

College of Occupational Therapists Submission to The Health and Care Professions Council's Consultation on Revised Returning to Practice Guidance.

This submission is made on behalf of the College of Occupational Therapists, the professional body for occupational therapists across the UK.

The submission is made in response to the Health and Care Professions Council's Consultation on revised Returning to Practice guidance. Further information on any aspect of this response can be gained by contacting the College.

Executive Summary

Key points to note from this submission include:

- The revised guidance is clearer and easier to understand than the current document.
- The number of hours a 'day' constitutes should be specified.
- Some key parts should be in bold (see comments regarding sections 4 and 5 below).

Submission

- Q.1 Is the draft guidance clear and easy to understand? How could we improve it?
- Q.2 Could any parts of the guidance be reworded or removed?
- Q.3 Is there any additional guidance needed?
- Q.4 Do you have any other comments on the draft guidance?

Section 2 – 'Summary' (p4) is very useful and clearly sets out and answers various scenarios.

Section 3 – 'Our requirements for returners' (p5), the length of a day (i.e. number of hours) should be specified. The second paragraph under 'What we mean by practising your profession': could it give an example clarifying issues for registrants who may have worked in education, or as a manager for several years wish to return to clinical practice i.e. they may have been out of direct patient contact for many years. The final paragraph under 'What we mean by practising your profession': An additional final sentence could be added regarding 'contacting your professional body for advice'.

Section 3 – 'If you have never registered with us before' (p5), the first sentence of the second paragraph "if you qualified more than five years ago, we only require you to update if you have been out of practice" is perhaps open to interpretation. It could be read within the context of the next sentence about working overseas, but could be interpreted as having practised in the UK or abroad.

Section 4 – 'Updating your knowledge and skills' (p8), regarding 'Supervised practice': it would be useful if it was written in bold type that returnees do not have to undertake a period of supervised practice. Both the current and draft guidance state that returnees do not have to undertake all three types of updating, but many returnees are under the misapprehension that they need to do this.

Section 5 – 'Your counter-signatory' (p12): It would be helpful if the following was written in bold type: 'Your counter-signatory does not need to supervise your updating activities, and they do not need to confirm that you are fit to practice'. Many provisional supervisors are under the misapprehension that they have the responsibility to sign a returnee off as 'fit to practice'.

About the College

The College of Occupational Therapists (COT) is pleased to provide a response to this consultation. COT is the professional body for occupational therapists and represents over 31,000 occupational therapists, support workers and students from across the United Kingdom. Occupational therapists work in the NHS, Local Authority social care services, housing, schools, prisons, care homes, voluntary and independent sectors, and vocational and employment rehabilitation services.

Occupational therapists are regulated by the Health and Care Professions Council (HCPC), and work with people of all ages with a wide range of occupational problems resulting from physical, mental, social or developmental difficulties.

Occupational therapy improves health and wellbeing through participation in occupation. The philosophy of occupational therapy is founded on the concept that occupation is essential to human existence and good health and wellbeing. Occupation includes all the things that people do or participate in. For example, caring for themselves and others, working, learning, playing and interacting with others. Being deprived of or having limited access to occupation can affect physical and psychological health.

Contact

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