

Sanctions policy: Equality Impact Assessment

March 2026

Section 1: Project overview

Project title: Sanctions policy review 2025 (post-consultation)

What are the intended outcomes of this work?

The work is intended to set out the principles that practice committee panels (panels) should consider when deciding on the appropriate sanction, if any, in fitness to practise (FTP) cases. It is also intended to provide greater clarity on the sanctions policy and to ensure the content is relevant and up to date. Since the last review of the sanctions policy in 2019, we have revised our standards¹, and updated and produced new Health and Care Professions Tribunal Service (HCPTS) Practice Notes².

The Health and Care Professions Council (HCPC) recognises the significant impact of the sanctions policy on both registrants and the general public, including service users and colleagues in health and care. As a core aspect of our regulatory function, it is essential that the policy is applied in a way that is fair, consistent, and free from bias.

The policy plays a key role in supporting panel members to make transparent, proportionate and equitable decisions that uphold public protection and maintain confidence in the regulatory process. The aim of the changes is to ensure that decisions are fair, proportionate and consistent, and that sanctions are sufficient to protect the public and to promote and maintain appropriate standards and public confidence in the professions regulated by the HCPC.

The changes are intended to support the implementation of updated professional standards which came into effect on 1 September 2023 (standards of proficiency) and 1 September 2024 (standards of conduct, performance, and ethics) and reflect emerging case law and feedback from key stakeholders. They aim to provide greater clarity on the factors panels should consider in relation to apology and insight, professional boundaries, discrimination, seriousness and culpability, reasons for sanctions and striking off.

The HCPC has carefully considered the impact of the policy's position on discrimination, bullying, victimisation and harassment and has revised these sections accordingly to increase consistency, fairness and clarity in the execution of the sanctions policy and tribunal process. We have also made minor changes to style, language and tone to improve the accessibility and clarity of the document.

Following our analysis and review of stakeholder feedback, we have decided to implement the new sanctions policy with minor amendments, which will come into effect in March 2026. The amendments include refinements to clarity of language and better linkages to relevant materials, such as practice notes, and instruction for panels to consider the reasons why an apology might not be given, and the different ways that apology or insight might be shown, particularly by neurodivergent registrants or those with different cultural backgrounds.

We have made amendments to strengthen the signposting between dishonesty guidance, seriousness and culpability sections, and other related policies, ensuring a coherent and

¹ [Standards of proficiency](#) and [standards of conduct, performance and ethics](#).

² [hcpts-practice-notes---consolidated.pdf](#)

accessible framework, and removed references to early admission of dishonesty. We have also reviewed the policy to clearly reflect the principles of case law and the HCPTS Practice Notes.

Full breakdowns of the demographic profile of the consultation respondents are available in the consultation outcomes document which is published alongside the Equality Impact Assessment (EIA).

Who will be affected?

- panels
- registrants³ and potential registrants, including students or trainees
- the public, including service users and colleagues in health and care
- education and training providers
- legal representatives
- health and care providers, professional bodies and consumer groups
- HCPC employees and partners

Section 2: Evidence and engagement

What evidence have you considered towards this impact assessment?

- new and relevant case law
- revised standards and new HCTPS Practice Notes
- feedback and guidance from the Professional Standards Authority (PSA)
- HCPC fitness to practise annual report 2024
- stakeholder feedback from pre-consultation engagement activities (described in the next section)
- internal team discussions, meetings or minutes
- relevant published research
- responses to the public consultation on the proposed changes to the sanction policy.

³ The HCPC regulates 15 professions: arts therapists, biomedical scientists, chiropractors / podiatrists, clinical scientists, dietitians, hearing aid dispensers, occupational therapists, operating department practitioners, orthoptists, paramedics, physiotherapists, practitioner psychologists, prosthetists / orthotists, radiographers, speech and language therapists.

How have you engaged stakeholders in gathering or analysing this evidence?

- We have discussed the proposals and collected feedback from the Equality, Diversity and Inclusion (EDI) Forum. Members of the forum are external stakeholders with expertise in EDI and lived experience. The membership includes registrants and EDI professionals in relevant stakeholder organisations.
- We engaged the HCPC FTP Partnership Forum comprised of colleagues from FTP and key professional bodies and unions.
- We also engaged FTP partners, who are panel members with expertise in FTP processes.
- As part of our operational stakeholder relations work, we will continue to seek feedback from external stakeholders including professional bodies, the PSA, other regulators such as the Nursing and Midwifery Council (NMC), the General Medical Council (GMC), and employers, through our standing meetings and on an ad-hoc basis where necessary.
- We sought approval to consult on our proposals from HCPC's Council on 22 May 2025, which includes both registrant and lay members.
- We have carried out a public consultation on our proposed changes and asked respondents to reflect on the impact on groups who share protected characteristics. The consultation ran from 29 May 2025 until 1 September 2025.

Section 3: Analysis by equality group

The Equality and Human Rights Commission offers information on the [protected characteristics](#).

