

---

Chief Executive's report on organisational performance September 2021

---

Executive Summary

This paper provides the Council with updates on the organisation's performance since the July 2021 Council meeting. It includes specific projects and activities for the Council to note, stakeholder engagement activity, an update on Covid temporary registration and assessment of performance.

---

Previous consideration	This is a standing item, considered at each Council meeting.
------------------------	--

---

Purpose of report	The Council is asked to discuss the paper and provide any feedback on future format and information to be included.
-------------------	---

---

Next steps	The next report will be received in November 2021.
------------	--

---

Strategic priority	This report is relevant to all strategic priorities.
--------------------	--

---

Financial and resource implications	None as a result of this paper.
-------------------------------------	---------------------------------

---

Author	John Barwick, Chief Executive and Registrar <a href="mailto:john.barwick@hcpc-uk.org">john.barwick@hcpc-uk.org</a>
--------	---

---

## Chief Executive's Performance Report

**September 2021**

### *Contents*

1. [Chief Executive's organisational assessment](#)
2. [Chief Executive's agenda overview – 22 September 2021](#)
3. [Stakeholder engagement](#)
4. [Regulatory development](#)
  - 4.1 [Regulatory reform](#)
  - 4.2 [PSA performance review 2020-21](#)
  - 4.3 [Education quality assurance model](#)
  - 4.4 [Registration responsiveness](#)
  - 4.5 [Standards of proficiency](#)
  - 4.6 [Guidance](#)
  - 4.7 [Equality diversity and inclusion](#)
  - 4.8 [Inquiries, consultations and external reports](#)
5. [Covid response](#)
  - 5.1 [Temporary Register](#)
  - 5.2 [Remote hearings](#)
6. [Organisational development](#)
  - 6.1 [Corporate Plan 2021-22](#)
  - 6.2 [People Strategy](#)
  - 6.3 [Wellbeing](#)
  - 6.4 [Customer focus](#)
  - 6.5 [New ways of working](#)
  - 6.6 [Estates](#)
  - 6.7 [Finance](#)
  - 6.8 [Digital Transformation](#)
  - 6.9 [Executive Leadership Team](#)
7. *Appendices*
  - A - [Chief Executive meeting list](#)
  - B - [KPI dashboard & performance data](#)
  - C - [Corporate Plan status report](#)
  - D - [Strategic Risk Register](#)

## 1. Chief Executive's Organisational Assessment

Much of the Executive's focus since my last report has been on addressing the responsiveness of the Registration function and stabilisation of the finance function including the resolution of the income reporting issues that have been crystallised following the implementation of the new registration system and finance module.

The responsiveness of the Registration function continues to be an area of concern and this report outlines the actions we have taken to improve responsiveness and service times. The Executive Leadership team (ELT) is closely monitoring performance and is seeing an improvement in performance resulting from the allocation of additional resource and other interventions. What recent experience reinforces is the importance of continuing with our digital transformation work and moving all of our processes online and introducing greater automation. I'm pleased to report that the project to enable applications to be made online has now been initiated.

The stabilisation of the finance function has progressed at pace with interim expertise being brought in whilst recruitment to posts on a permanent basis is completed. Offers have now been made for all vacant posts including the Head of Finance. The end of year external audit has been resource intensive and placed significant demands on the Head of Financial Planning and Analysis. The resolution of income reporting issues is a corporate priority as well as establishing a new cycle for budget planning and reporting. The development of the 2022-23 corporate plan and associated budget will start this month.

Turning to the FTP improvement project, since we last reported to Council in July 2021, we have completed 13 of the 16 projects we began in January. With the exception of the new case management system (CMS) and dependent projects (which went live in June and not April as originally planned) all projects were completed on time. The focus is now on ensuring we embed the changes we have made and monitor the impact they are having. Although there are still vacancies in the FTP team it is encouraging that turnover has reduced.

Following approval by the Education and Training Committee we have now launched our new education quality assurance model. The new model will enable HCPC to be flexible, intelligent and data-led in its quality assurance of education institutions and programmes. These are key tenets of our corporate strategy. This represents a significant milestone in the transformation of HCPC and is an excellent example of working in partnership with our stakeholders to develop an approach which continues to deliver our regulatory objectives but is less burdensome and adds value.

### ***Collaboration and engagement***

Much of the focus of our engagement activities has been in relation to regulatory reform, including the introduction of Health and Care Bill into Parliament and the Professional Qualifications Bill. With regards the later it is encouraging that BEIS officials and Ministers are actively considering the concerns and suggestions we have made. Further detail is provided in the stakeholder engagement section of this report.

## **Organisational culture**

Colleagues across the organisation have been working incredibly hard delivering the corporate plan priorities as well as responding to the unprecedented service demands. These challenges are amplified in those areas of the organisation where there are vacancies. Employee well-being therefore continues to be a priority. To further develop a culture of openness and trust across the organisation the ELT have established regular meetings with the Senior Leadership Group to provide an opportunity to reflect on what has gone well, understand the concerns of employees and to forward plan. The outcome of these discussions have informed the People Strategy.

Following relaxation of national Covid restrictions in July, colleagues have been encouraged to reconnect in person in the office with many teams taking advantage of the opportunity. The intention is to move to more formal hybrid working arrangements later in the autumn. Final arrangements will be informed by the outcome of a 'new ways of working' all employee survey and review of the available office space following the exit of 405 Kennington Road.

## **2. Chief Executive's public agenda overview – 22 September 2021**

### **FtP Improvement Programme update**

The Executive are pleased to present to Council an overview of the next suite of projects that will take us forward in progressing towards meeting the PSA standards. The first suite of projects have largely completed and benefits are being tracked as set out in the paper.

### **Finance Report**

This is the first iteration of the new finance report format agreed by the Council earlier this year. The report outlines areas of significant budget movement as a result of decisions relating to our estates and international registration income variations.

### **Insight and Intelligence Framework**

Making better use of the data we hold to deliver smart regulation is a key pillar of our Corporate Strategy 2021-26. Development of these capabilities will take time and this paper sets out how we will go about achieving this in a phased and manageable approach.

### **Council Apprentice 2022**

This paper proposes running a second year of the Council's Apprentice initiative. This is a proposal the Executive fully supports, we have greatly appreciated the participation of our first Apprentices, Pameleta and Nicola and the additional perspectives they have brought to issues.

### 3. Stakeholder engagement summary

#### Public Affairs - Professional Qualifications Bill

I met with Lord Grimstone, the Minister for Trade, in July to discuss the Professional Qualifications Bill. The Minister is continuing to reflect on the concerns raised by peers, ourselves and other regulators, and BEIS will continue to engage with HCPC ahead of the Report stage of the Bill which is expected to take place in October.

We continue to engage with Government and parliamentarians as we believe that there would be value in a statutory duty to consult the relevant regulator(s) regarding any secondary legislation that Government produces once the Bill becomes law.

#### Public Affairs – Health and Care Bill

As the Health and Care Bill moves through Parliament, we have engaged with a number of MPs across the political parties and the devolved nations, including Dr Dan Poulter MP, Jo Gideon MP, Justin Madders MP, Dr Philippa Whitford MP and Annie Wells MSP, the Shadow Scottish Health Secretary. We have discussed with them HCPC's position on the Bill and regulatory reform more widely. All the meetings have been positive and these politicians have been receptive to HCPC's messages. These meetings have been a good opportunity to set out HCPC's thinking on reform of professional healthcare regulation, including the creation of a collaborative and innovation focused regulatory environment and the benefits of multi-profession regulation. It has also been useful in raising our profile generally amongst influential parliamentarians.

Ahead of the committee stage of the Bill in September we met with three members of the House of Commons Health and Care Bill Committee: Justin Madders (Labour front bench Health spokesperson), Dr Phillipa Whitford (SNP) and Jo Gideon (Conservative). We were able to highlight HCPC's key points on regulatory reform and discuss the need for clarity that the government will consult with regulators before utilising the powers in Clause 123 of the Bill. We also submitted written evidence to the Health and Care Bill Committee, the only professional healthcare regulator to do so. The PSA also made a submission.

We will continue to engage with parliamentarians as the Health and Care Bill progresses and have a meeting scheduled with Dr James Davies MP (Conservative) on 20<sup>th</sup> September. We have also contacted Scottish Conservative parliamentarian Dr Sandesh Gulhane to offer a meeting, at the recommendation of his colleague Annie Wells.

#### Public Affairs – other engagement

In addition, I attended a roundtable hosted by the Secretary of State for Health & Social Care, Rt Hon Sajid Javid MP, along with other senior NHS and healthcare regulation professionals. We discussed the government's priorities for the NHS and health and care sector. I took the opportunity to emphasise our key messages on regulatory reform and the role regulators can play in helping to address workforce challenges.

## Approach

In July we have been reviewing our approach to stakeholder engagement. In July, ELT signed off a stakeholder map which analysed our stakeholders by their level of influence and interest. This also set out our approach to engagement aiming to ensure that the right staff in HCPC, at all levels, have the right engagement with the right stakeholders at the right time.

We will be taking a 'relationship management' approach, which provides for clear ownership of each key relationship, regular, proactive engagement. This will allow us to ensure that we are closer to our stakeholders, with a better understanding of their challenges, to allow for closer working and regulation that is more responsive to the external environment. We want our approach to be informed by a deep understanding of our stakeholders' issues and to ensure our key messages are heard and understood. To support this, we have also created and will be continually updating, our key messages document to ensure that staff engaging externally are able to provide consistent and clear messages on key HCPC initiatives and positions.

The new Head of Policy and Strategic Relationships, due to start on 1 November, will be key to overseeing delivery of this approach, however, in the interim period, we are beginning to establish relationships and governance to help us to more effectively use and respond to stakeholder insights and intelligence.

## 4. Regulatory Development

### 4.1 Regulatory reform

The Department of Health and Social Care (DHSC) have begun to share proposed GMC draft legislation with the regulators for comments. To date, drafting relating to the quality assurance of education has been provided. The GMC is the first regulator to go through this reform process and it is envisaged that GMC's provisions will form the blueprint for the legislative framework for other regulators. In consultation with the other regulators, we have been preparing our response and comments on the drafting. We have also been preparing a response to a DHSC regulatory survey, which will inform the reforms. Our response is based on outcomes of Council workshops.

### 4.2 PSA performance review 2020-21

At the end of July, the PSA published their review of our performance for the period 2020-21. We met 13 of the 18 Standards, with the areas not met all being FtP standards plus the EDI standard. This result was expected given the timescales it takes to implement evidenced improvement in the case sample reviewed. The PSA noted our energy and commitment to accelerating the pace of our improvement programme, which it says should have a positive impact.

We were the first regulator to undergo a PSA review of our performance during the pandemic and are pleased that the PSA acknowledged that we maintained and improved our performance during a highly demanding 12-month period.

### 4.3 Education quality assurance model implementation

The Education and Training Committee discussed the outcomes from the pilot work which concluded in August. The pilot has provided excellent value in allowing further refinement of the model based on feedback from all stakeholders involved. Our new monitoring approach has been developed in particular, allowing more focus on quality across institutions whilst reducing burden. The [pilot evaluation report](#) demonstrates that all measures linked to the strategic objectives for this work have been met and the ETC approved full implementation of the model.

This will involve a range of communication and engagement activities with education contacts, our partner visitors and the wider sector, including professional bodies. We are also pressing ahead with our priorities for data collection to support the new model, with agreement reached with the Higher Education Statistics Agency (HESA) and our own Newly Qualified Graduate Survey ready for distribution. The team will also realign internally to drive a regionally led approach to engagement with providers and wider stakeholders, such as Health Education England. Our scale up activities will be complete by the end of 2021 and we will continue to evaluate performance of the new model thereafter. This includes regular review points with ELT and ETC to ensure we continue to realise the benefits through this work.

### 4.4 Registration responsiveness

The responsiveness of the Registration function is an area of concern. The department usually approaches the summer months with all areas of work up to date to enable resource to be allocated to effectively manage UK applications from new graduates. However, this year due to the volumes of international applications received, (1,978 between April to August compared to 1,286 for the same period in 2020), as well as the impact of a large number of contacts relating to the direct debit issues resulting from the launch of the new registration system, this was not the case this year.

This resulted in UK applications being processed outside the published service standard in July and August. Increased contact was also received from registrants seeking guidance to enable them to activate their new online renewal portal account following the introduction of the new registration system. To bring this into context between July and August the team received 19,619 UK enquiry related emails, which is a 70% increase compared to the same period in 2019.

We have taken a number of steps to try and return us to our service standards and to communicate with registrants and applicants to provide assurance. This has included

- A return to office-based working to increase call handling capacity.
- Directly contacting those who had been waiting for a response the longest and providing them a priority contact email address. All emails to this contact address have been responded to within 24 hours.
- Sending targeted emails to those at different stages of the renewal process to encourage use of self-service facilities available.
- Providing proactive and compassionate responses to queries raised via social media.
- Increasing our resources to add 12 additional temporary registration advisors to manage the backlog of contacts.

