

Council meeting 14 & 15 February 2006

**PUBLIC BUSINESS**

## **FOR NOTING**

### **Council for Healthcare Regulatory Excellence**

#### **Purpose**

To receive the draft minutes of the public part of the CHRE Council meeting held on 17 January 2006.

CHRE have agreed to the circulation of these draft minutes on the understanding that these are not final and may be changed at the next CHRE Council meeting.

#### **Minutes of meeting on 17 January 2006**

##### **Present**

Jane Wesson (Chair)  
Hew Mathewson (Deputy Chair)

Jonathan Asbridge  
Norma Brook  
Graeme Catto  
Nigel Clarke  
Michael Copland-Griffiths  
Frances Dow  
Sue Leggate  
Kate McClelland  
Jim McCusker  
Peter North  
Hemant Patel  
Hugh Ross  
David Smith  
Rosie Varley  
Kieran Walshe  
Sally Williams  
Lois Willis

##### **Apologies**

None

##### **In attendance**

Michael Andrews, CHRE Fitness to Practise (FtP) Manager  
Rodney Brooke, General Social Care Council  
Sandy Forrest, CHRE Director  
Rosemary Macalister-Smith, CHRE Head of International Regulation  
Rachael Martin, CHRE FtP Assistant  
Briony Mills CHRE FtP Officer  
Peter Pinto de Sa', CHRE Council Secretary

Elisa Pruvost, CHRE Policy Manager  
 Julie Stone, CHRE Deputy Director  
 Zoe Whittington, CHRE Policy Secondee

**Members of the public**

Tom Berrie, Health Professions Council  
 Margaret Coats, General Chiropractic Council  
 Peter Coe, General Optical Council  
 Madeleine Craggs, General Osteopathic Council  
 Philip Green, Royal Pharmaceutical Society of Great Britain  
 Claire Herbert, General Medical Council  
 Andrew Ketteringham, General Medical Council  
 Kristina Kidmose-Ireland, General Dental Council  
 Patricia Le Rolland, Quality Assurance Agency for Higher Education  
 Mike Lovibond, General Dental Council  
 Tom Moberly, Pharmaceutical Journal  
 Gillian O'Callaghan, General Osteopathic Council  
 Marc Seale, Health Professions Council  
 Alvan Seth-Smith, General Dental Council  
 Brenda Sills, NHS Appointments Commission  
 Sarah Thewlis, Nursing and Midwifery Council  
 Matthew Wright, Pharmaceutical Journal

1. **Opening remarks**
  - 1.1 The Chair welcomed CHRE members, the public and those in attendance to the meeting.
2. **Apologies**
  - 2.1 No apologies were received.
3. **Minutes of the Meeting of 15 November 2005**
  - 3.1 The minutes of the meeting of 15 November 2005 were approved.
4. **Matters Arising from 15 November 2005**  
 (paragraph 4.1, page 2 15 November 2005 minutes)
  - 4.1 Members noted that the summary of learning points from CHRE's s29 deliberations and the revised Section 29 Process and Guidelines document were available on CHRE's website (INSERT URL HERE).
5. **Questions from the Public (1)**
  - 5.1 There were no questions from the public.
6. **Presentation by Regulatory Body Chief Executives' Group on 2004/2005 Performance Review**  
 (paragraphs 7.1 to 7.4, page 40, 8 September 2005 minutes)
  - 6.1 As requested by Council in September 2005, members noted three presentations on the collaborative work undertaken by the regulatory bodies in the light of the 2004/2005 performance review process. The work covered three areas: making the registers more usable; making complaints work better; and preparing for the implementation of the EU Directive on the recognition of qualifications.
  - 6.2 Members welcomed the joint working between regulatory bodies exemplified by the presentations and acknowledged the work in progress. For their part, regulatory bodies had found the process helpful in codifying the existing links

between them and drawing on a cross-regulatory pool of expertise on a range of topics.