Overview

The changes to the sanctions policy are intended to improve clarity for panels when applying sanctions, to support fair and proportionate decision-making in FTP cases, to reflect recent legal developments and feedback from key stakeholders, and ultimately to strengthen public protection and trust in the regulatory process.

Overall, we believe that the changes will promote equality and fairness in the interpretation and application of the sanctions policy for all of the below groups. In the policy, we clarify that all forms of discrimination are unacceptable, and ensure appropriate action is taken in response to failure to maintain professional boundaries. This supports the protection of the public by providing a clearer context for how panels should address these issues.

In most sections below, our analysis remains unchanged from the first version of the EIA. However, we have added summaries which address key points made in response, which outline mitigations present in the revised policy and the operational work which will support its implementation.

The consultation analysis has shaped the revised policy outcomes by reviewing responses on an individual basis and considering these alongside the earlier iteration of this EIA. This has been used to address consultation responses by refining the policy proposals.

Age

Registrants

- According to the HCPC fitness to practise annual report 2024,⁴ older registrants are more likely to be subject to decisions under our sanctions policy. This means that older registrants are more likely to be involved in the FTP process and therefore are more likely to be affected by the changes. In particular older male registrants are overrepresented among those involved in the FTP process and are therefore likely to be disproportionately impacted by the FTP process.

General public

- The general public, including service users and colleagues in health and care, are likely to be positively impacted by the proposals which are designed to ensure strong regulation and consistency in the sanctions process which safeguards public safety.

Points from stakeholder responses: summary and mitigations

Respondents suggested that there is less protection for both older registrants and younger registrants, leaving these age groups disadvantaged.

An advisory group suggested that the HCPC provides further clarity on the types of professional boundaries which exist, such as physical, emotional, financial and sexual, with an expansion of misconduct towards colleagues, students, junior staff and supervisees. This has subsequently been addressed through further revisions to the sections on sexual and sexually motivated misconduct as well as the professional boundaries section of the revised policy.

Although, as noted above, our analysis supports the suggestion that this policy will impact older registrants more than younger registrants, we did not identify any further aspects of the policy which would lead to unfair treatment of this group when applying sanctions.

However, we will continue to explore the underlying causes of these trends and consider appropriate steps to mitigate any disproportionate impacts on particular groups where possible and appropriate. We will also continue to monitor the profiles of those involved in FTP processes and affected by their outcomes.

Disability

Registrants

- Our data shows that registrants with disabilities are over-represented in the FTP process.⁵ This is not unexpected, as a registrant's ability to manage a health condition or disability could be a factor in their FTP referral process.⁶ This means that registrants with disabilities are more likely to be involved in the FTP process and therefore be disproportionately affected by the proposed changes.
- The sanctions policy indicates that effective remediation may require a registrant to address concerns about their ability to manage their health to ensure they can practise safely. However, for some registrants with disabilities, the ability to fully remediate such concerns

⁴ [hcpc-fitness-to-practise-annual-report-2023-24.pdf](#)

⁵ [fitness-to-practise-data---supplementary-analysis-2023-24.pdf](#)

⁶ [Standards of conduct, performance and ethics | The HCPC](#)

may be limited by the nature or severity of their condition. Therefore, the mitigating factors typically available to registrants in the FTP process may not always be available to registrants with disabilities. As a consequence, we recognise that registrants with disabilities are likely to be considered differently, although not less favourably, by this policy. However, these impacts may be unavoidable given the central goal of public protection.

- Registrants with disabilities in general are more likely than non-disabled peers to be out of full-time employment,⁷ which may limit their access to remedial training.
- Further, registrants with disabilities are more likely to be lower paid and may be less likely to afford the costs associated with CPD and remediation.⁸
- Similarly, registrants who are neurodivergent and/or have cognitive differences may be disproportionately impacted by the policy's provisions on remorse and apology, particularly if they do not offer an apology, or if their apology is considered as insincere. The sanctions policy outlines that panels should be mindful that neurodiversity and cultural differences may impact the expression of insight, remorse, or apology.
- Finally, registrants who have a disability are likely to benefit from the changes which aim to increase protections against all forms of discrimination. Panels will be better able to identify and act on concerns raised in the FTP process where discrimination on these grounds has occurred.

General public

- We have made changes to emphasise the importance of panels providing reasons for their decisions at every stage. We anticipate this change will better support the general public, including service users and colleagues in health and care with disabilities, in understanding the outcomes of the FTP process.
- We will continue to investigate ways to engage service users in the FTP process to improve accessibility and transparency in the process while maintaining confidentiality.
The general public, including service users and colleagues in health and care, are likely to benefit from the changes, which are designed to ensure robust regulation and consistency in the sanctions process to safeguard public safety.

Points from stakeholder responses: summary and mitigations

Consultation responses mentioned concerns around the impact of the policy and the potential for a negative impact on neurodivergent registrants, and a perception of a lack of training for panels on the importance of workplace adjustments for neurodivergent colleagues. Some responses included mentions of a perceived need for the HCPC to provide better protection for registrants with disabilities.

