Audit Committee, 24 June 2014

BSI ISO 9001:2008 Audit Report

Executive summary and recommendations

Introduction

BSI audited HCPC on the 6 May 2014, as the second audit of the new three year audit cycle across the whole organisation.

The Registrations department were audited (International Applications process, Workplace & Infrastructure = IT and Facilities, Quality Management System and associated processes). All areas had been internally audited in advance.

No non-conformances were recorded.

The auditor recorded some planned changes being considered by the IT team to have a more formal Change Approval Board meeting, and using the IT service desk system to record new user requests.

HCPC have been recommended for continued registration.

Decision

Committee is asked to note the report.

Resource implications

Accounted for within the departmental workplan for 2014-15

Financial implications

None

Appendices

BSI May 2014 AUDIT REPORT, ISO9001:2008.

Date of paper

12 May 2014

Assessment Report.

Health & Care Professions Council

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Introduction**.**

This report has been compiled by Andrew Connett and relates to the assessment activity detailed below:

Visit ref/Type/Date/Duration	Certificate/Standard	Site address
7964314 Continuing Assessment (Surveillance) 06/05/2014 1 day(s) No. Employees: 205	FS 83074 ISO 9001:2008	Health & Care Professions Council Park House 184 Kennington Park Road London SE11 4BU United Kingdom

The objective of the assessment was to conduct a surveillance assessment and look for positive evidence to ensure that elements of the scope of certification and the requirements of the management standard are effectively addressed by the organisation's management system and that the system is demonstrating the ability to support the achievement of statutory, regulatory and contractual requirements and the organisations specified objectives, as applicable with regard to the scope of the management standard, and to confirm the on-going achievement and applicability of the forward strategic plan and where applicable to identify potential areas for improvement of the management system.

The scope of the assessment is the documented management system with relation to the requirements of ISO 9001:2008 and the defined assessment plan provided in terms of locations and areas of the system and organisation to be assessed.

Management Summary**.**

Overall Conclusion

The objectives of this assessment have been achieved. There were no outstanding nonconformities to review from previous assessments. No new nonconformities were identified during the assessment. Enhanced detail relating to the overall assessment findings is contained within subsequent sections of the report.

Areas Assessed & Findings**.**

Review of the Quality Management System
Changes, System Updates, Amendments

The Quality Management System remains well implemented within HCPC and the requirements appear to be well understood throughout the organisation. The Management System is presented and documented that suits the needs of the business. The system is not complicated nor is it complex, which ensures that the Quality System adds value to the business.

There have been no significant changes to the Management system since the previous assessment visit. Changes are regarded as minor and cover the maintenance of the Management System. There are no changes to the structure of the business and the organisation at the Kennington office generally remains unchanged.

The QMS documentation is accessible through the intranet and the Manager responsible was able to provide evidence of the accessibility of the documentation, including the Quality Manual and review of a sample documents with regard to the relevant sections covered by this assessment visit.

• Quality Manual reviewed within the Intranet and includes Policy, Scope, etc
• ISO 9001 process interaction and description is well documented within the QM

International Registrations :

The process covering the receipt and processing of international Registrations was explained by the Registration Manager. The process appears to be very well established and is embedded within the organisation. All new applications are submitted in hard copy and an initial check is completed to ensure that the submitted documents are completed and prepared for the full compliance review by the assessor.

The full review of requirements and compliance to HCPC registration process is completed by a pair of independent HCPC Assessors. Checks covering the authentication of the applicant are completed by verification of passport, fixed address, education, professional references, etc. Two recent applications were reviewed for completion against the QMS requirements where all documents were available and completed in full. The completed documentation was reviewed against the database entries within the NetRegulate application.

• NetRegulate was reviewed and is an application dedicated for registration of applicants.
• Hard copy records are retained and archived off site with approved third party.
• Process reviewed and Registration Process is well documented.
• Application reviewed for PH***707 and all records available within applicant pack.
• Application reviewed for RA***087 and all records available within applicant pack.
• Hard copy records are archived off-site with third party Deepstore.
• Applicants submit a self-declaration of first language – recorded within application pack

Infrastructure
IT Support and Facilities Management :

The IT Manager responsible for the Help Desk and desk top support operations provided an excellent overview of the key role and responsibility. All support tickets are logged into the service desk application – Absolute. A sample of tickets was reviewed and generally all tickets were observed to be well managed. SLAs are assigned to tickets and at the time of this assessment visit the Manager was able to confirm that there were no breaches of any tickets.

The Help Desk is also responsible for the setting up of new starters and the disabling of accounts of leavers. All new starters are set within Active Directory and provide the secuirty of authentication to all business applications. Leaver accounts are disabled with Active Directory and are removed from all secuirty groups.

Backups are completed as per the backup schedule and the process is well established. It was confirmed that a full external audit of the business continuity, disaster recovery and the back-up regime has been completed and there were no significant findings. The external audit was completed by a third party

Change management is applied to all changes within the infrastructure. A sample of recent changes was reviewed and observed that segregation of duties is applied, descriptions of change, business impact, back-out and roll back plans. RFC's area documented for every change and the process is stand-alone from the help desk process.

