

Council – 17 September 2010

Department of Health: Review of Arms Length Bodies

Executive summary and recommendations

Introduction

Executive Summary

This paper provides an overview of the developments in Government policy relating to the regulation of healthcare and other professionals that have occurred since the last meeting of the Council on 7 July 2010. The paper also summarises how the Health Professions Council (HPC) has responded to the proposals to date.

White Paper

On the 12 July the Government published a White Paper entitled *Equity and excellence: Liberating the NHS*. It set out Government's long-term vision for the future of the NHS. The proposed wide ranging changes included the statement:

We will radically delay and simplify the number of NHS bodies, and radically reduce the Department of Health's own NHS functions. We will abolish quangos that do not need to exist and streamline the functions of those that do, (Page 5).

It also stated that:

The Department will shortly publish a review of its arm's-length bodies. Subject to Parliamentary approval, we will abolish organisations that do not need to exist, (Page 43).

Lastly, the timetable stated indicated that a new Health Bill would be introduced in Parliament in Autumn 2010 – (Page 51).

Ministerial Statement

On 26 July a Ministerial Statement was published by the Department of Health. Amongst a range of proposals, it announced the publication of two supporting documents. It stated:

Proposals for the General Social Care Council (GSCC), the regulatory body for social workers, are included in the report. My predecessor issued a written

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2010-09-17	a	CER	PPR	White Paper	Final	Public
					DD: None	RD: None

ministerial statement on 4 November 2009, Official Report, column 41WS, about the publication of the Council for Healthcare Regulatory Excellence's (CHRE) report and recommendations on the General Social Care Council (GSCC) function relating to conduct. As part of its response to CHRE's report the previous administration announced that the GSCC would report on its progress to Ministers at the end of March. This report has now been received and is published today.

Whilst the GSCC has made good progress over preceding months, the reality is that the costs of maintaining an independent regulator for social workers are prohibitive and we therefore propose to transfer the function of regulating social workers to the Health Professions Council, which will accordingly be renamed to reflect its remit.

Liberating the NHS: Report of the arms-length bodies review

The supporting document, which was published on the same day as the Ministerial Statement, detailed proposed changes to numerous organisations, including the GSCC and CHRE. It stated:

General Social Care Council (GSCC)

3.36 The General Social Care Council is an Executive Non-Departmental Public Body responsible for the regulation of social workers and social work students in England. It is anomalous as the only professional regulator answerable directly to the Secretary of State for Health.

3.37 We see no compelling reason why the General Social Care Council should remain as an Executive Non-Departmental Public Body in the arm's-length bodies sector, and we see potentially significant benefits from putting the regulation of social workers on a similar footing to the regulation of health professions. This involves the regulator being funded through registration fees charged to those registered, set at a level to cover the regulatory functions. In this way members of a regulated profession buy into their professional standards, which are set independently of government, and have an incentive to ensure these are upheld throughout the profession.

3.38 Therefore, we intend to abolish the General Social Care Council and move the regulation of social workers out of the arm's-length bodies sector to make it financially independent of government. We believe that in future, the most appropriate model for the ongoing regulation of the social care workforce is to transfer responsibility for these functions to the Health Professions Council, a well established and efficient regulatory body currently regulating over 200,000 registrants from fifteen professions. The Health Professions Council - which will be renamed to reflect its new remit - operates a full cost recovery scheme and currently charges an annual fee of £76 per year, which is considerably less than the likely registration fee if the General Social Care Council were to operate alone on a full-cost recovery basis.

3.39 The Health Professions Council has an existing comprehensive and cohesive system of professional regulation which would apply to social care workers.

This differs from the General Social Care Council model in several ways:

- the Health Professions Council is solely responsible for setting standards of education and training for its registrants, whereas it is the Secretary of State's function to ascertain what training is required to become a social worker;*
- unlike the General Social Care Council, the Health Professions Council do not register students, though as part of the approval process the Health Professions Council requires all Higher Education Institutes delivering pre-registration courses to operate a fitness for practice system for students;*
- unlike the General Social Care Council, the Health Profession Council does not in practice approve post-registration courses apart from those related to prescribing drugs, although it has the power to do so.*

3.40 We anticipate that the differences would be explored through a review of social care regulation. The abolition of the General Social Care Council, the transfer of functions in relation to the regulation of the social worker workforce and related changes will require primary legislation. The timing of these changes is dependent on discussion with the Health Professions Council and the General Social Care Council to ensure an orderly transition.

3.41 Finally, the General Social Care Council is also responsible for the payment of Education Support Grants, and we propose that if this function is to continue it should transfer to another body.

Council for Healthcare Regulatory Excellence (CHRE)

3.34 The Council for Healthcare Regulatory Excellence is an Executive Non-Departmental Public Body responsible for scrutiny and quality assurance of the nine health care professions regulators in the UK. We have considered whether it is essential that there continues to be a regulator of the professional regulators. We concluded that the Council for Healthcare Regulatory Excellence does currently fulfill an ongoing need to quality assure professional regulation, but we will keep this under review.