Responses emphasised that neurodivergent registrants may be disadvantaged by the section on apologies as their responses may be different to those of a neurotypical person. Respondents expressed a wish for the HCPC to provide further clarity and accessibility for

⁷ [The employment of disabled people 2024 - GOV.UK](#)

⁸ [Estimated £2 per hour pay gap for Disabled employees | Disability Rights UK](#)

neurodivergent registrants and those with sensory impairments as well as stronger recognition and support for neurodiverse registrants.

Some service users noted that behaviours of neurodivergent registrants may be misinterpreted, which could lead to serious levels of injustice and the need for the HCPC to strengthen training on different types of disabilities, such as autism/ADHD, while making processes accessible and inclusive for registrants.

As a way of mitigating any related impacts, we have made several further amendments to the policy. The policy document has been made easier to access and navigate through improved cross-referencing and the inclusion of links to further guidance, such as HCPTS practice notes. We have also used plain English and shortened sentences to support clarity and readability to support neurodiverse registrants.

In addition, panels are instructed to be mindful that cultural differences and neurodivergence may influence the way a registrant engages with the investigation into their conduct, and any hearing. Panels should therefore take account of neurodiversity related factors that may have influenced the registrant's engagement, particularly related to their expression of insight, remorse and apology, when determining a proportionate sanction. These considerations are set out in paragraphs 11 and 63 of the revised policy.

The sanctions policy identifies CPD and training as mitigating factors which should be considered by panels to assess seriousness and culpability during the FTP process. The HCPC partially mitigates the impact of limited access to training on disabled registrants via use of upstream regulation approaches to help support learning where CPD and training might not be available.

Differential adverse impacts which might arise from applying the requirements set out in [standards 8.1 and 8.2](#) of the standards of conduct, performance and ethics are mitigated by the policy changes above, and by the HCPC's procedures and training requirements, which will be refreshed where the revised sanctions policy makes this necessary.

Insofar as a disability might affect the panel process and outcome, registrants are given the opportunity to disclose disabilities throughout the FTP process, including at the listing stage, where we explicitly ask for any reasonable adjustments or measures that might need to be taken into account.

All FTP partners receive EDI training as part of their recruitment and induction. This includes content on disability, bias awareness, and taking account of neurodiversity and cultural factors in a way that is sensitive, proportionate and aligned with public protection. We also provide regular refresher training for panel chairs and legal assessors, and we will consider how best to expand our EDI training offer so that all panel members are appropriately supported to recognise and respond to neurodiversity and cultural factors, including how this might affect outcomes, while continuing to uphold public protection.

When the revised sanctions policy is introduced, we will include EDI considerations in an eLearning module on the policy changes. This will include the issues outlined above and will support partners to apply the revised policy in a fair, consistent and inclusive way.

Gender reassignment

Registrants

- When a sanction is applied to a registrant, the HCPC usually publishes details of that sanction online, including the reason for the decision, so that members of the public can see the registrant's FTP history. We will continue to review how our approach to information governance and publication of FTP and sanctions data may disproportionately impact registrants who are transitioning. The HCPC will consider the most appropriate way to ensure that the publication of information necessary for the protection of the public does not inadvertently disclose protected information, such as the gender reassignment status of a registrant.
- Our core objective remains public protection, and it is essential that all registrants remain identifiable and associated with the individual practitioner, and that when a registrant changes their name, or any other relevant identifying information, this association is not lost.
- We are committed to managing registrants' gender reassignment rights sensitively and lawfully in accordance with the Equality Act 2010 (the 'Equality Act') and the Gender Recognition Act 2004.

General public

- Service users and colleagues in health and care who are undergoing gender reassignment are likely to benefit from the changes which aims to increase protections against all forms of discrimination. Panels will be better able to identify and act on concerns raised in the FTP process where discrimination on these grounds has occurred.
- The general public, including service users and colleagues in health and care, are likely to benefit from increased consistency and robustness of the sanctions process which is intended to enhance public protection.
- Through the changes, we have clarified our commitment to preventing discrimination against all individuals on the basis of any protected characteristics, while also safeguarding the interests of the wider public and promote regulatory effectiveness and public confidence.

Points from stakeholder responses: summary and mitigations

Respondents mentioned greater perceived risk of discrimination and the need for clarity when a service is refused. Registrants called for greater acknowledgement that systemic factors such as discrimination may influence behaviours and culpability. Responses making this point referred to the perceived need to consider personal history and interactions rather than events without context.

A membership organisation suggested that the HCPC include protection regarding strongly held beliefs concerning gender reassignment for religious, cultural or social/political reasons.

As a mitigation to these impacts, the revised sanctions policy contains clear description and guidance of unlawful discrimination to service users, carers and colleagues, with the aim of providing registrants and panels with clear understanding of discriminatory behaviour. These support the existing requirements of our [standards of conduct, performance and ethics](#). The

revised policy states that registrants must not unfairly discriminate, including unlawful discrimination covered by the Equality Act (see paragraph 98).

