

---

## Fitness to Practise Performance Report

---

### Executive Summary

This paper is to update Council on the progress of the Fitness to Practise (FtP) Improvement Plan against the targets we set ourselves on improving quality and timeliness of case management.

This paper also includes a brief update of the projects we started in September 2021 following the successful completion of the first 16 projects in July 2021.

---

Previous consideration	Standing item (as of February 2021) to update Council on the progress of the FtP Improvement Plan.  Oversight of the progress of our FtP Improvement Plan is also provided by the FtP Improvement Board.
Decision	Council is asked to note the update.
Next steps	The next report on progress will be provided to Council on 21 July 2022.
Strategic priority	Strategic priority 1: Improve our performance to achieve the Professional Standards Authority's Standards of Good Regulation.
Financial and resource implications	None as a result of this paper.
Author	Laura Coffey, Head of Fitness to Practise <a href="mailto:Laura.coffey@hcpc-uk.org">Laura.coffey@hcpc-uk.org</a>
Sponsor	Andrew Smith, Executive Director of Regulation <a href="mailto:Andrew.smith@hcpc-uk.org">Andrew.smith@hcpc-uk.org</a>

## Fitness to Practise Performance Report

### 1. Introduction

- 1.1 Improving our performance in Fitness to Practise (FtP) remains a priority for the HCPC in 2022. The focus remains on embedding the changes we made during 2021 and continuing to make further improvements.
- 1.2 Our overarching aim is to improve the quality and pace of our management of FtP cases.
- 1.3 This paper provides:
  - An update on our performance in relation to the quality and timeliness of case investigations.
  - An update on the improvement projects we began in September 2021 (Appendix 1).
  - A summary of key risks and mitigations.
  - An update on our Protection of Title caseload (Appendix 2).

### 2. Quality of case investigation

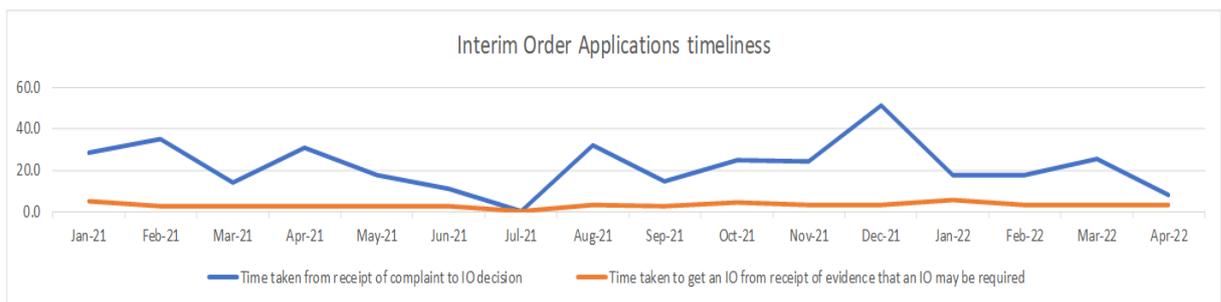
- 2.1 In this section we provide an overview of our performance in relation to the quality of our case investigations. As we have done previously, we have broken this down by themes of the key benefits we are seeking to achieve through the FtP Improvement Programme. These are:
  - Risk management and Interim Order performance
  - Quality of our risk assessment of cases
  - Quality of our case planning

#### *Risk management – Interim Order performance*

- 2.2 One of the measures of how effectively we complete and keep up to date the risk assessment of our cases is the timeliness of the interim orders we get.
- 2.3 Figure 1 shows performance against the two measures of timeliness.

- 2.4 The orange line shows how quickly we progress a matter to an Interim Order hearing once we have identified the need for an Interim Order. Our target for this measure is three weeks.
- 2.5 We have consistently maintained our performance at or better than our target. This has continued since we last reported to Council in March.
- 2.6 The blue line shows how quickly we progress a matter to an Interim Order hearing following receipt of a concern. Our target for this measure is 12 weeks.
- 2.7 Performance against this second measure can be impacted by ongoing third-party investigations which must either be concluded or reach an appropriate evidentiary stage before we can apply for an interim order. Most often these are criminal investigations and/or ongoing court proceedings.
- 2.8 The length of time it has taken from receipt of a concern to consideration by a panel decreased significantly in April. At 8 weeks we have met our 12 week target for the first time since our improvement work began.

