

Agenda Item 8 (ii)
Enclosure 5
Health and Care Professions Council 06 December 2018
Performance report
For discussion
From Marc Seale, Chief Executive and

Registrar



Council, 6 December 2018

Performance report

Executive summary and recommendations

Introduction

The performance report sets out key activities and progress across the organisation since the last meeting of Council.

It provides Council with information on key performance indicators, progress on the deliverables for our strategic priorities, financial information and data for the regulatory functions, HR and Quality Assurance.

Decision

The Council is requested to discuss the performance report.

Background information

The report has been developed based on feedback from Council, SMT and Heads of Department. Information has been refined, for example new KPIs for quality and timeliness for Fitness to Practise have been included.

We will continue to adapt this document based on feedback and organisational need.

Resource implications

Any resource implications outlined in the performance report are within the departmental workplans.

Financial implications

None

Appendices

Performance Report.

Date of paper

23 November 2018



Executive summary - 6 December 2018

1. Performance indicators

The following are some key updates to highlight to the Council

- Fitness to practise timeliness the focus on targeting older cases and driving
 progression to a decision by an Investigating Committee Panel continues. There is a
 similar focus on concluding final hearing cases. We anticipate this will continue in
 Q4, however, there is evidence that the length of time it is taking to progress cases
 is reducing.
- **Education timeliness** the median time for processing approval cases continues at 11 months. Similar to previous months, this is because providers are requesting visits be held outside of our service standard of 6 months, and a percentage requiring two submissions before approval. The commentary provides more detail.
- **Number of cases per case manager** this figure has dropped to 49, compared to August and September (54) and is close to the optimum figure we have set at 45. This indicates the utilisation of the additional resource previously approved by Council is beginning to have a positive effect.
- **Employee voluntary turnover** for the first time since January 2018, voluntary employee turnover has fallen to 22%. This is within the measure we have set.

2. Strategic priorities

The Council is requested to note the progress of key deliverables against the strategic priorities, specifically

- **Strategic priority 3**, and keeping our financial sustainability under review. The consultation on proposed changes to our registration fees continues. To date, we have received 1,300 responses. The consultation closes on 14 December, when we will analyse the responses for consideration at the February Council meeting
- Strategic priority 3, and the investment in processes and systems to improve stakeholder experience. Activity in this period has included the development and imminent launch of the new website, the introduction of paperless processes for annual monitoring and registration appeals; and the requirements analysis phase for the registration transformation project.

3. Finance

- The month 6 forecast indicates that for the full year, registration income will be on budget, and overall expenditure is forecast to be £294k above budget, this excludes the costs for the social worker transfer project which will be reimbursed by the Department of Education; it also includes the additional £500k approved by Council to support the FTP improvement plan. The forecast overall result, excluding any year end revaluation of buildings, and including other income and capital write-off is a deficit of £385k. The original budget for the year was a deficit of £95k. The forecast will be updated in January based on 9 months' actual figures.
- For the 7 months to 31 October 2018, income is on track, and operating expenditure is £187k / 0.3% under forecast.

4. Fitness to Practise improvement plan

The project is progressing to plan and Council will be receiving a separate detailed update in this meeting. Grant Thornton has completed their internal audit review and presented the final report to the Audit Committee at their November meeting.

5. Departmental reports

The following are some key activities for the Council's attention.

Education quality assurance review

The Education and Training Committee (ETC) recently approved 'Reviewing education quality assurance', a proposal to review the fundamental principles of quality assurance for programmes leading to registration / annotation.

We are now forming a working group to conduct the first phase of the review. This will be comprised of Committee and Executive representatives, and representation from the Council of Deans of Health and their members, and a professional body with particular expertise in higher education quality assurance. Terms of reference have been agreed and a series of meetings will be held between December 2018 and March 2019.

Final proposals are scheduled for consideration by ETC in June 2019. At that time, the Committee will consider options around wider public consultation, including seeking further input from other key sector stakeholders.

Registration renewal for social workers in England and operating department practitioners

At the start of September 2018 97,322 social workers in England and 13,773 operating department practitioners were invited to renew their registration.

As at the 22 November 2018, 80.8% of social workers in England and 89.2% of operating department practitioners had renewed their registration. We continue to focus our efforts on renewing these professions before the deadline of 30 November 2018



Council meeting, 6 December 2018

Performance report

Contents

	Page number
Key performance indicators	8
Strategic priorities – progress of key deliverables	15
Finance report	20
Department reports	36
Strategic risks	72



Council meeting, 6 December 2018

Key Performance Indicators

KEY PERFORMANCE INDICATORS DASHBOARD

TIMELINESS

Fitness to Practise

Measure	Median leng (ICP): 33 we		from rece	el Per	iod	Sep	tember, Oc	tober							
	(ICP). 33 We	ek2								Strate	egic prioriti	es: 1 and 3	3		
Executive commentary	The focus on driving older cases to a decision by a panel of the Investigating Committee continues. As previously reported to Council, this KPI will continue to be exceeded until Q4 of the year, but is demonstrative that we are concluding the oldest open cases at this decision point. This level of performance is therefore expected.														
Year to date	Apr-18 May-18 Jun-18 Jul-18 Aug-18 Sep-18 Oct-18 Nov-18 Dec-18 Jan-19 Feb-19 Ma														
	Weeks 58 54 56 63 63 53 67														
Measure	Median leng	th of time	from ICP	to final He	earing: 39	weeks			Per	iod	Sep	tember, Oc	tober		
	installation general termination for the man real mag. To the man real mag.														
		Strategic priorities: 1 and 3 There is a similar focus to conclude final hearing cases, including those that have previously adjourned, part heard. The KPI is also expected to remain at this level until Q4, whilst the improvement activities presented to Council take effect. As with the previous KPI, the level of performance provides evidence that the oldest cases are being successfully concluded.													
Executive commentary	remain at this	level until Q	4, whilst the	improveme	ent activities	presented	to Council ta			ırt heard. Th	ne KPI is als	so expected	I to		
	remain at this	level until Q	4, whilst the	improveme	ent activities	presented	to Council ta			ırt heard. Th	ne KPI is als	so expected	I to ance		
commentary	remain at this	level until Qence that the	4, whilst the oldest case	improveme es are being	ent activities successful	presented lly conclude	to Council ta d.	ake effect.	As with the	art heard. The previous Kl	ne KPI is als PI, the level	so expected of performa	I to		
commentary Year to date	remain at this provides evide	level until Qence that the Apr-18 54	4, whilst the oldest case May-18	improveme es are being Jun-18	ent activities g successful Jul-18 55	s presented lly conclude Aug-18	to Council to d. Sep-18	Oct-18	As with the	art heard. The previous Kl	ne KPI is als PI, the level	so expected of performa	I to ance Mar-19		
commentary	remain at this provides evide Weeks	level until Qence that the Apr-18 54	4, whilst the oldest case May-18	improveme es are being Jun-18	ent activities g successful Jul-18 55	s presented lly conclude Aug-18	to Council to d. Sep-18	Oct-18	As with the	previous Kl	ne KPI is als PI, the level	Feb-19	Mar-19		
commentary Year to date	remain at this provides evide Weeks	Apr-18 54 th of time	4, whilst the oldest case May-18 57 from rece	Jun-18 51 sipt to fina	Jul-18 55 I hearing:	s presented lly conclude Aug-18 64 73 weeks	to Council ta d. Sep-18 53	Oct-18 53	Nov-18	Dec-18 Tiod	Jan-19 Sepegic prioriti	Feb-19	Mar-19		
Year to date Measure Executive	remain at this provides evide Weeks Median leng	Apr-18 54 th of time	4, whilst the oldest case May-18 57 from rece	Jun-18 51 sipt to fina	Jul-18 55 I hearing:	s presented lly conclude Aug-18 64 73 weeks	to Council ta d. Sep-18 53	Oct-18 53	Nov-18	Dec-18 Tiod	Jan-19 Sepegic prioriti	Feb-19	Mar-19		

Fitness to Practise (continued)

Measure	Median lengt	h of time	of interim	Per	iod	Sep	tember, Oc	tober						
										Strate	egic prioriti	ies: 1 and 3	3	
Executive commentary	The KPI is with those expected the risk.													
Year to data		Dec-18	Jan-19	Feb-19	Mar-19									
	Apr-18 May-18 Jun-18 Jul-18 Aug-18 Sep-18 Oct-18 Nov-18 Dec-18 Jan-19 Feb-19 Mar-19 Weeks 16 17 19 14 13 41 16 8 16 16 16 17 19 14 13 41 16													
Measure	Number of open pre-ICP cases (not including Rule 12 cases*): 1600 open cases by 31/3/19 Period September, October Strategic priorities: 1 and 3													
Executive commentary	The open caseload has remained stable for 3 consecutive months. A major factor is the number of newly received cases, but we are resourcing teams to match the new cases with those progressed to closure, in addition to focusing on the oldest. The open caseload is a key indicator of resource required, but there is evidence of the length of time reducing, with over 57% of the current caseload received since April 2018.													
Year to date	Apr-18 May-18 Jun-18 Jul-18 Aug-18 Sep-18 Oct-18 Nov-18 Dec-18 Jan-19 Feb-19												Mar-19	
	Number	1721	1804	1867	1946	1936	1960	1939						

Registration

Measure	Median proce	essing tim	e for UK	graduates	Per	iod	Sep	tember, Oc	tober						
										Strate	egic prioriti	es: 1 and 3	3		
Executive commentary	This indicator is	in line with	the optimu	m figure.											
Year to date		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19		
	Working days	5	4	6	8	10	10	7							
Measure		ledian processing time for International applications (European Mutual ecognition): 60 working days Period September, October Strategic priorities: 1 and 3													
Executive commentary	This indicator is	This indicator is in line with the optimum figure.													
Year to date		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19		
	Working days	55	56	64	55	40	42	49							

Registration (continued)

Measure	Median proce			rnational a	Peri	od	September, October								
	Recognition)	Recognition): 60 working days Strategic priorities: 1 and 3													
Executive commentary	This indicator is	in line with	the optimu	m figure.					_						
Year to date		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19		
	Working days	Working days 51 51 67 45 41 35 49													

Education

	-	omg app	roval case	Per	Period September, October								
					Strategic priorities: 1 and 3								
Contributory factors to exceeding the KPI during this period (and as a trend since July): education providers requested to schedule visits to be held, average, around seven months after the initial request (this is normally around six months). The post visit process took around four months to complete on average (normally around three months), with 37 per cent of education providers requiring two submissions to meet conditions placed approval.													
	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	
Months	10	10	10	11	11	11	11						
c	average, around complete on ave approval.	average, around seven mo complete on average (norn approval.	average, around seven months after the complete on average (normally around approval. Apr-18 May-18	average, around seven months after the initial red complete on average (normally around three mon approval. Apr-18 May-18 Jun-18	average, around seven months after the initial request (this is complete on average (normally around three months), with 3 approval. Apr-18 May-18 Jun-18 Jul-18	average, around seven months after the initial request (this is normally a complete on average (normally around three months), with 37 per cent of approval. Apr-18 May-18 Jun-18 Jul-18 Aug-18	average, around seven months after the initial request (this is normally around six m complete on average (normally around three months), with 37 per cent of education approval. Apr-18 May-18 Jun-18 Jul-18 Aug-18 Sep-18	average, around seven months after the initial request (this is normally around six months). The complete on average (normally around three months), with 37 per cent of education providers reapproval. Apr-18 May-18 Jun-18 Jul-18 Aug-18 Sep-18 Oct-18	average, around seven months after the initial request (this is normally around six months). The post visit promplete on average (normally around three months), with 37 per cent of education providers requiring two approval. Apr-18 May-18 Jun-18 Jul-18 Aug-18 Sep-18 Oct-18 Nov-18	Contributory factors to exceeding the KPI during this period (and as a trend since July): education providers requested average, around seven months after the initial request (this is normally around six months). The post visit process too complete on average (normally around three months), with 37 per cent of education providers requiring two submission approval. Apr-18 May-18 Jun-18 Jul-18 Aug-18 Sep-18 Oct-18 Nov-18 Dec-18	Contributory factors to exceeding the KPI during this period (and as a trend since July): education providers requested to schedule average, around seven months after the initial request (this is normally around six months). The post visit process took around for complete on average (normally around three months), with 37 per cent of education providers requiring two submissions to meet capproval. Apr-18 May-18 Jun-18 Jul-18 Aug-18 Sep-18 Oct-18 Nov-18 Dec-18 Jan-19	Contributory factors to exceeding the KPI during this period (and as a trend since July): education providers requested to schedule visits to be average, around seven months after the initial request (this is normally around six months). The post visit process took around four months to complete on average (normally around three months), with 37 per cent of education providers requiring two submissions to meet conditions properties. Apr-18 May-18 Jun-18 Jul-18 Aug-18 Sep-18 Oct-18 Nov-18 Dec-18 Jan-19 Feb-19	

FINANCE AND RESOURCES

Finance

Measure	Performance ag	jainst bud	geted op	erating ex	penditur	e in range	of 97.5%	to 102.5%	Perio	d	Sept	ember, Oct	ober
										Stra	ategic prio	rities: 3	
Executive commentary	compared to YTD forecast and the performance is within the KPI target range. Full financial information including the variance commentar and expenditure figures and the statement of financial position can be found in the Finance section later in this report.												
Year to date	(,000)	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19
	YTD Actual	3,376	6,299	9,324	12,239	14,910	17,436	20,377					
	YTD Budget	3,891	6,821	9,656	12,505	15,140	18,079						
	YTD Forecast							20,564					
	YTD Variance	515	521	332	265	230	642	187					
	Actual as % of budget	87%	92%	97%	98%	98%	96%	99%					

Human Resources

Measure	Employee volun	•		Perio	d	Sept	ember, Oct	ober					
	turnover rates, p	oublished	5 May 20		Stra	itegic prio	rities: 3						
Executive commentary	Voluntary employe	e turnover h	nas fallen to	o 22% for th	ne first time	since Janu	ıary 2018.						
Year to date		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19
	Turnover 25% 26% 25% 23% 23% 23% 22%												

QUALITY

Fitness to Practise

Measure	Number of case	s per cas	e manage	er: 45	Perio	d	September, October						
						Strateg	jic prioritie	es: 1 and 3					
Executive commentary	The caseload num additional resource				ith evidenc	e that the f	ocus on pro	ogression to	conclusion	at all stage	s, and the	utilisation o	f
Year to date		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19
	Number	55	54	52	53	54	54	49					

Registration

Measure	Number of uphe	ld appeal	s against		Perio	d	September, October		tober						
										Strate	gic prioritie	es: 1 and 3			
Executive commentary	No appeals were u	o appeals were upheld where no new information was presented.													
Year to date		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19		
	Concluded	5	6	5	5	4	7	4							
	Upheld	3	3	2	3	2	4	2							
	Upheld/ no new info	0	0	0	0	0	0	0							

INFORMATION TECHNOLOGY

Information technology

Measure	Availability of H	CPC web	sites (inc	luding Re	.5%	Perio	d	September, October							
		Strategic priorities: 1 and 3													
Executive commentary	Full availability thro	ough the pe	riod.												
Year to date		Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19		
	Availability	Availability 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0%													

Strategic priority 1: Improve our performance to achieve the PSA's Standards of Good Regulation

Strategic priority 3: Ensure the organisation is fit for the future and is agile in anticipating and adapting to changes in the external environment

*Rule 12 is a designation that is typically applied to cases where there is limited anticipated case activity due to the existence of an on-going Police investigation. The designation allows the Fitness to Practise Department to more accurately monitor case progression and distinguish between cases that can be expeditiously progressed and those cases which cannot be progressed because any progression is dependent on a third-party investigation.