The revised policy also addresses panel's consideration of systemic and contextual factors which they find relevant to decision-making (see paragraph 41, 71 and 113).

The sanctions policy aims to provide more information to increase protections against all forms of discrimination. Registrants who are transitioning are likely to be benefitted by the revised policy which is designed to ensure strong regulation and protection against all forms of discrimination.

Marriage and civil partnerships

Registrants

- We have identified no differential impacts relating to registrants who are married or in civil partnerships. Registrants who are divorced or separated are very slightly more likely to be involved in our FTP processes than people who are married or in civil partnerships, but we have not identified any disproportionate impact of the sanctions covered by the policy.⁹

General public

- No differential impacts have been identified relating to the general public, including service users and colleagues in health and care, via marriage or civil partnerships. The HCPC online concerns form¹⁰ will enable us to gather more information about protected characteristics of those who make a complaint enabling us to gather more information about this in the future.
- The general public, including service users and colleagues in health and care, are likely to be positively impacted by the revised policy which are designed to ensure strong regulation and consistency in the sanctions process to safeguard public safety.

Summary

No impacts have been identified specifically relating to registrants who are married or in civil partnerships, including from consultation responses. Accordingly, there are no planned mitigations in this area.

Pregnancy and maternity

Registrants

- Because of the temporary nature of the protected characteristic, the data we have for this is limited. For example, we would not be able to definitively say if women involved in our FTP processes had ever been covered by this protection in the Equality Act, so we could not say whether being pregnant or recently giving birth affected the likelihood of being impacted by the sanctions policy in any given case.
- Research has shown that people returning to work after breaks in practice can need additional support to ensure they are able to practise safely¹¹ and that without this support, there is a risk that they could be more likely to be involved in FTP processes.

⁹ Table 8: Registrants with one or more FTP concern in 2023/24, counts and percents by marriage and civil partnership, <https://www.hcpc-uk.org/globalassets/resources/2024/fitness-to-practise-data---supplementary-analysis-2023-24.pdf>

¹⁰ [How to make a complaint to the Health and Care Professions Council \(HCPC\) | The HCPC](#)

¹¹ <https://www.gmc-uk.org/education/hidden-documents/sharing-good-practice/supporting-those-returning-from-a-break-in-clinical-work>

- The sanctions policy identifies CPD and training as mitigating factors which should be considered by panels to assess seriousness and culpability during the FTP process. Remedial training including CPD may be more accessible to registrants in full-time employment. However, registrants who are pregnant, on maternity leave, or have caring responsibilities are less likely to be in full-time employment or may have taken career breaks, so these mitigating factors may be less available to them. As a result, they may have fewer opportunities to demonstrate the types of actions or behaviours that are viewed favourably in the FTP process.

General public

- Service users and colleagues in health and care who are pregnant, on maternity leave or have childcare responsibilities are likely to be positively benefited by the proposed changes which aim to increase protections against all forms of discrimination. Panels will be better able to identify and act on concerns raised in the FTP process where discrimination has occurred.
- The general public, including service users and colleagues in health and care, who are pregnant, on maternity or have caring responsibilities, is expected to benefit from the changes, which aim to strengthen regulation and promote greater consistency in the sanctions process to safeguard public safety.

Points from stakeholder responses: summary and mitigations

A membership organisation suggested that the policy needs greater acknowledgment of the barriers to accessing remediation with consideration of pregnancy/maternity and ensuring these are not treated as aggravating factors.

The HCPC can partially mitigate this disadvantage in completing and logging CPD activity via use of upstream regulation approaches to help support learning where CPD and training might not be available. However, it would be unrealistic to expect this to fully substitute for the opportunities lost during periods of pregnancy and maternity.

As with our suggested mitigations around disability, this is an area where panels would be expected to interrogate the facts early in the FTP process and consider pregnancy and maternity as part of the context for their reasoning and decisions at the early stage of the process. The sanctions policy solely applies to the sanctions phase of the hearings process.

Our policy requires panels to consider the impact of remediation and what barriers may exist. It acknowledges that some registrants may face specific barriers, such as being pregnant, on maternity leave, or having caring responsibilities (see paragraphs 67 and 82 of the revised policy).

We have also made further amendments to paragraph 67, guiding panels to be open to the variety of remediation evidence that a registrant might submit to help mitigate the concerns raised.