- Adapting our training process to prioritise quick call handling competence.
- Updating our external communications and automated messaging to provide transparency on the issues we are encountering and to manage expectations. We also published a blog on the renewal process.

Our corrective measures have significantly impacted on the number of UK applications outstanding from a peak of 3,047, earlier in the summer, to 1,187 as at the 7 September. The team is close to being back in target for the UK applications service standard. This should reduce the level of contact to enable the team to focus and improve responsiveness across other measures.

The team have also worked directly with employers of groups in renewal and renewal rates for the professions that have renewed their registration in 2021 have remained broadly in line with numbers achieved during the last cycle in 2019. This provides assurance that registrants who wished to have been able to complete their registration renewal.

#### **4.5 Standards of proficiency**

Following our consultation on revisions to all 15 Standards of proficiency, we have completed our revision of the generic standards that will apply equally across all 15 professions. Consultation responses have led to the need for further engagement with key stakeholders in some professions to seek clarification on points made before we are able to complete our revision of these profession specific standards. We have begun this engagement, which will continue through the autumn. This will allow us to conclude the revisions of each of the 15 standards and seek Council approval in March 2022.

#### **4.6 Guidance**

Our new Health and Character guidance has been published on our website and we are preparing for the publication of new supervision materials. Filming of our professionalism videos is now complete and work will commence on the stages of development for this material.

#### **4.7 Equality diversity and inclusion**

Our EDI survey report, considered by Council in July 2021, has been peer reviewed and will be published in the EDI section on our website in September 2021. The full report will be complemented with profession specific factsheets. We have recruited an EDI Strategic Lead, who will join the HCPC in October 2021 and will lead on developing and implementing our next EDI action plan.

#### **4.8 Inquiries, consultations and external reports**

##### *Health Education England (HEE) call for evidence*

HEE has been commissioned to review long term strategic trends for the health and social care workforce, which will review, renew and update the existing 15-year strategic framework for workforce planning, Framework 15. We have responded to the HEE's call evidence to identify the factors that may have the greatest impact on demand for the health and social care sector over the next 15 years, and what this means for the workforce supply, to support patients and the population of the future.

## Department of Health (Northern Ireland) consultation on Draft Policy Proposals on Duty of Candour & Being Open

We responded to the Department of Health (Northern Ireland)'s consultation on draft policy proposals relating to the introduction of a statutory duty of candour for individuals and organisations. Whilst we did not support the introduction of an individual statutory duty, we did recognise the impact a lack of candour can have on individuals and families. Candour is already an important part of the Standards expected of HCPC registrants and our prevention work supports registrants to achieve this. Our full response can be found [here](#).

## 5. Covid Response

### 5.1 Temporary Registers

The tables below set out the number of temporary registrants on each of the registers as of 1 September 2021. In summary there are 13,268 temporary registrants.

	Former registrants		
	Reg	Non-reg	Total
AS	229	39	268
BS	1678	1488	3166
CH	653	215	868
CS	314	274	588
DT	415	125	540
HAD	134	18	152
ODP	473	201	674
OR	94	77	171
OT	2060	1689	3749
PA	1173	676	1849
PH	2256	987	3243
PO	61	47	108
PYL	767	691	1458
RA	1989	1465	3454
SL	972	750	1722
Total	13268	8742	22010

*Registered = added to the temporary register*

*Non-registered = added to the temporary register but subsequently removed*

Over the summer, at the request of Scottish government we have provided a breakdown of Scottish domiciled temporary registrants. This is to support their workforce planning.

### 5.2 Remote hearings

In August, we held our first fully in-person hearing since the pandemic began and we have a number of in-person hearings scheduled into the autumn. This hearing was held externally due to the closure of the Tribunal Centre at 405 Kennington Road. HCPTS have been working closely with the Projects and Office Services teams on

the plans to relocate the Tribunal Service into Park House, with the aim of holding in-person hearings there from October.

On 31 August we launched a public consultation on proposals to amend our Rules to give us permanent express provisions to hold remote hearings, once the emergency ends. The consultation is open until 23 November 2021.

## **6 Organisational development**

### **6.1 Corporate Plan 2021-22**

The Corporate Plan deliverables tracker is appended to this report with the latest progress update.

### **6.2 People Strategy**

Following discussion of the draft People Strategy at the People and Resource Committee in June 2021, the Strategy has been further developed and employee engagement is ongoing. Council's reflections have been incorporated within the Strategy following Council's dedicated seminar in July, this includes the approach to engagement, which is a strand within each of our four themes. Our behaviours document now also includes Council behaviours against each of our values, similar to the approach for staff, managers and managers of managers.

The People Strategy has been summarised into four themes, the ambition of each and the main areas of focus. Each of these themes are then laid out in more detail, describing the main actions against three-time horizons: first, strengthening our workforce and core processes (years 1-2); second, building on that foundation (years 3 & 4); and third, consolidating (year 5). We have also shown how our values align to each of the themes and how employee and Council engagement will be adopted as the core element of each theme. Council presentation of the final People Strategy for approval is expected in November 2022.

### **6.3 Wellbeing**

A number of wellbeing initiatives have been rolled out across the organisation, Executive Leadership Team (ELT) and Senior Leadership Team (SLT) have also been having weekly meetings to discuss the wellbeing of their teams and to address what has been going well and what needs further focus.

Earlier in September ELT, SLT, the wellbeing advisors and the employee forum reps held a workshop to discuss wellbeing across the organisation. The aim of the workshop was to share thoughts and insights into how staff are doing and their wellbeing and to make suggestions as to how we can improve wellbeing, both as individuals and collectively.

Outcomes of this session, along with outcomes of the ways of working survey, and feedback from the SLT's engagement with their teams will help to develop and evolve our approach on wellbeing and ways of working going forward. These outcomes will also feed into our People Strategy, which includes a work plan and impact measures.

## 6.4 Customer focus

We are developing a programme of ‘Becoming a compassionate regulator’ workshops that will be delivered to staff through the autumn 2021. These will be bespoke to HCPC’s context, ensuring workshops are aligned with our values and corporate priorities and promote understanding of the registrant experience.

## 6.5 New ways of working

An all-employee survey is currently taking place to gather views and thoughts on how we incorporate the best of what we’ve learnt through new ways of working during the pandemic and establish how we use our existing space as more employees return to working some days in the office. This is in part driven by the decision to move out of 405 Kennington Road which has been taken to give us the flexibility to determine our future office space needs and environment. This means our remaining office space needs to be used efficiently and resourcefully. Our experience of hybrid working in our current spaces will also help inform the blueprint for any future office.

## 6.6 Estates

Following the decision to exit the 405 Kennington Road lease (exit in December 2021) a project has been launched to support and deliver the decant and dilapidations in preparation and handover of the building to the Landlord. The project also covers the provision of suitable alternate Tribunal accommodation space planned within the 186KPR building.

Intermediate term plans will be informed by the current all employee survey and considered for space planning as we reorganise within our reduced footprint. This will also inform our longer-term estates plans. Mark Hope, Estates Advisory Consultant, is advising the HCPC and providing support to the internal team to further develop the Estates Strategy and maximise the benefit from our current assets.

## 6.7 Finance

### *Financial outturn*

The outturn against budget for the first few months of the 2021-22 financial year is included in the KPI dashboard. A full management accounts report is included later on the meeting’s agenda.

### *Resilience*

Following the departure of the Executive Director of Corporate Services in June, Gordon Dixon, Finance Consultant, returned to the HCPC to support and strengthen the Finance Team. His immediate priorities have been to:

- Develop and implement a plan for the annual External Audit
- Stabilise the structure and the resourcing of the Finance team
- Develop and implement a plan for resolution of the Income accounting system interface issues

The Finance team encountered challenge due to high turnover and a resulting loss of 'corporate memory', interim staff engaged, whilst experienced accountants, did not have the detailed operational knowledge of HCPC systems or the business processes as needed.

The Head of financial Reporting and Analysis, holder of significant corporate memory, has been redeployed to have the capacity to support the rest of the team and to manage the External Audit. Once the External Audit is complete, the team will commence preparing for the 22-23 budget to ensure that financial forecasts are prepared in a timely manner.

The team of interim accountants were replaced by a team with different skillsets, based on a needs assessment. Interviews have been conducted and almost all vacant roles have been recruited to, with permanent staff starting in Nov 21 through to Jan 22. This includes a permanent Head of Finance.

The plan for the resolution of the Income accounting issues has two strands. The first is focusing on short-term fixes which will allow for a permanent fix to be implemented. The target is to have the permanent fix implemented by the end of December 2021.

## **6.8 Digital Transformation**

We continue to drive forwards the implementation activities of the HCPC Digital Transformation Strategy which align to our commitments in the corporate plan. By the end of quarter 3 HCPC will be able to confirm and capture registrant Equality, Diversity and Inclusion data at the point of renewal.

Related to this, HCPC held the discovery week for the implementation of the online application process in August, this will replace the current paper-based application process. We now have an approach to deliver the minimum usable product for online International Applications and to capture of EDI data at point of registration. We are currently reviewing the approach and sequencing of activity, as well as getting additional estimates prior to submitting the business case.

## **6.9 Executive Leadership Team**

An agency has been engaged to recruit to the vacant Executive Director of Corporate Services post. In light of the recent appointment of a new Head of Finance, who is due to start in January, and the recent operational challenges we have encountered I have taken the opportunity to review the scope and focus of the role. Suitable candidates put forward by the Agency will be shortlisted this month. Gordon Dixon is providing leadership for the finance team and Neil Cuthbertson continues to oversee Digital transformation, IT and Projects whilst we recruit to this important position.

**Chief Executive – John Barwick**

**Meeting schedule period covering 25 June – 20 September 2021**

DHSC - Emergency Register – Quarterly meeting	29 June
HCPC/NHS Education Scotland – Karen Reid CEO Introductory Call	29 June
NHS People Plan Advisory Group Forum	1 July
DHSC - Mark Bennett Catch up	6 July
Institute of Biomedical Science – David Wells CEO introductory meeting	13 July
Health Education England – Wendy Reid	14 July
BEIS – Professional Qualifications Bill update	19 July
Northern Ireland Joint Regulators’ Forum	26 July
PQ Healthcare Regulators Roundtable	28 July
AHPs Into action Programme Board	28 July
CEORB meeting	29 July
Prof Mike Wang, Chair - Association of Clinical Psychologists,	2 August
Nick Jones, Chief Executive - GCC	16 August
Justin Madders MP	17 August
KPMG – Professional Regulators Review	17 August
Sharing Intelligence for Health and Care Group and Healthcare Professional Regulators’ meeting – NHS Healthcare Improvement Scotland	18 August
Suzanne Rastrick, Chief AHPO England	6 September
Allied Health Professions Federation Board – Regulatory Reform	7 September
Ruth Crowder, Chief AHPO Wales	9 September
NHS People Plan Advisory Group	9 September
DHSC – Emergency Register quarterly meeting	14 September
AHP Workforce & Education Strategic Oversight Forum	15 September
Health Education Strategic Exchange Q3 2021	16 September

## Chief Executive's report on organisational performance – September 2021

### Appendix B

- Key Performance Indicators Dashboard
- Register Demographics
- Media Reach Metrics

## Key Performance Indicators dashboard

### FTP

<b>Measure</b>	<b>KPI 1 - % of completed FtP Improvement Projects</b>										<b>Period</b>	Aug 21	
<b>What it tells us</b>	FtP KPIs are currently reported within the stand-alone FtP Improvement report. This overarching metric provides Council with a snapshot of progress of the FtP Improvement Programme with the full narrative and detail being within the stand-alone report.												
<b>Reporting period commentary</b>	At the end of August, 13 out of the 16 projects in the FtP improvement programme have been completed and moved into the benefits realisation stage. Two projects are due to complete in September and one project that has been on hold is due to commence in September, as part of Phase 2 of the improvement programme. A detailed update on the improvement programme is provided in the FtP Performance Report to Council.												
<b>Year to date</b>		Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug21				
	%	0%	0%	0%	13%	38%	63%	75%	81%				

### Education

<b>Measure</b>	<b>KPI 2 - Education Approvals</b>										<b>Period</b>	Aug 21	
	<b>1 - Percentage meeting service standard (30 days) for issuing visitors reports following completion of QA visit</b> <b>2 - Percentage meeting service standard (3 months) to complete the post QA visit process where conditions are imposed</b>												
<b>What it tells us</b>	These measures provide Council with assurance on the timeliness of the Education approval process. More detailed metrics are reported to ETC.												
<b>Reporting period commentary</b>	1 – Performance within operational target. 2 – Post-visit cases completing within measure increasing. Most cases complete within 3-4 months (91% for August end).												
<b>Year to date</b>		Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug21				
	1	%	88	88	90	92	91	98	98	100			
	2	%	41	45	45	43	44	45	55	63			

