

28 June 2016

Health and Care Professions Council (HCPC) response to Department of Health consultation: 'Reforming healthcare education funding: creating a sustainable future workforce'

1. Introduction

- 1.1 The Health and Care Professions Council welcomes the opportunity to respond to this consultation.
- 1.2 The Health and Care Professions Council is a statutory UK-wide regulator of health, social work and psychological professions governed by the Health and Social Work Professions Order 2001. We regulate the members of 16 professions. We maintain a register of professionals, set standards for entry to our register, approve education and training programmes for registration and deal with concerns where a professional may not be fit to practise. Our main role is to protect the health and wellbeing of those who use or need to use our registrants' services.

2. General comments

- 2.1 We make a small number of general comments below about the role of the professional regulators of health and care professionals.
- 2.2 Much of the consultation document raises issues which concern education delivery and workforce which are outside of our remit. We have therefore responded only to those consultation questions which are most directly relevant to our role.
- 2.3 We note that the lists of professions in paragraphs 3.2 and 3.4 refer to 'orthotics' twice. We assume that this is an error and that reference was intended to the profession of 'orthoptics'.

3. Quality assurance of pre-registration education programmes

- 3.1 There is no reference in the consultation document to the crucial role of the nine UK regulators of health and care professionals in quality assuring pre-registration education and training leading to registration.
- 3.2 We assess education programmes against our standards of education and training and standards of proficiency to ensure that only someone who successfully completes a programme which meets our standards is eligible to become registered. A programme has to continue to meet our standards to remain approved. This is an important safeguard that ensures public protection.
- 3.3 The consultation document sets out the Government's aspiration to allow education providers the flexibility to meet demand through increasing the number of places on programmes. Whilst regulation is not a barrier to that

happening, it is important to note that for any programme wishing to substantially increase numbers we would need to see clear evidence that they were able to do so without comprising quality. We will only agree increases to cohort numbers where programmes can demonstrate that they meet our standards – for example, that they have sufficient physical resources and staff numbers to deliver the programme effectively.

4. Consultation questions

Question 1: After reading the list of impacted undergraduate and postgraduate courses, are there further courses which you consider should be included in the scope of the reforms? If yes, what are these courses and why would the current funding and delivery models require their inclusion?

4.1 The consultation document does not list paramedic programmes as one of those affected by the reforms. We understand that commissioning and funding arrangements for paramedics are currently a mixed economy. Clarity is required about arrangements for paramedics going forward, particularly given the ongoing work to reform how paramedics are educated in the future. There may be benefits in bringing funding arrangements for paramedic programmes in line with the other allied health professions.

Question 11. We would welcome respondents' views on how, in delivering these reforms, we look at the widest possible solutions to ensuring high quality clinical placements. These views will actively inform further stakeholder engagement prior to the government response.

4.2 We consider that in implementing the reforms the effective management of the availability, capacity and quality of practice education is crucial. We welcome the Government's stated ambition of ensuring access to high quality placements which ensure students receive an outstanding experience.

4.3 In our approval process, practice placements is the area in which we impose the highest number of conditions. Even in the current commissioned environment, finding suitable placements can be a challenge for education providers. Without careful management, the availability of high quality practice placements could be an effective barrier to increasing numbers. High quality practice placements includes education providers demonstrating to us that the following is in place:

- The number and quality of supervisors and educators is proportionate to the number of students.
- Supervisors and educators have the knowledge and experience necessary to deliver effective practice education.
- Students have a range of placements which allows them to work in different settings and with different client groups.

4.4 In the absence of direct commissioning arrangements, partnership working between employers and universities will be even more crucial. It is crucial that placement capacity is managed both within each partnership and within the

wider region, recognising that students from multiple HEIs may require placements at the same service providers.

- 4.5 The above highlights the areas where we frequently set conditions because such considerations have been overlooked.
- 4.6 The Government may need to consider what additional support it might provide to facilitate such partnerships and joint-working at a regional level. The Government may also need to consider how it might best support growth in high quality 'non-traditional' placements in the third sector, to supplement the availability and capacity of NHS placements.