Council meeting, 6 December 2018

Strategic Priorities – progress of key deliverables

Strategic priority 1: Improve our performance to achieve the Professional Standards Authority's Standards of Good Regulation

Area	Key deliverables (and completion by quarter)	Progress
Improve our fitness to practise performance to meet PSA standards	Deliver the programme of work outlined in the Fitness to Practise (FTP) Improvement plan including:	The project is progressing to timescale, and is overseen by a Project Board including two SMT members, Director of HR and Head of FTP. The project methodology and deliverables were audited by Grant Thornton, and the resulting report in October identified only two medium risk issues.
	Complete the review of case management competency and resource requirements (Q1)	This is on track to conclude in December 2018.
	Implementation of case progression strategy including a process for prioritising high risk cases (Q1-4 (ongoing))	The strategy was approved by Council in September 2018, and we are working with the additional resources to target oldest cases. Progress is included in the December Council report. A presentation to SMT and Council at the October Awayday also set the timescale and milestones until March 2019.
	Review of the Standard of Acceptance policy and associated guidance (Q1 – Q2)	This was approved by Council in September 2018. The implementation and training programme, including changes to our electronic Case Management System have been made. We are going live on 14 January 2019, giving us time to close cases whose lifetime started under the previous Standard of Acceptance.
	Revise the FTP quality assurance framework to align with the PSA standards of good regulation (Q1)	The framework has been quality assured and signed off as complete by the FTP Improvement Project Board.
	Meet with PSA on a quarterly basis to provide progress updates (Q1-4 (ongoing))	Executive Director of Regulation and Head of FTP continue to meet with the Director of Scrutiny and Quality on a quarterly basis.

Strategic priority 2: Ensure our communication and engagement activities are proactive, effective and informed by stakeholder views and expectations **Key deliverables Progress** Area Seek to better understand Commission research to better understand the views and the preferences, needs Fieldwork has finished. A report of the findings is being produced and will be expectations of our stakeholders and put in place an action and views of our presented to Council, together with an action plan, in early 2019. plan as a result of the findings (Q3) stakeholders Strengthen our engagement with Activities are progressing according to plan. Recent activity to note includes attendance and workshop delivery at the annual Scottish Government stakeholders in the four Develop a new stakeholder engagement plan to guide our countries of the UK Regulatory event and CPD workshops in Belfast as well regular scheduled engagement with stakeholders across the four countries meetings with the regulatory teams and Chief Allied Health Professions (Q1) Officers in the four countries. Work continues on developing the HCPC's prioritised stakeholder list to inform 2019-2020 engagement work. The first forum is scheduled for February in Edinburgh. A wide range of Pilot holding an engagement forum for key stakeholders in stakeholders, including professional bodies, service user organisations and one of the UK countries and evaluate its effectiveness (Q4) unions, are being invited. Work in partnership with education sector A working group is being formed, with a series of meetings to be held stakeholders to review our approach to the quality between December 2018 and March 2019 and final proposals scheduled for assurance of education and training programmes consideration by the Education & Training Committee in June 2019.

(Q2 (planned event) and ongoing)

Strategic priority 3: The organisation is fit for the future and is agile in anticipating and adapting to changes in the external environment

Area	Key deliverables	Progress			
Keep our financial sustainability under review	Review our cost base and ongoing financial sustainability, consulting if necessary on changes to registration fees (Q2 (and ongoing))	The five-year financial plan was approved by the Council in September 2018. We are currently consulting on proposals to increase the registration fees. The month 6 financial reforecast has been completed and is reported elsewhere in the performance report and the budgeting process for 2019-20 has commenced.			
Embed a strategic approach to risk and performance management	Develop and agree a strategic approach to risk management by identifying a set of strategic risks (Q1)	Approach agreed. Strategic risks are discussed monthly by the SMT and presented to each Audit Committee. Going forward, they will be included in the performance report to Council. At its next meeting, March 2019, the Audit Committee will consider in more depth one of the strategic risks.			
	Further develop our approach to measuring and monitoring performance	Departments are producing monthly reports to SMT, we will be reviewing the key performance indicator dashboard in early 2019 (see below)			
	Review our Key Performance Indicators (KPI) at least once a year (Q4 (and ongoing))	Ongoing and further review scheduled for early 2019			
	Review and further refine the existing performance data set considered by the Council (Q2)	Reviewed and refined each quarter.			
Invest in processes and systems to improve stakeholder experience		Paperless processes: annual monitoring is being delivered as an entirely paperless process; and paperless registration appeals is being rolled out (currently in parallel with existing paper processes).			
and drive business efficiencies	Build capacity required to accelerate business	Education system: project initiated to deliver upgrades to aid further efficiency, accuracy and service. Scheduled to complete in summer 2019.			
	transformation (Q2)	Registration transformation: requirements analysis exercise commenced and we anticipate the next phase starting in the new financial year. The CPD portal migration is expected to launch on 26 November.			
		New website: launches 3 December, providing a modern and intuitive experience for stakeholders, easing access to content on mobile and desktop devices.			

Strategic priority 4: Make b	petter use of data, intelligence and research evidence to dri	ve improvement and engagement		
Area	Key deliverables	Progress		
Ability to collect data	Develop a classification system for capturing the characteristics of fitness to practise cases (Q2)	The case categorisation system has been designed. Roll out of the system including training is scheduled for Q4.		
Research action planning	Deliver a programme of work to deliver the outcomes of the University of Surrey research: (Q1-4 (and ongoing))	Ongoing, see below for specific detail.		
	Work to raise awareness on when to self-refer and when to refer with a particular focus on registrants, employers and complainants	Actions in this period have included development of web information and resources including a referral tool, infographic and case studies and stakeholder engagement at the annual Scottish Regulation Conference. Planning further stakeholder work through targeted emails to employers and service user organisations as well as blog pieces for registrants.		
	Engagement with educators to develop teaching and learning materials for educators using the case studies developed in the research	Following feedback, planning to refresh existing resources for education providers to use and then develop content and resources for students within the student/learner hub on the new website.		
	Commission a literature review on the characteristics of effective clinical / peer supervision in the workplace and use this to engage with stakeholders including employers on the role of supportive approaches in preventing problems from occurring	This is currently in the planning stages. Commissioning will take place in Q4 with research commencing in early 2019-20 financial year.		
Internal capacity to deliver research activity	Deliver at least one in-house research project: Working in partnership with a professional body or other stakeholder to look at the characteristics of fitness to practise cases in that profession; or if a partner cannot be identified, looking at a cross-profession issue such as the characteristics of cases about internationally qualified registrants. (Q4)	This research is scheduled for Q4 in the Policy & Standards workplan.		



Council meeting, 6 December 2018

Finance report

Finance

Overview	22
Table 1: Variance commentary	23
Table 2: Income and expenditure	26
Table 3: Payroll costs	27
Table 4: Non-payroll costs	28
Table 5: Statement of financial position	29
Table 6: Projects	30
Table 7: Cash flow statement	
Graphs: Cashflow	32
Graphs: Income and expenditure	
Graphs: Cumulative income and expenditure	
Graphs: Capital expenditure	

Page number

Finance: overview

- In the Finance tables, income and expenditure is now compared against the month 6 forecast for 2018-19.
- The month 6 forecast indicates that for the full year, income will be on budget, and overall expenditure will be £1.3m / 4% over budget. This however includes the additional £500k approved by Council to support the FTP improvement plan and £1m that will be spend on the social worker transfer project, which will be reimbursed by the Department of Education. Excluding the social worker transfer project costs, forecasted expenditure is £294k above budget. The forecast overall result, excluding any year end revaluation of buildings, is a deficit of £385k. The original budget for the year was a deficit of £95k. The forecast will be updated in January based on 9 months' actual figures.
- For the 7 months to 31 October 2018, income is on track, and operating expenditure is £187k / 0.3% under forecast.
- The main departmental variances are:
 - £48k/3.7% under forecast in major project, this is mainly due to reclassification of costs from opex to capex on the 186 KPR project.
 - £115k / 5.6% under forecast in registration department, which is mainly due to timing differences for receipt and payment of printing/postage invoices and international assessor fees.
- Operating result for the 7 months to 31 October 2018 was a surplus of £178k, including depreciation and bank interest receivable, compare to £65k deficit per month 6 forecast.
- At 31 October 2018 cash balance was £18.3m, and deferred income was £20.9m.
- We have recently established a Framework Agreement for the provision of audio recording, transcription and additional services following expiry of the existing contracts. The Framework Agreement has a panel of four suppliers that will be available to provide the services to the HCPC and other Regulators. This framework is also a prime example of us leading the way to promote collaboration across regulators, which PSA and the Law Commission have been actively encouraging over the last few years.

Variance Comme	ntary			October -18 Comments (Actuals vs 2018-19 M6 Forecast)		
Department Movement YTD M6 Forecast YTD Forecast Variance		Forecast Variance	Forecast Var	Variances by Income Type	Variances by Profession	
Total Income	20,253,252	20,201,165	52,087		On Target or variance below threshold	On Target or variance below threshold
EXPENDITURE Department	Movement YTD	M6 Forecast YTD	Forecast Variance	Forecast Var	Variances on Payroll	Variances on Non-payroll
Department	Movement 11D	Wio i orecast i i b	i orecast variance	%	variances on Fayron	Variances on Non-payron
Chair	36,343	31,840	(4,503)	(14.1)		On Target or variance below threshold
Chief Executive and SMT	443,576	453,472	9,896	2.2	On Target or variance below threshold	On Target or variance below threshold
Council	175,716	171,943	(3,774)	(2.2)		On Target or variance below threshold
Communications	535,359	540,234	4,876	0.9	On Target or variance below threshold	On Target or variance below threshold
Education	581,439	584,402	2,964	0.5	On Target or variance below threshold	On Target or variance below threshold
Office Services	1,853,913	1,842,304	(11,608)	(0.6)	On Target or variance below threshold	On Target or variance below threshold

Department	Movement YTD	M6 Forecast YTD	Forecast Variance	Forecast Var	Variances on Payroll	Variances on Non-payroll
Finance	435,286	434,116	(1,170)		On Target or variance below threshold	On Target or variance below threshold
Fitness to Practise	9,115,828	9,107,386	(8,441)	On Target or variance below threshold On Target or variance be		On Target or variance below threshold
Human Resources	454,918	467,954	13,036	2.8	On Target or variance below threshold On Target or variance below the	
Human Resources Partners	199,077	212,683	13,606	6.4	On Target or variance below threshold	On Target or variance below threshold
IT Department	1,242,759	1,236,386	(6,374)	(0.5)	(0.5) On Target or variance below threshold On Target or variance below	

Department	Movement YTD	M6 Forecast YTD	Forecast Variance	Forecast Var	Variances on Payroll	Variances on Non-payroll	
Major Projects	1,235,525	1,283,657	48,132	3.7	On Target or variance below threshold	This is mainly due to the reclassification of costs from revenue to Capital on the 186 Kennington Park Road renovation project and the remaining difference is due to the delay of incurring costs for the social workers transfer project.	
Project (Managers)	151,825	151,854	29	0.0	On Target or variance below threshold	On Target or variance below threshold	
Policy	134,006	136,102	2,097	1.5	On Target or variance below threshold	On Target or variance below threshold	
Quality Assurance	324,435	336,257	11,822	3.5	On Target or variance below threshold	On Target or variance below threshold	
Registration	1,933,571	2,048,402	114,832	5.6	On Target or variance below threshold	£111k under the forecasted figure; this is mainly due to timing differences for receipt and payment of printing and stationery and assessor invoices	
Secretariat	116,627	117,271	644	0.5	On Target or variance below threshold	On Target or variance below threshold	
Depreciation	461,121	461,582	462	0.1		On Target or variance below threshold	
PSA levy	924,000	924,000	0	0.0		On Target or variance below threshold	
Apprenticeship levy	21,374	22,006	632	2.9		On Target or variance below threshold	
Total expenditure	20,376,696	20,563,852	187,156	0.9			

Income and Expenditure 31 October 2018

31 October 2018							
	Period 7		Year to	date			
				Variance v	Variance v		
			M6 Forecast		YTD		Full Year
Income by Activity	Actual	Actual	YTD	Forecast	Forecast %	M6 Forecast	Budget
Graduate Registration Fees	157,404	1,026,904	1,042,692	(15,787)	(2)	1,806,726	1,804,823
Readmission Fees	17,685	164,565	156,362	8,203	5	287,620	231,901
Renewal Fees	2,460,473	17,098,784	· · · · · ·	10,763	Ö	29,554,238	29,851,092
International Scrutiny Fees	162,855	999,405	980,237	19,168	2	1,756,816	1,642,420
UK Scrutiny Fees	152,019	840,235	810,713	29,522	4	1,116,484	978,888
Registration Income	2,950,435	20,129,893		51,869	0	34,521,884	34,509,123
Other Income	3,035	66,293	65.758	535	1	78,258	0
Rental Income GCC	14,266	57,065	57,382	(317)	(1)	130,299	131,250
Total Income	2,967,737	20,253,252		52,087	0	34,730,441	34,640,373
	, , , , , ,	-,,	, , , , , ,	- ,	- 1	, , , , , ,	,,,-
Chair	10,941	36,343	31,840	(4,503)	(14)	59,456	98,360
Chief Executive	74,725	443,576	453,472	9,896	` 2	793,322	731,838
Council & Committee	28,373	175,716	171,943	(3,774)	(2)	286,293	234,546
Communications	57,332	535,359	540,234	4,876	1	944,760	941,571
Education	82,225	581,439	584,402	2,964	1	974,065	1,025,420
Office Services	283,933	1,853,913	1,842,304	(11,608)	(1)	3,159,655	2,903,029
Finance	53,802	435,286	434,116	(1,170)	(0)	734,539	719,889
Fitness to Practise	1,509,707	9,115,828	9,107,386	(8,441)	(0)	16,146,008	15,217,197
Human Resources	101,274	454,918	467,954	13,036	3	1,215,934	1,324,558
Human Resources Partners	40,363	199,077	212,683	13,606	6	343,513	466,294
IT Department	204,205	1,242,759	1,236,386	(6,374)	(1)	2,299,318	2,412,649
Major Projects	44,959	1,235,525	1,283,657	48,132	4	2,239,692	1,459,682
Project managers	29,380	151,825	151,854	29	0	360,590	566,658
Policy	13,927	134,006	136,102	2,097	2	329,710	367,953
Quality Assurance	46,185	324,435	336,257	11,822	4	638,615	680,052
Registration	274,194	1,933,571	2,048,402	114,832	6	3,476,616	3,411,904
Secretariat	5,166	116,627	117,271	644	1	192,340	203,681
Depreciation	77,031	461,121	461,582	462	0	871,654	995,747
PSA Levy	0	924,000	924,000	0	0	924,000	924,000
Apprenticeship Levy	2,868	21,374	22,006	632	3	39,506	50,810
Operating expenditure	2,940,591	20,376,696	20,563,852	187,156	0.9	36,029,588	34,735,837
Operating surplus/(deficit)	27,146	(123,444)	(362,687)	239,243		(1,299,147)	(95,464)
Other expenditure							
•	0	0	1	0		182,743	0
Projects Capital items Write off	0	0		0			0
Other income	U		U	0		182,743	
Investment Income	10,530	65,210	61,162	4,049	7	81,788	0
Grant Income	236,465	236,465	236,465	4,049	ó	1,015,093	
	246,995	301,675	297,627	4,049	Ü	1,096,880	0
				-,		1,111,300	
Total surplus/(deficit)	274,141	178,231	(65,060)	243,291		(385,010)	(95,464)

