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Chief Executive's report on organisational performance November 2021

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Executive Summary

This paper provides the Council with updates on the organisation's performance since the September 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.

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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 March 2021.

Strategic priority      This report is relevant to all strategic priorities.

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

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## Chief Executive's Performance Report

November 2021

### *Contents*

1. [Chief Executive's organisational assessment](#)
2. [Stakeholder engagement](#)
3. [Regulatory development](#)
  - 3.1 [Regulatory reform](#)
  - 3.2 [Professional Qualifications Bill](#)
  - 3.3 [Mandatory vaccination of healthcare workers](#)
  - 3.4 [Education quality assurance model](#)
  - 3.5 [Registration responsiveness](#)
  - 3.6 [Standards of proficiency](#)
  - 3.7 [Advanced Practice](#)
  - 3.8 [Returners to Practice Review](#)
  - 3.9 [Cosmetic Practice Review](#)
  - 3.10 [Equality diversity and inclusion](#)
4. [Covid response](#)
  - 4.1 [Temporary Register](#)
5. [Organisational development](#)
  - 5.1 [Corporate Plan 2021-22](#)
  - 5.2 [People Strategy](#)
  - 5.3 [Customer focus](#)
  - 5.4 [New ways of working](#)
  - 5.5 [Estates](#)
  - 5.6 [Finance](#)
  - 5.7 [Digital Transformation](#)
  - 5.8 [Executive Leadership Team](#)
6. *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

## *Improving our core regulatory functions*

Since my last report the Executive has continued to focus on improving registrations performance against our service standards and KPIs in light of the significant above forecast numbers of applications.

The performance data indicate that the mitigations we have put in place, including the allocation of additional resources, are having the desired effect as we have seen the processing times for UK applications return to within service standard. Renewals, readmissions and CPD continue to be processed within service standards.

International applications remains a key focus as applications are not being processed within service standard. Additional resources have been allocated to support the processing of the significant volumes of applications. In parallel, work is progressing to deliver online applications capability which will reduce the amount of manual work associated with processing these applications and reduce processing times. Online applications is expected to be available for international applications in February next year.

It is worth noting that we are seeing renewals rates in line with previous renewal periods. This provides assurance that we are not seeing significant numbers of registrants leaving the workforce which was a potential consequence of the pandemic. It also provides assurance that registrants have been able to complete their registration renewals on time.

As noted, we have seen significant increases in the numbers of applications received. As part of our registrant forecasting, we are working closely with stakeholders to better understand the registrant number drivers which in turn will inform our resource and financial planning.

The FTP improvement project continues to be delivered at pace. Our focus is on ensuring the activities delivered through this project are achieving the expected benefits and performance improvements, both in terms of the timeliness of the progression of cases and the quality and consistency of decisions. We have seen improvements in our Interim Order performance as well as against the quality benchmarks we have set for risk management and case planning. We have also seen improvements against KPIs in the Threshold and Investigations team's caseloads. Also worthy of note is the progress being made with the tone of voice review in FTP, with the second of two workshops recently being held to develop our guidance and approach.

Following approval by the Education and Training Committee of our new education quality assurance model, we have introduced a new regional engagement structure. The purpose of this is to focus our engagement with providers and sector stakeholders through a dedicated HCPC lead for each region. This aims to improve our relationships to promote better information, intelligence and data sharing.

Governance and Finance colleagues continue to work closely with Hays Macintyre and the NAO to complete the external audit and preparation of the Annual Report

and Accounts. This has been a particularly labour intensive exercise this year due to manual processes that have had to be implemented to resolve the income recognition and reconciliation issues resulting from the implementation of the new registration and Business Central system.

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

We continue to be proactively engaged with activities relating to regulatory reform, including the Health and Care Bill, the KPMG review of regulators as well as the GMC section 60 work the DHSC is progressing which will form the template for the review of other regulators legislation.

It is pleasing to see that our proactive engagement on the Professional Qualifications Bill has resulted in the Government bringing forward amendments which maintain regulatory autonomy. This reflects the development of our organisational capability in this area.

I had the privilege of chairing a session at the recent Northern Ireland Confederation for Health and Social Care conference. The session, 'Changing Systems – Changing Regulation – Improving Outcomes' brought together speakers from GMC, RQIA and NISCC to stimulate a discussion about how both workforce and system regulation can work in partnership to support transformation and improvement.

### ***Organisational culture***

There has been significant progress with the recruitment to key positions. Emma Leary and Gareth Davies have recently joined as Head of Policy and Strategic Relationships and Head of Insights within the Professional Practice and Insights Directorate. Appointments have also been made to the Head of Finance and Head of IT and Digital roles. The Head of Finance will be joining on 14 December and the Head of IT and Digital in January.

We have also seen an improvement in our staff retention, with employee turnover now in line with the national average. Ensuring we continue to make HCPC an attractive place to work is a key tenet of our people strategy. In support of this a wellbeing framework and action plan has been developed.

A new ways of working employee survey took place between August and September 2021. The objective of the survey was to help identify any common factors within the organisation regarding the appetite for returning to office-based working, the capacity in which people wished to return, the feelings around working from home and the support required as well as gauging how employees were currently feeling. Of particular note, 84% of respondents said they had a good work-life balance and 61% said the thing they liked most about working at HCPC was the people they work with. 95% reported they did not feel that productivity had been negatively impacted whilst working from home and 90% felt they had the equipment to work safely and effectively at home. There appears to be a strong appetite for formalising a hybrid working approach, with 65% preferring to be in the office for one day a week.

Following the outcomes of the new ways of working employee survey a roadmap for moving to formal hybrid working has been shared with employees, with the intention to launch a pilot earlier in the New Year once the building works for accommodating hearings in 186 Kennington Park Road have been completed.

## 2. Stakeholder engagement summary

### Regulatory reform and Health and Care Bill

HCPC continued to engage with MPs and peers on the Health and Care Bill currently progressing through parliament. Clause 123 of this wide-ranging Bill provides government with powers to make changes to professional healthcare regulators, including moving professions in and out of regulation. We provided written briefing to the Parliamentary Committee held to scrutinise the Bill through October and November and in September we met with Dr James Davies MP to discuss HCPC's position on the Bill and regulatory reform.

Our engagements have had a positive impact, for example, during the debate on Clause 123, HCPC's proposals for regulatory reform were positively referenced by MPs. In addition, a member of the Committee also wrote to Health Ministers seeking further clarification on regulatory reform issues and the use of Clause 123 powers. We have also had positive interest from PA media who we have met to discuss regulatory reform. Further meetings are being sought with Conservative MPs in advance of the Bill going into its remaining stages in the Commons prior to going forward to the Lords.

In relation to the devolved administrations, the Welsh Senedd voted to oppose the powers within Clause 123 of the Health and Care Bill. We wrote to Welsh Health Minister Eluned Morgan sharing with her HCPC's latest thinking on regulatory reform. In December we will shortly be meeting the new Conservative Shadow Health Secretary in Scotland. We are also writing to the Health Ministers of the three devolved nations to provide information about regulatory reform.

Our engagement relating to the Professional Qualifications Bill is set out below.

