

Fitness to Practise Performance Report

Executive Summary

This paper provides:

- an update 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
- a brief update on the projects we started in September 2021 as part of phase 2 of our improvement programme.

Council is asked to note the progress made.

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	The Council is asked to note the update.
Next steps	The next report on progress will be provided to Council on 23 March 2023
Strategic priority	Strategic priority 1: Improve our performance to achieve the Professional Standards Authority's Standards of Good Regulation.
Financial and resource implications	Already provided for in the FTP 2022-23 budget.
EDI impact	Improving the quality and timeliness of our management of fitness to practise cases will support all involved in those cases. In particular, Phase 2 improvement projects include developments that will improve our communication and support for those involved in fitness to practise cases and who are particularly vulnerable or in need of additional support measures.

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Fitness to Practise Performance Report

1. Introduction

1.1. The paper provides an update on the progress of the FTP Improvement Plan, which aims to improve the quality and pace of our management of FTP cases. The focus remains on embedding the changes we made during 2021 and 2022 and on continuing to make further improvements.

1.2. This paper provides:

- An update on our performance in relation to the quality and timeliness of case investigations
- An update on the phase 2 improvement projects we begin in September 2021 (Appendix 1)
- An update on our performance in relation to our Protection of Title cases (Appendix 2).
- A summary of key risks and mitigations.

2. Quality of case investigation

2.1. Improving the quality of our management of FTP concerns is part of our overarching objective. In this section we provide an overview of our performance against three 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 and Interim Order performance

2.2. A measure of how effectively we complete and keep up to date the risk assessment of our cases is time it takes to apply for an Interim Order. Figure 1 shows our performance against the two measures of timeliness in relation to Interim Orders.

2.3. The orange line in figure 1 shows how quickly we progress a matter to an Interim Order hearing once we have identified the need for an Interim Order. We have consistently maintained or done better than our target of three weeks throughout 2022. In December 2022 our performance was six weeks. This was due to a hearing being adjourned and to not holding Interim Order hearings for two weeks during the Christmas period. In January 2023 this reduced to four weeks.

2.4. The blue line identifies how quickly we progress a matter to an Interim Order hearing from receipt of the concern. Our target for this measure is 12 weeks and over the last quarter our performance against this target has continued to

improve. In January our performance was 16 weeks, which is the lowest number of weeks since August 2021.

- 2.5. 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. Our performance in January was impacted by a particularly long running police investigation that reached the evidential stage needed for an Interim Order application.
- 2.6. Supporting our Case Managers to identify and respond to higher risk cases remains a priority. In March we will hold training focused on responding to changes in risk during the lifetime of a case, including when the risk decreases.

Figure 1 – Interim Order performance



Risk management – adherence with our Best Practice Standard

- 2.7. Monitoring the quality and timeliness of our risk assessments continues. In March 2022 we increased our target to 80% adherence from end of Q1 2022/23, to support our aim to achieve 90% stretch target we have set ourselves. This target was reached in December 2022 (88%) and January 2023 (87%).
- 2.8. For the quality assurance checks undertaken in October we changed the way in which we scored timeliness measures for both the risk assessment and case planning front line checks. This was to ensure we had better oversight of this quality measure. Previously where a risk assessment or case plan had not been completed at all or within the required timeframes this would be noted for feedback but the quality of what had been completed (if completed late) would still be scored. From October, a score of zero is given in these instances.
- 2.9. In October our front-line checks identified a small number of risk assessments that were completed outside of the 5 day KPI. This resulted in a zero score for these assessments, which brought down the overall average for the team to 50%.
- 2.10. The teams carried out focused work to ensure there was a current risk assessment in place on every case and on time by the end of November. This was achieved and has been maintained since then.

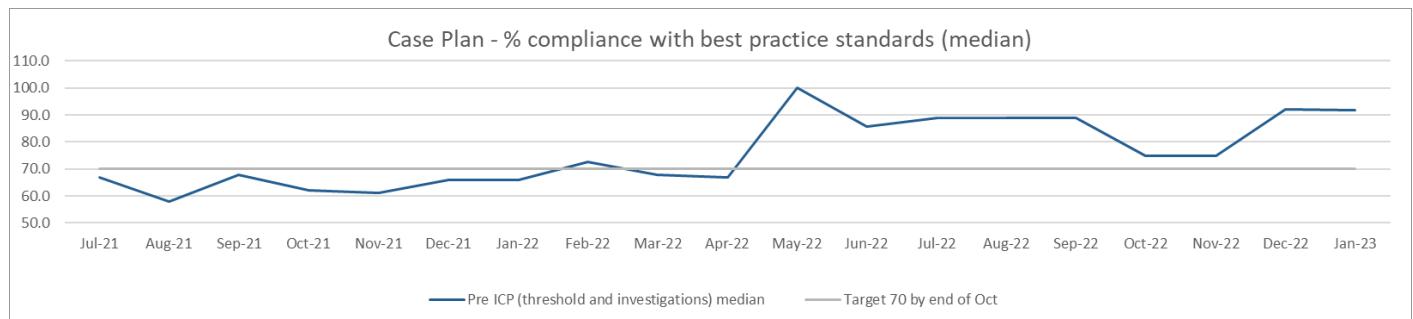
Figure 2 – quality of risk assessments: performance against our targets



