Business Process Improvement – Roy Dunn

Human Resources
No changes.

Quality Management System (QMS) review meetings and internal audits
The internal audit schedule for 2010-11 is running. HR Employee and Partner areas, plus UK Registrations, have been audited.

QMS process updates
Updating Human Resources – Employees and Human Resources – Partners, and Registrations processes has taken place.

BSI Audit
BSI will audit HPC on 6th October 2010 and we have now starting a new three year cycle. BSI will now start to re-audit the whole organisation over the next three year period. We will initially have our "previous" auditor due to scheduling difficulties at BSI. An Overview of ISO9001 at HPC is included as an appendix to this report. This highlights how HPC have produced the Quality Management System, the terms used in Audit Reports and includes a copy of HPC's Quality Manual.

Business continuity
PKF have carried out an audit of the Business Continuity plans and systems used by HPC. Please see the attached report in the relevant paper.

Information security management
Information Security training solutions are being re-evaluated following changes in the core product from the supplier. This must be matched to our Information Security stance at HPC.

Information & data management
QMS and HPC intranet integration. Post roll out changes have been designed and have been implemented by the developer.

Business Process Improvement will now be maintaining the running five year registrations forecast.

Risk Register
An updated risk register has been produced, with two additional risks, relating to outputs from recent government proposals. A new project risk has been created around the take over of the work of the GSCC, and a finance risk has been created around the proposed new funding model for CHRE based around full cost recovery. No detail on the cost model has been released at this stage, so we are unable to judge impact or mitigations at present. The top ten list of risks will be highlighted and additional levels of detail (description and mitigations) will be provided on these key items.

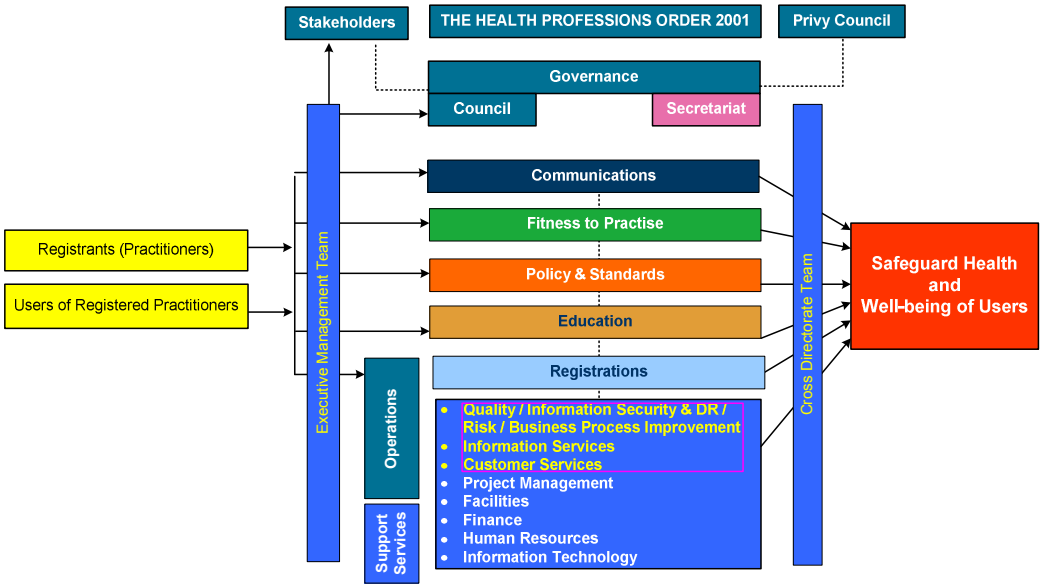
A new Risk Register related to the GSCC project is in preparation.

A paper has been provided on a possible Risk Appetite, based on best practise documents from PKF. Please see the relevant paper.

Appendix 1. Overview of ISO9001 at HPC, and meaning of terms used in External BSI Audit reports.

HPC have been operating under the ISO9001 standard since 2004. Illustrated below is the high level view of the Quality Management System (QMS). The first illustration indicates the HPC specific content, based around our particular way of operating, with department names particular to a regulator, such as Fitness to Practise, Registrations, Policy & Standards.

