

Audit Committee, 19 March 2015

BSI ISO 9001:2008 Audit Report

Executive summary and recommendations

Introduction

BSI audited HCPC on the 4 November 2014, as the third audit of the new three year audit cycle across the whole organisation.

The Education, Secretariat, and Human Resources Departments were audited, and the audit schedule changed to reflect the size of the organisation. All areas had been internally audited in advance.

No non-conformances were recorded.

HCPC have been recommended for continued registration.

Decision

Committee is asked to note the report.

Resource implications

None

Financial implications

None

Appendices

BSI Nov 2014 Audit Report, ISO9001:2008.

Date of paper

12 March 2014



Assessment Report.

The Health and Care Professions Council

Report Author Lisa Clarke
Visit Start Date 04/11/2014

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Introduction.

This report has been compiled by Lisa Clarke and relates to the assessment activity detailed below:

Visit ref/Type/Date/Duration	Certificate/Standard	Site address
8042383 Continuing Assessment (Surveillance) 04/11/2014 1 day(s) No. Employees: 215	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.

I would like to thank all the audit participants for their assistance and co-operation which enabled the audit to run smoothly and to schedule

Based on the objective evidence detailed within this report, the areas assessed during the course of the visit were found to be effective.

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.

Business Update and Increased Assessment Durations

2014 has been a very busy year for HCPC with 16 professions now being regulated including social workers who were migrated from their previous regulator in 2012. The quality system remains in place as the key method of standardising operations across the teams and the organisation is looking ahead to 2015 when the revised quality standard is finalised becoming ISO 9001:2015. In addition, efforts continue in pursuit of HCPC becoming registered to ISO 27001 and also the implementation of Entropy which is taking place at a staged pace.

A review of assessment time was undertaken today and it appears to be falling short of current guidelines at present. As a result this has been increased (in line with the assessment duration formula) to 3.5 days per annum which would take effect over 2 visits at a 6 monthly interval. The client has expressed a preference to work towards 4 complete days per annum which has been agreed and will be implemented from the next visit which is due to take place in April 2015. Details of the calculation have been supplied to HCPC for their records and the overall 3 year assessment plan has been updated to reflect how this time will be used to assess each area in greater depth.

Education

Discussions were first held with Head of Education, Brendon Edmonds about the purpose and structure of the team and how it communicates and manages the workload across the various sub-teams. There is a very clear structure which divides the educational establishments across the country geographically into two teams which seek to support the development and approval of educational programmes - NNIW and SES. Additionally there is a support team which take care of any publications, seminars, training and education meetings. All education staff are based together in a large open plan office which makes for effective communication overall, but in addition there is an education department meeting as well as sub team meetings, one to one meetings and there is also the APDR framework within which to set targets and objectives for achieving a good performance record. Work is planned via the forecasting activity. Progressing of work and monitoring of work is achieved in a number of ways including the weekly team meetings which are more operational than the monthly department meetings and the annual data cleanse at the end of the academic year. Few problems arise especially as long timescales allow for changes to be made in response to any niggles identified.

Samples of work were seen during the assessment including NNIW team meeting minutes 3/10/14 and Education department meeting minutes 20/10/14.

Some of the work undertaken by the NNIW team was used for sampling and the processes were demonstrated by Jamie Hunt, Education Manager. Sample chosen was Oxford Brookes BA (Hons) and MA in Social Work - visits arranged 15/11/2012. Good file structures were demonstrated with excellent organisation of documents and records throughout the process. This is vital to ensure all key steps have been undertaken and to allow for continuity if necessary especially as the processes can span over a long time period. Operational process document 09/12 was used as a basis for the assessment. The software in place really appears to help drive processes to conclusion effectively. Following approval of courses, they are added to the annual plan via which a declaration is usually completed in year one and an audit in year two as ongoing management.

HCPC values are posted on the desktops of every member of staff. This is a good way of ensuring they are truly part of the culture here.

Overall, the Education teams demonstrated strong commitment to the systems they operate within the department and their results show that their processes are working effectively.

Staff Development and Training

Staff development and training activity was assessed during today's visit in conjunction with Emma Allen, HR Business Partner and found to work well.

Discussions included sight of records for member of staff 002300 coded here for confidentiality reasons. These records were used to demonstrate that the system planned for ensuring staff are made aware of their role and responsibilities and to demonstrate how any training needs are identified and how any training undertaken is evaluated is effective.

Job descriptions are issued to members of staff and these are thorough and comprehensive with key information relating to tasks, roles, responsibilities and additional authorities to be held by the member of staff. Induction/training periods are usually set at 6 months after which time a probationary review is held to identify any further actions of development that are required. Objectives are set through this forum as well as via the PDR appraisal system which then takes over for fully established employees with an annual review. Evidence of evaluation of training and development actions was seen today.

Sample records seen:-

002300 - job description, probationary review records, annual PDR records (dated 0/3/2014), targets/action plan seen.

Secretariat

Secretariat has several areas of responsibility including management of the appointments process whereby new council members are identified and supported through the path to appointment. Support activities include new council member induction and training to assist with the development of particular interest areas, maximise skills and the planning of activities such as away days.

New areas of focus for Secretariat have recently been added to the team portfolio including the management of Freedom of Information requests. This area has been subject to increase with the addition of the social worker profession to the HCPC in 2012. Processes have been developed and are now in place to manage FTP and subject access requests and these are under constant review for effectiveness.