## 3. Regulatory Development

### 3.1 Regulatory reform

The Department of Health and Social Care (DHSC) are continuing to share draft GMC legislation with regulators for comment. This legislation will form a blueprint for other regulators. We have established an internal working group to review the drafts and have been engaging with other regulators to understand their positions. To date, we have received and reviewed drafting in relation to education and training, registration and governance and we are in the process of reviewing draft provisions relating to fitness to practise.

We continue to advocate for a modernised multi-professional regulatory model with opportunities for greater collaboration and improved efficiency. In September we submitted our response to DHSC's regulatory survey, which outlined our thinking. We have also been carefully monitoring the progress of the Health & Care Bill as it moves through Parliament and engaging with parliamentarians. As a result, our proposals were positively referenced during the debate at Committee Stage in the House of Commons by the Shadow Minister for Health and Social Care.

### **3.2 Professional Qualifications Bill**

Following HCPC's engagement with officials in BEIS, DHSC and with parliamentarians, we are pleased that government has confirmed to us that it will be making two key amendments to the Professional Qualifications Bill in response to our concerns relating to the protection of the public. The two amendments relate to regulator autonomy and create a statutory duty to consult regulators who may be affected by future trade activity/regulations enabled by the Bill. We have expressed our thanks to the teams in BEIS and DHSC who engaged with us on this. We will continue to maintain this engagement and monitor the Bill as it progresses through parliament and will maintain a watching brief on this area as any relevant trade deals are negotiated. HCPC will remain on the Regulated Professions Advisory Forum which meets regularly with BEIS to discuss these issues.

### **3.3 Mandatory vaccination of healthcare workers**

Government's consultation on whether or not to make COVID-19 and flu vaccination a condition of deployment within health and wider social care settings closed on 22 October. On 9 November, government announced it would be introducing legislation to mandate COVID-19 vaccination (although not the flu vaccine). While HCPC's Standards do not require registrants to be vaccinated against COVID-19, we strongly encourage this. Our [response](#) to the consultation set out some of the potential implications and risks relating to mandatory vaccination.

We are seeking clarification from government about the implementation of this policy, noting that government's announcement applies in England only. Details are expected to be set out in regulations that will be laid before Parliament and Government expects the requirement to come into force in April 2022. We are engaging closely with fellow professional healthcare regulators in developing an appropriate response.

### **3.4 Education quality assurance model implementation**

Following the Education and Training Committee's decision to move forward with full implementation of the new assurance model for Education, we are currently in the scale-up phase of this work. This involves a range of communication and training activities for education providers and visitors. For most providers this involves preparing for their engagement with our new Performance Review assessment.

We have also introduced a regional engagement structure within our Education team. The purpose of this is to focus our engagement with providers and sector stakeholders through a dedicated HCPC lead for each region. This aims to improve our relationships to promote better information, intelligence and data sharing.

### **3.5 Registration responsiveness**

As noted in my last report, over 2021 we have experienced an unprecedented increase in the number of applications to join our Register. This resulted in UK applications being processed outside our service standards from July to September. Registration responsiveness has improved since September and from October, we have been back within our 10-day service standard for UK applications. We have remained within our service standard for CPD, readmissions and renewals all year. The renewal rates for professions has been in line with previous renewal cycles.

Our main area of focus is international applications which remain outside of our service standard. This is driving increased phone calls and emails, negatively impacting on our customer service in these areas. The changes we have made over the summer have also improved the performance of our contact centre but there is further progress we need to make.

We have continued with more proactive communication both on our website and social media as well as targeted communication to certain groups. In the longer term, a project to develop online applications has initiated and is expected to enable an online process for international applicants in February 2022 with UK applications following in May 2022.

### **3.6 Standards of Proficiency**

We are currently reviewing the Standards of Proficiency (SOPs) for all 15 professions. As previously noted, we have extended the scope of our review of the following the extent of consultation feedback received. Further engagement has been undertaken with the professions to reach a consensus on the drafting of changes to the SOPs.

The Executive anticipate holding a workshop with the Education and Training Committee in January 2022 to fully explore the feedback received and the proposals for change to the SOPs. The revised SOPs would then be presented to the Council for approval at its March 2022 meeting.

### **3.7 Advanced Practice**

In July, Council agreed that HCPC should take a leading role in developing a shared definition of Advance Practice and the guiding principles for regulation in this area. While we have not been able to progress this work as quickly as we would like, due to the immediate need to respond to regulatory reform work, we are now beginning to scope and plan for the next stages, which we intend to share with Council in March 2022.

### **3.8 Return to Practice Review**

In March 2021, we held stakeholder workshops to explore our initial proposals for change to approach to returners to practice and obtain feedback on the current requirements and process. Workshop attendees included professional bodies, professional regulators, unions, education organisations and the Chief Allied Health Professions Officer for England.

We have also been exploring whether the establishment of standards and the assessment of the additional education, training and experience should change. We should be in a position to be able to reach conclusions on this point and make recommendations by end of 2021. Once confirmed, we will be able to present a proposed revised process and accompanying guidance to Council in the new year, ahead of public consultation.

### **3.9 Cosmetic Practice Review**

The regulatory framework for cosmetic or aesthetic practice is complex and structured around people, places and products. The Department of Health's review

of the regulation of cosmetic interventions identified that many cosmetic interventions are either subject to voluntary assurance measures, or not regulated at all. We know that some of our registrants undertake cosmetic or aesthetic interventions.

We have, therefore, recently commenced a review to identify the regulatory challenges and risks of cosmetic practice and aesthetic practitioners. The outcome of this will inform any policy position that we should take to manage the risk and ensure public protection. We aim to have completed our initial desk-based research and set out a plan and approach for Council to consider in March 2022. This will be developed to inform engagement with relevant stakeholders during 2022.

### 3.10 Equality diversity and inclusion

In October Adrienne Barrowdale joined the HCPC as Equality Diversity and Inclusion Strategic Lead. Adrian will develop our next EDI action plan and have responsibility for ensuring delivery against the EDI strategy. We intend to bring our next action plan for Council approval in the New Year. As previously shared with Council we expect a step change in the proportion of registrant EDI data we hold once the collection of this data is automated through online processes. We have been developing the online registration system to provide for registrants to provide and manage their diversity information, when they register and renew their registration. This functionality is expected to go live in December 2021.

## 4 Covid Response

### 4.1 Temporary Registers

The tables below set out the number of temporary registrants on each of the registers as of 15 November 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*

## **5 Organisational development**

### **5.1 Corporate Plan 2021-22**

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

The Executive are building a longer term planning approach to the delivery of the HCPC's Corporate Strategy 2021-26. In the reporting period a series of themed workshops have taken place internally to develop our Strategy delivery roadmap which will be discussed with the Council at its November 2021 seminar.

### **5.2 People Strategy**

Following discussion of the draft People Strategy at the People and Resource Committee and the Council's dedicated seminar in July The Council's approval of the People Strategy is sought later on today's agenda.

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.

### **5.4 Customer focus**

During November and December 2021 all HCPC employees will take part in in-person 'Becoming a compassionate regulator' workshops. These are bespoke to HCPC's context, ensuring workshops are aligned with our values and corporate priorities and promote understanding of the registrant experience.

