

Proposal Cover Note

22 December 2020

Over the last few months the Board of the Registration Council for Clinical Physiologists (RCCP) has been looking at the possibility of working more closely with the Academy of Healthcare Science (AHCS). These discussions took place in the context of a review of accredited registers by the Professional Standards Authority (PSA), pressure on the costs of running registers and the growing need for patients to have a simpler way of identifying clinical physiologists and understanding their roles.

Both organisations operate and manage approved PSA Voluntary Registers for clinical physiologists. The work has sought to consider how the organisation's might best work together in the interests of patient safety, public confidence and provide clarity for professionals, the profession, employers and educators.

Both organisations are now ready to move to the next stage of the process which will involve a detailed evaluation of the preferred option. As part of the process we very much want to hear your views.

Simply put, the proposal is to transfer the RCCP register and its activities to the AHCS.

A full description of the proposal and the reasons for its selection as the preferred option is enclosed.

Requesting your Feedback:

Once you've had an opportunity to review the proposals please click [here](#) to leave your comments in the six question boxes.

Key Points to Note:

- Firstly, should the transfer of the register go ahead you will not need to do anything; everything would be transferred to the AHCS simply and completely by the RCCP.
- Secondly, the RCCP is totally committed to a totally transparent process, and the Board will take all views into account before making a final decision on the proposal.
- Thirdly, for the time being you continue to register with your preferred Register. It is envisaged that the engagement process will be completed in early 2021, at which time a further announcement will be made about the way forward. Both organizations will continue to provide support to registrants and will deal with enquiries from the general public.

Further Information:

Please contact either Janet Monkman, CEO, AHCS on janet.monkman@ahcs.ac.uk or Mark Rawden, Interim CEO, RCCP on markrawden@rccp.co.uk.



The REGISTRATION COUNCIL For
CLINICAL PHYSIOLOGISTS

The future of RCCP registration

A document seeking feedback on proposals to transfer the Registration Council for Clinical Physiologists' Register and its functions to the Academy for Healthcare Science.

1. Introduction	2
About the Registration Council for Clinical Physiologists.....	2
How to provide your feedback	2
How we will use your feedback.....	3
2. Our proposals.....	4
About the Academy for Healthcare Science	4
Why are we proposing to transfer the Register?	4
If the Register transfers, what would this mean?	6
3. Implementation.....	9

1. Introduction

- 1.1 We - the Registration Council for Clinical Physiologists (RCCP) - are seeking feedback on proposals to transfer our Register and its functions to the Academy for Healthcare Science (AHCS). This would create a single registration body for the clinical physiology professions.
- 1.2 This document outlines our proposals and what, if implemented, they would mean for our stakeholders.
- 1.3 Please note that the roles of the RCCP and AHCS remain unchanged at this time. Therefore, practitioners should continue to register, and remain registered, with their preferred register.

About the Registration Council for Clinical Physiologists

- 1.4 The RCCP holds a Professional Standards Authority (PSA) accredited register ('the Register') for practitioners in the following six disciplines of clinical physiology.
 - Audiologists (including Hearing Therapists and Educational Audiologists).
 - Cardiac Physiologists.
 - Gastro-intestinal Physiologists.
 - Neurophysiologists.
 - Respiratory Physiologists.
 - Sleep Physiologists.
- 1.5 Our main aim is public protection. We:
 - set standards;
 - accredit education and training programmes against those standards;
 - keep a register of clinical physiologists who have met our standards;
 - Encourage registrants in maintaining standards by carrying out CPD audits, and
 - investigate concerns about the fitness to practise of our registrants, taking action where we necessary to protect the public.

How to provide your feedback

- 1.6 We are committed to engaging with our stakeholders on the future of RCCP registration. We encourage and welcome your feedback on the proposals.
- 1.7 Please give us your feedback by completing the online survey:

<https://www.surveymonkey.co.uk/r/B5QXF8L>
- 1.8 We have asked the following questions in the survey:

- Q1. Do you have any comments on the rationale of our proposal to transfer the Register and its functions to the AHCS?
- Q2. Do you have any comments on our proposals about registration?
- Q3. Do you have any comments on our proposals about M-level/CSci registrants?
- Q4. Do you have any comments on our proposals about fitness to practise?
- Q5. Do you have any comments on our proposals about CPD?
- Q6. Do you have any comments on our proposals about accreditation?
- Q7. Do you have any other comments?

1.9 The deadline for providing your feedback is **22 January 2021**.

How we will use your feedback

- 1.10 Once the survey period has closed, we will consider carefully all the feedback we receive. The RCCP Board will take this fully into account before it makes a final decision.
- 1.11 We will publish a summary of the feedback we receive.

2. Our proposals

- 2.1 This section outlines our proposals for transferring the Register and its functions to the AHCS.

