

Agenda Item 8
Enclosure 4
Health and Care Professions Council 25 September 2019
Chief Executive's organisational performance report
For discussion

From Marc Seale, Chief Executive

### Council





# Chief Executive's report on organisational performance

### **Executive Summary**

This paper provides the Council with updates on:

- Performance indicators.
- Strategic Priorities key deliverables.
- Financial performance.
- Core regulatory functions and quality assurance activity.
- Chief Executive's engagement activity.

Previous consideration	This report is a standing item, considered at each meeting of Council.
Purpose of report	The Council is asked to discuss the paper.
Next steps	The next report will be received in December 2019.
Strategic priority	All strategic priorities are reported against in this report.
Risk	This report is relevant to all strategic risk areas and agreed levels of risk appetite.
Financial and resource implications	None as a result of this paper.
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### Executive summary – 25 September 2019

### 1. Social Work Transfer

A detailed report on recent developments is included on the meeting's agenda.

### 2. Performance indicators

The following are some key updates to highlight to the Council.

- Median length of time of interim order cases from receipt to decision August data is marginally outside of the KPI due to two older criminal cases where charges have been made/found, triggering a change in our risk assessment sometime after the commencement of the case.
- Number of open pre-ICP cases the number of newly received cases has been over 200 every month, and is 15% higher than the comparable period the previous year. Coupled with a number of vacancies (and temporary staff) in the Case Reception and Triage team, this has caused the volumes of open cases to increase. We are managing priorities, and recruiting new team members to mitigate this

### 3. Strategic priorities – key deliverables

• **Strategic priority 1**: Improve our performance to achieve the Professional Standards Authority's Standards of Good Regulation

We met with PSA on 6 September, to understand the outcomes of their revised standards pilot work with other regulators, and discuss likely evidence to demonstrate our adherence with the revised Standards of Good Regulation. We have commenced a review of the PSA framework of evidence, and mapping this against our audit and policy making activities, as well as operational outputs in Registration, Education and FtP.

• **Strategic priority 3**: The organisation is fit for the future and is agile in anticipating and adapting to changes in the external environment

### Regulatory reform

In July 2019 the Government published <u>its response</u> to its 'Promoting professionalism, reforming regulation' consultation. (Our response to that consultation can be found here.)

The consultation analysis highlighted the value of the HCPC model of regulation; suggesting that it supports professionalism, and provides clarity of the standards that apply across multiple professions.

In its report, the Government recognise the complex, outdated legislation underpinning healthcare regulation, and the barriers this presents to us being agile and responsive. They commit to developing a more modern legislative framework with the aim of delivering:

- Modern and efficient fitness to practise processes: this will be achieved predominantly by enabling regulators 'to resolve fitness to practise cases without the need for a full panel hearing where it is appropriate to do so'.
- Better support for professionals: changes in fitness to practise processes will provide more time to better support registrant professionalism.
- 3. **More responsive and accountable regulation**: this will be achieved through amendments to the legislation to regulators to change their day-to-day operating practices and become more responsive. There will also be a new duty on the regulators to consider workforce implications in their work, and requirements for enhanced openness and transparency.

### **Brexit**

The HCPC is continuing to prepare for Brexit in line with the paper taken to Council in February 2019. This confirmed that, in the event of a no-deal, there will be an impact on HCPC's processes – predominately in the Registration department.

Colleagues in the relevant departments are working closely to ensure that our processes are updated and employees are prepared to implement any changes required. We are also preparing proactive communications for registrants and applicants, to advise on what they will need to do in the event of a no deal.

### Regulatory IT systems

FTP Case Management System (CMS) Review: the supplier selection exercise has concluded, the business case is being developed for presentation to SMT and Council in November.

Registration transformation: Phase two of the project started at the start of August, following mobilisation initial design workshops are progressing to plan.

### **Turnaround plan**

The Advisor to the Council has been developing a Turnaround Plan which details proposals to transition from the HCPC's current operational and financial position to that of a sustainable, self-sufficient, lean and intelligent regulator.

• **Strategic priority 4**: Make better use of data, intelligence and research evidence to drive improvement and engagement

FTP case classification data has been collected since February 2019 and a review of the first 3 months was presented to SMT in August 2019. We continue to collect this data, and will use it to inform any themes or trends emerging regarding the nature of cases (across the professions) and the stratification of age and complexity, depending on complaint source. We anticipate to make meaningful analyses with 6+ months of data.

### 4. Finance

Year to date (YTD) August results show a net deficit of £0.02m against a budgeted deficit of £1.1m. Income YTD is £14 .9m, 1% higher than budget while operating expenditure is 6.7% below budget. The surplus / (deficit) for each month of this year is consistently averaging £200k favourable to budget. Approximately 50% of the positive variance appears to be related to timing while 50% is a permanent variance. Increasing grip of expenditure should continue to increase the positive variances.

### 5. Departmental reporting

The following are some key activities for the Council's attention.

Fitness to Practise - The management information packs that have
traditionally been presented to Council, have evolved over a number of
years. In a complex set of processes like FTP, with a number of decision and
exit points, it can be complex to represent the data series is short form. When
trying to combine actual numbers, with proportions or percentages that
represent themes, and also forecasting future numbers or lengths of time, the
analysis can be complicated.

Additionally, we are in a flux period, where we are starting to report separately, the volumes and outcomes of Social Work and non-Social Work cases. This is in anticipation of the transfer of these cases to Social Work England in early December 2019.

Currently, we are having to represent all of these factors, though the scope of the data will change after Social Work cases are transferred. Whilst we still need to produce and use the current reporting packs for operational purposes, we have devised a simple dashboard that covers the areas that Council may be most interested in. The data presentation is a representation of the current state of FTP cases, and the types of tabular or graphical presentation a suggestion for discussion. Once we are clear on the areas for reporting, series over time data can be displayed.

We have deliberately kept the report to 4 pages, and themed the proposed data around the areas of greater risk, activity, resource or connection to PSA Performance Review activities.

Our suggestion for the areas that may be helpful to Council are:

- Flow of cases (Page 1 snapshot of activity by profession, and also number of stages passed in the process)
- Length of time (Page 2 length of time for SW//non-SW cases by stage, and also PSA age groups)
- Interim orders (Page 3 age of cases PSA groups, and whether they have an ICP or Final Hearing listed)
- Risk Analysis (Page 4 HCPC's risk assessment compliance, and the potential financial and reputational risk of adjourned hearings)

In the dashboard, we refer to PSA Red, Amber, Green categories of cases. These match the Performance Review reports for cases that are >156 weeks from receipt (Red), 105 to 156 weeks (Amber) and 53 to 104 weeks (Green).

Council is asked to discuss the dashboard and:-

- Confirm the scope, depth and areas for reporting in future
- Advise of any additional areas outside the four area above
- Education quality assurance review: The Executive is currently formulating options around the next phase of this work, following the closure of the working group in May and recommendations received positively by SMT and the Education and Training Committee. We are proposing to deliver the project in a series of phases (work packages), with the first being to commission some further detailed analysis of available data sources, the development of a risk model and benchmarking of quality assurance approaches within the sector.

# **Chief Executive – Marc Seale**

# Meeting schedule period covering 9 July – 25 September

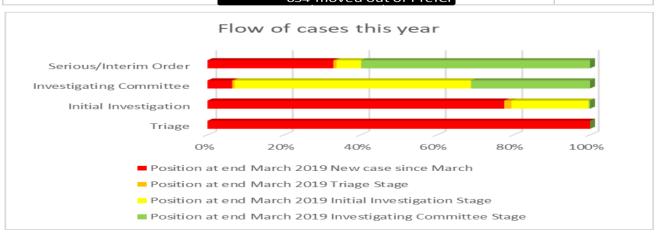
The College of Podiatry	9 July
Chief Executive and General Secretary, Steve Jamieson and	
Head of Education & Professional Development, James	
Coughtrey Chief Allied Health Professions Officer's Awards 2019	17 July
People Plan Advisory Board	22 July
CEO'S (Regulators) Belfast	23 July
Chief Executives Steering Group Belfast	23 July
Ministerial Short-Life Working Group on Culture Glasgow	31 July
HEE National School of Healthcare Science Head of the National School of Healthcare Science, Professor Berne Ferry	1 August
UNISON Head of Health, Sara Gorton	6 August
Royal College of Dental Surgeons of Ontario Registrar, Irwin Fefergrad	6 August
AHP Programme Board	7 August
Department of Health and Social Care Leeds	8 August
Department of Health Northern Ireland	16 August
Social Work England Chief Evecutive, Colum Conway	27 August
Chief Executive, Colum Conway	
IBM UK Limited	2 September
Vice President & Senior Executive Partner, Hitesh Amin	
Institute of Biomedical Scientists Birmingham	23 September
Professional Standards Authority Chief Executive, Alan Clamp	25 September

### 1. Snapshot of case activity, by SW and non-SW professions

_												
	YTD (1 A	pril to 31 A	august 2019)		Since	last Cou	ıncil		2018-19			Comments
	SW		Total	SW			Total	SW		Non-SW	Total	
New FTP cases received	633	508	1141		415	288	703		1345	1079	2424	The number of new cases is up 14% on the previous comparable period, with SW representing most of the increase in actual and % terms
Threshold closures by FTP team	287	173	460		144	106	250		1083	722		The Threshold Policy has had the intended effect of reducing the number of cases closed by HCPC without recourse to a Panel.
Considered at Investigating Committee Panel	228	281	509		139	187	326		260	361		ThresholdPolicy requires more cases to go to ICP; considerations in first 5 months of this year represent 82% of the total in the previous year. We continue to progress SW as well as non-SW in proportion to caseload.
Case to answer	108	161			64	102	166		158	189	347	Case to answer has not risen, despite change in volume. Evidence for PSA to show we are asking panels to close cases, rather than by HCPC
No case to answer	99	95	194		59	72	131					
Further information	21	25	46		16	13	29					
Final hearing listed	85	91	176		74	36	110		154	199		We have concluded 50% of the activity levels in 2018- 19, but in 5 months. We are therefore on target to reduce caseloads by end of budget year, impacting on length of time.
Concluded	78				71	28	99		134	155	333	renger or erre.
Adjourned/Part heard		14			3	8	11					

### 2. Measure of how many stages passed this year

Current PreICP caseload		Position at end March 2019				
		New case		Initial	Investigating	
	Number	since	Triage	Investigation	Committee	
Stage in process	open	March	Stage	Stage	Stage	
Triage	258	258	0	0	C	
Initial Investigation	798	619	15	161	(3)	
Investigating Committee	900	58	6	556	280	
Serious/Interim Order	234	77	2	15	140	
	2190					
Cases moved 1 or more stage	1606	moved on	e or more	stages		
% open caseload moved 1 or						
more stage	73%					
Plus,						
Threshold closures	460	cases				
No Case To Answer	194	cases				
	654	moved ou	t of PreICP			



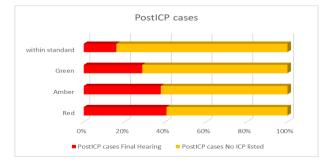
3. Length of time of open preICP cases, by profession, and by stage of process

J. Length of	unie or op	en breice c	ases, ny	hiniess	non, and	by stage of process
			No	Further		
		No Threshold	allegations	Investigation	Future ICP	
	All PreICP cases	(earliest stage)	(stage 2)	(Stage 3)	(Stage 4)	Comments
All cases combined						
Number open	2190	1078	800	36	276	15% of caseload have a panel closure decision listed
% of PreICP caseload	100.00%	49.00%	37.00%	1.60%	12.60%	
						SW case ages disguise the diferential with non-SW
Median (mths)	6	3	11	18	13	cases, which are younger
Median (wks)	26	11	46	79	57	
Social Work only						
Number open	1206	670	396	18	122	
% of PreICP caseload	55%	56%	33%	2%		The proportion of SW cases penetrating beyond the first stage of the process will decrease as they are handed over to SWE
						SW cases are older at each stage of the process, based on complexity and issues with achieving sufficient information to decide on closure rationale or
Median (mths)	6	3	12	18	15	allegations
Median (wks)	26	11	50	76	64	
Other 15 profs						
Number open	984	408	404	18	154	17% of non-SW caseload have a panel decision listed
						More non-SW cases have progressed to later stages
% of PreICP caseload	45%	42%	41%	2%	16%	(18%, compared with 12% for SW)
Median (mths)	6	2	10	17	12	
						The age of non-SW cases is less in each stage of the process, and the proportion of the total preICP
Median (wks)	26	11	41	72	52	caseload is higher

### 4. PSA age groups, showing whether ICP or Final Hearing listed



PreICP cases		
PSA category	ICP listed	No ICP listed
Red	8	8
Amber	33	48
Green	111	321
within standard	124	1537

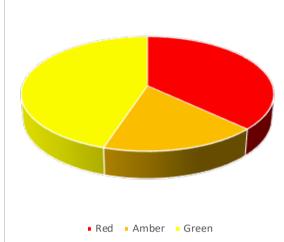


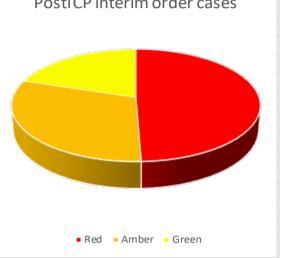
PostICP cases		
PSA category	Final Hearing	No ICP listed
Red	13	19
Amber	45	74
Green	60	149
within standard	8	42

# FTP Performance dashboard Period covered 1 April 2019 to 31 August 2019

### 5. Interim Orders

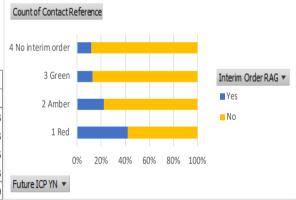
. Internit Orders							
Pre ICP		Post ICP					
IO category	Number	IO category	Number				
Red	38	Red	42				
Amber	18	Amber	26				
Green	46	Green	17				
PreICP interi	m order cases	PostICP interi	m order cases				





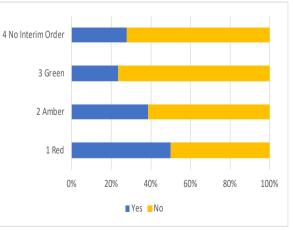
### PreICP cases with Interim Order

Count of Contact Refe	Future ICP YN		
Interim Order RAG	Yes	No	Grand Total
1 Red	16	22	38
2 Amber	4	14	18
3 Green	6	40	46
4 No interim order	250	1838	2088
Grand Total	276	1914	2190



