

Council

Meeting Date	21 May 2026
Title	Chief Executive's report on organisational performance May 2026
Author(s)	Bernie O'Reilly, Chief Executive
<p>Executive Summary</p> <p>This paper provides the Council with updates on the organisation's performance since the March 2026 Council meeting.</p> <p>Key developments across education, registration, fitness to practise, policy & standards and our corporate enablers are highlighted.</p> <p>As this is a quarterly edition of this report, it includes our Key Performance Indicator dashboard, our Strategic Risk Register and an overview following the conclusion of our 2025-26 Corporate Plan.</p> <p>Appendices</p> <p>A – Chief Executive's meetings in the reporting period B – KPI dashboard and performance data C – Corporate Plan 2025-26 deliverables tracker D–Corporate Plan 2026-27 deliverables tracker E – Strategic Risk Register</p>	
Action required	The Council is asked to review the information provided and seek clarification on any areas.
Previous consideration	This is a standing item, considered at each Council meeting.
Next steps	The next report will be received in July 2026.
Financial and resource implications	None as a result of this paper.

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Associated strategic priority/priorities	This report is relevant to all strategic priorities.
Associated strategic risk(s)	This report is relevant to all strategic risks.
Risk appetite	Not applicable.
Communication and engagement	Discussed within the paper.
Equality, diversity and inclusion (EDI) impact and Welsh language standards	EDI objectives and Welsh language standards are discussed as part of this paper.
Other impact assessments	Not applicable
Reason for consideration in the private session of the meeting (if applicable)	Not applicable

1. Introduction

This report provides my assessment of the organisation's performance including our performance against our Key Performance Indicators (KPIs), an update on the completion of the 2025-26 Corporate Plan and an update on our Strategic Risks. Key developments across the regulatory areas, policy & standards, professional liaison and our corporate enablers are highlighted.

Discrimination Training

In addition to the discrimination resources on our website for registrants, the senior leaders across the HCPC have attended in person awareness sessions focussing on islamophobia and antisemitism. Hundreds of colleagues from across the organisation have also engaged in virtual sessions on the same issues. The presentations by Tell MAMA and the Community Security Trust provided some history and context around these types of discrimination as well as some information showing the spikes in volume of reported incidents related to international and national events. As a regulator it is important we understand these issues and how they may impact both internally and externally. Whether it's in education programmes we approve, our decision making in registration or our approach to fitness to practise referrals, we must ensure we are fair and objective and be perceived to be exactly that as well for our legitimacy. These awareness sessions will be part of our ongoing organisational development. We await the Mann rapid review on discrimination and will update the Council in due course.

Regulation of AI in Health Care

The National Commission for Regulation of AI in Healthcare is developing a new UK regulatory framework for AI in healthcare, due in 2026. Its work, guided by a nationwide MHRA-led research and engagement programme, has included extensive consultations with professionals across the sector.

From 31 engagement sessions held in early 2026, with over 100 professionals, a key concern identified was uncertainty around professional liability when using AI in clinical practice. To address this, the Commission is exploring legal and ethical issues related to liability when AI systems malfunction or are misused.

To gather further insights, a series of 2-hour online engagement sessions (via Teams) in late May 2026 is being organised. These will involve UK regulators, NHS representatives, and professional defence bodies, focusing on how liability principles may apply in AI-related harm.

The Health and Care Professions Council are invited and will attend.

Stakeholder engagementUnions

We met with Unison colleagues on 23 April 2026 and the Unite team on 29 April 2026. Agenda items included our new resources on responding to discrimination, new materials on advanced practice, and our fee rise consultation.

Parliamentarians

On 23 April there was a debate in the House of Commons on the contribution of Allied Health Professionals (AHPs). We reached out to key MPs with information on AHP numbers in their constituencies, as well as some information around our role in regulating many of them. We were pleased our information was cited numerous times in the debate. My full meeting list is provided at [appendix A](#).

Corporate strategy engagement

Alongside our work with stakeholders on the final stages of our corporate strategy development and promotion, we held a public webinar ahead of publication to highlight how the strategy was developed and the main themes it would include. The session was presented by Jamie Hunt, Head of Education, and Adam Haxell, Strategic Relationships and Public Affairs Lead. The session was recorded for use in our wider promotion, and can be viewed [here](#).

Corporate plan 2025-2026 milestones tracker

The 2025-2026 corporate plan milestones tracker is provided at [appendix C](#). Positive progress has been made on key items across the Technology Roadmap, Data, Customer Contact, Partner, Business Central, Frontloading, Fitness to Practise (FTP) Legal Services and the HCPC Website, ahead of the customer facing changes planned for next financial year.

The Registrant health and wellbeing strategy continues to report amber, however we have now successfully appointed a Head of Professional Liaison, Emma Greening, who joined us in April and will progress this work as part of plans for the next financial year.

Research into the impact of the increasing use of AI by registrants is also rated amber as identifying potential partners for this high-impact piece of research took longer than anticipated. However, we have now appointed our partner for that work following a tender process and work is beginning (see below for further information).

Also included in this report at [appendix D](#) is the corporate plan tracker for 2026-27. This is the first reporting against the new year's programmes of work, however progress has been made in initiating all activities due to commence in Q1.

Strategic Risk Register

Our Strategic Risk Register (SRR) is provided at [appendix E](#). This was discussed at the Audit and Risk Committee (ARAC) in March 2026.

This is the last iteration of the current approach to the strategic risk register. A new risk register will be presented to ARAC in June 2026. This is the first step of refreshing our risk management framework in order to appropriately align our risk approach across the organisation to ensure it is proportionate, consistent, and reflective of reality.

2. Regulatory Performance

Below I highlight some of the key points about the performance of our core regulatory functions of education and registration; and a separate Fitness to Practise report will be discussed as part of Council's agenda today.

Education

Team performance against service levels and KPIs

We provide a detailed report on performance at each meeting of the Education and Training Committee (ETC), and to the March 2026 meeting, we presented changes to our KPI reporting, which were agreed by the ETC. These changes will provide a more meaningful view of team performance linked to our core regulatory function of education quality assurance.

We have continued to experience challenges in meeting our KPIs in the last four months (as reported in the KPI dashboard, particularly linked to measure 2 (timeliness of assessment report production)). However, our data as reported to the ETC, shows that the quality of our decision making has been consistently high, and that several areas of performance are good or improving (approvals subject to conditions, the use of data in our decision making, timeliness of progression through assessment processes, and stakeholder engagement / feedback).

Investment in the Education team

Following the organisational wide workforce planning exercise completed last financial year and the budget approved by the Council in March we have begun to invest further in the Education team, through a proportionate and phased approach, that will over time, enable more consistent performance against our service levels and help us manage the increasing complexity (see below) we are seeing in our work.

We have immediate additional headcount planned (Q1 2026-27) and are phasing further developments for the team as well move to the new structure from September 2027.

In addition to helping improve consistency of our performance against KPIs, these changes will help us to further contribute to external factors and other changes, for example the NHS 10 year plan for England, and ensuring education providers meet our revised standards of education and training (SETs).

Current assessment focus

The complexity of our work continues to increase, due to a broader range of evidence being collated by the team, and developments and challenges within the education sector needing further reviews against our standards.

For the 2025-26 academic year monitoring period, we are currently reviewing 31 education providers to ensure continued alignment with our regulatory standards. A key focus for these reviews is ensuring education providers deliver our revised standards of proficiency and standards of conduct, performance and ethics. We are also undertaking approval assessments for programmes planned to start from September 2026, and

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continue to consider concerns, issues, data, and intelligence that impact on the quality of education for the professions we regulate.

Our recent work to improve stakeholder engagement is positively impacting on our understanding of the sector and is enabling us to focus on assessment and support activities where this is needed – through a right touch regulatory approach.

Responding to the NHS 10 Year Plan for England

We are engaging with the education sector on the delivery of the 10 Year Health Plan for England, including responding to the call for evidence for the workforce element of the Plan, which is due to be released in late May / early June 2026.

Once the workforce element of the plan is published, we will have good insight on what regulatory action we will need to take in response to the plan over the coming years. We have published information for the education sector relevant to the plan and the role we have as an independent regulator. This information is particularly focused for education providers when [developing new and existing programmes](#), insight information about our experience of considering [programmes where learners are employees of partner organisations](#), and [recognising the financial challenges in the higher education sector](#).

Education annual report 2025

We have recently published our [2024-25 annual report](#), which focuses on key findings from our assessments in recent years. We have also updated our [insight materials](#) to include new findings from our assessments, to help education providers and other sector stakeholders understand our regulatory requirements and common approaches in key areas. We have shared both the report and insight materials with our key stakeholders, through our Education Update e-newsletter, and by contacting key stakeholders directly.

Registration

UK applications to join our Register

In March 2026 we received 1,190 UK applications and 1,121 people were successfully registered via the UK registration route. The team continues to manage the demand well and the median time was 2 working days during the period, which is significantly below the 10 working days KPI. This means performance is good as we head into the peak summer period of UK graduates applying to join our Register.

International applications to join our Register

We received 169 international applications in March 2026. The monthly performance median increased to 66 working days in March 2026. The reason for this is due to applications that have been subject to a plagiarism investigation coming out of that process and now progressing through the assessment process. If applications that have been subject to a plagiarism investigation are removed from the dataset we are within our 60 KPI.

The number of international applications received continues to remain lower than forecast when we set our budget for the 2025/2026 financial year. As the Council is aware we have

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adjusted our forecast during the year. We received 2,834 applications in the 2025/2026 financial year^[1].

We will continue to monitor international performance closely.

Registration renewals

- On 1 February 2026, physiotherapists began their renewal period, and as of 20 April 2026 94.5% of physiotherapists have completed their renewal, which is the highest rate when compared to this time in all previous renewal cycles.
- On the 1 March 2026, arts therapists began their renewal period and as of 20 April 2026 55.8% of arts therapists have completed their renewal, which is lower compared to this time in 2024, but higher than all previous renewal cycles.
- On the 1 April 2026, dietitians began their renewal period and as of 20 April 2026 44.1% of dietitians have completed their renewal, which is lower compared to this time in 2024, but in line with 2022 and higher than all previous renewal cycles.

3. Policy & Standards

Addressing and tackling discrimination

Our [new resources](#), which support registrants to understand how our standards apply when responding to all forms of discrimination, have now been published. These include resources aimed at registrants and learners who may experience or witness discrimination and materials to illustrate conduct which has led to regulators taking action to protect the public with regards to racially and religiously motivated discrimination.

Standards of Education and Training (SETs)

Our consultation on proposed revisions to the SETs closed in February. Initial analysis of the consultation responses was shared with the ETC in March, and a further discussion of the consultation response will take place at ETC in June. We will bring the revised standards to the Council in July for approval.

Research into how HCPC registrants use AI

We are delighted to have appointed Ipsos as a research partner to take forward this piece of work. The research will consider how HCPC registrants use AI and the interaction with our standards. Discussions with ETC last year were helpful in informing the scope of the project and the appointment of Ipsos took place following a tender process.

Continuing Professional Development

We are commencing a review of our approach to continuing professional development this year. This will begin with an assessment of the current evidence around what is effective in CPD across health and other sectors, both within the UK and globally. We will then use this to establish an evidence base into what works to provide the assurance that regulators need that a registrant continues to be fit to practise. As our review progresses, we will be engaging with our professions, the public and other regulators to share best practice and to understand what works well and what could be improved upon.

4. Resources

HR, IT, Finance and other corporate functions have focused on work to deliver at pace the FTP workforce plan agreed as part of the budget, involving recruitment of additional regulatory investigators to help meet increased demand in FTP concerns received, alongside new ways of working and system upgrades to help increase productivity and reduce average caseloads.

We are developing a new People Strategy aligned with the new corporate strategy, for review by PRC in June, following a series of employee workshops. The draft strategy incorporates feedback from the workshops, pulse survey results and other data and focuses on further building engagement, diversity, capability and skills across the organisation. We recently ran the latest Q4 pulse survey to check employee engagement, wellbeing and other key metrics; ELT will shortly be reviewing the results which will also be reported to PRC.

At the end of April, we launched the fees consultation approved by Council in December, making the case for a relatively modest but essential increase in our fees as part of our now established pattern of regular incremental reviews, to ensure that we remain financially sustainable and can continue to invest in essential improvements. The consultation runs for twelve weeks and involves engagement with the public, patients and stakeholders, after which we will provide advice to the Council with recommendations for the next stage in the process.