Race

Registrants

- Registrants who may be subject to race-based discrimination by their HCPC-registered colleagues are likely to be positively impacted by the changes to the policy which increase protection against all forms of discrimination.
- Registrants from overseas, and those from non-UK backgrounds, and other countries may have different cultural understandings of the appropriateness or expression of apologies in FTP processes.¹² Different cultural factors and lived experience may impact on whether or not someone apologises, or how they frame an apology or insight.
- According to the Fitness to Practise Data: Supplementary Analysis 2023-24,¹³ while most FTP concerns are for registrants reporting white ethnicities, registrants reporting non-white ethnicities are proportionately more likely to be subjected to an FTP concern than their white counterparts. Therefore, non-white registrants are likely disproportionately impacted by the sanctions policy.
- Similarly, the above supplementary analysis shows that while the majority of registrants with one or more FTP concern are UK nationals, registrants from Africa, and North and South America are proportionately more likely to have one or more FTP concern. There were also some differences in terms of concerns meeting the threshold for further action. At this decision point, registrants declaring ethnicity as Asian or Asian British (57%), Black, African, Caribbean or Black British (70%), other (65%) and not recorded (65%) groups had higher rates that were statistically significant. Therefore, registrants from these cohorts are more likely to be subject to a decision under the policy and revised changes.
- One of the key determinants in the outcomes of the FTP process is whether or not a registrant has legal representation. Registrants who are of non-UK nationality or national origin are less likely to have access to legal representation and may be disproportionately impacted by the policy as a result. We encourage panels to apply the sanctions policy consistently, reducing the impact of having legal representation.

General public

- The general public, including service users and colleagues in health and care, are likely to be positively impacted by the changes which are designed to ensure strong regulation which safeguards public safety.

Points from stakeholder responses: summary and mitigations

Respondents indicated that the proposed changes to the policy could improve fairness, clarity and inclusivity for registrants from diverse cultural backgrounds. Strengthened guidance on discrimination, professional boundaries, sexual misconduct and cultural competence was seen as enhancing protection against discrimination based on protected characteristics.

¹² [Maddux, W., Kim, P.H., Okumura, T. and Brett, J.M. 2011. Cultural differences in the function and meaning of apologies. *International Negotiation*, 16\(3\): 405-425.](#)

¹³ [fitness-to-practise-data---supplementary-analysis-2023-24.pdf](#)

Responses to the consultation noted that there should be a lack of bias and stereotyping, particularly affecting non-white registrants, and that the HCPC should consider strengthening protection and fairness for registrants across characteristics by providing further guidance.

In response to this feedback, we have embedded explicit recognition of cultural factors, neurodivergence and differing communication styles throughout the revised policy to help foster fairer and more inclusive decision-making.

The revised sanctions policy broadens the scope of discrimination that panels should consider in FTP cases to more inclusively encompass people's experiences of discrimination, not only unlawful discrimination related to protected characteristics but also all forms of discrimination.

The policy more clearly defines insight, remorse, and apology as distinct mitigating factors in the sanctions process to provide clarity and more tailored guidance for panels. To support fairer assessments, explanations of apologies and remorse have been expanded to support the panel assess the impact of presence of an apology during the sanction process. The new change in the policy includes clarifying that while an apology might be considered a mitigating factor, it should not be considered an admission of guilt, and panels should carefully consider the reasons why an apology may not be given. This change should increase fairness and ultimately serve in the best interest of the public.

Guidance and training for panels encourages cultural and contextual awareness in the choice and application of sanctions. We will continue to improve our training for panels to ensure that they continue to receive training that supports fairness, is sensitive, proportionate and aligned with public protection.

Religion or belief

Registrants

- Registrants who are subjected to discrimination on the basis of religion are likely to be positively benefited by the changes which aim to increase protections against all forms of discrimination. Panels will be better able to identify and act on concerns raised in the FTP process where discrimination on these grounds has occurred.
- No further differential impacts have been identified relating to registrants based on religion or belief. Our data does not show any significant relationships between religion and the likelihood of being involved in our FTP processes, beyond the confluence of religion with the race and ethnicity issues identified in the section above.

General public

- Similarly, service users and colleagues in health and care who are subjected to discrimination on the basis of religion are likely to be positively benefited by the changes which aim to increase protections against all forms of discrimination. Panels will be better able to identify and act on concerns raised in the FTP process where discrimination on these grounds has occurred.
- No further differential impacts have been identified relating to the general public, including service users and colleagues in health and care, based on religion or belief. Several respondents indicated that the policy should explicitly name forms of religious-based discrimination as unacceptable conduct by registrants.

- The general public, including service users and colleagues in health and care, are likely to be positively impacted by the changes which are designed to ensure strong regulation to safeguard public safety.

Points from stakeholder responses: summary and mitigations

Some consultation responses noted that stronger protection and fairness is needed for registrants in relation to their religion. However, [our data and analysis](#) does not indicate differences in the likelihood of being involved in FTP processes based on, or rooted within religion or belief. We have also not identified any specific differential impacts on the general public based on this protected characteristic.

Therefore, we have not identified any specific mitigation for this category, but we note that existing protections against discrimination apply throughout the FTP process in line with the Equality Act, which includes religion as a protected characteristic.

As noted in the previous sections, the revised sanctions policy contains clear description and guidance of unlawful discrimination to service users, carers and colleagues, with the aim of providing registrants and panels with clear understanding of discriminatory behaviour. These support the existing requirements of our [standards of conduct, performance and ethics](#). The revised policy states that registrants must not unfairly discriminate, including unlawful discrimination covered by the Equality Act (see paragraph 98).