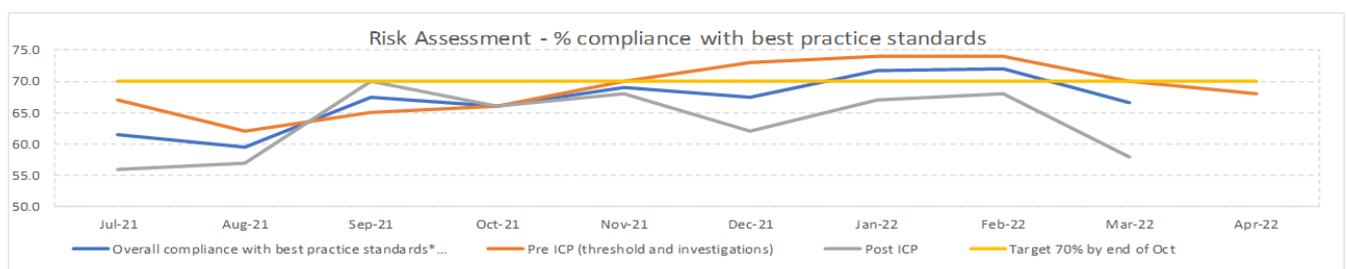
**Figure 1 – Interim Order performance**



**Risk management – Adherence with our Best Practice Standard**

- 2.9 We continue to monitor the quality and timeliness of our risk assessments through monthly front-line checks.
- 2.10 Our aim is to achieve 80% adherence with Best Practice Standards across all teams by the end of Quarter 1 2022-23, increasing to 90% adherence (as our stretch target).

**Figure 2 – Quality of risk assessments: performance against our targets**

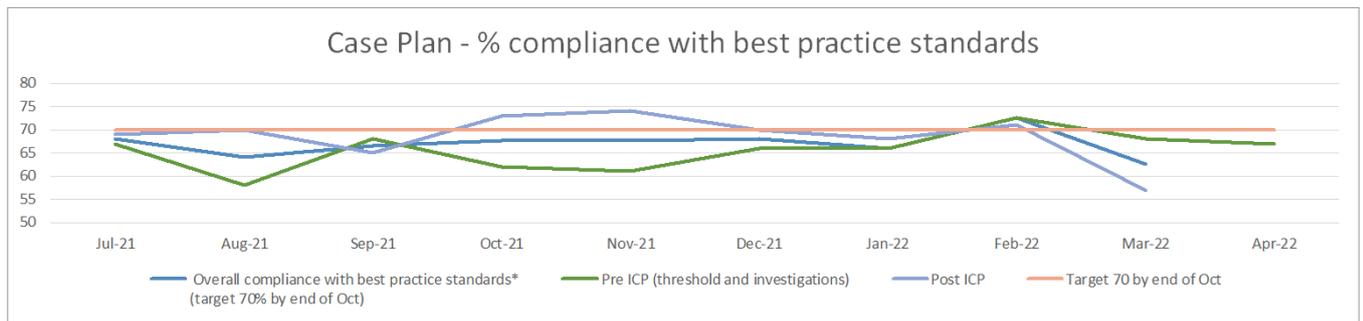


- 2.11 In April 2022, we achieved 68% adherence to the Best Practice Standard in the pre-ICP teams and as a department overall. This was lower than the first two months of the year where we had exceeded our 70% target in place at that time. However it should be noted that this does not include front line checks for the post-ICP team as in previous months. In April we were unable to carry out front-line checks in the post-ICP team due to being without management resource for the month.
- 2.12 Recruitment to fill vacancies at the Operational Manager level is underway and we also have a lawyer on secondment from one of our firms to provide management support to the post-ICP team.
- 2.13 There is still more to do to reach the 80% target we have set ourselves. We have now concluded the workshops we have run with the Quality Assurance teams, and the learning and action points from those events will be implemented by the end of May. A key change will be that front line checks will be completed by managers on teams outside of their area, to ensure consistency and improved sharing of good practice and learning points. We are also reviewing how our Risk Champions can take on a more proactive role in sharing learning with the wider team.