Delegated budgets have been issued to departmental Heads across the organisation, aligned with the corporate plan for 2025/26. Work is well under way on preparing the 2025/26 annual report and accounts, including preparation for the NAO audit in the summer.

Work is continuing on planning and delivering the two-year investment portfolio agreed as part of the recent budgeting and corporate planning exercise. A workshop in early May for senior stakeholders helped define the order of priorities and tangible deliverables for this year. Further information will be shared with PRC in June. We are also continuing implementation of the network transformation project, to complete the transition of our systems and data into the secure cloud. And ELT are reviewing proposals for the governance and resourcing of AI-enabled innovation, that will open up further opportunities to improve productivity and regulatory effectiveness, while ensuring that we do so safely and ethically.

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Appendix A - Chief Executive's external meeting schedule covering 19 March – 14 May 2026

Department of Health and Social Care (DHSC) – Phil Harper, Deputy Director – Professional Regulation	23 March
South East Coast Ambulance Service – Simon Weldon, Chief Executive	13 April
Department of Health and Social Care (DHSC) – Phil Harper, Deputy Director – Professional Regulation; Sarah Little, Professional Standards and International Workforce; Duncan Hall, DHSC	20 April
UNISON - Celestine Laporte, National Officer – Health; Nick Entwistle, National Officer, National Officer; Sharandeep Bandesha, National Officer – Health Group	23 April
Chief Executives of Health & Social Care Regulators Board meeting (CEORB)	24 April
UNITE- Gavin Fergie, Lead Professional Officer; Dave Munday, Lead Professional Officer (Mental Health)	29 April
Michelle Tennyson, Chief Allied Health Professions Officer for Northern Ireland	11 May
Chief Scientific Officer (England) – Dame Sue Hill	11 May
Chief Healthcare Science Officer (Wales) – Vicki Heath	13 May

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Appendix B

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

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FTP

Measure	KPI 1 - the proportion of cases concluded at each stage that are within KPI 1.70% of cases concluded pre-ICP (threshold and ICP decisions) within 33 weeks of receipt 2.70% of cases concluded at a final hearing (including cases resolved by consent) within 39 weeks of the decision by the ICP that there is a case to answer.												Period May 2026
What it tells us	This provides a view of the age profile of cases that have progressed through the fitness to practise process and the timeliness of how cases are progressed to a final decision point. Metrics relating to the age profile of our open caseload are reported separately to Council in the FtP Performance reports. RAG: R: <60% A: 60-70% G: >70%												
Reporting period commentary	The data below reflects work we are undertaking to conclude our oldest cases, particularly at the post-ICP stage. We continue to ensure that we progress our entire caseload in a risk-based, proportionate way so that both younger and older cases are concluded in balance. This KPI should be considered alongside the median age data for concluded cases (in the FTP Performance Paper). This KPI includes cases that have been on hold at any time during the investigation and the time accrued whilst in that 'on hold' status. Our median age for cases concluded at the pre-ICP stage in March was 28 weeks, which is within KPI.												
2024-25		April-25	May 25	Jun- 25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	March- 26
1: Pre ICP	%	34%	47%	37%	24%	32.4%	35%	27%	36%	23%	36%	41%	21%
2: Final Hearing	%	19%	11%	33%	13%	0%	40%	14%	13%	20%	6%	6%	8%
2022-23		April-24	May-24	June-24	July-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	March- 25
1: Pre ICP	%	56%	50%	41%	45%	33%	43%	49%	57%	48%	49%	40%	47%
2: Final Hearing	%	5%	7%	30%	8%	9%	18%	6%	12%	19%	30%	17%	10%

Measure	KPI 2 - S.29 appeals and learning points				Period May 2026
What it tells us	This includes data and narrative on the number of final fitness to practise decisions appealed to the High Court by PSA under their S29 powers and the number of new PSA s29 learning points received. This provides a view of the quality of our fitness to practise decisions and assurance that those decisions are sufficient to protect the public.				
Reporting period commentary	In Q4 we received six learning points from the PSA, which has been consistent across the year. PSA issue learning points to highlight areas for improvement in the quality of final hearing decisions. All learning points are reviewed by our cross-organisational Decision Review Group and the relevant learning is fed back to panel members, advocates and case management teams as appropriate. In Q4 we were notified by the PSA that they intended to appeal three substantive hearing decision to the High Court. One of those decisions was self-referred to the PSA by the HCPC for consideration following a meeting of our Decision Appeal Group				
2025-26		Q1 April-June	Q2 July-Sept	Q3 Oct-Dec	Q4 Jan-March
S.29 Appeals	Number	3	1	0	3
PSA Learning Points	Number	6	5	7	6

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2024-25		Q1 April-June	Q2 July-Sept	Q3 Oct-Dec	Q4 Jan-March
S.29 Appeals	Number	1	0	1	0
PSA Learning Points	Number	6	5	6	6

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Education

Measure	KPI 3 - Education Quality and Timeliness												Period May 2026
What it tells us	<p>1. Less than 20% of assessments resulting in conditions / formal requirements 2. 30 days or less to provide process reports to the education provider from conclusion of quality activities</p> <p>Measure 1 will tell us whether we have worked effectively to help providers meet our standards and frontloaded addressing issues with providers, rather than setting formal requirements later in the process. RAG rating: R >25%, A 20-25%, G <20%</p> <p>Measure 2 will tell us whether we deliver reports to providers in a timely manner and have a team in place which is capable and supported to produce high quality reports. RAG rating: R >36, A 31-35, G <30</p>												
Reporting period commentary	<p>Measure 1 – An explicit aim of our quality assurance model is to address problems with education providers before the point of needing to set formal requirements – we hold providers to high standards, but support them in meeting them, aiming to reduce the need for formal conditions. In February, we set conditions on one assessment –as there were a low number of decisions (three) in this month this has resulted in a red RAG rating. The overall percentage of conditions set in the last 12 months is 2.5% of assessments.</p> <p>Measure 2 – Performance remains red rated in this reporting period, although performance has improved in terms of the number of average days to produce reports. When looking at the median average, it is clear that some exceptional reports have impacted the mean average reported. The median average for the period is 44 days. We have continued to conclude overdue assessments, in this period, and expect improved performance in future reports.</p>												
1		April 25	May 25	June 25	July 25	Aug 25	Sept 25	Oct 25	Nov 25	Dec 25	Jan-26	Feb 26	March 26
2	%	17	N/A	0	0	N/A	0	0	0	0	N/A	33	0
2	days	37	46	41	44	28	43	72	66	68	56	50	52
1		April 24	May 24	June 24	July 24	Aug 24	Sept 24	Oct 24	Nov 24	Dec 24	Jan-25	Feb 25	March 25
2	%	0	N/A	N/A	0	0	0	7	0	0	0	0	0
2	days	32	33	39	34	47	92	80	28	N/A	70	51	27

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Registration

Measure	KPI 4 – Registration responsiveness 1 - Monthly performance medium 10 working days 2 - Monthly performance medium 60 working days 3 - Answer 90% of telephone calls 4 - Respond to emails within 5 working days													Period May 2026
What it tells us	Responsiveness provides Council with a view of the customer service (timeliness) received by registrants. The breakdown of the register is included in the accompanying performance data to enable Council to maintain awareness of the size and make up of our registrant population. ETC receive more detailed Registration performance data. KPI 1 R: >15, A: 11-14, G: <=10 KPI 2 R: >70, A: 61-69, G: <=60 KPI 3. R: <70%, A: 70-89%, G: >90% KPI 4 R: >11 days, A: 6-10 days, G: <5 days													
Executive commentary	<p>UK application: Performance against our service standard for UK applications has been consistently met since February 2022. The monthly performance median continues to remain within the 10 working days service standard.</p> <p>International applications: We received 477 international applications in the period January to March 2026. The monthly performance median increased to 66 working days in March 2026. We have looked at the reasons for this and as previously forecast this is due to older plagiarism cases concluding and the application continuing to assessment. If these applications were excluded from the dataset, the overall median processing time would reduce to 49 working days in March 2026, which is within our KPI.</p> <p>The number of international applications received continues to remain lower than forecast when we set our budget for the 2025/2026 financial year. As Council is aware we have adjusted our forecast during the year. We received 2,834 applications in the 2025/2026 financial year^[1].</p> <p>Calls: The telephone call answer rate was 99% in January, 93% in February and 96% in March 2026.</p> <p>Emails: Our performance against our target of 5 working days for emails has been sustained, and we have been achieving the KPI for emails since June 2022.</p>													
		Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26	
1: UK registration	Median days	1	2	1	1	2	3	2	2	1	1	1	2	
2: Int registration	Median days	81	78	81	44	31	27	44	39	34	52	60	66	49
3: Calls	%	97%	92%	93%	99%	97%	97%	98%	97%	99%	99%	93%	96%	
4: Emails	working days	1	1	1	1	1	2	2	3	1	1	3	2	

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		Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25
1: UK registration	Median days	1	1	2	3	5	7	7	3	1	2	2	1
2: Int registration	Median days	53	30	54	58	47	66	70	84	81	92	97	82
3: Calls	%	98%	98%	99%	97%	94%	93%	92%	95%	96%	93%	95%	94%
4: Emails	working days	2	2	1	1	1	3	1	1	1	1	1	1

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Customer Service

Measure	KPI 5 - Customer service: Number of complaints and % upheld													Period
														May 2026
What it tells us	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. Upheld RAG - Green <50 Amber 50-59 Red >59													
Executive commentary	<p>Complaints related to international application processing accounted for the majority of feedback received throughout 2026-27, improvement in performance for International registration processing is demonstrated by the % of complaints determined as upheld in the last two quarters of the year stabilising at a reduced level from the preceding periods. This is reflective of the work in the Registration department to resolve high volume workstreams related to international applications, provide more consistent communications and progress applications that have been identified for investigation.</p> <p>FTP complaints although relatively consistent, have risen slightly over the year. reflective of associated increasing case volumes being received. The ongoing trend is one of higher complaint volumes overall, whether this is driven by changing expectations of services, or increased use of AI to assist in drafting we are unable to say, anecdotally we are told by other organisations that they also are experiencing higher volumes of feedback. The upheld % tells us if the increase is due to poorer service from the HCPC. The stabilisation at around 40-50% upheld is as expected within the green to bordering amber range.</p>													
Year to date		April 25	May 25	June 25	Jul 25	Aug 25	Sept-25	Oct-25	Nov 25	Dec 25	Jan 26	Feb 26	Mar 26	Monthly average
	Number	117	91	112	104	73	85	113	80	63	103	88	85	93
	% upheld	53	63	67	50	59	49	51	46	41	51	41	**	52
Previous years		April -24	May-24	June-24	July-24	Aug-24	Sept-24	Oct-24	Nov 24	Dec 24	Jan 25	Feb 25	March 25	Monthly average
	Number	54	59	50	60	58	51	52	64	51	80	86	89	63
	% upheld	39	49	64	59	60	33	39	53	45	59	60	69	52

* Approximate as cases still open at the time of reporting

** Final number/percentage to be confirmed or subject to minor change

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Professional practice and insight

Measure	KPI 6 - Professional practice and insight: 60% of registrants said their practice would change as a result of information gained through a professional liaison learning event											Period May 2026	
What it tells us	This measure focuses on outcomes which highlight the impact of our engagement. Engagement and media reach dashboard to be provided in performance report. Target 60%												
Executive commentary	<p>In January we delivered two joining the UK workforce webinars. This webinar is to support new international registrants adapt to practicing in the UK. We also delivered a workshop for registrants around professionalism.</p> <p>In February we delivered further workshops around professionalism. We also delivered another joining the UK workforce webinar for international registrants who registered in 2025. We also delivered workshops around record keeping locally for specific organisations.</p> <p>In March we delivered record keeping and professionalism workshops.</p>												
Year to date		April 25	May 25	Jun- 25	Jul-25	Aug-25	Sept-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26
	%	N/A	92	67	100	74	93	N/A	63	71	74	68	90
		April 25	May 25	Jun- 25	Jul-25	Aug-25	Sept-25	Oct-24	Nov-24	Dec-24	Jan 25	Feb 25	March 25
	%	67	81	78	75	75	81	80	100	74	100	93	100