## Registration

<b>Measure</b>	<b>KPI 3 – Registration responsiveness of our registration contact centre (calls, emails, letter)</b>										<b>Period</b>	Aug 21	
	<b>1 - Respond to 95% of emails within 2 working days</b> <b>2 - Respond to 95% of telephone calls</b> <b>3 - Respond to 95% of postal correspondence within 10 working days</b>												
<b>What it tells us</b>	What it tells us: Responsiveness will provide Council with a view of the customer service (timeliness) received by registrants. The breakdown of the register is provided in this performance report to provide Council with an understanding of the size and make up of our registrant population. Detailed registration metrics are reported to ETC												
<b>Executive commentary</b>	The responsiveness of the Registrations function is an area of concern. Performance challenges are due to the volumes of international applications received, (1,978 between April to August compared to 1,286 for the same period in 2020), the direct debit issues and receipt of the associated emails as a result of implementing the new registration system. A number of mitigations have been put in place. More detail on the root cause of the issue and the corrective actions in place to return us to within service levels is included in the narrative section of this report.												
<b>Year to date</b>		Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21				
<b>1: Emails</b>	%	4%	22.6%	0.5%	0%	0%	0%	0%	0%				
<b>2: Calls</b>	%	N/A	N/A	N/A	51.6%	61%	78.7%	72.3%	69%				
<b>3: Post</b>	%	100%	100%	100%	95%	100%	100%	86.3%	0%				

## Customer Service

<b>Measure</b>	<b>KPI 4 - Customer service: Number of complaints and % upheld</b>										<b>Period</b>	Aug 21		
<b>What it tells us</b>	This provides insight into potential customer service and performance issues. Narrative will be vital for Council to probe and should include information on corrective action taken.													
<b>Executive commentary</b>	There is a higher number of complaints being received than normal and a higher proportion are upheld. This is primarily due to service issues in the Registration department. There have been delays with international and UK applications, and readmissions. This coupled with several professions being in renewal has generated a lot of emails and phone calls to the department which has also resulted in complaints about delays and due to communication issues. A proportion of registrants have difficulties with online renewal which also leads to complaints.													
<b>Year to date</b>		Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21					<b>Monthly average</b>
	<b>Number</b>	56	38	66	57	43	78	50	68					57
	<b>% upheld</b>	44	60	62	63	55	33	48						52
<b>Previous year</b>		Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	<b>Monthly average</b>
	<b>Number</b>	43	44	30	26	23	29	35	25	44	34	38	34	34
	<b>% upheld</b>	18	54	17	27	30	24	34	17	34	36	43	40	32

## Professional practice and insight

<b>Measure</b>	<b>KPI 5 - Professional practice and insight: 50% of registrants said their practice would change as a result of information gained through a professional liaison learning event</b>										<b>Period</b>	Aug 21	
<b>What it tells us</b>	This measure focuses on outcomes which highlight the impact of our engagement. Engagement and media reach dashboard to be provided in performance report.												
<b>Executive commentary</b>	In this period, we did not undertake engagements with registrants in June or August.  In July we delivered our first ever 'Joining the UK workforce workshop'. This session was delivered to international Physiotherapy registrants who were registered this year. This workshop aims to support registrants who recently registered via the international registration route and are commencing work in the UK.												
<b>Year to date</b>		<b>Jan-21</b>	<b>Feb-21</b>	<b>Mar-21</b>	<b>Apr-21</b>	<b>May-21</b>	<b>Jun-21</b>	<b>Jul-21</b>	<b>Aug-21</b>				
	%	43	56	54	47	49	N/A	85	N/A				

## Finance

<b>Measure</b>	<b>KPI 6 - Finance: Performance against budgeted operating expenditure in range of 97.5% to 102.5%</b>										<b>Period</b>	Aug 21	
<b>What it tells us</b>	Indicates the grip and control in place and accuracy of forecasting. Measure will be the full-year forecast variance against the full-year budget moving from YTD.												
<b>Executive commentary</b>	The FTP Budget needs revisiting to improve the alignment with the FTP Operational Plan. Additional unbudgeted expenditure is being incurred with the closure of 405KPR and the costs associated with the processing of the increased number of International applications.												
<b>Year to date</b>	<b>(,000)</b>	<b>Jan-21</b>	<b>Feb-21</b>	<b>Mar-21</b>	<b>Apr-21</b>	<b>May-21</b>	<b>Jun-21</b>	<b>Jul-21</b>	<b>Aug-21</b>				
	YTD Actual	21,346	23,904	28,062	2,407	5,002	7,768	10,060					
	YTD Budget				2,924	5,757	8,721	10,328					
	YTD Forecast	21,944	24,339	26,744									
	YTD Variance	598	750	(1,318)	517	755	953	268					
	Actual as % of budget	97.3%	98.2%	104.9%	82.3%	86.9%	89.1%	97.4%					
<b>Previous year</b>	<b>(,000)</b>	<b>Jan-20</b>	<b>Feb-20</b>	<b>Mar-20</b>	<b>Apr-20</b>	<b>May-21</b>	<b>Jun-20</b>	<b>Jul-20</b>	<b>Aug-20</b>	<b>Sep-20</b>	<b>Oct-20</b>	<b>Nov-20</b>	<b>Dec-20</b>
	YTD Actual	28,001	30,393	32,745	2,353	4,251	6,199	8,177	10,215	12,068	14,199	16,535	18,945
	YTD Budget				3,204	5,642	8,155						
	YTD Forecast	28,164	30,720	33,422				8,598	11,277	13,865	14,498	16,944	19,416
	YTD Variance	164	327	677	851	1,391	1,956	421	1,062	1,798	299	409	471
	Actual as % of budget	99%	99%	98%	73%	75%	76%	95%	91%	87%	98%	98%	98%

## Information technology

<b>Measure</b>	<b>KPI 7 - Availability of core IT systems Target: &gt;99.5%</b>												<b>Period</b>	Aug 21
<b>What it tells us</b>	Measure is based on actual hours of availability per month vs total number available. Given the reliance of our core functions on IT systems, this measure indicates the reliability of the IT infrastructure. Additionally, our registrants and stakeholders predominately interact with us via our IT systems, and we have a statutory duty to ensure our online register is consistently available.													
<b>Executive commentary</b>	Service availability has been at 100% through the reporting period.													
<b>Year to date</b>		Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21					
	Availability %	100.00	100.00	99.98	99.98	100.00	100.00	100.00	100.00					
<b>Previous year</b>		Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	
	Availability %	100.00	100.00	100.00	100.00	100.00	99.70	100.00	100.00	100.00	99.85	100.00	99.98	

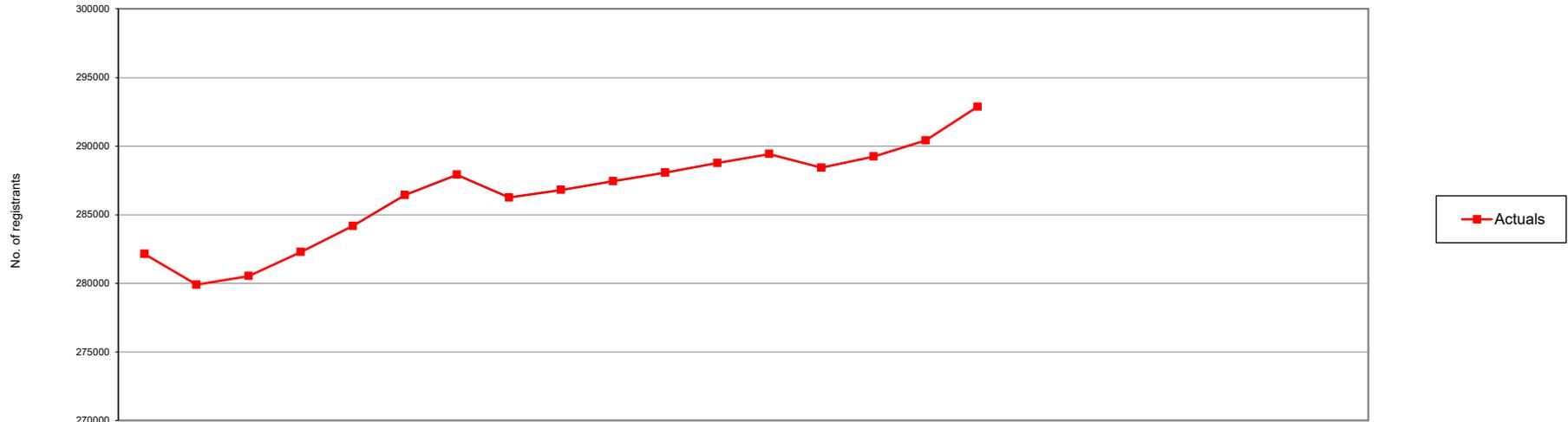
<b>Measure</b>	<b>KPI 8 - Number of known successful IT network breaches</b>												<b>Period</b>	Aug 21
<b>What it tells us</b>	All data protection breaches will continue to be reported into ARAC. This measure gives an indication of the security of our IT infrastructure.													
<b>Executive commentary</b>	No incidents in the reporting period.													
<b>Year to date</b>		Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21					
	Number	0	0	0	0	0	0	0	0					
<b>Previous year</b>		Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	
	Number	0	0	0	0	0	0	0	0	0	0	0	0	

## HR

<b>Measure</b>	<b>KPI 9 - Voluntary staff turnover Target: &lt;15%</b>												<b>Period</b>	Aug 21
<b>What it tells us</b>	This will be based on permanent establishment leavers and not FTCs. This provides an indicator that could point to cultural issues. PRC considers more detailed HR and internal EDI metrics.													
<b>Executive commentary</b>	HCPC's staff turnover remains to be consistently high each month and in the last few months has been increasing. Though majority of these leavers cite resignation as reason, HR is looking into collating more Exit Interview data to determine the cause of resignations. Monthly data on the reasons for resignations is being presented to ELT and is being shared with PRC as part of the quarterly reporting on HR & OD.													
<b>Year to date</b>		Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21					
	%	42	38	36	40	40	43	46	52					
<b>Previous year</b>		Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	
	%	55	59	62	58	58	58	57	54	54	53	53	51	

<b>Measure</b>	<b>KPI 10 - Average number of days lost to sickness</b>											<b>Period</b>	Aug 21
<b>What it tells us</b>	Measure is based on an employee average and excludes long-term sickness. This provides an indicator that could point to cultural issues. PRC will consider more detailed HR metrics.												
<b>Executive commentary</b>	HCPC's average sick days has consistently remained low, particularly over the course of the pandemic whereby employees have been working remotely/hybrid working which may have resulted in lower levels of sickness.												
<b>Year to date</b>		<b>Jan-21</b>	<b>Feb-21</b>	<b>Mar-21</b>	<b>Apr-21</b>	<b>May-22</b>	<b>Jun-21</b>	<b>Jul-21</b>	<b>Aug-21</b>				
	%	6	4	4	4	4	4	5	5				
<b>Previous year</b>		<b>Jan-20</b>	<b>Feb-20</b>	<b>Mar-20</b>	<b>Apr-20</b>	<b>May-20</b>	<b>Jun-20</b>	<b>Jul-20</b>	<b>Aug-20</b>	<b>Sep-20</b>	<b>Oct-20</b>	<b>Nov-20</b>	<b>Dec-20</b>
	%	12	13	13	12	12	12	11	10	9	9	8	7

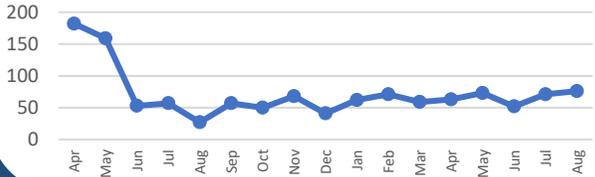
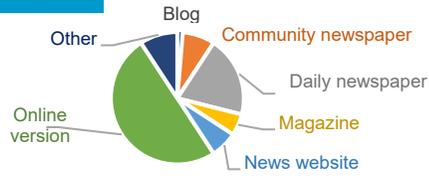
Number of Registrants by Profession April 2020 - March 2022



