# Chair's Report – March 2022

## 1. Purpose of Report

To update Council about the Chair's activity and developments on HCPC issues and to give colleagues an opportunity to update Council on projects and initiatives referenced herein.

health & care professions council

### 2. Reform – and COVID-19

For many organisations, including the HCPC, hybrid working is here to stay. We are planning to ensure that working for us is an attractive prospect and, while our financial envelope (more constrained than some) poses necessary limitations, we aspire to offer life-work balance, benefits employees most value, and a conducive environment (physical and virtual) that is second to none. Our plans for property are being made on that basis.

Clearly, the way we work as well as where, has also changed. Virtual hearings have become mainstream, we have a temporary Register that can be switched on an off and the boundaries of where we recruit from – whether for ourselves or in being an active registry for growing the UK health and care workforce – continue to evolve and expand.

The nature of regulation is on the cusp of change too. The essential technical amendments to modernise healthcare regulators' legislation proceeds and whilst we might all wish for an overnight transformation; the Department of Health and Social Care remains focused on getting us there. The HCPC has carefully considered how we regulators could work together within and beyond the immediate system. Our framework for collaboration is designed to increase efficiency, decrease the risk of missing serious indicators, promote best practice, optimise the value of data and above all, improve patients' and service users' experience. I was encouraged by the Secretary of State's message of reform, delivered in a speech on March 8. This could augur well for the exercise of powers under the Health and Care Bill.

Finally, we have not seen the last of Covid-19 and it continues to have impacts on colleagues, family, friends, and the wider workforce – whose wellbeing must remain a priority. The purpose of our staff development day this March is to show everyone in the organisation our gratitude for their contribution over the last two years, showcase registrant talents and learn about issues of special interest and importance. It should be brimming with wellbeing!

Contingency planning too, has taken on a new meaning and we must remain vigilant and ready to deal with future systemic shocks. World events and global connectedness mean that this possibility is an imminent reality; but it is the

existential crisis we face in climate change that demands of us all, a resilient, sustainable, and positive, personal, and professional response.

# 3. Capacity and capability

### **Appointments**

Two of our three new Council Members (one was suffering from Covid) and both new Apprentices were able to join us for our first full meeting of the year in February.

These newer members are already adding value through their insights and input to committees. The three Council joiners, plus two existing registrant members, will be giving talks at the All-Employee Day on March 11.

#### 4. Communications

The Secretary of State for Health and Social Care delivered an inspiring speech on March 8, which he based on the premise that, 'the road to recovery is the road to reform', calling for a health service and not just a hospital service. The outcomes of these excellent intentions will of course be determined by the resources, implementation plan, leadership and collaboration of the sector and its agencies.

Hopefully, this purposeful reform will also be reflected in the messaging that accompanies the Health and Care Bill and reform will be carried forward in a coherent whole, rather than the piecemeal fashion about which concerns have been raised by peers and MP's during the passage of the Bill.

### 5. Strategy and Finance

#### 5.1. Sustainability

With the arrival of Alastair Bridges to complete the Executive Leadership team, the focus on financial sustainability is reinforced. This will include a carefully calibrated fee rise, so that HCPC can continue to deliver its statutory obligations and make the experience of being a registrant as smooth and supported as possible. The inherent risks in the future budget – notably those that cannot be controlled by the HCPC (including the costs of implementing regulatory reform and the potential financial impact of the NMC legal case with its partners) are being balanced with mitigations, some of which would be realisable in-year, if necessary. The Executive may have to slow the pace of delivering certain projects and will monitor expenditure lines to ensure they continue to be appropriate and affordable.

There are also some material decisions to be taken in light of hybrid working and property, which Council will evaluate with great care.

Alastair has introduced permanent business partners from within the finance department and they will work with each area of the organisation to embed new processes (which are desirable in respect of future 'Business Central' finance software implementation) and coach teams so that forecasting and management information reporting become uniform and routine.

# 5.2. Fitness to Practise (FtP) Improvement Board

The next Improvement Board (which I chair) will be on March 11. These are useful occasions on which to ensure that the expectations of the oversight regulator can be clarified, and their feedback obtained.

We are starting to monitor 'real time' case performance metrics and to take a view on projected performance.

HCPC remains keen to have learning that the PSA can share from other regulators and any best practice the PSA has seen around FtP Standards.

I was delighted to read that the PSA is said to be introducing a Board Apprentice scheme, which is what we at HCPC have championed and found to be hugely enlightening and beneficial.

# 6. Chair's meetings - overview

Regular internal meetings, such as weekly catch up with CEO, SMT, Committee Chairs, attending Committees, are not included.

My recent meeting with the GMC Acting Chair, Professor Dame Carrie McEwan, covered a wide range of topics: regulatory reform, values and behaviours (she had received and was most interested in, our HCPC framework), various correspondence, the Messenger review on leadership and the question of whether healthcare regulators should be required to hold registers of practitioners' interests.

Below is the key extract from the Minister's speech on 8 March, the latter part being most relevant to the HCPC, as the intention is to apply this to all health professionals once the arrangements for doctors have been implemented this summer.

### Extract:

Lord Kamall: I hope she (the Baroness Cumberlege, who withdrew an amendment) agrees that we now have a shared approach to increasing transparency around the interests of doctors and other healthcare professionals. We agree that information on healthcare professionals' interests will be most accessible to patients if it is published by healthcare providers rather than by the relevant professional regulator, including the GMC; we are now taking that forward. My department will work across the devolved Administrations to implement a system for all healthcare professionals to declare their interests. We have set up a series of working groups, prioritising the implementation of a system for doctors to declare their interests before moving on to other healthcare professionals. We hope to have a system for doctors by July 2022.

I have met with the civil servant whose team has developed the new form of Cabinet Office Reviews, just about to be trialled. There is a move to standardise more of how Arm's Length Bodies and their equivalent operate; it is useful to be aware of emerging thinking.

Other meetings include a Group Director of AHP's in a large London hospital, follow up conversations on regulatory reform, last year's and this year's HCPC Apprentices, new Council members.

I attended discussions on levelling up; leadership transitions; engaging communities in public service delivery(which I chaired); 'From the Matrix to the Metaverse'; 'Hospitals, Technology and the Future'.