#### *Case planning – adherence with our Best Practice Standard*

- 2.14 The quality of our case planning is also monitored on a monthly basis through front-line checks. The benefits of the introduction of the case plans will take a few months to realise in full, as we need to monitor the case plans through the life of the investigation.
- 2.15 Our target was for 70% of case plans to adhere to the Best Practice Standard for Case Planning by the end of October 2021, increasing to 80% as our stretch target.
- 2.16 In April 2022, we achieved 67% adherence to the Best Practice Standard in the pre-ICP teams and as a department overall. As with the risk assessment quality checks, it should be noted that this does not include front line checks for the post-ICP team as in previous months due to management resource.

**Figure 3 – Quality of case planning: performance against our targets**



2.17 Our key areas for improvement in case planning continue to relate to the timeliness with which case plans are updated throughout the lifetime of the case, and the level of detail given around the type of evidence required.

2.18 In May we provided targeted training on how case plans should be updated during the lifetime of case with the support of our legal providers. From May we also have a new process for case planning at the start of a post-ICP investigation. The responsibility for the case plan will now sit with our legal providers, who will prepare the plan which will be checked by the HCPC case management team.

### 3. Timeliness of case investigation

3.1 In this section we provide an overview of our performance in relation to the timeliness of our investigation and the age profile of our cases. We have broken this down by:

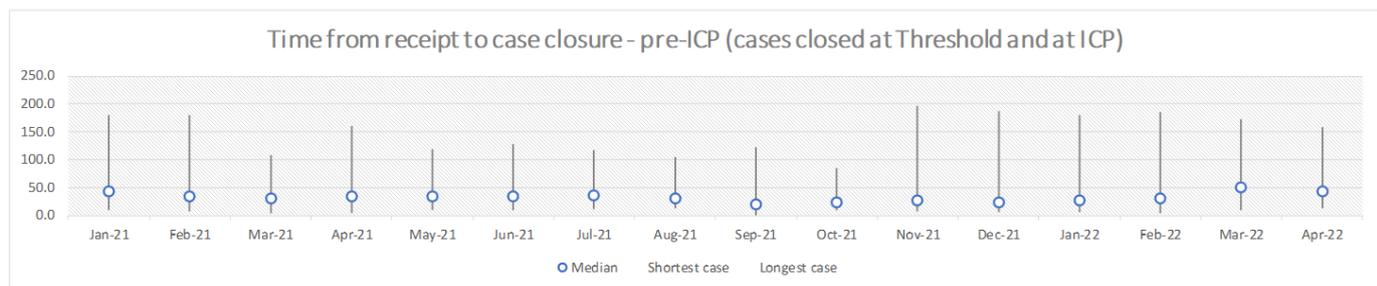
- Age profile of case at the point of case conclusion
- Case volumes at each stage of the process
- Age profile of the live caseload
- Performance against our KPIs

#### *Age profile of cases at the point of case conclusion – medians and age range*

3.2 Figure 4 below shows the median age of cases closed at the Threshold and ICP stages (i.e. all pre-ICP case closures) month on month.

3.3 Since November 2021, we have continued to close older pre-ICP cases as these are progressed through the process. In April the median age of the cases concluded at 43 weeks was above our 33 week KPI. This was due to more older cases being concluded at the Threshold stage in that month.