About the Academy for Healthcare Science

- 2.2 The AHCS is the overarching body for the whole of the Healthcare Science professions.
- 2.3 The AHCS maintains a PSA accredited register of a range of healthcare science disciplines including clinical physiologists. It also maintains directories designed for groups who are at an early stage of the journey towards registration. It works with the National School for Healthcare Science (NSHCS) to accredit education and training programmes. Like the RCCP, it sets standards and holds its registrants to its standards through Continuing Professional Development (CPD) requirements and its fitness to practise process.
- 2.4 The Academy is also approved by the Health and Care Professions Council (HCPC) to manage the Certificate of Equivalence, the successful completion of which provides an individual with eligibility to apply for HCPC registration as a clinical scientist.

Why are we proposing to transfer the Register?

- 2.5 As we both maintain PSA accredited registers of clinical physiologists, over recent months we have been working in partnership with the AHCS to explore the scope for closer working between the organisations. This is in part linked to the Government response to the consultation "*Promoting professionalism, reforming regulation*" published in July 2019.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/820566/Promoting_professionalism_reforming_regulation_consultation_reponse.pdf

- 2.6 During these conversations it has become clear to us that it would be most beneficial for our stakeholders if there was a single registration body for the clinical physiology professions. In coming together the RCCP and AHCS could better support the professionalism of all clinical physiologists under one regulatory mechanism and one set of standards.
- 2.7 At the moment, the RCCP and AHCS run rival registers. A situation where there are multiple, competing registers is clearly not in the public interest. This leads to a lack of awareness and clarity amongst stakeholders including employers about roles, responsibilities and the crucial importance of registration in ensuring public protection.

- 2.8 Transferring the Register to the AHCS would create a single registration body for the clinical physiology professions. It would also create a single registration body for all those healthcare science groups that are not regulated by law.
- 2.9 We anticipate that a single registration body will have a number of benefits:
- **Increased clarity** for stakeholders including registrants, education providers and the public. A single body and point of contact for registration of clinical physiologists will reduce confusion and make communication clearer and more effective.
 - **Increased cost-effectiveness.** Having two registration bodies as now means that there is duplication of effort – both bodies set standards, keep registers and take fitness to practise action where necessary. A single body would remove this duplication of effort. A larger body is also better able to benefit from economies of scale, cost savings which can reduce upward pressure on the level of registration fees.
 - **Influence.** A single body, with a wider healthcare science remit, is better able to influence decision makers on workforce and regulation matters.
 - **Improved public safety.** Ultimately, these anticipated benefits are all about maintaining and strengthening the contribution registration makes to ensuring public safety.
- 2.10 Having decided that we should explore the possibility of a single registration body through a transfer of the Register and its functions, we have been working with the AHCS to understand how this might work. Our main concern is to ensure that there would be a 'safe home' for everything the RCCP does, so that the public continue to be adequately protected and to ensure that our stakeholders are not disadvantaged by the change process.
- 2.11 The RCCP has achieved a considerable amount in its lifetime. Since its creation in 2001 it has devised, delivered and developed a successful system of registration for the clinical physiology professions. In 2018, the organisation received PSA accreditation, a landmark achievement, recognising that the Register meets (and continues to meet) high standards in governance, standard-setting, education and training, management of the register and handling of fitness to practise concerns. We should all be rightly proud of these achievements. The proposals to transfer the Register and its functions outlined in this document are about building on these considerable achievements to ensure a safe, sustainable future for the registration of clinical physiologists within the healthcare science family.

If the Register transfers, what would this mean?

2.12 We have outlined below what transferring the Register and its functions to the AHCS, if implemented, would mean in practice.

Registration

2.13 If the Register transfers:

- the AHCS would take on responsibility for registering practitioners in all the disciplines registered by the RCCP; and
- all active registrants would automatically transfer across to the AHCS' dedicated clinical physiologists register.

2.14 Registrants would be asked to consent to transferring their registration data to the AHCS as part of their RCCP registration renewal. If they give their consent, their data would be passed to the AHCS and they would become registered with the AHCS on the day the Register transfers. This means that registrants would not need to fill in any forms and will not have any break in their registration. They would be able to remain registered with the AHCS and would just need to renew their registration and continue to meet CPD requirements, as they do now.

2.15 Registrants would pay the AHCS registration fee. This is currently £30 per year.

2.16 The AHCS register is divided into parts. In addition to the clinical physiologists' part of the Register, the AHCS also has a healthcare science practitioner register. This register is open to graduates of the Practitioner Training Programme (PTP), including those who have completed the PTP in clinical physiology disciplines. If the Register transfers, the AHCS has committed to reviewing its current arrangements with the vision in the future of creating one single part of its Register for all clinical physiologists.

2.17 There are a variety of different ways to become RCCP registered including an equivalence pathway and a pathway for international applicants. The RCCP and AHCS are working together to make sure that if the Register transfers there would continue to be inclusive pathways to registration. No groups of applicants will be disadvantaged as a result of a transfer.