### **5.5 New ways of working**

Following analysis of the results of the all-employee survey, a road map for adopting a formalised new hybrid way of working was communicated to all employees on 26 October 2021. This includes an initial pilot stage commencing early in the New Year.

### **5.6 Estates**

The reconfiguration of 186/184 Kennington Park Road (KPR) to incorporate the Tribunals Service relocating from 405 Kennington Road (KR) has been fully designed and construction commenced 1<sup>st</sup> November 2021.

Following the piloting and evaluation of a formal hybrid working approach within the existing estate, the estates workstreams can be further progressed with confirmation of the scoping and shaping phase for the new office space search. We have analysed the optimum floorspace required and this has informed the footprint needed to accommodate the more agile collaborative style of working. The results of the staff survey and experience of remote working over the past 18 months has enabled us to consider a smaller people to desk ratio than was initially considered when initial options were appraised earlier this year.

## **5.7 Finance**

The outturn against budget to end of September 2021 is included in the KPI dashboard. A full management accounts report is included on the agenda for this meeting.

## **5.8 Digital Transformation**

A lot has been achieved with the Digital Transformation Strategy in place and now the new approaches to technical delivery established. These have proved to work and offer HCPC a cost-effective, benefit driven way forwards. An extended update on the benefits realised through digital transformation has been provided to the People and Resource Committee in November 2021.

In the past two months there have been no further stability issues on the Registrations system to report. The focus has been to ensure all existing issues are being resolved. The revalidation and capture of registrant EDI data at the point of renewal is expected to go live at the beginning of December,

IT continue to support the organisation as it looks forwards to pilot hybrid working in the new year with continued roll out of laptops, the addition of more MS Teams boards, improved telephony and connectivity that allows colleagues with laptops to be able to connect seamlessly over wifi, wherever they are in HCPC premises.

The implementation of the new operating model is in progress. HCPC have recruited a Head of Business Change, Paul Cooper, who is now in post, and a Head of IT and Digital Transformation, Geoff Kirk, who joins the organisation in January 2022. The final piece of the Digital Transformation operating model, to improve the Business Application and Testing capability, will be implemented through November and December.

## **5.9 Executive Leadership Team**

Alastair Bridges has been appointed as Executive Director of Resources and Business Performance and will be joining on 17 January 2022. Alastair is currently Director of Finance and Corporate Services at the Independent Parliamentary Standards Authority (IPSA).

As well as including responsibility for the leadership of the Finance, IT & Digital, HR&OD, Office Services & Estates and Business Change functions, the role now includes specific oversight responsibilities relating to improving business and operational performance.

## Appendix A

### Chief Executive – John Barwick

#### Meeting schedule period covering 21 September – 24 November 2021

PSA, Alan Clamp - Chief Executive and Caroline Corby - Chair	21 September 2021
Chief Executives Steering Group	23 September 2021
Unison quarterly meeting	27 September 2021
Academy of Medical Royal Colleges (AoMRC) Patient safety syllabus / advisory group meeting	27 September 2021
Regulated Professions Advisory Forum – DIT/BEIS	27 September 2021
Chief Allied Health Professions Officers – 4 Country	28 September 2021
Institute of Biomedical Science (IBMS), David Wells - Chief Executive, HCPC policy and regulatory developments	29 September 2021
Northern Ireland Confederation for Health and Social Care – Nicon21 Event breakout technical session	29 September 2021
Northern Ireland Joint Regulators' Forum	30 September 2021
NHS Employers - Daniel Mortimer, Chief Executive	30 September 2021
College of Policing – Bernie O'Reilly Deputy Chief Executive	4 October 2021
DWP/DHSC – Fit Notes	4 October 2021
Northern Ireland NHS Confederation Conference – Session Chair	7 October 2021
GMB Union Quarterly meeting	8 October 2021
Carolyn McDonald - Chief Allied Health Professional Officer (AHPO) Scotland - policy and regulatory developments	12 October 2021
Society of Radiographers (SOR), Richard Evans - Chief Executive, HCPC policy and regulatory developments	12 October 2021
NHS England & NHS Improvement – Allied Health Professionals into Action Programme Board	14 October 2021
Chief Allied Health Professions Officer (CAHPO) awards	14 October 2021
Suzanne Rastrick, CAPHO NHS England and NHS Improvement	15 October 2021
Unite the Union Quarterly meeting	19 October 2021

Care Quality Commission (CQC) State of Care online forum	22 October 2021
KPMG Workshop – review of regulators	22 October 2021
Chief Executives of Regulatory Bodies (CEORB) meeting	27 October 2021
The Royal College of Occupational Therapists (RCOT), Steve Ford - Chief Executive	27 October 2021
Health Education England (HEE) - Framework for Health and Social Care - Deliberative Event 1	01 November 2021
PSA, Alan Clamp – Chief Executive, Fees consultation meeting	04 November 2021
Professional Standards Authority Symposium: Bridging the Gaps (Day 1)	08 November 2021
Professional Standards Authority Symposium: Bridging the Gaps (Day 3)	10 November 2021
The Association of Clinical Psychologists (ACP), Prof Mike Wang – Chair	12 November 2021
KPMG – Review of Regulators	17 November 2021
Professional Regulators - Emerging Concerns Protocol	18 November 2021
PSA, Alan Clamp, Chief Executive	19 November 2021
Department of Health and Social Care (DHSC) /HCPC - Emergency register - quarterly meeting	19 November 2021
GMC – Northern Ireland Regulators Forum	22 November 2021

## Chief Executive's report on organisational performance – November 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>	Oct 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>	All but two of the projects in phase 1 of the FTP Improvement Plan have now been completed and moved into the benefits realisation stage. The remaining two projects are the frontloading pilot and the targeted support for threshold cases. Some of the more complex cases in both project areas are still with our external legal providers though we expect all cases to be returned by the end of the year.												
<b>Year to date</b>		Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug21	Sep-21	Oct-21		
	%	0%	0%	0%	13%	38%	63%	75%	81%	88%	88%		

### Education

<b>Measure</b>	<b>KPI 2 - Education Approvals</b>											<b>Period</b>	Oct 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>	KPI 2: Exceeding, but when added to processes completed within four months, this figure rises to 88%. Next return will include new KPIs and figures based on new QA model which was introduced in September.												
<b>Year to date</b>		Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug21	Sep-21	Oct-21		
1	%	88	88	90	92	91	98	98	100	100	100		
2	%	41	45	45	43	44	45	55	63	60	63		

## Registration

<b>Measure</b>	<b>KPI 3 – Registration responsiveness of our registration contact centre (calls, emails, letter)</b>											<b>Period</b>	Oct 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>	<p>We have recovered our performance on postal correspondence.</p> <p>Telephone call answer rates have continued to improve from 51.6% in April 2021 to 73% in October 2021, further improvements are expected in the next reporting period.</p> <p>Our performance against our target of 2 working days for emails is not where it needs to be. This is due to the volume of emails we are receiving. We have received 129,116 emails between January 2021 to September 2021 compared to 64,579 emails during the same period in 2019. This represents a 99.9% increase. To mitigate we have updated the information on our website, set-up a priority email address for those with renewal or registrant enquires (we respond to all these emails within 24-48 hours, seven days a week), managing expectations through the information on our website and being more proactive on social media. Bringing UK applications back within our service standard since October will also help reduce email enquiries.</p>												
<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>	<b>Sep-21</b>	<b>Oct-21</b>		
<b>1: Emails</b>	%	4%	22.6%	0.5%	0%	0%	0%	0%	0%	0%	0%		
<b>2: Calls</b>	%	N/A	N/A	N/A	51.6%	61%	78.7%	72.3%	69%	71%	73%		
<b>3: Post</b>	%	100%	100%	100%	95%	100%	100%	86.3%	0%	59%	100%		