**Figure 4 – receipt to closure at Threshold or ICP decision median**

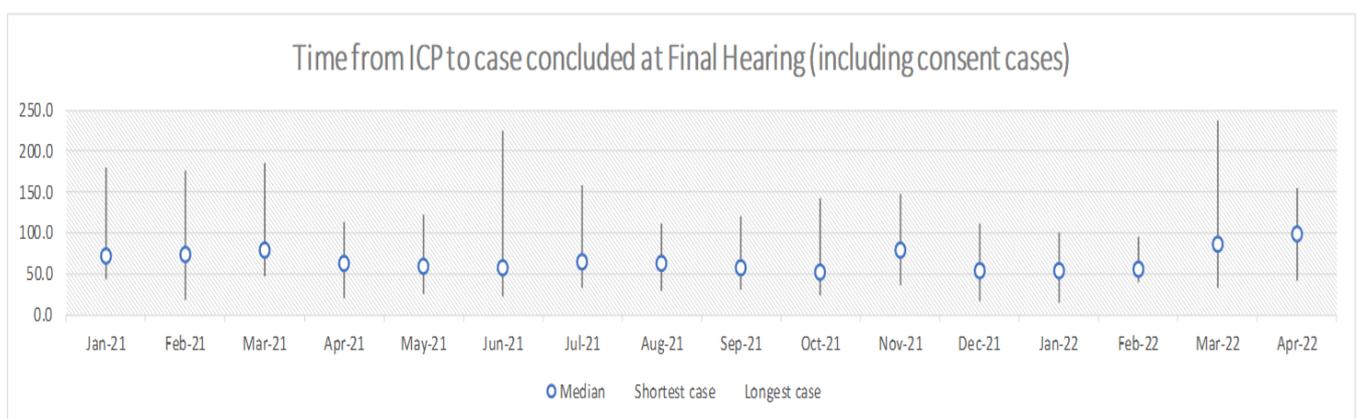


3.4 Figure 5 below shows the median age of cases that were closed at a final hearing (including cases resolved by consent). We expect the median age at the point of case conclusion to be above KPI as our older cases progress through the system.

3.5 In March and April the median age increased to 86 weeks and 95 weeks respectively as we have concluded older cases at final hearing. The age profile of the oldest cases concluded in both these months was the oldest since July 2021.

3.6 Since December we have seen younger cases being concluded at a Final Hearing. The youngest cases concluded in December 2021 and January 2022 were 16 and 14 weeks respectively. This reflects the impact of the direct listing process, as we held our first final hearings for cases that had been involved in the frontloading pilot. The age of the youngest cases being concluded remains within the 39 week KPI.

**Figure 5 – ICP to final hearing decision median**

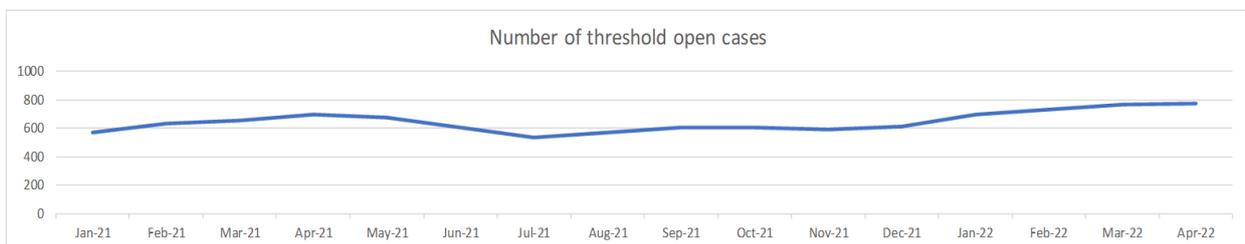


*Case volumes at each stage*

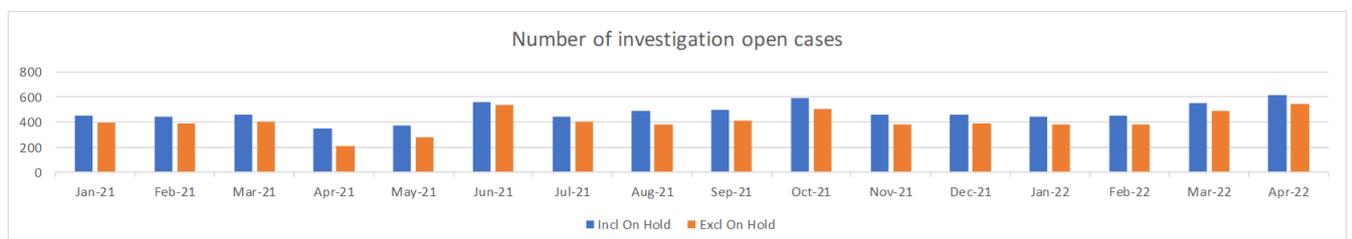
3.7 Figures 6 to 8 below show the number of open cases in our Threshold, Investigations and post-ICP teams respectively.