	2020			2021												2022						16/17	17/18	18/19	19/20	20/21	21/22			
	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	FYE	YTD	YTD
Arts therapists	4,790	4,792	4,356	4,462	4,619	4,708	4,759	4,740	4,750	4,775	4,795	4,805	4,811	4,823	4,836	4,851	4,934								4,026	4,322	4,432	4,784	4,805	4,934
Bio. scientists	23,140	23,169	23,256	23,371	23,557	23,631	23,723	23,516	23,579	23,669	23,740	23,807	23,875	23,973	24,102	24,198	24,384								22,902	22,395	23,284	23,064	23,807	24,384
Chirops/ pods	13,026	12,982	12,968	13,027	12,297	12,464	12,524	12,385	12,384	12,383	12,385	12,394	12,389	12,376	12,371	12,400	12,489								12,931	13,115	12,833	13,039	12,394	12,489
CI scientists	6,365	6,395	6,414	6,424	6,442	6,434	6,523	6,567	6,597	6,633	6,663	6,675	6,707	6,724	6,740	6,733	6,743								5,663	5,818	6,207	6,344	6,675	6,743
Dietitians	10,234	10,230	10,228	9,693	9,940	10,067	10,128	10,084	10,092	10,118	10,137	10,161	10,192	10,208	10,231	10,294	10,427								9,107	9,585	9,722	10,207	10,161	10,427
Hearing aid disps	3,351	3,352	3,347	3,352	3,124	3,218	3,259	3,267	3,277	3,311	3,345	3,377	3,390	3,411	3,421	3,431	3,461								2,593	2,908	3,047	3,338	3,377	3,461
OTs	40,128	40,162	40,183	40,396	40,858	41,123	41,230	41,023	41,094	41,167	41,239	41,290	41,338	41,380	41,413	41,473	41,863								38,080	38,183	39,925	40,062	41,290	41,863
ODPs	14,458	14,416	14,447	14,540	14,643	14,737	14,824	14,217	14,334	14,393	14,429	14,449	14,473	14,473	14,471	14,497	14,588								13,052	13,639	13,903	14,421	14,449	14,588
Orthoptists	1,488	1,492	1,491	1,505	1,507	1,511	1,520	1,513	1,511	1,514	1,513	1,514	1,512	1,509	1,507	1,503	1,424								1,451	1,440	1,496	1,489	1,514	1,424
Paramedics	29,268	29,367	29,522	29,770	29,960	30,223	30,422	30,480	30,571	30,618	30,769	30,965	31,137	31,244	31,262	31,413	30,701								23,992	25,465	27,686	29,139	30,965	30,701
Physiotherapists	58,132	55,574	56,054	56,724	57,430	57,934	58,097	57,801	57,868	57,963	58,074	58,223	58,348	58,478	58,596	58,813	59,872								52,915	55,132	55,695	58,133	58,223	59,872
Pract psychs	24,836	24,855	24,932	24,996	25,168	25,364	25,634	25,681	25,738	25,812	25,862	25,894	25,935	24,379	24,717	24,940	25,117								22,604	23,104	24,290	24,783	25,894	25,117
Prosth/orthotists	1,091	1,093	1,096	1,105	1,108	1,110	1,112	1,102	1,106	1,107	1,110	1,113	1,114	1,115	1,117	1,126	1,157								1,063	1,051	1,101	1,090	1,113	1,157
Radiographers	35,209	35,368	35,563	36,090	36,497	36,785	36,923	36,713	36,721	36,762	36,795	36,877	36,959	37,085	37,218	37,516	38,268								32,072	32,475	34,470	35,002	36,877	38,268
Social workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0								91,944	96,497	94,453	0	0	0
SLTs	16,625	16,646	16,673	16,830	17,035	17,128	17,239	17,166	17,188	17,213	17,212	17,231	17,241	17,250	17,242	17,235	17,444								15,935	15,932	16,595	16,572	17,231	17,444
<b>Total</b>	<b>282,141</b>	<b>279,893</b>	<b>280,530</b>	<b>282,285</b>	<b>284,185</b>	<b>286,437</b>	<b>287,917</b>	<b>286,255</b>	<b>286,810</b>	<b>287,438</b>	<b>288,068</b>	<b>288,775</b>	<b>289,421</b>	<b>288,428</b>	<b>289,244</b>	<b>290,423</b>	<b>292,872</b>								<b>350,330</b>	<b>361,061</b>	<b>369,139</b>	<b>281,467</b>	<b>288,775</b>	<b>292,872</b>

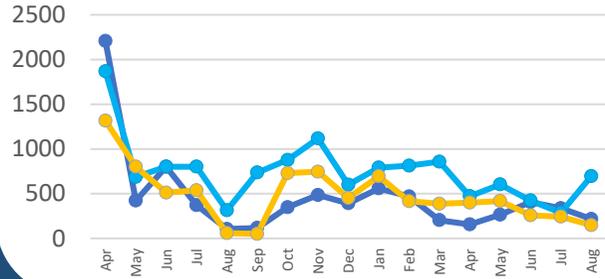
## Media coverage

**73**  
mentions

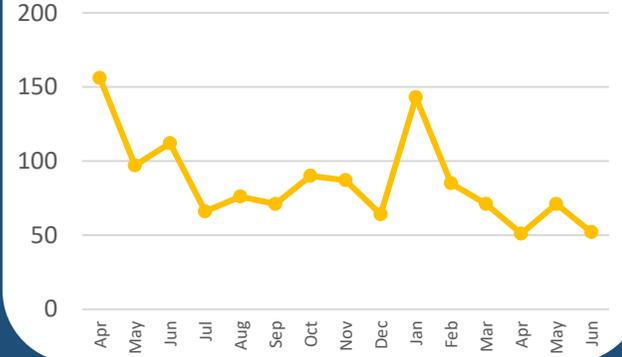


## Social media engagement

**f 217** **t 695** **in 148**

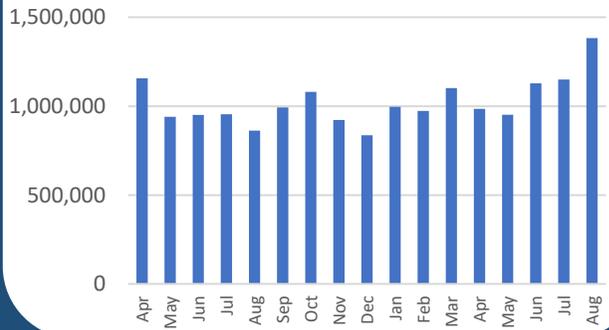


## Policy queries

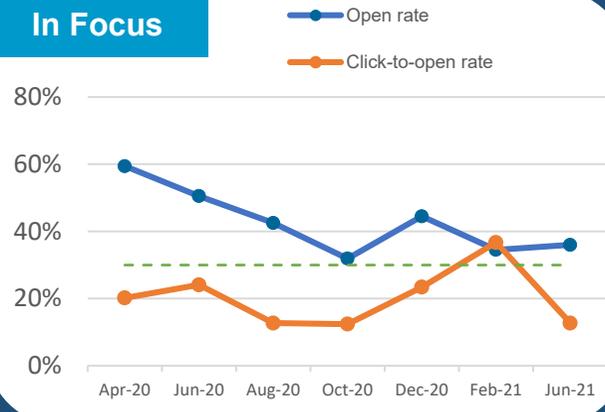


## Website

**1,383,219** page views  
**209,683** unique users

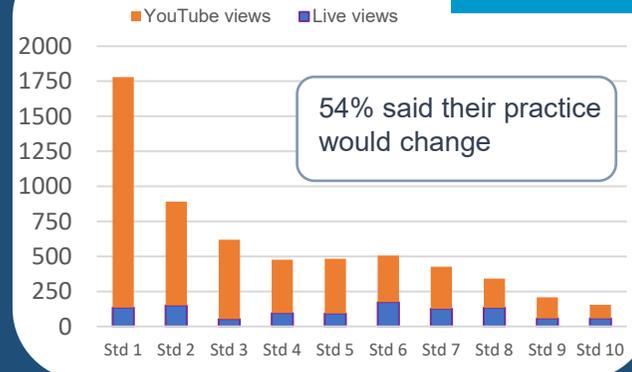


## In Focus



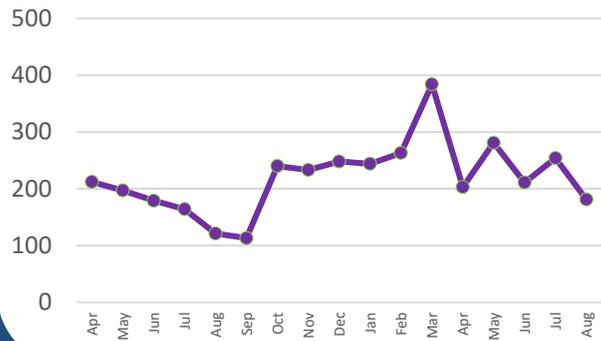
## #MyHPCStandards webinars

## Events



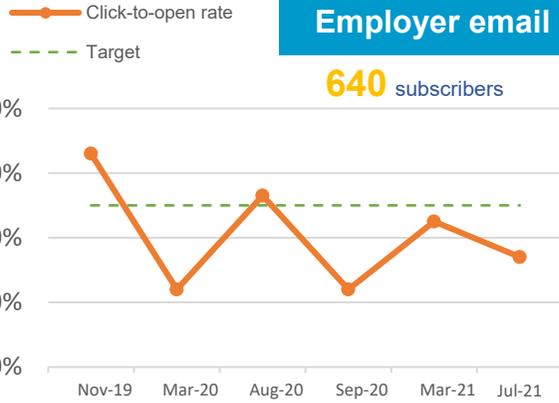
## Employer hub

● Visits

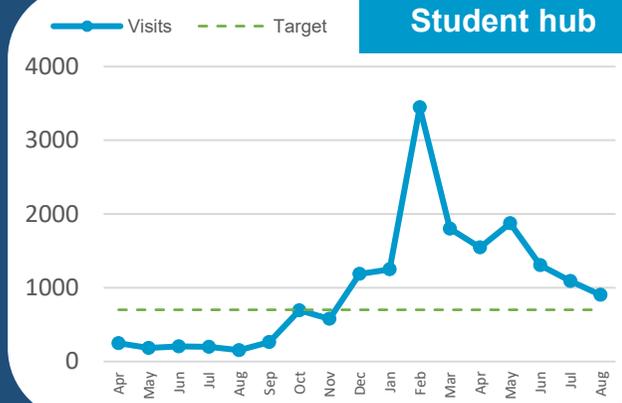


## Employer email

**640** subscribers



## Student hub



Chief Executive's report on organisational performance - September 2021

Appendix C

Corporate Plan 2021-22

Deliverables Progress Report September 2021

Strategic theme 1- Continuously improve and innovate		Target delivery	Benefit measure	Benefit target	RAG & Comment	
	Key milestones					
<b>Improving our FtP performance</b>  Improved: <ul style="list-style-type: none"> <li>Age profile of cases at each stage of our FtP process;</li> <li>Quality of investigations;</li> <li>Quality of decisions; and</li> <li>Relationships with key FtP stakeholders.</li> </ul>	A1	New Case Management System launched.	Q1	<ul style="list-style-type: none"> <li>Improved management systems and information, enabling easy visibility of departmental performance to varying degrees of granularity.</li> <li>Move off an unsupported heritage system (Charter)</li> <li><u>Improved</u> FTP case progression, utilising workflows to ensure SLAs are met.</li> <li>Improved quality of risk assessments completed on cases.</li> <li>Efficiency savings</li> </ul>	Q1 Q1 Q3 Q3 Q4	Went live on 7 June 2021.  Formal QA of the risk assessments and case plans to take place between Sept-Oct.  Phase 2 development of the new CMS to commence in Q3.
	A2	Oldest cases either closed at threshold or progressed to ICP.	Q1	Oldest 280 cases as of Feb 2021 closed or progress to ICP stage – improving the age profile of cases	Q2	Progressing to SLA and plan.
	A3	Legally qualified Chairs introduced at ICP.	Q1	Efficiency savings – circ £74k in 2021-22 and £80k in 2022-23.  Reduced NWF cases at HCPTS (currently 25%)  Improved quality of ICP decisions and determinations	Q4 Q4 onwards Q2	ICP Chairs recruited trained and are now hearing cases. Follow up training with ICP Chairs took place on 6.07 and 2.09 and monitoring quality of decisions. Q1 benefits tracking has commenced. Benefits in relation to hearing outcomes expected to be realised from January 2022 onwards.
	A4	Frontloading pilot complete, if successful, adopted as business as usual.	Q3	Efficiency saving circa £1k per case in pilot  Improved quality of case management – reduced percentage of NWF at HCPTS stage	Q4 Q4 onwards	Progressing to SLA and plan, mini evaluation planned for Q3. Evaluation is being managed as an improvement project.
	A5	Cases awaiting final HCPTS hearing (which were postponed due to COVID-19 restrictions) concluded.	Q4	All postponed hearings held	Q4	All postponed COVID-19 hearings have been listed. Work in progress, cases awaiting listing has increased as backlog cases are moving through the system.
<b>Delivering online Registrations</b>	B1	UK Applicants will be able to register online	Q4	Improved User Experience for UK Applicants  Increased EDI data capture	Q4 From Q4	Business case being prepared and will be