## Customer Service

<b>Measure</b>	<b>KPI 4 - Customer service: Number of complaints and % upheld</b>											<b>Period</b>	Oct 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>	In the reporting period the majority of complaints have related to applications and renewals, and associated issues with communication in Registration. There are complaints about delays from international applicants and from existing registrants who are having difficulties with online renewal or being removed for a failure to renew. A change has been made to the process for referring readmission applications to FTP after a person has been removed from the Register post-renewal to help with the processing of those applications.													
<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>	<b>Sep-21</b>	<b>Oct-21</b>		<b>Monthly average</b>	
	<b>Number</b>	56	38	66	57	43	78	50	68	56	63		57	
	<b>% upheld</b>	44	60	62	63	55	33	48	53	66			54	
<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>	<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>	Oct 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 September and October, we delivered more sessions of 'Joining the UK workforce workshop'. These sessions were delivered to international Radiography and 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>	<b>Sep-21</b>	<b>Oct-21</b>		
%		43	56	54	47	49	N/A	85	N/A	80	100		

## 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>	Oct 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>	Significant overspends in FTP, Registrations and IT are being counter-balanced by savings elsewhere in HCPC. As at 30-Sep there is a 6.8% underspend on payroll and a 2.8% overspend on non-payroll expenses.												
<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>	<b>Sep-21</b>			
YTD Actual		21,346	23,904	28,062	2,407	5,002	7,768	10,060	12,957	15,752			
YTD Budget					2,924	5,757	8,721	10,328	13,092	15,998			
YTD Forecast		21,944	24,339	26,744									
YTD Variance		598	750	(1,318)	517	755	953	268	135	245			
Actual as % of budget		97.3%	98.2%	104.9%	82.3%	86.9%	89.1%	97.4%	99.0%	98.5%			
<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>	Oct 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>	System availability has remained stabled and consistent 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	Sep-21	Oct-21		
	Availability %	100.00	100.00	99.98	99.98	100.00	100.00	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>	Oct 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 system breaches have been reported or detected during the reporting period.												
<b>Year to date</b>		Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21		
	Number	0	0	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

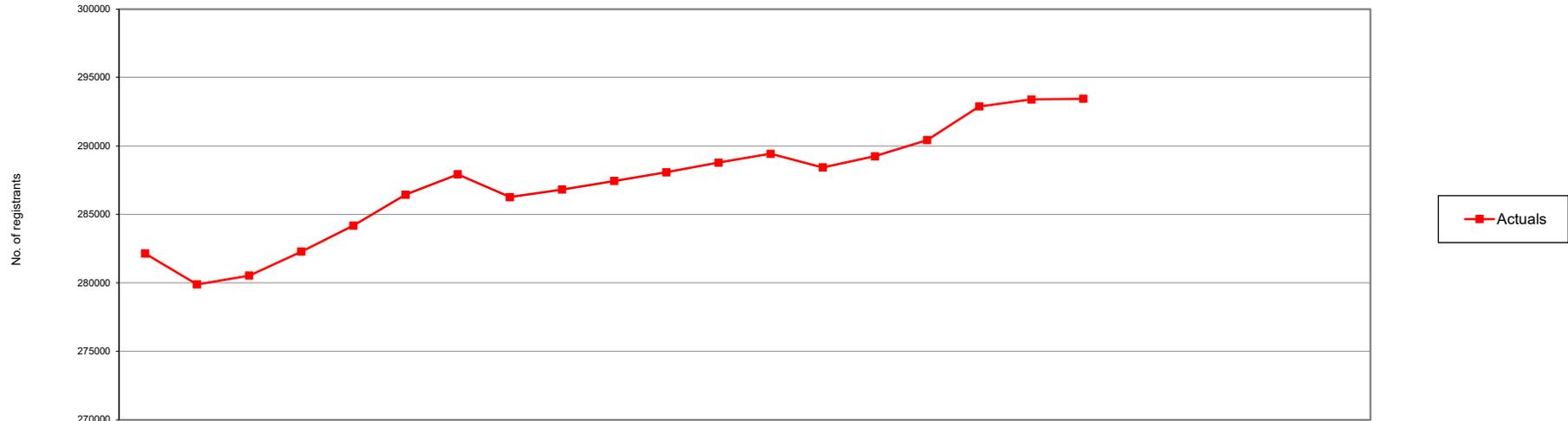
## HR

<b>Measure</b>	<b>KPI 9 - Voluntary staff turnover Target: &lt;15%</b>											<b>Period</b>	Oct 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>	We continue to report a similar turnover rate for September and October, with a small reduction in October. We are reviewing a number of retention initiatives as well as benchmarking this data against other regulators to gather information as to whether this turnover is common in the sector.												
<b>Year to date</b>		Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21		
	%	42	38	36	40	40	43	46	52	27	25		
<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>	Oct 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>	Our average number of days of sickness lost is based on a rolling year period. Generally, there has been a decline in sickness, but we do note a small increase from August onwards.												
<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>	<b>Sep-21</b>	<b>Oct-21</b>		
	%	6	4	4	4	4	4	5	5	3	3		
<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

Registration Department

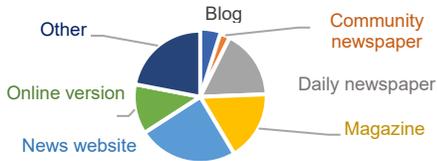


	2020			2021									2022						16/17	17/18	18/19	19/20	20/21	21/22							
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	FYE	FYE	FYE	FYE	YTD	YTD	
<b>Arts therapists</b>	4,790	4,792	4,356	4,462	4,619	4,708	4,759	4,740	4,750	4,775	4,795	4,805	4,811	4,823	4,836	4,851	4,934	5,018	5,097							4,026	4,322	4,432	4,784	4,805	5,097
<b>Bio. scientists</b>	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	24,417	24,569							22,902	22,395	23,284	23,064	23,807	24,569
<b>Chirops/ pods</b>	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	12,527	12,553							12,931	13,115	12,833	13,039	12,394	12,553
<b>CI scientists</b>	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	6,327	6,496							5,663	5,818	6,207	6,344	6,675	6,496
<b>Dietitians</b>	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	10,497	10,549							9,107	9,585	9,722	10,207	10,161	10,549
<b>Hearing aid disps</b>	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	3,496	3,528							2,593	2,908	3,047	3,338	3,377	3,528
<b>OTs</b>	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	41,978	39,225							38,080	38,183	39,925	40,062	41,290	39,225
<b>ODPs</b>	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	14,691	14,851							13,052	13,639	13,903	14,421	14,449	14,851
<b>Orthoptists</b>	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	1,445	1,453							1,451	1,440	1,496	1,489	1,514	1,453
<b>Paramedics</b>	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	31,201	31,705							23,992	25,465	27,686	29,139	30,965	31,705
<b>Physiotherapists</b>	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	60,374	60,868							52,915	55,132	55,695	58,133	58,223	60,868
<b>Pract psychs</b>	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	25,275	25,695							22,604	23,104	24,290	24,783	25,894	25,695
<b>Prosth/orthotists</b>	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	1,072	1,089							1,063	1,051	1,101	1,090	1,113	1,089
<b>Radiographers</b>	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	38,585	38,865							32,072	32,475	34,470	35,002	36,877	38,865
<b>Social workers</b>	0	0	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
<b>SLTs</b>	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	16,488	16,906							15,935	15,932	16,595	16,572	17,231	16,906
<b>Total</b>	282,141	279,893	280,530	282,285	284,185	286,437	287,917	286,255	286,810	287,438	288,068	288,775	289,421	288,428	289,244	290,423	292,872	293,391	293,449							350,330	361,061	369,139	281,467	288,775	293,449