The revised policy also addresses panel's consideration of systemic and contextual factors which they find relevant to decision-making (see paragraph 41, 71 and 113).

Sex

Registrants

- FTP data¹⁴ shows that males are consistently over twice as likely to have one or more FTP concerns than women of the same age group. Furthermore, the percentage of males with an Investigating Committee Panel decision is considerably higher than females by nearly ten percentage points. The HCPC is continuing to investigate these data and consider the differential impacts on registrants by sex.
- As mentioned previously regarding disability, pregnancy, and maternity, registrants who take time off or have career breaks may find that remedial training is less available to them. Women are more likely to take career breaks or work part time due to pregnancy/maternity or other caring responsibilities and, therefore, be disproportionately impacted.

General public

- We consider that the changes to the policy's section on sexual misconduct and sexually motivated misconduct will add clarity and support the general public, including service users and colleagues in health and care, who raise concerns and reports to the HCPC.
- The general public, including service users and colleagues in health and care, are likely to be positively impacted by the new changes which are designed to ensure strong regulation which safeguards public safety.

¹⁴ [fitness-to-practise-data---supplementary-analysis-2023-24.pdf](#)

Points from stakeholder responses: summary and mitigations

Some consultation respondents indicated that personal beliefs about gender and sex should not interfere with professional practice, and that beliefs of this nature should not automatically be categorised as discrimination, noting that individuals retain the right to freedom of speech.

We recognise the importance of protecting registrants' lawful freedom of expression and beliefs, as is set out in the HCPTS Practice Note on [Freedom of expression](#). The sanctions policy is clear that registrants must take action to ensure their personal values, biases and beliefs do not lead them to discriminate against others, or detrimentally impact the care, treatment or other services they provide.

We recognise concerns about potential misuse of the HCPC referrals and risks of bias against registrants in the form of malicious or vexatious complaints. However, these concerns fall outside the scope of the sanctions policy and are more appropriately addressed within our threshold and investigation processes.

Some respondents suggest that the HCPC should expand professional boundaries to include sexual misconduct including abuse of power, as it is important to address consistently as a reflection of professionalism, and that panels require further training on culture and gendered power dynamics.

Following stakeholder suggestions, we have updated the section of revised policy on professional boundaries to provide panels with clarity about possible breaches in cases involving vulnerable or more junior colleagues, or where there is an unequal balance of power (see paragraphs 105-115). In addition, the revised policy now includes greater clarity regarding sexually motivated misconduct to support panels considering matters involving sexual misconduct or sexually motivated misconduct. This aims to ensure panels have a consistent and fair approach in their decision making for registrants.

The HCPC will undertake an audit of material related to professional boundaries which will include potential violations with elements relating to sex, and to power dynamics in general. This will help us take further steps to support registrants to develop good practice, equitable decision making and awareness in their work and working environments.

A respondent indicated that the policy is too harsh towards men or could disproportionately affect men, particularly in cases involving sexually motivated misconduct. The revised policy aims to provide fair and appropriate protections for all registrants regardless of sex, and to support panels to make balanced and proportionate decisions. However, the HCPC will continue to monitor FTP data and any possible trends to ensure that the process supports all registrants and that no group is disproportionately affected.

Sexual orientation

Registrants

- Registrants who are subjected to discrimination on the basis of sexual orientation are likely to be positively benefited by the changes which aim to increase protections against all forms of discrimination. Panels will be better able to identify and act on concerns raised in the FTP process where discrimination on these grounds has occurred.
- No further differential impacts have been identified relating to the sexual orientation of registrants, and our data does not show any significant or strong relationships between sexual orientation and the likelihood of being involved in our FTP processes.

General public

- Similarly, service users and colleagues in health and care who are subjected to discrimination on the basis of sexual orientation are likely to be positively benefited by the proposed changes which aim to increase protections against all forms of discrimination. Panels will be better able to identify and act on concerns raised in the FTP process where discrimination on these grounds has occurred.
- The general public, including service users and colleagues in health and care, are likely to be positively impacted by the changes which are designed to ensure strong regulation to safeguard public safety.

Summary

No specific impacts have been identified specifically relating to sexual orientation, including via our consultation responses.

However, as noted in the previous sections, the revised sanctions policy contains clear description and guidance of unlawful discrimination to service users, carers and colleagues, with the aim of providing registrants and panels with clear understanding of discriminatory behaviour. These support the existing requirements of our [standards of conduct, performance and ethics](#). The revised policy states that registrants must not unfairly discriminate, including unlawful discrimination covered by the Equality Act (see paragraph 98).

The revised policy also addresses panel's consideration of systemic and contextual factors which they find relevant to decision-making (see paragraph 41, 71 and 113).

Other identified groups

1. Socio-economic background

- One of the key determinants in FTP outcomes is whether a registrant has legal representation.¹⁵ Registrants from a lower socio-economic background, or those with limited access to family or community resources, may be less likely to access legal representation in the FTP process. This means they could be disproportionately impacted as a result of this lack of access. This could be particularly exacerbated by other intersecting factors such as nationality or national origin.