Payroll costs

31 October 2018

	Period 7
	Actua
Chief Executive	69,974
Communications	43,885
Education	52,310
Office Services	28,959
Finance	38,120
Fitness to Practise	443,477
Human Resources	69,497
Human Resources Partners	12,701
IT Department	68,018
Major Projects	70,451
Project (Managers)	29,380
Policy	12,380
Quality Assurance	39,670
Registration	178,778
Secretariat	3,516
Payroll costs	1,161,113

Year to date							
Actual	M6 Forecast	Variance	Variance %				
404,816	404,344	(472)	(0.1)				
350,097	357,333	7,236	2.0				
402,582	405,462	2,881	0.7				
208,269	210,737	2,468	1.2				
260,473	261,102	629	0.2				
2,953,796	2,961,254	7,458	0.3				
298,910	300,664	1,753	0.6				
89,092	89,127	34	0.0				
448,024	440,162	(7,861)	(1.8)				
541,843	547,968	6,125	1.1				
151,693	151,622	(71)	(0.0)				
90,251	90,252	2	0.0				
280,082	291,532	11,451	3.9				
1,190,282	1,194,104	3,822	0.3				
93,782	90,267	(3,516)	(3.9)				
7,763,991	7,795,929	31,938	0.4				

13,925,505	179,385 13,135,730
2,065,854 157,096	2,053,088
547,132	602,522
167,899	235,537
351,758	555,618
945,587	303,411
788,242	815,936
152,801	157,022
701,914	750,378
5,191,627	4,724,761
464,595	494,919
370,774	338,237
683,814	731,704
619,418	533,416
716,993	659,798
Forecast	Budget
Full Year M6	Full Year

Non-payroll costs

31 October 2018

31 October 2018							
	Period 7		Year to	date			
						Full Year	Full Year
	Actual	Actual	M6 Forecast	Variance	Variance %	Forecast (M6)	Budget
Chair	10,941	36,343	31,840	(4,503)	(14.1)	59,456	98,360
Chief Executive	4,752	38,760	49,128	10,368	21.1	76,329	72,040
Council & Committee	28,373	175,716	171,943	(3,774)	(2.2)	286,293	234,546
Communications	13,447	185,262	182,902	(2,360)	(1.3)	325,342	408,155
Education	29,916	178,857	178,940	83	0.0	290,251	293,716
Office Services	254,973	1,645,644	1,631,567	(14,077)	(0.9)	2,788,881	2,564,792
Finance	15,683	174,814	173,014	(1,799)	(1.0)	269,944	224,970
Fitness to Practise	1,066,230	6,162,032	6,146,133	(15,899)	(0.3)	10,954,381	10,492,436
Human Resources	31,777	156,007	167,290	11,283	6.7	514,020	574,180
Human Resources Partners	27,662	109,985	123,557	13,571	11.0	190,712	309,272
IT Department	136,187	794,736	796,223	1,488	0.2	1,511,076	1,596,713
Major Projects	(25,492)	693,682	735,689	42,007	5.7	1,294,105	1,156,271
Project (Managers)	0	132	232	100	43.2	8,832	11,040
Policy	1,547	43,755	45,850	2,095	4.6	161,811	132,416
Quality Assurance	6,516	44,354	44,725	371	0.8	91,483	77,530
Registration	95,416	743,288	854,298	111,010	13.0	1,410,762	1,358,816
Secretariat	1,650	22,845	27,004	4,160	15.4	35,244	24,296
PSA Levy		924,000	924,000	0	0.0	924,000	924,000
Apprenticeship Levy	2,868	21,374	22,006	632	2.9	39,506	50,810
Non-payroll costs	1,702,447	12,151,584	12,306,340	154,756	1.3	21,232,431	20,604,360

Statement of Financial Position						
31 October 2018	Actual Period 7	Month 6	Budget	Month 6	Actual	
	Actual 1 chou 7	Forecast YTD	31 March 2019	Forecast Full Year	31 March 2018 Full Year	
Non-current assets						
Land & buildings, at cost or valuation	5,515,921	5,597,592	5,605,000	5,597,592	4,975,000	
Land & buildings depreciation	(29,021)	(29,022)	(48,620)	(49,752)	0	
	5,486,901	5,568,570	5,556,380	5,547,840	4,975,000	
Computer equipment, at cost	547,970	556,906	592,287	601,584	485,059	
Computer equipment depreciation	(455,872)	(455,910)	(452,974)	(477,623)	(413,244)	
	92,098	100,996	139,313	123,962	71,814	
Office furniture and equipment, at cost	1,183,115	1,183,115	1,183,115	1,183,115	1,183,115	
Office equipment depreciation	(681,945)	(681,942)	(750,421)	(750,437)	(586,033)	
	501,171	501,173	432,694	432,678	597,082	
hada a sibila a a a ada	7,004,000	7,000,074	0.000.400	0.040.000	7 505 600	
Intangible assets Intangible depreciation	7,894,389 (6,249,902)	7,928,274 (6,250,329)	9,628,492 (6,699,352)	8,346,630 (6,549,463)	7,525,603 (5,956,342)	
li la igible depreciation	1,644,487	1,677,945	2,929,141	1,797,167	1,569,261	
	1,044,407	1,077,040	2,020,141	1,707,107	1,000,201	
Total non-current assets	7,724,656	7,848,684	9,057,528	7,901,646	7,213,157	
Current assets						
Other current assets	1,197,107	1,060,687	2,125,603	2,190,113	2,107,123	
Cash & cash equivalents	18,294,432	16,553,704	15,600,889	15,786,406	18,892,070	
	19,491,540	17,614,392	17,726,492	17,976,519	20,999,194	
Total assets	27,216,196	25,463,075	26,784,019	25,878,165	28,212,351	
Current liabilities						
Trade and other payables	952,691	483,347	818,360	483,347	818,360	
Other liabilities	1,402,836	1,612,918	2,354,952	1,612,918	2,354,952	
Deferred income	20,900,201	19,649,634	19,923,936	20,384,675	21,256,802	
Total current liabilities	23,255,729	21,745,900	23,097,248	22,480,941	24,430,115	
Liabilities greater than one year	220,159	220,159	220,159	220,159	220,159	
Total assets less liabilities	3,740,308	3,497,017	3,466,613	3,177,066	3,562,078	
General fund b/fwd	(3,539,747)	(3,539,747)	(3,539,747)	(3,539,747)	(4,155,121)	
Rev Res - Land & Building	(22,330)	(22,330)	(22,330)	(22,330)	(22,330)	
This periods (surplus)/deficit	(178,231)	65,060	95,464	385,011	615,374	
General fund c/fwd	(3,740,308)	(3,497,017)	(3,466,613)	(3,177,066)	(3,562,078)	

Projects

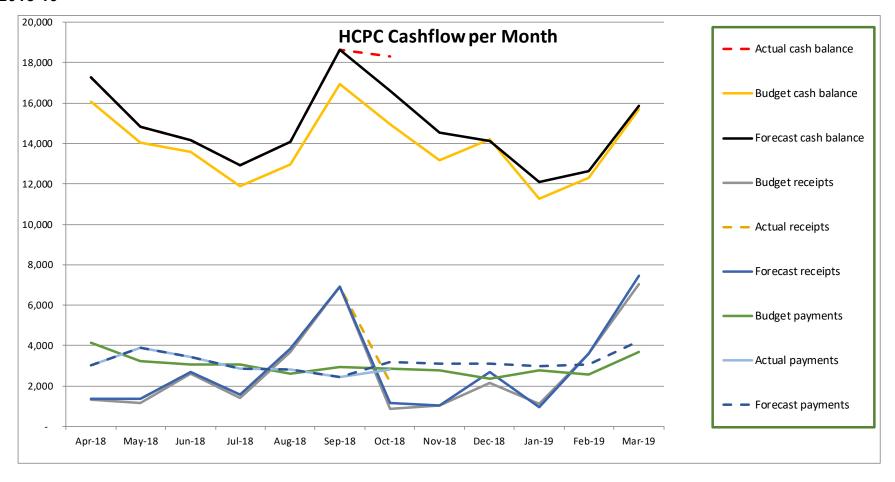
		Opex			Capex			pex & Capex	(Opex	Capex	Opex	Capex
	Actual YTD £		Variance	Actual YTD £	Reforecast 2018/19 YTD £	Variance	Actual YTD £	Reforecast 2018/19 YTD £	Variance	Budget 2018/19	Budget 2018/19 Full Year £	Reforecast 2018/19 Full Year £	2018/19
Reg Transformation and Improvement	1,225			(456)	(456)		769	769	0	348,000	882,000	25,225	
"	·		U	` ′	` ′				ŭ		·		•
HCPC website review and build	57,997	59,361	1,364	220,838	238,266	17,428	278,835	297,627	18,792	104,151	347,583	74,252	276,557
186 Kennington Park Road renovation	627,966	659,271	31,305	540,922	622,592	81,670	1,168,887	1,281,862	112,975	420,000	630,000	659,271	622,592
FTP CMS Review	0	0	0	0	0	0	0	0	0	181,500	275,400	90,750	137,700
FTP Improvement project	125,556	125,556	0	0	0	0	125,556	125,556	0	195,000	0	188,440	0
CPD Online Migraton	94,968	92,959	(2,009)	140,326	156,782	16,456	235,294	249,741	14,447	108,155	210,654	105,877	176,782
Education Changes 17/18	0	0	0	0	0	0	0	0	0	2,520	169,084	750	133,498
Netreg refresh	7,029	8,501	1,472	14,410	14,410	0	21,439	22,911	1,472	20,306	48,119	39,778	14,410
Fee review	0	0	0	0	0	0	0	0	0	2,500	5,750	2,500	5,750
Sage & WAP replacement	0	0	0	0	0	0	0	0	0	76,550	138,000	25,517	46,000
HR system upgrade	0	0	0	0	0	0	0	0	0	1,000	22,850	12,240	55,860
	914,742	946,873	32,132	916,039	1,031,594	115,555	1,830,781	1,978,467	147,686	1,459,682	2,729,440	1,224,599	1,632,693
Regulation of Social workers	320,783	336,784	16,001	0	0	0	320,783	336,784	16,001	0	0	1,015,093	
	1,235,525	1,283,657	48,132	916,039	1,031,594	115,555	2,151,564	2,315,251	163,687	1,459,682	2,729,440	2,239,692	1,632,693

Cash flow statement

From 1 April 2018	Year to date actual	Year to date M6 forecast	Full year budget	Full year forecast
	t.	<u> </u>	t.	
Operating surplus/(deficit)	(123,444)	(362,687)	(95,464)	(1,299,148)
Add: Corporation tax	464 404	464 500	005 747	074 654
Less: Depreciation Grant received from Department of Education	461,121	461,582 236,465	995,747	871,654 1,015,093
Decrease/(increase) in debtors & prepayments	910,016	1,046,436	(18,480)	(82,989)
Increase/(decrease) in creditors	(817,786)	(1,077,046)	(10,400)	(1,077,046)
(Decrease)/increase in deferred income	(356,601)	(1,607,168)	(1,332,867)	(872,128)
(2 concaco), moneraco im acionica inicoline	(333,331)	(1,001,100)	(1,002,001)	(0.2,.20)
Net cash in/(out)flow from operating activities	73,306	(1,302,418)	(451,064)	(1,444,565)
Return on investments and servicing of finance				
Investment Income	65,210	61,162	0	81,788
Capital expenditure and financial investments				
Purchase of fixed assets	(972,620)	(1,097,110)	(2,840,118)	(1,742,887)
Increase/(decrease) in cash	(597,638)	(2,338,366)	(3,291,182)	(3,105,664)
Cash at beginning of period	18,892,070	18,892,070	18,892,070	18,892,070
Cash at end of period	18,294,432	16,553,704	15,600,889	15,786,406
Cash movement	(597,638)	(2,338,366)	(3,291,182)	(3,105,664)

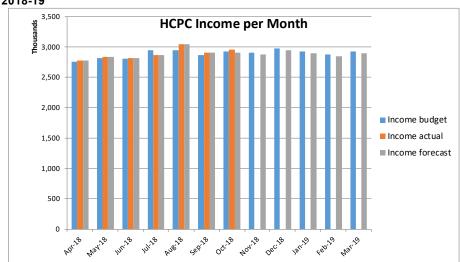
Graphs - Cashflow

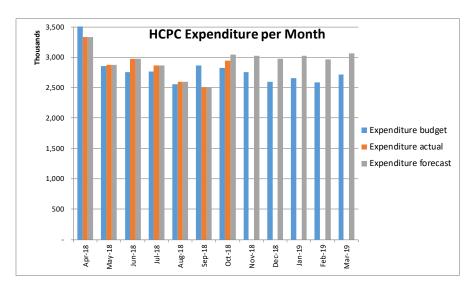
2018-19



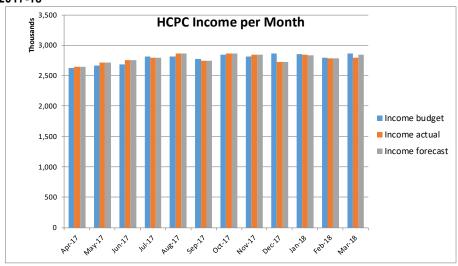
Graphs - Income and expenditure

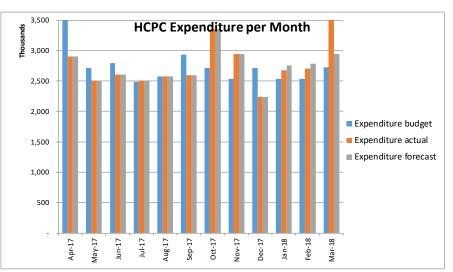
2018-19





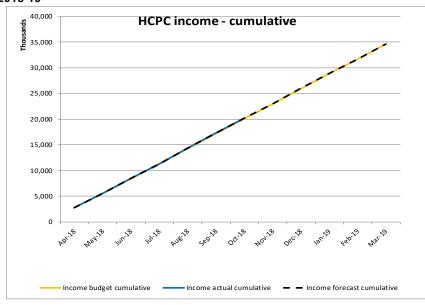
2017-18

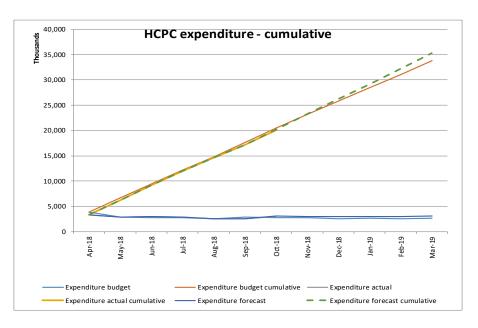




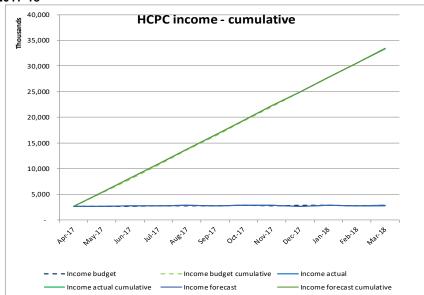
Graphs - Cumulative income and expenditure