Case planning – adherence with our Best Practice Standard

- 2.11. Monitoring the quality and timeliness of our case plans also continues, and we increased this target to 80% adherence in March 2022 after meeting our initial target of 70% adherence to our best practice standard in January and February 2022. Despite the change in scoring timeliness of case plans as explained in 2.8 above, in October our performance was 75% which is just short of our revised target of 80%.
- 2.12. In December 2022 and January 2023, we exceeded this target and achieved 92% compliance.
- 2.13. Following developments to our case management system in October 2022, case plans are now fully built into the system providing greater visibility and easier access to maintain and update as the case develops.

Figure 3 – quality of case planning: performance against targets



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

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

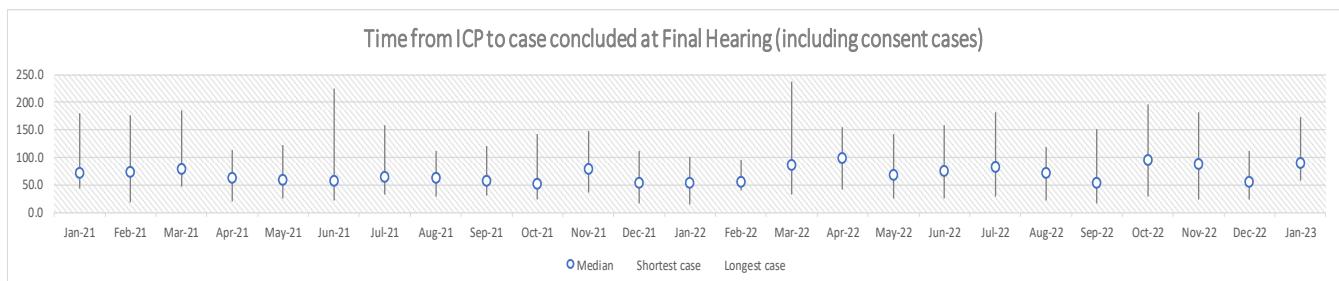
- 3.2. Figure 4 shows the median age of cases closed at the Threshold and Investigating Committee Panel (ICP) stages (i.e. all pre ICP case closures) month on month. Since November 2021, we have continued to close older pre-ICP cases as these are progressed through the process as a result of the changes made in phase 1 of the improvement programme to improve the age profile of our case load.
- 3.3. We continue to progress our oldest cases, alongside those more recently received. In November 2022 and January 2023, we closed our oldest cases since this reporting began (242 and 244 weeks respectively). The median age fell within the KPI of 33 weeks in January 2023. This demonstrates we continue to progress younger cases to conclusion alongside our older cases.

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



- 3.4. Figure 5 shows the median age of cases that were closed at a final hearing (including cases resolved by consent). We expect the median age of this point of case conclusion to be above our KPI of 39 weeks as our older cases move through the process.
- 3.5. The median age of cases concluded at a final hearing in December 2022 was 57 weeks, with the longest case at 112 weeks and the shortest case at 23 weeks. The age of the shortest case is significantly below our KPI of 33 weeks, and reflects the impact of frontloading on our ability to progress cases more quickly to a final hearing. In January 2023 the median age was 90 weeks, with the shortest case at 58 weeks and the longest at 173 weeks.

