

# Council of Deans of Health Response to the Professional Standards Authority for Health and Social Care Performance Review 2013

5 December 2013

# The Council of Deans of Health

The Council of Deans of Health is the representative voice of all 85 UK university health faculties engaged in education and research for nursing, midwifery and the allied health professions. The Council of Deans of Health (CoDH) welcomes the opportunity to respond to this consultation.

# **Consultation questions**

### Q1. Since January 2013, which regulator have you been in contact with?

The Council of Deans of Health has contact with the Nursing and Midwifery Council (NMC) and the Health and Care Professions Council (HCPC).

## Q2. Why were you in contact with the regulator?

The NMC and the HCPC are the regulators for the professions that we cover and set the standards for education.

# Q3. When in 2013 were you in contact with the regulator?

Our members are in regular contact with the NMC and HCPC over the quality assurance of education programmes, including revalidation and approval, major changes or amendments to programmes and annual monitoring.

As a Council we also engage with the regulators at UK level, meeting regularly with staff at both the NMC and HCPC. The Council is represented on a number of advisory and working groups for the NMC, including the NMC Education Advisory Committee and the Revalidation Strategic Advisory Group.



In 2013 we responded to the following consultations:

- HCPC consultation on profession-specific standards for prosthetists, orthotists, chiropodists and podiatrists (March 2013)
- HCPC consultation on profession-specific standards for speech and language therapists (June 2013)
- HCPC consultation on guidance for registrants about the statutory requirement to have appropriate professional indemnity cover as a condition of registration (July 2013)
- NMC Professional indemnity insurance engagement exercise (September 2013)
- HCPC consultation on profession-specific standards of proficiency for operating department practitioners (October 2013).

In addition, in October we published a position paper on the education threshold for operating department practitioner (ODP) pre-registration courses. The paper makes the case to the HCPC for raising the threshold for ODP pre-registration programme from the current Diploma of Higher Education (DipHE) level to a Bachelors degree with honours (BSc Hons).

# Q4. What was your experience in dealing with the regulator? Please tell us what was good about your experience and where your experience could have been improved.

As in 2012, the Council's experience of working with the HCPC and NMC has been broadly positive. Members have not reported any particular concerns with the HCPC. The NMC has continued to act on the direction of travel set out in 2012, putting in place significant changes to its approach to education regulation. This has been done in a context in which the NMC's regulatory role has often been contested by one of the new arm's length bodies in England. Although numerous challenges remain, we continue to support the efforts of the NMC to develop a more proportionate and risk-based model of education regulation.

### **HCPC**

The HCPC's continued revision of the profession-specific standards for education has ensured that the pace of consultations has remained relatively high in 2013. However, scheduling has allowed sufficient time to gather members' views and this has therefore not proved problematic.



In other areas of the HCPC's work, we have welcomed its willingness to explore the implications of the second Francis Inquiry for registrants, despite the professions covered by the HCPC not being mentioned within the Inquiry.

#### **NMC**

Last year we highlighted four central issues on which we wished to see the NMC make continued progress in 2013:

- An efficient quality assurance (QA) system focused on outcome not process
- · Acting in line with risk
- Engagement of stakeholders in problem definition
- UK-wide engagement

The redesign of the NMC's QA process this year has been underpinned by the intention to focus on risk and create a more proportionate system, for example by visiting 16 institutions, chosen through risk profiling. If the new system fulfils its intentions, it should provide a more proportionate and risk-based system. However, as the deadline for universities to submit data under the new regime has only just passed and the self-reporting deadline is still to come, it is too early to judge whether the new system has reduced burden and encouraged reviews that look at outcome rather than process. As a whole, the new system needs to be tested before we can evaluate whether the approach is more risk-based in practice. We will be able to give more detailed feedback on this in 2014.

There has continued to be a marked shift towards better engagement with the Council as stakeholders. The establishment of the NMC's Education Advisory Group, which will advise NMC Council on education strategy and of which we will be members, is a positive development. We have also noted efforts to seek a UK-wide perspective on a number of important issues, including revalidation.

There are two areas of concern we wish to highlight:

# Revalidation

The NMC's development of revalidation under time and cost pressure is an area of significant risk. Many of the conditions are not of the NMC's making; however we continue to be concerned that the financial model for revalidation, explanation of important processes that underpin revalidation and the development of a risk-based



approach appear to be relatively nascent. In 2014 we will be looking to see these areas addressed as urgent priorities through the Revalidation Stakeholder Advisory Group.

# **Indemnity Insurance**

The transposition into UK law of the EU's Directive on cross border care has placed an obligation on both the NMC and HCPC to require registrants to have appropriate indemnity insurance. We believe that the draft guidance from both regulators has been relatively unclear for our members. This carries a risk that some educators may leave the register. We have called for both regulators to issue clearer guidance that will support educators and researchers ensure that they know what they need to do to comply with the new conditions to be on the register

### Contact for further information:

Elisabeth Jelfs, Director of Policy Elisabeth.jelfs@cod-health.ac.uk