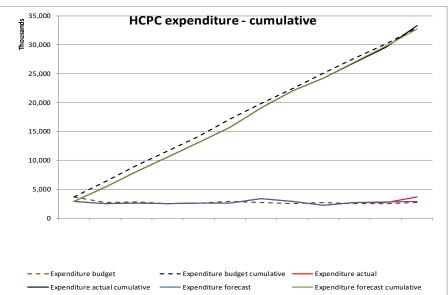
2018-19



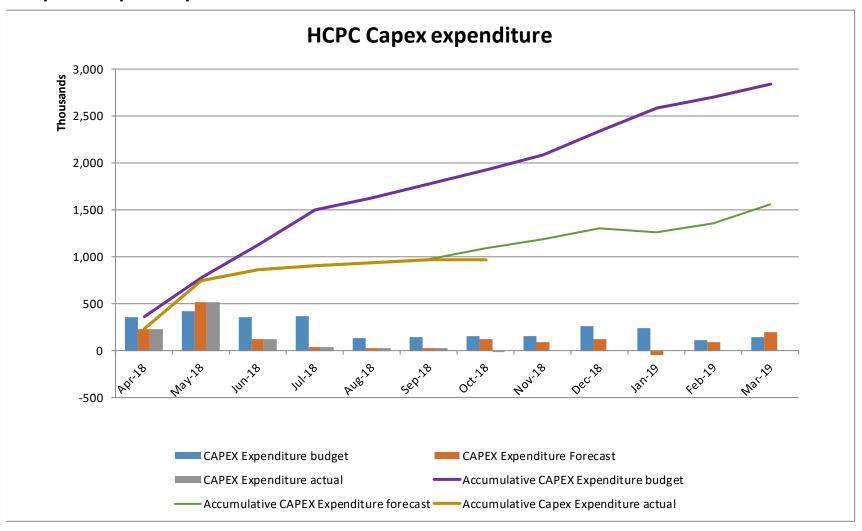


2017-18





Graphs - Capital expenditure





Council meeting, 6 December 2018

Department reports

Contents

	Page number
Education	
Fitness to Practise	44
Registration	57
Human Resources and Partners	63
Quality Assurance	69

Education

<u> </u>	<u>Page number</u>
Overview	39
Table 1: Number of approved programmes	40
Table 2: Overview of approval visits	41
Table 3: Overview of workload, number of active cases	42
Table 4: Overview of workload, number of resolved cases	43

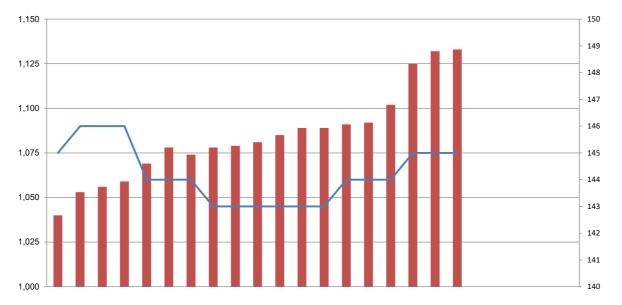
Education: overview

- **Approvals** The scheduling window for approval visits for this financial year is now closed. We are forecast to complete 80 visits, compared to our original budget estimate of 81. This figure is likely now to only decrease slightly if there are cancellations. These visit numbers indicate we are on track in the overall budget, particular around partner and executive costs to support this activity.
- **Podiatric surgery** An approval visit was held to assess two podiatric surgery programmes being put forward for approval by the University of Huddersfield. One relates to a full masters programme for new trainees, and the other is a certificate programme for the existing workforce to complete, to become eligible to receive the annotation. Should both programmes be approved, the Council will then be in a position to consider opening the annotation. This would be followed by the initiation of a major project to deliver the systems upgrades, and stakeholder engagement needed to support go-live.
- **Degree level training for paramedics** Following the Education and Training Committee's decision in March 2018, we have commenced closing off programmes delivered below degree level to new cohorts from 1 September 2021. As part of this work, we are also assessing changes to programmes, and processing new degree requests to support a smooth transition. An update report is scheduled for discussion by ETC in November.
- Review of approval process A full review of our approval process commenced in October. The review will ensure the
 process remains fit for purpose for the foreseeable future. It will involve gathering and analysing feedback from education
 providers, visitors and Committee members. ETC will discuss the outcomes from this review in March 2019, with changes
 implemented in time for the 2019-20 academic year.
- Review of apprenticeships We are reviewing our approach to the approval of higher and degree apprenticeship
 programmes. We want to ensure through this review that we are being proportionate in applying our standards effectively to
 this particular model of training. ETC will consider a discussion paper on this topic in March 2019.
- Online visitor training We recently concluded a pilot of online refresher training for visitors. The training prepares visitors around our revised education standards and changes to the annual monitoring process. Positive feedback was received from visitors in the pilot group regarding the module content and the new method of online delivery. The training module is now scheduled for release to all visitors in November.

Total approved programmes

Total approved education providers

Number of approved programmes, by profession April 2017 - March 2019



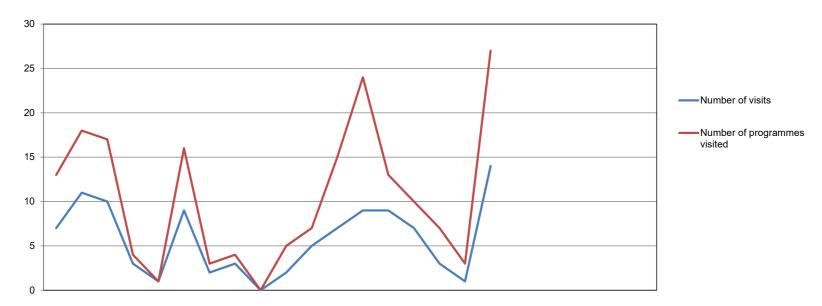
Profession/entitlement	2017									2018												2019		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Arts therapists	28	28	28	28	28	28	28	28	28	28	28	28	28	29	29	31	31	31	31					
Biomedical scientists	60	60	60	60	64	64	64	64	64	64	64	64	64	64	64	64	67	71	71					
Chiropodists/ Podiatrists	17	17	17	18	18	19	19	19	19	19	19	19	19	19	19	19	19	19	19					
Clinical scientists	3	3	3	3	3	3	3	3	4	4	4	4	4	4	4	4	4	4	4					
Dietitians	32	32	32	32	33	33	33	34	34	35	35	35	35	35	35	36	39	39	39					
Hearing aid dispensers	18	18	18	18	18	18	18	19	18	18	18	18	18	18	18	18	20	20	20					
Occupational therapists	68	72	72	72	72	71	71	71	72	73	73	73	73	73	73	74	75	75	75					
Operating Department Practitioners	34	33	33	34	36	36	36	37	37	37	37	37	37	37	37	37	39	39	39					
Orthoptists	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	4	6	6	6					
Paramedics	73	74	75	75	76	74	74	74	72	75	75	76	76	77	77	76	79	79	79					
Physiotherapists	72	76	76	76	75	75	75	77	78	78	78	78	79	79	79	80	83	85	86					
Practitioner psychologists	102	106	104	104	104	108	107	103	103	105	109	109	109	109	109	114	114	114	114					
Prosthotists/Orthotists	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2					
Radiographers	54	54	54	55	57	57	57	58	58	58	58	58	58	56	56	56	57	57	57					
Social workers in England	252	252	254	254	251	252	251	254	255	253	251	253	253	253	253	254	255	255	255					
Speech and language therapists	34	35	35	35	36	39	39	40	40	40	40	42	42	45	45	44	45	46	46					
Prescription only medicine - administration	4	4	4	4	4	5	5	4	4	4	4	4	4	3	3	2	2	2	2					
Prescription only medicine - sale / supply (CH)	6	6	6	6	6	7	6	5	5	5	5	5	5	5	5	5	5	5	5					
Prescription only medicine - sale / supply (OR)																1	4	4	4					
Supplementary prescribing	51	51	50	50	50	50	50	50	50	49	49	49	49	49	49	49	49	49	49					
Independent prescribing	95	95	95	95	98	98	98	98	98	96	98	97	96	96	97	98	97	97	97					
Approved mental health professionals	32	32	33	33	33	34	33	33	33	33	33	33	33	33	33	32	31	31	31					
Podiatric surgery			2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2					
Total approved programmes	1,040	1,053	1,056	1,059	1,069	1,078	1,074	1,078	1,079	1,081	1,085	1,089	1,089	1,091	1,092	1,102	1,125	1,132	1,133					
Total approved education providers	145	146	146	146	144	144	144	143	143	143	143	143	143	144	144	144	145	145	145					

2016/17	2017/18	2018/19
FYE	FYE	YTD
28	28	31
60	64	71
17	19	19
3	4	4
32	35	39
18	18	20
68	73	75
34	37	39
3	3	6
73	76	79
71	78	86
102	109	114
2	2	2
54	58	57
252	253	255
34	42	46
4	4	2
6	5	5
		4
51	49	49
95	97	97
32	33	31
	2	2
1,039	1,089	1,133
145	143	145

CH = Chiropodists / podiatrists

OR = Orthoptists

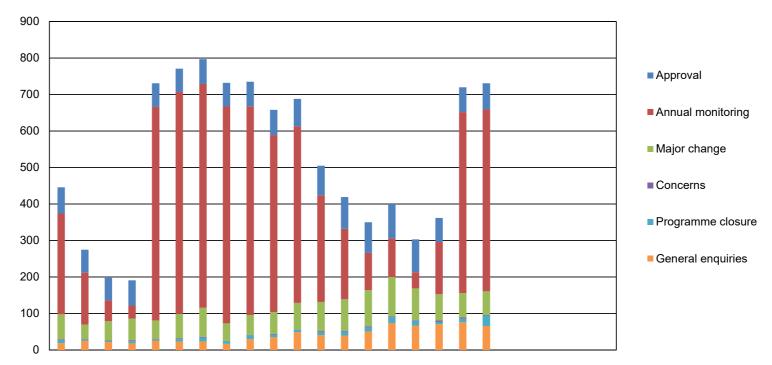
Overview of approval visits April 2017 - March 2019



Overview of approval visits	2017									2018												2019		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Number of visits	7	11	10	3	1	9	2	3	0	2	5	7	9	9	7	3	1	14	11					
Number of programmes visited	13	18	17	4	1	16	3	4	0	5	7	15	24	13	10	7	3	27	17					

2016/17	2017/18	2018-19
FYE	FYE	YTD
44	60	54
78	103	101

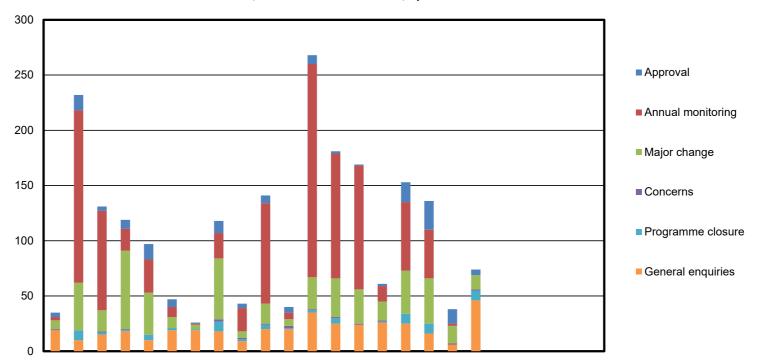
Overview of workload, Number of active cases, April 2017 - March 2019



Work area	20)17									2018												2019		
	Α	pr I	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Approval	7	72	63	62	69	65	64	68	65	67	69	75	81	87	84	94	90	66	68	72					
Annual monitoring	27	76	142	57	36	585	608	613	594	572	485	484	292	193	102	106	44	143	496	498					
Major change	6	86	40	53	60	51	67	80	48	54	60	72	80	86	99	108	87	72	67	65					
Concerns	2	2	2	1	2	2	2	2	0	1	2	1	2	2	3	2	2	4	3	2					
Programme closure	ę	9	3	3	6	3	7	11	8	11	7	7	9	11	11	16	13	6	10	28					
General enquiries	1	19	25	22	18	25	23	23	17	30	35	49	41	40	51	74	67	71	76	66					
Total	44	46 2	275	198	191	731	771	797	732	735	658	688	505	419	350	400	303	362	720	731					

2016/17	2017/18	2018/19
FYE	FYE	YTD
70	81	94
283	292	106
57	80	108
3	2	2
8	9	16
31	41	74
452	505	400

Overview of workload, Number of resolved cases, April 2017 - March 2019



Work area	2017	,								2018												2019		\Box
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Approval	4	14	4	8	14	7	1	11	4	7	5	8	2	1	2	18	26	13	5					
Annual monitoring	3	156	90	20	30	9	1	23	21	91	6	193	113	112	14	62	44	2	0					
Major change	8	43	19	71	38	10	4	55	6	18	6	29	35	31	17	39	41	16	13					
Concerns	1	0	1	1	0	0	0	2	1	1	2	1	1	1	1	0	0	1	1					
Programme closure	0	9	2	1	5	2	1	9	2	4	1	2	5	0	1	9	9	0	9					
General enquiries	19	10	15	18	10	19	19	18	9	20	20	35	25	24	26	25	16	6	46					
Total	35	232	131	119	97	47	26	118	43	141	40	268	181	169	61	153	136	38	74					

2016/17	2017/18	2018/19
FYE	FYE	YTD
62	87	67
762	643	347
310	307	192
10	10	5
31	38	33
131	212	168
1,306	1,297	812

Fitness to Practise

Page number

Fitness to Practise: overview (based on data up to the end of October 2018)

New and open cases

- The total new concerns received since the beginning of the reporting year was 1348 in October, which averages as 193 new cases per month. The total number so far matches our original forecast of total cases per month, though the variability of numbers of new cases has been as high as 133% of the forecast (in July). (Table 1)
- The total open caseload was 2,286 in October. The total number of open pre-ICP cases (1,939) has reduced, and in both August and October, we closed more cases than we received in the month. This is the first time in a year that we have achieved this. (Table 1)
- The total number of open post-ICP cases was less than expected in the forecast. Of the 303 open cases, 41% have a final hearing listed, 1% have a preliminary hearing listed, 27% are with scheduling and are being listed, and 32% are with our external legal suppliers. These proportions remain in line with our budget and planning assumptions, and the number of concluded hearings is matching the numbers referred from the Investigating Committee.