- 3.8 At the start of the year we saw an increase in cases in the Threshold team (Figure 6), related to an increase in cases coming through from an expanded Triage team. This has now started to plateau. We have created additional capacity to manage these cases by using resource provided by our external legal providers. We are also prioritising the progression of cases our Investigations teams for cases which meet our Threshold criteria.
- 3.9 The Investigations caseload (Figure 7) has increased during March and April reflecting the work we have done to prioritise the flow of cases that meet our threshold criteria. The caseload includes 68 cases which are subject to the conclusion of a criminal or other third-party investigation, which means we are unable to progress the case to the ICP stage. A further 88 cases are listed for a future ICP at the end of April.
- 3.10 During 2021 we maintained our post-ICP caseload at under 500 cases. There has been a slight uplift in the number of post-ICP cases at the end of February 2022, but the caseload has now fallen below 500 once again.
- 3.11 At the end of April, 79 cases had a confirmed final hearing date. This is the highest number of confirmed listings since May 2021.

**Figure 6 – number of open Threshold cases**



**Figure 7 – number of open Investigations cases (including SCT)**



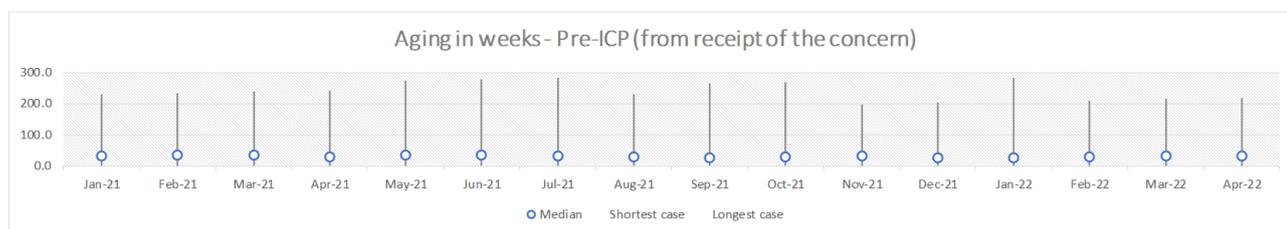
**Figure 8 – number of open post-ICP cases**



*Age profile of the live caseload - medians*

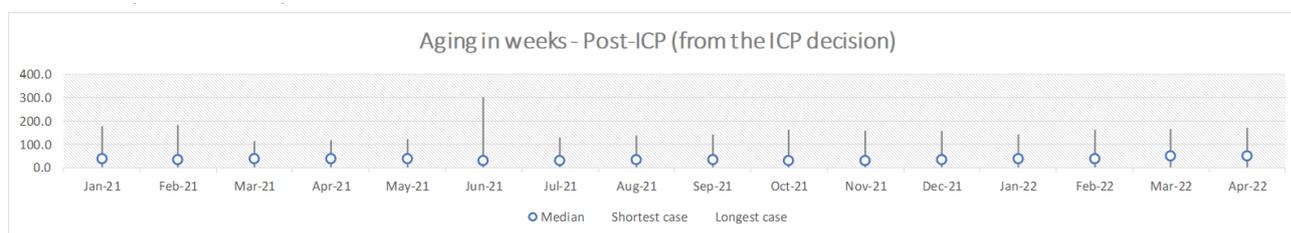
- 3.12 We know that improving the age profile of cases takes time, particularly when measuring to the point a case is concluded at the ICP stage or HCPTS panel.
- 3.13 As we set out to Council in November 2021, the median age of cases closed is a retrospective measure and will be affected by the volume of cases considered by an ICP or HCPTS panel in each quarter and the proportion of those cases that are aged. Progressing our oldest cases through the process will therefore also affect that median age.
- 3.14 Alongside case volumes and age at point of case conclusion (as outlined above), also looking at the median age of our live caseload provides a rounded view of our performance.
- 3.15 Figure 9 shows the median age of our live pre-ICP caseload. The median age has been consistently under our 33 week KPI since July 2021. The age of the oldest open case has remained consistent for the last three months following a noticeable decrease in the age profile in February 2022.

