

Education and Training Committee 11 March 2021

Continuing Professional Development Review

Executive Summary

Continuing professional development (CPD) is the way in which registrants continue to learn and develop throughout their careers so they keep their skills and knowledge up to date and are able to practise safely and effectively.

This paper sets out the Executive's plans to review our approach to CPD to ensure it remains fit for purpose and continues to ensure safe and effective practice

Previous consideration	This is an overview of the Executive's plans for the CPD review – no previous papers have been considered
Decision	The Committee is asked to discuss the approach proposed
Next steps	Commence the data analysis in Q1 2021/22
Strategic priority	'Promote high quality professional practice'
Financial and resource implications	Resourced through existing resources and embedded in workplans
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Introduction

HCPC registrants renew every two years and must declare that they continue to meet the HCPC standards, including the CPD standards. We audit a random sample of 2.5% of registrants who must submit a report on their CPD.

Past research findings

In 2017 we published <u>independent research by Newcastle University</u> which explored the evidence for assuring continuing fitness to practice of HCPC registrants under our current model. The report found no clear difference in the CPD profiles of those referred to fitness to practise cases and the control group and found evidence to support the effectiveness of the current model. It has been some time since the research was undertaken, and so we are considering our position again to ensure it remains fit for purpose and continues to ensure safe and effective practice by our registrants.

Intelligence gathering to inform our review

We are currently undertaking a review of our fitness to practise data to identify and assess the risks that arise from the different kinds of professional practice we regulate and inform our understanding of the root causes of unprofessional behaviours and risk of harm. Once complete we propose viewing the outcomes of this analysis through the lens of CPD to enable us to assess the risk factors leading to FTP referral such as profession and length of time in practice and establish what mechanism we might need to implement in CPD to mitigate these risks.

We will couple this with a review of the data we hold for registrants who fail their CPD audit or require further time, to better understand what changes, if any, we need to make to our existing processes. We anticipate this work starting in Q1. Once we have the initial findings, we will assess what next steps are required to progress this work and provide a further update to ETC.

Views sought

We would welcome ETC's view on the intelligence gathering steps proposed above, and ETC's thoughts on any further information sources or approaches which might be helpful in establishing the evidence required for the HCPC's review of its approach to CPD.