Length of time

- The median length of time from receipt for cases to reach an ICP decision has gone up to 66.6 weeks in October compared to 63.4 weeks in July (the corporate KPI is 33 weeks). This is a result of direct targeting of older cases, and driving the progression to the ICP. Of those concluding in October 75% were older than 52 weeks from receipt (4 were older than 104 weeks and 1 older than 156 weeks). Concluding cases older than 52 weeks helps to address the key PSA measures in this respect. (Table 2)
- The median length of time for cases to reach the final hearing once referred by the ICP was 53.3 weeks in October compared to 54.8 weeks in July (the corporate KPI is 39 weeks). This was a result of concluding older cases. 50% of cases concluded in October were over 52 weeks old from the ICP decision (there were non older than 104 weeks). The stability in this KPI shows that we continue to target the already old cases. This is likely to continue until Q4 of the year, after which, this KPI will be nearer to the target. (Table 3)
- The median length of time to conclude cases at hearing from receipt was 102.6 weeks compared to 99.6 weeks in July (the corporate KPI is 73 weeks). Across the year to date, the age at conclusion is broadly stable, partly diue to the time accrued in

the preICP stage. This is likely to continue to the end of the year, when it will reduce. As an illustration, the median age of 60% of the preICP cases is 5 months, with the remainder being 11 months. (Table 4)

• Interim order cases were progressed in a median time of 15.9 weeks from receipt. This meets the KPI of 16 weeks. (Table 5)

Age of open cases

- On quarterly basis, the PSA monitors the number of open cases which are over 156 weeks old, over 104 weeks old and over 52 weeks old. Our target is to bring the number of cases over 156 weeks old to 14, over 104 weesk old to 80 and over 52 weeks to 378, the figures in 2014.
- In October we had 37 cases which were over 156 weeks, 142 cases which were over 104 weeks and 575 cases which were over 104 weeks. There has been some fluctuations in these numbers across the year, as we focus on different parts of the process, but the two oldest categories have not increased significantly, suggesting that we are keeping pace with conclusions of the oldest cases that are being advanced as a result of our improvement works. (See Table 6)
- The number of total open pre-ICP cases had reduced to 1983 in October. Out of this number 76% is younger than 52 weeks. 9 cases are older than 156 weeks, 62 cases are older than 104 weeks and 402 cases are older than 52 weeks. (Table 2)
- The number of open post ICP cases continues to remain stable. The number of open post ICP case was 303 in October. Out of this number the number of cases over 156 was 28 (9%), over 104 weeks was 80 (26%) and 173 (57%) over 52 weeks. Twenty two cases (7%) are less than 52 weeks from receipt. All categories of cases are stable and within the expected tolerances. (Table 3).

Challenges to Fitness to Practise Decisions

 There have been no six appeals from registrants against the decision of the Conduct and Competence Committee have been received since April. Of these only one remains ongoing. All other appeals have been successfully concluded including award of costs. No new appeals were received in October. (Table 7)

Table 1 Fitness to Practise (FTP) Overview

Fitness to Practise Department

2,500																														
2,000																_			_					_						
																				_	-	-				lew cases rece	ived 1			
§ 1,500																								•						
of ca								_																	s	ases closed at tages2				
1,000 nm																										open pre-ICP ta	irget			
₹ 1,000																										open pre-ICP ca excl Rule 12)	ises			
500																														
	-	-	-	-	=	_	-	_		\Rightarrow	-	=		=	-	\Rightarrow	4	-	-											
0																														
	2017									2018												2019			17/18 Year End 17	18/19 Fored	ast 3 month re-	6 month ro-	9 month re-	2018-19
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	18	Forecast	forecast	forecast	forecast	YTD
New cases received ¹	175	192	179	194	212	167	185	214	133	254	195	202	199	205	165	256	158	168	197						2,302	2,239	2,311			1,348
Rolling 12 month average New Cases	187	184	183	184	186	183	183	185	184	192	192	192	194	195	194	199	194	195	196						N/A		Not specific	cally forecast		
Cases closed at all stages ²	189	193	194	184	152	93	94	114	101	147	130	126	123	133	125	176	218	164	211						1,717	2,123	2,127			1,150
Cases open at all stages³	1,518	1,528	1,523	1,545	1,495	1,621	1,716	1,835	1,855	1,957	2,036 2,	,101	2,117	2,203	2,246	2,310	2,283	2,297	2,286						2,101	2,140	2,186			2,286
Open pre-ICP cases (excl Rule 12)	1,018	1,016	1,014	1,031	984	1,118	1,232	1,375	1,414	1,533	1,601 1,	,690	1,721	1,804	1,867	1,946	1,937	1,960	1,939						1,690	1,663	1,732			1,939
Average cases per Case Manager (PreICP excl Interim Order and Rule 12)	Not pre	/ioulsyre	eported	d on									55	54	52	53	54	54	49						N/A		Not specific	cally forecast	•	
Number of Case Managers (PreICP excluding Rule 12 only)	Not pre	/ioulsyre	eported	d on									16	17	17	18	18	20	22						N/A		Not specifie	cally forecast		1
Open Rule 12 cases	38	44	48	50	46	44	38	34	35	32	40	41	42	49	48	46	41	43	44						41	67	52			44
Open post-ICP cases	462	468	461	464	465	459	446	426	406	392	395	370	354	350	331	318	305	294	303						370	477	454			303
Open restoration cases	Not pre	/ioulsyre	eported	on									5	6	5	4	5	6	4						N/A		Not specific	cally forecast	•	4
Cases closed pre-ICP (does not meet SOA)	132	147	139	144	106	90	51	67	71	111	97	79	91	97	83	135	164	113	164						1,234	1,590	1,626			847
Cases Obs'ed	43	54	63	44	40	29	37	30	32	25	31	35	53	50	54	59	70	53	77						463	759	765			416
Cases considered at ICP	65	56	52	61	55	47	35	27	24	31	49	40	34	34	23	41	48	52	64						542	705	673			296
Cases closed at ICP (No Case to Answer)	15	9	12	14	11	3	8	1	5	5	8	9	4	10	8	13	22	24	19						200	160	152			100
Cases concluded at ICP (Case to Answer)	47	41	34	41	39	40	19	23	18	22	33	26	28	22	13	21	19	22	40						548	474	448			165
Cases concluded at ICP (Further	3	6	6	6	5	4	8	3	1	4	8	5	2	2	2	7	7	6	5					T	90	70	74			31
Information) ⁴ % Case to Answer (out of cases	76	82	74	75	78	93	70	96	78	81	80	67	88	69	62	62	46	48	68						79	75	75			63
Cases concluded at Final Hearing	42	37	43	28	35	39	34	45	35	31	25	38	28	26	34	28	32	27	28					-	432		402			203
Concluded restoration cases		vioulsy re											0	0	1	0	0	1	0						N/A	-		cally forecast		2
Cases in review cycle	247	231	234	237	231	226	230	243	247	245	245	245	232	225	224	220	215	217	208						245	249	223			208
Balance between new cases and closed	-14	-1	-15	10	60	74	91	100	32	107	65	76	76	72	40	80	-60	4	-14					1	585	N/A	N/A	N/A	N/A	198
cases																														

1 includes only cases where the 'Created Date' is within the reporting month. This means those cases received at the end of the month and not yet logged on CMS will be picked up in the reporting for the following month.

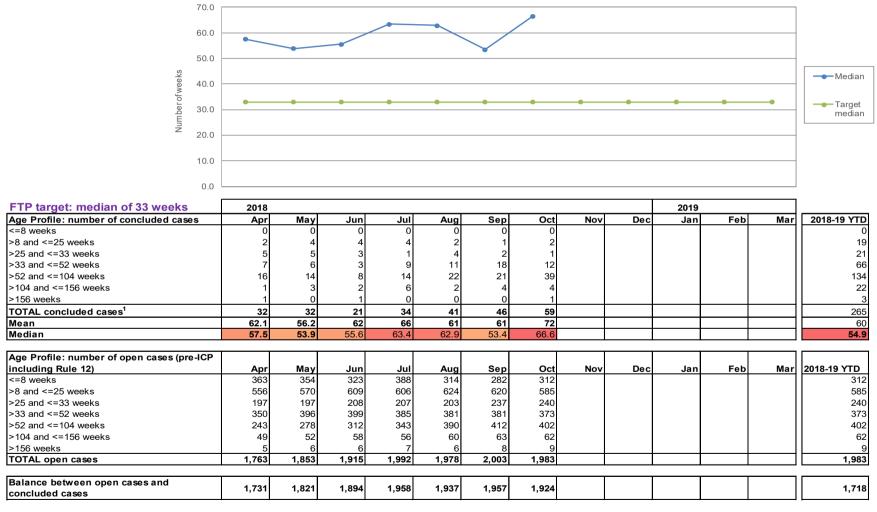
2 includes: SOA not met, ICP no case to answer, and Cases concluded at FH.

3 includes Open pre-ICP, Open post-ICP, and open Rule 12 cases.

4 Not specifically forecast; obtained by subtracting 'Cases concluded at ICP' from 'Cases considered at ICP'.

Table 2
Length of time from receipt to a decision by an ICP (in weeks)

Fitness to Practise Department



¹ Total concluded cases includes 'Case to Answer' and 'No Case to Answer'.

Table 3
Length of time from ICP to conclusion (Final Hearing) (in weeks)

Fitness to Practise Department

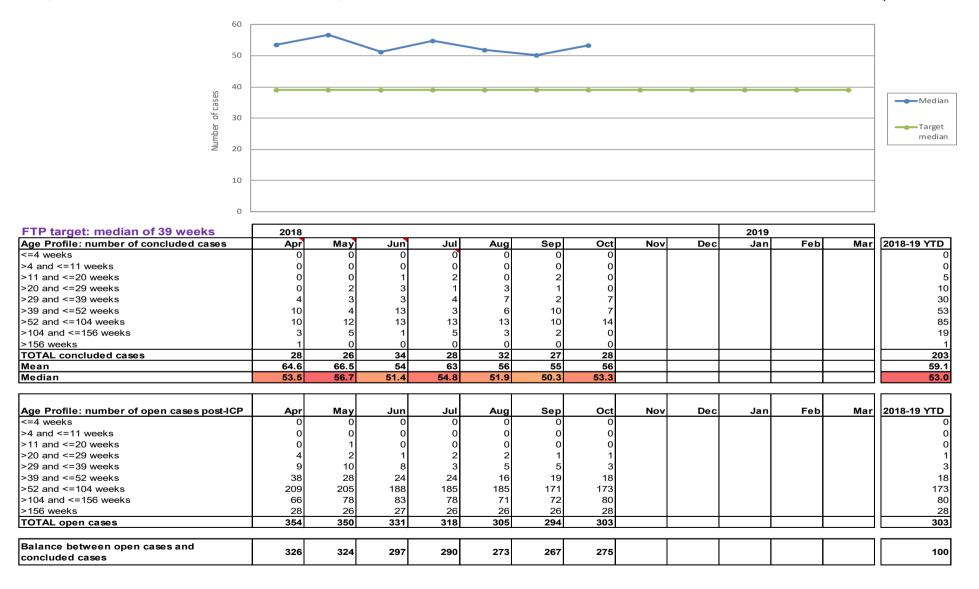


Table 4
Length of time from receipt to conclusion (Final Hearing) (in weeks)

Fitness to Practise Department

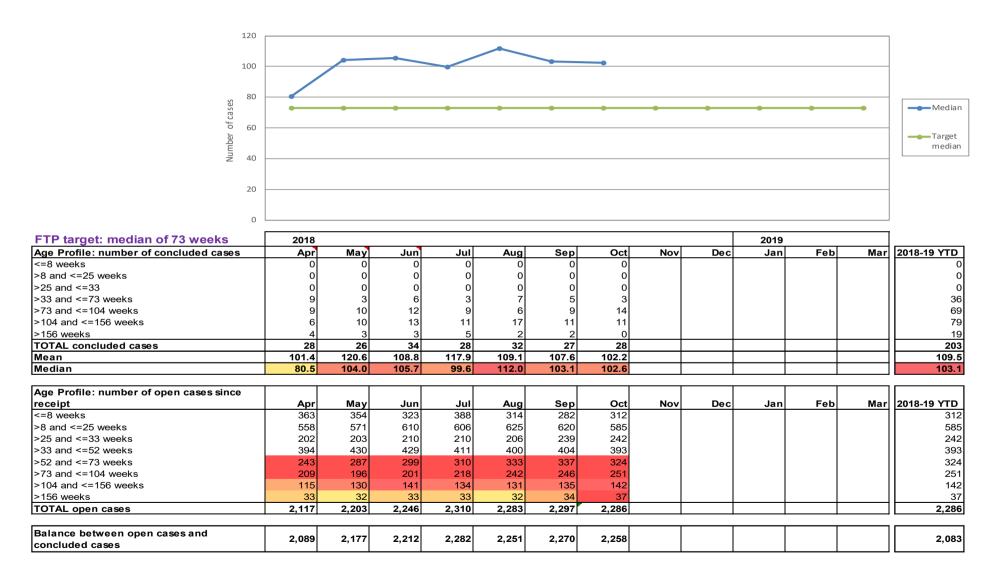
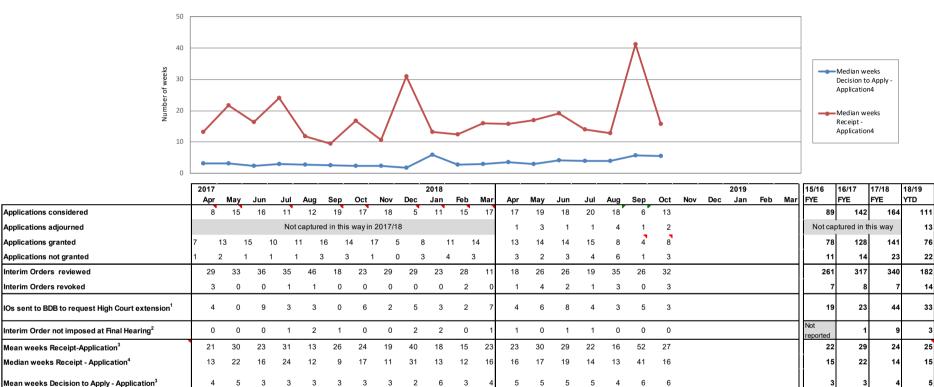


Table 5 Interim Orders breakdown (in weeks)



3

Applications considered

Applications adjourned

Applications not granted

Interim Orders reviewed

Interim Orders revoked

Mean weeks Receipt-Application³

Median weeks Receipt - Application4

Median weeks Decision to Apply - Application4

Applications granted

Fitness to Practise Department

¹ This is the number of cases we send to DBD, regardless of whether they go to High Court or not - the latter number is not available.

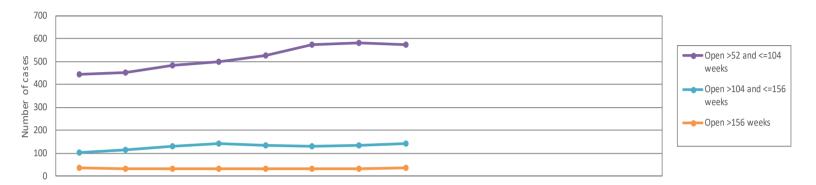
² Covers appeal period.

³ From 2017/18, the mean is calculated on year-to-date data, and is not the mean of monthly means.

⁴ From 2017/18, the median is calculated on year-to-date data, and is not the mean of monthly medians.