**Figure 9 – median age of live pre-ICP caseload**



- 3.16 The median age of the live post-ICP caseload (Figure 10) is below our 39 week KPI, and has been so since May 2021.
- 3.17 The age of the oldest case post-ICP has increased slightly at the end of March and again at the end of April. We would expect to see the age profile of the post-ICP caseload increase as the older cases are progressed through the process.

**Figure 10 – Median age of the live post-ICP caseload**



### *Live performance of the teams – performance against KPIs*

- 3.16 In November we shared with Council the improvements we had seen since January 2021 in the proportion of our caseload at each stage that was within our KPI.
- 3.17 We recognise that there is still more to do and we set ourselves the following targets to increase the proportion of the caseload within KPI at each stage by the end of March 2022.
- 3.18 Threshold: increase to 55-60% of cases within KPI
- 3.19 Investigations: increase to 60-65% of cases within KPI
- 3.20 Post-ICP: increase to 60-65% of cases within KPI
- 3.21 At the end of February, 68% of the pre-ICP caseload was within KPI. By the end of April this had reduced to 48%.
- 3.22 The pre-ICPs team have been particularly affected by large volumes of annual leave that had to be taken before the end of March, as well as sickness and other absences throughout March and April.
- 3.23 The proportion of the post-ICP caseload within KPI at the end of April was 65%, meeting the target we set ourselves last year.
- 3.24 We have taken a number of steps to continue to improve including moving resource across teams, revising team productivity KPIs in some areas, and identifying threshold met cases earlier so they can be advanced through the process (e.g., conviction cases).

## 4. Overview of phase 2 improvement projects

- 4.1 In September we started work on some of the projects in Phase 2 of the FtP Improvement Programme. Due to our focus on embedding the

improvements delivered in the first part of the year, we decided to phase the start of the six projects in Phase 2. The key areas of work that have commenced are:

- 4.11 **Application of our consensual disposal policy** – between 1 January 2022 and 30 March 2022 we concluded 8 cases by consent. A further consent matter considered by a panel in this period was not approved by the panel. The total number of consent cases taken to a panel in this quarter (9) is on a par with the number in the previous quarter (11), and shows we are continuing to identify suitable cases for consensual disposal as part of our business as usual ways of working, following the improvement work we carried out last year. A further 10 consent cases are progressing through to a hearing.
- 4.12 **Tone of Voice review** – we have finalised our style guidance and completed the review of a small number of our letters. A prioritisation task for the remaining letters is underway.
- 4.13 **Lay Advocacy** – We are in discussion with our proposed supplier regarding service and contractual terms. Training for the teams is planned for next month.
- 4.14 **Phase 2 of the Case Management System** – a series of requirements gathering workshops took place in January and February 2022. We are now in the prioritisation phase and working with our supplier on timescales for delivery.
- 4.15 A high-level progress update for each project is provided at Appendix 1. Those projects that have yet to start are included as workplan activities for the next financial year.

## 5 Key risks and mitigation

- 5.1 As we have shared with Council, the current trend of gradual, incremental improvements are vulnerable to a number of risk factors, both internal and external:
  - **Time** – it takes time for improvement work once delivered to be seen as a sustained and noticeable impact on performance measures. We need time to support the teams to embed change as business-as-usual ways of working.
  - **Transition to frontloading** – as a result of the pilot we ran last year, it is clear to us that we need to transition to a ‘frontloaded’ FtP process in order to deliver more significant improvements in our performance in the medium to longer term. This requires changes to our processes, new legal provider contract(s) and recruitment in all areas. New legal providers have been appointed following a full procurement exercise.

The new contracts come into effect from 1 April 2022 and we expect to commence frontloading from next month.

- **Resource** – whilst turnover has improved there is more we need to do to provide stability across the FtP teams. Reducing our dependence on temporary and fixed term contracts is key, especially where we rely on temporary staff to fill vacancies pending the outcome of recruitment. We have attempted and continue to plan to over recruit in core roles but this has been made challenging by insufficient numbers of appointable candidates following recruitment campaigns. In April we lost staff in two senior management roles. Recruitment is underway to fill those vacancies and cover is being provided by existing members of the FtP Management team. We will shortly be going out to recruit for our new dedicated training and standards resource, with the aim to bring these roles into the team over the summer. Earlier in May we appointed a new Deputy Head of Fitness to Practice, who will join the team later in the summer. The Deputy Head will have a focus on the delivery of frontloaded investigations in-house as a core part of the remit of their role.
- **Staff absences** – we continue to see high rates of short-term sickness absence in the department (as has been the case across the HCPC and many other organisations). In March and into April we had a large number of outstanding annual leave days in the department that had to be taken before the end of the financial year. As far as we are able we are factoring in these absences into our forecast and planning for the work required to meet our targets.