3.35 Going forward, we see no compelling reason why the Council for Healthcare Regulatory Excellence should remain as an Executive Non-Departmental Public Body in the arm's-length bodies sector. Therefore, we propose to make it selffunding through a levy on those it regulates. We also propose to extend the Council for Healthcare Regulatory Excellence's remit to set standards for and to quality assure, voluntary registers held by existing statutory health and care professions regulators, and others such as professional bodies. We intend to include provisions in the Health Bill to make these and associated changes.

Office of the Health Professions Adjudicator

On the 9th August the Department of Health Government published a consultation on the future of Office of the Health Professions Adjudicator (OHPA). The consultation, which will conclude on 11th October, proposes three options. They are as follows:

OPTION 1: *Proceed with OHPA implementation as previously planned - do nothing option*.*

*(*This option has been labelled as "do nothing" as it is essentially continuing with pre-existing policy, though it is recognised that all three of these options would require some further work in the form of legislation to fully implement);*

OPTION 2: *Repeal legislative provision relating to OHPA and, in separate legislation, take forward steps to enhance independence of adjudication and modernise existing processes at the GMC (and subsequently review whether to also do so for the GOC and other health regulators).*

Subject to this consultation, this is the preferred option. The Government considers that it offers a way to achieve more independent adjudication that is more proportionate than the other proposals;

OPTION 3: *Repeal legislative provision relating to OHPA and take no further action.*

The consultation states that Option 2 is the Government's preferred option.

HPC Response to the Proposals on social work regulation in the Arms Length Review

DH Letter

On 2 September a letter was sent by Clare Chapman, Director General of Workforce, and David Behan, Director General of Social Care, to the Chief Executive of the GSCC and the HPC. It set out the Department of Health expectations of the roles of the two Chief Executives. HPC's response is attached.

Social Work Regulation Oversight Group

Paragraph 3.4 of the Supporting Document made specific reference to "a review of social care regulation." The Department of Health has established a Social Work Oversight Group. Chaired by Harry Cayton, the Chief Executive of CHRE, current membership includes the Chief Executives of the GSCC and the HPC, officials from the DH and DE and Moira Gibb the Chair of the Social Work Reform Board. The Group met for the first time on 3rd September and plans to meet again in early October, when the Terms of Reference will be finalised.

HPC Project Planning

The HPC Executive has established a project plan to deliver our areas of responsibility in relation to the transfer of the regulatory functions from the GSCC to the HPC. The intent of the draft plan is to try and ensure that if required the HPC will be ready to transfer the register in April 2011. This will be the fifth time

that the HPC has undertaken this type of project. The plan is based on the four previous projects that have been successfully undertaken by the HPC. They are:

- i. The transfer of the 12 CPSM Boards responsibilities and assets to the new HPC in April 2002
- ii. The transfer of the ODP register to the HPC in 2004
- iii. The transfer of the two Practitioner Psychologists registers comprising seven modalities in July 2009
- iv. The abolition of the Hearing Aid Council in April 2010

A project risk register will be set-up for the project.

HPC and GSCC Liaison

The Chairs of the HPC and the GSCC have been in regular contact during this initial phase. A joint meeting of the senior management teams of the GSCC and the HPC was held on 7th September at the London offices of the GSCC. Following the event a number of Department specific meetings have been arranged.

Professional Liaison Group (PLG)

Initial planning has commenced on the setting up of a PLG to address the Standards of Education and Training (SETs) and the Standards of Proficiency (SOPs) for Social Workers. The Executive intends to present initial proposals on the membership of the PLG and the timetable for this work to the Education and Training Committee and subsequently the Council.

Conclusion

Since the first announcement on the 12th July we have seen an accelerating process to provide detail on how the Government intends to implement its proposals. The degree of ambiguity that currently exists should be greatly reduced when the draft legislation is published. This is unlikely to occur before the conclusion of the political parties annual conferences this autumn.

Decision

The Council/Committee is requested to note the document. No decision is required.

Background information

Resource implications

Financial implications

Appendices

Date of paper

17 September 2010

Park House
184 Kennington Park Road
London SE11 4BU

tel +44 (0)20 7582 0866
fax +44 (0)20 7820 9684
www.hpc-uk.org



Ms Clare Chapman
Director General of Workforce
Department of Health
Richmond House
79 Whitehall
LONDON SW1A 2NS

Chair: Dr Anna van der Gaag
Chief Executive and Registrar: Marc Seale

6 September 2010

Dear Ms Chapman,

Transfer of regulation – GSCC and HPC

Thank you for your letter dated 2 September.

The team at the Health Professions Council is fully committed to delivering the transfer of the regulatory functions from the General Social Care Council (GSCC) to the Health Professions Council (HPC) in a timely and effective manner. The Oversight Group met for the first time last Friday and with the support of Harry and your regulatory team I am sure that all the objectives outlined in your letter will be achieved.

Marc Seale

Marc Seale
Chief Executive and Registrar

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Park House
184 Kennington Park Road
London SE11 4BU

tel +44 (0)20 7582 0866
fax +44 (0)20 7820 9684
www.hpc-uk.org

Mr David Behan
Director General of Social Care
Department of Health
Richmond House
79 Whitehall
LONDON SW1A 2NS

Chair: Dr Anna van der Gaag
Chief Executive and Registrar: Marc Seale

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Yours sincerely,

Marc Seale

Marc Seale
Chief Executive and Registrar

Date
2010-09-06

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GER

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COR

Title
DR Behan

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Final
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