



Registration Council for Clinical Physiologists (RCCP) Position Statement on Modernising Scientific Careers

Four years ago a case was successfully made with the Health Professions Council (HPC) for the need to regulate Clinical Physiologists in Audiology, Cardiology, Gastrointestinal Physiology, Neurophysiology, and Respiratory Physiology. RCCP, along with the other aspirant Healthcare Scientist (HCS) groups also recommended for regulation to the Secretary of State by HPC, have since 2004 been awaiting the long promised consultation document apparently in preparation by the regulation branch of the Department of Health (DH).

Some years ago the RCCP were invited to a meeting at the DH to discuss the proposed review of HCS educational pathways. RCCP welcomed both the review and the opportunity to be involved. However, there has been little information, communication or involvement since that meeting. It was only very recently that the impact of the Modernising Scientific Careers (MSC) project on the bid for statutory regulation by RCCP and other HCS groups, under the auspices of the HPC, has become apparent.

Whilst we have a number of issues about the overall proposals, our major concern is that should the project go ahead as proposed it will lead to the closure of the RCCP Council and therefore the voluntary register without having regulation in place for this large group of staff. In this fast developing area of practice this leaves the public vulnerable and unprotected in the case of poor or dangerous practice.

In order to gain recommendation for regulation RCCP were required to demonstrate a national, accredited educational pathway, outputting a competent practitioner who met the discipline specific standards of proficiency in their chosen field. The BSc in Audiology and BSc (Hons) Clinical Physiology (Cardiology, GI, Neurophysiology or

Respiratory Physiology) were developed in response to this need. This was successfully developed in collaboration with all interested parties including, professional bodies and Higher Education Providers (HEI's).

Within the Audiology qualification framework the DH had direct leadership involvement. These awards merged the existing professional body examinations with the academic qualification to provide a single accredited qualification. This is delivered by HEIs, quality assured by QAA and moderated by the professional bodies. The latter ensures that national professional standards are maintained and there continues to be responsiveness to both service and patient need. The awards are relatively new and at inception they were and continue to be appropriate for purpose and practice.

It has been stated that regulation post MSC, will be at Masters (M) level. It has come as a considerable surprise to the RCCP Council that the BSc will no longer be a route to regulation if and when the outputs of the MSC project take place. The position of those practitioners currently on voluntary registers awaiting regulation is unclear. Once this information is in the public domain, albeit only at proposal stage at present, registrants are highly unlikely to remain on or join the voluntary register with the current lack of clarity surrounding regulation.

This in turn means that the registers, including the later aspirant groups whose voluntary registers DH initiated and financially supported, are very likely to collapse. It is imperative that this is not allowed to happen. Patient safety is at the heart of all that RCCP is trying to achieve and continued delay is unacceptable to all concerned. Our recommendation is that the proposals for regulating the HCS groups continue with urgency, before the collapse of all of the voluntary registers commences.

Regulation for aspirant groups as soon as possible will minimise the potential for poor and dangerous practice and increase patient safety, during what may be a time of prolonged transition. If changes are made to regulation across the whole of healthcare science, RCCP along with the rest of the aspirant groups can be part of the MSC to ensure that the model is successful.