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

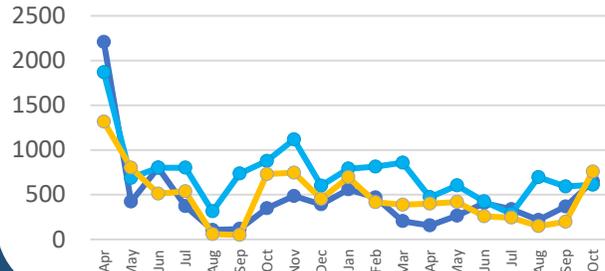
## Media coverage

41 mentions

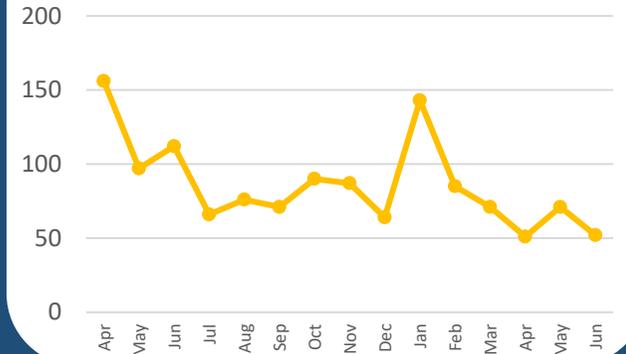


## Social media engagement

f 650    t 611    in 758

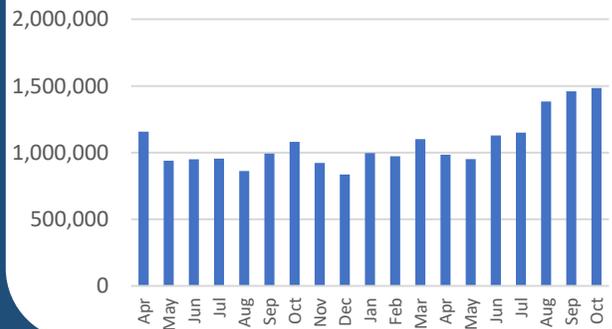


## Policy queries



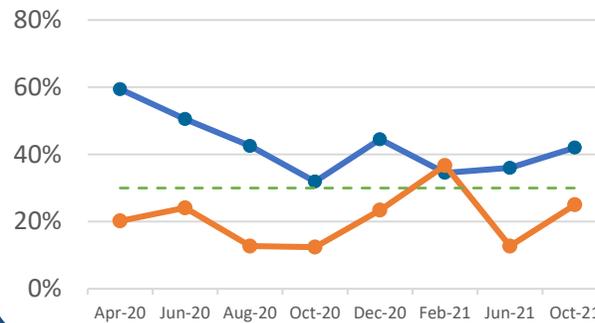
## Website

1,459,073 page views    229,854 unique users



## In Focus

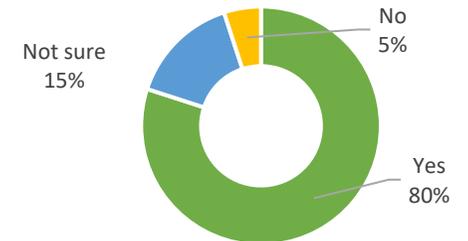
Open rate    Click-to-open rate



## Joining the UK Workforce workshops (Sep 2021)

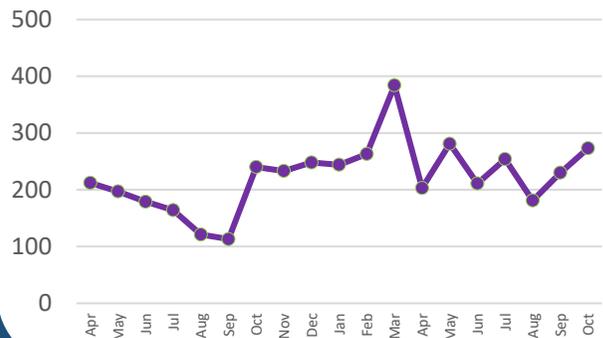
## Events

'Will your practice change as a result of information gained in the session?'