Figure 5 – ICP to final hearing decision median



Case volumes at each stage

- 3.6. Figures 6 to 8 show the number of open cases in our Threshold, Investigations and Post-ICP teams respectively.
- 3.7. The number of open Threshold cases has been reducing throughout 2022 and in January 2023 was at its lowest level since July 2021. This is as a result of the increased capacity of the Senior Decision Maker team, which means cases are progressing through this decision stage more quickly, and the prioritisation of cases that meet our threshold through to our Investigations team. The number of open threshold cases at end of January 2023 was 520, reducing from 735 in February 2022.
- 3.8. As the volume of cases moving out of Threshold increases, the volume moving into our Investigations team also increases. At the end of January 2023, the number of open investigations cases was 831, which includes 75 cases that are listed for consideration by a future ICP and 14 cases that are subject to a third-party investigation. We are supporting Investigations to increase their productivity to respond to the cases coming into the team, and to look at ways of sharing capacity across the team. In January 2023 we also commenced a review of our on-hold process for third party investigations, to ensure we are identifying and monitoring all such cases effectively. We expect that the number of on hold cases will increase going forward as a result of that exercise, and we will keep Council updated on this.
- 3.9. At the end of January 2023, the number of open cases at the Post-ICP stage of the process was 497. The volume of open cases at this stage in the process has remained broadly consistent at under 500 cases.

Figure 6 – number of open Threshold cases

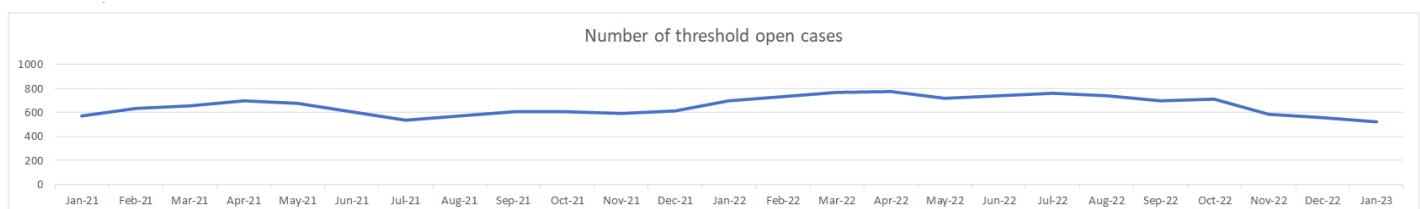


Figure 7 – number of open Investigations cases (including SCT)



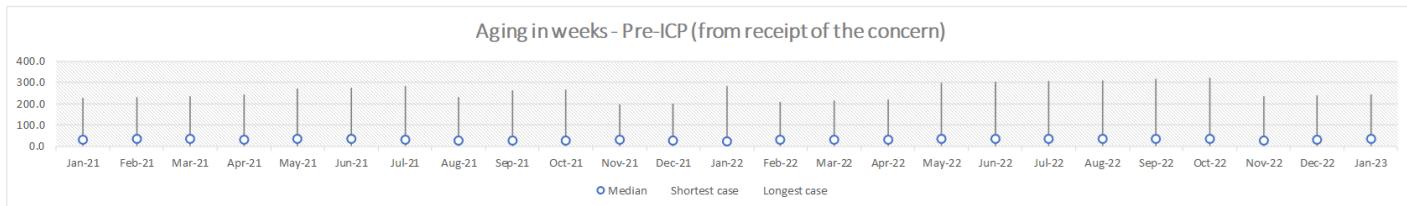
Figure 8 – number of open Post-ICP cases



Age profile of the live caseload – medians

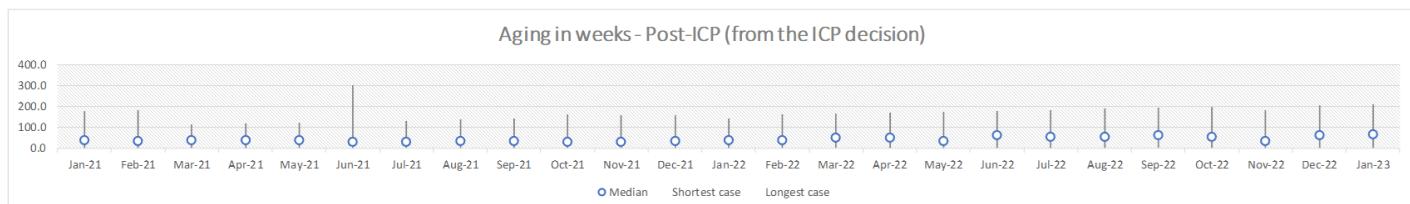
- 3.10. We know that improving the age profile of cases takes time, particularly when measuring to the point a case is concluded at the ICP or final hearing stages.
- 3.11. The median age of cases closed provides a retrospective measure that will be affected by the volume of cases considered at the different stages each month. Progressing our oldest cases through the process will affect that median age.
- 3.12. Alongside case volumes and age at point of case conclusion, we also need to look at the median age of our live caseload to obtain a rounded view of performance.
- 3.13. Figure 9 shows the median age of our live pre-ICP caseload. The median age of this caseload sat below the KPI of 33 weeks in November and December 2022, increasing slightly to 36 weeks in January 2023. Since October 2022 the age of the oldest open case has reduced as we have focused on closing or progressing those cases through the ICP.