2. Criminal justice history

- The sanctions policy includes a general provision that registrants who have been convicted of a serious criminal offence, conviction, or caution should not be permitted to continue to or return to unrestricted practice until their sentence has been satisfactorily completed. Given the known and well-documented disparities within the criminal justice system, those groups that are overrepresented in the criminal justice system may be impacted disproportionately by this policy. However, panels are instructed that it may be disproportionate to impose a suspension or removal from the Register solely because part of the sentence remains outstanding.

3. Cultural differences

- There is a recognised risk that cultural differences, as well as forms of neurodivergence, can significantly influence how a registrant engages with the FTP process. Variations in

¹⁵ [The concept of seriousness in fitness to practise – a cross-regulatory research](#)

communication styles, attitudes toward authority, norms around eye contact or directness, and differing expectations of formal processes may all be misinterpreted as evasive, uncooperative, or disengaged behaviour. Without careful consideration, these misunderstandings can create inequities in how registrants are assessed and may contribute to disproportionate outcomes in the sanctions process.

Points from stakeholder responses: summary and mitigations

Responses noted that the impact of most serious sanctions, such as suspension and strike off, may have disproportionate consequences for registrants in the UK on visas that are dependent on continued employment. The revised sanctions policy requires panels to carefully consider the potential impacts of sanctions on registrants in such circumstances (see paragraph 143).

A membership organisation noted that greater consideration is needed for cultures and alternative expressions of remorse and the biases that may follow this. We have recommended mitigations above which would apply to this (see section on disability on pages 4-6 above).

The revised sanctions policy makes clear that panels should be mindful that cultural differences and neurodivergence may impact the way a registrant engages with the investigation into their conduct, and with any hearing. Panels should therefore take account of potential cultural and neurodiversity factors that may have influenced the registrant’s engagement when considering a sanction (see paragraph 11).

The policy also gives a broad definition of what is meant by apologies and outlines the role of remorse in initial communication with service users and within FTP proceedings. It guides panels to take cultural and contextual factors into account when considering these elements (see paragraph 61-64 of the revised policy).

To provide further mitigation around other identified groups, the revised policy clearly states that the role of the panel is not to impose additional punishment to any already imposed by the courts, but to protect the public and the wider public interest. Therefore, the panel must provide clear reasoning for its decisions at every stage of the process to provide clarity for both the registrant and the general public.

Regarding legal representation, panel members will be instructed through training and guidance not to view the presence or absence of legal representation prejudicially. Therefore, panels should carefully consider the nature of the offence, the stage of the sentence, and any evidence of rehabilitation when determining an appropriate sanction.

Four countries diversity

We have engaged stakeholders across the UK nations to seek their feedback on our proposals.

Our respondent breakdown for individuals was as follows:

Registrants

Where do you work?	Count
England	27
I work across the UK	3
Scotland	2
Wales	3
Grand Total	35

Non-registrants

Primary location	Count
England	6
Wales	1
Grand Total	7

Section 4: Welsh language standards

What effects does this policy have on opportunities for people to use the Welsh language and engage with our commitments under the Welsh language standards?

The revised sanctions policy will be translated and published in Welsh.

Overall, the changes to the policy will provide greater clarity and support for panels and registrants as well as to protect the public. Given that the changes are largely in language, style and tone to remain consistent with practice notes and case law, we do not believe that these proposals impact our commitments under the [Welsh language standards](#).

The rights conferred by the Welsh language standards during the FTP process can be found in full on our website¹⁶. These include the right to have any hearings take place with simultaneous translation from Welsh to English. The new changes will continue to be subject to the full requirements outlined in the standards.

How does this policy treat the Welsh language no less favourably than the English language?

The revised sanctions policy will be translated and published in Welsh and English.

Otherwise, the changes will not impact on our commitments under the Welsh language standards.

Section 5: Summary of analysis

What is the overall impact of this work?

We expect the changes to have overall positive impacts for registrants and the general public by providing clarity and consistency within the sanctions process and ensuring the policy remains aligned with updated practice notes and case law.

As outlines in section 3, the impacts identified highlight how the sanctions policy might affect different groups in different ways. We recognise that the updates to the policy may also disparately impact these groups in similar ways.

Generally, the changes are aimed at increasing the clarity and consistency of the policy, strengthening the approach to address all forms of discrimination and identify failures to maintain professional boundaries. We consider that these improvements will help mitigate instances of inequitable impacts to various groups.

¹⁶ <https://www.hcpc-uk.org/about-us/corporate-governance/policies/welsh-language-standards/>

The changes to the policy relate to interim orders, insight and remorse, seriousness and culpability, sexual misconduct and sexually motivated misconduct and discrimination. The improved clarity of the guidance on these issues is intended to support the panel in making fair and consistent decisions. Therefore, we anticipate this to have a positive impact on fairness and equity in the sanctions process.

Changes to suspension orders, interim orders, striking off, assessing seriousness and culpability, professional boundaries and dishonesty all include clarification and expansion of guidance on these topics in order to support the panel in their function.