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Finance

Measure	KPI 7 - Finance: Performance against budget/forecast operating expenditure in the range of 96.3% to 102.6%												Period May 2026
What it tells us	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.												
Executive commentary	<ul style="list-style-type: none"> Overall expenditure for financial year ended 31 March 2026 is in line with the latest forecast (99.4%). The operational underspend in actual expenditure of £267k compared to forecast is mainly due to lower payroll costs and the release of the provision for Partners' historic liabilities. The full year actuals are subject to change as part of potential year-end external audit adjustments. 												
Year to date	(£000)	April 25	May 25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26
	YTD Actual	3,514	6,920	10,326	13,882	17,127	20,710	24,100	28,133	31,448	35,045	38,589	42,127
	YTD Budget	3,600											
	YTD Forecast		7,046	10,601	14,042	17,291	20,870	24,146	28,149	31,650	35,131	38,688	42,366
	YTD Variance	86	126	275	160	164	160	46	16	202	86	99	267
	Actual as % of budget / forecast	97.6%	98.2%	97.4%	98.9%	99.1%	99.2%	99.8%	99.9%	99.4%	99.8%	99.7%	99.4%
Previous year	(£000)	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25
	YTD Actual	3,292	6,343	9,491	12,753	16,075	19,217	22,619	25,996	29,625	33,274	36,586	39,864
	YTD Budget	3,209	6,502	9,859	-	-	-	-	-	-	-	-	40,253
	YTD Forecast	-	-	-	12,771	16,109	19,302	22,627	26,046	29,690	33,326	36,653	40,445
	YTD Variance	(82)	424	708	23	34	85	8	50	65	52	67	581
	Actual as % of budget / forecast	102.6%	97.6%	96.3%	99.9%	99.8%	99.6%	100%	99.8%	99.8%	99.8%	99.8%	98.6%

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Information technology

Measure	KPI 8 - Availability of core IT systems Target: >99.5%												Period	May 26
What it tells us	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 predominantly interact with us via our IT systems, and we have a statutory duty to ensure our online register is consistently available.													
Executive commentary	Performance and availability of the Online Register has been affected by excess load on the CRM and Finance systems, which is being investigated. Mitigations have been put in place to minimise impact on external users.													
Year to date		April 25	May 25	Jun- 25	Jul-25	Aug-25	Sept-25	Oct 25	Nov 25	Dec 25	Jan 26	Feb 26	Mar 26	
	Availability %	100%	100%	100%	99.95%	100%	99.69%	99.9%	100%	99.99%	100%	99.92%	99.86%	
Previous year		April 25	May 25	Jun- 25	Jul-25	Aug-25	Sept-25	Oct 24	Nov 24	Dec 24	Jan 25	Feb 25	March 25	
	Availability %	100%	100%	100%	99.5%	100%	100%	100%	100%	100%	100%	99.99%	100%	

Measure	KPI 9 – Security Score Target: >80%												Period	May 26
What it tells us	Secure Score in Microsoft Defender for Cloud is a metric used to score the overall Azure Resources/On-prem Server security posture for HCPC. The changes in the "Defender score" needs to be taken into context, as a change to the score could relate to new updates, security framework changes or Infrastructure changes within the HCPC's environment.													
Executive commentary	<p>This KPI tracks compliance with Microsoft security recommendations, so is constantly moving as new recommendations are made. A number of new requirements were added to the measure after the Christmas change freeze, requiring substantial effort to remediate but which carry limited real risk to HCPC. Work is underway to address these requirements alongside other priorities.</p> <p>The long-term cyber-attack has now been brought to a successful close following development work to enable the move away from SMS authentication for registrants. Discussions with Microsoft regarding the financial impact of the attack have been concluded, and consideration is now being made to making a cyber insurance claim to seek to recover some of the costs incurred.</p>													
Year to date		April 25	May 25	Jun- 25	Jul-25	Aug-25	Sept-25	Oct-25	Nov-25	Dec-25	Jan 26	Feb 26	Mar 26	
	Score %	80%	85%	74%	81%	80%	83%	82%	81%	74%	74%	75%	70%	
Previous year		April-24	May-24	June- 24	July-24	Aug-24	Sept-24	Oct-24	Nov-24	Dec-24	Jan 25	Feb 25	March 25	
	Score %	90%	84%	81%	81%	82%	79%	81%	78%	77%	74%	81%	83%	

Chief Executive's Organisational Assessment – May 2026

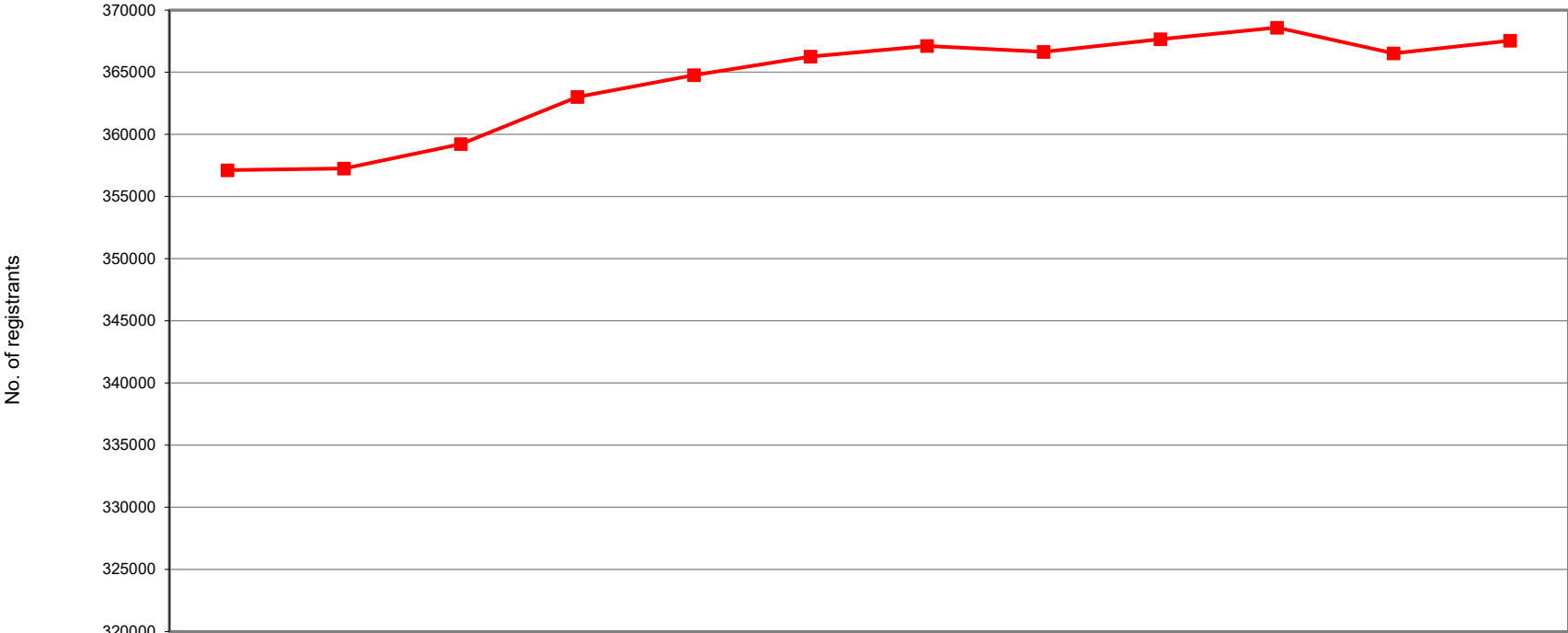
HR

Measure	KPI 10 - Voluntary staff turnover Target: <23%				Period	May 26
What it tells us	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. (Figure is a rolling year to date total not the turnover in that quarter in isolation) Green 23% or less / Amber 24% - 27% / Red 28% or over.					
Executive commentary	Voluntary turnover has remained within acceptable tolerance levels over the year to date, with a gradual but modest increase observed across the reporting periods. As at Q1, the rolling year-to-date voluntary turnover figure stood at 10%, remained stable at 10% in Q2, and increased slightly to 11% in Q3 followed by a further increase in Q4 to 12%. The current Q4 position of 12% remains well within the Green threshold (23% or less), indicating no immediate cause for concern. While the marginal increase in Q4 will continue to be monitored, overall voluntary turnover remains low and stable, suggesting positive and consistent employee experience across the organisation.					
FY 2025-26		Q1	Q2	Q3	Q4	
	%	10	10	11	12	
FY 2024-25		Q1	Q2	Q3	Q4	
	%	10	10	10	10	

Measure	KPI 11 – Recruitment and onboarding efficiency				Period	May 26
What it tells us	Time to hire is based on the advert going live to the appointee's offer date. This measures how effective HCPC is in attracting and making an offer to the right talent, which has been an area of challenge in a competitive job market. Green 44 days or less / Amber 43 days – 53 days / Red 54 days or over.					
Executive commentary	Time to hire performance has remained consistently strong across the year, demonstrating HCPC's continued effectiveness in attracting and securing suitable talent despite operating within a highly competitive labour market. The average time to hire was reduced from 22 days in Q1 to 20 days in Q2, before a marginal increase to 21 days in Q3 and a reduction to 19 days in Q4. Across all four quarters, performance remains well within the Green threshold of 44 days or less. Overall, the consistently low time to hire figures highlights the effectiveness of current recruitment processes and the positive impact of ongoing improvements in workforce planning and talent attraction.					
FY 2025-26		Q1	Q2	Q3	Q4	
	Average (days)	22	20	21	19	
FY 2024-25		Q1	Q2	Q3	Q4	
	Average (days)	33	33	41	26	

Number of Registrants by Profession April 2025 - March 2026

Registration Department



	2025								2026			
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Arts therapists	5,973	5,982	6,010	6,084	6,184	6,246	6,304	6,343	6,377	6,404	6,409	6,422
Biomedical scientists	29,611	29,767	29,927	30,199	30,385	30,448	30,538	28,399	28,633	28,776	28,852	28,942
Chiropodists / podiatrists	11,874	11,877	11,925	11,998	12,049	12,101	12,120	12,112	12,094	12,087	12,083	12,066
Clinical scientists	8,227	8,255	8,276	8,275	8,302	8,015	8,314	8,385	8,432	8,499	8,542	8,597
Dietitians	12,517	12,552	12,624	12,828	12,908	12,984	13,100	13,171	13,196	13,243	13,320	13,355
Hearing aid dispensers	4,606	4,649	4,693	4,777	4,826	4,887	4,940	4,954	4,991	5,018	5,025	5,045
Occupational therapists	47,447	47,526	47,654	48,067	48,350	48,599	46,715	47,032	47,165	47,297	47,426	47,603
Operating department practitioners	16,979	17,040	17,098	17,204	17,323	17,531	17,794	17,838	17,883	17,930	17,954	17,953
Orthoptists	1,594	1,592	1,591	1,600	1,616	1,562	1,563	1,571	1,575	1,576	1,577	1,580
Paramedics	40,634	40,637	40,825	41,295	40,551	40,936	41,340	41,623	41,730	41,807	41,926	42,082
Physiotherapists	77,264	77,737	78,390	79,461	80,293	80,905	81,457	81,739	81,956	82,165	82,319	82,400
Practitioner psychologists	30,431	29,543	29,841	30,015	30,179	30,636	31,098	31,376	31,513	31,660	31,779	31,888
Prosthetists / orthotists	1,261	1,266	1,279	1,297	1,305	1,226	1,239	1,245	1,250	1,251	1,254	1,258
Radiographers	48,542	48,637	48,873	49,571	49,950	50,191	50,412	50,502	50,457	50,410	47,547	47,803
Speech and language therapists	20,170	20,193	20,223	20,361	20,542	19,996	20,196	20,353	20,406	20,478	20,513	20,541
Total	357,130	357,253	359,229	363,032	364,763	366,263	367,130	366,643	367,658	368,601	366,526	367,535

Key Stats - March 2026

Web



Top news/blog = Advanced levels of practise

Top content:

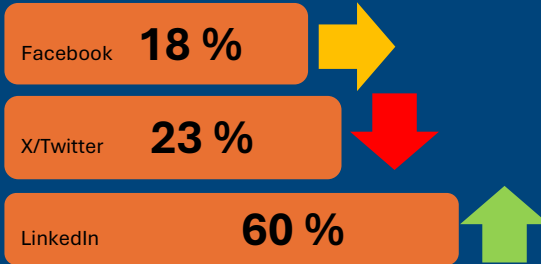
1. SCPEs
2. Getting on the register
3. Standards of Proficiency

A large red arrow pointing downwards, containing the text '304k (Mar)' and '316k (Feb)'. This represents the number of online register searches.