### Post ICP cases with Interim Order

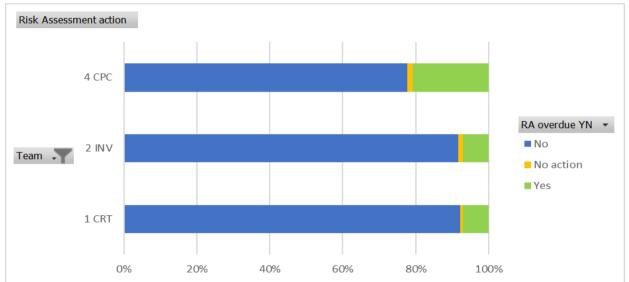
Listed	FH listed		
Interim Order RAG	Yes	No	Grand Total
1 Red	21	21	42
2 Amber	10	16	26
3 Green	4	13	17
4 No Interim Order	91	234	325
Grand Total	126	284	410



### FTP Performance dashboard Period covered 1 April 2019 to 31 August 2019

### 6. Risk assessments

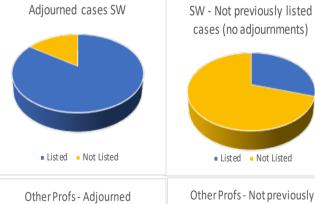
Risk Assessment action		RA overdue YN			
Team	įΥ	No	No action	Yes	Grand Total
1 CRT		945	7	73	1025
2 INV		798	11	61	870
4 CPC		182	3	49	234
Grand Total		1925	21	183	2129

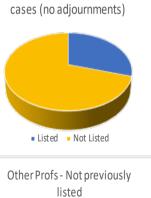


### 7. Adjourned and part heard hearings

### Social Work cases

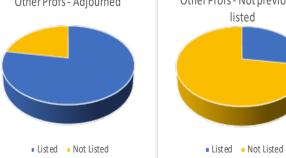
Adjourned	Listed		Not Listed
No		45	10
Yes		11	
Total		56	10





### Non-SW cases

Adjourned	Listed		Not Listed	
	Listed		110t Listea	474
No		66		1/4
Yes		7		2
Total		73		176





Council meeting, 25 September 2019

# Performance report

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Council meeting, 25 September 2019

# **Key Performance Indicators**

### **KEY PERFORMANCE INDICATORS DASHBOARD**

### **TIMELINESS**

### **Fitness to Practise**

Measure	Median leng		from rece	ipt of alle	gation to	Investigat	ing Comm	ittee Pan	el Per	iod	Jui	ne, July, Au	gust
	(ICP): 33 wee	eks								Strate	egic priorit	ies: 1 and 3	3
Executive commentary	This KPI continuous considered 509 financial year 2 age at panel or is around 8 we over the next to	9 cases in th 2018-19. Cu onsideration eks, though	ne 5 month urrently, a fu of these ca fast track c	period 1 <sup>st</sup> A <sub>l</sub> urther 276 cases is 56 w	pril to 31 Au ases (14% eeks. The	igust 2019. of the open current med	This compa caseload) h lian age of t	ares favoura ave a futura he cases a	ably with the e considera waiting an I	e 621 in the tion by the p CP listing is	12 month p panel. The 43 weeks.	eriod of the projected m The listing	previous ledian process
Year to date		Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
	Weeks	64	56	67	63	60							
Previous year		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19
	Weeks	58	54	56	63	63	53	67	50	58	72	62	84
Measure	Median leng	th of time	from ICP	to final He	aring: 39	weeks			Per	iod	Jui	ne, July, Au	gust
										Strate	egic priorit	ies: 1 and 3	;
Executive commentary	This KPI contin					•			_	vestigator, a	and the logi	stical function	on of the
Year to date		Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
	Weeks	32.1	32.6	37.3	33.9	38.0							
Previous year		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19
	Weeks	54	57	51	55	64	53	53	43	46	42	43	50

Measure	Median leng	th of time	from rece	ipt to fina	hearing:	73 weeks			Per	iod	Jui	ne, July, Au	gust					
										Strate	egic priorit	ies: 1 and 3	3					
Executive commentary	as we process spent in the ea weeks). We ha months (81 we	the older ca rliest part of ave now liste eks), and th	ses through the proces ed all SW ca us our plan	n ICP, even s. Our proje ases for con ned listing in	the effect on ctions show sideration to the remain	f meeting K	PI2 (time fro final hearin C. Our proje inancial yea	om ICP to had conclusion to the conclusion of th	nearing cond n for those on-SW case capacity pro	clusion) doe listed is 24 es to be liste ovided once	es not offset months fron ed shows a SW cases	the impact n receipt (10 current age transfer) wi	of time 03 of 19 Il make					
Year to date		Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20					
	Weeks	89.6	96.6	123.7	98.1	122.0												
Previous year		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19					
	Weeks	85	105	106	100	113	103	103	85	108	90	112	102					
Measure	Median lengt	th of time	of interim	order cas	es from r	eceipt to d	decision:	16 weeks	Per	iod	Jui	ne, July, Au	gust					
										Strate	egic priorit	ies: 1 and 3	3					
Executive commentary		just data is r	narginally o	utside of the	e KPI due to	two older	criminal cas	ses where c	harges hav									
Year to date		Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20					
	Weeks	11.3	11.3	13.6	13.6	19.3												
Previous year		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19					
	Weeks	16	17	19	14	13	41	16	18	23	13	34	34					
Measure	Number of o			not includ	ling Rule	12 cases*)	)		Per	iod	Jui	ne, July, Au	gust					
	1600 open ca	ases by 31	/3/19							Strate	egic priorit	ies: 1 and 3	3					
Executive commentary	a number of va	icancies (an rities, and re	d temporary cruiting nev	staff) in the	e Case Red	eption and	Triage team	n, this has c	aused the v	olumes of o	pen cases	to increase						
Year to date		Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20					
	Number	1,958	2,003	2,070	2,174	2,192												
Previous year		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	cases transfer) will me e end of the financial an-20 Feb-20 Jan-19 Feb-19 Jan-19 Feb-19 Jan-20 Feb-20 Jan-19 Feb-19 Jan-19 Feb-19 Jan-19 Feb-19 Jan-19 Feb-19 Jan-20 Feb-20 Jan-20 Jan-20 Feb-20 Jan-20 Feb-20 Jan-20 Jan-20 Feb-20 Jan-20 Jan-2						
	Number	1,721	1,804	1,867	1,946	1,936	1,960	1,939	1,959	1,984	June, July, Augustrategic priorities: 1 and 3 arim order case team is working an made/found, triggering a charmade.  June, July, Augustrategic priorities: 1 and 3 arim order case team is working an made/found, triggering a charmade.  June, July, Augustrategic priorities: 1 and 3 arim order cases to increase. Value of the previous year. Couple are within the timescale are within the timescale are within the timescale are sec-19 Jan-20 Feb-20 are sec-18 Jan-19 Feb-19		1,938					

# Registration

Measure	Median proce	essing tim	e for UK	graduates	: 10 worki	ng days			Per	iod	Jur	ne, July, Au	gust
										Strate	gic prioriti	ies: 1 and 3	3
Executive commentary	This indicator is	in line with	the optimu	m figure.									
Year to date		Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
	Working days	9	2	4	10	10							
Previous year		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19
	Working days	5	4	6	8	10	10	7	5	7	6	7	10
Measure				rnational a	applicatio	ns (Europ	ean Mutu	al	Per	iod	Jur	ne, July, Au	gust
	Pagagnitian), 60 working days									Strate	egic prioriti	ies: 1 and 3	3
Executive commentary	This indicator is	s in line with	the optimu	m figure.									
Year to date		Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
	Working days	38	39	41	42	45							
Previous year		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19
	Working days	55	56	64	55	40	42	49	46	54	52	55	55
Measure	Median proce Recognition)			rnational a	applicatio	ns (Non-E	uropean I	Vlutual	Per	iod	Jui	ne, July, Au	gust
	Recognition	. 60 WOIKI	ily uays							Strate	egic prioriti	ies: 1 and 3	3
Executive commentary	This indicator is	in line with	the optimu	m figure.									
Year to date		Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
	Working days	39	40	46	42	44							
Previous year		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19
	Working days	51	51	67	45	41	35	49	46	54	51	57	51

### **Education**

Measure	Median time	to produc	e visitors	reports fo	ollowing a	a visit: one	e calendar	month	Per	riod		ne, July, Au	_
										Strate	egic priorit	ies: 1 and 3	3
Executive commentary	This indicator i	s in line with	n the optimu	ım figure.									
Year to date		Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
	Days	28	28	27	27	27							
Previous year		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19
	Days	27	28	28	28	27	27	28	28	28	28	21	22

### **FINANCE AND RESOURCES**

### Finance

Measure	Performance ag	jainst bud	geted op	erating ex	penditur	e in range	of 97.5%	to 102.5%	Perio	d	Jun	e, July, Au	gust
										Stra	ategic prio	rities: 3	
Executive commentary	Operating expendi approximately £50 positive variance.		•	•			•		•			•	
Year to date	(,000)	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
	YTD Actual	3,606	6,466	9,356	12,306	15,025							
	YTD Budget	4,016	7,069	10,076	13,129	16,111	19,191	22,221	25,204	28,101	30,957	33,632	36,215
	YTD Forecast												
	YTD Variance	410	603	720	822	1,087							
	Actual as % of budget	90%	94%	93%	94%	93%							
Previous year	(,000)	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19
	YTD Actual	3,376	6,299	9,324	12,239	14,910	17,436	20,377	23,398	26,083	28,879	31,522	34,957
	YTD Budget	3,891	6,821	9,656	12,505	15,140	18,079						
	YTD Forecast							20,564	23,671	26,727	29,047	32,151	35,472
	YTD Variance	515	521	332	265	230	642	187	273	644	168	628	516
	Actual as % of budget	87%	92%	97%	98%	98%	96%	99%	99%	98%	99%	98%	98%

### **Human Resources**

Measure		turnover rates, published 5 May 2018)											June, July, August		
	turnover rates,	publistieu	5 Way 20	110)						Stra	itegic prio	rities: 3			
Executive commentary	Turnover in this fin the end of the cale		has increa	sed from 19	9% to 22%,	and it is lik	ely to incre	ase further o	due to fixed	term contra	acts cominç	g to an end	towards		
Year to date		Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20		
	Turnover	19%	21%	21%	21%	22%									
Previous year		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19		
	Turnover	25%	26%	25%	23%	23%	23%	22%	22%	23%	22%	21%	19%		

### **QUALITY**

### **Fitness to Practise**

Measure	Number of case	of cases per case manager: 45 s on specialist, profession-specific teams, and the drive to get cases to an ICP havilly, the re-work rate of allegations going to the ICP has remained low, at 9% of the This also indicates greater training and management oversight and input into cases.							Perio	d	Jun	e, July, Au	just
		specialist, profession-specific teams, and the drive to get cases to an ICP has ne re-work rate of allegations going to the ICP has remained low, at 9% of the salso indicates greater training and management oversight and input into cases. All of these things will lead to reduced length of time to conclusion over the salso indicates greater training and management oversight and input into cases. All of these things will lead to reduced length of time to conclusion over the salso indicates greater training and management oversight and input into cases. All of these things will lead to reduced length of time to conclusion over the salso indicates greater training and management oversight and input into cases. All of these things will lead to reduced length of time to conclusion over the salso indicates greater training and management oversight and input into cases. All of these things will lead to reduced length of time to conclusion over the salso indicates greater training and management oversight and input into cases. All of these things will lead to reduced length of time to conclusion over the salso indicates greater training and management oversight and input into cases. All of these things will lead to reduced length of time to conclusion over the salso indicates greater training and management oversight and input into cases.							Strate	jic prioritie	es: 1 and 3		
Executive commentary	Additionally, the re prepared. This als	-work rate of oindicates	of allegation greater trai	ns going to ining and m	the ICP ha	s remained t oversight	low, at 9% and input in	of those conto cases is	nsidered, de	espite the d	oubling of \	olumes be	ing
Year to date		Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
	Number	48	45	47	47	42							
Previous year		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19
	Number	55	54	52	53	54	54	49	54	57	53	49	53

# Registration

Measure	Number of uphe	eld appeal	s against	registrat	ion decis	ions			Perio	d	Jun	e, July, Au	gust
										Strate	gic prioritie	es: 1 and 3	;
Executive commentary													
Year to date		Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
	Concluded	7	6	5	4	4							
	Upheld	4	5	4	1	2							
	Upheld/ no new info	0	0	0	0	0							
Previous year		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19
	Concluded	5	6	5	5	4	7	4	6	4	6	5	5
	Upheld	3	3	2	3	2	4	2	4	1	3	4	2
	Upheld/ no new info	0	0	0	0	0	0	0	0	0	0	0	0

### **INFORMATION TECHNOLOGY**

### Information technology

Measure	Availability of H	ICPC web	sites (inc	luding Re	gister an	.5%	Perio	d	Jun	e, July, Au	gust		
										Strate	gic prioriti	es: 1 and 3	;
Executive commentary	There was some of and August was d									of the Cloud	dFlare secu	ırity service	outage
Year to date		Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
	Availability	99.52%	99.4%	98.9%	99.9%	99.6%							
Previous year		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19
	Availability	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	95.6%	99.9 %	100.0%	100.0%	100.0%

Strategic priority 1: Improve our performance to achieve the PSA's Standards of Good Regulation

Strategic priority 3: Ensure the organisation is fit for the future and is agile in anticipating and adapting to changes in the external environment

\*Rule 12 is a designation that is typically applied to cases where there is limited anticipated case activity due to the existence of an on-going Police investigation. The designation allows the Fitness to Practise Department to more accurately monitor case progression and distinguish between cases that can be expeditiously progressed and those cases which cannot be progressed because any progression is dependent on a third-party investigation.