<ul style="list-style-type: none"> <li>A fully online process which allows applicants to join our Register more efficiently</li> <li>Improved customer experience</li> <li>Increased EDI and workforce data</li> </ul> <p>(Resource lead)</p>				More efficient registration processing, will require less manual processing leading to efficiency savings - Reduction of temporary employee contracts / overtime needed to cover the peak UK application process for 6 months over the summer period (including B2 circa £100k savings)	Q4	submitted to ELT, discovery workshops with supplier held.
	B2	International applicants will be able to register online.	Q3	<p>Improved User Experience for international Applicants</p> <p>Increased EDI data capture</p> <p>More efficient registration processing less manual processing leading to efficiency savings - Estimated there will be a 50% reduction in data entry required from the Registrant Advisors which will increase productivity to feed into Quality Assurance activities by 50% (including B1 circa £100k savings)</p>	Q3 Q3 Q3	As above (B1).
	B4	We will deliver an integrated user experience.	Q1 22-3	Integrated Application & Registrant Portal - Improved user experience and access to registration services for external users	Q4 22-3	Dependent on B1 & B2
	B5	Project to capture diversity data at initial point of registration and renewal completed (see B1 & B2).	Q4	Completion rates for EDI data increase significantly	22-3	EDI captured at the point of renewal is being initiated with IBM and will complete by the end of Q3. EDI for new registration will be incorporated in the B1 and B2.
	<b>A new Education Quality Assurance Model</b>	C1	Delivery of pilot	Q2	Pilot completed on time, producing full evaluation of benefits realised through new model	Q2
<ul style="list-style-type: none"> <li>A new model of quality assurance of education providers that is flexible, intelligent, data led, and risk based.</li> </ul>	C2	Decision on full implementation	Q3	ELT / ETC positioned effectively to decide on full implementation of new model	Q3	ELT (24/08) and ETC (9/09) agreed to proceed with full implementation.
	C3	Full implementation of the new model	Q4	Stakeholders, systems and processes prepared for full implementation by target date. Evaluation continues to demonstrate benefits realised	Q1 22-3	Stakeholder engagement / communication plan – activities scheduled through to Dec end.

Strategic theme 2 – Promote high quality professional practice		Target delivery	Benefit measure	Benefit realisation target	RAG and Comment	
Key milestones						
<b>Building our professionalism and prevention approach</b>	D1	Complete evaluation of initial year of professional liaison team	Q1	Learning and impact from first year identified and used to inform development of the professional liaison service	Q2	Complete.
	D2	Learning materials for education providers and students developed	Q3	Education providers supported and able to deliver learning on professionalism, standards and regulation	Q4	On track.
	D3	Commence increase partnership working & support for identified employers	Q3	Influenced the creation of supportive cultures and working environments within identified employers	Q4 2022/23	Demand on healthcare means delivery of services has been prioritised over cultural development by employers.
	D4	Develop content for employer hub & e-newsletter and evaluate use/impact	Q4	Learning and impact identified and used to inform future development of hub and e-newsletter Increased understanding amongst employers of HCPC role, support and resources, and employer responsibilities	Q4	On track.
	D5	Professional liaison service developed and expanded	Q4	Increased engagements, support, education and influence of employers, registrants and other stakeholders	Q1 2022/23	Dependent on recruitment.
	D6	Programme of employer events delivered through the year and impact evaluated	Q4	Increased engagement with understanding amongst employers of HCPC role, support, resources and employer responsibilities.	2022/23	On track.
	D7	Develop a programme of support for international registrants	Q3	International registrants understand and can embed HCPC standards as they integrate into UK practice	2022/23	On track.

Strategic theme 3 – Develop insight and exert influence		Key milestones	Target delivery	Benefit measure	Benefit target	RAG and Comment
Delivering leadership in regulatory policy development	E1	Commence review of our regulatory position on aesthetic/cosmetic practice	Q2	Clear regulatory position for our stakeholders on aesthetic/cosmetic practice	2022-23 Q3	At risk due to potential resourcing issues in Policy team.
	E2	Scope and begin to deliver thought leadership work on for example registrant health & wellbeing, professionalism, multi-professional regulation & impact on patient safety	Q3	<p>Professionalism – positive impact reported by our stakeholders in relation to the resources available on our website/delivered through our liaison work</p> <p>Health and wellbeing – We will see an improvement in perceptions of the HCPC and our processes from registrants and other key stakeholders, through stakeholder polling, complaints and feedback, FTP registrant feedback forms and future research</p>	<p>Q2</p> <p>Q4</p>	Thought leadership has focused on regulatory reform in line with corporate priorities, currently scoping a piece on regulatory reform for the sector press. Work to promote health and wellbeing externally has continued (e.g., supervision and reflective practice health and character guidance and our recent statement on suicidal ideation). Through October and November, our stakeholder perceptions survey will be carried out which will provide us with baseline data, both on perceptions of HCPC overall and in relation to key ambitions of our Registrant Wellbeing Strategy and EDI Strategy.

	E3	Council decision on our regulatory approach to advanced practice	Q1	Greater clarity for stakeholders on the risks posed (if any) by advanced practice, and the action we will take	Q2 –Q3	Complete.
<b>Developing our data, analytics and reporting ability</b>  We will develop a consistent organisation wide approach to managing our data and create a single view of our registrants to enable insight.	F1	Insight & Intelligence framework approved by Council	Q2	Clarity for Council and our stakeholders about the realisation of improved insight and intelligence delivery. Planning can commence in relation to project work arising from framework.	2022-23	On track for Sept Council.
	F2	Publication of analytical reports as set out in the framework	Q4	This will cover areas such as EDI, FtP and CPD.	2022-23	Diversity analysis complete, other analysis in progress. Future areas set out in framework, presenting to Council in Sept.
	F3	Priority reporting needs defined and agreed	Q4	Working data platform, ingesting all HCPC data sources. Skilled users gaining new insights	2022-23	May not initiate until 2022-23
	F4	Delivered our first tranche of operational and performance reports (enabler for F1)	Q4	Derivation of value from effective and repeatable operational and performance reporting. Effective Data collection, cleansing, and enrichment. Joining of HCPC datasets to facilitate ability to find patterns, trends to allow analytical insight and intelligence.	Q4	As above
	F5	Deliver a tool kit that allows HCPC to become more predictive in its use of data	Q4	Joining of HCPC datasets to look for patterns, trends, and analytical insight and intelligence. HCPC are able to use data to inform key stakeholder groups to improve education, employment, professional behaviours to prevent/reduce the concerns being raised and maintain/enhance public protect	Q1 2022-23	As above
	F6	Deliver an operating model that allows HCPC to deliver new reporting, insights and data sources.	Q4	HCPC confident in the way it operates the data platform with necessary Data Governance rules and processes in place to ensure HCPC are compliant with all legislation. Audit	Q1 2022-23	As above

Strategic theme 4 – Be visible, engaged and informed	Key milestones	Target delivery	Benefit measure	Benefit target	RAG and Comment

<b>Developing effective mechanisms to reach all stakeholders</b>	G1	Personal engagement plans for Chair & Chief Executive implemented, to deliver engagement with key external stakeholders	Q1	Our key stakeholders will report greater visibility and engagement	Q4	Complete.
	G2	Maintain engagement across 4 nations with a specific focus to build relationships in Wales and Scotland post elections.	All year	Our key stakeholders in each of the four countries will report greater engagement with HCPC	Q4	Stakeholder mapping and strategic approach agreed, meeting schedule in place with Wales and Scotland. Recruitment planned shortly for Professional Liaison Consultant focusing on Scotland.
	G3	Conduct perceptions survey to establish stakeholder views on our regulatory functions and how we can improve and create action plan.	Q3	Qualitative and quantitative measures of understanding of stakeholder views	Q4	On track – survey approach and questions approved by ELT, 13 September.
<b>Strengthening our organisational approach to EDI</b>	H1	Complete analysis of data from second annual diversity data, publish 2021 Diversity report outlining findings.	Q1-2	Increased insight into registrant demographics	Q3	Survey complete. Communication plan being formulated, including profession specific fact sheets.
				Stakeholders understand our diversity data and see our commitment to EDI matters	Q2	
				HCPC commences planning work to address key findings	Q3	
H2	EDI employee forum established	Q1	Employees report increase in engagement and support in EDI matters, positive feedback in pulse surveys and engagement in EDI activities such as group discussions LGBT etc.	Q4	Established and group have met, meeting schedule in diaries.	
H3	Commence implementation of EDI action plan	From Q1	Realisation of the HCPC EDI strategic objectives	Q4	EDI strategic lead due to start 4 October. Key priority to develop and deliver action plan.	

Strategic theme 5 – Build a resilient, healthy, capable and sustainable organisation		Target delivery	Benefit measure	Benefit target	RAG and Comment	
Key milestones						
<b>Establishing the culture we need</b>  HCPC will only achieve its strategy if its employees understand the vision, their contribution to it, and have the skills and motivation to make it happen.	I1	Launch HCPC's People Strategy	Q4	All employees understand the culture of the organisation, and feel motivated to contribute and champion this culture evidenced by APDR's and also response to employee satisfaction and pulse surveys	2021-26	Following discussion at June PRC and Council behaviours workshop in July, updated strategy will be presented to PRC in September and Council in November for approval.
	I2	All employee customer focus workshops delivered (now titled 'Becoming a compassionate regulator' workshops)	Q3	All employees deal with internal and external customers consistently and professionally, where it is recognised there has been a clear culture shift to one of empathy and professionalism evidenced by a reduction of complaints in regard to tone of voice	Q4	Title of workshops changed to 'Becoming a compassionate regulator', due to commence in October.
	I3	Organisational behaviours and values integrated into our performance management system	Q1 for values, Q3 for behaviours	This will ensure that all colleagues can see what is expected of them in both terms of objectives and the behaviours that will be rewarded and see a clear link to the Corporate plan and overall strategy. This will be evidenced in APDR's and the responses to employee satisfaction and pulse surveys.	Q4	New values are now on E Perform (online APDR system). Behaviours finalised and will be launched in September which will link in with APDR.
	I4	All HR policies reviewed and modernised	Q2-4	To allow clear guidance and better management policies need to be succinct, up to date in both practice and law, recognising 'new ways of working' and flexible working. This will be evidenced by less reliance on HR and fewer ER cases	Q4	First batch of 6 highest priority policies approved by ELT in August. Second batch will be presented to ELT in October for approval. All policies due to be reviewed by year end.

	I5	Succession planning and career development plans agreed	Q4	There is continuity of delivery, staff are motivated as they can see clear progression paths and are trained appropriately.	Q1 2022-23	This has been incorporated into the new People Strategy and is on track to be delivered in Q4.
<b>Pursuing our Digital Transformation Strategy and building our Change Management capability</b>  We will improve our digital experience to meet our users' needs and ensure our content is seen	J1	New Case Management System launched	Q1	See A1	Q1-4	See A1.
	J2	UK online registration process will have been rolled out using an agile delivery process putting our registrants needs at the heart of the process	Q1	See B2 & B3	Q2-3	See B2 & B3.
	J3	Conversion rate optimisation programme in place	Q3	Measurable increase in the reach of HCPC key messaging. E.g., Bounce rate, Time on Site, Pages Per Visit, New vrs Returning Visitors, plus social media	Q4	On track. Pushed back from Q2 to Q3 due to resourcing pressures.
	J4	Digital transformation operating model and change management capability and capacity.	Q2	New Change (PMO) IT and Digital Transformation Operating model implemented with permanent Heads of Department in place	Q3	On track.
<b>Ensuring our financial sustainability</b>	K1	Medium-Term Financial Strategy incorporating an efficiency action plan	Q1	Budget Efficiency Strategy agreed by Council with clear actions which sets out how we will ensure that we an efficient and effective organisation over the medium-term.	Q2 onwards	Complete.
	K2	Fee Income Strategy agreed.	Q4	Clear and robust approach agreed and documented which ensures that we are able to implement any future fee changes at the appropriate time	2022-23	To initiate in Q4

Strategic theme 6 – Promote the value of regulation		Target delivery	Benefit measure	Benefit realisation target	RAG and Comment	
Key milestones						
<b>Delivering year one of our Registrant health and wellbeing strategy</b>	L1	Engage key stakeholders to establish key misconceptions and where communications can be improved	From Q2	We have a clear understanding of misconceptions and next steps to improve	Q4	Dependent on resourcing.
	L2	Undertake tone of voice review, prioritising templates and developing employee training and guidance materials	From Q2	We will see an improvement in perceptions of the HCPC and our processes from registrants and other key stakeholders, through stakeholder polling, complaints and feedback, FTP registrant feedback forms and future research	Q4	Work commenced in FtP but wider organisation delivery dependent on resourcing.
	L3	Incorporate the research and registrants' experiences film into all employee learning and development and inductions	From Q3	Improved understanding from employees about impact leading to improved customer service levels	Q4	Development of workshops for all existing staff has commenced.
	L4	Continue to engage stakeholders on the provision of mental health support	All year	Our registrants are better supported, mental health issues are reduced ensuring patient safety issues are reduced	Throughout the year	Pressures on health service mean that priorities are delivering care over cultural development.
<b>Preparing for Regulatory Reform</b>	M1	HCPC response to the DHSC consultation	Q1	HCPC voice is heard and informs future direction	Ongoing	Complete, responded, and published response.
	M2	Development of messages and dedicated engagement for the Future of Health and Care White Paper and anticipated Health and Care Bill, including responding to the Health & Social Care Select Committee inquiry	From Q1			On track.
	M4	Influence the policy on how consolidation of regulators should align with regulatory reform	Q2			On track.