Month	Searches
Mar	304k
Feb	316k

Online Register searches

Social media total followers



A blue speech bubble containing a green arrow pointing up and the text '42 media mentions'.

42 media mentions

Top content

- 1) Pay Update
- 2) Discrimination Awareness Training
- 3) Handy How to: Log an IT ticker

Intranet

Summary – March 2026

- Register searches slightly decreased in line with renewals.
- Significant interest in the advanced levels of practice work shown through high engagement on our news item.
- LinkedIn continues to assert itself as our most followed social media channel in line the trend we have identified.
- Users on the website remained stable following the web upgrade project.
- Pay award and wider update and anti-discrimination training attracted the highest views on the intranet.

Chief Executive's report on organisational performance – May 2026

Appendix C

Corporate Plan 2025-26 - Deliverables Milestones Tracker

Strategic theme 1- Continuously improve and innovate

Strategic theme 1- Continuously improve and innovate			RAG
Areas of development	Key milestones	Lead	
<p>1</p> <p>Assessment model: Develop our assessment model of those who trained outside of the UK applying to join the HCPC Register</p>	<p>A) Rebalance documentary assessments and the use of tests of competence by reducing / removing use of further information (Q2)</p> <p>B) Procure third party assessment partner to develop tests (including possibility of ongoing maintenance of tests (Q2-3)</p> <p>C) Develop standardised tests and testing framework for high volume professions (Q4 and into FY2026-27)</p>	<p>Head of Regulatory Development & Performance</p>	<p>Following the successful implementation of phase 1 changes to the international application assessment process in November 2025, we have now commenced our phase 2 which focusses on the quality and consistency of our tests of competence.</p> <p>We decided last financial year to not procure a third party to design standardised testing and we have reported on this previously. Instead, our learning from phase 1 highlighted the benefits of our current approach which provides flexibility to assess individual applicants.</p> <p>We have completed the first pilot of a new internal audit mechanism to assess the quality and consistency of our tests of competence. This pilot proved successful and the learnings have resulted in changes to guidance and processes for our assessors and teams. We are now delivering a pilot of a clinically led audit mechanism which is due to complete in Q2. This partner led approach aims to provide professional input into the review of tests of competence which provide further assurance and development of our assessors delivering tests.</p> <p>We will also deliver new guidance and e-learning for our assessors regarding the preparation and delivery of tests of competence. This will be completed in Q2 also.</p>
<p>2</p> <p>Customer contact: Initiate the first phase of a new</p>	<p>A) Complete Commercial agreements to establish new strategic partner to delivery</p>	<p>Head of Registration/</p>	<p>A and B completed as planned.</p>

	customer contact approach which replaces our legacy telephony solutions and puts in place the foundations for improved interactions with registrants and other stakeholders.	<p>Customer Contact services for the HCPC (Q1)</p> <p>B) Complete the implementation of an as-is replacement of existing telephony system with new strategic partner removing incumbent supplier risk (Q3)</p> <p>C) Complete definition of to-be requirements describing the business requirements for the new customer contact requirement (Q3-4)</p> <p>D) Begin implementation of the to-be organisation changes and technology configurations to support the new to-be Customer Contact capability (Q3 – 4)</p>	Head of Business Change	<p>C) Requirements gathered and used to develop business case for ongoing work this financial year.</p> <p>D) Implementation planning due to be completed during Q2 this financial year. Implementation to take place during Q3-Q4.</p>
3	Partners: Design and implement changes to our partners operating model to improve the processes and systems that enable partners to contribute to our work	<p>A) Review and implement new contractual arrangements for Partners including new DocuSign (Q3 and ongoing)</p> <p>B) System and process improvements to regulatory function payment pathways to improve data quality and financial controls (Q3-4)</p> <p>C) KPI and QA development work across regulatory functions (Q3)</p>	Partner Project Lead	<p>A) New systems implemented 1 October 2025 for the payroll system, pension plan, partner portal functionality and internal payment pathways. Process will be reviewed in 3 and 6 month phases to engineer out any non-compliance instances.</p> <p>B) Improvements implemented. There is one left to complete by the end of this quarter.</p> <p>C) This has been completed.</p>
4	FTP: Embed our newly established legal team, frontloading investigations, which involves gathering	<p>A) Embed newly established legal team: all posts filled, ways of working established (Q2)</p> <p>B) Continue to develop how we investigate front loaded cases internally. This year, we will manage cases in-house at the Post</p>	Head of FTP Legal Services, Head of Adjudication Performance &	<p>A) This has been achieved. A new legal team has been established, posts have been filled and have started taking cases over the course of the last year.</p> <p>B) Milestone has been met. There were around 65 front loaded cases at the end of the financial year.</p>

	<p>more evidence earlier in an FTP investigation.</p> <p>Reviewing our scheduling process to create greater efficiency.</p> <p>Continue work to change our FtP operating model.</p>	<p>ICP stage for the first time. We will also grow the caseload and complexity of cases at the Pre-ICP stage (Q4)</p> <p>C) Continue our work to change our operating model to improve the efficiency of FTP investigations by introducing streaming of non-frontloaded investigations (Q2)</p> <p>D) Introduce tools needed to professionalise our in-house legal services in line with the investment case submitted for this year (Q4)</p> <p>E) Scheduling process review phase 2. Continue to look at efficiencies with the listing process to reduce the time taken to list a matter for a final hearing (Q4)</p>	Head of Case Progression & Quality	<p>Managed Post ICP for the first time and managed complexity.</p> <p>C) Operating model for non-front-loaded cases has been implemented since July 2025. Have aligned the cases before July 2025 with the new cases. There has been a challenge with the volumes of concerns received and how to manage these and the new BAU.</p> <p>D) This has been completed. Legal Research database has been introduced. Dictation and a large file document have been introduced. In the final stages of process for obtaining DocuSign.</p> <p>E) The scheduling process review phase 2 has been put on hold and will be pushed into next year's plan. Small changes are still being implemented to put in a good place for new operating model.</p>
5	<p>FTP: Support and provide guidance for registrants and witnesses involved in the FTP process, including enhancing our wellbeing support provision</p>	<p>A) Continuation of improvements to the support and guidance we provide to witnesses, including updates to the HCPTS website (Q3)</p>	Head of Adjudication Performance	<p>Fact sheets went live in February 2026 and will be taken forward to new financial year 26/27 and Q1.</p>

Strategic theme 2 - Promote high quality professional practice

Areas of development		Key milestones	Lead	RAG
6	Standards	<p>A) SETS: Pre consultation engagement (Q2-3)</p> <p>B) SETS: Publicly consult on proposed amendments to the standards of education and training (Q3)</p> <p>C) SETS: Agree new standards to be published in the summer of 2026 (Q4) (<i>come into effect date tbc</i>)</p>	Head of Policy	<p>A) Stats consultation closed on 16 February as planned. The initial analysis was undertaken in March 2026 and would be analysed again in June. On track for the July Council Meeting.</p>

		D) SCPEs: Create further revised guidance on safeguarding. Consider additional areas where guidance may be helpful (Q3-Q4)		B) Complete – consultation closed in February. C) Revised standards to be discussed at ETC in June for Council approval in July 2026. D) Revised guidance on Safeguarding has been created. This was taken to the March Professional Bodies Forum in order to receive input for external stakeholders and plan to take to July Council for approval.
7	Scope of practice: Support registrants and employers to meet the HCPC's expectations for the safe and effective optimisation of scope of practice.	A) Develop materials on supervision and delegation and deliver a series of dedicated workshops (Q3)	Head of Policy	Update was taken to ETC (March 2026). Materials have been finalised in CPD and other aspects in March 2026. Contract with NHS England finished on 31 March.
8	Professional Liaison Service	A) Enhance our ability to use our data and other insights to develop a more targeted and risk-based approach to our prevention work (Q3) B) Review and plan the future requirements of the service (Q3) C) Develop new and engaging ways to deliver learning and influence to extend the reach of the service (Q3-4)	Professional Liaison Ops Manager	We are using new data and indicators to tailor our approach as they become available. The new Head of Professional Liaison and Outreach, Emma Greening, started in April 2026. and has commenced planning for future requirements of the service and evolving our delivery methods and prioritisation. New ways of delivering education and content part of workplan for next year. A new Scottish Professional Liaison Consultant will join us in August 2026.

Areas of development		Key milestones	Lead	RAG
9	Research	A) Commission research into the impact of the increasing use of AI by registrants working across our professions, settings and across the UK (Q2)	Head of Policy	Delay in going out to tender for a partner for this work. The procurement exercise has now concluded and Ipsos Mori appointed. The research will be undertaken between Q1 and Q3 of FY2026-27
10	Data quality and infrastructure	A) Improve our external data reporting capability: workforce profiles (Q1), student/learner progression to HCPC registrant (Q2) and ongoing improvement to self-service reporting tools available on our website (Q2-4)	Head of IT/Digital & Head of Insight & Analytics	<p>There have been several improvements and additions to the data hub over Q2-Q4 and the reports have been discussed at Council meetings.</p> <p>The student/learner progression work has been delayed due to ongoing QA work of the product and engagement with external stakeholders but publication is due in Q1 of FY2026-27.</p>
11	Insight and analytics	<p>A) Complete more detailed analyses of our FTP diversity data, providing insights from registrants' CPD activity (Q3)</p> <p>B) Collaborate and share our data across the sector in order to enhance public safety and professional practice. This will include exploring participation in a cross-regulator database, increased sharing of our data with professional bodies and further education data sharing and analysis (Q4)</p>	Head of Insight & Analytics	<p>A) The FTP EDI supplementary report publication has been delayed until Q1 this year but Council received the analysis at its December meeting. CPD information was published in March to align with CPD week.</p> <p>B) Meeting took place with NHS England. A formal request has been submitted to NHS Business Services Authority to link the electronic staff records.</p>

Strategic theme 4 - Be visible, engaged and informed				
Areas of development		Key milestones	Lead	RAG
12	Developing the HCPC's next Corporate Strategy	<ul style="list-style-type: none"> A) Review the success of the current Corporate Strategy (2021–26) and conduct engagement with a wide range of stakeholders to develop our next Corporate Strategy (Q2-3) B) Carry out a stakeholder perceptions survey and targeted user research to support our Corporate Strategy refresh and digital roadmap implementation (Q2) 	ED Corporate Affairs/Head of Comms, Engagement & Public Affairs	A & B milestones complete. July 2025 marked the launch of our initial stakeholder engagement via online survey, nearly 900 responses received from a range of stakeholders. Have completed focus groups, workshops and meetings throughout September 2025 across stakeholder groups including professional bodies, education providers, registrants, the public and our employees. The engagement has informed the development of the Strategy which has been developed and approved by Council.
13	Listening to our stakeholders	<ul style="list-style-type: none"> A) Build on a successful Chair/Chief Executive programme of relationship building and implement a refreshed stakeholder engagement plan that includes activity aligned to the HCPC's communication campaigns (Q3) B) Begin to establish a single customer relationship management (CRM) platform to allow better sharing of information and coordination of communication, engagement, quality assurance and complaint handling activity (Q4) (see milestone 16b) C) Seek to amplify the voice of the service user in our work through targeted engagement with patient representative bodies such as the Patients Association (Q2) 	Head of Comms, Engagement & Public Affairs	Engagement has been targeted towards corporate strategy development and communication campaigns. A refreshed engagement plan has been developed and is now being delivered. Engagement with Patients via the Patients Association has been held around our next corporate strategy and the SETs review.

14	Strengthening our communication capabilities	<ul style="list-style-type: none"> A) Complete all phases of the resourcing and recruitment plan (Q4) B) Deliver SETs communication campaign (Q4) C) Working with IT and procurement colleagues, deliver an upgrade to our web platform to allow digital roadmap delivery (Q4) D) Agree brand refresh and roll out new support materials (Q3) 	Head of Comms, Engagement & Public Affairs	Resourcing and recruitment plan has been completed with new roles now in post. Communications activity completed on SETs consultation. Web platform upgrade completed successfully. Brand refresh outputs agreed and will be implemented from the end of Q4.
15	EDI	<ul style="list-style-type: none"> A) Develop a network of EDI champions across the organisation to support driving forwards EDI commitments and enhance EDI resilience (Q4) B) Publish FTP report with further analysis of our EDI data (Q3) C) Contribute to the development of the next Corporate Strategy to ensure EDI is embedded throughout (Q1-3) 	EDI Strategic Lead	<ul style="list-style-type: none"> A) HR have now begun launching their networks and this action has now devolved to HR. B) Analysis has now been completed and report shared with Council in December 2025. Formal publication of report scheduled for Q1 of FY2026-27. C) Now complete and work commencing on developing the next EDI Strategy.