Council meeting, 25 September 2019

# Strategic Priorities – progress of key deliverables

### Strategic priority 1: Improve our performance to achieve the Professional Standards Authority's Standards of Good Regulation

Area	Key deliverables (and completion by quarter)	Progress
Improve our fitness to practise performance to meet PSA standards	Deliver the programme of work outlined in the Fitness to Practise (FTP) Improvement plan including:	We continue to embed the deliverables produced during the project. We have commenced the planned 6 month review of the Threshold Policy, and are reviewing our communication with parties, to facilitate more effective communication and understanding of case progression. This includes writing to the Chief Executive and Director of HR at the earliest stage of our investigation, in organisations where the registrant is employed. This helps the organisation know when a registrant is under investigation, but also ensures the contact point we have is able, and the correct person, to assist HCPC. It also adds an automatic escalation point to the case, which will help address length of time.
	Complete the review of case management competency and resource requirements (Q1)	This has completed, and the requirements have been included in the procurement process, based on the G Cloud approved framework. Scoring of supplier submissions has concluded, and a business case is being developed for consideration by SMT and Council over the autumn.
	Implementation of case progression strategy including a process for prioritising high risk cases (Q1-4 (ongoing))	All cases are monitored to ensure they have an active risk assessment action. Additionally, case owners are monitored to ensure new material on cases is reviewed within one week of receipt. Both actions can – and should – generate escalation activities if the case is not progressing as expected. Current compliance is 0.65% of open cases had no live action, and 14% had overdue material (up to 10 days). This is within the parameters expected. An independent audit of the risk assessment process by the Quality Team has commenced, and will report in late September.
	Review of the Standard of Acceptance policy and associated guidance (Q1 – Q2)	This has started, and will complete in September 2019. There are no major issues or concerns identified since implementation.
	Revise the FTP quality assurance framework to align with the PSA standards of good regulation (Q1)	We met with PSA on 6 September, to understand the outcomes of their pilot work with other regulators, and discuss likely evidence to demonstrate our adherence with the revised Standards of Good Regulation. We have commenced a review of the PSA framework of evidence, and mapping this against our audit and policy making activities, as well as operational outputs in Registration, Education and FtP.
	Meet with PSA on a quarterly basis to provide progress updates (Q1-4 (ongoing))	We continue to do this, with recent meetings in July and early September.

Strategic priority 2: Ensure	our communication and engagement activities are proact	ive, effective and informed by stakeholder views and expectations
Area	Key deliverables	Progress
Seek to better understand the preferences, needs and views of our stakeholders	Commission research to better understand the views and expectations of our stakeholders and put in place an action plan as a result of the findings (Q3)	Completed. A focus for the communications team has been the development of digital communications. Specifically, registrant engagement through In Focus, social media campaigns and the development of professional hubs and case study content. Developing content for our employer hub and newsletter has also been a focus as has the project to make our core regulatory information and data more accessible.
Strengthen our engagement with stakeholders in the four countries of the UK	Develop a new stakeholder engagement plan to guide our engagement with stakeholders across the four countries (Q1)	The key stakeholder engagement plan is work in progress following work to audit HCPC's key stakeholder relationships. However, due to ongoing vacancies in the communications team we have not been able to progress and this work has been paused.
	Pilot holding an engagement forum for key stakeholders in one of the UK countries and evaluate its effectiveness (Q4)	Events in the four nations form part of the 2019-20 workplan. Registrant events are scheduled for Autumn and Spring. The key stakeholder engagement fora are now planned for early 2020 to allow Council to determine our narrative on regulatory reform and strategy in light of the ongoing transformation work.
	Work in partnership with education sector stakeholders to review our approach to the quality assurance of education and training programmes (Q2 (planned event) and ongoing)	Engagement has been constructive in the two working group meetings held so far with the third and final working group taking place 17 May. Following this, the working group report with recommendations was considered by SMT and then ETC and it was agreed that before putting proposals out for further work a business plan exercise should validate the cost investment behind the changes in practise proposed. This will go to SMT and Council in the Autumn.

Strategic priority 3: The organisation is fit for the future and is agile in anticipating and adapting to changes in the external environment

Area	Key deliverables	Progress		
Keep our financial sustainability under review	Review our cost base and ongoing financial sustainability, consulting if necessary on changes to registration fees (Q2 (and ongoing))	A revised 3 year budget review was undertaken. This is being reworked with a turnaround 'lens' to ensure financial sustainability. An independent financial baseline review of the HCPC budgets and their underlying assumptions is being commissioned.		
Embed a strategic approach to risk and performance management	Develop and agree a strategic approach to risk management by identifying a set of strategic risks (Q1)	The strategic risk register continues to be updated and presented to the Audit Committee at each meeting where the Committee considers each risk. There is also a focus on a particular risk and at its September meeting the Interim Director of Finance focused on SR4 and financial sustainability.		
Further develop our approach to measuring and monitoring performance  Review our Key Performance Indicators (KPI) at least once a year (Q4 (and ongoing))		The SMT continue to receive and discuss monthly departmental reports at their management meetings. This includes core regulatory departments, quality assurance reports and management accounts. Additionally, the SMT will review and scrutinise the quarterly data sets required by the PSA before they are submitted.		
		Review to take place in Q4		
	Review and further refine the existing performance data set considered by the Council (Q2)	The Head of Fitness to Practise has been working on the development of fitness to practise data sets for consideration by the Council. As previously reported, the aim is to provide clarity on timeliness and quality of process. The first iteration of this is appended to this report.		
Invest in processes and systems to improve stakeholder experience and drive business efficiencies	Build capacity required to accelerate business transformation (Q2)	FTP Case Management System (CMS) Review: the supplier selection exercise has concluded, the business case is being developed for presentation to SMT and Council in November.  Registration transformation: Phase two of the project started at the start of August, following mobilisation initial design workshops are progressing to plan.  Education systems major project: The upgrade of the applications has completed successfully. The functional changes were deployed but were subsequently rolled back after performance issues were experienced. Following investigations a new release is planned for the end of September.		

Strategic priority 4: Make better use of data, intelligence and research evidence to drive improvement and engagement								
Area	Key deliverables	Progress						
Ability to collect data	Develop a classification system for capturing the characteristics of fitness to practise cases (Q2)	This data has been collected since February 2019 and a review of the first 3 months was presented to SMT in August 2019. We continue to collect this data, and will use it to inform any themes or trends emerging regarding the nature of cases (across the professions) and the stratification of age and complexity, depending on complaint source. We anticipate to make meaningful analyses with 6+ months of data.						
Research action planning	Deliver a programme of work to deliver the outcomes of the	As previously reported, we have commissioned the University of Surrey to undertake two projects for us to look at the impact the FtP process has on registrants. This work is ongoing and we anticipate outputs in Q3 and Q4.						
	University of Surrey research: (Q1-4 (and ongoing))	We are also considering ways we can better support registrants in their understanding of our Standards and supporting information. A focus has been assessing the key lines of enquiry to inform the development of our online information.						
	Work to raise awareness on when to self-refer and when to refer with a particular focus on registrants, employers and complainants	Information for registrants has been published to the website, along with case studies and an infographic. We are currently developing a dissemination plan. The Policy team is also working with Communications to develop materials for employers.						
	Engagement with educators to develop teaching and learning materials for educators using the case studies developed in the research	We have developed an outline of the information required and have engaged the web team to establish how this can be presented on the website. This work has led to us considering how we might develop information in general. We intend to develop our content further and use the 'Meeting our Standards' pages to support stakeholders in navigating the Standards and supporting material.						
	Commission a literature review on the characteristics of effective clinical / peer supervision in the workplace and use this to engage with stakeholders including employers on the role of supportive approaches in preventing problems from occurring	We have fed back comments on the draft final report and expect to have a revised version by the end of September.						
Internal capacity to deliver research activity	Deliver at least one in-house research project looking at a cross- profession issue such as the characteristics of cases about internationally qualified registrants. (Q4)	This work has taken longer than expected due to the complexity of FTP case files, however our research is well progressed and we expect to present our findings in Q3.						



Council meeting, 25 September 2019

# Finance report

# Finance

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### **Finance Overview**

Summarised financial performance of HCPC for the period year to date (YTD) is shown in Table 1 below:

TABLE 1				
Income and Expenditure Account YTD up to end of Aug 19	Actual £	Budget £	Variance £	Full Year Budget £
Income (A)	14,910,848	14,469,971	440,877	32,611,424
Expenditure				
Pay Costs	5,865,826	5,839,895	(25,931)	14,061,371
Non Pay Costs	8,764,804	9,900,310	1,135,506	21,267,304
Depreciation	393,884	371,282	(22,602)	886,844
Total Expenditure (B)	15,024,514	16,111,488	1,086,973	36,215,519
Operating Surplus/(Deficit) C= (A-B)	(113,666)	(1,641,517)	1,527,850	(3,604,095)
Corporation Tax	0	0	0	0
Turnaround Costs	172,012	0	(172,012)	0
Total Other Expenditure (D)	172,012	0	(172,012)	0
	219,500	492,870	(273,370)	2,064,423
Grant Income Investment Income	46,336	23,900		
			22,436 (250,935)	50,798 <b>2,115,221</b>

YTD HCPC income was £14.9m which is £441k higher than budget

Income is shown in more detail in Table 2 and 2a.

Pay costs are within budget with a variance of £26k which is less than 0.5%

Non pay costs is showing a favourable variance of £1.1m (variance of 11.5%). £273k of the underspend is balanced by a reduction in £273k of Grant Income. Details in table 4 below.

Operating deficit at month 5 is £114k compared to a budgeted deficit of £1.6m

#### Income

TABLE 2						
Income By Activity	Period 5		Y	ear to dat	e	
YTD up to end of Aug 19	Actuals £	Actual £	Budget £	Variance £	Variance %	Full Year Budget £
Graduate Registration Fees	164,534	759,933	768,014	(8,081)	-1%	1,854,157
Readmission Fees	23,625	130,680	54,770	75,910	72%	206,456
Renewal Fees	2,577,519	12,561,763	12,483,069	78,694	1%	27,765,776
International Scrutiny Fees	121,770	848,430	631,557	216,873	34%	1,641,998
UK Scrutiny Fees	192,349	524,720	459,644	65,076	14%	968,036
Registration Income	3,079,797	14,825,526	14,397,054	428,472	3.0%	32,436,424
Other Income	3,232	12,405	0	12,405	0	0
Rental Income GCC	14,583	72,917	72,917	0	0	175,000
Total Income	3,097,612	14,910,848	14,469,971	440,877	0	32,611,424

Table 2 compares income by activity against budget for the month of August and YTD; also included in the table is the full year budget as approved by Council in March 19

The main variance is on the scrutiny fees of £282k; this is mainly due to the higher number of international applicants in the first five months of this financial year. Normally the yearly target is reduced because of the uncertainty and a more prudent approach was taken when building the 19/20 income budget due to the unknown impact on EEA applicants because of Brexit. But instead there has been a growth in the non EEA applicants.

Table 2b shows the income by profession in ascending order of annual budget

TABLE 2b							
Income By Profession	Year to date		e	Income By Profession	Year to date		
			Full Year				Full Year
Budgeted Income under £1.5m	Actuals	Budget	Budget	Budgeted Income over £1.5m	Actual	Budget	Budget
YTD up to end of Aug 19	£	£	£	YTD up to end of Aug 19	£	£	£
Prosthetists & Orthotists	45,286	43,453	108,373	Speech & Language Therapists	648,718	626,919	1,583,302
Orthoptists	56,059	56,307	138,109	Bio-medical Scientists	934,446	899,777	2,237,067
Hearing Aid Dispensers	176,405	113,933	293,016	Practitioner Psychologists	930,802	933,786	2,323,303
Arts Therapists	167,798	166,362	412,171	Paramedics	1,099,731	1,010,618	2,730,343
Clinical Scientists	230,389	230,991	605,807	Radiographers	1,534,970	1,486,501	3,592,020
Dietitians	406,604	413,716	974,047	Occupational Therapists	1,574,535	1,525,716	3,789,856
Chiropodists	491,611	495,269	1,181,108	Physiotherapists	2,323,740	2,358,160	5,562,617
Operating Department							
Practitioners	509,796	508,495	1,270,562	Social workers	3,694,637	3,527,051	5,634,722
Total Income	2,083,948	2,028,526	4,983,193	Total Income	12,741,579	12,368,528	27,453,231

### **Pay Costs**

Table 3 compares pay costs against budget for YTD and also shows the pay costs for the month of August and the full year budget as approved by Council in March 2019. Overall pay costs total variance to budget is just under 0.5%

TABLE 3					
Payroll Costs	Aug-19	Actual	Budget		Full Year Budget
YTD up to end of Aug 19	£	£	£	£	£
Expenditure	50.000	224 020	224 020	042	772.054
Chief Executive	69,929	331,028	-		772,051
Communications	43,347	228,300			513,825
Office Services	28,045	139,537	151,093		362,024
Finance	59,760	292,747	233,322		562,905
Human Resources	60,607	326,323			782,740
Human Resources Partners	16,282	68,844			172,045
IT Department	55,066	326,656	319,285	(7,370)	850,510
Major Projects: without SW Transfer Costs	60,345	25,827	89,172	63,345	355,504
Social Workers and Physician Assistants					
Transfer Costs	17,907	239,716	108,730	(130,986)	480,646
Project managers	35,046	147,904	158,566	10,662	390,291
Professional Liaison Team - New	0	0	0	0	14,280
Quality Assurance	41,587	218,154	246,540	28,386	617,074
Secretariat	23,428	101,700	112,039	10,338	191,356
Pay Costs Support Departments (A)	511,348	2,446,736	2,372,318	-74,418	6,065,251
Education	45,961	247,738	271,631	23,893	575,627
Fitness to Practice	448,599	2,266,606	2,260,947	(5,659)	5,163,883
Policy	16,971	77,887	85,463	7,576	208,491
Data and Intelligence Team - New	0	0	0	0	24,693
Registration	168,370	826,858	849,536	22,677	2,023,428
Pay Costs core regulatory Departments					
(B)	679,900	3,419,089	3,467,577	48,488	7,996,122
Total Pay Costs (C=A+B)	1,191,248	5,865,826	5,839,895	-25,931	14,061,371

The Support departments overall show an overspend against budget of £74k; this is mainly due to some of the backfill payroll budget badged as other professional fees under non-pay during budget setting in the social workers transfer project cost. This is offset by a large savings in the Major projects non pay.

Finance team costs are higher than budget due to absence cover and increased cost of managing the yearend process and the 3 year financial plan.