## Chief Executive's report on organisational performance - September 2021

### Appendix D

### Strategic Risk Register September 2021

# HCPC Strategic Risks

## Summary of strategic risks

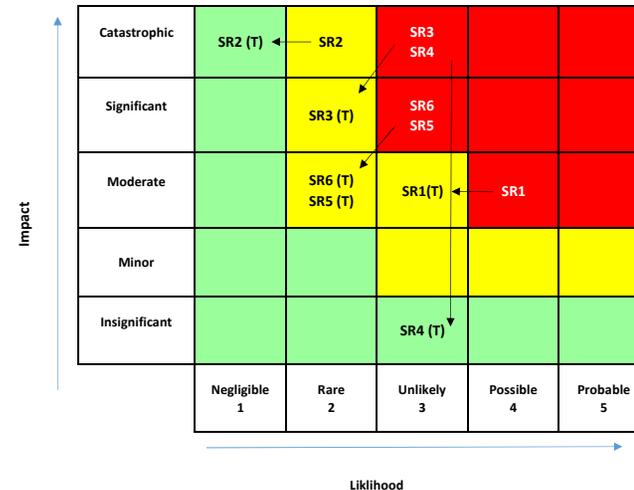
Strategy	Strategic Risks - High Level	Risk Description	Sep-21	Target Risk*
1 - Continuously improve and innovate - To improve our performance against PSA standards of good regulation and to innovate across all our regulatory functions to provide an enhanced user experience.	1. Our performance does not improve to a standard that enables us to achieve all the PSA standards of good regulation. In seeking to meet these standards we lose focus and lose standards in other areas	This includes our understanding of the PSA's expectations and the gap in our current performance we need to meet. This requires positive and ongoing engagement with the PSA and effective mechanisms for performance improvement and monitoring of our regulatory quality	12	9
2 - Promote high quality professional practice - Enable our professions to meet our standards so they are able to adapt to changes in health and care practice delivery, preventing harm to service users.	2. The HCPC's regulatory expectations are not appropriate or not understood by registrants and other stakeholders	This includes the quality and suitability of our standards and guidance in setting a threshold for safe practice which protects the public. It also includes how effectively we communicate our regulatory expectations	10	5
3 - Develop insight and exert influence - Learning from data and research to inform our decision making and share insights to protect, promote and maintain the health, safety and well-being of the public.	3. We are unable to harness the benefits of the wealth of data we hold	This includes our effectiveness in collecting, maintaining and utilising the data we need to be an intelligence driven regulator. It includes the effectiveness of our insight and intelligence, and professionalism and upstream regulation work. It relies heavily on the work of the digital transformation and IT team and includes operational reporting in the Corporate Services team. It also relies on regulatory teams inputting information.	15	8
4 - Be visible, engaged and informed - We regulate, take and communicate decisions which are informed by a deep understanding of the environment within which our registrants, employers and education providers operate.	4. We do not understand our stakeholder's needs and so are unable to be the regulator they (the wider system) need	This includes how effectively we engage with our stakeholders and our credibility with them and how well we play our part in the wider system. It includes our EDI practice externally, the ability to respond and influence external drivers for change, like the impact of Brexit, devolution or a change in government as well as issues like workforce development.	15	5
5 - Build a resilient, healthy, capable and sustainable organisation - Employees feel valued and supported, and fully able to contribute. The organisation is resilient and able to quickly adapt to changes in the external environment.	5. The resources we require to achieve our strategy are not in place or are not sustainable.	This risk includes not securing the resources we need to be effective and / or not being efficient and effective in our use of our resources (resources include financial, knowledge, skills, culture, infrastructure). It includes the development of our culture, people and physical assets, our continued financial viability and the significant failure of key business processes.	12	6
6 - Promoting the value of regulation - The public, registrants, students and employers understand the value and importance of regulated health and care professionals.	6. We are unable to demonstrate the value of regulation due to negative experiences of our regulation in practice	This risk includes ensuring a human and compassionate approach in our regulatory processes, our stakeholders experiences of our customer service. It also includes the promotion of the value of regulation and of the value of the professions we regulate. As outdated legislation contributes to bureaucratic processes this risk includes maximising the benefit to the HCPC of upcoming regulatory reform.	12	6

\* Expected risk score post planned actions

### Mitigation key

	Preventative
	Monitoring
	Detective
	Remedial
	Horizon scanning
	Best practice development
	Communication

### Heat map of strategic risks - residual to target (T)



**Strategic risk 1 - Our performance does not improve to a standard that enables us to achieve all the PSA standards of good regulation. In seeking to meet these standards we lose focus and lose standards in other areas**

**Risk summary**

This includes our understanding of the PSA's expectations and the gap in our current performance we need to meet. This requires positive and ongoing engagement with the PSA and effective mechanisms for performance improvement and monitoring of our regulatory quality

**Current risk influencers**

- ✚ HCPC not meeting a number of PSA standards, remediation is a longer term effort due to case length.
- ▬ 2020-21 PSA performance report published, acknowledges progress is being made towards meeting standards.
- ✚ Reduced productivity of registration team during home working due to some infrastructure limitations for call volumes.
- ✚ Brexit closure of EEA process increasing international application volumes requiring more resource to process. This has intersected with the annual peak in UK applications and renewals causing some service delays.
- ▬ Temporary staff in place in registration to address the summer peak in volumes. Registration office based working has increased to mitigate infrastructure limitations.
- ▬ Online applications project has commenced, International applications est close of Q3 and UK close of Q4.
- ▬ Confidence in effectiveness of Comparable Qualifications List process checks and balances due to a live case and quick response, additional controls to be agreed by ETC September 21.
- ✚ Pandemic impact progression of cases due to pressures on health sector.
- ▬ Council approved significant funding for a renewed FtP improvement plan. The second tranche of projects to are in planning following the completion of the first tranche.
- ▬ Pilot for new Education QA model progressing aim for ETC decision for full implementation in September 21.
- ✚ Closing of 405 tribunal suite and project to adapt space in Park house to hold hearings has the potential for disruption and possible that temporary accommodation needed.
- ▬ Permanent legislative provision for remote hearings progressing and expected Q4. Legal advice that current legislation does not explicitly prohibit remote hearings.

**Mitigations in place**

- 🔍 Enhanced QA plan for 2021-22 to review success of improvements in FtP (and registration & education)
- 📅 FtP improvement programme and governance in place, FtP improvement oversight board regularly meeting with attendance of PSA and DHSC
- 📊 Monitoring regulatory performance through performance report and KPIs (All, ongoing)
- 📋 PSA improvement action plans for other PSA standards in place monitored by internal working group & regular self-assessment against PSA standards reported to Council
- 🏢 Regulatory functions refined to allow remote operation (COVID-19)
- 👥 Regular training for Partners and employees
- 📺 Learning through review of PSA performance reviews of other regulators and commissioned reviews within the sector
- 📞 Temporary resource in place to address increase in international application volumes, telephone infrastructure has been improved to enable higher call volumes.

**Reporting period commentary**

Risk influencers - reflect publishing of PSA 2020-21 report and increase in registration volumes. We have a new mitigation in place which is an increase in temporary resources, and we will consider further resource to return us back to our standard levels if needed. For the PSA report, the tone is positive and recognises our progress but there is a need to ensure stakeholders understand the improvement trajectory set out to Council in May 2021.  
 Planned mitigations - Review of international process brought forward from Q4 to Q3. New planned mitigation, online applications project. Phase one of CMS project complete, phase 2 initiating.  
 Risk score - no change, would reduce due to confidence in the FTP improvement programme but the volume and service delays in Registration prevent this currently.

Review date
Sep-21

Risk owner
SMT Lead - Executive Director of Regulation

	Impact	Likelihood	Risk Score
Inherent risk	5	x	5
Current risk	3	x	4
Target risk (planned mitigations in place)	3	x	3

No change

**Risk Appetite**

Our risk appetite for actions to achieve regulatory quality is open, our risk appetite for actions relating to compliance is measured.

This risk needs to be rated in the amber range to meet the risk appetite due to the measured appetite for compliance (PSA standards) we currently are not meeting a number of PSA standards and have a comprehensive improvement programme in place to address this.

Reaching the target risk score is dependent on 1. The launch and successful embedding of the new Education QA model. 1. Registration applications being online, volumes reducing and the review of the international process. 3. Changes from FTP improvement programme embed and evidence that improvement is lasting in medium – long term.

Current risk level is outside of risk appetite

**Planned mitigations 2021-22**

**progress**

☀️ New Education Quality Assurance Model project (Q1-4).	➡️	On track for September 21 full implementation decision.
🔍 PSA standard improvement action plan (PSA Action Plan Working Group) (Q1-4).	➡️	Action plan for 2021 produced.
📋 FtP Improvement Plan (FtP Q1-4).	➡️	On track second tranche of projects in planning
☀️ New FtP Case Management System (improved performance data visibility). (Q1)	➡️	Phase one complete system launched and in use. Phase two initiating.
🔍 Registration workplan includes review of international process. (Q3)	➡️	Will shortly initiate
☀️ Online applications project	➡️	Initiated, international expected Nov 21 UK March 22.

**Strategic risk 2 - The HCPC's regulatory expectations are not appropriate or not understood by registrants and other stakeholders**

**Risk summary**

This includes the quality and suitability of our standards and guidance in setting a threshold for safe practice which protects the public. It also includes how effectively we communicate our regulatory expectations

**Current risk influencers**

- ➕ Changing expectations of our professions' practice, including as a result of pandemic response, technology or other societal events.
- ➡ Professional liaison team in place.
- ➡ Council agreed regulatory approach to advanced practice Jul 21.
- ➕ Senior staff turnover, Head of Policy role vacant, recruitment underway.
- ➡ Public facing materials in place to support registrant understanding of standards requirements.
- ➡ Timetable / forward plan for regular review of standards and guidance.
- ➡ Reflective practice guidance published.
- ➡ Supervision toolkit resources approved by ETC and published.
- ➡ Professionalism supporting films are complete and will soon be published.

**Mitigations in place**

- 🏗️ Public consultation process in place
- 🗣️ Engagement with key stakeholders/experts for widescale profession specific changes to standards
- 💡 Guidance provided on meeting our standards, 'My Standards' webinar series
- 🏠 Dedicated website hubs for registrants, students, employers, members of the public, education providers
- 🏠 Dedicated Covid Hub covering practice in pandemic
- 💡 Policy enquiries function available to support understanding and application of our standards
- 🏗️ Regulatory approach to advanced practice defined and agreed by Council

**Reporting period commentary**

It is essential that the appropriateness of our standards is constantly reviewed in response to changes in the professions and external environment. SETs underpin Education function. SOPs underpin registration and FtP. SCPEs underpin all practice for our registrants. Without the appropriate policy framework, effective regulation would not be possible and would lead to failure of PSA targets across the organisation.  
Risk influencers - reflect progression of a number of policy workstreams, notably advanced practice

Review date	Risk owner
Sep-21	SMT Lead - Executive Director of Professional Practice and Insight

	Impact	Likelihood	Risk Score
Inherent risk	5	x	5
Current risk	5	x	2
Target risk (planned mitigations in place)	5	x	1

no change

**Risk Appetite**

Our risk appetite for actions to achieve regulatory quality is open, the appetite for actions related to communication and profile is seeks. We are confident that our standards and guidance are fit for purpose and so this risk is currently within risk appetite. However, to maintain that control onward reviews are essential to ensure standards are constantly kept under review to maintain relevance to changing practice and the wider health sector.

Current risk level is within risk appetite

**Planned mitigations 2021-22**

**progress**

- 💡 Development of learning materials for education providers and students and international registrants (Q3) ➡ Not yet initiated
- 🗣️ Increase partnership working & support for employers (Q3) & Develop employer hub & e-newsletter (Q4) ➡ Not yet initiated
- 💡 Professional liaison service developed and expanded (Q4) ➡ Plans for expansion agreed
- 🗣️ Programme of employer events delivered (Q4) ➡ Not yet initiated
- 🔍 Review of the SOPs, ODP SET1, returners to practice (Q2-4) ➡ ODP SET 1 review complete. SOPs timeline extended to enable more in depth review.
- 🔍 Review of our regulatory position on aesthetic/cosmetic practice (Q4) ➡ Not yet initiated
- 🗣️ Programme of #MyHPCstandards events (Q4) ➡ Events underway, positive feedback recieved.
- 💡 Toolkits (professionalism, supervision, reflective practise) delivered Q4 ➡ In progress, supervision and reflective practice published.

