

# Equality Impact Assessment (Level 2)

## Section 1: Project overview

<b>Project title:</b> HCPC fees Consultation: 2026	
<b>Name of assessor:</b> Adrian Barrowdale	<b>Version:</b> 1

### What are the intended outcomes of this work?

- To ensure adequate funding for the effective regulation of 15 healthcare professions<sup>1</sup> to maintain public safety in professional healthcare practice by increasing fees levied.
- We are proposing to increase the annual registration renewal fee our registrants pay by £5.06 per year, to be phased in over two years from 2027. The increase is equivalent to just over 10p per week, and the new registration fee would be £128.40 a year. There would be equivalent increases in our other fees. We would maintain the 50% discount that graduate applicants receive for the first two professional years of registration.
- The HCPC Council considered alternative, higher increases, but decided to propose the minimum necessary amount (including essential improvements), taking account of the impact on registrants including how that impact varied across groups with different protected characteristics.

### Who will be affected?

- Registrants and potential registrants, including students or trainees
- The public, including service users and colleagues in health and care
- Education and training providers
- Health and care providers, professional bodies and consumer groups; and
- HCPC employees and partners.

## Section 2: Evidence and Engagement

Lack of data should not prevent a thorough EIA. Be proactive in seeking the information you need.

### What evidence have you considered towards this impact assessment?

1. HCPC registrant database which provides information on the breakdown of protected characteristics across our current registrant population.<sup>2</sup>
2. NHS pay scale information<sup>3</sup>.
3. Pay gap information from ONS covering: sex/gender<sup>4</sup>, disability<sup>5</sup>, ethnicity<sup>6</sup> and low pay<sup>7</sup>.

<sup>1</sup> 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.

<sup>2</sup> <https://www.hcpc-uk.org/data/>

<sup>3</sup> <https://www.nhsemployers.org/articles/pay-scales-202526>

<sup>4</sup> [Gender pay gap in the UK - Office for National Statistics](#)

<sup>5</sup> [Disability pay gaps in the UK: 2014 to 2023 - Office for National Statistics](#)

<sup>6</sup> [Ethnicity pay gaps, UK - Office for National Statistics](#)

<sup>7</sup> [Low and high pay in the UK - Office for National Statistics](#)

4. The result of the 2022/23 equality impact analysis on our fee structure<sup>8</sup>
5. The results of the 2024 consultation exercise, which ran from 10<sup>th</sup> April to 14<sup>th</sup> June<sup>9</sup>.

These proposals will also be informed by internal discussions, including but not limited to members of HCPC's Council.

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

1. The HCPC registrant database is held within HCPC, populated by information provided by registrants.
2. Pay data has been sourced from the NHS using publicly available information.
3. We have also reviewed the information provided during the 2022/23 and 2024 exercises to increase registrant fees, both of which included significant stakeholder engagement.
4. This EIA will be updated following public consultation. The consultation will ask respondents to help provide additional evidence about their sense of the likely impacts from the fee rise; on themselves, those they work with, or those to whom they provide services. The consultation will ask for additional information about the potential negative or positive equality impacts of these proposals and for information about potential mitigations to any identified negative impacts on groups who share protected characteristics.
5. We will seek feedback on these proposals from HCPC's Equality, Diversity and Inclusion (EDI) Forum. Members of the forum are external stakeholders with expertise in EDI and lived experience; membership includes registrants and EDI professionals in relevant stakeholder organisations. We will also encourage feedback through the consultation from patients and service users.
6. Further stakeholder engagement will take place as part of the consultation exercise for the proposal; the plan for this is currently in development, but it is expected to include engagement with professional bodies and trade unions, employers, and members of the public who use health and care services.

## Section 3: Analysis by equality group

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

Describe any impact to groups or individuals with the protected characteristics listed below that might result from the proposed project. Draw upon evidence where relevant.

For all characteristics, consider **discrimination, victimisation, harassment and equality of opportunity** as well as issues highlighted in the guidance text.