## 6. Next steps

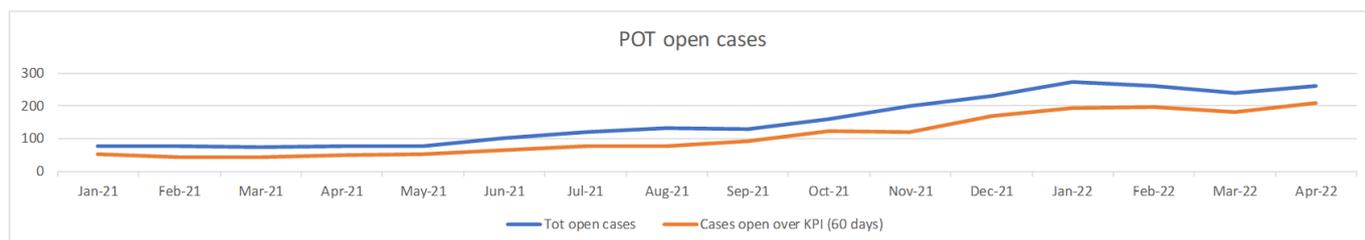
- 6.1 We will continue to update Council on our progress against our improvement plan at each meeting in 2022 or until Council has sufficient assurance of our progress to reduce the frequency of reporting.

## Appendix 1: Project status report

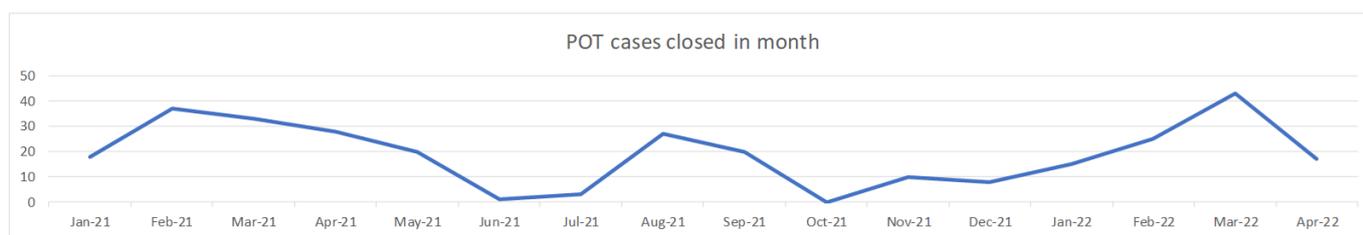
	Project	RAG	Progress update	R&I	Plan
1	Risk assessment quality and adherence to best practice standard internal review		In progress. Monthly quality assurance checks in the department continue. QA team review and support of the process is in progress.		
2	Improving communications, engagement and support we provide				
2.1	Workstream 1: Tone of voice review		In progress. Two workshops with reviewing team to finalise guidance and approach have taken place. Initial 'trial' review of a small sample of letters has taken place. Prioritisation of remaining templates is underway.		
2.2	Workstream 2: QA review of case plans and stakeholder engagement		In progress. Monthly quality assurance checks in the department continue. QA team review and support of the process is in progress.		
2.3	Workstream 3: Developing additional guidance and support for unrepresented registrants and encouraging all registrants to engage earlier in the process		Not yet started – as explained in paper we are phasing the start of the projects to ensure we focus on embedding the changes from the projects in Phase 1 and to manage our capacity.		
2.4	Workstream 4: Lay advocacy service		In progress. Framework with two suppliers went live in October. Contractual discussions underway with supplier and training planned for June 2022.		
2.5	Workstream 5: Registrant support line		Not yet started - as explained in paper we are phasing the start of the projects to ensure we focus on embedding the changes from the projects in Phase 1 and to manage our capacity.		
3	Consensual resolution of cases – ensuring our policy is applied consistently and at the point of referral from the ICP		In progress. Review of all post-ICP cases has been completed and identified cases have either been progressed to a hearing or are in the approval process. Regular review of cases for consent is now embedded in the post-ICP case management process.		
4	Case management and investigation – embedding the learning from frontloading pilot.		In progress. We have appointed our legal providers with the contract starting on 1 April 2022. We are reviewing our frontloaded processes following the pilot as we scale up frontloading with our external legal providers and we aim to go live in June 2022.		
5	CMS – phase 2 – this will be managed by the HCPC's Major Projects team.		Requirements gathering exercise commenced in January. Scoping of phase 2 requirements is complete and prioritisation of project workstreams will take place this month.		
6	Review of KPIs and process for Protection of Title cases		Not yet started - as explained in paper we are phasing the start of the projects to ensure we focus on embedding the changes from the projects in Phase 1 and to manage our capacity. This project will commence in Q1 2022-23.		

