

**Council**

**Minutes of the 118<sup>th</sup> meeting of the Health and Care Professions Council as follows:-**

**Date:** Thursday 24 May 2018

**Time:** 1:30pm (The public part of the meeting will be preceded by the private part of the Council meeting at 12 noon with lunch at 1pm)

**Venue:** Rooms D & G, Health and Care Professions Council, Park House, 184 Kennington Park Road, London SE11 4BU

**Present:** Elaine Buckley (Chair)  
Stephen Cohen  
Maureen Drake  
Kathryn Foreman  
Sue Gallone  
Sonya Lam  
Joanna Mussen  
Gavin Scott  
Robert Templeton  
Graham Towl  
Stephen Wordsworth

**In attendance:**

Claire Amor, Secretary to Council  
Khaleen Ash, Team Administrator  
John Barwick, Executive Director of Regulation  
Jonathan Bracken, Solicitor to Council  
Ellis Christie, Quality Compliance Officer  
Hannah Eales, Kingley Napley LLP  
Guy Gaskins, Executive Director of Operations and IT  
Andy Gillies, Director of Finance  
Teresa Haskins, Director of Human Resources  
Jacqueline Ladds, Executive Director of Policy and External Relations  
Claire Parry Kingsley Napley LLP  
Marc Seale, Chief Executive and Registrar  
Tian Tian, Head of Financial Accounting  
Katherine Timms, Acting Director of Policy and Standards  
Sarita Wilson, Head of Case Reception and Triage

## Public Agenda

### **Item 1.18/65 Chair's welcome and introduction**

- 1.1. The Chair welcomed Council members and those seated in the public gallery to the 118<sup>th</sup> meeting of Council.
- 1.2. The Chair thanked those Directors who had left the HCPC, following the restructure of the Executive Management Team, for their many years of contribution to the success of the HCPC.
- 1.3. The Chair welcomed to the meeting the new Executive Directors and encouraged their participation in Council discussion.

### **Item 2.18/66 Apologies for absence**

- 2.1 Apologies were received from Eileen Mullan.

### **Item 3.18/67 Approval of Agenda**

- 3.1 The Council approved the agenda.

### **Item 4.18/68 Declaration of Members' interests**

- 4.1 No interests were declared.

### **Item 5.18/69 Minutes of the Council meeting of 21 March 2018**

- 5.1 The Council considered the minutes of the 117<sup>th</sup> meeting of the Health and Care Professions Council.
- 5.2 The Council agreed the minutes.

### **Item 6.18/69 Matters arising**

- 6.1 The Council noted those matters arising from the meeting held on 21 March 2018.
- 6.2 The Council noted the report.

### **Item 7.18/70 Chair's report**

- 7.1 The Council received a report from the Chair.
- 7.2 The Chair highlighted the following points from her report:-
  - the Chair and Chief Executive met with Lord Patel of Bradford, the newly appointed Chair of Social Work England. The meeting was positive with desire on both sides to work collaboratively to ensure a

smooth transition of responsibility. An open invitation was extended to Lord Patel and his team to visit the HCPC.

- the Chair thanked Council Member Eileen Mullan for her efforts to arrange a series of visits to clinical settings in Northern Ireland. During these visits, the Chair met a range of allied health professionals undertaking innovative projects; and
- the Chair was invited to contribute to a panel discussion at the College of Paramedics conference. The session focused on the findings from the Surrey University research. The research was well received and its themes relevant to other presentations discussed on the day.

7.3 The Council noted that targeted engagement with ambulance trusts is planned as part of the Surrey Research action plan. The Council agreed that the HCPC would ensure that the findings of the research are shared with Social Work England when its leadership is in place.

7.4 The Council noted the report.

#### **Item 8.i.18/71 Chief Executive's report**

8.i.1 The Council received a report from the Chief Executive outlining recent external and internal developments and engagement activity.

8.i.2 The Chief Executive highlighted the following points from his report:-

- legislation came into force on 1 April 2018 which enables paramedics to undertake training in independent and supplementary prescribing.
- an agreement has been signed with the GCC committing both parties to enter the lease when the refurbishment of 186 KPR completes. The building works are progressing with an expected completion date of 6 June 2018. The works continue within budget
- the PSA concluded its targeted review of the HCPC's performance for 2017-18. They have concluded that we have not met the same standards in FTP which were not met in 2016-17. However, the PSA recognised that a programme of work had started to address their concerns, and that it will take time.
- The PSA has published its 'Lessons Learned Review' into the NMC's handling of concerns about midwives' fitness to practise at the Furness General Hospital. The Executive will review the report to identify any lessons we can learn to improve the HCPC's standards and processes. The Council will consider this report in July 2018.
- the HCPC's employee turnover rates is currently 29%, most of this turnover is voluntary. However, recent case manager recruitment has

been successful and permanent post holders are now in place or joining the HCPC in the next month.