### Summary

This equality impact assessment identifies possible positive and negative impacts of our proposals. Any proposal to increase our fee is likely to have greater negative impact on those registrants who are more likely to be lower paid, such as younger professionals, who may be more likely to be at the start of their careers, women, registrants from ethnic minority backgrounds and those with more than one of these characteristics. Proposals could contribute to some registrants deciding to leave the workforce.

The impact on younger workers would be mitigated by continuing our previous 50% graduate discount. This discount reduces the cost to first-time student joiners to the Register, for one

<sup>8</sup> [consultation-on-changes-to-fees-analysis-and-decisions.pdf \(hcpc-uk.org\)](#)

<sup>9</sup> [Fee consultation | \(hcpc-uk.org\)](#)

registration cycle (2 years). If a new graduate joins the Register less than six months before the start of the next professional year, they also receive the remainder of the period free of charge (the 'free period').

Since the introduction of our current framework for fee rises, we have actively promoted the availability of tax relief on HCPC fees through renewal communications, within the online account and through website and social media signposting. We have included additional content in our registration renewal communications about claiming tax relief, with signposting throughout our website and in social media posts.

We also increased the number of direct debit payment points available to registrants from four per cycle to eight per cycle. As a result of the 2023 fee increase coming into effect five months later than proposed in our 2022 consultation document, those changes to came into effect later than originally planned: subject to approval of the fee increase proposed in this document we aim for them to take effect in time for the next full registration period (2025-27).

The positive impact of this proposal is that it secures the future of HCPC regulation, which performs a vital function supporting the delivery of safe, effective and high-quality health and care services across the UK. The fifteen professions we regulate provide a range of health and care services to the whole population, and importantly to people at greater need of care because of their protected characteristics, such as disabled people relying on physiotherapy services, children and young people relying on psychological services or older people relying on audiology services.

Reductions in the HCPC's regulatory activity would negatively impact across the population as a whole, including these groups, and groups who share more than one protected characteristic, such as pregnant women from some ethnic communities or older people living with a disability or a long-term health condition could be particularly impacted. Without adequate funding, the HCPC could not, for example, take effective and timely action where fitness to practise issues arose. If the HCPC is not able to perform its functions effectively, patient safety is likely to be compromised. This would have a likely negative impact on registrants, as well as on patients and the general public. A lack of adequate funding could also negatively impact on HCPC's ability to consider the needs of people with protected characteristics and promote and drive equality more widely.

## **Age**

### ***Registrants***

- Younger registrants are generally more likely to be at the start of their careers and so likely to be on lower incomes than other registrants; any proposal to increase our fee is likely to have greater negative impact on registrants who are lower paid. A proposal to increase fees may contribute to younger registrants, or older registrants who may be nearing retirement, deciding to leave the regulated health and care workforce. Biomedical scientists, hearing aid dispensers, orthoptists, paramedics and radiographers are amongst the professions with a greater proportion of registrants under 40.
- The impact on younger workers is mitigated by a 50% graduate discount, which we are proposing to retain. This discount reduces the cost to first-time student joiners to the Register, for one registration cycle (2 years). If a new graduate joins the Register less than six months before the start of the next professional year, they also receive the remainder of the period free of charge (the 'free period').
- Conversely, all registrants are likely to be negatively impacted if their regulator is not adequately funded to carry out its functions effectively. As well as their practice and public confidence in their profession being negatively impacted by reductions in patient safety, registrants engaging with their regulator are likely to see diminishing service levels. This could

disproportionately negatively impact older or younger registrants who may require more support to engage with HCPC, for example in relation to access to online processes for older registrants or a lack of familiarity with processes for younger registrants.