Secretariat also includes the management of corporate complaints and the analysis of these for reporting at EMT including the identification of any key themes or trends which may need addressing. Recent trends have included social worker fees and breakdown of figures shows the origins of complaints.

Samples of work were not included in the visit today and the specific activities of Secretariat have been included for further assessment later in the schedule.

ISO 9001:2015

A range of new ISO 9001 Revision films have been prepared by BSI to help organizations understand the expected changes to the standard and the likely transition arrangements:

Introducing the ISO 9001 Revision - <http://youtu.be/a8JLWal2JvY>

BSI explains the background to the ISO 9001:2015 Revision, what it will mean for ISO 9001 clients and how clients can manage their transition when the new standard is published in 2015.

ISO 9001 revision in more detail: <http://youtu.be/HehBkkyZoIg>

BSI looks at the detail behind the ISO 9001:2015 Revision, what it will mean for ISO 9001 clients and how to manage the transition when the new standard is published in 2015.

Preparing for the ISO 9001 revision: <http://youtu.be/apGqw4Khi0U>

BSI identifies the main changes to ISO 9001 Revision and how you can prepare your organization ahead of its publication in late 2015.

Next BSI visit dates

The following bookings have been made:-

29th and 30th April 2015 - Andrew Babb

22nd and 23rd October 2015 - Ali Mian

BSI Logos

During the course of the visit logos were found to be used correctly.

Assessment Participants.

On behalf of the organisation:

Name	Position
Roy Dunn	Head of Business Process Improvement
Kayleigh Birtwistle	Quality Compliance Auditor
Brendon Edmonds	Head of Educational Department
Jamie Hunt	Education Manager
Emma Allen	HR Business Partner
Louise Lake	Director of Council & Committee Services

The assessment was conducted on behalf of BSI by:

Name	Position
Lisa Clarke	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:	2 Days
	Next re-certification:	01/04/2016

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

		Visit1	Visit2	Visit3	Visit4	Visit5	Visit6
Business area/Location	Date (mm/yy):	10/13	04/14	10/14	04/15	10/15	04/16
	Duration (days):	1.0	1.0	1.0	2	2	2
Quality management system - key controls - see appendix for full listing*			X		X		X
Staff Development and Training		X		X			
Purchasing/supplier evaluation (see Procurement)							X
Risk register							X
Work environment and infrastructure/facilities management						X	
Quality Assurance							X
Senior management interview							X
Strategic review - using pack of information supplied by BSI							X
**							
Communications					X		
- Social Media					X		
- Stakeholders					X		
- Publishing					X		
- Web & Digital					X		
- Internal Communications					X		
- Events					X		
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Finance							X
- Invoicing & Purchase Ledger							X
- Management Accounts							X
- Procurement (purchasing and suppliers)							X
- Transactions							X
00							

Education			X			
- Operations NNIW						
- Operations SES						
- Communications and Development						
- quality assurance						
- Policy and Development						
xx						
Fitness to Practice				X		
- Adjudication				X		
- Administration				X		
- Assurance & Development				X		
- Case Support				X		
Case Teams 1-5				X		
Case Teams 6-7				X		
Compliance				X		
Investigations				X		
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HR/partner validation	X					
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Policy	X					
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Projects					X	
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Registrations						
- International		X				
- UK	X					
- CPD					X	
- Operations					X	
- Quality Assurance					X	
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IT					X	

- Infrastructure					X	
- Service support					X	
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Secretariat			X		X	
- Customer Services					X	
- Information Governance					X	
- Council Processes					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.

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Date	Assessor	Time	Area/Process	Clause
29/04/2015	Assessor 1	09.30	Opening Meeting	
		10.00	Quality management system - key controls - see appendix for full listing*	
		11.00	Communications - overview	
		11.15	- Social Media	
		11.45	- Stakeholders	
		12.15	- Publishing	
		12.45	Lunch/report preparation	
		13.15	- Web & Digital	
		13.45	- Internal Communications	
		14.15	- Events	
		14.45	Report Preparation	
		16.30	Interim closing meeting day one	
30/04/2015		09.15	Opening meeting day 2	
		09.30	Fitness to Practice - introduction	
		09.45	- Adjudication	
		10.15	- Administration	
		10.45	- Assurance & Development	
		11.15	- Case Support	
		11.45	Compliance	

		12.15	Investigations	
		12.45	Lunch/report preparation	
		13.30	Case Teams 1-5 - random sampling of processes	
		14.15	Case Teams 6-7 random sampling of processes	
		15.00	Report Preparation	
		16.30	Report Preparation	

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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Customer Services
BSI
Kitemark Court,
Davy Avenue, Knowlhill
Milton Keynes
MK5 8PP

Tel: +44 (0)845 080 9000 Fax +44 (0)1908 228123

Email: MK.Customerservices@bsigroup.com

Appendices.

Quality Management System - key controls*

- Any actions/observations raised in this report
- Management review – agendas/minutes to be available for sampling at random
- Internal audits – procedure, schedule and reports to be available for sampling at random
- Customer feedback and complaints – procedures (control of non-conforming product and corrective action procedures), records/details to be available for sampling at random
- Process performance data (information arising from key process checks)
- Reporting and analysis
- Trends identified and improvement opportunities noted
- Risks/planning for change (preventive action procedure may be required)
- Corrective actions taken as a result of any of the above
- Quality policy and objectives
- Document and record controls