- 8.i.3 The Council noted that the Chief Executive had attended a Department of Health and Social Care round table event that morning led by the Secretary of State on the challenges of rising NHS demand and how different ways of working could help. The HCPC, GMC, BMA and Royal Colleges were in attendance.
- 8.i.4 The Council received an update on the review of the HCPC's internal Quality Assurance (QA) arrangements. It was noted that the Head of QA had been appointed and was due to take up post at the beginning of June 2018. The HCPC's departmental QA teams will be brought together under one department. It was agreed that the Council will receive a paper on the QA department's work plan and priorities when developed.
- 8.i.5 The Council discussed the results of the recent targeted PSA performance review. The Council asked if the Executive had expected to meet any of the standards previously not met. The Executive noted that it is encouraged that the PSA has noted that significant progress has been made in making improvements, however meeting the standards will take longer than one performance review cycle given the life cycles of cases going through the FTP processes under improvement.
- 8.i.6 In response to a question, the Executive stated that it did not expect that all the standards would be met in the next performance review, but that this would be the Executive's aim. It was noted that the next performance review is expected to take place midway through the transfer of social worker regulation.
- 8.i.7 The Council noted that the FTP improvement plan now has project management support. Deliverables have been agreed and are on track for target delivery.
- 8.i.8 The Council noted that the management accounts for the reporting period showed an overspend on external room hire. Concern was expressed that providing hearing space to the GCC could impact on the HCPC's ability to find suitable internal hearing space. It was noted that this would be monitored, but that the Executive is confident that capacity will not be an issue as a usage agreement is in place, and in the longer term the HCPC's hearing activity will reduce with the transfer of social workers. It was also noted that registrants have the right to have their fitness to practise hearing in their home country, and so hearings are held in Scotland, Wales and Northern Ireland in external venues.
- 8.i.9 The Council noted that an estates plan will be considered at its meeting in July 2018 setting out the intended future approach to office utilisation. The Council requested that this include options around the leasing of office space.

8.i.10 The Council noted the report.

### **Item 8.ii.18/72 Social Work England**

8.ii.1 The Chief Executive provided the Council with an overview of recent developments in the establishment of SWE. The following points were noted:-

- the announcement of the appointment of the Chief Executive of SWE is expected imminently;
- a positive meeting with the Chair of SWE, Lord Patel, took place. Ongoing engagement is planned;
- the HCPC has received confirmation that a grant will be received from government to cover the HCPC's direct costs as a result of the transfer;
- meetings have taken place to discuss the transfer of data to SWE, these will continue; and
- a dedicated project manager is being recruited to manage the transfer project.

### **Item 9.18/73 Draft annual report and accounts 2017-18**

9.1 The Council received a report from the Executive.

9.2 The Council noted the following points:-

- the structure and presentation of the annual report and accounts aims to be more accessible this year, in line with the changes made to the Fitness to Practise and Education annual reports;
- a microsite will accompany the more formal document, presenting the data in an interactive way and conveying the key messages of the report;
- the structure of the performance review section has been amended to align with the HCPC's regulatory processes and public protection role; and
- the draft annual report and accounts will be reviewed by the Audit Committee in June 2018. It will then be presented to Council for final approval in July 2018.

9.3 The Council noted that feedback from the External Auditors on the section on the Executive restructure has been positive. The figures however are still to be audited.

- 9.4 The Council noted that target audience and format will continue to be considered for the next annual report.
- 9.5 The Council agreed the following amendments to the annual report and accounts draft:-
- the first paragraph of the foreword should be revised to avoid a sense of hierarchy in the list of thanked parties;
  - the HCPC's failure of a number of PSA standards should be included in the principle risks section;
  - the total costs per registrant figure on page 12 of the report should be accompanied by a figure adjusted for inflation. An explanation of why costs increase should also be included;
  - the going concern section wording on page 16 of the report should be less specific on longer term factors. It was agreed the sentence referencing a fee increase should be removed;
  - narrative on free reserves on pages 13 and 14 should include information on why a certain level of free reserves is needed;
  - the data table on page 10 of the report (fig.2) should include information about the data range;
  - the summary of the Education and Training Committee should be expanded as in previous years; and
  - the Council attendance table requires review for consistency.

#### **Item 10.i.18/74 Consultation on Indicative Sanctions Policy**

10.i.1 The Council received a paper from the Executive.

10.i.2 The Council noted the following points:-

- the Indicative Sanctions Policy sets out the principles Practice Committee Panels should consider when deciding what, if any, sanction should be applied in fitness to practise cases;
- the scope and timescales of the review were agreed by Council in September 2017;
- the revised draft policy has been through legal review and an additional litigation risk legal review; and

- the consultation will run from 4 June to 31 August 2018. The results of the consultation will be presented to Council in December 2018.

- 10.i.4 The Council noted that the indicative sanction policy does not include interim orders. An interim orders Practice Note is in place.
- 10.i.5 The Council agreed that paragraph 7 on page 5 of the consultation document should reinforce that panels consider current impairment of fitness to practise, as this is an aspect often misunderstood by those raising concerns.
- 10.i.6 The Council approved the revised Indicative Sanctions Policy draft for consultation and the consultation document.