Table 6
Key PSA measures

Fitness to Practise Department



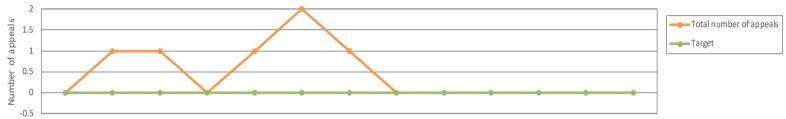
	2018									2019								18/19
	Target	Mar-18	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	15/16	16/17	17/18	YTD
New cases received		202	199	205	165	256	158	168	197						2,127	2,259	2,302	256
Total open cases (pre- and																		
post-ICP)		2,060	2,117	2,203	2,246	2,310	2,283	2,297	2,286						1,675	1,491	2,060	2,286
Open >52 and <=104 weeks	378	444	452	483	500	528	575	583	575						Not provi	iouoly ron	orted in	575
Open >104 and <=156 weeks	80	105	115	130	141	134	131	135	142						Not prev		oneu III	142
Open >156 weeks	14	38	33	32	33	33	32	34	37						this way			37
	,	•		,					,			•	·	,				•
Open pre-ICP		1,690	1,763	1,853	1,915	1,992	1,978	2,003	1,983						1,208	1,027	1,690	1,983
Open post-ICP		370	354	350	331	318	305	294	303						467	464	370	303

PSA monitors quarterly cases that have been open for longer than 52 weeks, longer than 104 weeks, and longer than 156 weeks. Our targets are the following number of cases in the relevant brackets:

>52 and <=104 weeks: 378 >104 and <=156 weeks: 80 >156 weeks: 14

Table 7

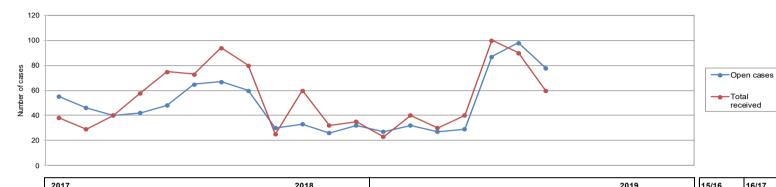
4. Number of court appeals received against fitness to practise decisions



	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	2017-18 YTD
Number of fitness to practise FH	38	28	26	34	28	32	27	28						
decisions	30	20	20	04	20	32	21	20						203
Number of registrant appeals	0	1	1	0	1	2	1	0						6
Number of PSA appeals	0	0	0	0	0	0	0	0						0
Number of Judicial Reviews	0	0	0	0	0	0	0	0						0
Total number of appeals	0	1	1	0	1	2	1	0						6
Appeals against FTP decisions ratio - %	0.00	0.04	0.04	0.00	0.04	0.06	0.04	0.00						0.0

Table 8
Health and Character Declarations

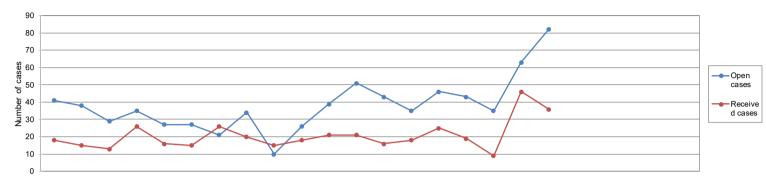
Fitness to Practise Department



		2017									2018												2019			15/16	16/17	17/18	18/19
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	FYE	FYE	FYE	YTD
٦	Renewal	2	4	0	2	0	0	1	1	0	1	0	0	0	1	0	0	0	0	0						36	109	11	1
Received	Readmission	7	7	7	5	3	5	3	8	4	5	3	4	4	9	9	1	3	2	2						79	101	61	30
8	Admission	29	18	33	51	72	68	90	71	21	54	29	31	19	30	21	39	97	88	58						617	499	567	352
2	Self-referral	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0						0	1	0	0
	Total received	38	29	40	58	75	73	94	80	25	60	32	35	23	40	30	40	100	90	60						732	710	639	383
	Admission accepted administratively	33	26	30	40	49	45	77	69	49	42	24	23	23	28	26	14	27	65	58						Not previously reported.	285	507	241
	Considered by panel	11	11	8	9	14	12	13	15	9	17	13	6	5	11	12	5	14	17	31						336	127	138	95
	Referred to FTP	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0						1	1	0	0
	Admission rejected by panel	0	1	0	0	2	0	1	1	0	0	2	0	0	1	3	0	0	0	2						20	11	7	6
red	Readmission rejected by panel	0	1	1	1	1	2	0	0	1	0	0	0	0	2	1	2	0	0	0						0	1	7	5
Considered	Renewal rejected by panel	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0						0	0	0	0
	Not referred to FTP	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0						0	0	1	0
	Admission accepted by panel	6	7	2	1	9	7	11	13	6	12	10	4	5	4	6	1	12	15	27						308	126	88	70
	Readmission accepted	4	1	2	7	0	2	0	1	2	4	1	0	1	4	2	2	2	2	2						0	17	24	15
	Renewal accepted	1	1	2	0	2	0	1	0	0	0	0	0	0	0	0	0	0	0	0						0	10	7	0
	Open cases	55	46	40	42	48	65	67	60	30	33	26	32	27	32	27	29	87	98	78									

Table 9
Protection of Title

Fitness to Practise Department

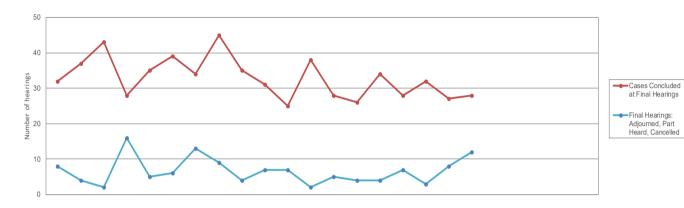


	2017									2018												2019		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Public	13	8	4	7	9	7	13	13	6	9	10	8	8	10	12	9	4	21	12					
Police	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
HCPC Registrant / Internal	4	6	5	9	4	4	10	5	6	7	7	9	6	5	10	4	3	12	16					
Anonymous	0	0	0	2	1	0	1	0	0	0	0	0	0	0	0	1	0	2	0					
Professional body	0	1	4	6	2	4	1	2	2	2	4	4	2	3	3	5	2	11	6					
Other	1	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	2					
Received cases	18	15	13	26	16	15	26	20	15	18	21	21	16	18	25	19	9	46	36					
Open cases	41	38	29	35	27	27	21	34	10	26	39	51	43	35	46	43	35	63	82					

14/15	15/16	16/17	17/18	18/19
FYE	FYE	FYE	FYE	YTD
150	135	94	107	76
4	2	0	2	0
10	18	57	76	56
14	14	20	4	3
139	112	51	32	32
9	43	14	3	2
326	324	236	224	169

Table 10
Hearings Management Information Summary

Fitness to Practise Department



			2017								2018											2019		Year End	18/19				
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb		Original Forecast	3 month re- forecast	6 month re- forecast	9 month re- forecast	YTD Total
Cases Listed for Final Hearings	41	41	45	44	40	45	47	54	39	38	32	41	33	30	38	36	35	35	40					51	43	B 402			247
Cases Concluded at Final Hearings	32	37	43	28	35	39	34	45	35	31	25	38	28	26	34	28	32	27	28					432	2 372	2 350			203
Final Hearings: Adjourned, Part Heard, Cancelled	8	4	2	16	5	6	13	9	4	7	7	2	5	4	4	7	3	8	12					78	6	52			43
% of Hearings Adjourned/Part Heard	20	10	4	36	13	13	28	17	10	18	22	5	15	13	11	19	9	23	30					11	5 1	5 13	;		17
Review Hearings Scheduled	23	19	24	30	32	15	22	16	20	24	18	29	21	25	18	18	35	35	40					272	290	263			192
Review Hearings Concluded	23	19	24	16	30	15	22	16	17	22	18	28	20	25	21	16	22	13	32					250	290	6 265	j		149
Cases in Review Cycle	247	231	234	237	231	226	230	243	247	245	245	245	232	233	224	220	215	217	208					24	24	223	:		208
Preliminary Hearings	2	9	8	11	6	3	1	4	4	3	5	3	5	3	2	9	2	5	7					59	7:	2 63			33

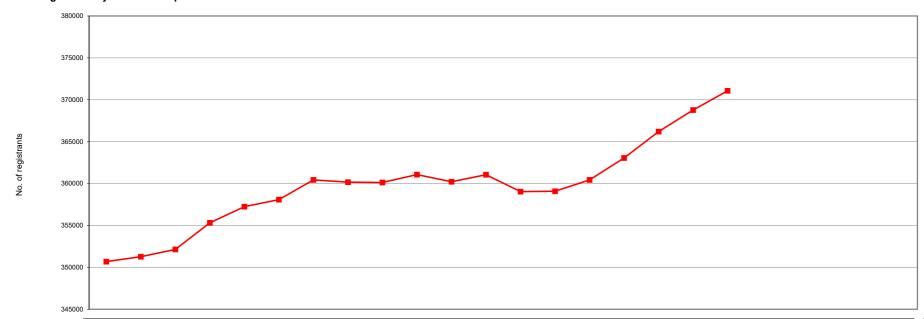
Registration

	Page number
Overview	58
Table 1: Number of registrants by profession	59
Table 2: New registrants	60
Table 3: Registration appeals received	61
Table 4: Registration appeal decisions	62

Registration: overview

- This section provides an update about the work of the Registration Department from September to October 2018. All of the
 department's service standards were consistently achieved for the period with the exception of answering UK telephone
 calls.
- A total of 36,373 UK telephone calls were received which is 7,013 (or 16.2%) fewer than compared to the same period in 2016 and an average of 88% of UK telephone calls were answered. The shortage of fully trained Registration Advisors attributed to this service standard not being met as well as actively prioritising available resource to fulfil the department's regulatory functions of registering new applicants, renewing existing registrants and managing continuing professional development audits.
- A total of 4,387 international emails were received which is 998 (or 29.4%) more than the same period last year. All emails were answered with an average of 1 working day, compared to 3 days in 2017.
- A total of 942 international applications were received which is 349 (or 58.8%) more than compared to the same period last year. For the period of September to October 2018 the 60 working days service standard was met.
- At the start of September 2018 97,322 social workers in England and 13,773 operating department practitioners were invited to renew their registration and registrants have until 30 November 2018 to complete their professional declaration and pay their fee. As at the 13 November 2018 71% of social workers in England and 83.3% of operating department practitioners had renewed their registration.
- Recruitment campaigns are being held frequently to ensure vacancies are filled as quickly as possible. During the period from September to October 2018, 6 candidates were successfully recruited to Registration Advisor roles. A 6 month multiskilling training programme for all new recruits is being delivered.

Number of Registrants by Profession April 2017 - March 2019

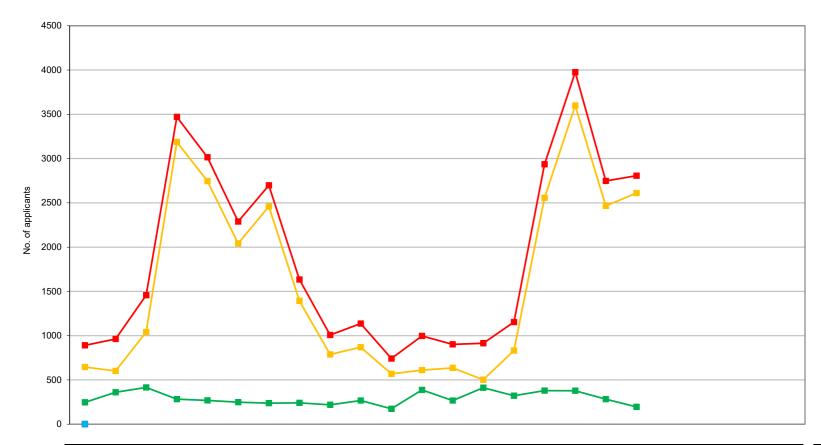




	2017									2018												2019			15/16	16/17	17/18	18/19
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	FYE	FYE	FYE	YTD
Arts therapists	4,040	4,043	4,057	4,099	4,170	4,209	4,262	4,273	4,288	4,311	4,317	4,322	4,328	3,999	4,073	4,110	4,230	4,291	4,345						3,897	4,026	4,322	4,345
Bio. scientists	22,906	22,879	22,974	23,100	23,172	23,119	23,153	23,142	22,121	22,262	22,335	22,395	22,491	22,519	22,603	22,693	22,835	22,928	22,990						22,154	22,902	22,395	22,990
Chirops/ pods	12,920	12,914	12,949	13,075	13,128	13,163	13,185	13,186	13,164	13,120	13,122	13,115	13,101	13,059	13,090	13,206	12,775	12,824	12,845						13,121	12,931	13,115	12,845
CI scientists	5,688	5,713	5,740	5,741	5,738	5,514	5,559	5,675	5,732	5,772	5,799	5,818	5,854	5,873	5,902	5,917	5,934	5,947	6,052						5,376	5,663	5,818	6,052
Dietitians	9,120	9,131	9,173	9,355	9,464	9,505	9,541	9,556	9,547	9,564	9,566	9,585	9,611	9,596	9,620	9,381	9,556	9,611	9,648						8,986	9,107	9,585	9,648
Hearing aid disps	2,607	2,627	2,648	2,682	2,726	2,761	2,803	2,836	2,857	2,871	2,889	2,908	2,927	2,934	2,948	2,962	2,851	2,901	2,936						2,442	2,593	2,908	2,936
OTs	38,047	38,131	38,240	38,579	38,889	38,919	38,969	37,799	37,922	38,027	38,110	38,183	38,212	38,283	38,370	38,687	39,200	39,440	39,544						36,272	38,080	38,183	39,544
ODPs	13,082	13,086	13,122	13,175	13,289	13,484	13,602	13,595	13,630	13,645	13,640	13,639	13,657	13,635	13,655	13,731	13,850	14,103	14,173						12,811	13,052	13,639	14,173
Orthoptists	1,448	1,447	1,439	1,450	1,407	1,424	1,432	1,441	1,441	1,441	1,440	1,440	1,442	1,442	1,445	1,461	1,482	1,489	1,497						1,385	1,451	1,440	1,497
Paramedics	24,084	24,230	24,285	24,459	24,031	24,455	24,722	24,976	25,113	25,217	25,269	25,465	25,637	25,790	25,856	26,021	26,270	26,699	27,101						22,380	23,992	25,465	27,101
Physiotherapists	52,906	53,057	53,359	54,030	54,532	54,744	54,852	54,980	55,050	55,140	55,177	55,132	52,440	52,955	53,301	54,009	54,696	54,986	55,125						51,662	52,915	55,132	55,125
Pract psychs	22,544	22,521	21,993	22,085	22,172	22,311	22,695	22,853	22,960	23,017	23,065	23,104	23,156	23,182	23,237	23,305	23,407	23,584	23,923						21,470	22,604	23,104	23,923
Prosth/orthotists	1,062	1,062	1,072	1,091	1,094	1,037	1,045	1,049	1,050	1,052	1,053	1,051	1,055	1,056	1,071	1,086	1,095	1,096	1,099						1,005	1,063	1,051	1,099
Radiographers	32,112	32,183	32,469	33,092	33,278	33,451	33,570	33,638	33,618	33,586	32,167	32,475	32,578	32,662	32,897	33,511	33,888	34,112	34,240						30,244	32,072	32,475	34,240
Social workers	92,181	92,275	92,613	93,183	93,950	94,510	95,380	95,388	95,824	96,175	96,367	96,497	96,571	96,108	96,350	96,842	97,844	98,419	99,081						93,341	91,944	96,497	99,081
SLTs	15,941	15,967	16,009	16,120	16,200	15,475	15,671	15,785	15,818	15,870	15,898	15,932	15,977	15,988	16,013	16,133	16,295	16,353	16,470						15,199	15,935	15,932	16,470
Total	350,688	351,266	352,142	355,316	357,240	358,081	360,441	360,172	360,135	361,070	360,214	361,061	359,037	359,081	360,431	363,055	366,208	368,783	371,069						341,745	350,330	361,061	371,069

NOTE: Information captured on the last day of each calendar month.