Quality Management System - Key & Supporting Processes



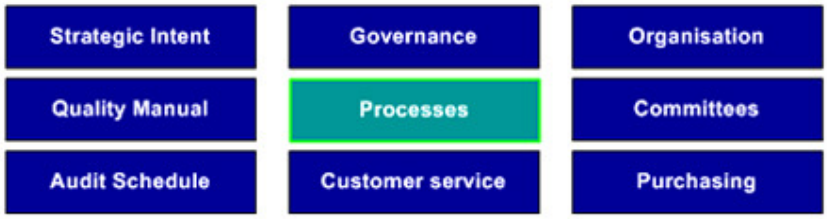
The second section on the QMS, but also seen on the first page of the QMS, are the “ISO9001” processes that are mandated by the standard. Often, the BSI report will use terminology related to these standard ISO9001 requirements, when discussing HPC at the six monthly audits.

Additional processes and procedures

- Company wide processes
- Feedback form

Quality Management System Compulsory procedures

Documents relevant to HPC, including the main process maps (see Key & Supporting processes above)



MASTER DOCUMENT LIST

REQUEST FOR CHANGE TO EXISTING PROCESS or CREATE NEW PROCESS

The compulsory processes are;

Record control is that process which delivers a history of requirements, through to signed off deliverables supporting the organisations objectives. This will incorporate strategic organisational documentation. This includes identification, storage, protection, retrieval, retention legibility and location of assets.

Management Review records must be maintained.

Process audit is how the internal QMS auditors determine if the organisation is adhering to its established processes, by either sampling of records against a process map, or risk based audits based around where we have determined there is greatest risk of error that could impact the organisation. More mature ISO 9001 organisations tend to carry out more risk based audits than pure record checking audits, although record checking is still carried out. Record checking is particularly useful where there are large volumes of a small range of transactions of repeatable processes taking place.

At HPC this would include checking appropriate documentation was included in an application pack for registration, against recent new registrations. Are the certified copies of documents signed, have the appropriate fees been paid?

Rick based audit
At HPC we frequently carry out Risk Based Audits, around key areas of concern as highlighted in the Risk Register, or if small scale issues, as highlighted by the process owner. This includes Information Security audits, where there is a general concern that we must continually work on this area.

Cross organisation audit

Some audits can follow paper or resources across departmental boundaries. This would include credit or debit card transactions, tracked from arrival in the post room, through Registrations, onto Finance, with various restricted records on the NetRegulate system.

Statistically, most errors occur at the boundaries of systems, processes or departments. Therefore this is a good place to look for potential (Preventive action), or as a source of existing recurrent error (Corrective action).

Non conformance is where the established process published on the Quality Management System is not adhered to, including lack of documentary evidence that appropriate checks have been carried out. This could be that the basic processes are not being adhered to, or records are not being kept, or evidence of checks that all is working correctly is not available. The process itself can be fully functioning, but the proof of checks be missing or inadequate. Thus lack of “checking the checking”, can result in a non conformance, whilst the underlying process is functioning optimally.

Not all processes are recorded in minute detail on the QMS. The level of detail is based on the complexity of the process, the number of variations permissible within the process and the view of the process owner on what is required. In some ways the more detailed or complex the process the greater the possibility of a non conformance; there are more possible options for failure.

Corrective Action is that action the organisation takes to make an immediate fix to a problem. It is **re-active**, fixing something that has already happened. It is unlikely to prevent the reoccurrence of the issue, but may provide interim relief to the impacted area. An example of this would be putting a Policeman/woman on Traffic Duty at a set of failed traffic lights, to smooth traffic flow and prevent accidents. The traffic lights are not fixed, but the overall function of the traffic lights would be delivered.

Preventive Action, is that action you take to prevent reoccurrence of a failure in a system or to prevent something occurring at all. In the regular world this could be fitting brakes on a go-cart to prevent running into other objects, giving parachutes to pilots to stop them being unable to fly following a major machine failure, or making ships sailing the Northern Atlantic “ice berg proof” so that they bounce off and do not cause the ship to sink. This aims to **pre-empt** an issue, and as such is difficult to prove it has been worth while.

In some respects the Fitness to Practice process is preventive action (stopping the event happening again).

Document control is the requirement to establish documentary items are fit for purpose prior to use, have the correct version control systems in place, are legible and readily identifiable, and available in the place of use. External

documents used by the organisation for planning are identified and distribution controlled.

Additional processes and HPC's implementation are as follows;
Strategic intent

Quality Manual, indicates the scope of HPC's ISO 9001 processes, how HPC's QMS processes interact with 9001 and how we maintain internal controls against the standard.