### **Item 10.ii.18/75 Report of the Inquiry into Hyponatraemia related Deaths**

- 10.ii.1 The Council received and noted a paper from the Executive. The paper contained the recently published report of the Inquiry into Hyponatraemia-related Deaths. The findings of the inquest had been reviewed by the Executive for relevance to HCPC regulated professions.

### **Item 11.18/76 Stakeholder communications and engagement plan**

- 11.i.1 The Council received a paper from the Executive.
- 11.i.2 The Council noted the following points:-
- the plan sets out how the HCPC will communicate and engage with its stakeholders in the most effective way possible;
  - it highlights key deliverables and communications outcomes for 2018-19 and covers activity across the organisation. The plan is supported by the Stakeholder Matrix;
  - the intention is to develop the HCPC's external horizon scanning abilities, further refine the stakeholder matrix and build individual engagement plans for senior leaders. Metrics and indicators are also being developed; and
  - the final draft of the plan will be presented to Council for approval in July 2018.
- 11.i.3 The Council agreed that stakeholder groups should not be listed in alphabetical order only and that prominence should be given to the 'public' by listing this group first.

11.i.4 The Council noted that the four country engagement considerations have not been set out as a separate area of the plan, as this engagement is central to all activity and needs to be integrated.

11.i.5 The Council noted the paper.

### **Item 12.18/77 Health Allegations policy statement**

12.1 The Council received a paper from the Executive.

12.2 The Council noted the following points: -

- one finding of the 2016-17 PSA performance report was that the HCPC had not always identified and sufficiently investigated where there may be an underlying health issue that may impair a registrant's fitness to practise;
- as part of the FTP improvement plan a clear position statement in this area has been produced. The position statement sets out the HCPC's approach to assessing information that indicates a registrant's fitness to practise may be impaired by their health. The HCPC has not previously documented its position in relation to this issue; and
- new guidance and training will be provided to support HCPC decision makers in assessing health cases.

12.3 The Council supported the proportionate approach set out in the position statement. The Council agreed that drink driving should be more explicitly addressed within the statement.

12.4 The Council discussed paragraph 16 of the statement. It was noted that a lack of cooperation cannot be taken into account by panels as there is no requirement to provide information. The Council agreed that the paragraph should positively convey that participation is in the best interests of the registrant as it will enable a quicker and more accurate assessment of impairment.

12.5 The Council agreed the approach set out in the policy statement subject to the amendments outlined in paragraphs 12.3 and 12.4.

### **Item 13.18/78 Gender Pay Gap report**

13.1 The Council received a report from the Executive.

13.2 The Council noted the following points:-

- all employers with 250 or more employees are now required to publish their gender pay gap data every year under new legislation;

- the HCPC's data, including partners, of 9% mean gap of and 0% median gap compare very favourably with UK-wide rates;
- however the percentages for employees only of 14.8% for the mean pay gap and 5.28% for the median pay gap are less favourable;
- the presented report summarises the action taken so far to reduce the gender pay gap, and identifies areas of action for financial year 2018-2019;
- these areas of action assume the aim of a gradual reduction of the gender pay gap over the next 5 to 7 years; and
- the Remuneration Committee's Review of pay structure, principles and policy is due to commence in July 2018. The review specification includes an equal pay audit and gender pay gap considerations in any recommendations that are made.

13.3 The Council noted that historical data on the pay gap is not held and so it is hard to say if the HCPC is moving in the right direction. If the gap worsens next year this would indicate more action is required.

12.4 The Council agreed that in the next annual report to Council benchmarking data should be included to get a sense of how the HCPC compares to similar organisations.

12.5 The Council supported the proposed actions and agreed that ethnicity pay gap reporting should be explored in future.

#### **Item 14.18/79 Council and Committee dates 2019**

14.1 The Council noted the schedule of Council and Committee meeting dates in 2019.

#### **Item 15.18/80 Any other business**

15.1 There was no further business.

#### **Item 16.18/81 Future agenda items**

16.1 The Council noted that the following items would be considered at its July 2018 meeting:-

- Review of case classification in fitness to practise
- Tribunal Advisory Committee annual report
- PSA lessons learned report - Furness General Hospital
- Annual report and accounts 2017-18
- NAO report to those charged with governance

- 5 Year plan and Registrant forecast
- Paper on fees
- Estate plan

**Item 17.18/82 Meeting evaluation**

17.1 The Council welcomed the continuation of the Executive Directors sitting with Council during meetings and actively contributing across all agenda business.

**Item 18.18/83 Date and time of next meeting:**

Wednesday 4 July at 10.30 am at Park House, 184 Kennington Park Road, London SE11 4BU. Strategy workshop to take place on 5 July 2018 from 9.30am

Chair: Stephen Cohen

Date: 05/07/2018