Strategic theme 5 - Build a resilient, healthy, capable and sustainable organisation				
Areas of development		Key milestones	Lead	RAG
16	Delivering the technology roadmap	<ul style="list-style-type: none"> A) As part of wider customer contact strategy replace our legacy telephony solution to enable further improvements in the way we interact with registrants and other stakeholders who contact us (see milestone 2) (Q4) B) Scope and develop a foundational single CRM that will create a platform for bringing together all our customer information (Q4) C) Complete our journey to the cloud by decommissioning our remaining on-premises technology services and replacing these with future-proof cloud base services" (Q4) 	Head of IT/Digital & Head of Business Change	<ul style="list-style-type: none"> A) Milestone has been met. The legacy telephony system was replaced in November 2025. Currently going through work to define this. B) This is ongoing. The single CRM strategy and approach has been reviewed and will be taken forward in the 26/27 investment plan. C) This has been completed. Systems have been decommissioned and migrated.

		D) Continue to develop and enhance the data platform to provide a single version of truth for HCPC data and enable work on data driven insights (Q4 and onwards).		D) Review has been completed for the FTP build, further work being carried out. The approach to the registration build has been agreed and proposal to be brought forward to ELT.
17	Improving financial sustainability and resilience	<p>A) Continue with regular, transparent fee reviews to maintain the HCPC's financial sustainability and enable investments in further improvements. Planning under way for next consultation (Q4)</p> <p>B) Further develop our financial and procurement systems, to help ensure value for money and continued improvements in financial management, including through invoice processing automation (Q1), more efficient accounting for registrant income (Q3) and use of improved, AI-enabled reporting tools (Q2)</p>	Head of Finance	<p>A) Continue with regular, transparent fee reviews to maintain the HCPC's financial sustainability and enable investments in further improvements. The consultation went underway from 28 April 2026 with 27 July 2026 as the close date (Q4).</p> <p>B) Further develop our financial and procurement systems, to help ensure value for money and continued improvements in financial management, including through invoice processing automation that was implemented back in May 2025, more efficient accounting for registrant income (Q3) and use of improved, AI-enabled reporting tools (Q2).</p>
18	Enhancing our People Strategy	<p>A) Deliver year 5 of our People Strategy: focus on attracting high quality candidates via our recruitment portal and workforce planning to build future resilience.</p> <p>B) Develop an updated People Strategy for the future to ensure that the HCPC continues to benefit from a highly engaged and capable workforce (Q4)</p> <p>C) Monitor the impact of the introduction of the Freedom to Speak Up Guardians scheme (Q4)</p>	Head of HR & OD	Recruitment activities continue to be of priority. 25 new campaigns in Q4, 1,1151 applications received, 81 new CVs added to our talent network pool and 19 job offers made. Workforce planning has been completed in alignment with financial planning and departmental workplans (A).

		<p>D) Maintain other speaking up and listening opportunities including Let's Talk sessions with senior leaders, the Employee Forum and our regular pulse surveys (Q4)</p>		<p>A new People Strategy is currently being developed in alignment with the new Corporate Strategy. (B).</p> <p>The Speak Up Guardians will undertake a review of the scheme following the collection of feedback from the Q3 pulse survey (C).</p> <p>Feedback continues to be gathered through the quarterly pulse surveys and meetings with the Employee Forum group. (D).</p>
19	Improving our sustainability	<p>A) Maintain and optimise the HCPC's office estate to provide a safe and sustainable working environment, including progressing plans to end our reliance on gas-powered heating (Q4)</p> <p>B) Implementation of an Environmental Management System to improve our ability to monitor the environmental impact of our operations (Q3)</p> <p>C) Enhance procurement policy to include a focus on sustainability and supplier diversity (Q2)</p>	Head of Estates & Facilities	<p>A) We have begun a phase of improvement to the Heating Ventilation and Air conditioning systems initially within a prioritised area of the buildings aimed at leading us toward sustainability targets. This will be a phased program over a number of years.</p> <p>B) The implementation of an Environmental Management System is still within plans though this has needed to be balanced against organisational priorities and has been rescheduled for delivery late in FY26-27.</p> <p>C is complete. The procurement policy has been updated to include sustainable procurement as per schedule.</p>

Strategic theme 6 - Promoting the value of regulation				
Areas of development	Key milestones	Lead	RAG	
20	Education	A) Help education providers and others understand our regulatory requirements, and current sector trends, by considering our assessments from the 2024-25 academic year, building on previous analysis, and publishing / engaging on key findings, in a user focused way (Q3)	Head of Education	This has been published and the annual report will be published on the website at the end of April.
21	Registrant health and wellbeing	A) Review our progress against and the impact of the Registrant Health and Wellbeing Strategy, identifying any further work we can undertake to improve the experience of our regulatory processes for those involved (Q3)	Head of Professional Liaison	Head of service joined us in April. This will be undertaken as part of the plans for 2026-27.
22	Supporting new registrants to successfully transition to UK practise	A) Through our Insights for Employers programme and the Employer Hub, increase understanding of the challenges faced by registrants who are new to UK practice, and encourage and support employers to improve the narrative around and support for international registrants (Q3)	Head of Professional Liaison	Employer insights newsletter around supporting international registrants published in July 2025. Joining the UK workforce sessions delivered in January and February 2026 to support international registrants who registered in 2025.
23	Shaping the future of regulation	A) Continue to raise the benefits to patient safety and the quality of care that regulatory reform will bring when meeting with stakeholders and responding to relevant departmental consultations (Q1-4)	Deputy Chief Executive & Executive Director of Education,	Ongoing - engaging with DHSC and sharing feedback and on the draft GMC Order, including responding to the current live consultation.

		B) Ongoing engagement and contribution to the DHSC's regulatory reform work (Q1-4)	Registration, Regulatory Standards	
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Chief Executive's report on organisational performance – May 2026

Appendix D

Corporate Plan 2026-27- Deliverables Milestones Tracker

Corporate Plan 2026-27 delivery tracker

Plan commitment	Owner	Target	Progress commentary
<i>Putting patients at the centre of smarter, preventative regulation</i>			
Establish a diverse Patient Panel to embed lived experience into our regulation strengthening the patient voice and building greater public trust and transparency.	Claire Amor	Q2-4	Options will be presented to Council in September 2026 agreement.
Evolve our Professional Liaison and Outreach service to be more strategic, risk-based and responsive to stakeholder needs. We will begin incorporating behavioural science into our work to strengthen how we understand and influence professional behaviour. We will focus our resources where they will have the greatest impact on public protection and the prevention of harm.	Claire Amor	Q1-4	New Head of Professional Liaison and Outreach joined us in April 2026. These areas are included in goals and objectives.
Undertake analysis to identify the profession specific risk profiles that lead to fitness to practise concerns to better inform our approach to smarter, preventative regulation.	Andy Smith	Q1-2	Work on this has started and the preliminary findings are that while some characteristics are relative risk factors, their absolute risk is so low as to not be useful for prediction. The work is in track to be completed by end Q2.
Deliver multi-channel communication campaigns to improve understanding of our role, our regulated professions and the value of our insights, supporting greater public confidence and clearer awareness of how we prevent and address risk.	Claire Amor	Q1-4	A prioritised communications activity plan has been created for the year which has identified key campaign activity. Detailed planning and audience mapping is in progress across a number of projects and campaigns.
<i>Supporting healthcare workforce development through proportionate, agile regulation</i>			
Increase our capacity to undertake front-loaded investigations and strengthen case management resources to support timely, proportionate decision-making and a better experience for all parties.	Laura Coffey	Q1-4	Expanded legal team in place at 1 April 2026, receiving new increased target of new referrals. Operational planning to manage instructions and capacity over Q1 and Q2 completed.

			Recruitment campaigns for permanent and temporary investigator resource underway. New assessment centre approach to recruitment to test full range of competencies and behaviours designed and rolled out in Q1.
Commence a review of the threshold policy, which sets out the kinds of concerns we will accept for investigation, to ensure that the cases we progress are proportionate to the risk involved.	Laura Coffey	Q1-4	We have brought forward our plans to commence this work, with a scoping exercise due to commence in June 26.
Enhance witness support and the customer service we provide to all participants throughout the FTP process	Laura Coffey	Q1-3	Work to improve our customer service has commenced, focused on enhancing existing tools and developing new tools to support our teams to provide timely and meaningful updates to parties. Phase two of our witness support review will commence in Q3.
Begin a project to improve how we list cases for hearings to reduce unnecessary delays and uncertainty for registrants	Laura Coffey	Q3-4	Not yet due to initiate.
Undertake data analysis to identify the key factors contributing to delays in case progression so we can better mitigate avoidable delays.	Andy Smith	Q4	Not yet due to initiate.
Commence review of CPD standards and return to practice requirements to ensure they reflect evolving models of care, new technologies and the needs of a diverse, multidisciplinary workforce.	Andy Smith	Q1-4	CPD review scoping commenced, our initial step will be to carry out a literature review looking at CPD both in health and other sectors, UK and internationally. Return to practice review will commence Q3.
Provide high quality data analysis that supports workforce planning by: <ul style="list-style-type: none"> - Further developing the workforce dashboard to increase functionality and to incorporate the EDI dashboard, including more categorisations. 	Andy Smith	Q4	Not yet due to initiate.

<ul style="list-style-type: none"> - Analysis of those leaving the HCPC register that will assist workforce planning and will also assist forecasting renewal rates and therefore HCPC's income. - Develop our use of HESA data to improve workforce pipeline data 		Q4	
<p>Provide high quality data analysis on regulatory outcomes by:</p> <ul style="list-style-type: none"> - Publish an FTP dashboard containing annual report, supplementary EDI report and FTP cohort outcomes - International registration application outcomes by EDI characteristic analysis refresh 	Andy Smith	Q3	Not yet due to initiate.
<p>Improve integration with the wider system by expanding data-sharing and transparency through improved dashboards. Including:</p> <ul style="list-style-type: none"> - Data sharing opportunities with NHS ESR system. 	Andy Smith	Q4	Not yet due to initiate.
<p>Improve the quality of HCPC data by:</p> <ul style="list-style-type: none"> · Undertaking data profiling across the key regulatory domains (Registration, Education and FTP), identifying data quality issues and working with data stewards to resolve them. · Delivering targeted engagement and training sessions to data owners, data stewards and operational staff to promote accountability and foster a strong culture of data ownership. 	Andy Smith	Q1-Q4	Not yet due to initiate.
<p>Evaluate the impact of the 2025 English language requirement changes, and implement further improvements to our UK and international registration processes ensuring fairness, clarity and a more streamlined experience for applicants and employers.</p>	Andy Smith	Q1-4	<p>Paper evaluating the impact of English language requirement changes scheduled for discussion at June ETC.</p> <p>Q1-2 for international phase 2</p> <ul style="list-style-type: none"> • New test of competence assessor guidance, assessment record and Elearning to be

			<p>introduced for all registration assessors in Q2.</p> <ul style="list-style-type: none"> • Pilot of internal audit mechanism complete in Q1 • Clinically led audit pilot in progress and due to complete in Q2. <p>UK application process transformation not yet initiated.</p>
Commission research on registrants' use of AI to inform future regulatory approaches and develop our regulatory approach to the use of AI by registrants and applicants.	Andy Smith	Q1-3	Research partner (Ipsos) selected following tender. Initial kick-off discussions taking place.
<i>Technology-Enabled Regulatory Excellence and Organisational Sustainability</i>			
Launch a renewed People Strategy that strengthens leadership capability at all levels, builds digital skills and supports an inclusive and supportive culture, enabling a confident, adaptable workforce and consistent, values-led regulatory delivery.	Alastair Bridges	Q2-3	On track for launch. Draft strategy to be discussed at the PRC in June 2026.
Develop and launch a new Digital and AI Strategy to set the direction for how we adopt and use digital and AI tools across the organisation, incorporating a refreshed technology roadmap that will support delivery of the new corporate strategy. Q1 = engagement with ELT, PRC & the wider organisation, Q2 = PRC review draft, Q3 = Council	Alastair Bridges	Q1-3	Q1 – ELT review Q2 – PRC review Q3 – Council sign-off
Establish robust AI governance and extend the responsible use of automation to ensure AI-enabled processes are used safely and appropriately, reducing manual burden and supporting more efficient regulatory operations.	Alastair Bridges	Q1-4	ELT to discuss proposals and agree approach in Q1, for rollout over the year.
Enhance our data platform and improve core systems including our website, to improve user experience, strengthen analytics and enable more effective organisational decision-making.	Alastair Bridges	Q1-4	Q1, Website upgrade complete enabling improved search functionality and the foundation to allow for future improvement in Q3-4 Q1 complete data model design, Q2-3 Complete FTP Build and Registration

			Build, Q3-4 – Enable Self Service reporting.
Design a unified Single Contact Centre operating model to ensure stakeholders get the right information from the right people when they need it, improving customer experience, reducing duplication and increasing service responsiveness.	Alastair Bridges		Q1, New telephony system implemented enabling reporting capabilities for FTP. Q2-3, Review of organisational processes to move into a single contact centre improving customer service, Q4 Design and build new capabilities and Organisational change plan.
Strengthen long-term organisational sustainability by implementing measures that support financial resilience and advancing our environmental sustainability strategy, ensuring HCPC can continue to deliver high-quality, responsible and future-ready regulatory services.	Alastair Bridges	Q1-4	Fee rise consultation launched 28 May 2026. Second phase of HVACs project to complete transition away from use of gas-powered heating in office estate, Q4.