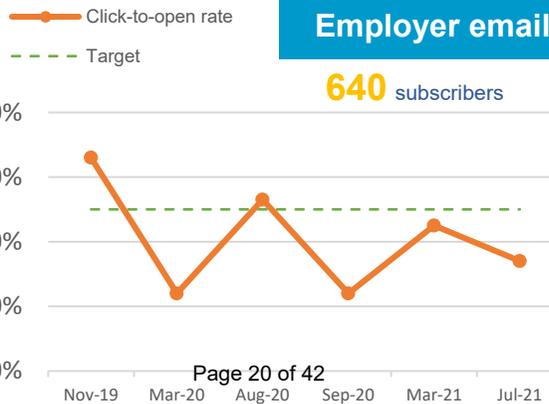
## Employer hub

Visits



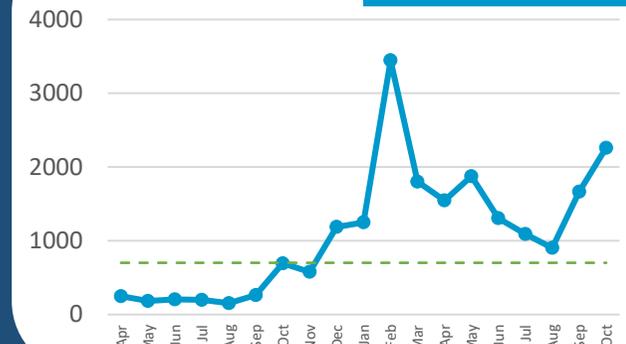
## Employer email

640 subscribers



## Student hub

Visits    Target



Chief Executive's report on organisational performance - November 2021

Appendix C

Corporate Plan 2021-22

Deliverables Progress Report November 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>Improved 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 Q3 Q3 Q4	<p>Went live on 7 June 2021.</p> <p>Formal QA of the risk assessments and case plans to take place between Sept-Oct.</p> <p>Phase 2 development initial scoping will commence by end of November.</p>
	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 plan, all cases due to be returned by the end of the year.
	A3	Legally qualified Chairs introduced at ICP.	Q1	<p>Efficiency savings – circ £74k in 2021-22 and £80k in 2022-23.</p> <p>Reduced NWF cases at HCPTS (currently 25%)</p> <p>Improved quality of ICP decisions and determinations</p>	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	<p>Efficiency saving circa £1k per case in pilot</p> <p>Improved quality of case management – reduced percentage of NWF at HCPTS stage</p>	Q4 Q4 onwards	Progressing to SLA and plan, mini evaluation commenced in September. 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> <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>	B1	UK Applicants will be able to register online	Q1 22/23	<p>Improved User Experience for UK Applicants</p> <p>Increased EDI data capture</p> <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)</p>	Q1 22/23 onwards	Discovery exercise during September undertaken to establish an implementation approach for an Online User Experience starting with international applications. The initial approach centred around UK online applications, but this was adjusted to meet the current priorities and calendar. The objective is to achieve a minimal usable product with validation for accessibility by February for international applications and May for UK applications.
	B2	International applicants will be able to register online.	Q4	<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 £100ksavings)</p>	Q4 onwards	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> <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>	C1	Delivery of pilot	Q2	Pilot completed on time, producing full evaluation of benefits realised through new model	Q2	Complete, presented to ETC, Sept.
	C2	Decision on full implementation	Q3	ELT / ETC positioned effectively to decide on full implementation of new model	Q3	Complete - 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	Scale up activities have commenced and on track.

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	Complete.
	D3	Commence increase partnership working & support for identified employers	Q3	Influenced the creation of supportive cultures and working environments within identified employers	Q4 22/23	Demand on healthcare means delivery of services has been prioritised over cultural development by employers. Continue to keep under review and reengage in new Year.
	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 22/23	Recruitment commenced for a second Professional Liaison Consultant to be based in Scotland
	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. Two events delivered and third event on track to be delivered in mid-November.
	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	Complete. Joining the UK workforce programme developed and now delivered as BAU. 7 workshops delivered this year.

Strategic theme 3 – Develop insight and exert influence		Target delivery	Benefit measure	Benefit target	RAG and Comment	
Key milestones						
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	Q3 22/23	Commenced in Q3. Start delayed due to 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	Professionalism – positive impact reported by our stakeholders in relation to the resources available on our website/delivered through our liaison work  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	Q2  Q4	Continue to provide thought leadership on reg reform (influence on clause 123 debate in committee stage) and influencing PQB.  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). Our stakeholder perceptions survey was launched in mid-October, remains open to end of November.
	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. Planning next stages for Advanced practice.
Developing our data, analytics	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	Complete. Approved at September Council.

<b>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.	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, in line with I&I framework.
	F3	Priority reporting needs defined and agreed	Q4	Working data platform, ingesting all HCPC data sources. Skilled users gaining new insights	2022-23	I&I framework sets out key analytical priorities. Data platform dependent on budget prioritisation.
	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 22-23	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.	Q1 22-23	As above

Strategic theme 4 – Be visible, engaged and informed		Target delivery	Benefit measure	Benefit target	RAG and Comment	
Key milestones						
<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	On track. Relationship Manager approach being embedded. engagements with key stakeholders in Wales and Scotland in place.  Recruitment underway 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 launched mid October.
<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	On track. Survey complete. Communication plan in place, profession specific fact sheets due to be published in November.
				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	Complete, EDI group rep group established, meeting regularly and developing work programme.	
H3	Commence implementation of EDI action plan	From Q1	Realisation of the HCPC EDI strategic objectives	Q4	EDI strategic lead started 4 October. Key priority to develop and deliver action plan. Roadmap to deliver strategy due to ELT December and Council in New Year.	

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 HCPCs 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	Approved by PRC in September and will be presented to 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	On track - title of workshops changed to 'Becoming a compassionate regulator', commencing in November.
	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 APDRs and the responses to employee satisfaction and pulse surveys.	Q4	Complete. New values are now on E Perform (online APDR system). Behaviours finalised and were launched in September and have been linked 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	On track - All policies due to be reviewed by year end.
	I5	Succession planning and career development plans agreed	Q2-4 22-23	There is continuity of delivery, staff are motivated as they can see clear progression paths and are trained appropriately.	2023-24	This has been incorporated into the new People Strategy and is on track to be delivered within the first phase of the People Strategy.
<b>Pursuing our Digital</b>	J1	New Case Management System launched	Q1	See A1	Q1-4	See A1.

<b>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	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 B1	Q2-3	See B1
	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. Although the start of the main implementation has been pushed back, this will be an ongoing iterative process and resourcing pressures, which have slowed progress have now been alleviated. Activity is being scoped for implementation in Q4 and quick wins around promoting content on Social Media are being implemented
	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. Pushed back from Q2 to Q3 in order to focus on the recruitment of the two heads of department, which has now been completed.
<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	Not initiated

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	Stakeholder mapping and professional body engagement agreed.
	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	Compassionate reg workshops being rolled out to all staff in Nov/December. Tone of voice review commenced in FTP, on track to be completed in Q4.
	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	Compassionate regulator workshops being rolled out to all staff Nov, Dec. Film included in all training sessions.
	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	Ongoing, for example – engagement with AACE and COP leading to suicide ideation statement. Additional signposting of resources added to FTP area of website to support registrants in process. H&C updated in relation mental health. Continue to promote through PL events.
<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,	From Q1			On track. Written submission to H&C Bill committee and influence on committee debate.

		including responding to the Health & Social Care Select Committee inquiry				
	M4	Influence the policy on how consolidation of regulators should align with regulatory reform	Q2			On track, see above.

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

### Appendix D

#### Strategic Risk Register November 2021

# HCPC Strategic Risks

## Summary of strategic risks

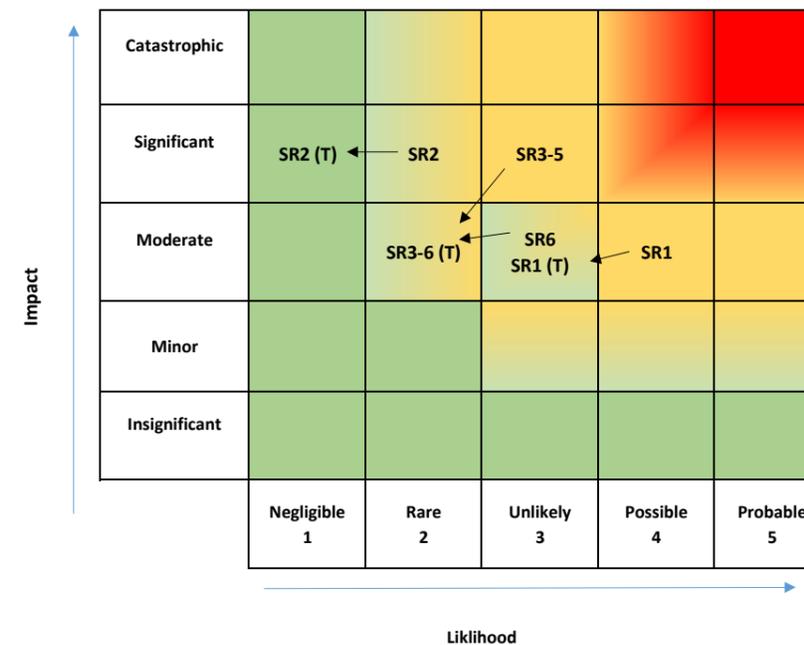
Strategy	Strategic Risks - High Level	Risk Description	Nov-21	Target Risk*
1 - Continuously improve and innovate - To improve our performance against PSA standards of good regulation and to innovate across all our regulatory functions to provide an enhanced user experience.	1. Our performance does not 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	8	4
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.	12	6
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.	12	6
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.	9	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**

