

HOSPITAL PLAY SPECIALIST REGISTRATION COUNCIL (HPSRC)
2017 Report to AGM of the Hospital Play Specialist Assn of Aotearoa/New Zealand

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The Hospital Play Specialist Registration Council (HPSRC) is a standing committee of the Hospital Play Specialist Assn of Aotearoa/New Zealand (HPS Assn) with the primary purpose being to provide:

- a Registration process by which the HPS Assn grants recognition to an individual who has achieved competency
- a mechanism through re-Registration, that holds individual registered hospital play specialist (HPS) responsible for ethical conduct and continued growth and professional development.

While annual reports are generally an opportunity to provide members with an overview of the standing committee's outcomes in the past year, the focus of this HPSRC report will primarily focus on the outcomes and challenges in 2018 from the Review of Registration.:

The Review of the Registration

This review has been the major undertaking for the HPSRC. Taking two and a half years, the process has drawn on the collective knowledge and energies within the profession. The HPSRC acknowledge particularly those individuals who have been on the Review working group- Marianne Kayes; Nicola Woollaston; Deborah McDougal; Robyn Maria and the serving HPSRC committee members.

Details of the revised criteria have now been incorporated into the Registration Handbook which will be placed on the HPS Assn website and will be presented in the power point presentation today.

The most significant change relates to:

- there now being three categories of Registration- Full, Subject to Confirmation (STC) and Lapsed status.
- renewal of Registration and the requirements that relates to "continued growth and professional development". While the required hours have been reduced from 60 hours to 40hours, across the 3year registration period, individuals will be required to provide a brief statement on how the PD submitted relates to their identified continued growth and professional development.
- criteria for professional development submitted has been widened
- within the renewal of Registration process are special considerations which relate to professional isolation and leave granted from employer in relation to maternity leave, serious illness and secondment.

The open feedback by the membership has been useful in understanding some of the challenges within the current Registration process. There is considerable misinformation on existing criteria and HPSRC processes within the profession which must be addressed as the revised 2017 Handbook is implemented.

The Workforce Development

HPSRC data provides a current overview of NZHPSReg in relation to HPS employment.

HPS Workforce Development Data

NZHPSReg Registration Status as at 29th February 2017

HPS with NZHPSReg (Full and STC)	39
Lapsed NZHPSReg 2003- 2016	12
2014 NZHPSReg Renewal rate	77%
2015 NZHPSReg Renewal rate	75%
2016 NZHPSReg renewal rate <i>projected</i>	53%
Renewal of Registration required in 2016 –20 (1 NZHPSReg lapsed March 2016)	
2015 - New applications	2
2015 – 20% audit of NZHPSReg applications completed	

HPS Workforce Data as at 29th February 2016

2015 - HPS Services -16	NZ DHB- 21
2015 – Current positions – 67 (2015 HPS Assn Service contact list)	
2014-63 positions	
2015 - HPS Services with NZHPSReg staff - 8	
2015- HPS Services with Team Leader/Professional leadership with NZHPSReg – 6	
2015 – % of HPS Service staff positions with NZHPSReg – 40% (2014- 63%)	
2015- HPS Services with 50% of regular staff with NZHPSReg – 6	

Proposed HPSRC Projects for 2018

Promote the revised Registration process. In conjunction with the Executive of the HPS Association, an HPSRC responsibility is to assist raise awareness of the HPS Registration process with members, child health manager, Directors of Allied Health, other relevant employing hospitals and to the Ministry of Health. Ensuring greater information and awareness of Registration processes is a priority in 2018.

Development of Registration Information packages for HPS and Services:

In past reports the HPSRC have raised concern on the high numbers of applications where additional information is required before assessment can be considered. In the Review HPSRC information processes were reviewed.

The HPSRC and the Executive are jointly working on the development of a specific tab on the Association website for the Registration process. While in the past the HPSRC has resisted placement of clinical portfolio exemplar on the website, the Review highlighted that many HPS do not have ready access to written case studies and examples of clinical practice observations. Some experienced HPS expressed uncertainty in Registration requirements or lack of confidence when acting as mentors for others seeking Registration.

Developments in 2018 will focus on:

- placement of Exemplar/ models to support the development of written skills within developing HPS practice on the HPSRC tab
- providing opportunities for discussion on the guidance statement in the revised 2017 Registration Handbook which have been strengthened to assist developing HPS reflect on the components they should submit in their clinical practice portfolios for consideration of Registration.

The HPSRC will continue to provide presentations on Registration requirements at conference and cluster meetings, HPS Service in-services or Journal club.