Each of these changes is anticipated to provide a clearer context and lead to more consistent and reasoned decision-making. It is possible that the changes may impact certain groups differently.

Some of these differences may be as a consequence of some groups being disproportionately represented within our FTP processes (which this policy has no influence over), and some may be because certain mitigating factors may be more difficult for some groups to evidence, as described in section 3. The HCPC will monitor the impacts of our changes and continue to consider how to mitigate disproportionate impacts where appropriate and possible.

Overall, we believe these changes are necessary to ensure we can continue to meet our public protection obligations. We are committed to exploring these issues further and to adding suitable mitigations into the new sanctions policy and supporting guidance.

Section 6: Action plan

Summary of action plan

As indicated above, we have sought views on our changes to the proposed sanctions policy. Our work aims to create an equitable, fair, and transparent policy for sanctions which is used by panels.

We are very grateful for all the responses received to our consultation. Our proposals were well received with stakeholders expressing support for the proposed approach. All feedback and suggestions were insightful.

We have made the following changes following stakeholder feedback and suggestions:

- **Structural and editorial improvements:** such as adding an explanation of where the sanctions process falls in the FTP process; adding additional cross-references to other sections within the policy and to relevant separate guidance and practice notes; updating references to the revised standards; aligning the mitigating factors and aggravating factors sub-sections under the proportionality section; and minor textual edits for accuracy, accessibility and readability.
- **Clearer guidance to panels to consider contextual factors:** including adding further instruction to panels to consider seriousness, culpability and all mitigating and aggravating factors throughout their decision-making process; directing panels to explicitly consider the impact of neurodivergence on insight and apology; broadening the range of remediation evidence that panels will consider as mitigating factors; instructing panels to consider the possible barriers to remediation which might exist for a

registrant; and guiding panels to consider the impact of a sanction on a registrant and their circumstances.

- **Strengthening language related to misconduct towards colleagues:** including adding explanations of bullying and why bullying is considered a serious case; removing superfluous detail from the section on professional boundaries and signposting to the Practice Note on [Professional boundaries](#); and explicitly instructing panels not to treat sexual misconduct against colleagues as less serious.
- **Adding further clarity and explanation:** such as clarifying the section on weighing existing interim orders; clarifying the purpose of a short-term suspension; and, removing the detail on review hearings, and instead sign-post panels to the Practice Note on [Review of Article 30 sanction orders](#).
- **Ensuring consistency across the policy:** adding introductory paragraphs for consistency and clarity among sub-sections; and aligning language between offences related to sexual abuse of children and offences related to indecent images of children.

We will undertake the following ongoing actions to monitor EDI impacts:

- We will continue to monitor any potential impacts of these changes on registrants with one or more protected characteristics who engage with or are impacted by the sanctions policy. In the course of this work, we will also assess any impacts affecting public protection for members of the public. Where any related adverse impacts arise for registrants or service users, we will take appropriate action to redress these.
- We will also continue to take feedback from our EDI forum and external informal feedback from any interested parties, with a view to informing any future policy development in this area.

During the consultation phase, we undertook the following actions to review and improve our proposals where necessary:

- We carried out a full public consultation on our proposals, with internal stakeholder engagement. The consultation asked respondents a series of questions, including potential negative and positive equality impacts to obtain feedback from our proposals.
- We sought input from groups of people who share specific protected characteristics and organisations that represent them about the impacts of proposals in respect of their protected characteristic. We also sought general feedback on these issues from employers, professional bodies, and service users.
- We presented at the HCPC's EDI forum to take informal feedback on how the proposals might impact a range of individuals and groups, and to encourage participants to make a formal response.
- We created a log to assess and record each response which includes issues which were raised during the consultation. The log included issues or suggestions for change as well as practical mitigations.

How will the project eliminate discrimination, harassment and victimisation?

Maintaining the HCPC's ability to be an effective regulator is key to ensuring that registrants and members of the public needing and receiving healthcare are not subject to discrimination, harassment and victimisation. We will do this by preventing or addressing these risks through our work registering applicants, by supporting our registrants, and via the structures underpinning our FTP process. We believe the updates to the policy help provide fairness and equity in the sanctions process and promote the protection of the public.

How will the project advance equality of opportunity?

Maintaining the HCPC's ability to be an effective regulator is key to ensuring that registrants are able to provide healthcare services equitably and based upon patient need, and that members of the public are able to access effective and appropriate healthcare services in a timely manner. The changes to the policy will ensure that the sanctions policy is executed with more fairness and clarity for registrants and members of the public.

How will the project promote good relations between groups?

These changes will provide greater clarity to those involved in the FTP process, regardless of perspective. The changes aim to ensure greater organisational sensitivity to factors arising from protected (and other relevant) characteristics, whilst providing that public protection is prioritised for all service users regardless of background. By setting clear standards while encouraging compassion and empathy in how they are upheld, the changes demonstrate good will towards all registrant communities alongside a shared and consistent commitment to our expectations from professionals.