- Third party audit of BC, DR and back-ups completed by Mazar's on the 28 November 2013
- Absolute Ticket reviewed - #106975 medium priority
- HR Starter & Leaver System links into the IT Process for account creation
- Change Management – RFC # 104522 reviewed
- Documented procedures available

The Facilities Manager provided an overview of the key role and responsibilities of the Facilities Department. Generally, the Department provided the support for the maintenance of the building and the infrastructure covering preventive and routine maintenance and the provision of servicing of equipment. Records of maintenance, service and routine checks are maintained and from a sample of records reviewed there were no concerns. Fire alarm and evacuation drills are completed on a planned basis.

Access to the building is managed through the provision of swipe cards for door access and cards are provided for all staff. Access to the Post Room is restricted and the Server Room is only access by IT Staff and the Facilities Manager. CCTV is deployed around the building through a total of eight cameras deployed at the entrances / exits.

- Maintenance and service records are well organised and retained as soft copies
- Access control for door entry has limitation of access time
- Post Room and Server Room is protected from unauthorised access
- Documented procedures available
- Facilities Risk assessments are completed by management i.e. DSE, COSHH
- Server Room and Post observed to be very tidy and in good housekeeping order

Observations and Opportunities for Improvement :

The following observations and opportunities for improvement have been identified during this surveillance assessment visit. It is recommended that management consider these findings as possible improvements to the Quality Management System.

Observations or Opportunity for Improvement.

Type	Area/Process	Clause
Observations	Observations and Opportunities for Improvement	6.3
Scope	FS 83074	
Details:	It was observed that 'Request for Change' submissions are required to be reviewed by the CAB (Change Approval Board). However, the CAB is currently the IT Manager. Management may consider the setting up of a full CAB to review, approve and schedule all changes to the IT Infrastructure. This would then provide a more independent and objective review of a RFC's.	

Type	Area/Process	Clause
Observations	Observations and Opportunities for Improvement	6.3
Scope	FS 83074	
Details:	It was observed that the request to create a new starter account within the Active Directory is requested by email. As an opportunity for improvement, all requests for new accounts and changes to existing accounts should always be documented within the 'Ticket Management System' (Absolute). This would then provide a full audit trail of the creation of the account, including any changes and additions, etc.	

Assessment Participants.

On behalf of the organisation:

Name	Position
Mr Roy Dunn	Head of Business Process Improvement
Mr Christopher French	Registration Manager
Mr Greg Ross-Sampson	Director of Operations
Mr Steve Hall	Facilities Manager
Mr Rick Welsby	IT Service & Support Manager

The assessment was conducted on behalf of BSI by:

Name	Position
Andrew Connett	Team Leader

Continuing Assessment.

The programme of continuing assessment is detailed below.

Site Address	Certificate Reference/Visit Cycle	
Health & Care Professions Council Park House 184 Kennington Park Road London SE11 4BU United Kingdom	FS 83074	
	Visit interval:	6 months
	Visit duration:	1 Days
	Next re-certification:	01/04/2013

Re-certification by Strategic Review will be conducted on completion of the cycle, or sooner as required. The review will focus on the strengths and weaknesses of your Management System.

Certification Assessment Plan.

HEALTH-0047125084-000|FS 83074

Business area/Location		Visit1	Visit2	Visit3	Visit4	Visit5	Visit6
	Date (mm/yy):	10/13	04/14	10/14	04/15	10/15	04/16
	Duration (days):	1.0	1.0	1.0	1.0	1.0	1.0
Education				X			
Communications						X	
Customer Services						X	
Finance						X	
Fitness to Practice					X		
HR/Partner Validation		X					
Management System Organisation and Review			X		X		X
Policy		X					
Preparation for Strategic Review						X	
Purchasing & supplier evaluation				X			
Registrations CPD				X			
Registrations International			X				
Registrations UK		X					
Secretariat				X			
Senior Management Interview							X
Staff development and Training		X		X			
Strategic Review							X
Work Environment and Infrastructure			X				
Projects (Project Management)					X		

Next Visit Plan.

Visit objectives:

The objective of the assessment is to conduct a surveillance assessment and look for positive evidence to ensure the elements of the scope of certification and the requirements of the management standard are effectively addressed by the organisation's management system and that the system is demonstrating the ability to support the achievement of statutory, regulatory and contractual requirements and the organisations specified objectives, as applicable with regard to the scope of the management standard, and to confirm the on-going achievement and applicability of the forward strategic plan.

The scope of the assessment is the documented management system with relation to the requirements of ISO 9001 and the defined assessment plan provided in terms of locations and areas of the system and organisation to be assessed.

Date	Assessor	Time	Area/Process	Clause
27/10/2014	Assessor 1	09.00	Education	
		10.00	Purchasing & supplier evaluation	
		10.30	Registrations CPD	
		11.30	Secretariat	
		12.30	Lunch	
		13.30	Secretariat	
		14.30	Report Preparation	
		16.30	Closing Meeting	

Please note that BSI reserves the right to apply a charge equivalent to the full daily rate for cancellation of the visit by the organisation within 30 days of an agreed visit date. It is a condition of Registration that a deputy management representative be nominated. It is expected that the deputy would stand in should the management representative find themselves unavailable to attend an agreed visit within 30 days of its conduct.

Notes.

The assessment was based on sampling and therefore nonconformities may exist which have not been identified.

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