**Review date**  
Nov-21

**Risk owner**  
SMT Lead - Executive Director of Regulation

**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.
  - Registration system issues resulted in increased contact rates impacting customer service responsiveness. Registration office based working has increased to mitigate infrastructure limitations.
  - 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.
  - Mitigations in place have returned processing service standards to expected levels for readmissions and UK applications. Focus is now on International service levels, along side this a process review will initiate shortly to mitigate a repeat of service issues.
  - Online applications project has commenced, International applications est close of Q4 and UK close of Q1 2022-23.
  - Pandemic impact progression of cases due to pressures on health sector.
  - The second tranche of FtP Improvement projects are in delivery, remaining focus on embedding of tranche 1 benefits.
  - Pilot for new Education QA model completed and ETC approved full implementation, currently in full roll out preparation.
  - First successful in person hearings held post pandemic restrictions outside of the closed 405 tribunal centre. Permanent legislative provision for remote hearings progressing with consultation currently live.

	Impact	Likelihood	Risk Score	
<b>Inherent risk</b>	5	x	5	<b>25</b>
<b>Current risk</b>	3	x	4	<b>12</b>
<b>Target risk (planned mitigations in place)</b>	3	x	3	<b>9</b>

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 green/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. 2. 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 one level outside of risk appetite

- 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.

Planned mitigations 2021-22	progress
New Education Quality Assurance Model project (Q1-4).	ETC approved implementation, currently in full scale up phase.
PSA standard improvement action plan (PSA Action Plan Working Group) (Q1-4).	Action plan for 2021 produced and being monitored.
New FtP Case Management System (improved performance data visibility). (Q1-4)	Phase one complete system launched and in use. Phase two initiating November 2021.
Registration workplan includes review of international process. (Q3)	Initiating.
Online applications project	Initiated, international expected Q4, UK Q1 2022-23.
FtP Improvement Plan (FtP Q1-4).	On track second tranche of projects being delivered with a continuing focus on embedding from first tranche.

**Reporting period commentary**  
Risk influencers - reflect that registration service levels have returned to those expected for UK and Readmissions, focus is now in returning international applications to within normal limits. Wider review of international processes has commenced to better ensure we can manage spikes in volume in future. Influencers also reflect that the FtP Improvement Programme has progressed to its second tranche of projects having completed the first. A focus on benefits realisation from these first projects will continue.  
Risk score – no change in this iteration due to the negative impact of registration service issues. However due to our positive progress in FtP and Education and our plans to improve Registration, we expect our current score to reduce at the first review in 2022.

**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 and recruitment for dedicated Scotland resource underway.
- Following a period of vacancies the new Heads of Policy and Strategic Relationships and Insights and Intelligence have joined the HCPC.
- Public facing materials in place to support registrant understanding of standards requirements.
- Timetable for review of SOPs established with March 22 approval target.
- Review of cosmetic practice regulatory approach launched.
- Reflective practice guidance and supervision toolkit resources published.
- Review of SCPE not yet initiated due to resource prioritisation and longer timetable for SOPs review.

**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**

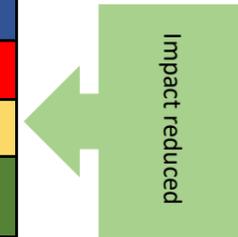
Risk influencers - reflect key post holders now in place to drive forward development work. Cosmetic practice review has commenced and clear timeline in place for completion of SOPs review. The recruitment of a PL consultant focused on Scotland is also a positive influence.

Risk score – impact reduced as we are confident that the actions we are taking and the mitigations in place already would lessen the impact of reputational damage from an identified weakness in our standards. We are also confident we are doing the right things to avoid an unforeseen weakness. However continual review and vigilance are at the heart of our approach to enable this confidence.

Review date
Nov-21

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

	Impact	Likelihood	Risk Score	
Inherent risk	5	x	5	<b>25</b>
Current risk	4	x	2	<b>8</b>
Target risk (planned mitigations in place)	4	x	1	<b>4</b>



**Risk Appetite**

Our risk appetite for actions to achieve regulatory quality is open, the appetite for actions related to communication and profile is seeks. This makes the risk appetite target level within tolerance if below amber. 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) → Seminars held for students and international registrants.
- Increase partnership working & support for employers (Q3) & Develop employer hub & e-newsletter (Q4) → Dedicated employer hub is in place and materials are in development.
- Professional liaison service developed and expanded (Q4) → Team established and recruitment for dedicated Scotland resource underway.
- 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 review aiming for March 22 approval
- Review of our regulatory position on aesthetic/cosmetic practice (Q4) → Review has initiated
- Programme of #MyHCPCstandards events (Q4) → Events underway, positive feedback received.
- 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)**

**Review date**  
Nov-21

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

**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**

- 1st in house statistical analysis report on EDI data was published in September 21.
- % of registrant EDI data held has improved to 18% but this is still comparatively low
- Project to capture registrant EDI data through the registration online system has launched and capture through renewal is due to go live in December 21.
- Training on PowerBI for c.30 employees has taken place to upskill across all departments.
- Insights and Intelligence Framework setting out priorities and approach for data analysis approved by Council September 21 now in delivery.
- Potential for partnership funding to improve our data capabilities being explored.
- Head of Insights and Intelligence is now in post to lead the HCPC's work on improving data use.
- Budgetary constraints limit our ability to establish systems/platform. Interim solutions are being explored.
- Future structure and skills needed within IT and Infrastructure agreed.

**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**

Risk influencers – recognises Head of Insights and Intelligence is in place, that HCPC has published its first analytics report and that discussions are underway on the potential for partnership funding to develop our data capabilities. Recent PowerBI training has also upskilled key roles across the HCPC. A key influencer is that the Insights and Intelligence framework has been approved by Council and is now being implemented. This sets out our priorities for data analysis and where development resources will be focused. The launch of the online registration project will also be a great benefit in terms of data collection capabilities, and we expect that when in operation it will greatly increase the % of EDI data we hold for our registrants.  
Risk score – Impact score has been reduced given the interim arrangements we have in place in the absence of a full data platform.

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



**Risk Appetite**

Our risk appetite for actions to achieve regulatory quality is open, the appetite for actions related to communication and profile is seeks. These categories are not a direct link however and consideration is needed of the future expectations for data use in regulation and that we are at the start of our development in this area. . Therefore our appetite for this risk is to be within the green-amber scale rather than a higher 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 one level 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) → This will be progressed in Q3/4 by the Head of Policy who joined the HCPC early November.
- 🔭 Insight & Intelligence framework development (Q2) ✓ Approved by Council September 21
- 🌟 Online applications project (Q4) → Project will enable more systematic data collection. Project initiated
- 🌟 Deliver IT systems and operating model that allow HCPC to become more predictive in its use of data (Q4) → The data platform will not be progressed in this financial year due to resource requirements. Framework and priorities are in place for enhancing our capabilities without the platform.