### **General public**

- Should the fee rise have a significant impact on numbers of HCPC registrants in the health and care workforce, this could reduce the availability of health and care services, which is likely to disproportionately impact older adults, young people and children, and most especially those with complex health and care needs.
- Conversely, the general public, including patients and service users, are likely to be positively impacted by the proposals which are designed to ensure strong regulation which safeguards public safety. Patients and service users are likely to be significantly negatively impacted if their regulator is not adequately funded to carry out its functions effectively which could lead to an increase in patient harms. Any such negative consequences could disproportionately impact those, such as children or older people, who may be more likely to access health services or be more vulnerable to harm.
- We plan to gain focussed feedback on our rationale and the fee rise proposal as part of the consultation process. This document will be further updated to reflect any relevant findings arising from this work.

### **Disability**

#### **Registrants**

- The national disability pay gap was last estimated to be 13%<sup>10</sup>. Registrants with disabilities or health conditions may be more negatively impacted by the fee rise than others, for example, if it reduces the funds they have available to use for managing and living with their conditions in order to be able to maintain their employment. Arts therapists and occupational therapists have a greater proportion of disabled registrants compared with other professions.
- Conversely, registrants with disabilities may be more likely to be negatively impacted if their regulator is not adequately funded to carry out its functions effectively. For example, registrants with some disabilities may require more support to engage with HCPC or to access our processes so reductions in HCPC's ability to provide good service levels could disproportionately negatively impact these registrants.

#### **General public**

- Should the fee rise have a significant impact on numbers of HCPC registrants in the health and care workforce, this could reduce the availability of health and care services, which is likely to disproportionately impact people with disabilities, most especially those with complex health and care needs.
- Conversely, the general public, including patients and service users, are likely to be positively impacted by the proposals which are designed to ensure strong regulation to safeguard public safety. Patients and service users are likely to be significantly negatively impacted if their regulator is not adequately funded to carry out its functions effectively which could lead to an increase in patient harms. Any such negative consequences are likely to disproportionately impact on those with disabilities who may be more likely to access health services, have more complex needs or be more vulnerable to harm.

<sup>10</sup> [Disability pay gaps in the UK: 2014 to 2023 - Office for National Statistics](#)

## **Gender reassignment**

### ***Registrants***

- Registrants transitioning may be negatively impacted by the fee rise if it reduces the funds they have available to use for managing their needs during the process, for instance if they need to work fewer hours during their transitioning and so receive less income.
- Conversely, registrants transitioning, who may need additional advice or support from their regulator, may be negatively impacted by any diminished service levels which may be caused by inadequate funding.

### ***General public***

- Should the fee rise have a significant impact on numbers of HCPC registrants in the health and care workforce, this could reduce the availability of health and care services, which may disproportionately impact those going through gender reassignment if it impacts on the specialist services they need, such as psychological services that support people with complex health and care needs.
- Conversely, the general public, including patients and service users, are likely to be positively impacted by the proposals which are designed to ensure strong regulation which safeguards public safety. Patients and service users are likely to be significantly negatively impacted if their regulator is not adequately funded to carry out its functions effectively which could lead to an increase in patient harms. Any such negative consequences are likely to disproportionately impact on those who may be more likely to access health services, have more complex needs or be more vulnerable to harm. This could include those going through gender reassignment.

## **Marriage and civil partnerships**

### ***Registrants***

- No differential impacts have been identified relating to registrants who are married or in civil partnerships. We are seeking feedback on equality impacts in our consultation and will ensure any identified impacts are considered in our analysis and response.

### ***General public***

- Any reduction in the availability of health and care services may impact those couples seeking regulated healthcare support related to their relationship, e.g., from psychological services. However, adequately funded healthcare regulation is likely to positively impact this same group by supporting high quality professional practice and maintaining patient / service user safety.

## **Pregnancy and maternity**

### ***Registrants***

- Registrants who are pregnant or who have childcare responsibilities may be negatively impacted by the fee rise if, for instance if they need to work fewer hours and so receive less income. Such registrants may decide to leave the regulated workforce for childcare purposes and stop paying their registration fees. We are mindful that, if they decide to return, they would need to pay the increased(?) readmission fee so an increase in this may be more likely to impact on them. Nearly every one of our professions has a female majority. Only paramedics have a male majority of registrants. Our register is just below 3/4 female overall.