Core Regulatory departments overall show a savings of £48k

### **Non Pay Costs**

Table 4 compares non pay costs against budget for YTD and also shows the costs for the month of August and the full year budget as approved by Council in March 2019. Overall non pay costs total variance to budget is 11.5%

TABLE 4					
Non Pay Costs	Aug-19	Actual	Budget	Variance	Full Year Budget
YTD up to end of Aug 19	£	£	£	£	£
Expenditure					
Chair	6,801	32,755	38,155	5,400	92,892
Chief Executive	4,783	30,683	33,943	3,260	76,208
Council & Committee	19,431	117,536	120,821	3,285	319,690
Communications	9,490	45,303	137,061	91,758	316,874
Office Services	198,032	995,206	1,095,575	100,369	2,627,375
Finance	12,579	100,122	150,476	50,354	234,559
Human Resources	21,197	208,760	203,877	(4,883)	485,965
Human Resources Partners	3,721	49,514	70,928	21,415	214,499
IT Department	162,859	677,848	737,927	60,079	1,796,090
Major Projects: without SW Transfer Costs	(38,030)	11,884	479,821	467,937	437,565
Social Workers and Physician Assistants					
Transfer Costs	96,478	126,278	495,297	369,019	1,583,777
Project managers	(327)	143	875	732	2,100
Professional Liaison Team - New	0	0	0	0	1,845
Quality Assurance	247	1,776	304	(1,472)	1,590
Secretariat	7,821	41,687	33,974	(7,713)	80,490
PSA Levy	0	902,190	902,190	(0)	902,190
Apprentice Levy	3,189	15,617	17,924	2,307	42,814
Total Costs Support Departments (A)	508,271	3,357,302	4,519,149	1,161,847	9,216,524
Education	13,849	112,254	136,506	24,252	267,115
Fitness to Practice	920,949	4,708,658	4,673,105	(35,553)	10,393,260
Policy	9,297	7,971	36,815	28,844	106,096
Data and Intelligence Team - New	0	0	0	0	90
Registration	100,107	578,619	534,736	(43,883)	1,284,219
<b>Total Costs core regulatory Departments</b>					
(B)	1,044,201	5,407,502	5,381,162	-26,340	12,050,780
Total Non Pay Costs (C=A+B)	1.552.472	8.764.804	9.900.310	1,135,506	21,267,304
	,55, .,	-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0,000,010	_,_55,550	

Overall non pay costs show a savings of £1.1m; 11.5% variance against budget.

The communications budget show a savings of £92k against budget mainly due unplanned vacancies which is affecting the department's delivery plan.

The office services budget shows a savings of £100k which an element of it is banked savings and the rest due to timing differences.

£564k savings on budget is mainly attributable to timing differences of expenditure on five projects.

The Reg Transformation and Improvement phase 2 has now started in August. The CMS and Partner portal project have now been deferred to January and October.

### **Balance Sheet**

TABLE 5	Actual	Budget	Actual	Budget
Balance Sheet	Aug-19	Aug-19	31 March 2019	31 March 2020
Total Fixed Assets	7,667,370	8,419,449	7,898,072	9,513,080
Current Assets				
Other Current assets	1,294,042	999,842	2,970,827	1,816,503
Cash & cash equivalents	16,487,278	14,020,103	18,662,518	11,913,206
Coon a coon equitorents	17,781,321	15,019,945	21,633,345	13,729,709
Total Assets	25,448,691	23,439,395	29,531,417	23,242,790
Current Liabilities				
Trade and other payables	638,412	216,764	1,578,506	216,764
Other Liabilities	1,761,430	1,612,918	1,612,006	1,612,918
Deferred Income	18,835,666	18,965,315	22,107,880	19,132,839
Total current liabilities	21,235,508	20,794,998	25,298,391	20,962,522
Liabilities greather than one year	163,052	163,052	163,052	163,052
Total Assets less liabilities	4,050,131	2,481,345	4,069,974	2,117,216
General Fund b/fwd	-3,771,687	-3,583,761	-3,539,747	-3,583,761
Rev Reserve - Land & Building	-298,287	-22,330	-298,287	-22,330
This Period's surplus/deficit	19,843	1,124,746	-231,940	1,488,875
General Fund c/fwd	(4,050,131)	(2,481,345)	(4,069,974)	(2,117,216)

Table 5 shows the actual and budgeted balance sheet as at Aug 19 and the budgeted position as at March 31, 2020 compared to the actuals as at March 31, 2019.

Long term liability is the dilapidation provision for the leased building at 405 Kennington road. Total reserves are expected to reduce by the budgeted /expected loss in year. Year to date loss of £20k has reduced the total reserves by the same amount.

#### Cash

At the end of Aug 19; our total cash balance was 13.2m; of which £5.4m was held in fixed term deposits (see table below) and £7.9m was in instant access accounts. The interest rate on our main instant access account is now 0.70%.

Bank	Deposit amount £m	Term Months	Maturity date	Interest rate
Santander	£2.3	9	16.9.2019	1.00%
Barclays		32 days'		
	£3.1	notice		0.75%
Total	£5.4			

Split of funds at banks is shown in the pie chart and table below.

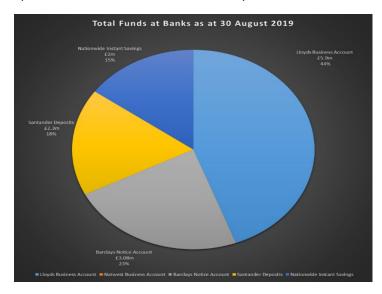


Table 6a shows the split of liquid cash and cash held in deposit.

Gordon Dixon

11/9/2019

A four month rolling forecast is shown in Table 6. This includes actuals From April to August and forecasts till December 2019.

The cash-flow forecast in table 6 assumes the following:

- No external financing is assumed
- No additional grant income (under negotiations) factored in yet
- Grant Income receipt in line with budget assumed
- Full payment of all committed expenditure is assumed in the cash flow forecast
- All known staff costs are included

The balance due to SWE is due for payment by the 8<sup>th</sup> January 2020. The forecast assumes that this is paid at the end of December 2019. It is not intended to pay the funds early, but the exercise was undertaken to give an indication of the cash position post Social Workers.

Table 6
Cash Flow Forecast 2019-2020
Opening Balance
Cash in
Registration Fees
Investment Income
Rental income - GCC
Grant income
Other income
SW final DD Rec 2019
PSA refund
Total Cash Receipts
Cash out
Payments to Suppliers
Payments to Partners
Pay type (non payroll)
Staff expense
Capital
PSA
Payment to SWE re final DD (Dec 2019) Payment to SWE re upfront payments
Payroll - Salaries
Payroll - Salaries
Payroll - Pensions
Payroll - Other
Corporation Tax
Total Cash Payments
Net misc items (Cash Book related
corrections)
Net Cash Flow
Closing Balance

								SW OUT	
Apr-19 Actual	May-19 Actual	Jun-19 Actual	Jul-19 Actual	Aug-19 Actual	Sep-19 Forecast	Oct-19 Forecast	Nov-19 Forecast	Dec-19 Forecast	
18,662,518	16,666,496	15,452,115	15,054,698	13,380,535	13,245,121	14,059,758	15,738,903	14,060,965	
1,057,197	1,330,300	2,734,108	1,091,030	2,517,993	3,537,024	1,410,122	1,112,722	2,820,975	
7,655	7,967	7.699	4.660	4,994	19,466	7,934	8,034	6.405	
-	-	,	43,750	-	-	43,750	-	-	
-	303,549		219,144	-	392,307	47,000	47,000	503,796	
			105,000	-					
			-	-		3,019,815			
-	-		-	-	-	-	-	-	
1,064,851	1,641,816	2,741,807	1,463,584	2,522,988	3,948,797	4,528,621	1,167,756	3,331,176	
1,618,810	1,392,595	1,580,837	1,715,762	1,242,368	1,442,855	1,177,555	1,177,555	1,488,655	
347,950	350,768	443,605	394,086	375,601	336,000	336,000	336,000	336,000	
				-	46,511	38,511	38,511	19,625	
1,466	2,476	816	2,965	876	2,800	2,800	2,800	2,800	
-	86,582	45,566	-	-	258,685	247,301	243,518	243,518	
-	-		-	-	-	-	-		
			-	-				3,019,815	
			-	-				2,380,185	
648,588	636,107	637,451	641,353	654,201	660,000	660,000	660,000	660,000	
374,104	304,479	234,779	301,391	301,564	303,000	303,000	303,000	303,000	
-	81,450	155,807	77,235	79,483	80,000	80,000	80,000	80,000	
3,149	4,309	4,309	4,309	4,309	4,309	4,309	4,309	4,309	
2,994,067	2,858,767	3,103,171	645 3,137,746	2,658,402	3,134,160	2,849,476	2,845,693	46,795 8,584,702	
2,994,067	2,030,707	3,103,171	3,137,740	2,030,402	3,134,160	2,049,476	2,045,095	0,364,702	
(66,807)	2,571	(36,054)	_	_	_	_	_	_	
(1,996,022)	(1,214,380)	(397,418)	(1,674,162)	(135,414)	814,637	1,679,145	(1,677,938)	(5,253,526)	
								,	
16,666,496	15,452,115	15,054,698	13,380,535	13,245,121	14,059,758	15,738,903	14,060,965	8,807,439	

Table 6a Investments & Cash Note
Non-Instant Access Accounts
Santander Deposit (6mth to Sept)
Barclays 32 Day Notice Account
Total Non-Instant Cash
Instant Access Accounts
Nationwide Instant Savings Account
Lloyds per TB (end of period)
ADD: Unpresented Cheques LI1
LESS: Uncleared Lodgements LI1
Lloyds
Barclays & Natwest
Total Liquid Cash
Cash Position

Apr-19 Actual	May-19 Actual	Jun-19 Actual	Jul-19 Actual	Aug-19 Actual	Sep-19 Forecast	Oct-19 Forecast	Nov-19 Forecast	Dec-19 Forecast
2,295,028	2,295,028	2,295,028	2,295,028	2,295,028				
3,076,666	3,078,562	3,080,650	3,082,422	3,084,386	3,087,550	3,090,050	3,092,650	3,095,15
5,371,694	5,373,590	5,375,678	5,377,450	5,379,414	3,087,550	3,090,050	3,092,650	3,095,15
2,000,000	2,000,000	2,000,000	2,000,000	2,000,000	2,000,000	2,000,000	2,000,000	2,000,00
9,294,450	8,078,199	7,678,720						
9,294,450	8,078,199	7,678,720	6,002,811	5,865,453	8,971,988	10,648,658	8,968,147	3,712,14
352	326	300	274	254	221	195	169	14
11,294,802	10,078,525	9,679,020	8,003,085	7,865,707	10,972,209	12,648,853	10,968,315	5,712,28
							_	00 (-
16,666,496	15,452,115	15,054,698	13,380,535	13,245,121	14,059,758	15,738,903	14,060,965	JE 38,807,41



Council meeting, 25 September 2019

# Department reports

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# Education

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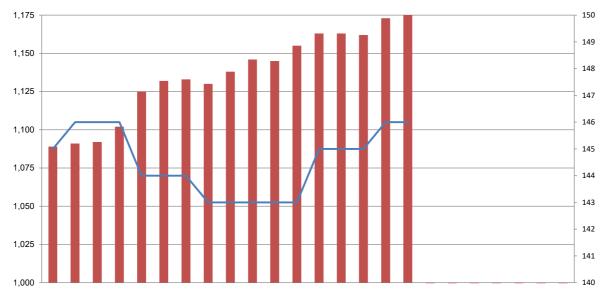
### **Education Department – Overview**

- **Approvals:** We are scheduled to complete 61 visits in the 2019-20 financial year. However, we expected that figure to rise to meet the forecast of 68, with visits still to be scheduled for March 2020. We continue to meet our performance target around report generation, indicating timely service is being provided through this process.
- **Monitoring:** We have now completed our assessment days for the 2018-19 academic year, and anticipate to close off post-review processes over the next three months. 510 programmes have been assessed through the audit route to date, with all being required to meet our new requirements in relation to practice based monitoring and service user and carer monitoring, in addition to evidencing how the revised education standards are met.
- Social work transfer: Our work with systems suppliers to develop migration tools to support the data transfer work remains on track. Regular data sharing with Social Work England around work in progress cases is due to commence in September. We continue to operate the processes in accordance with the transitional processes. This means the approval process is now closed off to new requests for social work and approved mental health professional programmes. We are also on track to complete annual monitoring for these programmes prior to the transfer. Further communications regarding the transitional arrangements is due to go out to education providers in the next Education Update in September.
- **Podiatric surgery:** Following the update to Council in the previous reporting period, the visitor panel have recommended non-approval of the two programmes being assessed. This recommendation is due for consideration by the Education and Training Committee on 11 September. The Committee will make the final decision regarding programme approval. Should non-approval be decided upon, further consideration must be given to the timing and viability of the annotation going live.
- Education quality assurance review: The Executive is currently formulating options around the next phase of this work, following the closure of the working group in May and recommendations received positively by SMT and the Education and Training Committee. We are proposing to deliver the project in a series of phases (work packages), with the first being to commission some further detailed analysis of available data sources, the development of a risk model and benchmarking of quality assurance approaches within the sector.
- Education systems major project: Development items to improve performance and efficiency in the Dynamics systems are due to be deployed in September. Testing is currently being undertaken for SharePoint development items, with deployment scheduled for later this year.