Figure 9 – median age of live pre-ICP caseload



- 3.14. The median age of the live post-ICP caseload, shown at figure 10, at the end of January 2023 was 64 weeks and above the KPI of 39 weeks. We 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 live post-ICP caseload



4. Overview of phase 2 improvement projects

- 4.1. In September 2021, we started work on some of the projects in Phase 2 of the FTP Improvement Programme. A decision was taken to stagger the start of the six Phase 2 projects to enable us to embed the improvements delivered in Phase 1. The key areas of work that have commenced are:
 - 4.1.1. **Application of our consensual disposal policy** – the work we have done to review how we identify suitable cases for disposal by consent is now embedded as business as usual. In December and January we concluded 1 and 2 cases by consent respectively.
 - 4.1.2. **Tone of Voice review** – we have completed the review of the first two batches of our letters/email templates. A secondee with experience of delivering tone of voice work at another regulator joined us in November to help progress this work.
 - 4.1.3. **Lay Advocacy Service** – We have engaged with POhWER, a charity and an external provider of advocacy services, to provide lay advocacy support designed for complainants and witnesses who may need additional support to access and engage effectively with the FTP process. POhWER are used by a number of other public bodies, including Local Authorities and other professional regulators. We launched the service at the HCPC in September 2022. Since then we have offered Lay Advocacy support to four participants in FTP cases.
 - 4.1.4. **Registrant support line** – we are in discussion with our proposed supplier regarding service and contractual terms. Training for the teams is planned for later this month and we are on track to launch the service in March 2023.
 - 4.1.5. **Phase 2 of the Case Management System** – sprint three of the development and build of the enhancements to the system went live in February 2023. Work on the remaining three sprints are due to conclude by the end of March 2023.
- 4.2. A high-level progress update for each project is provided at Appendix 1.

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:
 - 5.1.1. 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.

- 5.1.2. 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 and frontloading of investigations with those providers commenced in July 2022. We are now developing the plans to build our internal capability to manage frontloaded investigations in house.
- 5.1.3. 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. Recruiting to our core roles remains a challenge because of insufficient numbers of appointable candidates. We currently have vacancies in some areas being covered by existing staff and secondments. We are currently recruiting case managers. Our new FTP Training Partner started with the team in December and as part of their induction they are spending time undertaking key activities in each team. The key remit of this role is to assist with the induction and onboarding of new team members, as well as our ongoing training. The role will also have responsibility for our Best Practice Standards and guidance.
- 5.1.4. Need for regulatory reform – the changes we are making are helping progress older cases and improve the quality of our decision making and investigations. However, to be able to accelerate the improvement of the timeliness of our FTP process we need legislative change to enable us to conclude cases earlier on in the process. At the moment, all cases where there may be a case to answer (which is a low bar) must go to a final hearing. We are working closely with the DHSC on the plans for regulatory reform and proactively working with the DHSC on the GMC’s draft legislation which will be the blueprint for the other regulators.

6. Next steps

- 6.1. We will continue to update Council on our progress against our improvement plan at each meeting, 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
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.		
Improving communications, engagement and support we provide				
Workstream 1: Tone of voice review	Yellow	In progress. A secondee joined us from another regulator in November to undertake the review and re-drafting of our suite of templates. We have completed the review of the first two batches of templates.		Yellow
Workstream 2: QA review of case plans and stakeholder engagement	Green	In progress. Monthly quality assurance checks in the department continue. QA team review and support of the process is in progress.		
Workstream 3: Developing additional guidance and support for unrepresented registrants and encouraging all registrants to engage earlier in the process		Not yet started –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.		
Workstream 4: Lay advocacy service	Green	Completed. Lay Advocacy service went live in September 2022.		
Workstream 5: Registrant support line	Green	In progress. Contractual discussions underway with supplier. Initial training with teams scheduled to take place in February. On track to go live in March 2023.		
Consensual resolution of cases – ensuring our policy is applied consistently and at the point of referral from the ICP	Green	Completed. Regular review of cases for consent is now embedded in the post-ICP case management process.		
Case management and investigation – embedding the learning from frontloading pilot.	Green	In progress. We have appointed our legal providers with the contract starting on 1 April 2022. Frontloading of case investigations with our providers commenced in July 2022. Work to review our operating model to support in-house frontloaded investigations is underway.		
CMS – phase 2 – this will be managed by the HCPC's Major Projects team.	Green	Upgrade to the Core product to support the enhancements was completed in August 2022. Sprint 1 to 3 (of 6) of the enhancements have been delivered. All sprints are scheduled to be completed by end of March 2023.		
Review of KPIs and process for Protection of Title cases	Grey	Not yet started - 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 Q4 2022-23 as discussed with the FTP Improvement Board.		