- Conversely, registrants who are pregnant or who have childcare responsibilities, who may need additional advice or support from their regulator, may be negatively impacted by any diminished service levels which may be caused by inadequate funding.

### **General public**

- Should the fee rise have a significant impact on numbers of HCPC registrants in the health and care workforce this could reduce the availability of health and care services, which may impact on services available to support pregnant women and those who have recently given birth.
- Conversely, the general public, including patients and service users, are likely to be positively impacted by the proposals which are designed to ensure strong regulation which safeguards public safety. Patients and service users are likely to be significantly negatively impacted if their regulator is not adequately funded to carry out its functions effectively which could lead to an increase in patient harms.
- Any such negative consequences are likely to disproportionately impact on those who may be more likely to access health services, have more complex needs or be more vulnerable to harm. This could include pregnant women and those who have recently given birth.

## **Race**

### **Registrants**

- Available evidence indicates that people from some ethnic minority groups are more likely to be on low incomes and so likely to be more negatively impacted by any fee rise.<sup>11</sup>
- Applicants joining the register from overseas may well be joining from countries with significantly lower average pay than the UK. These groups already pay a greater set of fixed costs to begin working in the UK (e.g., International English Language Testing System (IELTS) costs, relocation costs, etc) and an increase in fee levels, including application fees, may disproportionately impact this group of registrants. Biomedical scientists, hearing aid dispensers and radiographers have the most ethnically diverse range of registrants, whilst approximately 75% of our register have identified as white.
- Conversely, international applicants, who may need additional advice or support from their regulator, may be negatively impacted by any diminished service levels which may be caused by inadequate funding.

### **General public**

- Should the fee rise reduce the numbers of HCPC registrants in the health and care workforce, this may impact on the ability of services to meet the needs of specific ethnic groups, for instance those needing language support or wishing to have care provided in a culturally sensitive manner, e.g., with chaperones.
- Conversely, the general public, including patients and service users, are likely to be positively impacted by the proposals which are designed to ensure strong regulation which safeguards public safety. Patients and service users are likely to be significantly negatively impacted if their regulator is not adequately funded to carry out its functions effectively which could lead to an increase in patient harms. Any such negative consequences could disproportionately impact those from some ethnic minority groups who may need additional support.

<sup>11</sup> [Ethnicity pay gaps, UK - Office for National Statistics](#)

## **Religion or belief**

### ***Registrants***

- No clear differential impacts have been identified relating to registrants in relation to religion or belief. We are seeking feedback on equality impacts in our consultation and will ensure any identified impacts are considered in our analysis and response.

### ***General public***

- No clear differential impacts have been identified relating to the general public in relation to religion or belief. We are seeking feedback on equality impacts in our consultation and will ensure any identified impacts are considered in our analysis and response.

## **Sex**

### ***Registrants***

- The national gender<sup>12</sup> pay gap is 6.9%, down from 7.8% as assessed when we last raised our fees. However this still suggests that female registrants are likely to be lower paid, therefore more negatively impacted by the fee rise. Available evidence also indicates that women are more likely to be carers (children, relatives, partners with ill-health or disabilities) so a reduction in income may also have greater impact.
- As set out above (see pregnancy and maternity), registrants who are pregnant or who have childcare responsibilities may be negatively impacted by the fee rise if, for instance if they need to work fewer hours and so receive less income. Such registrants may decide to leave the regulated workforce for childcare purposes and stop paying their registration fees. We are mindful that, if they decide to return, they would need to pay the readmission fee so an increase in this may be more likely to impact on them. Nearly every one of our professions has a female majority. Only paramedics have a male majority of registrants. Our register as a whole is nearly 3/4 female.
- Conversely, registrants who are pregnant or who have childcare responsibilities, who may need additional advice or support from their regulator, may be negatively impacted by any diminished service levels which may be caused by inadequate funding.