Total approved programmes

Total approved education providers

#### Number of approved programmes, by profession April 2018 - March 2020



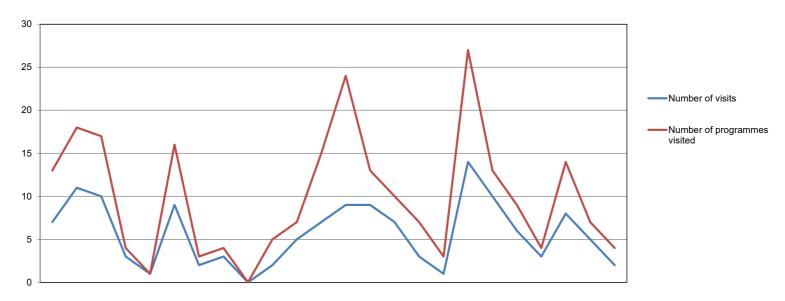
Profession/entitlement	2018									2019												2020		$\overline{}$
Professionentulement	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec		Feb	Mar
Arts therapists	28	29	29	31	31	31	31	31	31	31	31	31	31	31	31	31	31							
Biomedical scientists	64	64	64	64	67	71	71	71	71	71	71	71	71	71	71	71	71							
Chiropodists/ Podiatrists	19	19	19	19	19	19	19	18	18	18	18	18	18	18	18	19	19							
Clinical scientists	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4							
Dietitians	35	35	35	36	39	39	39	39	39	40	40	40	40	40	40	40	43							
Hearing aid dispensers	18	18	18	18	20	20	20	20	20	19	19	19	20	20	20	20	20							
Occupational therapists	73	73	73	74	75	75	75	75	80	81	81	82	84	84	84	87	88							
Operating Department Practitioners	37	37	37	37	39	39	39	38	39	42	42	44	44	46	47	49	52							
Orthoptists	3	3	3	4	6	6	6	6	6	6	6	6	6	6	6	6	5							
Paramedics	76	77	77	76	79	79	79	78	75	74	74	74	74	74	72	72	73							
Physiotherapists	79	79	79	80	83	85	86	87	89	90	90	90	92	92	92	94	96							
Practitioner psychologists	109	109	109	114	114	114	114	114	114	115	115	115	116	116	116	117	117							
Prosthotists/Orthotists	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2							
Radiographers	58	56	56	56	57	57	57	57	57	57	57	57	57	57	57	59	59							
Social workers in England	253	253	253	254	255	255	255	256	258	260	261	262	265	265	265	268	278							
Speech and language therapists	42	45	45	44	45	46	46	46	46	46	46	48	49	49	49	50	50							
Prescription only medicine - administration	4	3	3	2	2	2	2	2	2	2	2	2	2	2	2	2	2							
Prescription only medicine - sale / supply (CH)	5	5	5	5	5	5	5	5	5	5	4	4	4	4	4	4	4							
Prescription only medicine - sale / supply (OR)				1	4	4	4	4	4	4	4	4	4	4	4	4	4							
Supplementary prescribing	49	49	49	49	49	49	49	49	49	49	49	50	50	50	50	49	49							
Independent prescribing	96	96	97	98	97	97	97	97	97	98	98	101	99	97	97	96	98							
Approved mental health professionals	33	33	33	32	31	31	31	29	30	30	29	29	29	29	29	27	27							
Podiatric surgery	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2							
Total approved programmes	1,089	1,091	1,092	1,102	1,125	1,132	1,133	1,130	1,138	1,146	1,145	1,155	1,163	1,163	1,162	1,173	1,194	0	0	0	0	0	0	0
Total approved education providers	145	146	146	146	144	144	144	143	143	143	143	143	145	145	145	146	146							

2016/17	2017/18	2018/19	2019/20
FYE	FYE	FYE	YTD
28	28	31	31
60	64	71	71
17	19	18	19
3	4	4	4
32	35	40	43
18	18	19	20
68	73	82	88
34	37	44	52
3	3	6	5
73	76	74	73
71	78	90	96
102	109	115	117
2	2	2	2
54	58	57	59
252	253	262	278
34	42	48	50
4	4	2	2
6	5	4	4
		4	4
51	49	50	49
95	97	101	98
32	33	29	27
	2	2	2
1,039	1,089	1,155	1,194
145	143	144	146

CH = Chiropodists / podiatrists

OR = Orthoptists

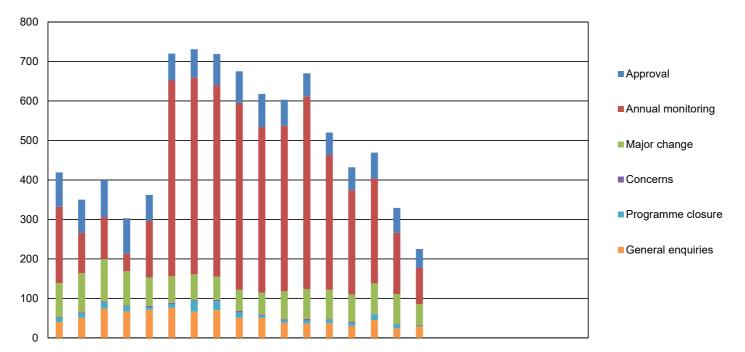
#### Overview of approval visits April 2018 - March 2020



Overview of approval visits	2018									2019												2020		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Number of visits	9	9	7	3	1	14	10	6	3	8	5	2	10	8	6	7	1							
Number of programmes visited	24	13	10	7	3	27	13	9	4	14	7	4	22	9	6	10	2							

2016/17 FYE	2017/18 FYE	2018-19 FYE	2019-20 YTD
44	60	32	32
78	103	49	49

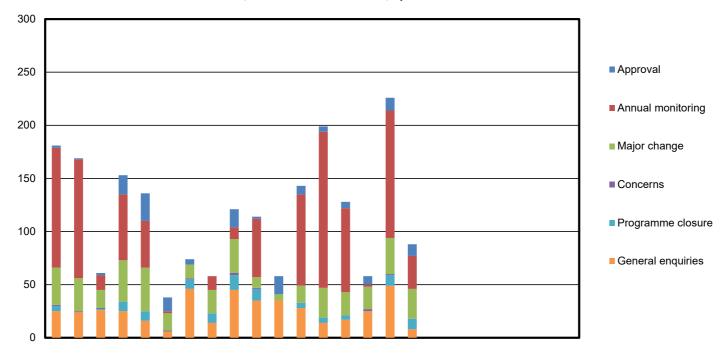
### Overview of workload, Number of active cases, April 2018 - March 2020



Work area	2018																					2020		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Approval	87	84	94	90	66	68	72	79	80	84	66	59	57	58	65	63	48							
Annual monitoring	193	102	106	44	143	496	498	485	473	420	419	487	341	264	266	155	92							
Major change	86	99	108	87	72	67	65	59	54	55	71	76	75	70	77	76	52							
Concerns	2	3	2	2	4	3	2	3	4	3	3	4	2	3	1	1	2							
Programme closure	11	11	16	13	6	10	28	23	13	5	6	8	8	7	15	10	2							
General enquiries	40	51	74	67	71	76	66	70	51	51	38	36	37	30	45	24	29							
Total	419	350	400	303	362	720	731	719	675	618	603	670	520	432	469	329	225	0	0	0	0	0	0	0

2016/17	2017/18	2018/19	2019/20
FYE	FYE	FYE	YTD
70	81	94	57
283	292	106	341
57	80	108	75
3	2	2	2
8	9	16	8
31	41	74	37
452	505	400	520

### Overview of workload, Number of resolved cases, April 2018 - March 2020



Work area	2018									2019												2020		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Approval	2	1	2	18	26	13	5	0	17	2	17	8	5	6	8	12	11							
Annual monitoring	113	112	14	62	44	2	0	13	11	55	0	86	147	79	2	120	31							
Major change	35	31	17	39	41	16	13	22	32	10	6	16	28	22	21	34	28							
Concerns	1	1	1	0	0	1	1	0	2	1	0	0	0	0	2	1	0							
Programme closure	5	0	1	9	9	0	9	9	14	11	0	5	5	4	0	10	10							
General enquiries	25	24	26	25	16	6	46	14	45	35	35	28	14	17	25	49	8							
Total	181	169	61	153	136	38	74	58	121	114	58	143	199	128	58	226	88	0	0	0	0	0	0	0

2016/17	2017/18	2018/19	2019/20
FYE	FYE	FYE	YTD
62	87	111	42
762	643	512	379
310	307	278	133
10	10	8	3
31	38	72	29
131	212	325	113
1,306	1,297	1,306	699

# **Fitness to Practise**

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### **Fitness to Practise: overview**

The following report is based on data up to the end of August 2019.

# New and open cases

- The total new concerns received this year continues to be higher than the previous year, with all five months of the year exceeding 200 new cases. The number of new cases is 14% higher than in the previous year, with Social Workers making the majority of the absolute numbers, and the increase. (See Table 1)
- The total open pre-ICP caseload has increased in the last quarter, and is now above the recent stable position of the 2000 mark, where it had remained for a year. This is dependent on the number of new cases received. July saw 274 new cases, the largest number received in one month since HCPC began. The majority of new cases continue to be Social Work, with 623 of the 1123 (55%) received. Despite this, it should also be noted that we are continuing to meet the KPI on having an average 45 cases per Case Manager in the Investigations stage of the process. (See Table 1)
- The total number of open post-ICP cases has continued to increase since the last performance report, from 372 to 410 cases. This is intended and planned for, as a result of increased activity at the ICP. We have concluded 509 cases at ICP in the last five months, which compares favourably with the 621 cases closed in the 12 months of 2018-19. It should be noted that the case to answer rate has dropped to 58%, as a result of the Threshold Policy implementation. Of the 410 open cases, 28% have a final hearing listed, 2% have a preliminary hearing listed, 33% are with scheduling and are being listed, and 37% are with our external legal suppliers. These proportions remain in line with our budget and planning assumptions.

# Length of time

- The median length of time from receipt for cases to reach an ICP decision has fluctuated through the last year, as we have successfully expedited older cases for consideration by ICP. An explanation of how we measure and project performance in this group of cases is included as part of the KPI narrative. (See Table 2)
- The median length of time for cases to reach the final hearing once referred by the ICP has started to show sustained improvement, following changes in scheduling and case preparation. We are now continually exceeding the performance required in the KPI. (See Table 3)
- The median length of time to conclude cases at hearing from receipt was 107 weeks. This figure is a composite of the two previous KPIs, and so is affected when older cases conclude. The KPI narrative explores the weighting of the oldest cases and the time period until they have passed through the process. Our current estimate is that the residual effect of the older, pre-ICP cases, even when combined with a shorter ICP to final hearing time, will continue to remain high beyond the transfer of social work cases to the end of the budget year. (See Table 4)

• Interim order cases progression fluctuates if there is new or significant information on a longstanding case. This can include conclusion of a criminal or employer investigation, on which we depend. With the exception of a very small number of occasions when this occurs, broadly the KPI is comfortably met. (See Table 5)

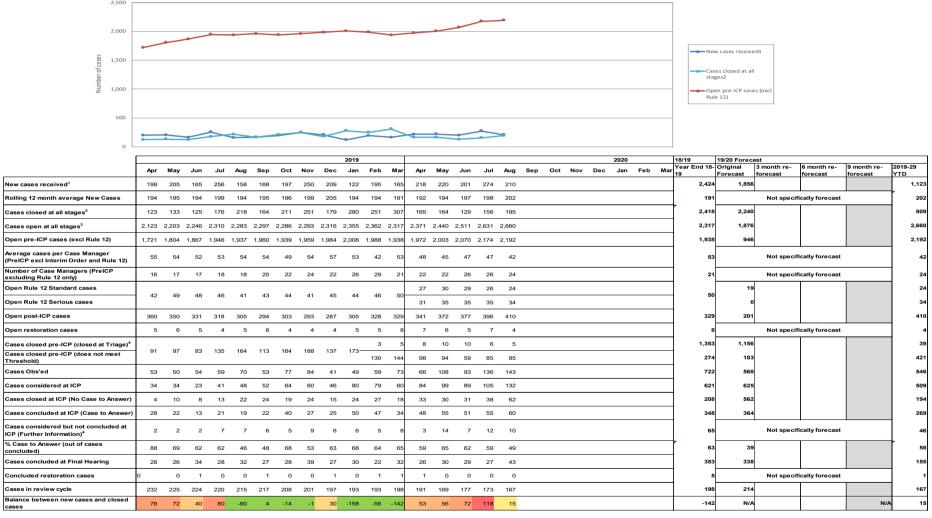
# Age of open cases

- On quarterly basis, the PSA monitors the number of open cases which are over 156 weeks old, over 104 weeks old and over 52 weeks old. Our target is to bring the number of cases over 156 weeks old to 14, over 104 weesk old to 80 and over 52 weeks to 378, the figures in 2014. Currently, non-Social Work cases broadly meet these levels (at the end of August, 25 were over 156 weeks, 107 over 104 weeks, and 334 over 52 weeks) meaning we are on track to deliver against PSA expectations after transfer of cases to Social Work England.
- Currently we have 53 cases which were over 156 weeks (broadly stable since May), 206 cases which were over 104 weeks (slightly up from 185 in May) and 646 cases which were over 52 weeks (broadly stable since May). There has been some fluctuations in these numbers across the year, as we focus on different parts of the process. Adjourned final hearings contribute the most to our oldest cases, with 21 such cases of which 17 have a future resuming date already agreed. Of the 53 oldest cases, 32 are in the post ICP stage, with 13 listed for a hearing, and the remainder being prepared or listed. (See Table 6)
- The number of total open pre-ICP cases had increased from 2003 in May to 2192 at the end of August, principly due to the number of new cases. Out of this number 77% were received in the last 12 months. 16 cases are older than 156 weeks, 81 cases are older than 104 weeks and 432 cases are older than 52 weeks. These proportions have not increased since the last update report. (See Table 1)
- The number of open post ICP cases reflects the higher volume of cases concluding at ICP, having risen to 410 from 372 in March. The case to answer at ICP remains around 58% (down from 63%), so our projections of postICP cases (and therefore hearing activity) remains in line with budget and staffing expectations. Out of this number the number of cases over 156 was 32 (8%), over 104 weeks was 119 (29%) and 209 (50%) over 52 weeks. All categories of cases are stable and within the expected tolerances. (See Table 3)

### **Challenges to Fitness to Practise Decisions**

• There have been four appeals against the 155 decisions of the Conduct and Competence or Health Committee, either from registrants, or PSA, since April 2019. This represents 2.5% of our activity. We continue to defend decisions where appropriate, or concede, based on legal advice. We have agreed to concede two appeals and return the cases to be heard by another panel. We are defending the other two. Lessons learned from case preparation, or from written decision-making by Panels, is used to inform HCPC team member or Partner training. (See Table 7)

Table 1
Fitness to Practise (FTP) Overview - All 16 professions



<sup>1</sup> includes only cases where the 'Created Date' is within the reporting month. This means those cases received at the end of the month and not yet logged on CMS will be picked up in the reporting for the following month

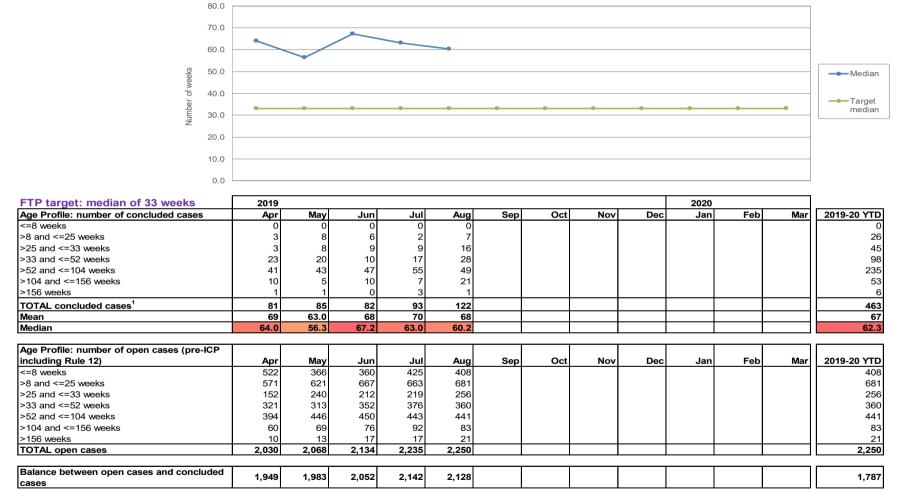
<sup>2</sup> Includes: Triage not met, Threshold not met, ICP no case to answer, and Cases concluded at FH.