Health Professions Council Quality Manual

Introduction

This manual exists to meet the requirements of *BS EN ISO 9001:2008* by linking specific pages of the intranet. It provides a suitable starting point for first time navigation of the site.

It includes the Health Professions Council (HPC) approach to BS EN ISO 9001 and provides a 'signpost' to certain key documents that exist within this intranet. A more comprehensive list of key documents can be found from the Document Master List.

Definitions

BS EN ISO 9001:2008 uses terminology which may be unfamiliar and confusing because it may be used in a context different from that encountered daily. To assist the reader, a *Definitions* page is provided. If there is a term used in the Management System, of which you are unsure and is not explained in the definitions page, please advise your Management System Representative (Quality Manager).

HPC Profile

The Health Professions Council (HPC) is an independent UK regulator of healthcare professionals in defined disciplines,

and

- reports to the Privy Council,
- is a body corporate,
- is self financing,
- is not a charity,
- is one of nine independent UK regulators of healthcare professionals.

HPC powers derive from primary, secondary and tertiary legislation and rules, all of which are approved by Parliament.

The role of HPC is to:

- protect the health and wellbeing of people who use the services of the health professionals within the defined disciplines,
- maintain the Register of Health Professionals which anyone can check in order to make sure that their health professional is registered, and
- set the standards that health professionals must meet in order to remain registered.

Scope of the Management System

The management and operation of The Health Professions Council (HPC) covering:

- Statutory professional self regulation, and
- Reports to the Privy Council

These activities are carried out primarily from:

1. The Health Professions Council
184 Kennington Park Road
London
SE11 4BU
and also from;

2. Locations of Council and Committee meetings as defined on the HPC web site
http://www.hpc-uk.org/aboutus/council/councilmeetings/

3. Visits to Education Providers offering relevant training programmes.

4. Locations conducting Fitness to Practice hearings.

5. On occasion external locations conducting interviews and training.

6. Locations for running and attending external events

7. The following activities may be undertaken by external parties:-

Legal processes

IT support of production systems.

These elements are controlled under the conditions of the purchasing and tendering procedure.

Structure of Management System

The HPC has designed and implemented an intranet based, Management System which includes the requirements of BS EN ISO 9001:2008 (Quality management systems - requirements).

BS EN ISO 9001:2008 encourages the adoption of a *process approach* to quality management.

The HPC has identified the key functions and their processes that deliver *product* to internal and external Stakeholders.

See: Key and Support Processes.

The key and supporting processes are elaborated through the use of hyperlinks to supporting documents (and to Springfield which is a central store for a large quantity of information on HPC processes) which give more detailed information. This may include further links as relevant to Control Parameter pages.

These control parameter pages can be considered as the *Quality Plans* for the processes they cover.

These parameters are based on a *Process Model*. This model covers the requirements for BS EN ISO 9001:2008 in respect of the major components covering:

- Management Responsibility
- Resource Management
- Product Realization
- Measurement, analysis and improvement

Where appropriate, hyperlinks to relevant forms and *records* may be included (though these may be located on Springfield and maintained by process owners).

Impact Analysis

Before significant change are made to core or support business processes consideration needs to be given to business impacts. If appropriate impacts to the business are evaluated through the Business Process Change Impact Analysis Document.

Quality Policies and Objectives

Policies

The HPC has been established to realise the requirements of the Health Professions Order 2001. The Order requires the Council to establish standards of education, training, conduct and performance for members of the relevant professions and to ensure the maintenance of those standards.

The Order contains explanatory notes which, whilst not part of the Order, provide a more concise view of its requirements.

The contents of the Order provide the directives for the Council and are interpreted by the Council for application as the HPC policies.

These policies are manifest through section 3 of the Strategic Intent as the HPC Guiding Principles.

Policies defining responsibilities of employees within HPC are listed in HPC Generic Policies.

Objective

The HPC main objective is:

"To safeguard the health and well-being of persons using or needing the services of registrants"

In meeting this objective, the Council shall:

"have proper regard to the interests of all registrants and prospective registrants and persons [using or needing the services of registrants]"

(Taken from Article 3 of the Health Professions Order 2001).

These objectives are enhanced by the Guiding Principles for HPC.