### ***General public***

- As previously noted, should the fee rise reduce the numbers of HCPC registrants in the health and care workforce, this may impact on services available to specifically support women, including those related to fertility and maternity care, such as diagnostic, physiotherapy and psychological services.
- Conversely, the general public, including patients and service users, are likely to be positively impacted by the proposals which are designed to ensure strong regulation which safeguards public safety. Patients and service users are likely to be significantly negatively impacted if their regulator is not adequately funded to carry out its functions effectively which could lead to an increase in patient harms. Any such negative consequences could disproportionately impact specialist women's health services.

## **Sexual orientation**

### ***Registrants***

<sup>12</sup> "Gender" here is taken from the terminology used in reporting.

- No clear differential impacts have been identified relating to registrants in relation to religion or belief. We are seeking feedback on equality impacts in our consultation and will ensure any identified impacts are considered in our analysis and response.

### **General public**

- As previously noted, should the fee rise reduce the numbers of HCPC registrants in the health and care workforce this may reduce the overall availability of health and care services, which may impact on services available to specifically support people from the Lesbian, Gay and Bisexual (LGB) communities, such as psychology services.
- Conversely, the general public, including patients and service users, are likely to be positively impacted by the proposals which are designed to ensure strong regulation which safeguards public safety. Patients and service users are likely to be significantly negatively impacted if their regulator is not adequately funded to carry out its functions effectively which could lead to an increase in patient harms. Any such negative consequences could disproportionately impact specialist LGB services.

### **Other identified groups**

#### **Registrants**

Those registrants on lower pay are a key group to be considered, as they are most likely to be negatively impacted by a fee rise.

This group contains registrants from all the groups above, although women, people from ethnic communities, disabled people, younger workers and those working part-time or irregular hours (e.g., due to having caring responsibilities) are most likely to be negatively impacted by a fee rise.

We have considerable sympathy for registrants on low incomes who face financial pressures, however there would be significant challenges in defining and implementing a discount that could be administered and enforced cost-effectively.

Direct measures to mitigate the impact (such as discounts) have been considered, however these present technical challenges which we consider to render them disproportionate. These includes the difficulty of creating fair definitions and thresholds, inability to measure factors such as outgoings, the costs involved in overcoming difficulty in granting qualification and ensuring enforcement and fairness, and the overall cost of measures against a fee increase as a whole.

Instead, our focus regarding recent fee rises has been on the mitigations of introducing more frequent direct debits payment options and promoting tax relief, which – though not targeted – are likely to be of particular value to those on lower incomes. Although inflation remains above the Bank of England target, it is significantly lower than it was at the time of the 2022 consultation<sup>13</sup> and real wages have in most sectors of the economy kept pace with inflation. In addition, the recommended option of a £5.06 increase is lower than the increases that came into effect in 2023 and 2025 and is closer to the rate of inflation. Both mitigations on direct debits and promoting tax relief have been successfully progressed and we will continue with them. We have not identified further impacts in this area and therefore do not have further mitigations to recommend.

As set out above, the impact on younger workers, who are more likely to be lower paid as they are at the start of their career, is mitigated by a 50% graduate discount, which we are proposing to retain. This which reduces the cost to first-time student joiners to the Register, for

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<sup>13</sup> CPI inflation between September and December 2022, during the consultation period, was over 10%. The latest official figures show CPI running at 3.6% for the 12 months to October 2025. The OBR forecast accompanying the Chancellor's Budget is for CPI inflation to be 2.5% in 2026 before falling to 2.0% from 2027 onwards.

one registration cycle (2 years). If a new graduate joins the Register less than six months before the start of the next professional year, they also receive the remainder of the period free of charge (the 'free period').

#### **Four countries diversity**

We will be engaging stakeholders across the UK nations to seek their feedback on our proposals. Any issues identified through our consultation and engagement process that are specific to any of the UK nations will be carefully considered in preparing our response to the consultation.