<sup>3</sup> Includes Open pre-ICP, Open post-ICP, and open Rule 12 cases.

<sup>4</sup> From April 2019, includes MIS cases.

<sup>5</sup> Not specifically forecast; obtained by subtracting 'Cases concluded at ICP' from 'Cases considered at ICP'.

Table 2
Length of time from receipt to a decision by an ICP - All 16 professions



<sup>1</sup> Total concluded cases includes 'Case to Answer' and 'No Case to Answer'.

Table 3 Length of time from ICP to conclusion (Final Hearing) - All 16 professions

<=4 weeks

>156 weeks

Mean

Median

<=4 weeks

>156 weeks

cases

**Fitness to Practise Department** 

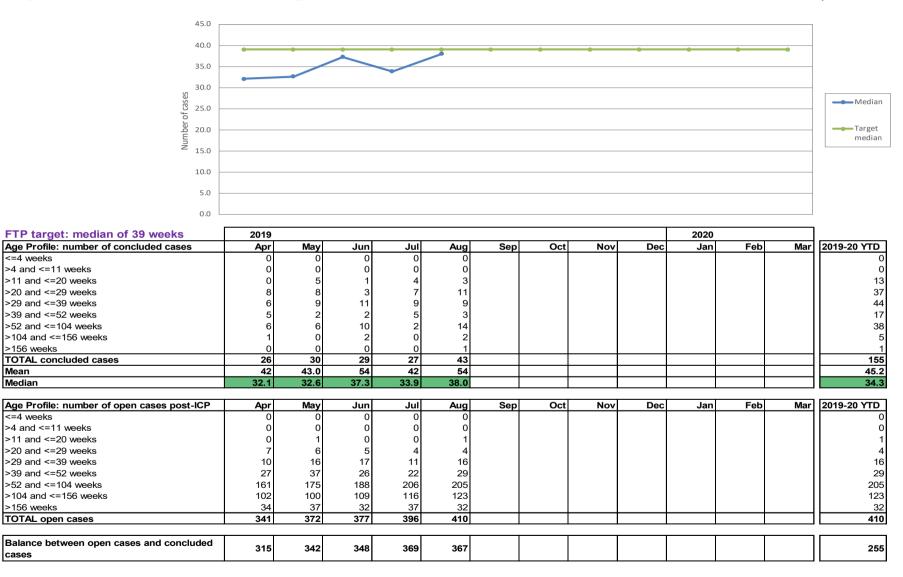


Table 4
Length of time from receipt to conclusion (Final Hearing) - All 16 professions

Fitness to Practise Department

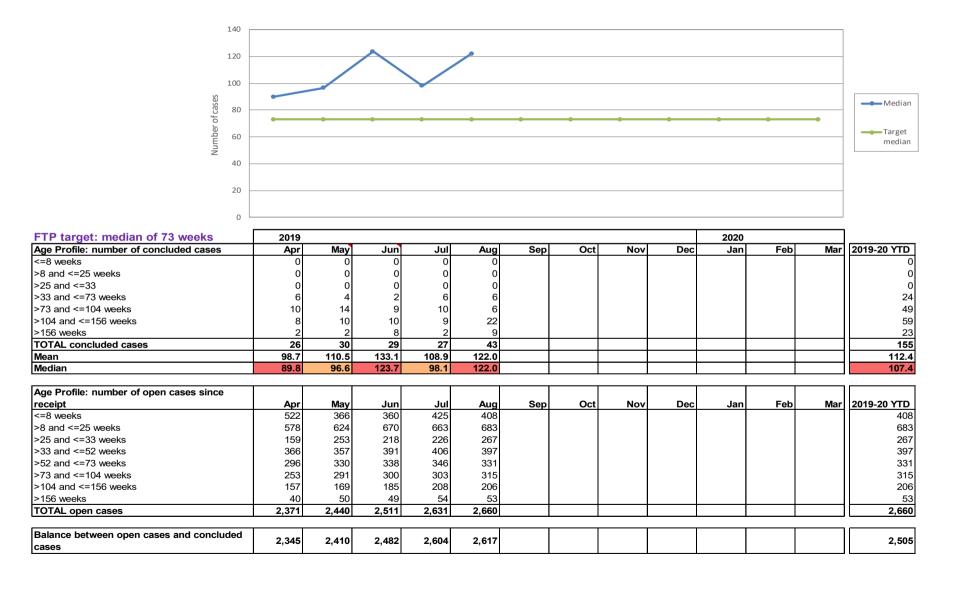


Table 5
Interim Orders breakdown - All 16 professions

40 - 30 - 30 - 30 - 30 - 30 - 30 - 30 -			<u> </u>						<b>\</b>	\/ ^		\ -				/	<u></u>								D A	pplication	to Apply on4 veeks Rec		
	2018									2019		[										2020			16/17	17/18			19/20
Applications considered	<b>Apr</b> 17	<b>May</b> 19	Jun 18	Jul 20	Aug 18	Sep 6	Oct 13	Nov 23	Dec 8	Jan 6	Feb 9	Mar 7	Apr 9	<b>May</b> 13	Jun 8	Jul 20	<b>Aug</b> 15		Oct	Nov	Dec	Jan	Feb	Mar	FYE 142	FYE	FYE	164	YTD 65
Applications adjourned	1 1	3	10	1	4	1	2	3	0	0	1	0	0	1	0	3	1							ŀ	Not rep	1		17	5
Applications granted	13	14	14	15	8	4	2	18	6	5	8	8	7	10	6	12	12								128		141	121	47
Applications not granted	3	2	3	4	6	1	3	2	2	1	0	3	2	2	2	5	2								14		23	30	13
Interim Orders reviewed (IORs)	18		26	19	35	26	32	46	27	37	28	a	21	21	25	15	14								317		340	329	96
Interim Orders reviewed on paper (IOPs)	10	20	20	10		Not repor		70	2,	07	20				20	10		ot report	ed on					ļ		1	rted on	020	. 0
Interim Orders revoked	1	4	2	1	3	00 TOPON	3	3	1	3	2	0	1	3	1	0	1	orroport	cu on						,	el R	7	23	6
IOs sent to BDB to request High Court extension <sup>1</sup>	4	6	8	4	3	5	3	3	5	10	8	12	2	6	8	9	2								23	3	44	71	27
Interim Order not imposed at Final Hearing <sup>2</sup>	1	0	1	1	0	0	0	0	0	1	0	0	1	1	0	2	0									1	9	4	4
Mean weeks Receipt - Application <sup>3</sup>	23	30	29	22	16	52	27	22	32	19	40	40	14	21	20	20	34								29	9	24	24	32
Median weeks Receipt - Application <sup>4</sup>	16	17	19	14	13	41	16	18	23	13	35	35	11	11	14	14	19							Î	22	2	14	15	15
Mean weeks Decision to Apply - Application <sup>3</sup>	5	5	5	5	4	6	6	5	2	5	3	3	3	3	3	3	3								:	3	4	5	3
Median weeks Decision to Apply - Application⁴	4	3	4	4	4	6	6	5	2	4	3	3	2	2	3	3	3								;	3	3	4	2

<sup>1</sup> This is the number of cases we send to DBD, regardless of whether they go to High Court or not - the latter number is not available.

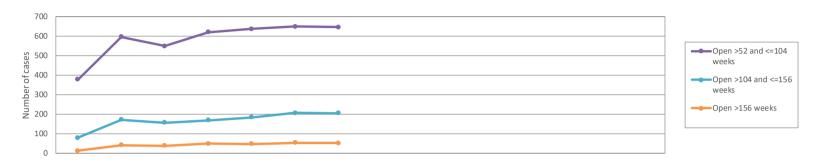
<sup>2</sup> Covers appeal period.

<sup>3</sup> From 2017/18, the mean is calculated on year-to-date data, and is not the mean of monthly means.

<sup>4</sup> From 2017/18, the median is calculated on year-to-date data, and is not the mean of monthly medians.

Table 6

Key PSA measures - All 16 professions



	2019									2020								19/20
	Target	Mar-19	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	16/17	17/18	18/19	YTD
New cases received		165	218	220	201	274	210								2,259	2,302	316	1,123
Total open cases (pre- and post-																		
ICP, incl Rule 12)		2,317	2,371	2,440	2,511	2,631	2,660								1,491	2,060	1,212	2,660
Open >52 and <=104 weeks	378	596	549	621	638	649	646								Not previ	ously	294	646
Open >104 and <=156 weeks	80	172	157	169	185	208	206								reported	in this	103	206
Open >156 weeks	14	42	40	50	49	54	53								way		15	53
Open pre-ICP		1,988	2,030	2,068	2,134	2,235	2,250								1,027	1,690	1,063	2,250
Open post-ICP		329	341	372	377	396	410								464	370	149	410

PSA monitors quarterly cases that have been open for longer than 52 weeks, longer than 104 weeks, and longer than 156 weeks.

Table 7

Number of court appeals received against fitness to practise decisions

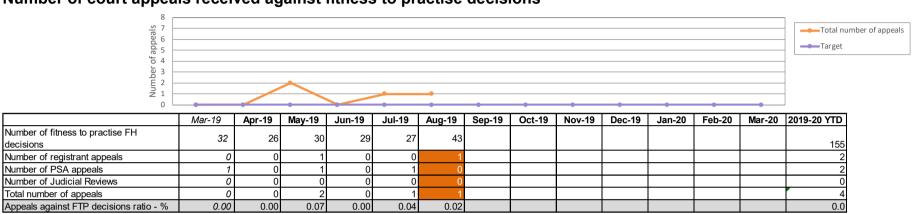
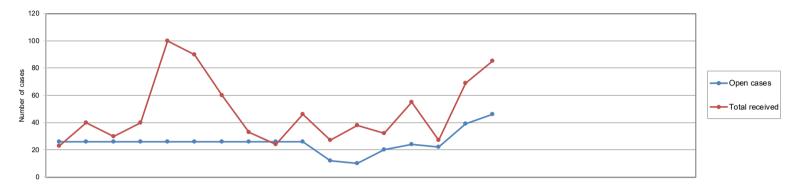
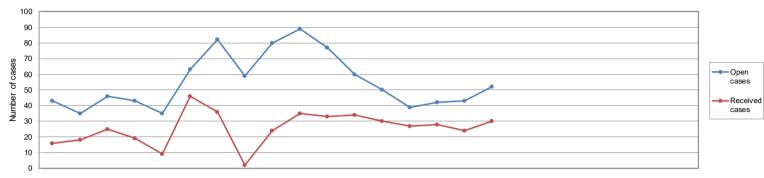


Table 8
Health and Character Declarations - All 16 professions



		2018									2019												2020			16/17		17/18	18/19	19/20
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		FYE	FYE	FYE	YTD
-	Renewal	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0									109	11	1	0
Received	Readmission	4	9	9	1	3	2	2	5	4	17	10	5	10	12	7	13	8									101	61	71	50
l s	Admission	19	30	21	39	97	88	58	28	20	29	17	33	22	43	20	56	77									499	567	479	218
<u>"</u>	Self-referral	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0									1	0	C	0
	Total received	23	40	30	40	100	90	60	33	24	46	27	38	32	55	27	69	85											551	268
	Admission accepted administratively	23	28	26	14	27	65	58	46	21	47	24	22	18	40	18	38	55									285	507	401	169
	Considered by panel	5	11	12	5	14	17	31	20	15	14	11	22	17	12	14	16	14									127	138	177	73
	Referred to FTP	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0									1	0	C	0
	Admission rejected by panel	0	1	3	0	0	0	2	1	1	1	0	1	0	0	0	0	1									11	7	10	1
ped	Readmission rejected by panel	0	2	1	2	0	0	0	0	0	0	0	1	3	1	0	0	0									1	7	6	6 4
Considered	Renewal rejected by panel	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0									0	0	C	2
	Not referred to FTP	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0									0	1	C	0
	Admission accepted by panel	5	4	6	1	12	15	27	15	11	7	14	14	10	8	11	14	8									126	88	131	51
	Readmission accepted	1	4	2	2	2	2	2	4	3	6	7	6	4	3	3	0	5									17	24	41	15
	Renewal accepted	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0									10	7	C	0
	Open cases	26	26	26	26	26	26	26	26	26	26	12	10	20	24	22	39	46											10	46

Table 9
Protection of Title - All 16 professions



	2018									2019												2020		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Public	8	10	12	9	4	21	12	1	9	11	16	17	16	16	17	7	12							
Police	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0							
HCPC Registrant / Internal	6	5	10	4	3	12	16	1	10	18	11	12	10	9	8	13	12							
Anonymous	0	0	0	1	0	2	0	0	0	0	1	0	1	1	1	2	3							
Professional body	2	3	3	5	2	11	6	0	5	6	4	3	2	0	0	2	1							
Other	0	0	0	0	0	0	2	0	0	0	1	1	1	1	2	0	2							
Received cases	16	18	25	19	9	46	36	2	24	35	33	34	30	27	28	24	30							
Open cases	43	35	46	43	35	63	82	59	80	89	77	60	50	39	42	43	52							

