

Agenda Item 9

Enclosure 7

Paper ETC 7/03

Education and Training Committee

**STANDARDS OF PROFICIENCY : STANDARDS FOR
APPROVAL**

from the Secretary

for discussion and decision

Draft common framework of standards of proficiency

1 Expectations of a health professional:

1a Professional autonomy and accountability

The registrant must be able to:

- understand and practice within the legal and ethical responsibilities of professional practice;
- maintain the principles and practice of patient/client confidentiality;
- be aware of and understand the concept of informed consent and practice accordingly;
- exercise a professional duty of care to patients/clients/carers;
- recognise the limits of his/her practice;
- recognise the obligation to maintain fitness for practice.

1b Professional relationships

The registrant must be able to:

- recognise professional and personal scope of practice and make referrals where appropriate;
- work, where appropriate, with other health and social care professionals, support staff and patients/clients/carers
- demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, patients, clients, their relatives and carers;
- demonstrate continuation of this communication throughout the care of the client/patient.

2 The skills required for the application of practice:

2a Identification and assessment of health and social care needs

The registrant must be able to adopt a systematic approach to:

- collecting case histories and other appropriate information;
- undertaking or arranging clinical investigations as appropriate;
- analysing and evaluating the information collected;
- using appropriate assessment techniques.

2b The formulation and delivery of plans and strategies for meeting health and social care needs

The registrant must be able to:

- use reasoning and problem solving skills to make judgements/decisions in determining appropriate actions;
- formulate specific and appropriate management plans, including treatment and prognosis as necessary, for meeting needs/problems, setting these within a timescale;
- conduct appropriate treatment/therapy or other actions safely and skillfully and in accordance with best/evidence-based practice;
- maintain records appropriately including notes on professional judgements, decisions taken and treatment or advice given.

2c The critical evaluation of the impact of, or response to, their actions

The registrant must be able to:

- monitor and review the ongoing effectiveness of the planned activity and modify accordingly;
- audit, reflect on and review practice.

3. Knowledge and understanding

The registrant must be able to demonstrate a broad understanding of:

- how professional principles are expressed and translated into action through a number of different treatment and management approaches and how to select or modify techniques to meet the needs of an individual;
- models of health, disease and illness and how these inform a critical consideration of patient care and management;
- the structure and function of the human body, relevant to their practice, together with a knowledge of disease, disorder and dysfunction;
- the need for and utilisation of, a safe clinical environment.

ITEM 9: STANDARDS OF PROFICIENCY

Attached is a report of the outcome of the discussions on 6 February 2003.

This is an informal working document and along with it were some suggestions for emendations to the circulated Standards of Proficiency.

These suggestions are picked out in larger text for approval by the Committee.

(The questions raised are mostly for detailed reponse on the legal aspects of the exercise, and a reply is in hand).

10 February 2003

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Dear Marc

Standards of Proficiency: Meeting of the 12 working groups on 6 February 2003.

I am writing, as project manager regarding the above, for two purposes. First, in order to report back to you on the meeting. Secondly, as instructed by the groups as a collectivity to seek answers to and further clarification on a number of questions/issues.

The meeting was organised so that the 12 working groups would each be able to agree on a draft document for consultation amongst the respective professional communities. I am pleased to report that this objective was achieved and the consultation process will begin within the next 7 – 10 days when the drafts will have been finalised and the mailing lists established. However, I believed it was important that the groups should meet in plenary session at the beginning of the day in order to discuss the implications of the legal advice received by HPC and also its decision to re-launch on 1 April 2003. For that purpose I had prepared a note of explanation which was distributed beforehand and I attach a copy of that to this letter. I also tabled at that plenary session the draft common framework of standards of proficiency.

I think it fair to say that the documents provoked a lively discussion both at that initial session and at a subsequent plenary session in the day. However, what is important for you and the Council to know is that when all was said, there was a readiness to work within the modified context and timetable, and that this could be achieved without challenging the objectives of the project as originally planned.

The groups feel very strongly about the importance of consultation nevertheless, reflecting as it does the commitment of the Council to work in partnership with all the interested and relevant bodies. Indeed the first principle of the project is respect for the integrity of the individual professions and professional bodies, albeit within the new regulatory framework of the Council. The groups agreed that as a practical way forward, the draft common framework, with some minor amendments could be submitted for the Council's re-launch on 1 April, but should not be regarded as an endorsement by the groups as a collectivity of the content or of the process by which it was produced. Given that the groups have confidence enough to go out to consultation on the profession – specific drafts, they believe the drafts can be used purposefully in the short-term should the Council have the need to process applications from any would-be registrants for entry on to any specific section of the register. On this basis, the project will continue to work to its original schedule, with the final meeting of the groups on 15 April 2003 considering responses to the consultation and agreeing amendments accordingly.