**Strategic risk 3 - We are unable to harness the benefits of the wealth of data we hold (benefits - better regulatory decisions, prevention, workforce planning, influencing the agenda)**

**Risk summary**

This includes our effectiveness in collecting, maintaining and utilising the data we need to be an intelligence driven regulator. It includes the effectiveness of our insight and intelligence, and professionalism and upstream regulation work. It relies heavily on the work of the digital transformation and IT team and includes operational reporting in the Corporate Services team. It also relies on regulatory teams inputting information.

**Current risk influencers**

- ➕ Low % of registrant and complainant EDI data held; registrant data currently manually collected.
- ➖ Project to capture registrant EDI data through the registration online system has launched.
- ➕ Outstanding reports for new registration system being developed, need to upskill organisation on PowerBI.
- ➖ 1st in house statistical analysis report on EDI data presented to Council Jul 21, this will be published in Sep 21.
- ➖ I&A Framework in advanced draft, expectation of Council presentation Sep 21.
- ➕ Budgetary constraints limit our ability to establish systems/platform and the analytical function.
- ➖ Potential for HEE assistance to improve our data capabilities. In discussion.
- ➕ Resource challenges, I&A manager resignation, one office in place, capacity limited.
- ➖ Recruitment of Head of Insights and Analysis (I&A) underway.
- ➕ Data warehouse not in place - data not all accessible in a single platform, quality / accessibility issues remain.
- ➖ Review of IT and Infrastructure skills requirements underway.

**Mitigations in place**

- 📢 Publication of FtP, Education and Registration information and datasets through annual reports and FOI requests
- ⚙️ Professionalism and prevention framework
- 👤 Limited dedicated resource for Analysis and Intelligence and Professionalism and Upstream Regulation
- 🗣️ Professionalism Liaison service in place influencing employers, using knowledge to effect change through engagement and advice

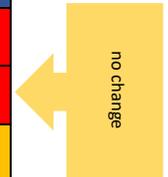
**Reporting period commentary**

This risk is led by the Executive Director of Professional Practice and Insight with significant levels of engagement needed from across the organisation, in particular on our IT capabilities.  
 Risk influencers - recognises resource challenges in I&A team and ongoing recruitment. New positive influence project to enable systematic registrant data collection through online applications has launched. I&A draft framework progressing. Regulatory reform poses both a positive influence and a negative influence. This is due to the opportunity of receiving more system data to improve insight, but also the risk that we are unable to respond to external requirements to share our data in a streamlined way.  
 Target risk has been re-assessed, from 3x1 to 4x2 as a target of 3 was considered to ambitious given the starting point our data capabilities risk score (15) and the funding available over the next few years.

Review date
Sep-21

Risk owner
SMT lead - Executive Director of Professional Practice and Insight

	Impact	Likelihood	Risk Score
Inherent risk	5	x 4	20
Current risk	5	x 3	15
Target risk (planned mitigations in place)	4	x 2	8



**Risk Appetite**

Our risk appetite for actions to achieve regulatory quality is open, the appetite for actions related to communication and profile is seeks. Current risk is outside of appetite, needs to reach an amber rating to be in line. Our ambition is to reduce this to an amber rating. We are at the start of our development in this area. Current risk level is outside of risk appetite.

To reach our target we need to have the data platform in place to enable an analytics environment. We will require a more substantial I&A team, as well as more systematic data collection through online applications to increase the % of registrant characteristics data held.

**Current risk level is outside of risk appetite**

**Planned mitigations 2021-22**

**progress**

- 🌟 Using our research portfolio to establish HCPC as a thought leader (externally commissioned and internal analysis) (ongoing) → Brief for research in the 2021-22 budget prepared, to be progressed when Policy Lead has capacity, reg reform priority.
- 🔍 Insight & Intelligence framework development (Q2) → On track to be presented to Council July 21
- 🌟 Deliver IT systems and operating model that allow HCPC to become more predictive in its use of data (Q4) → Not yet started
- 🌟 Online applications project (Q4) → Project will enable more systematic data collection. Project initiated.

## Strategic risk 4 - We do not understand our stakeholder's needs and so are unable to be the regulator they (the wider system) need

### Risk summary

This includes how effectively we engage with our stakeholders and our credibility with them and how well we play our part in the wider system. It includes our EDI practice externally, the ability to respond and influence external drivers for change, like the impact of Brexit, devolution or a change in government as well as issues like workforce development. It recognises that we have numerous and diverse stakeholders across 15+ professional groupings and health provision across the 4 nations.

### Current risk influencers

- Numerous and at times conflicting stakeholder wants and needs across 15+ professional groupings. Increasing divergence in political direction across 4 nations. Covid - reduced our stakeholder ability to engage.
- Lack of CRM system limits our ability to align and engagement across the organisation.
- Operational functions not resourced to respond as quickly as other regulators to urgent Government needs.
- Ongoing support from consultants Luther Pendragon on public affairs has improved our confidence in external horizon scanning and ability to respond through communications.
- Successful engagement on regulatory reform and other legislative change eg professional qual bill .
- Stakeholder mapping work with Luther completed, implementation of new stakeholder management processes has limited taking a relationship management approach.
- Liaison function in place and expansion funding agreed in budget. review of first year of service's work presented to Council confidence in effectiveness increased. Agreement to recruit a second consultant with a focus on Scotland.
- Low % of registrant EDI data held, improved to 18% but HCPC did not meet PSA EDI standard due to registrant and complainant data limitations.
- First analysis of EDI data presented to Council Jul 21 to be published Sep 21, comms plan to accompany to demonstrate understanding of the EDI of each profession
- EDI action plan undergoing QA status review ahead of new EDI lead post holder joining
- Several senior roles vacant in Policy, EDI and I&A. Recruitment underway. EDI lead appointed and will join in Q3
- Service responsiveness delays within registration impacting negatively on stakeholder opinion.

### Mitigations in place

- 📞 SMT relationship building and liaison with key stakeholders particularly Government Departments, professional bodies, other regulators, unions.
- 📞 Operational level engagement with key stakeholders in place across HCPC, including re Education, FtP with stakeholders such as Chief AHPs, CODH.
- 📞 Communications and strategic engagement supported by Luther Pendragon.
- 🔍 Horizon scanning and intelligence gathering including from relationship building to be aware of external drivers and influencers, early planning and scenario development as pandemic response changes within UK and globally.
- 🌟 EDI strategy based on independent audit of EDI practice. EDI stakeholder forum & internal EDI employee forum.
- 📄 Policy statement on approach to MOUs in place, a number of MOUs agreed with key stakeholders.
- 📊 Analysis and action planning from feedback mechanisms including corporate complaints, FtP stakeholder surveys, stakeholder opinion polling and education provider survey.
- 📞 Personal engagement plans for Chair & Chief Executive in place

### Reporting period commentary

The risk score is high due to HCPC not meeting PSA standard 3 relating to EDI which is part of this risk.  
 Risk influencers reflect development of our communications approach but also resource challenges with a number of key posts vacant.  
 Planned mitigations - new mitigation online applications project will enable systematic registrant data collection. New mitigation - restructure of the Communications team to better meet our new engagement approach.

Review date
Sep-21

Risk owner
SMT lead - Executive Director of Professional Practice and Insight

	Impact	Likelihood	Risk Score
Inherent risk	5	x	5
Current risk	5	x	3
Target risk (planned mitigations in place)	5	x	1

no change

### Risk Appetite

Our risk appetite for actions related to communication and profile is seeks. Current risk is outside of appetite due to our not meeting the PSA EDI standard and needs to be within the amber range to come within appetite.

To meet our target risk our new engagement approach needs to embed which involved organisation wide relationship managers, a central CRM system is required for this to be truly effective. The target also requires the scaling up of the Liaison service to have UK wide engagement. This risk is also dependent on effective stakeholder process interactions and the attainment of PSA EDI standard 3.

Current risk level is outside risk appetite

### Planned mitigations 2021-22

### progress

- |  |   |   |
|--|---|---|
| 📊 Stakeholder perceptions survey. (Q2)   | ➡ | Planning in progress.   |
| 📞 Increase partnership working & support for employers. (Q3)   | ➡ | To initiate.  |
| 📊 Analysis of data from second annual diversity data & publishing our 2021 Diversity report. (Q2)        | ➡ | Report presented to Council Jul 21 to be published Sep 21 with comprehensive communications plan.           |
| 🌟 Development and implementation of EDI action plan. (Q2-4)  | ➡ | QA team undertaking a status review of the existing action plan ready for the new EDI Lead to take forward. |
| 📄 Project to capture diversity data at initial point of registration and renewal. (Q4)                   | ➡ | Project for online applications has initiated.  |
| 📞 Quarterly meetings with professional bodies to ensure 2-way dialogue on areas of mutual interest. (Q2) | ➡ | First meetings in September.  |
| 📞 Communications team structure review (Q3)  | ➡ | recruitment underway for three Communication Business Partners.   |

## Strategic risk 5 - The resources we require to achieve our strategy are not in place or are not sustainable

### Risk summary

This risk includes not securing the resources we need to be effective and / or not being efficient and effective in our use of our resources (resources include financial, knowledge, skills, culture, infrastructure). It includes the development of our culture, people and physical assets, our continued financial viability and the significant failure of key business processes.

### Current risk influencers

- Full year budget for 2021-22 agreed by Council close to a net zero position. Medium term financial strategy principles agreed.
- Tight timeframe and associated costs to decant 405 KPR and adapt Park House to hold hearings. Costs not currently represented in budget as short time frame for planning before decision.
- Specialist consultancy engaged to max benefit from disposal of building asset. 405 lease break clause enacted, reducing ongoing rent costs from Dec 21 (costs of decanting and adapting existing estate will be incurred)
- Grant funding for Covid response secured. Fee rise complete and in effect.
- Majority of organisation remote working increases risk of silo working.
- People strategy well developed with a number of target audience workshops held, aim for Nov 21 Council approval.
- New normal ways of working all employee survey underway to inform how we work post pandemic.
- Some HR policies have not been reviewed for several years and are not supportive of new ways of working. Review underway with prioritisation by need.
- Increased visibility of key HR metrics for ELT and PRC
- IT and Projects undergoing structure review to ensure we have the skills needed for a digital focus.
- Project to enable online applications has commenced, International applications close of Q3 and UK close of Q4.
- System process interface issues between finance and registration systems, solution identified but not yet in place.
- Limitations to telephone system infrastructure leading to service issues, to mitigate higher number of Registration employees office based
- ED of Corporate Services, Head of IT and Finance posts vacant, recruitment underway. Head of finance appointed due to join in Q3. No financial specialism on ELT
- Interim leadership of Corporate Services departments in place.

### Mitigations in place

- Adherence to budgeting and financial management and reporting processes which are subject to internal and external audit e.g. NAO.
- All employees are set goals and objectives and undertake annual performance review which includes an assessment against our values (Fair, Compassionate, Inclusive, Enterprising) promoted through all employee performance system and seeks to identify training needs.
- HR includes a central learning and development function, which runs an annual learning and development plan for commonly identified skill and knowledge needs in addition to annual compliance training in areas such as data protection, bribery, EDI.
- Employee Forum acts as a consultation group for organisational change.
- Adherence to HR processes in relation to recruitment, annual performance development review and learning and development for Partners and employees.
- Effective IT system design maintaining confidentiality, integrity and availability of data. Digital transformation strategy provides roadmap for improving our IT systems.
- Maintenance of ISO27001 Information Security standard which is subject to external audit / Regular independent security assessments of key IT infrastructure.
- Maintenance of business continuity infrastructure and processes.
- ELT monthly monitoring of productivity of all departments through detailed performance reporting.

### Reporting period commentary

Risk Lead is CEO temporarily while ED of Corporate Service post is vacant.  
 Risk influencers represent a lot of activity and change ongoing which. The amount of change and activity presents a risk on capacity and sustainability. Exec is live to the need to pace the organisation to ensure performance is sustainable.  
 Risk score previously a holding score now has been confirmed as accurate and target risk agreed.

Review date
Sep-21

Risk owner
SMT - Chief Executive

	Impact	Likelihood	Risk Score	
Inherent risk	5	x	5	25
Current risk	4	x	3	12
Target risk (planned mitigations in place)	3	x	2	6

Score reviewed and confirmed as 12

### Risk Appetite

Financial and Value for Money - how will we use our resources? – Measured  
 People - how will we lead our workforce? – Seeks

Current risk is outside risk appetite, the risk needs to be within the amber rate.