Strengthening Public Protection through the Regulation of NHS Senior Leadership – workstreams to be developed dependent on government timescales and funding

Chief Executive's report on organisational performance – May 2026

Appendix E

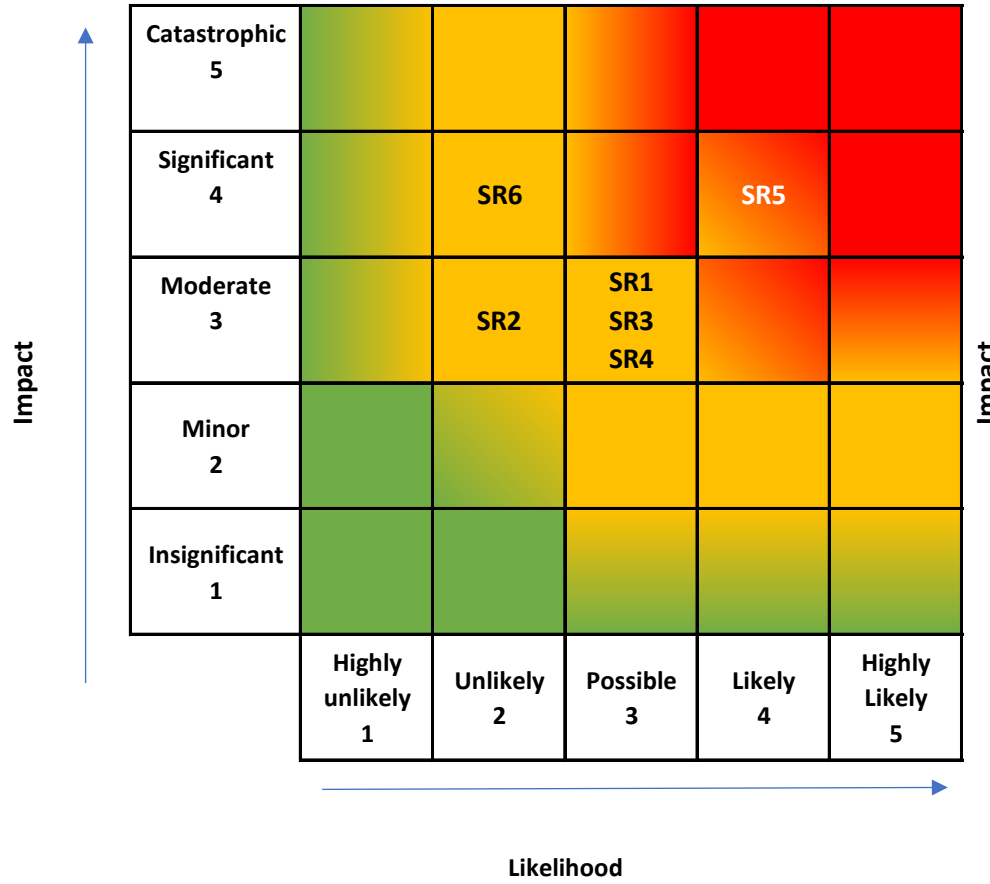
Strategic Risk Register March 2026

HCPC Strategic Risks

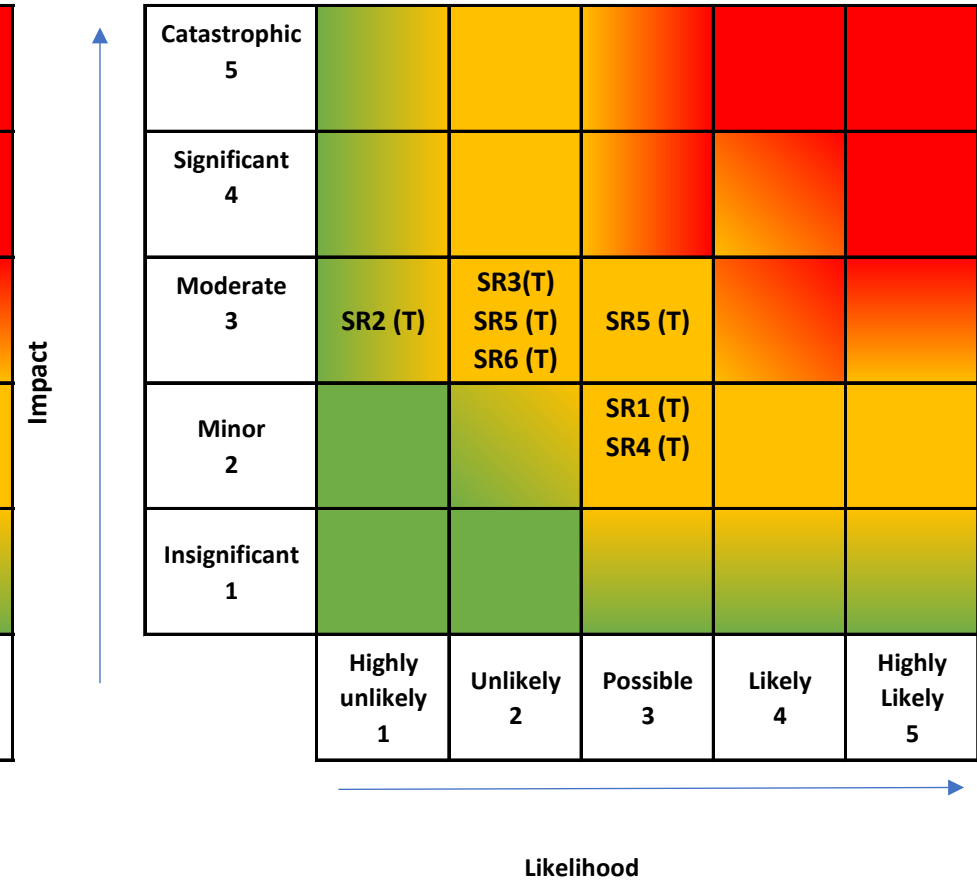
Summary of strategic risks

Strategy	Strategic Risks - from November 2024	Risk Description	Feb-26	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. We are unable to deliver our regulatory requirements affectively in a changing landscape, effecting our ability to protect the public.	Not delivering or meeting: Informed registration decision making; Proportionate and fair FTP decision making; Engaged Education decision making; PSA Standards of Good Regulation; Appropriately managed improvement programmes in regulatory areas; Consideration of EDI needs, including accessibility of functions and fairness of decision making.	9	6
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. Our standards do not reflect current practice and/or they are not understood by registrants and our stakeholders.	Relates to: Quality and suitability of our standards and guidance in setting a threshold for safe & effective practice which protects the public. How effectively we communicate our regulatory expectations. The effectiveness of our professionalism and upstream regulation work. Effective and informed consultation process, including enhanced EDI consideration.	6	3
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.a Quality of our data leads to assumptions or gaps in understanding, and therefore inadequate or uninformed decision making. 3.b We are unable to maximise our use of the data we hold to share insights to protect, promote and maintain the health, safety and well-being of the public.	This includes our effectiveness in collecting, maintaining, and utilising the data we need to be an intelligence driven regulator and the effectiveness of our insight and intelligence 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.	9	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 are unable to effectively build trust, engage with and influence our stakeholders reducing our ability to understand their perspectives and regulate effectively.	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.	9	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.a The resources we require to achieve our strategy are not in place or are not sustainable. 5.b Our organisational values are not reflected at all levels of the organisation, leading to staff not feeling supported/trusted/listened too.	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). The development of our culture, people and physical assets, our continued financial viability and the significant failure of key business processes.	16	9
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 do not sufficiently or appropriately promote our work leading to opportunities to enhance our regulatory activity being missed and the benefits of regulatory reform remaining unrealised due to: a) the role of regulation in the delivery of high-quality care is underestimated by the public, registrants, students and employers. b) our ability to protect the public is under-recognised by policy makers and influential stakeholders.	This risk includes the HCPC's capacity and capability to engage and influence regulatory reform effectively to ensure its benefits are realised, as well as the HCPC being viewed by government as a priority regulator for reform.	8	6

Heat map of strategic risks - residual



Heat map of strategic risks - target



Risk score over time						
	SR 1	SR 2	SR 3	SR 4	SR 5	SR 6
Target	6	3	6	6	9	6
Mar-26	9	6	9	9	16	8
Nov-25	9	6	9	9	16	8
Sep-25	9	6	9	9	10.5	8
May-25	9	3	9	9	10.5	8
Feb-25	9	3	9	9	12	8
Nov-24	9	3	12	9	12	8

Strategic Risk 1. We are unable to deliver our regulatory requirements effectively in a changing landscape, effecting our ability to protect the public.	
Risk Summary	Not delivering or meeting: Informed registration decision making; Proportionate and fair FTP decision making; Engaged Education decision making; PSA Standards of Good Regulation; Appropriately managed improvement programmes in regulatory areas; Consideration of EDI needs, including accessibility of functions and fairness of decision making.

Current Risk Influencers	
✓	The 2024-25 PSA performance report published June 2025 shows we met 17 of 18 standards.
✓	Engaging with regulatory reform programme, informed we are the priority regulator for reform. Section 60 priorities are agreed with Council.
✓	Proactive approach to AI usage to support delivery of key processes
✓	Decision to withdraw approval of an education programme. Lessons learned exercise underway.
✗	NHS Manager barring scheme - Further clarity and planning needed to manage this new approach to regulation.
✗	Not realising all opportunities of AI and technological advances.
✗	Number of new FTP cases received increasing
✗	Tone of voice work still to be conducted in the wider organisation
✗	PSA is consulting on revised Standard of Good Regulation which will go live in 2026.
✗	High number of corporate complaints due to delays in the international application process, indication that this is reducing
✗	NHS 10 year plan in England changes models of care, impacting education and training. Workforce element of this plan due in Spring 2026

Mitigations in place	
Second line QA plan for 2025-26 to review success of improvements in FtP, Registration & education in addition to first line QA activity in place, such as the FtP DRG and panel member feedback following each hearing.	Centralised PSA coordination. Participation in inter-regulatory working groups to share good practice and discuss common issues, this is also provided through the use of a panel of legal providers for FtP matters with experience of how other
Wide range guidance on HCPC's regulatory processes available on our website.	Monitoring regulatory performance through performance reporting and KPIs.
Modern education QA model. Regular feedback sought and acted upon to improve process application and stakeholder experience. Education provider self-service portal in place improving experience of education stakeholders.	Use of technology and AI to support delivery of regulatory functions. (e.g plagiarism checks, redaction of FTP bundles)