In all these circumstances, the groups are particularly anxious to have clarification about the nature and status of the relationship between the common framework for and the profession-specific expression of, standards of proficiency. The answers to the following questions are key to this clarification.

- Y • If the common framework will have a legal status, what is the status of the profession – specific documents?
- Y • Will the Council publish the profession- specific documents and will their publication confer any particular status on them (will they become legal cf. Road Traffic legislation and the Highway Code)?
- NO • Will the Council reassure the professional communities involved, that in dealing with applicants post 1/4/03 that the common framework will not alone be the basis for making a judgement?
- W • If the profession-specific documents are to be regarded as guidelines or as possibly a code of practice with respect to standards of proficiency will the Council highlight this essential connection in the re-launch on 1 April 2003?
- Y • Is there to be any consultation process associated with the common framework?
- HPG • Who will prepare the assessment criteria for judging applications, when will the criteria be developed and will they draw from the profession – specific documents?
- How often will the standards of proficiency be reviewed and redrafted accordingly?

dynamic

The sentiments expressed with regard to having clarity in the relationship, (and for that to be explicit in the re-launch), between the common framework and the profession specific statements was very strong and the groups have raised expectations that they can have reassurance about this in the next week or so. It is also important that this clarification is sufficiently explicit so that the status and title of the documents that go out to consultation can be determined.

I am copying this letter to Diane Waller and Peter Burley so that they both have sight of it prior to the meeting of the Education and Training Committee later this week. Copies also go at this stage to the chairs/convenors of the working groups.

Yours sincerely

Mike Laugharne
Project Manager: Standards of Proficiency

Enc

Draft common framework of standards of proficiency

**DRAFTING/REVISING COMMENTS MADE AT THE
WORKSHOP ON 6 FEBRUARY 2003.**

1 Expectations of a health professional:

1a Professional autonomy and accountability

The registrant must be able to:

- understand and practise within the legal and ethical responsibilities of profession-specific practice;
- maintain the principles and practice of patient/client confidentiality;
- [be aware of and **delete words in brackets**] understand the concept of informed consent and practice accordingly;
- exercise a professional duty of care to patients/clients/carers;
- recognise the limits of his/her practice;
- recognise the obligation to maintain fitness for practice;
- **seek advice and guidance as appropriate.**

1b Professional relationships

The registrant must be able to:

- recognise professional and personal scope of **their** practice and make referrals where appropriate;
- work, where appropriate, with other health, **health education** and social care professionals, support staff and patients/clients/carers
- demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, patients, clients, their relatives and carers;
- demonstrate [continuation of this **delete words in brackets**] communication throughout the care of the client/patient.

2 The skills required for the application of practice:

2a Identification and assessment of health and social care needs

The registrant must be able to [adopt a systematic approach **delete words in brackets**] be effective in:

- case-history taking and gathering of other appropriate information;
- using appropriate assessment techniques; [nb. order changed in this section]
- undertaking or arranging clinical investigations as appropriate;
- analysing and evaluating the information collected.

2b The formulation and delivery of plans and strategies for meeting health, health education and social care needs

The registrant must be able to:

- use reasoning and problem solving skills to make judgements/decisions in determining appropriate actions;
- formulate specific and appropriate management plans, including treatment and prognosis as necessary, for meeting needs/problems, setting these within a timescale;
- conduct appropriate treatment/therapy or other actions safely and skillfully and in accordance with best/evidence-based practice;
- maintain records appropriately including notes on professional judgements, decisions taken and treatment or advice given.

2c The critical evaluation of the impact of, or response to, their actions

The registrant must be able to:

- monitor and review the ongoing effectiveness of the planned activity and modify accordingly;
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3. Knowledge and understanding

The registrant must be able to demonstrate a broad understanding of:

- how professional principles are expressed and translated into action through a number of different treatment and management approaches and how to select or modify techniques to meet the needs of an individual;
- models of health, disease and illness and how these inform a critical consideration of **client/patient** care and management;
- the structure and function of the human body, relevant to their practice, together with a knowledge of disease, disorder and dysfunction;
- the need for and utilisation of, a safe clinical environment;
- **social and psychological sciences, as relevant to their practice; & key concepts of the disciplines that underpin their practice.**

Additional drafting suggestions:-

- 1. Consider reducing further the level of detail overall, or ...**
- 2. Include in section 3 references to capability in respect of:**
 - **IT and numeracy,**
 - **Self-management of work/case load,**
 - **Life-long learning**