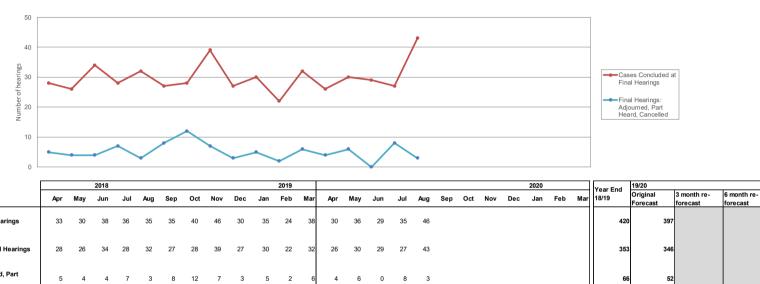
15/16	16/17	17/18	18/19	19/20
FYE	FYE	FYE	FYE	YTD
135	94	107	130	68
2	0	2	1	(
18	57	76	108	52
14	20	4	4	8
112	51	32	50	
43	14	3	4	6
324	236	224	297	139
			60	52

Table 10
Hearings Management Information Summary - All 16 professions

Fitness to Practise Department

9 month re-

YTD Total



# Registration

# Page number

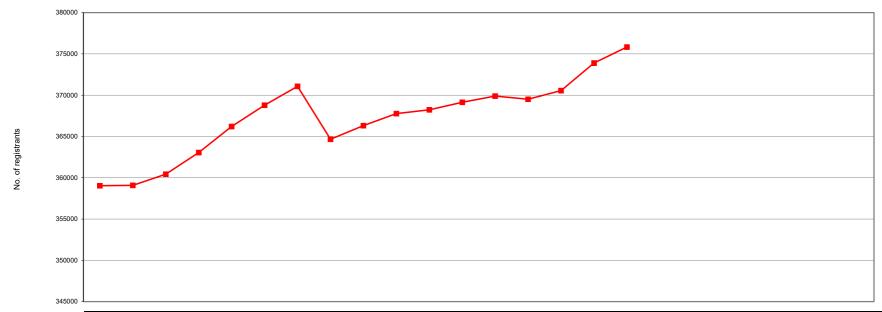
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# Registration: overview

- This section provides an update about the work of the Registration Department from June to August 2019. All of the
  department's service standards were consistently achieved for the period with the exception of answering UK telephone calls
  and emails.
- A total of 41,402 UK telephone calls were received which is 9,149 (or 28.4%) more than compared to the same period in 2017 and an average of 81% of UK telephone calls were answered. The shortage of fully trained Registration Advisors attributed to this service standard not being met as well as actively prioritising available resource to fulfil the department's regulatory functions of registering new applicants and managing continuing professional development audits.
- A total of 15,218 UK emails were received which is 3,956 (or 35.1%) more than the same period in 2017. All emails were answered within an average of 4 working days. The shortage of fully trained Registration Advisors attributed to this service standard not being met.
- A total of 6,402 international emails were received which is 223 (or 3.4%) less than the same period last year. All emails were answered within an average of 5 working days. As above, the shortage of fully trained Registration Advisors attributed to this service standard not being met.
- A total of 1,135 international applications were received which is 32 (or 2.9%) more than compared to the same period last year. For the period from June to August 2019 the key performance indicator was met.
- Recruitment campaigns are being held frequently to ensure vacancies are filled as quickly as possible. Three assessment
  days were held during June to August 2019 and 4 vacant Registration Advisor positions were filled. A recruitment campaign
  is currently underway for 3 vacant Registration Advisor positions. A 6 month multi-skilling training programme for all new
  recruits is being delivered.

#### Number of Registrants by Profession April 2018 - March 2020

#### Registration Department





	2018									2019												2020		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Arts therapists	4,328	3,999	4,073	4,110	4,230	4,291	4,345	4,363	4,380	4,416	4,422	4,432	4,444	4,438	4,452	4,496	4,569							
Bio. scientists	22,491	22,519	22,603	22,693	22,835	22,928	22,990	22,980	23,084	23,194	23,222	23,284	23,328	23,343	23,399	23,526	23,658							
Chirops/ pods	13,101	13,059	13,090	13,206	12,775	12,824	12,845	12,842	12,846	12,826	12,825	12,833	12,828	12,831	12,842	12,962	13,031							
CI scientists	5,854	5,873	5,902	5,917	5,934	5,947	6,052	6,123	6,156	6,183	6,194	6,207	6,232	6,252	6,263	6,261	6,262							
Dietitians	9,611	9,596	9,620	9,381	9,556	9,611	9,648	9,662	9,666	9,685	9,704	9,722	9,738	9,735	9,756	9,924	10,049							
Hearing aid disps	2,927	2,934	2,948	2,962	2,851	2,901	2,936	2,962	2,988	3,010	3,025	3,047	3,063	3,079	3,089	3,117	3,165							
OTs	38,212	38,283	38,370	38,687	39,200	39,440	39,544	39,669	39,750	39,837	39,873	39,925	39,886	39,946	40,001	40,328	40,751							
ODPs	13,657	13,635	13,655	13,731	13,850	14,103	14,173	13,731	13,823	13,877	13,884	13,903	13,913	13,906	13,925	13,975	14,048							
Orthoptists	1,442	1,442	1,445	1,461	1,482	1,489	1,497	1,495	1,493	1,490	1,494	1,496	1,495	1,496	1,496	1,508	1,431							
Paramedics	25,637	25,790	25,856	26,021	26,270	26,699	27,101	27,210	27,374	27,405	27,483	27,686	27,826	27,941	27,972	28,212	27,415							
Physiotherapists	52,440	52,955	53,301	54,009	54,696	54,986	55,125	55,293	55,401	55,514	55,560	55,695	55,671	55,865	56,037	56,774	57,336							
Pract psychs	23,156	23,182	23,237	23,305	23,407	23,584	23,923	24,074	24,151	24,233	24,265	24,290	24,340	23,232	23,482	23,692	23,786							
Prosth/orthotists	1,055	1,056	1,071	1,086	1,095	1,096	1,099	1,098	1,099	1,101	1,100	1,101	1,108	1,109	1,112	1,130	1,139							
Radiographers	32,578	32,662	32,897	33,511	33,888	34,112	34,240	34,286	34,358	34,292	34,329	34,470	34,543	34,619	34,778	35,400	35,719							
Social workers	96,571	96,108	96,350	96,842	97,844	98,419	99,081	92,365	93,206	94,126	94,246	94,453	94,845	95,074	95,294	95,854	96,618							
SLTs	15,977	15,988	16,013	16,133	16,295	16,353	16,470	16,505	16,529	16,581	16,596	16,595	16,637	16,650	16,657	16,747	16,853							
Total	359,037	359,081	360,431	363,055	366,208	368,783	371,069	364,658	366,304	367,770	368,222	369,139	369,897	369,516	370,555	373,906	375,830						<u> </u>	

Ī	16/17	17/18	18/19	19/20
	FYE	FYE	FYE	YTD
	4,026	4,322	4,432	4,569
	22,902	22,395	23,284	23,658
	12,931	13,115	12,833	13,031
	5,663	5,818	6,207	6,262
	9,107	9,585	9,722	10,049
	2,593	2,908	3,047	3,165
	38,080	38,183	39,925	40,751
	13,052	13,639	13,903	14,048
	1,451	1,440	1,496	1,431
	23,992	25,465	27,686	27,415
	52,915	55,132	55,695	57,336
	22,604	23,104	24,290	23,786
	1,063	1,051	1,101	1,139
	32,072	32,475	34,470	35,719
	91,944	96,497	94,453	96,618
	15,935	15,932	16,595	16,853
	350,330	361,061	369,139	375,830

NOTE: Information captured on the last day of each calendar month.

# 

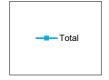


	2018									2019												2020		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
International	267	412	322	379	377	283	196	197	246	274	198	305	318	425	335	457	245							
uĸ	635	502	831	2,556	3,599	2,465	2,610	1,093	946	728	559	721	892	779	493	3,058	3,086							
Total	902	914	1,153	2,935	3,976	2,748	2,806	1,290	1,192	1,002	757	1,026	1,210	1,204	828	3,515	3,331							

16/17	17/18	18/19	19/20
FYE	FYE	FYE	YTD
3,905	3,344	3,456	1,780
16,190	16,950	17,245	8,308
20,095	20,294	20,701	10,088

#### Registration Appeals Received April 2018 - March 2020





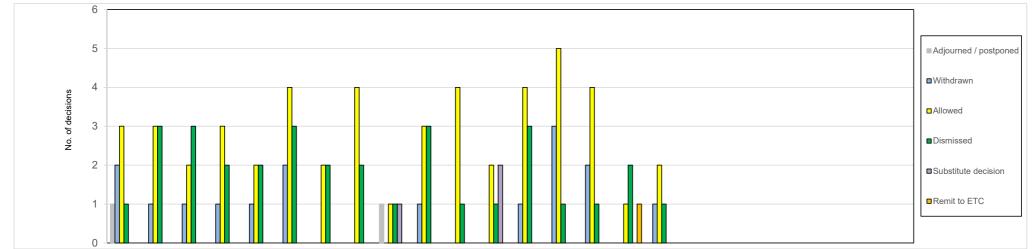
	2018									2019												2020		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
EMR (1)	2	1	1	1	2	0	2	3	0	0	0	1	2	1	2	1	0							
Non-EMR (2)	4	4	2	4	2	3	5	3	6	5	5	0	4	1	2	1	3							
Visitors (3)	0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
UK (4)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
Returners to practice																								
(5)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
CPD (6)	2	0	0	3	1	0	0	2	0	0	0	3	1	0	0	0	1							
Health and Character																								
declarations (7)	2	2	2	0	1	0	1	0	1	1	1	0	0	0	1	0	2							
Total	10	7	5	8	6	3	8	8	7	6	6	4	7	2	5	2	6							

16/17	17/18	18/19	19/20
FYE	FYE	FYE	YTD
28	22	13	6
15	19	43	11
2	1	0	0
1	0	0	0
1	0	0	0
0	13	11	2
9	8	11	3
56	63	78	22

- 1 International applications with European Mutual Recognition (EMR) rights.
- 2 International applications without EMR rights.
- 3 Delcarations to be on the Register of visiting health professionals.
- 4 UK applications for registration.
- **5** Applications for readmission to the Register.
- 6 Continuing Professional Development profiles.
- 7 Any application where a positive declaration has been made by the applicant for health and character.



### Registration Department



	2018									2019												2020		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Adjourned /	1	0	0	0	0	0	0	0	-1	0	0	0	0	0	0	0	1							
postponed	'	U	0	U	U	U	U	U		U	U	0	U	U	U	U	'							
Withdrawn	2	1	1	1	1	2	0	0	0	1	0	0	1	3	2	0	1							
Allowed	3	3	2	3	2	4	2	4	1	3	4	2	4	5	4	1	2							
Dismissed	1	3	3	2	2	3	2	2	1	3	1	1	3	1	1	2	1							
Substitute decision	0	0	0	0	0	0	0	0	1	0	0	2	0	0	0	0	0							
Remit to ETC	0	0	0	0	0	0	0				0	0	0	0	0	1	0							
Hearings held	5	6	5	5	4	7	4	6	4	6	5	5	7	6	5	4	4							

16/17	17/18	18/19	19/20
FYE	FYE	FYE	YTD
0	3	2	1
16	0	9	7
9	25	33	16
32	25	24	8
2	2	3	0
5	1	0	1
48	56	62	26

# **Human Resources and Partners**

# Page number

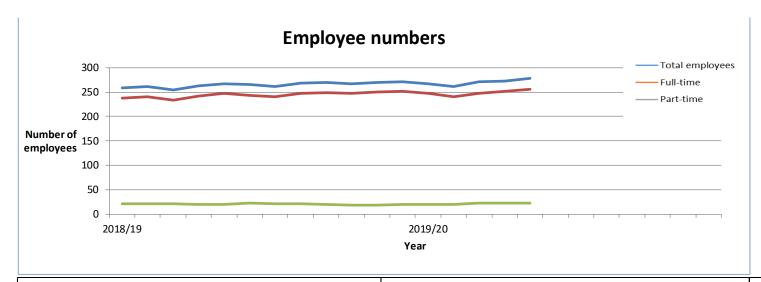
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#### **Human Resources and Partners: Overview**

- Recruitment: There is currently a recruitment freeze in order to stabilise the establishment in preparation for post SWE.
- **Organisational Change**: Interim Director of HR and HR Business Partners are currently working with all budget holders to plan for organisational change.
- **Equality and diversity:** A Live Bias Review Session has taken place on Monday 17 June. This has been a cross-departmental initiative with managers from HR, FTP and Registration involved. There is a follow-up session on 6 September 2019.
- **Learning and development**: On 17 September 2019, a 'managing for change' workshop will be delivered for HR Managers, OMT, SMT and Employee Forum reps. The training will be delivered by an external company called Impact Factory. The purpose of the workshop is to provide impetus to our current change work i.e. managing in the change context that we are in, dealing with sensitive issues and possibly resistance to change and ways of working in areas, encouraging employee engagement and remembering the positives to change whilst ensuring business as usual activity and productivity is sustained.
- **ELearning:** An HR Induction programme is underway which will be sent out to all new employees prior to their start date. This is an opportunity to engage with new employees prior to them joining the HCPC.