## **Section 4: Welsh Language Standards**

### **What effects does this policy have on opportunities for persons to use the Welsh language and engage with our commitments under the Welsh Language Standards?**

The proposed fee rise will support the HCPC in meeting our obligations under the Welsh Language Standards, including our ability to provide information in Welsh and to support the promotion of the Welsh language.

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

Our proposals can be provided in Welsh on request, and our consultation was also available in Welsh upon request.

We have considered ways in which these proposals might negatively impact on people using Welsh, and have not identified any differential impact on the use of Welsh, or differentially for Welsh speakers.

## **Section 5: Summary of Analysis**

### **Summary**

This equality impact assessment identifies possible positive and negative impacts of our proposals. Any proposal to increase our fee is likely to have greater negative impact on those registrants who are more likely to be lower paid, such as younger professionals, who may be more likely to be at the start of their careers, women, registrants from ethnic minority backgrounds and those with more than one of these characteristics. Proposals could contribute to some registrants deciding to leave the workforce.

The impact on younger workers is mitigated by a 50% graduate discount, which we are proposing to retain. This which reduces the cost to first-time student joiners to the Register, for one registration cycle (2 years). If a new graduate joins the Register less than six months before the start of the next professional year, they also receive the remainder of the period free of charge (the 'free period').

The 2024 consultation provided further evidence of the concerns people have about the fee rise impacting on specific groups, but did not uncover any new areas for consideration. For example, recently bereaved/widowed registrants were identified as a group who perhaps would be more likely to be impacted by a fee rise, but this was in common with other groups already identified more broadly as 'potentially low income'.

The consultation also identified areas of potential mitigation, many of which are planned or already available. For example, respondents suggested increasing the spread of direct debit payments across the calendar year to make individual payments more affordable. Others suggested allowing those not working through (for example) pregnancy or maternity the opportunity for a discount. We considered this possibility in 2022 but felt that at the current time it was not possible due to the complexity, cost and risk associated with introducing such a measure (see [enc-05---registration-fees-consultation.pdf \(hcpc-uk.org\)](#) at paragraphs 7.1 – 7.5 for more detail).

The positive impact of this proposal, including in relation to equality impacts, is that it secures the future of HCPC regulation, which performs a vital function supporting the delivery of safe, effective and high-quality health and care services across the UK. The fifteen professions we regulate provide a range of health and care services to the whole population, and importantly to people at greater need of care because of their protected characteristics, such as disabled people relying on physiotherapy services, children and young people relying on psychological services or older people relying on audiology services.

Reductions in the HCPC's regulatory activity would negatively impact across both the population as a whole and specifically these and many other groups and those who have more than one protected characteristic, such as pregnant women from some ethnic communities or older people living with a disability or long-term health condition. Without adequate funding, the HCPC could not, for example, take effective and timely action where fitness to practise issues arose. If the HCPC is not able to effectively perform its functions, patient safety is likely to be compromised. This would have a likely negative impact on registrants, as well as on patients and the general public. A lack of adequate funding could also negatively impact on HCPC's ability to consider the needs of people with protected characteristics and promote and drive equality more widely.

## Section 6: Action plan

Summarise the key actions required to improve the project plan based on any gaps, challenges and opportunities you have identified through this assessment.

Include information about how you will monitor any impact on equality, diversity and inclusion.

### Summary of action plan

As set out above, we are proposing the following:

1. Retain the two-year 50% graduate discount, including “free” periods where a new graduate joins the Register less than six months before the start of the next professional year
2. Retain the increased spread of direct debits from four per cycle to eight per cycle. As the increase takes effect, payment of fees should apply from the date of registration, in order to ensure equal treatment of individuals by making sure that they are paying fees based upon the same structure.

### 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, either by prevention or by addressing through our work registering and supporting our registrants or our Fitness to Practise powers.

### 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.

### How will the project promote good relations between groups?

HCPC’s regulation, through our Standards and our promotion of our Standards, promotes equality in the round. This supports good relations between groups.