data would be included in the review. The Executive noted that a review of other regulators approaches would be

undertaken. The Committee suggested that the CQC be approached for any relevant data sets they may hold.

- 9.8 The Committee noted the need to review different practice settings and their impact on CPD and FtP.
- 9.9 With the suggestions provided during the discussion noted, the Committee agreed that the proposed intelligence gathering steps were appropriate.

Item 10 – Education provider and visitor survey 2020-21 (ETC 06/21)

- 10.1 The Committee received a paper from the Education Officer.
- 10.2 The Committee noted the following points:-
- the survey took place from October to November 2020 and covered activity over the previous two academic years;
 - the results would feed into the ongoing new QA model development; and
 - the feedback gathered was generally positive, with some areas noted for improvement for which recommendations were presented.
- 10.3 The Committee noted that the paper positioned the results as positive but that that one fifth of respondents were not satisfied, a rate which would be considered significantly concerning for an education programme survey of student satisfaction. The Committee noted the downward trend in the perception of fair and transparent application of the standards, as well as areas such as collaboration.
- 10.4 The Committee asked if the Executive had undertaken any benchmarking of the data against comparable regulators of education programmes. The Executive confirmed it had not benchmarked against other organisations and agreed that the results were concerning and were a drive behind the work on the new QA model to address the proportionality of the HCPC's approach.
- 10.5 The Committee noted the work on the new QA model but agreed that some of the negative results from the survey were about issues that could continue into the new model without corrective action, such as consistent Executive engagement and Visitor inconsistency. The Executive agreed this point and noted that the five areas identified for improvement in the survey would be considered as part of the development of the new QA model.
- 10.6 The Committee asked if more frequent feedback could be monitored as once every two years did not feel sufficient for assurance. The Executive agreed, noting that performance indicators would be included in a new standing Education Report from the June 2021 meeting of the Committee. The Committee welcomed this noting that statistical process control was important to be able to identify points to take action in response to emerging downwards trends.

10.7 The Committee welcomed the report as a valuable insight but noted its concern at the findings. The Committee noted the Executive's commitment to ensure the learning was embedded in the new QA model and urged a focus on the right culture as well as the right process.

Item 11 - Education QA model update and evaluation of first pilot cycle (ETC 07/21)

11.1 The Committee received a paper from the Head of Education.

11.2 The Head of Education provided an overview of the status report. The Committee noted the following points:-

- all workstreams were progressing to plan. The wider education team had been included in the operation of the model in preparation for the widening of participants through pilot cycle two;
- the Evaluation of the second cycle would be presented to the June meeting of the Committee; and
- work was underway in collaboration with the Governance team to establish the Committee's needed governance oversight of the new model in operation.

11.3 The Head of Education provided an overview of the evaluation of pilot cycle one. The Committee noted the following points:-

- the results of pilot one indicated that all 19 measures could be achieved, with the caveat that the pilot size was small. Pilot cycle two would provide valuable data on the scalability of the positive results of cycle one;
- feedback showed that the pilot process was adding value through coproduction, there were less Visitor recommendations than would normally be expected;
- the risk model had added value in defining and considering risk within Visitor assessments. The data focus of the new model had resulted in feedback from Visitors that they better understood the context of a providers performance; and
- the review identified a need to further develop supporting information and guidance for providers and to communicate the benefits of the front loading of approval burden as reducing the ongoing burden of monitoring.

11.4 The Committee noted the feedback from providers on the positive support of the Executive in the new model. The Committee questioned if this was sustainable in a full roll out, noting that more information was needed on the resource demands on the executive in running the pilot. The Head of Education agreed that a full roll out would require consideration of the best

way to structure the department, noting that a regional focus approach could be followed.

- 11.5 The Committee noted the aims of the project of achieving efficiencies and questioned if this would be possible if intensive executive support was to be sustained, the Committee requested information on efficiency realisation in future reports. The Committee also requested information on the resource impact on the Executive, Visitors and Providers.
- 11.6 The Committee noted eight measures were reported as limited or no progress. The Executive explained that this was due to either the measure not being at testing stage, gaps that had been identified in reporting, or where refinements were needed. The Executive noted the only concern from these amber rated measures was the indication of burden to providers, work was ongoing to alleviate this where possible.
- 11.7 The Head of Education agreed that the next iteration of the update would be structured into the themes of:
- the split application of the SETs;
 - perceptions of risk based Visitor inquiry;
 - success of a data led approach;
 - guidance and business process development;
 - understanding the burden of the new model through closer monitoring;
 - Visitors reports adequately capturing rationale for the application of the model;
 - achieving efficiencies.
- 11.8 The Committee agreed that progression to cycle two of the pilot should commence, but agreed that closer monitoring of the metrics of impact and efficiency realisation were required.

Item 12 - Registration Department performance report July 2020 to December 2020 (ETC 08/21)

- 12.1 The Committee received the paper from the Head of Registration.
- 12.2 The Committee noted the following points:-
- the report covered the performance of the registration department between July and December 2020;
 - a shortage of fully trained Registration Advisors, the impact of the pandemic and the post launch new registration system issues attributed to a number of service standards not being met;
 - due to the pandemic, CPD audits for chiropodists / podiatrists and hearing aid dispensers were cancelled. Audits recommenced flexibly with operating department practitioners;

- two temporary emergency registers were in operation in the reporting period.
- a new registration system was launched in October which included enhanced online services. Work was underway to develop fully online registration.

12.3 The Committee noted that remote telephony was not in place at the start of the pandemic, the HCPC implemented this quickly and a more comprehensive system was in development which would provide management data, which is not available with the current remote telephony.

12.4 The Committee asked if there was a CPD backlog as a result of the pandemic. The Executive confirmed that there was no backlog and audits were being processed to normal services standards.

12.5 The Committee noted that there had been an increase in international applications at the start of 2021, which was understood to be the result of NHS recruitment drives.

12.6 The Committee noted the report.

The Committee noted the following items:

Item 13. Engagement within the new Education QA model for newly commissioned AHP provision in Wales (ETC 09/21)

Item 14. Degree apprenticeship review 2019-20 (ETC 10/21)

Item 15. Education annual data set: 2019-20 academic year (ETC 11/21)

Item 16. Education and Training Committee forward workplan (ETC 12/21)

Item 17 - Any other business

17.1 There was no further business.

Item 18 - Date and time of next meeting

18.1 Thursday 10 June - Virtual

Signed

Date