**Council agreed:**

- a. **to circulate copies of the presentations to Council members and to make them available on CHRE's website; and**
- b. **to invite the Director to discuss a mechanism to keep Council apprised of progress with joint regulatory projects at his next meeting with the Chief Executives and report to Council.**

**7. Report on Reviews of Medical & Non-Medical Professional Regulation (Oral Report)**

(Paragraphs 20.1 to 20.2, page 9, 15 November 2005 minutes)

- 7.1 The Director informed members that Andrew Foster had submitted his report to ministers before Christmas 2005. CHRE had asked the Department of Health for some indication of the likely outcomes from ministerial consideration of the recommendations in time to facilitate discussion at CHRE's retreat in Edinburgh on 7 and 8 February 2006.

**8. Initial Experience of Teleconferencing in s29 Case Meetings**

(Paragraph 12.1, pages 5 and 6, 15 November 2005 Minutes)

- 8.1 Council noted the favourable feedback from members and staff who had participated in the s29 teleconferencing pilot. Members acknowledged that the success of teleconferences owed much to effective chairing and the correct presentation of case documentation.
- 8.2 There were differing opinions about whether all future cases should be heard by teleconference and members agreed that further work to develop criteria for s29 case meetings was necessary.

**Council agreed that:**

- a. **criteria for hearing s29 cases by teleconference would be developed for consideration by Council in March 2006;**
- b. **the teleconference criteria would be included in the s29 Process and Guidelines document; and**
- c. **the Scrutiny Committee would monitor s29 teleconferencing on an on-going basis.**

**9. Review of Regulatory Body Projects**

(Paragraph 7.4, page 3, 15 November 2005 Minutes)

- 9.1 Council noted that, as part of discussions about a future project-based approach to CHRE work, the regulatory bodies had provided information about their on-going projects. Council were impressed by the scope of the proposed projects and noted that several common themes (education, revalidation, accessibility of communications, codes of ethics and standards) were apparent across the regulators' planned work.
- 9.2 Members expressed interest in hearing more about some of the on-going regulatory projects, or sharing their experiences of working on common projects at future Council meetings.
- 9.3 Members agreed that, henceforth, this information should be collected on a regular basis and presented to CHRE for information. To minimise the burden on

the regulatory bodies, this information would be collected at the same time as material for the performance review process using an agreed format and definitions which would be developed in consultation with regulators. Members also discussed the value of a stronger link between the collection of this information and the business planning/budget-setting cycle of the regulatory bodies.

**Council agreed that the Director would discuss the collection and format of information on regulatory body projects at his next meeting with Chief Executives and report to Council.**

**10. Prioritising Best Practice Work**

(Paragraphs 7.1 to 7.4, page 3, 15 November Minutes 2005)

- 10.1 Council agreed that while CHRE anticipated being specifically tasked with - and funded for - Department of Health projects arising from the reviews of professional regulation, there was a need to formalise the approach to prioritising the discretionary element of CHRE's work. Members acknowledged that, in the light of the outcome of the Foster and Donaldson reviews, there might only be minimal scope for discretionary spending.
- 10.2 Members welcomed the attempt to codify the reasons for undertaking work and the value of the process as a guide to discussion, although there was an acknowledgment of the limitations of a purely mathematical approach to prioritisation.
- 10.3 Members agreed that a collaborative working approach with the regulatory bodies was important and considered that a similar prioritisation mechanism might be of interest to regulatory bodies.
- 10.4 Members agreed that it was important for CHRE to express a view if it was felt that any proposed work on behalf of the Department of Health was unhelpful, impractical or did not fulfil the aim of enhancing public protection. Council agreed that not all projects should necessarily be undertaken by CHRE in-house, and that, where appropriate, work could be outsourced according to the appropriate tendering guidelines.