To meet our target risk we need to have in place a robust finance and registration interface, a stable budget and forward planning process with a 2-3 year forward planning timeframe and we need to have enacted our People Strategy and have confidence it is effective. The target also requires our financial reserves to be in a better position and the resources avoid deficit budgets.

Current risk level is outside risk appetite

### Planned mitigations 2021-22

### progress

- |  |   |   |
|--|---|---|
| Organisational Culture is defined and agreed. (Q1)   | ➔ | As part of the people strategy we will set out our culture.   |
| Organisational behaviours and values integrated into performance management system & all employee customer focus workshops delivered. (Q1-2) | ➔ | Workshops underway with positive feedback received.   |
| All HR policies reviewed and modernised & succession planning and career development plans agreed. (Q2)                                      | ➔ | Review underway beginning with high priority policies.  |
| Medium-Term Financial Strategy incorporating an efficiency action plan. (Q2)   | ✓ | Complete agreed Council July 21   |
| Fee Income Strategy. (Q4)  | ➔ | ED Corporate Services post to take forward once in place.   |
| People strategy developed.   | ➔ | Focus of a council workshop in July 21. Further refinement underway with aim to present for Council approval November 21. |
| Estates Strategy review to ensure we have the physical space to support our culture and new ways of working.                                 | ➔ | Specialist expertise secured to undertake longer term estates needs and current assets disposal assessment                |

## Strategic risk 6 - We are unable to demonstrate the value of regulation due to negative experiences of our regulation in practice

### Risk summary

This risk includes ensuring a human and compassionate approach in our regulatory processes, our stakeholders experiences of our customer service. It also includes the promotion of the value of regulation and of the value of the professions we regulate. As outdated legislation contributes to bureaucratic processes this risk includes maximising the benefit to the HCPC of upcoming regulatory reform.

### Current risk influencers

- ✚ Review of regulators being undertaken by KPMG, effective engagement essential to communicate the benefits of the HCPC's model of regulation.
- ✚ Performance against PSA standards could increase organisational vulnerability during a time of regulatory reform.
- 2020-21 PSA report published, acknowledges progress is being made towards meeting standards.
- Registration responsiveness contributing to negative registrant experience - remedial mitigations in place
- ✚ Potential for HEE assistance to improve our data capabilities. In discussion.
- Positive and wide reaching engagement on regulatory reform undertaken in the reporting period.
- Proven model of multi profession model of regulation. Reform agenda open to benefits of model.
- Positive engagement with Scottish Government on the value of the temporary register.
- Project to implement online registration capability has launched, first delivery expected November 21 will represent a significant improvement in service experience.

### Mitigations in place

- ☀️ Registrant health and wellbeing strategy in place. Resourcing of action plan being prioritised.
- 🩹 Research conducted into experiences of FtP and action plan in place.
- 🗣️ FtP representatives forum - regular mechanism for formal engagement with unions and others involved in representing our registrants in FtP.
- 🗣️ Organisational values 'Fair, Compassionate, Inclusive, Enterprising' promoted through performance system.
- 🩹 Feedback and Complaints system with SLAs reporting to SMT & ARAC learning from complaints fed into system, you said we did examples published on website.
- 🗣️ Communications and strategic engagement, including parliamentarians, on regulatory reform supported by Luther Pendragon.

### Reporting period commentary

New influencers - launch of online registration project, online application capability will greatly improve registrant experience of our regulation in this area. The platform also enables incremental improvements, for example webchats to ease the registration experience. Regulatory reform is progressing and the HCPC has been engaging effectively with a number of stakeholders. KPMG commissioned to undertake a review of the number of regulators, benefits of multiprofession regulation key messaging.

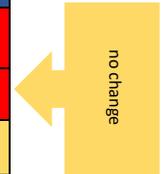
### Review date

Sep-21

### Risk owner

SMT lead - Chief Executive

	Impact	Likelihood	Risk Score	
Inherent risk	5	x	4	20
Current risk	4	x	3	12
Target risk (planned mitigations in place)	3	x	2	6



### Risk Appetite

Our risk appetite for actions to achieve regulatory quality is open, the appetite for actions related to communication and profile is seeks.

Current risk is outside of appetite and needs to be within the amber range to come within appetite.

The target risk will be reached if the outcome of regulatory reform and broader reforms compliments and endorses the multi profession regulation model. This requires successful HCPC engagement and effective messaging.

Current risk level is within risk appetite

### Planned mitigations 2021-22

### progress

🗣️ Online registration functionality project (improved registrant experience) (Q3-4)	➡️ Project initiated
🩹 FTP improvement project	➡️ Tranche one projects complete planning for tranche 2 underway
🗣️ Engage key stakeholders to understand key misconceptions about our regulation and action plan (Q3)	➡️ planning underway
🩹 Tone of voice review project (Q2)	➡️ delayed but interim work is taking place in customer service training
☀️ Incorporate our research on registrants' experiences into employee learning and development and inductions (Q2-4)	➡️ Yet to commence
🗣️ Engaging stakeholders on the provision of mental health support for registrants (Q1-4)	➡️ underway
🗣️ Messaging and dedicated engagement for the Future of Health and Care White Paper & Bill (Q1-4)	➡️ Underway
🗣️ Influence the policy on how consolidation of regulators should align with regulatory reform (Q2 -4)	➡️ Underway

## Risk Likelihood scoring

	Strategic	Programme/Project	Operational
<b>Probable 5</b>	"Clear and present danger" represented by this risk - will probably impact on this initiative - sooner rather than later.	Likely to occur in the life-cycle of the project, probably early on and perhaps more than once.	The threat is likely to happen almost every day.
<b>Possible 4</b>	Likely to happen at some point during the next one or two years.	Likely to happen in the life-cycle of the programme or project.	May well happen on a weekly basis.
<b>Unlikely 3</b>	May well occur during the lifetime of the strategy.	May occur during the life of the programme or project.	May well happen on a monthly basis.
<b>Rare 2</b>	Only small chance of occurring in the lifetime of the strategy.	Not likely to occur during the lifecycle of the programme of project.	Does not happen often - once every six months.
<b>Negligible 1</b>	Extremely infrequent – unlikely to happen in a strategic environment or occur during a project or programmes lifecycle. May occur once a year or so in an operational environment.	Extremely infrequent – unlikely to happen in a strategic environment or occur during a project or programmes lifecycle. May occur once a year or so in an operational environment.	Extremely infrequent – unlikely to happen in a strategic environment or occur during a project or programmes lifecycle. May occur once a year or so in an operational environment.

## Risk impact scoring

	Public Protection	Finance	Reputation	Operations	Strategy	Information Security
<b>Catastrophic 5</b>	A systematic failure for which HCPC is ultimately responsible. Exposes the public to serious harm in cases where mitigation was expected.	Unfunded pressures greater than £1 million.	Incompetence/ maladministration or other event that will destroy public trust or a key relationship.	Services to stakeholders are unavailable for an extended period of time (days)	Strategy rendered invalid	Significant breach of confidential information involving extensive quantities of data. Regulatory investigation required
<b>Significant 4</b>	A systematic failure for which HCPC is ultimately responsible. Exposes more than 10 people to harm in cases where mitigation was expected.	Unfunded pressures £250k - £1 million.	Incompetence/ maladministration that will undermine public trust or a key relationship for a sustained period or at a critical moment.	Services to stakeholders are unavailable for a significant period of time (hours)	Progress on multiple strategic objectives is stopped.	Significant breach of confidential information involving limited quantities of data. Regulatory investigation required.
<b>Moderate 3</b>	A systemic failure for which HCPC is ultimately responsible. Exposes more than 2 people to harm in cases when mitigation was expected.	Unfunded pressures £50,000 - £250,000.	Incompetence/ maladministration that will undermine public trust or a key relationship for a short period. Example Policy U-turn.	Services to stakeholders are significantly disrupted. Services are degraded or responses are slow for an extended period of time (days).	Progress on 1 strategic objective is stopped.	Limited breach of confidential information No regulatory investigation required
<b>Minor 2</b>	A systemic failure which results in inadequate protection for individuals/individual communities, including failure to resolve celebrity cases.	Unfunded pressures between £20,000-£50,000.	Event that will lead to widespread public criticism.	Services to stakeholders are disrupted. Services are degraded or responses are slow for a significant period of time (hours)	Progress on multiple strategic objectives is slowed.	Significant or widespread non-compliance to information security policy by employees. No breach of confidential information
<b>Insignificant 1</b>	A systemic failure which fails to address an operational requirement	Unfunded pressures under £20,000.	Event that will lead to public criticism by external stakeholders as anticipated.	Services to stakeholders are disrupted for a short period of time (minutes).	Progress on 1 strategic objective is slowed.	Minor or one-off non-compliance to information security policy by employees. No breach of confidential information

HCPC Risk Appetite - agreed February 2021

<p><b>Regulatory Quality - Open</b> How will we deliver effective regulatory functions?</p>	<ul style="list-style-type: none"> <li>• Our focus is on long term and lasting quality in our regulatory delivery. We have to take risk and challenge ourselves to achieve positive change. Sticking with a low-risk status quo will limit our progress.</li> <li>• We are open to risks that will further us in our aim of delivering excellent regulatory functions.</li> <li>• We are prepared to try new approaches that do not have a guarantee of success where the potential benefits of success outweigh the consequences of failure.</li> <li>• We proactively seek to reduce public protection risk through the promotion of professionalism and prevention.</li> <li>• The risks we are willing to take do not have a significant chance of long-term negative impacts on our regulatory quality. We accept that in striving for excellence and trying new approaches, short term issues may arise which we will seek to mitigate as best we can.</li> <li>• It is <b>essential</b> that mitigations to ensure ongoing public protection are in place as a foundation of taking risks to improve our regulatory quality.</li> </ul>
<p><b>Compliance – Measured</b> How will we comply with our statutory, regulatory and policy requirements?</p>	<ul style="list-style-type: none"> <li>• We have a preference for safe delivery options that have a low degree of inherent risk and may only have limited potential for reward.</li> <li>• We are willing to take decisions that could be challenged only where we are confident we would be successful in defending against such challenge, and the adverse consequences of being unsuccessful are minimal.</li> <li>• We are willing to take low level risks of negative PSA performance impact given the appropriate controls are in place and we consider the potential benefits are required to maintain or improve our PSA standard performance.</li> <li>• It is <b>essential</b> that the long-term achievement of PSA standards is assured.</li> </ul>
<p><b>Communication and Profile – Seeks</b> How will we be viewed by our stakeholders?</p>	<ul style="list-style-type: none"> <li>• We are eager to be innovative in content and method in order to communicate more effectively, despite greater inherent risk.</li> <li>• We are willing to express our views and communicate on issues where stakeholder opinion is divided, but where the HCPC has a legitimate voice and the Council has an agreed policy position.</li> <li>• In communicating our views, we are willing to accept the possibility of manageable reputational risk or a negative, but not irreversible, impact on a stakeholder relationship.</li> <li>• We acknowledge that being bold in communicating our position may lead to increased scrutiny from stakeholders. We accept this risk as being necessary to enable the HCPC to assert its voice and shape debate in the furtherance of excellence in regulation.</li> <li>• We seek meaningful two-way dialogue with our stakeholders, even where this may pose a risk to our profile due to uncomfortable feedback.</li> <li>• It is <b>essential</b> that the HCPC's voice is not perceived to be party political. The HCPC is neutral as a public body.</li> </ul>
<p><b>People – Seeks</b> How will we lead our workforce?</p>	<ul style="list-style-type: none"> <li>• We are eager to be innovative and to choose options that increase our effectiveness as an organisation despite greater inherent risk.</li> <li>• We are prepared to accept risk as long as there is the potential for improving culture, recruitment and retention.</li> <li>• We want to innovate to improve our culture and working environment.</li> <li>• We are willing to review and restructure where this is needed, accepting the potential for short term disruption in order for the HCPC to benefit from better ways of working.</li> <li>• It is <b>essential</b> that risk taking in this area is consistent with the HCPC's values and culture. As an employer we are committed to upholding and promoting Equality, Diversity and Inclusion.</li> </ul>
<p><b>Financial and Value for Money – Measured</b> How will we use our resources?</p>	<ul style="list-style-type: none"> <li>• We are prepared to accept the possibility of limited financial loss where it does not have the potential to impact on our going concern.</li> <li>• Value for money is our primary concern in financial expenditure but we are willing to consider other benefits or constraints.</li> <li>• We are funded through registrant fees and we have a responsibility to ensure we invest cautiously to minimise loss while maximising benefit.</li> <li>• We accept that investments may be long term and take time to deliver rewards, appropriate benefit realisation monitoring is required to mitigate risk in investments.</li> <li>• It is <b>essential</b> we remain a financially viable organisation to ensure continued public protection through continued operation. Significant financial risks are not compatible with this requirement.</li> </ul>