Areas of Development	Progress 2025-26	Mitigation
Registration Assessment model	Following the successful implementation of phase 1 changes to the international application assessment process in November 2025, we have now commenced our phase 2 which focusses on the quality and consistency of our tests of competence. Phase two began in December 2025 and we are midway through a pilot of a new internal quality assurance approach to ensure compliance with our operating procedures and guidance for the delivery of tests of competence. We are also working with our assessors to develop a profession specific, peer review quality assurance framework looking at the quality of tests and test decisions from a professional/clinical perspective. We expect these first stages of phase 2 of this work to be completed by the end of March 2026 and the learning from this will inform the work that continues into next financial year.	A more balanced approach to international assessments will give more confidence in decision, and reduce delay complaints.
Customer contact	Implementation of new telephony system went live in November 2025. Phase 2 has started with completing current state assessment and agreeing objectives (goals and targets that the new operating model will achieve). Definition of the to-be state (high-level requirements) currently in progress and due to complete Q4. Implementation planning due to be completed post completion of the target operating model in Q4, implementation will continue in Q2-Q3 FY2026-27.	More accessible and available communication through an improved customer contact services allows us to support people through their regulatory processes more effectively.
Partners transformation work	All partner contracts have been issued and signed by all partners. New payroll system, pension plan, partner portal functionality and internal payment pathways changes implemented and communicated from 1 October. First payroll in November 2025 across all three regulatory functions. Phase two of the project considers the implementation of timesheets for partners. KPI and QA development continues. Technical and system enhancements are currently being explored.	A new model for how we approach and manage our partners will allow us to have more confidence in their performance.
FTP Legal Services	The embedding of FTP Legal is complete and ongoing, and now includes new resource and teams not forecasted as of Q1 this year. A research database is live and in use. Procurement for dictation software and e-signature tool is nearly completed and both on track to be implemented in March 2026. A business case was approved by ELT in October 2025 for phase 2. Currently undertaking foundational work to revise and streamline current operational processes to prepare for transition into new operating model for listing of final hearings. We expect transition to start in Q4 of 2026-27.	FTP's continued improvement in performance, while also developing new approaches to delivering regulatory duties, ensures that FTP decision making is fair, proportionate, and of good quality.
FTP Case Progression and Quality	The operating model for non-frontloaded cases has now been live for 6 months. We are now seeing the first cases investigated under the new model concluding. Early indications show an improvement in timeliness of these cases. With the number of cases increasing the department are looking how to continue to develop the streaming model further. The increased referrals is presenting a real challenge for casework allocation and progression. The team are managing and monitoring with close oversight, with risk prioritisation at triage.	
Adjudication and Tribunal Services	New fact sheets for witnesses throughout the process end to end will go live in February 2026. Phase 2 will focus on consistency of support we provide across the directorate and any additional support we can provide for vulnerable witnesses. Using the recommendations from the Witness to Harm project and how we support witnesses involved in sexual misconduct cases. We are aiming for this to be implemented by March 2026.	

Date	Risk Owner
Feb-26	Executive Director of Education, Registration & Regulatory Standards Executive Director of FTP & TS

	Impact	Likelihood	Risk Score
Inherent risk	5	x	5
Current Risk	3	x	9
Target risk	2	x	6

Change No

Risk Appetite
Regulation = Measured; Influence & Leadership = Seeks
The risk appetite target level within tolerance if below red/amber. We are confident that our standards and guidance are fit for purpose and so this risk is currently within risk appetite. 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

Reporting period commentary
The PSA audit of FTP cases completed at the end of 2025. The PSA will hold their first panel to assess our performance in March 2026. We have been given the opportunity to comment on the audit findings and will review the assessment for factual accuracy ahead of this initial panel.
The implementation of the new telephony went live in November 2025. Phase 2 of this project has begun and will continue in parallel with the implementation of a single CRM and updates to our website and portals to active a cohesive and consistent approach to customer contact and stakeholder engagement. By having connected and consistent support for our stakeholders we can ensure we are effectively delivering our regulatory requirements and protecting the public.
The growth of FTP Legal Services and planned new operating model for listing final hearings will support more effective management of the most risky or complex cases. In doing so this will allow us to manage the changing landscape of fitness to practise, and consistent increase of cases.

Strategic risk 2. Our standards do not reflect current practice and/or they are not understood by registrants and our stakeholders.	
Risk Summary	Relates to: Quality and suitability of our standards and guidance in setting a threshold for safe & effective practice which protects the public; How effectively we communicate our regulatory expectations; The effectiveness of our professionalism and upstream regulation work; Effective and informed consultation process, including enhanced EDI consideration.

Date	Risk Owner
Feb-26	Executive Director of Education, Registration & Regulatory Standards Executive Director of Corporate Affairs

	Impact		Likelihood	Risk Score	← No Change
Inherent risk	5	x	5	25	
Current Risk	3	x	2	6	
Target risk	3	x	1	3	

Current Risk Influencers	
✓	Thorough public consultation for all standards reviews, including proactive implementation guidance, workshops, and guidance to prepare stakeholders for any changes.
✗	Three country resource in place in the Professional Liaison team. Head of service will start in April 2026 and the search for a new PLC for Scotland is ongoing.
✗	NHS 10 year plan in England changes models of care and ways of working that have to be considered in how our standards and guidance is interpreted by registrants
✗	Changing expectations of our professions' practice as a result of pressures on services, tech or societal events.

Risk Appetite
Regulation = Measured; Influence & Leadership = Seeks
Current risk level has increased from 3 to 6, and therefore is outside risk appetite. 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 outside risk appetite

Mitigations in place	
Public consultation process in place, including equality impact assessments (EIAs) to capture the EDI element.	Policy enquiries function available to support understanding and application of our standards.
Engagement with key stakeholders/experts for widescale profession specific changes to standards, including the EDI forum.	Regulatory approach to advanced practice defined and agreed by Council.
Guidance provided on meeting our standards, #mystandards webinar series available of YouTube.	Professionalism Liaison service in place influencing employers, using knowledge to effect change through engagement and advice.
Dedicated website hubs for registrants, students, employers, members of the public, education providers.	Policy and Communication teams at full complement. Head of Head of Comms, Engagement & Public Affairs in place.

Areas of Development	Progress 2025-26	Mitigation
SETs review	SETS Consultation launched 17 November, closing 16 February. Initial analysis tabled for ETC (March) and on track for Council to consider revised standards in Summer 2026. Safeguarding guidance has been drafted following on from the SCPEs. Commissioned the Patients Association to review and seek service user feedback on their experiences of safeguarding and the draft guidance. Next steps to engage with external stakeholders.	Thorough consultation with a wide range of stakeholders gives us confidence our standards are proportionate and accessible
Scope of practice	Update paper to ETC (Sept 2025) - 3700 professionals registered interest in advanced practice webinars, worked collaboratively with GOsC to develop joint materials, including online resources and signposting. Webinar engagement sessions now completed and work now underway with GOsC to develop joint materials. Update paper will go to ETC in March 2026.	Supporting registrants and employers to understand scope of practice supports upstream regulation
Professional Liaison Service	We are using new data and indicators as they become available and are published. We use this to then tailor our approach. We are flexible enough to use intelligence and data sources to inform our decisions. New head appointed and will start in April. Professional liaison consultant for Scotland recruitment launched in January 2026. New ways of delivering education and content part of workplan for next year.	Utilising the source of stakeholder feedback received by the professional liaison service provides insight to registrants understanding of the standards.

Reporting period commentary
By commissioning a review of our draft safeguarding guidance, and seeking service user feedback on their experiences, we can ensure our guidance is reflective of current practice and informed by experience.
AHP advanced practice webinars are now completed and work is underway with GOsC to develop joint material in order to support AHP in understanding their role in advanced practice.
Due to the vacancies in the Professional Liaison and Outreach department the risk likelihood has increased, bringing the overall risk rating to medium. Recruitment has been successful and the post holders will in in place early in the new financial year

Strategic risk 3.a Quality of our data leads to assumptions or gaps in understanding, and therefore inadequate or uninformed decision making.	
3.b We are unable to maximise our use of the data we hold to share insights to protect, promote and maintain the health, safety and well-being of the public.	
Risk Summary	This includes our effectiveness in collecting, maintaining, and utilising the data we need to be an intelligence driven regulator and the effectiveness of our insight and intelligence 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.

Date	Risk Owner
Feb-26	Executive Director of Education, Registration & Regulatory Standards Executive Director of Resources

	Impact	Likelihood	Risk Score
Inherent risk	5	x	4
Current Risk	3	x	3
Target risk	3	x	2

← No Change

Current Risk Influencers	
✓	Registrant datahub has been published, providing detailed insight into the population of our registrants.
✓	IT team delivered successful first modules of new data platform, supporting EDI reporting, meeting the needs of the HEE data sharing project and improving access to core registration data.
✓	FTP data model build nearing completion, Reg data model design being developed
✓	Automation of reporting data continues
✓	20%+ measured improvements in data quality for all three regulatory functions achieved during 2025
✓	Data governance work has now become established as Business As Usual as part of the Insight & Analysis function.
✗	Quality and completeness of underlying data causing delays to analysis as significant cleansing work required. Data Governance Lead working with Ops teams to resolve and mitigate against continued imputing of new bad quality data.

Risk Appetite
Data = Open
Risk appetite is within tolerances with improved confidence of the quality of our data, and advancing of our reporting capabilities.
Current risk level is within risk appetite

Mitigations in place	
Publication of FtP, Education and Registration information and datasets through annual reports and FOI requests.	Interactive data hub launched 21 May 2025
Insights and Intelligence Framework agreed, setting out priorities and approach for data analysis.	Renewals data dashboard accepted report now in place agreeing renewals counts of actuals and previous windows.
Dedicated resource for Analysis and Intelligence and Data Engineer in place. Data Governance Lead and Senior Data Analyst Business Partner both in post	New data governance structure in place, led by the Information & Technology Governance Board with three groups feeding into that including the Data Governance Group.

Areas of Development	Progress 2025-26	Mitigation	Reporting period commentary
Research	We have been delayed in going out to tender as one particular provider we were in discussions with is no longer able to undertake the work. The Invitation to tender document is complete and will be released in Q4.	This research will give us insight on areas we should/could address as a regulator	The work of the Data Governance Lead has led to measurable improvements in data quality across all three regulatory functions, though this work is never complete. A new Data Governance page has also gone live on the intranet, making sure all relevant information are available and accessible to those who need them. With the new data governance structure in place there is more effective oversight through the Information & Technology Governance Board and Data Governance Group. The framework ensures data owners and stewards have been trained and are working to a set of role specific principles.
Data quality and infrastructure	Workforce profiles published as per plan (Q1); retention report and dashboard were published on the HCPC website at the end of September. The data hub launched in Q2. The Learner progression to registration dashboard will be published Q4 to allow for 1 year follow up for all 2024 graduates.	By continuing to improve the quality of our data and reporting capabilities we can be confident in the reporting we share	
Insights and Analytics	The FTP EDI supplementary report will now be published in Q4, main findings were presented to Council (and published in the Council papers) and at the all-staff briefing in December. The CPD insights analysis is postponed to Q4 for quality assurance purposes as we test an alternative analytical tool and also to align publication with CPD Week in March. We continue to collaborate and share our data across the sector. We have worked with Disclosure Scotland to help them clean their data set, and there is a meeting upcoming with NHS England to discuss linking to electronic staff records.	By sharing our data openly and providing more in depth analysis we are directly able to influence the health, safety and wellbeing of the public.	

Strategic risk 4. We are unable to effectively build trust, engage with and influence our stakeholders reducing our ability to understand their perspectives and regulate effectively.

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.

Current Risk Influencers	
✓	Collaboration with NHS employers to reach out to attendees of joining the UK workforce upstream events, contributing to the wider workforce agenda.
✓	Strategic Relationship Lead in place and actively managing and supporting relationship managers' network. Relationship management model in place. Engagement management group established to support more targeted forward planning for engagement.
✗	Three country resource in place in the Professional Liaison team. Head of service will start in April 2026 and the search for a new PLC for Scotland is ongoing.

Mitigations in place	
ELT relationship building and liaison with key stakeholders particularly Government Departments, professional bodies, other regulators, unions.	Policy statement on approach to MOUs in place, a number of MOUs agreed with key stakeholders.
Personal engagement plans for Chair & Chief Executive in place. Engagement management group meets regularly to monitor and plan engagement. Operational level relationship manager engagement for key stakeholders in place across HCPC.	Professional body forum in place, including regular meetings both virtually and in person.
EDI strategy and action plan informed by independent audit of EDI practice. EDI stakeholder forum & internal EDI employee forum.	Public consultation process in place, including equality impact assessments (EIAs) to capture the EDI element.