**Council agreed to:**

- a. **adopt the proposed approach to assessing future CHRE projects;**
- b. **commend the approach to the regulatory bodies through discussion at a future meeting with Chief Executives; and**
- c. **note the PPI implications of future work on a project-by-project basis.**

**11. Project Development**

*Professional/Patient Boundaries*

(Paragraphs 8.1 to 8.2, page 4, 15 November 2005 Minutes)

- 11.1 Council noted that the Department of Health had responded positively to CHRE's draft costed project initiation document (PID) for the work arising from the Ayling and Kerr-Haslam Inquiries. A full project plan, following discussion with, and input from, the regulators would be developed.
- 11.2 Members expressed concern at the NHS-focus of the PID and drew attention to some infelicitous wording in the document. While noting that the document had been written with a view to securing funding from the Department, Council

agreed that the formal CHRE project plan would be revised to address these issues, as well as the need to reflect the 'four nations' focus of CHRE's work.

- 11.3 Council recorded its thanks to Lois Willis for her work with the Executive to develop the PID.

**Council agreed that:**

- a. **CHRE would develop a formal project plan on professional/patient boundaries in partnership with the regulatory bodies based on the PID, as amended;**
- b. **the formal Project Plan would be circulated to Council members for comment and approval by email and presented for information in March 2006;**
- c. **the project would be included on CHRE's Risk Register and overseen by the Audit Committee; and**
- d. **further discussion about the role and number of lay sponsors was necessary.**

***Student Fitness to Practise***

(Paragraphs 9.1 to 9.2, page 4, 15 November 2005 Minutes)

- 11.4 Members noted that the results of CHRE's scoping of student fitness to practise issues had been presented to a cross-regulatory education meeting held on 16 January 2006. The scoping exercise had highlighted a number of areas for possible future working.

**Council agreed that:**

- e. **project plans for the development of a common code of conduct/practice for students; and the identification and dissemination of best practice in HEI student fitness to practise procedures should be prepared for consideration in March 2006;**
- f. **Sue Leggate would act as a Lay Project Sponsor for future work on student fitness to practise; and**
- g. **the scoping exercise should be circulated to Council members for information.**

**12. CHRE Membership of European Health Organisations**

- 12.1 Members agreed that CHRE's constructive and pro-active approach to EU activities would benefit from membership of relevant European health organisations.

**Council agreed to membership of CEPLIS for an initial one-year period (to be reviewed in twelve months) and for membership of other similar organisations to be considered in future.**

**13. CHRE Meeting Dates for 2007**

**Council approved CHRE's 2007 meeting dates, including the provision for a third regulatory conference in March 2007.**

**14. Director's Report**

(Paragraph 21, page 9, 15 November 2005 Minutes)

- 14.1 The Director updated members on the impact of the recent controversy surrounding the employment of sex offenders in the school system and the proposed timetable for the introduction of the Bichard Vetting and Barring Scheme. Following a Ministerial statement, the Bill to create the Scheme would take place in the early part of 2006, minimising the amount of time for consultation with relevant parties, including healthcare regulators.
- 14.2 The Director informed members that the issue of the Vetting and Barring Scheme was being considered by the Chief Executives' group and that he would update members at the next meeting.
- 14.3 Members agreed that the practicalities of issues raised in the proposed Bill needed to be discussed by Council and that if necessary there should be discussion as part of the agenda for the February 2006 retreat.
- Council to discuss the implications of developments with the Bichard Barring and Vetting Scheme in February and March 2006.**
15. **Approved Minutes of Audit Committee held on 15 November 2005**  
(Paragraphs 23.1 to 23.3, page 48, 15 November 2005)  
**Council received the approved note of the Audit Committee meeting which took place on 15 November 2005 and agreed to discuss CHRE's Risk Register on an annual basis, starting in May 2006.**
16. **Questions from the Public (2)**
- 16.1 Members of the public were invited for a second time to ask questions of the Council. No questions were forthcoming.
17. **Next Meeting**
- 17.1 The next public meeting of the Council would take place at 11 Strand, London on Thursday 9 March 2006.