## Appendix 2: Protection of Title (POT) Performance data

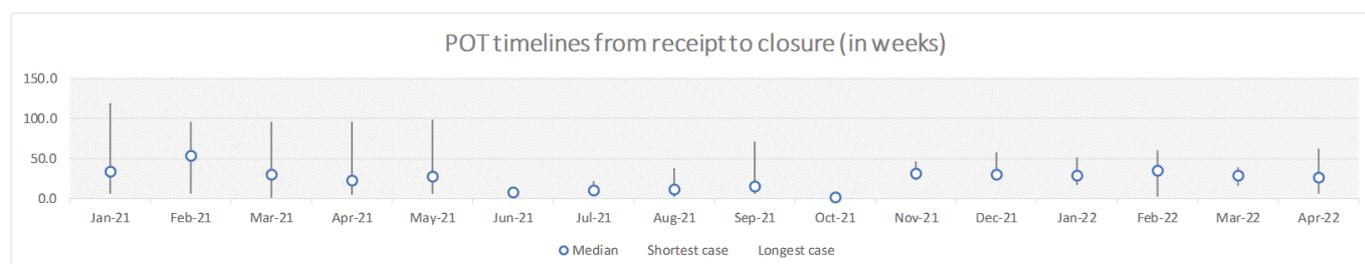
**Figure A: Number of open POT cases and cases open over KPI**



**Figure B: Number of POT cases closed in each month**



**Figure C: Age of POT cases at closure**



- 1.1 In March we saw a further fall in the number of open POT cases. By the end of April this had increased slightly to be in line with the position at the end of February. However, the caseload is still higher than our usual work in progress numbers.
- 1.2 As we reported to Council in March 2022, there have been challenges to our ability to progress POT cases from the second half of 2021. We have seen an increase in POT referrals relating to misuse of title details appearing on 'bot' websites, which automatically index content from the internet. It is particularly challenging to request the removal of material from these websites as there is no clear owner or responsible party.

- 1.3 The team that manages POT cases also manage our Health & Character Declaration (DEC) cases. This is because protection of title issues can arise in declaration matters. As Council will be aware we saw a significant increase in applications to join the Register last year, which meant there was a resultant significant increase in the number of Health and Character declarations that required assessment.
- 1.4 At the end of April, the number of open POT cases at 261 was lower than the peak in January but still higher than where we would like our work in progress to be. In March we implemented an action plan to reduce the number of open POT cases and the age profile of the open caseload.
- 1.5 The number of POT cases closed in March was the highest since before January 2021. In April this figure was lower than we would like due to absences in the team.
- 1.6 The median age of cases closed has remained broadly consistent with previous months. However, the age of the oldest case closed by the team at 63 weeks was the highest since September. The age of the youngest case closed was five weeks which shows the team have still been able to progress newer cases to conclusion.
- 1.7 At the end of May we will be losing one of the Case Officers, who was successful in recent Case Manager recruitment. Recruitment to fill the vacancy has commenced and additional temporary resource is in place on the team.
- 1.8 The project work to review our POT processes and KPIs, which forms part of Phase 2 of the FTP Improvement Programme, will commence in Quarter 1 2022-23.