Areas of Development	Progress 2025-26	Mitigation	Reporting period commentary
Developing the HCPC's next Corporate Strategy	July 2025 marked the launch of our initial stakeholder engagement via online survey, nearly 900 responses received from a range of stakeholders. Have completed focus groups, workshops and meetings throughout September 2025 across stakeholder groups including professional bodies, education providers, registrants, the public and our employees. The draft of the new strategic aims and values is complete, and work is underway to finalise the delivery and comms plan ahead of launch in April 2026.	An informed approach to forming the new corporate strategy allows us to ensure our next strategy is robust and proportionate	The new corporate strategy has been drafted and is on track to be presented to Council for final approval. Throughout the development of this strategy we have been committed to listening and learning from all our stakeholders, both internally and externally. These insights have had a direct impact on the final strategic aims and values. Through the delivery of this strategy over the next five years we hope to continue to build trust and credibility through action.
Equality, Diversity and Inclusion	As HR continue to develop their networks, the work of ensuring that requirement for network remains suggests we may be able to combine functions. The publication of the FTP EDI report is on track to repeat and builds on the 23/24 report as outlined in risk 3, subject to the new timescales for Q4 completion. Contribution to the development of the next Corporate Strategy to ensure EDI is embedded throughout	Continuing to show commitment to EDI through actions not only builds trust and credibility, but ensures our future strategy is appropriately informed.	
Stakeholder engagement	Engagement has been targeted towards corporate strategy development. A refreshed engagement plan has been developed and is now being delivered. Engagement with Patients via the Patients Association has been held around our next corporate strategy and the SETs review.	Stakeholder engagement being accessible and informative helps us build relationships and understand their perspectives	
Strengthening our communication capabilities	Good progress with resourcing and recruitment plan with several roles now in post and final phase in progress. Communications activity in progress on SETs consultation. Web platform upgrade project in progress with completion anticipated in early Q4. Brand refresh project in progress and will be implemented from end of Q4.	As above	

Date	Risk Owner
Feb-26	Executive Director of Corporate Affairs
	Executive Director of Education, Registration & Regulatory Standards

	Impact		Likelihood	Risk Score
Inherent risk	5	x	5	25
Current Risk	3	x	3	9
Target risk	3	x	2	6

Change No

Risk Appetite
 Influence & Leadership = Seeks
 We have an built a strong engagement plan with our stakeholders, particularly building a more positive and transparent relationship with the Professional Bodies Forum. In order to meet target, this risk is also dependent on being able to deliver stakeholder expectations such as more automated processes.
Current risk level is within risk appetite

Strategic risk 5.a The resources we require to achieve our strategy are not in place or are not sustainable.
5.b Our organisational values are not reflected at all levels of the organisation, leading to staff not feeling supported/trusted/listened too.

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).
 The development of our culture, people and physical assets, our continued financial viability and the significant failure of key business processes.

Current Risk Influencers	
✓	Budget factors in projected future benefits of investments, to be validated at project initial phase and tracked to ensure deliver.
✓	We ended 2024-25 with a surplus budget and meeting our reserves policy of realisable net assets
✓	Latest fee rise in effect from 29 April 2025.
✓	People strategy in place: BDO audit shows good progress. Performance against KPIs good - sickness absence and turnover reducing. APDR participation for 2024-2025 was 100%.
✓	Two Speak Up Guardians in place from senior leadership. Annual report due to ARAC in March 2026
✓	Carbon baseline for HCPC now established with action plan for improving sustainability being developed with expert input and involvement of ELT and SLG.
✓	Publication of gender, ethnicity and disability pay gaps report 2024 (published 27/04/25)
✓	Fee levels under review for future sustainability.
✗	Income/cost pressures of the increase to FTP cases, while the number of registration applications has come down.
✗	Not realising all opportunities of AI and technological advances, not being deployed safely or ethically.
✗	Forecasting model insufficient, need to consider a wider range of impacts.
✗	Two large programmes of work - hospital managers and reg reform will have significant financial impact
✗	Rising inflation increases HCPC costs and HCPC employees cost of living pressures; impacts mitigated by budgeting, pay review and efficiency plans as part of benefits realisation.

Date	Risk Owner
Feb-26	Executive Director of Resources

	Impact	Likelihood	Risk Score
Inherent risk	5	x	5
Current Risk	4	x	16
Target risk	3	x	9

← Change No

Risk Appetite
 Financial = Measured; People = Open

Due to the continuing increase in FTP applications and legal cost, and the number of international registration applications significantly decreasing, the impact and likelihood have both increased. This brings the risk score up to 16, reflecting it is significant and likely.

The FTP Legal Services project to manage more frontloaded cases in house will directly mitigate the increasing legal costs. Regular review of the registrant forecast will support informed financial planning
 Flexible resourcing in place in registration, and we have reduced the resource in the department in line with application numbers.

Current risk level is outside risk appetite

Mitigations in place	
Adherence to budgeting and financial management and reporting processes which are subject to internal and external audit e.g. NAO. Finance business partner challenge and budget setting principles agreed by ELT to challenge the business on efficiency	Adherence to HR processes in relation to recruitment, annual performance development review and learning and development for employees. All HR policies have been updated in the last 12 months
Business change function provides challenge on benefits outcomes of investment in new areas of work or enhancements to existing processes. Medium-Term Financial Strategy in place incorporating an efficiency action plan.	Adherence to Partner processes in relation to recruitment, onboarding and Partner Code of Conduct (updated Jan 2024)
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	Effective IT system design maintaining confidentiality, integrity and availability of data. Digital transformation strategy provides roadmap for improving our IT systems.
HR includes a central learning and development function for employees, 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,	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.
Employee Forum acts as a consultation group for organisational change.	ELT monthly monitoring of productivity of all departments through detailed performance reporting. KPIs reported to Committees and Council for oversight of performance and progress in meeting agreed milestones for corporate plan.

Areas of Development	Progress 2025-26	Mitigation	Reporting period commentary
Delivering the technology roadmap	New contact centre solution went live in November 2025. Phase 2 scope currently being agreed. Development of a Single CRM supporting stakeholder engagement including complaints and FOI with continue in FY2026-27 All remaining significant data & systems now migrated into the cloud. Procurement underway to select a partner to redesign our network.	The tech roadmap gives us a multi year plan to develop our digital and tech capabilities.	<p>The technology roadmap continues to progress, with the new telephony system going live in Nov 2025. As each stage progresses we build further resilience to the pace of technological change. This continues to be a long term programme of work, allowing each part to be built on the last, ensuring a strong foundation.</p> <p>We continue to receive a high level of applications for roles and are generally able to recruited appropriately into these roles. In Q3 and early Q4 HR conducted workforce and succession planning with all departments to ensure each team is supported in having appropriate and sustainable recourse and training.</p>
People strategy	Recruitment activities continue to be of priority. 27 new campaigns in Q3, 1,556 applications received, 83 new CVs added to our talent network pool and 38 job offers made. Workforce planning underway. People Strategy workshops with selected staff and the Employee Forum have taken place. Qualitative and quantitative feedback has been analysed. A new People Strategy is now being developed. Q3 Pulse survey complete and will assess the feedback on speaking up. Speaking up and listening opportunities continue to be underway as part of the quarterly pulse surveys and meetings with the employee forum group.	The people strategy ensures we are recruiting and retaining high quality employees. It also supports the wellbeing of our staff.	
Improving financial sustainability and resilience	Discussions on fees held with Council at its meetings in October and December 2025. On track for next consultation as per timeline, subject to Council approval. Invoice automation processing successfully completed as per schedule. Recently gone live with FP&A software (Workday Adaptive Planning) - after validation and testing, will be rolled out for financial reporting purposes (budgets, forecasts, financial planning, etc.).	Resilient financial capabilities improves the sustainability of the HCPC	
Improving our environmental sustainability	As part of phase 1, professional design team have provided technical advice and costed options. Aiming for implementation in February and March and into Q1 of 2026/27, following ELT review of options. The team is working with finance to schedule implementation of EMS within test environment, Original timeline delayed. The procurement policy has been updated to include sustainable procurement as per schedule.	As a modern and conscientious organisation our environmental sustainability plan ensures we are in line with requirements.	

Strategic risk 6. We do not sufficiently or appropriately promote our work leading to opportunities to enhance our regulatory activity being missed and the benefits of regulatory reform remaining unrealised. This can manifest in two primary ways:
a) the role of regulation in the delivery of high-quality care is underestimated by the public, registrants, students and employers.
b) our ability to protect the public is under-recognised by policy makers and influential stakeholders.

Risk Summary
This risk includes the HCPC's capacity and capability to engage and influence regulatory reform effectively to ensure its benefits are realised, as well as the HCPC being viewed by government as a priority regulator for reform.

Date	Risk Owner
Feb-26	Executive Director of Education, Registration & Regulatory Standards Executive Director of Corporate Affairs

	Impact	Likelihood	Risk Score
Inherent risk	4	x	5
Current Risk	4	x	2
Target risk	3	x	2

← Change No

Current Risk Influencers	
✓	The Government have confirmed in a Written Ministerial Statement, its commitment to reforming the regulation of healthcare professionals across the UK and delivering legislation relating to the Health and Care Professions Council in this Parliamentary period.
✓	DHSC have confirmed that the HCPC is a priority for regulatory reform along with NMC, though timeline not yet confirmed
✓	Collaboration with stakeholders such as NHS England provides organisational experience for greater cross organisational collaboration on workforce as aimed for in regulatory reform. Positive and wide-reaching engagement with HCPC stakeholders on regulatory reform.
✗	HCPC funding challenges risk being unable to scale up to meet needs of regulatory reform due to parliamentary approval of fees and associated long process to achieve this.
✗	NHS Manager barring scheme - Further clarity and planning needed to manage this new approach to regulation.
✗	Government leadership changes, and challenges in the health landscape could impact on the progression of regulatory reform due to other priorities.
✗	The impact of the wider health regulator landscape, e.g. NMC culture and whistleblowing reports, GMC times article, etc.

Risk Appetite
Reform = Open
Current risk is within appetite.
The target risk will be reached if the outcome of regulatory reform and the longer-term regulatory landscape review compliments and endorses the multi profession regulation model. Risk reduction also requires greater clarity on timing of HCPC's reform and confidence that funding and resources in place realise the opportunity of reform.
Current risk level is within risk appetite

Mitigations in place	
Communications and strategic engagement, including parliamentarians and cross-party engagement, on regulatory reform supported by Luther Pendragon.	Participation in cross regulator analysis of draft legislation and other regulatory themes, HCPC's comments on draft legislation have been provided.
HCPC engagement on Health and Social Care Bill led to positive change.	Funding and resource required for progression of regulatory reform quantified within budget as a financial risk. Assessment of de-prioritisation of other development work undertaken to create capacity for regulatory reform.
Some dedicated policy resource in place.	HCPC medium term financial plan in place to seek to make provision for regulatory reform. Consultation expected to launch Sept 22.

Areas of Development	Progress 2025-26	Mitigation	Reporting period commentary
Education	We have published insight from our assessments from four academic years, including the 2024-25 academic year. This information is future proofed and will be updated yearly with findings from our assessments.	Supporting understanding of the value that regulation adds	We continue to actively engage with the DHSC's regulatory reform work as well have the Westminster forum on the future of regulation.
Registrant health and wellbeing	The Head of Professional Liaison role has been appointed and will start April 2026. A review our progress against and the impact of the Registrant Health and Wellbeing Strategy will form part of new post holder's role once in post and so will be undertaken as part of the plans for the next FY.	As a companionate regulator, supporting our registrants health and wellbeing can positively impact patient safety	
New registrants transition to UK practise	Employer insights newsletter around supporting international registrants published in July 2025. Joining the UK workforce sessions delivered in January and February 2026 to support international registrants who registered in 2025.	Supporting registrants new to UK practice supports addressing the workforce crisis	
Shaping the future of regulation	Continue to raise the benefits to patient safety and the quality of care that regulatory reform will bring when meeting with stakeholders and responding to relevant departmental consultations Ongoing engagement and contribution to the DHSC's regulatory reform work Engaging with DHSC and share feedback and position statements on the draft GMC order. This is moving at fast pace. DHSC is looking to consult on GMC order in December Chair engaging with Westminster forum on the future of regulation.	Increased engagements with wider stakeholders ensure understanding the value of our work, encouraging support for reg reform changes	