## 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

- An interim stakeholder CRM has been developed within our current infrastructure to improve stakeholder engagement management and insights. Relationship managers system agreed by ELT and being implemented with agreed prioritisation. Head of Policy and Strategic Relationships joined HCPC Nov 21.
- Positive engagement in public affairs, HCPC submitted evidence to scrutiny committee on Professional Qualifications Bill and has been referenced in dispatches.
- ⊕ Operational functions not resourced to respond as quickly as other regulators to urgent Government needs.
- Regional engagement approach implemented within our education team to build greater understanding of regional differences in education provision.
- Positive engagement across the 4 nations in the reporting period. Recruitment for specific Scotland resource for PL team underway.
- ⊕ % of registrant EDI data held has improved to 18% but this is still comparatively low and complainant data not held. HCPC has not met the PSA standard for EDI due to this limitation.
- Project to capture registrant EDI data through the registration online system has launched and capture through renewal is due to go live in December 21.
- First analysis of EDI data across our 15 professions published Sep 21 with associated promotion. EDI strategic Lead has joined the HCPC and is taking forward the EDI action plan development
- ⊕ Service responsiveness within registration impacting negatively, forms a risk to HCPC reputation.

### 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

Risk influencers reflect development of our communications approach and that a number of key posts have been filled with post holders in place. We have also developed an interim CRM solution which we are confident will improve our ability to capture insights from our engagement. We have also undertaken refreshed stakeholder mapping and engagement prioritisation.

Risk Score – Impact has reduced due to the developments in both EDI and our stakeholder engagement management. The risk score remains relatively high however due to HCPC not meeting PSA standard 3 relating to EDI which is part of this risk.

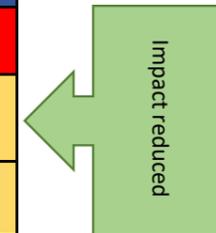
### Review date

Nov-21

### Risk owner

SMT lead - Executive Director of Professional Practice and Insight

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



### 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 green/amber range to come within appetite.

To meet our target risk our new engagement approach needs to embed which involved organisation wide relationship managers, an 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 one level outside of risk appetite

### Planned mitigations 2021-22

### progress

- |  |   |  |
|--|---|--|
| 📊 Stakeholder perceptions survey. (Q2)   | ➡ | Currently live   |
| 📢 Increase partnership working & support for employers. (Q3)   | ➡ | Dedicated employer hub is in place and materials are in development.                               |
| 📊 Analysis of data from second annual diversity data & publishing our 2021 Diversity report. (Q2)        | ✓ | Published and promoted in September 21   |
| 🌟 Development and implementation of EDI action plan. (Q2-4)  | ➡ | Status review of the plan completed by QA. New EDI lead is in place and taking development forward |
| 📄 Project to capture diversity data at initial point of registration and renewal. (Q4)                   | ➡ | Project for online applications has commenced.   |
| 📢 Quarterly meetings with professional bodies to ensure 2-way dialogue on areas of mutual interest. (Q3) | ➡ | First meetings in September.   |
| 📄 Communications team structure review (Q3)  | ➡ | Two of three Communication Business Partners recruited, third is live.                             |

## 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**
- Longer term approach to business planning is a focus, mapping of the delivery of the 5 year strategy progressing and clear timetable in place for Corporate Plan and Budget approach in March 2022. Income strategy development commenced.
  - Specialist consultancy engaged to max benefit from any 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. Possible funding for data development from partnership.
  - 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 results positive and formalising hybrid working as normal is underway.
  - First two tranches of HR policies reviewed based on prioritisation of impact.
  - Project to enable online applications has commenced, international applications close of Q4 and UK close of Q1 22.
  - 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 Resources and Business Performance recruited and expected to join in Q4. Head of Finance and Head of IT posts recruited to and due to start with HCPC in Q4. Until join no financial specialism on ELT.
  - Delays to external audit poses a risk to the compliant laying of the Annual Report and Accounts for 2020-21, this forms a reputational risk

- Mitigations in place**
- Adherence to budgeting and financial management and reporting processes which are subject to internal and external audit e.g. NAO. Medium-Term Financial Strategy incorporating an efficiency action plan.
  - 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 influencers – our focus on longer term planning is reflected as well as the development of a number of workstreams, for example estates and people strategies. A number of key posts have been filled including the ED of Resources and Business Performance however these are not yet in post. We are confident strong foundations are being laid for improving our culture through the people strategy but this is still to be approved and implemented. The score therefore has not changed on this review. Ongoing issues with the registration and finance system integration and the delay to the external audit this year also keep this risk relatively high.

**Review date**  
Nov-21

**Risk owner**  
SMT - Chief Executive

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

No change

**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/green 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 one level outside of 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) | ➔ Inegration compelted. Compassionate regulator workshops will take place in Nov and Dec 21                                 |
| ■ All HR policies reviewed and modernised & succession planning and career development plans agreed. (Q2-4)                                    | ➔ first two high priority tranches reviewed and implimented.  |
| ■ Fee Income Strategy. (Q4)  | ➔ Development underway ED Resources and Business Performance 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 in place 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

Review date

Nov-21

Risk owner

SMT lead - Chief Executive

### 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

- HCPC has effectively engaged with the KPMG review through workshops and with our own stakeholders. Increased confidence on the timing of regulatory reform for HCPC. Working group meeting weekly to oversee HCPC activity and engagement on reg reform this includes a dedicated policy resource to enable HCPC to feed into legislative drafting.
- 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.
- 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 - Mitigations in place have returned processing service standards to expected levels for readmissions and UK applications. Focus now on International service levels, alongside this a process review will initiate shortly to mitigate a repeat of service issues.
- Potential for partnership funding to improve our data capabilities.
- Positive engagement all devolved administrations in reporting period on the value of the temporary register.
- Compassionate regulator workshops being held with all employees attending.
- Stakeholder perceptions survey is live.
- Project to implement online registration capability has launched, first delivery expected Q4 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. The ongoing service issues in registration are a negative impact on this risk as customer experience is impacted. Regulatory reform is progressing and the HCPC has been engaging effectively with a number of stakeholders including the KPMG review. A working group is meeting weekly to steer the HCPC's activity and engagement on regulatory reform with a dedicated policy lead in place. Risk impact has reduced due to increased confidence in the oversight arrangements in place to ensure we are engaging effectively on reform.

	Impact	Likelihood	Risk Score
Inherent risk	5	x 4	<b>20</b>
Current risk	3	x 3	<b>9</b>
Target risk (planned mitigations in place)	3	x 2	<b>6</b>

Impact reduced

### 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 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) (Q4) → Project initiated
- 📄 FTP improvement project → Tranche 2 projects underway
- 🗣️ Engage key stakeholders to understand key misconceptions about our regulation and action plan (Q3) → Survey is live
- 📄 Tone of voice review project (Q2) → An FtP specific project has launched as part of tranche 2 of FTP improvement. SRO assigned for registrant health and wellbeing strategy
- ☀️ Incorporate our research on registrants' experiences into employee learning and development and inductions (Q2-4) → Underway will also form part of the compassionate regulator workshops
- 🗣️ 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 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>