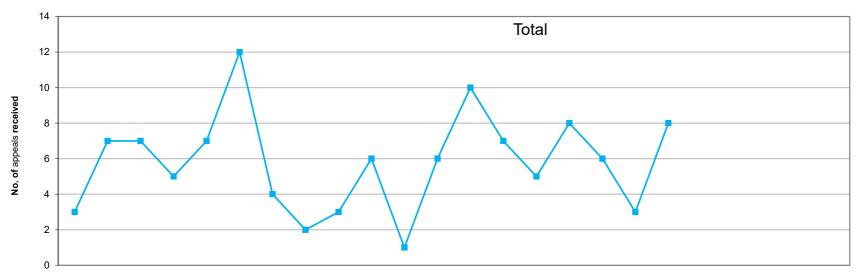
New Registrants April 2017 - March 2019





	2017								:	2018												2019			15/16	16/17	17/18	18/19
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	FYE	FYE	FYE	YTD
International	246	360	415	282	269	248	237	241	219	267	174	386	267	412	322	379	377	283	196						2,871	3,905	3,344	2,236
uĸ	645	602	1,041	3,188	2,745	2,041	2,460	1,393	788	869	568	610	635	502	831	2,556	3,599	2,465	2,610						16,468	16,190	16,950	13,198
Total	891	962	1,456	3,470	3,014	2,289	2,697	1,634	1,007	1,136	742	996	902	914	1,153	2,935	3,976	2,748	2,806						19,340	20,095	20,294	15,434

Registration Appeals Received April 2017 - March 2019





	2017									2018												2019		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
EMR (1)	2	1	1	3	2	3	1	1	1	4	1	2	2	1	1	1	2	0	2					
Non-EMR (2)	1	5	4	1	3	1	0	0	1	1	0	2	4	4	2	4	2	3	5					
Visitors (3)	0	0	0	0	0	0	0	0	0	1	0	0	0		0	0	0	0	0					
UK (4)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Returners to practice (5)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
CPD (6)	0	1	2	1	2	4	1	0	1	0	0	1	2	0	0	3	1	0	0					ļ
Health and Character declarations (7)	0	0	0	0	0	4	2	1	0	0	0	1	2	2	2	0	1	0	1					
Total	3	7	7	5	7	12	4	2	3	6	1	6	10	7	5	8	6	3	8					

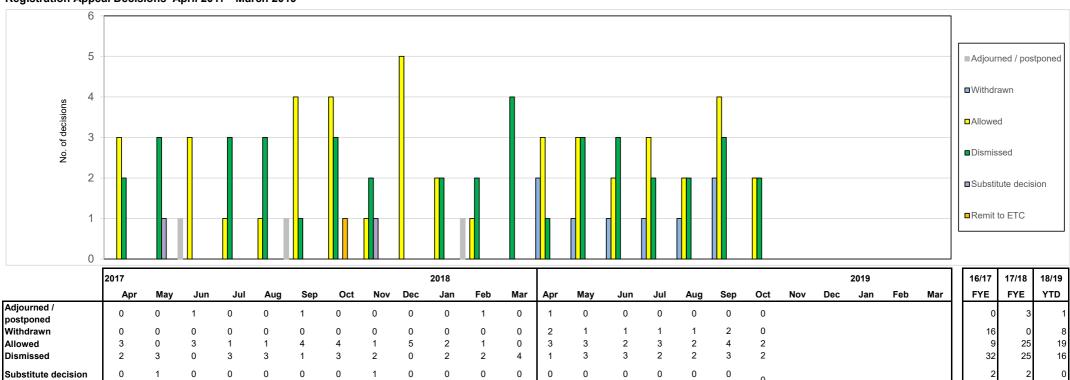
16/17	17/18	18/19
FYE	FYE	YTD
28	22	9
15	19	24
2	1	0
1	0	0
1	0	0
0	13	6
9	8	8
56	63	47

- 1 International applications with European Mutual Recognition (EMR) rights.
- 2 International applications without EMR rights.
- 3 Delcarations to be on the Register of visiting health professionals.
- 4 UK applications for registration.
- **5** Applications for readmission to the Register.
- 6 Continuing Professional Development profiles.
- 7 Any application where a positive declaration has been made by the applicant for health and character.

Registration Appeal Decisions April 2017 - March 2019

Remit to ETC

Hearings held



Human Resources and Partners

Page numberOverview64Table 1: Employee numbers65Table 2: Employee sickness absence and turnover66Table 3: Quarterly leavers67Table 4: Partner turnover68

Human Resources and Partners: overview

Employee turnover

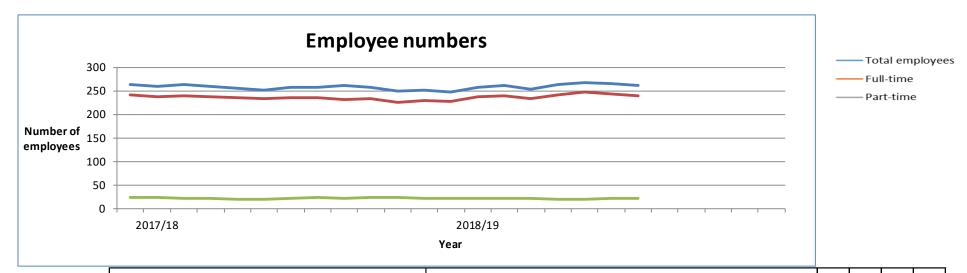
Voluntary employee turnover has fallen to 22% for the first time since January 2018. More detailed turnover data is being provided to the SMT on a quarterly basis, and is reproduced in this report for the Council. Quarterly breakdowns of turnover by pay band and by length of service have been provided, and different data sets are available if required.

• Culture and engagement action plan

An action plan for cultural change and employee engagement has been developed and will be presented to the Council in a separate paper. The culture and engagement plan has been informed by employee feedback from the 2018 engagement survey, pay and reward focus groups, Engage for the future workshops and exit interview data.

· Review of pay and grading

The final report of recommendations arising from the review of pay and grading was presented to the SMT at its meeting on 20 November and will be reviewed at the next meeting of the Remuneration Committee in January 2019.



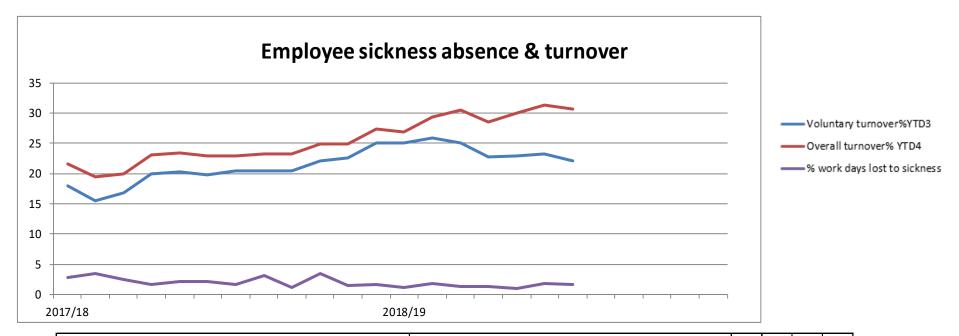
						2017	7/18											201	8/19						15/16	16/17	17/18	18/19
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	FYE	FYE	FYE	YTD
Budgetted employees																												
Budgeted permanent	285	285	285	285	285	285	285	285	285	285	285	285	261	262	262	266	267	266	265	265	266	266	266	267	255	262	285	267
Budgeted fixed term													20	20	18	16	16	16	16	16	16	16	16	15				15
Total employees	260	263	259	256	252	258	258	261	257	250	252	248	258	261	254	263	267	265	261						234	249	248	261
Full-time	237	239	238	236	233	236	235	232	234	226	230	227	237	240	233	242	247	243	240						217	226	227	240
Part-time	23	22	21	20	19	22	23	21	23	24	22	21	21	21	21	20	20	22	21						19	22	21	21
Flexible w orking*	75	75	74	77	74	78	79	78	76	76	74	74	76	68	66	70	82	74	74						41	56	74	68
FTE*	255	256	255	251	247	253	253	249	201	244	246	242	252	254	248	248	262	259	256						230	242	242	254
Permanent	237	237	228	222	219	214	212	203	205	202	207	202	211	210	206	212	218	216	214						229	234	202	210
Maternity/paternity leave	9	10	11	14	11	11	11	10	8	7	7	11	9	7	6	6	6	10	6						3	6	11	7
Unpaid Sabbaticals	2	2	2	2	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0							2	0	0
Fixed-Term Contracts	23	26	31	34	33	44	47	52	52	49	45	46	47	51	48	55	49	49	47						5	15	46	51
Starters (permanent)	4	2	1	1	1	0	2	0	0	0	2	4	9	3	2	2	0	2	2						44	45	17	20
Starters (fixed-term)	2	4	1	6	0	4	4	3	4	1	2	2	4	3	5	5	1	2	0						5	23	33	12
Vacancies	25	22	26	29	33	27	27	24	28	35	33	37	23	21	26	19	16	17	20						5	23	346	142

*Flexible working

*FTE

Includes flexible w orking arrangements separate or in conjunction w ith part time w orking Full-time equivalent, includes maternity/paternity but does not include unpaid sabbaticals

YTD Year to Date



						2017/	18											201	8/19						15/16	16/17	17/18	18/19
	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	FYE	FYE	FYE	YTD
Voluntary resignations ¹	5	1	7	11	4	3	5	3	4	8	5	8	5	3	5	5	5	4	2						29	43	56	29
Compulsory leavers ²	3	1	0	0	0	0	0	1	0	0	0	0	0	2	3	0	1	1	1						4	5	5	8
Total leavers (vol. & comp.)	9	2	7	11	4	3	5	4	4	8	5	8	5	5	7	5	6	5	3						33	48	70	36
Voluntary turnover%YTD	18	15	17	20	20	20	21	20	20	22	23	25	25	26	25	23	23	23	22						14	17	25	22
Overall turnover% YTD4	22	19	20	23	23	23	23	23	23	25	25	27	27	29	30	29	30	31	31						77	19	30	31
Agency days	207	332	276	350	342	454	470	582	470	716	641	649	697	600	419	499	549	531	692						3684	4304	5489	3987
% w ork days lost to sicknes	3	3	3	2	2	2	2	3	1	3	1	2	1	2	1	1	1	2	2						2	3	2	1
Average sick-days YTD	7	7	7	7	8	8	7	7	7	7	7	6	6	6	5	5	5	5	5						6	6	8	5
Sick-days	156	197	143	94	118	117	96	176	69	192	82	93	62	102	76	71	60	109	98						1346	1757	1533	578
Occ. Health Referrals	1	4	5	6	7	5	4	2	1	2	2	1	1	2	2	1	1	1	0						23	17	46	8

¹ **Voluntary Resignations** Includes resignations of permanent employees, or resignations of fixed term employees prior to the end of their contract

FTE Full-time equivalent

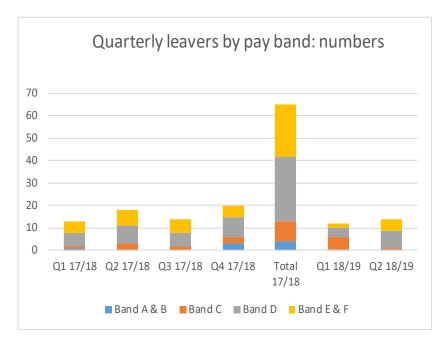
YTD Year to Date

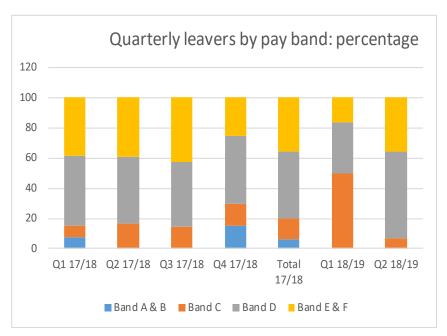
FYE Final Year End

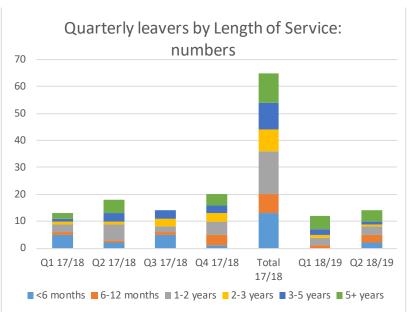
² Compulsory Leavers: Records leavers except for resignations. Includes expiries of fixed term contracts, redundancies, dismissals,

³ Voluntary Turnover YTE Shows the year to date turnover percentage (last twelve months) for resignations only

⁴ Overall Turnover: Shows the year to date turnover (last twelve months) for all leavers - voluntary and compulsory











Partner turnover

	2017	2017 2018									2019			17/18	18/19											
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	FYE	YTD
Voluntary Resignations	2	1	0	7	4	1	1	6	6	8	1	3	3	8	0	13	1	3	4						40	32
8-year rule*	0	0	4	0	0	0	0	0	0	1	2	5	0	0	0	0	0	3	0						12	3
Terminations	1	1	0	0	1	0	0	0	0	0	1	0	1	0	0	0	0	0	0						4	1
Total Leavers (Vol & Comp)	3	2	4	7	5	1	1	6	6	9	4	8	4	8	0	13	1	6	4						56	36
Partners	660	670	676	666	670	685	702	698	696	690	689	689	700	692	707	708	694	696	723						683	723
Voluntary Turnover%**	3%	3%	3%	4%	4%	4%	4%	5%	5%	6%	6%	6%	6%	7%	7%	8%	7%	8%	8%						6%	8%
Overall Turnover%	7%	7%	7%	5%	6%	6%	6%	6%	7%	8%	8%	8%	8%	9%	9%	9%	9%	9%	10%						8%	10%

^{*}Including failed renew al assessment

Turnover information does not capture those Partners who move from one role to another or those who leave one role and remain in another YTD = Year to date

Quality Assurance

	Page number
)verview	70

Quality Assurance Department: overview

- All audit reports are reviewed by the relevant departments (who agree any audit recommendations), SMT and the FTP
 Improvement Project Board (where appropriate). The Quality Assurance Department tracks progress on agreed activities in
 relation to audit recommendations.
- Audits completed in this period:
 - FTP Investigation Committee Panel (ICP) Decisions audit on the quality of ICP written decisions and the key inputs that feed into the decisions
 - Status FTP management agreed recommendations, SMT and FTP Improvement Project Board received the report.
 - o FTP Interim Order Applications audit on IO Applications to determine whether decision making followed guidance, was clearly communicated and whether the process was meeting the required timescales.
 - Status FTP management agreed recommendations, SMT and FTP Improvement Project Board to receive report.
 - FTP Investigation Cases audit on the new investigation planning process introduced in July 2018 to determine whether the process is being followed within the required timescales.
 Status – report being finalised.
 - BSI external audit ISO9001 biennial external audit.
 - Status report sent to SMT and Audit Committee.
- Ongoing audits:
 - Education business process (approval) audit on approval business process focused on areas of medium and high risk identified in previous audits.
 - FTP Investigations Evaluation audit on the quality of investigation plans being completed. Focused on assessing
 whether the plans identify all the potential FTP concerns, and that the investigative steps included in the plan are
 proportionate and specific.
- Audits to start in this quarter:

- Registration Comparable Qualifications List (CQL) audit of the implementation of the CQL process to include a review of relevant applications and determining whether the correct process has been followed for both CQL eligible and non-CQL eligible applications.
- Education Programme Records audit to check the accuracy and status of programme records through a review of specific operational activities.
- o FTP Risk Assessment audit of risk assessments to assess the quality, whether guidance is being followed, and whether the assessments are completed within the required timescales.
- FTP Non-FTP Cases audit of recent Protection of title, Health and character declaration, and Miscellaneous enquiry cases to assess whether decisions are being made in line with guidance and concerns about registrants / applicants are being managed appropriately.