Aims

The HPC will operate by meeting the following aims:

- Maintaining and publishing a public register of properly qualified members of the professions
- Approving and upholding high standards of education and training, and continuing good Practice.
- Investigating complaints and taking appropriate action.
- Working in partnership with the public, and a range of other groups including professional bodies.
- Promoting awareness and understanding of the aims of the Council.

Governance

See: Governance

Roles, Responsibilities and Accountability

See: Roles, Responsibilities and Accountability

Generic Procedures

BS EN ISO 9001:2008 requires that there are documented procedures for the following:

- Control of documentation;
- Control of quality records;
- Control of nonconforming product;
- Internal auditing;
- Corrective action;
- Preventive action.

HPC has produced the following procedures which include, but are not limited to, these topics.

Customer Services

Corrective Action Procedure

Document Control Procedure

Management Review Procedure

Preventive Action Procedure

Process Audit Procedure

Non-conformance Procedure

Purchasing Procedure

All HPC employees should be familiar with these generic procedures.

Continual Improvement

Process Teams exist to advance, evolve and improve the management system. They comprise key people who understand the Key and Support processes and activities, their interrelationships and interdependencies.

The Process Teams provide the catalyst for improvement of the effectiveness of the management system through, the use and development of the business

policies and objectives, audit results, Stakeholder perception surveys, corrective and preventive actions and requests for changes.

Their role may be summarised as follows.

To understand, clarify, collect, promote and liase through:

- investigation of change requests and the management of approved changes through the Management System Documentation process,
- appraisal of suggestions and feedback from employees,
- analysis and reporting of information from audits and surveys,
- the breakdown of internal barriers,
- input to the Management Review process, and
- dissemination of information to all employees.

The Quality Managers role in continuous improvement is to;

- Communicate the need for continuous improvement at all levels
- Support process owners on actioning improvement projects
- Ensure that areas of improvement are included in Management Review
- Assist all departments in preparation for the continuing assessments from BSI

Application of BS EN ISO 9001:2008

Exclusions

7.6 Control of monitoring and measuring devices

Inspection, measuring, test equipment or test software are not used by HPC in the provision of its services to Stakeholders.

Audit schedule, is simply a plan of internal audits the HPC internal auditors intend to carry out over the course of a financial year, Often we will aim to audit departments a few months before they are externally audited, to test for possible non-conformance and act as a practice for the department before BSI audit. The schedule is not set in stone. Some latitude is allowed to take account of possible work load issues in operational departments.

Governance, or how the organisation is run and monitored.
The Health Professions Order and the Standing Orders of Council establish the basic rules about how the Council conducts its proceedings.
Details of the work of the Council are published on the HPC web site at http://www.hpc-uk.org/aboutus/council/ Rules of Council.

Processes is simply a link to the departmental processes indicated for each of the areas we are involved in. (See QMS diagram on page 1)

Organisation refers to the structure of the organisation. At HPC organisation structure is recorded in the HRInfo system to which all employees have access. Any changes to HR processes are logged with appropriate document control.

Committees

Customer service, are those activities we undertake around customer feedback, either positive or negative.

HPC have a processes to ensure any possible FTP information is filtered straight to the department before being examined for any internal learning points.

Typically like all other organisations we get more negative feedback than positive feedback. (1 in 11 to 17 bother to complain to the organisation; 1 in 18 to 35 bother to offer positive feedback [generic customer service data in service industries early 2000]). All negative feedback is logged, responded to within a set time frame and the root cause examined to determine what went wrong. Frequently complaints are actually about having to be registered, about which there is little we can do. They do not represent system or process failures. External forces (post, action of other organisations) can result in complaints to HPC.

Purchasing refers to processes around procurement of goods and services, ensuring they are appropriately signed off when received, and ordered and paid for within budget guidelines. At HPC this includes use of the Tendering process.

Strategic intent is the document that describes how the organisation expects to change over the next major planning period. This is not necessarily a document with major predictive reports on numbers of customers (registrants and applicants in our case) revenue predictions and cash flow forecasts. General trends will expect to be highlighted. Appropriate changes to resources (or computer systems) to meet changes in workload are expected to be indicated.

The **Master Document List**, is a list of all the live process documents that are in the QMS, indicating document name and version or revision number. Somewhat ironically the Master Document List is the one document that does not have version control as such. At HPC this list of processes is automatically maintained as each update is made to a process. It is not incremented for correction of typographic errors, but just changes to processes, owners of processes or relationship between processes. This is often an easy target for external auditors and could result in a “Non-conformance” around document control.