Appendix 2: Protection of Title (PoT) cases

Figure A: Number of open PoT cases and cases open over KPI

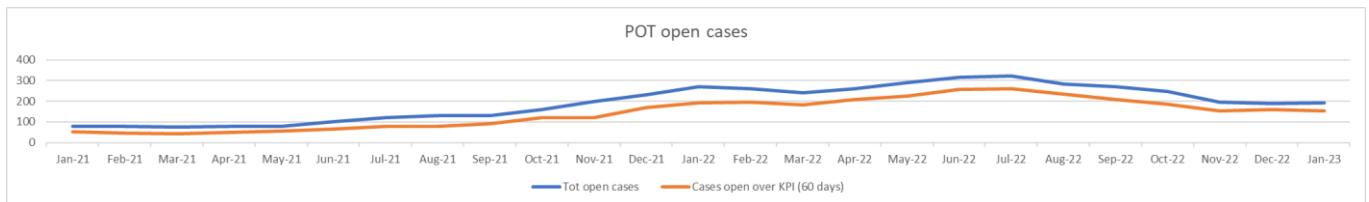


Figure B: Number of PoT cases closed in each month

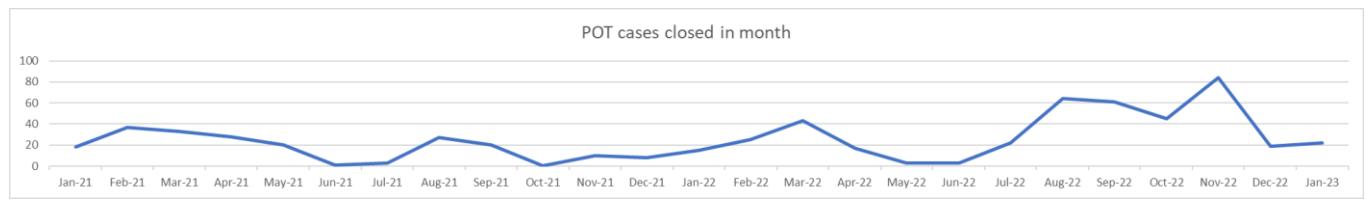
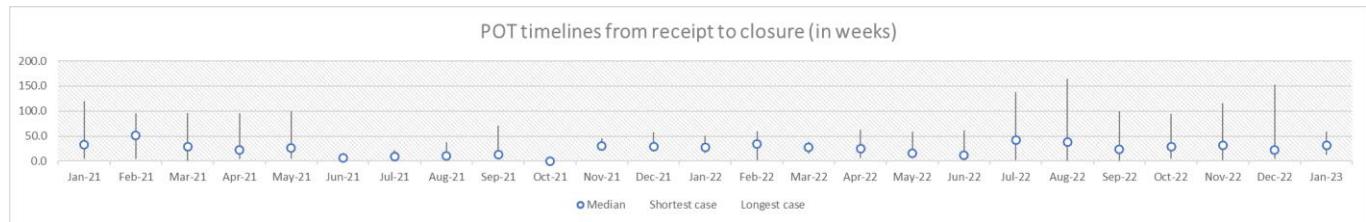


Figure C: Age of PoT cases at closure



- 1.1 Since July we have seen a steady decrease in the number of open PoT cases, following the focused work we commenced in July 2022 to review and reduce our PoT caseload. This reverses the trend since December 2021 of the caseload increasing month on month.
- 1.2 At the end of January 2023 the number of open cases was 191, which is the lowest since October 2021.
- 1.3 In November we closed the highest number of PoT cases in a month since we started recording this data in January 2021. This dipped in December 2022 due to the shorter working month and we expect the number of case closures to increase again in February 2023.
- 1.4 We continue to focus on progressing both the older and newer PoT cases. Figure C shows the range of cases closed and the median age of cases at the point they are concluded. In October 2022 the median age was 31 weeks.
- 1.5 Our work to improve the age profile and volume of the PoT caseload continues into the new year. We have identified learning through this process which will inform the project work to review our PoT processes and KPIs (part of Phase 2 of the improvement programme). This will commence in Quarter 4 2022-23.