#### Partners:

- Multiple recruitment campaigns for Visitors and FTP panel members
- ➤ Roll-out of eLearning Sanction policy (completed), Visitor eLearning training (completed) and Info Sec training (scheduled); multiple training events for Registration assessors in planning across the UK (early 2020)
- Partner portal upgrade project initiated

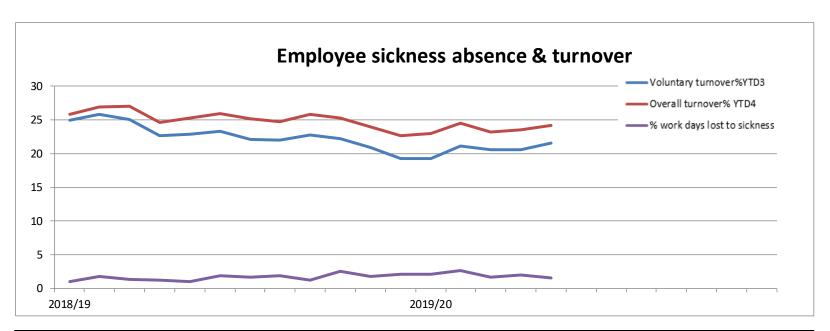


	2018/19												2019/20										17/18	18/19	19/20		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	FYE	FYE	YTD
Budgetted employees																											
Budgeted permanent	261	262	262	266	267	266	265	265	266	266	266	267	251	251	251	251	251	251	251	251	251	251	251	251	285	267	251
Budgeted fixed term	20	20	18	16	16	16	16	16	16	16	16	15	43	43	43	43	43	43	43	43	0	0	0	0		15	43
Total employees	258	261	254	263	267	265	261	268	269	267	269	271	267	261	271	273	278								248	271	278
Full-time	237	240	233	242	247	243	240	247	249	248	250	251	247	241	248	251	256								227	251	256
Part-time	21	21	21	20	20	22	21	21	20	19	19	20	20	20	23	22	22								21	20	22
Flexible working*	76	68	66	70	82	74	74	74	74	72	72	78	77	74	75	75	75								74	78	75
FTE*	252	254	248	248	262	259	256	262	264	262	264	266	261	270	262	265	270								242	266	270
Permanent	211	210	206	212	218	216	214	213	210	208	209	206	205	201	208	213	213								202	206	213
Maternity/paternity leave	9	7	6	6	6	10	6	6	4	1	3	4	5	5	7	6	10								11	4	10
Unpaid Sabbaticals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1								0	0	1
Fixed-Term Contracts	47	51	48	55	49	49	47	55	60	59	60	65	63	60	64	61	66								46	65	66
Starters (permanent)	9	3	2	2	0	2	2	1	1	3	2	1	0	7	5	6	10								17	28	10
Starters (fixed-term)	4	3	5	5	1	2	0	2	6	3	1	2	6	7	2	1	1								33	12	1
Vacancies	23	21	26	19	16	17	20	13	13	15	13	11	27	33	23	21	16								37	11	16

\*Flexible working Includes flexible working arrangements separate or in conjunction with part time working

\*FTE Full-time equivalent, includes maternity/paternity but does not include unpaid sabbaticals

YTD Year to Date
FYE Final Year End



	2018/19											2019/20												17/18	18/19	19/20	
	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	FYE	FYE	YTD
Voluntary resignations <sup>1</sup>	5	3	5	5	5	4	2	3	6	7	2	4	5	8	4	5	8								56	51	8
Compulsory leavers <sup>2</sup>	0	2	3	0	1	1	1	0	1	0	0	1	1	1	0	1	0								5	10	0
Total leavers (vol. & comp.)	5	5	7	5	6	5	3	3	7	7	2	5	6	9	4	6	8								70	60	8
Voluntary turnover%YTD <sup>3</sup>	25	26	25	23	23	23	22	22	23	22	21	19	19	21	21	21	22								25	22	22
Overall turnover% YTD4	26	27	27	25	25	26	25	25	26	25	24	23	23	25	23	24	24								27	26	24
Agency days	697	600	419	499	549	531	692	767	420	581	737	741	662	581	538	645	592								5489	7233	592
% work days lost to sickness	1	2	1	1	1	2	2	2	1	3	2	2	2	3	2	2	2								2	2	2
Average sick-days YTD	6	5	5	5	5	5	5	5	5	4	5	5	5	5	5	6	6								8	5	6
Sick-days	62	102	76	71	60	109	98	114	75	154	106	125	128	153	98	124	94								1533	1152	94
Occ. Health Referrals	1	2	2	1	1	1	0	1	0	1	0	8	2	6	2	6	5								46	18	5

<sup>1</sup> Voluntary Resignations: Includes resignations of permanent employees, or resignations of fixed term employees prior to the end of their contract

<sup>2</sup> Compulsory Leavers: Records leavers except for resignations. Includes expiries of fixed term contracts, redundancies, dismissals,

<sup>3</sup> Voluntary Turnover YTD: Shows the year to date turnover percentage (last twelve months) for resignations only

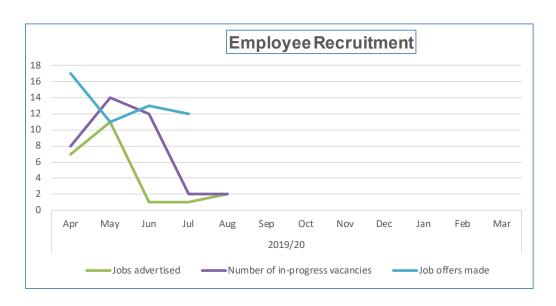
<sup>4</sup> Overall Turnover:

Shows the year to date turnover (last twelve months) for all leavers - voluntary and compulsory

FTE Full-time equivalent

YTD Year to Date

FYE Final Year End



		2018/19											2019/20											
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Staff requests received (approved)	7	19	12	17	11	22	10	16	9	15	4	19	2	12	11	1	7							
Staff requests raised (to be approved)	0	6	3	11	0	4	8	0	0	0	2	0	3	9	3	14	5							
Jobs advertised	3	6	11	16	5	4	9	3	6	9	4	8	7	11	1	1	2							
Number of in-progress vacancies	3	7	10	21	16	11	14	13	7	16	12	11	8	14	12	2	2							
Job offers made	3	15	5	21	10	12	12	5	17	2	8	6	17	11	13	12								
Offers made to external candidates	2	10	12	15	9	7	9	4	9	2	6	9	15	9	9	12								
Offers made to internal candidates	1	1	2	6	1	5	3	1	9	1	2	0	2	2	4	0								



#### Partner turnover

		2018											2019										18/19	19/20		
	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	FYE	YTD
Voluntary Resignations	3	8	0	13	1	3	4	7	5	6	1	3	3	4	1	8	2								54	18
8-year rule*	0	0	0	0	0	3	0	10	0	0	0	9	0	6	0	0									22	6
Terminations**	1	0	0	0	0	0	0	0	0	1	0	0	0	0	1	1	2								2	4
Total Leavers (Vol & Comp)	4	8	0	13	1	6	4	17	5	7	1	12	3	10	2	9	4								78	28
Partners	700	692	707	708	694	696	723	706	701	700	707	708	707	699	708	699	695								704	702
Voluntary Turnover%**	3%	5%	4%	6%	6%	6%	6%	7%	8%	8%	8%	8%	8%	7%	7%	7%	7%								8%	3%
Overall Turnover%	8%	8%	7%	7%	7%	7%	7%	10%	10%	11%	10%	11%	11%	11%	11%	11%	11%								11%	4%

<sup>\*</sup>Including failed renew al assessment

Turnover information does not capture those Partners who move from one role to another or those who leave one role and remain in another YTD = Year to date

<sup>\*\*</sup> Termination incl. temp contract

# **Quality Assurance**

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# **Quality Assurance Department – overview**

# Workplan progress

- 1.1 Progress against activities in the departmental workplan is on schedule. In this period the focus has been on the following areas.
  - Delivering change in relation to BPI function transfer to Governance
  - Review and development of organisation-wide auditing
  - Development and delivering complaints training to key departments
  - Input into the internal audit on the Quality Assurance function

The workplan has been updated where required to reflect the pieces of work in relation to the internal audit recommendations.

#### **Audit schedules**

1.2 The regulatory department audits are progressing according to the 2019-20 audit schedule determined at the start of the financial year. All quarter one audits have been completed, and all quarter two audits have commenced or completed their scoping activities as per the schedule.

Audit	Rationale	Outcomes
Registration International and European	The audit was carried out to provide	The audit found that the process is working well - accurate
Mutual Recognition (EMR) Assessment	assurance to the Registration Department	assessment decisions are being sent to applicants.
Decisions	regarding the operation of the process and	
	to identify any areas for improvement.	Four recommendations were made which will improve clarity in the
Audit to determine whether the process is being		process guidance and tools utilised, identify ways to improve
followed to the required standard, and in line with	Relates to PSA Standards of Good	processing times and correct any application issues identified.
published guidance.	Regulation Registration Standards 1 & 2.	
Registration Appeals	The audit was carried out to provide	The audit found that the process is working well – process
	assurance to the Registration Department	timescales are being met and clear records are maintained
Audit to determine whether the process is being	regarding the operation of the process and	throughout the process.
followed to the required standard, and in line with	to identify any areas for improvement.	
published guidance.		Two recommendations were made which will improve clarity in the
	Relates to PSA Standards of Good	process guidance, ensure redaction errors / bundle checks are
	Regulation Registration Standard 2.	addressed and correct any case issues identified.

FTP Non-FTP Cases	The audit was carried out to provide	The audit found that the process is working well – DEC and POT
1 11 14011-1 11 0a3e3	assurance to the FTP Department	cases are achieving the right outcomes and reasons for decisions
Audit of Protection of Title / Function (POT) and	regarding the decisions being made and to	are generally clearly recorded in both cases.
Health and Character Declaration (DEC) cases to	identify any areas for improvement.	are generally electry recorded in both eases.
determine whether decisions are being made in	dentity any areas for improvement.	Two recommendations were made which will improve clarity in the
line with respective policies and guidance, and	Relates to PSA Standards of Good	process guidance and tools utilised as part of the process and
concerns about registrants / applicants are being	Regulation Registration Standards 1 & 5.	ensure that FTP staff continue to receive support to ensure
dealt with appropriately.	rtogalation rtogistration standards r & c.	consistency in applying policy and guidance in POT cases prior to
doubt with appropriatory.		closure, and ensuring greater clarity regarding approvals in DEC
		cases.
FTP Final Hearing Decision	The audit was carried out to provide	The audit found that Practice Committees are consistently making
<b>3</b>	assurance to the FTP Department that	clearly reasoned, well documented decisions and are consistently
Audit to assess the quality of Final Hearing	written decisions are clear and consistent	applying the relevant guidance.
decisions made and recorded by the HCPC's	and followed recently implemented	11,7,3
Practice Committees.	updates to processes and guidance.	Given the audit findings, there were no recommendations made.
		The FTP Department has been encouraged to share the findings of
	Relates to PSA Standards of Good	the audit with the relevant HCPC partners.
	Regulation FTP Standards 5, 8 & 9.	·
FTP Threshold (2018-19)	The audit was carried out immediately	The audit found that decisions were consistently being made in line
	after the implementation of the new	with the new policy and clearly recorded at both decision points, the
Audit to assess the quality of decisions made	Threshold policy. This was to provide	Triage stage and the Threshold stage. In most cases decisions were
under the Threshold policy.	initial feedback to the FTP Department on	being clearly communicated. The findings were encouraging in that
	whether decisions are being made in line	they offer assurances that the implementation of the Threshold
	with the policy, are clearly communicated	policy is addressing PSA concerns with the previous policy
	to relevant parties and if the process is	(Standard of Acceptance).
	being followed.	
		Two recommendations were made which will improve clarity in the
	Relates to PSA Standards of Good	process guidance and tools utilised as part of the process and
	Regulation FTP Standards 1, 3, 4, 5, 6 &	improve the recording and communicating of decisions.
	8.	
Education programme records (October 2017	Two audits were carried out to provide	The audits found that actions taken by the Education Department to
– January 2019)	assurance to the Education Department	ensure programme records are accurately maintained have been
Discount of the facility of	that information on programme records is	effective and changes in relation to this in operational processes
Biannual audits to check the accuracy and	correct and programmes were created,	have been embedded successfully.
correct status of education programme records.	updated or closed based on information	
	submitted by education providers.	Two recommendations were made which will improve clarity in the
	Deletes to DCA Standards of Cond	process guidance and correct any programme record issues
	Relates to PSA Standards of Good	identified.
	Regulation Education Standard 4.	

<b>Education Major Change Process an</b>	d
Decisions	

Audit to determine whether the process is being followed to the required standard, in line with published guidance and decisions are clearly recorded and communicated.

To provide assurance to the Education Department regarding the operation of the process, whether decisions are being made in line with the process and are clearly communicated to relevant parties, and to identify any areas for improvement.

Relates to PSA Standards of Good Regulation Education Standards 2 & 4.

The audit found that the process is working well - decisions are clear, well-reasoned and are communicated clearly to education providers.

Four recommendations were made which will improve clarity in the process guidance and correct any case issues identified.

Ongoing audits	Rationale
Education Approval Process  Audit to determine whether the process is being followed to the required standard, and in line with published guidance.	To provide assurance to the Education Department regarding the operation of the process, and to identify any areas for improvement.  Relates to PSA Standards of Good Regulation Education Standards 2 & 4
Education Programme Records (February – July 2019) Biannual audit to check the accuracy and correct status of education programme records.	To provide ongoing assurance to the Education Department that information on programme records is correct and programmes have been created, updated or closed based on information submitted by education providers.  Relates to PSA Standards of Good Regulation Education Standard 4
FTP Investigation Committee Panel (ICP) Decisions Audit to assess the quality of written decisions, and the impact of recent changes to the process.	To provide ongoing assurance to the FTP Department regarding the operation of the process, the quality of decisions, and to assess the potential impact of changes to the process in the introduction of ICP-specific Chairs and the introduction of a Fast Track process.  Relates to PSA Standards of Good Regulation FTP Standards 3, 5, 7 & 8.
FTP Threshold (2019 - 20) Audit to assess the quality of decisions made under the Threshold policy.	To provide assurance to the FTP Department on whether decisions are being made in line with the policy, are clearly communicated to relevant parties and if the process is being followed.  Relates to PSA Standards of Good Regulation FTP Standards 1, 3, 4, 5, 6 & 8.
Registration CPD Assessment Decisions Audit to focus on the quality of written decisions by CPD assessors, that decisions are processed in line with published guidance and communicated to registrants.	To provide assurance to the Registration Department on whether decisions are being made in line with the policy, are clearly communicated to relevant parties and if the process is being followed.  Relates to PSA Standards of Good Regulation Registration Standards 1 & 6.