M-level and CSci registrants

2.18 The RCCP marks the entries in the Register 'M-level' of GI physiologists, neurophysiologists and sleep physiologists who have completed a professional body recognised postgraduate programme or where they demonstrate equivalent M-level knowledge and experience. In the case of neurophysiologists, following successful completion of the M-level recognised Chartered Scientist application process through the Association of

Neurophysiological Scientists (ANS), they gain automatic entry to the RCCP M-level Register when they forward their CSci certificate to the RCCP.

- 2.19 The RCCP M-level register was created to recognise clinical physiologists in these disciplines who had undertaken post-qualification postgraduate education and training or could demonstrate equivalence and were acting at a similar level to clinical scientists – a statutory regulated profession with the HCPC. Since then, the AHCS now runs the Certificate of Equivalence. The Certificate of Equivalence is an assessment pathway that allows clinical physiologists and practitioners in other healthcare science disciplines to demonstrate how their training, qualifications and/or considerable professional experience meets the level required for registration as a clinical scientist. The successful completion of the Certificate of Equivalence allows a practitioner to apply for registration as a clinical scientist with the HCPC. Some registrants on the RCCP M-level register or RCCP registrants with CSci have already completed the Certificate and have become registered as clinical scientists.
- 2.20 The M-level register has achieved the original aim of recognising postgraduate level education, training and practice but now that the certificate of equivalence exist, M-level registration will no longer continue. Only a small handful of RCCP registrants (less than 1%) have this mark on their registration.
- 2.21 If the Register transfers to the AHCS, it is proposed that the M-level register will not continue. However, to support these registrants, for a period until the Register transfers, we would reimburse the application fees of M-level registrants who decide to apply for the AHCS Certificate of Equivalence. The Certificate of Equivalence fee is currently £350.
- 2.22 Clinical physiologists' continued ability to undertake post qualifying postgraduate education and training and/or, where applicable, apply for registration as a Chartered Scientist, would be unaffected by this proposal.
- 2.23 In the case of CSci (neurophysiology discipline only), this entirely separate Science Council professional registration is overseen by the Association of Neurophysiological Scientists (ANS) and so will be **unaffected** by this proposal.
- 2.24 Neurophysiologists who gain successful CSci status through the ANS will however not gain automatic entry to the RCCP M-level register, where this will no longer continue to exist following the proposed transfer.

Fitness to practise

- 2.25 The RCCP considers concerns about the fitness to practise of its registrants through its Fitness to Practise Procedure.
- 2.26 The AHCS similarly considers concerns about the fitness to practise of its registrants through its Fitness to Practise Rules and Complaints Policy.

- 2.27 If the Register transfers, any outstanding fitness to practise matters would be transferred to be managed by the AHCS. Any future concerns about registered clinical physiologists would be handled by the AHCS.

Continuing professional development

- 2.28 Continuing professional development (CPD) is the way in which our registrants continue to learn and develop throughout their careers, so that they keep their knowledge and skills up to date and are able to practise safely and effectively. Registrants are required to demonstrate that they are fit to practice, both in terms of their competency and conduct and RCCP monitor this through a biennial CPD audit.

The AHCS have a similar CPD monitoring process and audit annually.

Accreditation

- 2.29 The RCCP accredits clinical physiology programmes against its standards as well as the national curriculum. The AHCS oversees the work of the National School for Healthcare Science (NSHCS), part of Health Education England, which accredits PTP programmes including those in clinical physiology disciplines.
- 2.30 The different roles and remits of the organisations means that some programmes are accredited by one organisation, some by the other and some by both. This overlap leads to duplication of effort. The transfer of the accreditation function to the AHCS is an opportunity to eliminate this duplication of effort and reduce the burden on education providers.
- 2.31 If the Register and its functions transfers, the AHCS would assume direct responsibility for the ongoing accreditation of all programmes, UK-wide, that are accredited by the RCCP but not already accredited by the NSHCS. This means that the AHCS would recognise RCCP accreditation of all existing programmes. The AHCS would also recognise programmes accredited by the RCCP in the past.
- 2.32 If the Register transfers, the AHCS would adopt RCCP's standards and processes for programme accreditation. This would ensure a smooth transition and ensure that there continues to be an approach to accreditation which is inclusive of different models of education and training, including postgraduate entry-level programmes and top-up programmes. Over time, these standards and processes would be reviewed as part of continuous improvement.

3. Implementation

- 3.1 Feedback in response to this document will help inform the RCCP Board in making a final decision about transferring the Register. It is anticipated that a decision will be made in January 2021.
- 3.2 If the proposals outlined in this document are subsequently agreed, it is anticipated that the Register and its functions would transfer after 2021 registration renewals have taken place.
- 3.3 In any event, we will always provide clear information to all our stakeholders to ensure that they know what is happening and when, and any actions (if any) they might need to take.