HCPC Strategic Risks

2018-19 to 2022-23

Relationship with strategic priorities

Summary of strategic risks

SP1 Perf	SP2 Com	SP3 Adapt	SP4 Evid

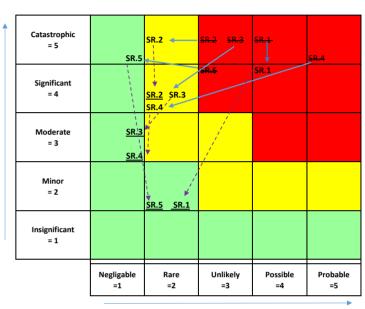
Strategic Risks - High Level	Risk Description	INHERENT RISK	RESIDUAL RISK	EXPECTED RISK*
Failure to deliver effective regulatory functions	This includes the inability to fulfill our statutory obligations set out in the Health and Social Work Professions Order and the failure to meet the PSA's Good Standards of Regulation.	20	16	4
2. Failure to anticipate and respond to changes in the external environment	This includes the ablity to respond and influence external drivers for change, like the impact of Brexit, devolution or a change in government as well as issues like workforce development, new and emerging professions or government policies affecting professional regulation. It also includes awareness and responsiveness to advances in technology and systems.	15	10	5
3. Failure to be a trusted regulator and meet stakeholder expectations	This risk includes the management of stakeholder engagement and key relationships as well as reputation management.	15	8	5
4. Failure to be an efficient regulator	This risk includes the operational failure of processes, or the inability to manage data efficiently as well the vulnerability of IT security. It also includes financial security, timely and accurate reporting and the recruitment, retention and training of Partners, Council and employees.	25	8	5
5. Failure of leadership, governance or culture	This risk includes the effectiveness of Council, strategy setting and oversight, risk management and business planning. It also covers organsitional culture including the existence of relevant policies for whistleblowing or anti-bribery for example and processes for performance development.	12	5	4

^{*} Expected risk score post planned actions

STRATEGIC PRIORITIES DEFINTIONS

Strategic priority 1 = Performance = (SP1) Improve our performance to achieve the Professional Standards Authority's Standards of Good Regulation Strategic priority 2 = Communication = (SP2) Ensure our communication and engagement activities are proactive, effective and informed by the views and expectations of our stakeholders Strategic priority 3 = Adaptability = (SP3) Ensure the organisation is fit for the future and is agile in anticipating and adapting to changes in the external environment Strategic priority 4 = Evidence = (SP4) Make better use of data, intelligence and research evidence to drive improvement and engagement

Heat map of strategic risks



LIKELIHOOD

Key		<u></u>
Risk = Impact x Li	kelihood	
Inherent Risk	SR.x	That level of risk existing before any mitigations were put in place.
Residual Risk	SR.x	That level of risk that the organisation has currently mitigated down to.
Expected Risk	SR.x	That level of risk that the organisation finds desirable but may not have yet attained.

IMPACT

TRATEGIC RISK	RISK OWNER	Review period
. Failure to deliver effective regulatory	SMT	Nov-18
unctions	31411	1404-19

RISK DETAIL	Inherent Impact	Inherent Likelihood	Inherent Risk	EXISTING CONTROLS / MITIGATIONS	Residual Impact	Residual Likelihood	Residual Risk	Planned actions 2018-19	Expected risk
This includes the inability to fulfill our statutory obligations set out in the Health and Social Work Professions Order and the failure to meet the				Adherence to operational processes and legal powers set out in statutory legislation				1) Completion of FtP improvement plan (March 2019)	
PSA's Good Standards of Regulation.				Regular review of resourcing requirements to ensure they are adequate				Monitoring performance through performance report and KPIs (Ongoing)	
Specifically, Delivery of statutory obligations				3) Regular training for Partners and employees				3) Review of education quality	
Breakdown of regulatory functions Failure to meet PSA standards				4) Scheduled Quality assurance and auditing processes 5) Delivery of workplans and monitoring through				assurance arrangements (June 2019)	
				reporting/metrics				4) Execution of the 5 year plan investment model	_
	5	4	20	Information sharing through Memoranda of understanding	4	4	16	5) Proactive engagement with the PSA on the FtP improvement	4
				7) Learning through review of PSA performance reviews of other regulators and commissioned reviews within the				activities (ongoing)	
				sector				6) Increased resource allocation to FtP to support open caseload reduction and increase capacity to manage new case fluctuations	
								(March 2019)	

Strategic Priority 1: Improve our performance to achieve the Professional Standards Authority's Standards of Good Regulation

COMMENTS ON PROGRESS

The increase in open FTP caseload has been arrested, in part as a result of the additional resource allocated to FTP; recruitment to the additional FTP posts should be completed in Nov/Dec but in the meantime there is a reliance on temporary staff; the September KPIs for FTP show positive improvements in the length of time measures but there will continue to be variability influenced by the age of cases being concluded at the various stages of the process; delivery of the FTP Improvement plan continues to be on track; the GT internal audit report has been rececived and is broadly positive; and positive meetings have been held with CODH on establishing a stakeholder working group for the review of education quality assurance arrangements.

STRATEGIC RISK	RISK OWNER	Last Reviewed
2. Failure to anticipate and respond to changes in the external environment	SMT	Nov-18

RISK DETAIL	Inherent Impact	Inherent Likelihood	Inherent Risk	EXISTING CONTROLS / MITIGATIONS	Residual Impact	Residual Likelihood	Residual Risk	Planned actions 2018-19	Expected risk
RISK DETAIL This includes the ability to respond and influence external drivers for change, like the impact of Brexit, devolution or a change in government as well as issues like workforce development, new and emerging professions or government policies affecting professional regulation. It also includes awareness and responsiveness to advances in technology and systems.	Impact 5	Likelihood	Inherent Risk	1) SMT relationship building and liaison with key stakeholders particularly Government Departments, professional bodies, other regulators and suppliers 2) Horizon scanning and intelligence gathering including from relationship building to be aware of external drivers and influencers 3) Continued investment through major project process for the development of business processes and systems 4) Publication of FtP, Education and Registration information and datasets through annual reports and FOI requests	Impact 5	Likelihood	10	1) Development of organisational stakeholder matrix and development of personal engagement plans for SMT 2) Data strategy and increased capacity for data intelligence and research projects through delivery of 5 year plan investment model 3) Collaboration with other regulators, for example MOUs or joint statements	

Strategic priority 3: Ensure the organisation is fit for the future and is agile in anticipating and adapting to changes in the external environment Strategic priority 4: Make better use of data, intelligence and research evidence to drive improvement and engagement.

COMMENTS

The work to develop a stakeholder matrix is ongoing and will be delivered in Q4; all communications project plans now use a stakeholder matrix and prioritisation to provide focus to activities; Head of Policy is developing a paper on data (collection and use) and research for consideration by SMT and Council in December; Chief Executive and ED for Regulation working closely with DHSC and other regulators on regulatory reform proposals

STRATEGIC RISK	RISK OWNER	Last Reviewed
3. Failure to be a trusted regulator and meet stakeholder expectations	SMT	Nov-18

RISK DETAIL	Inherent Impact	Inherent Likelihood	Inherent Risk	EXISTING CONTROLS / MITIGATIONS	Residual Impact	Residual Likelihood	Residual Risk	Planned actions 2018-19	Expected risk
This risk includes the management of stakeholder engagement and key relationships as well as reputation management. Specifically, Communication and stakeholder management Intelligence gathering Transparency/openness Stakeholder research PSA relationship and engagement External reporting Data breaches High quality Partners and suppliers Reputation	5	3	15	1) Communications Strategy, underpinned by stakeholder communications and engagement plan with clear deliverables and milestones 2) Adherence to agreed processes and organisational values of transparency, collaboration, responsiveness, high quality service and value for money 3) Regular stakeholder opinion polling to understand needs and expectations 4) Management and response to complaints handling, including Freedom of Infomration and Subect Access Requests 5) Engagement with appropriate organisations including for example other regulators, Government, professional bodies, trade unions and service user organisations 6) Analysis and action planning from feedback mechanisms including corporate complaints, FtP stakeholder surveys, stakeholder opinion polling and education provider survey	4	2	8	1) Development and implementation of an action plan from the stakeholder polling 2) Implementation of the new stakeholder engagement plan 3) Further development and application of an organisational and project stakeholder matrix 4) Development of personal engagement plans for senior managers 5) Initial planning of prevention agenda through delivery of 5 year plan investment model	5

Strategic priority 2: ensure our communications and engagement activities are proactive, effective and informed by the views and expectations of our stakeholders Strategic priority 3: Ensure the organisation is fit for the future and is agile in anticipating and adapting to changes in the external environment

COMMENTS

Stakeholder polling field work completed and due to report to SMT and Council in early 2019; the stakeholder engagement plan will be refreshed based on the perceptions work and presented to Council in the new year; personal engagement plans work will be taken forward in Q4; a date for the engagement forum in Edinburgh has been set and a list of possible attendees being developed, invitations anticipated to be issued in mid November.

STRATEGIC RISK	RISK OWNER	Last Reviewed
4. Failure to be an efficient regulator	SMT	Nov-18

RISK DETAIL	Inherent Impact	Inherent Likelihood	Inherent Risk	EXISTING CONTROLS / MITIGATIONS	Residual Impact	Residual Likelihood	Residual Risk	Planned actions 2018-19	Expected risk
This risk includes the operational failure of				1) Adherence to operational processes and policies which				1) Increased capacity in Project	
processes, or the inability to manage data				are subject to internal and external audit eg ISO				delivery team effecting change	
efficiently as well as the vulnerability of IT									
security. It also includes financial security, timely				2) Adherence to budgetting and financial management and				2) Development and delivery of	
and accurate reporting and the recruitment,				reporting processes which are subject to internal and				action plan arising from all	
retention and training of Partners, Council and				external audit eg NAO				employee survey	
employees.									
				3) Adherence to HR processes in relation to recruitment,				3) Relevant and planned	
				annual performance development review and and learning				upgrades to systems eg secure	
Specifically,				and development for Partners and employees				destop	
Operational failure									
Data management				4) Effective IT system design maintaining confidentiality,				4) Delivery of registration	
Cyber security				integrity and availability of data				transformation project	
Use of technology	5	5	25		4	2	8	deliverable	5
Financial sustainability				5) Maintenance of ISO27001 Information Security standard					
Timely and accurate reporting				which is subject to external audit				5) Secure fees increase and	
Recruitment/retention/training including								delivery of 5 year investment	
partners, employees, Council				Regular independent security assessments of key IT				model	
				infrastructure					
								6) Development of Quality	
				7) Continuous quality improvement mechanisms through				Assurance function	
				ISO and quality assurance processes					
				8) Development and implementation of a corporate					
				strategy					
DELEVANT CTRATECIC PRIORITIES									

Strategic priority 3: Ensure the organisation is fit for the future and is agile in anticipating and adapting to changes in the external environment

COMMENTS

The project delivery team is now at full complement increasing from two project managers to six project managers; the Registration CPD online system went live in July; the second phase of the Registration project was given authority to proceed by Council in September; HCPC workstations are currently being upgraded to the latest version of Windows following security assessments; the Quality Assurance Department is now up and running with framework agreements in place with the regulatory departments; and the fees consultation is open with in excess of 1000 responses to date.

STRATEGIC RISK	RISK OWNER	Last Reviewed
5. Failure of leadership, governance or culture	Chair and SMT	Nov-18

RISK DETAIL	Inherent Impact	Inherent Likelihood	Inherent Risk	EXISTING CONTROLS / MITIGATIONS	Residual Impact	Residual Likelihood	Residual Risk	Planned actions 2018-19	Expected risk
This risk includes the effectiveness of Council,				1) Robust and effective Council recruitment processes with	шрого			1) Run appointments process for	
strategy setting and oversight, risk management				appointment against competencies and annual appraisal				Chair of Council	
and business planning. It also covers				process					
organisational culture including the existence of								2) Implementation of	
relevant policies for whistleblowing or anti-				2) Well researched and drafted Council & Committee				organisation-wide ED&I policy	
bribery for example and processes for				papers with clear, well reasoned decision making					
performance development.								3) Development and delivery of	
				3) Training and internal communications to ensure				action plan arising from all	
				Partners, Council and employees aware of and sensitive to				employee survey	
Effectiveness of Council				issues including whistleblowing, anti-bribery, equality and					
Organisational structure				diversity				4) Develop new corporate	
Appraisal process/performance management								strategy and engagement with	
Adequate planning				4) SMT oversight of HR and internal communications work				employees on vision and values	
Foresight				to support the development of our culture and				with dissemination to key	
Audit				environment as well as delivering continuous improvement				stakeholders of final plan	
Ethics				through all employee survey					
Anti-bribery Anti-bribery									
Whistleblowing	4	3	12	5) Robust audit plans, regular review of risks	5	2	10		4
Strategic setting and oversight						_			
Risk management				6) Strategic intent incorporating drivers, vision and values					
Vision mission values									
				7) Adherence to relevant internal policies including for					
				example anti-bribery, whistleblowing and continued					
				engagement with cross-organisational groups including the					
				Employee Consultation Group and Corporate Social					
				Responsibility					
				0) 01477					
				8) SMT: meetings held regularly, with well drafted papers					
				and clear decision making communicated; visibility and					
				transparency achieved with meeting papers online and					
				regular round-up on intranet					

Strategic priority 3: Ensure the organisation is fit for the future and is agile in anticipating and adapting to changes in the external environment Strategic priority 4: Make better use of data, intelligence and research evidence to drive improvement and engagement.

COMMENTS

The recruitment process to appoint a new Chair has commenced, interviews scheduled to take place in December 2019; SMT considered and approved the ED&I policy and plan in October 2018; an action plan arising from the all employee survey is being developed and will be considered at an upcoming SMT; the process to develop a refreshed corporate strategy commenced in October; and employee workshops are being planned following the Council strategy day to further explore values and culture drawing on the employee survey.

RISK MATRIX DEFINITIONS

IMPACT TYPES

Public Protection	Financial	Reputation Catastrophic 5				
Catastrophic 5 A systematic failure for which HCPC are ultimately responsible for, exposes the public to serious harm in cases where mitigation was expected.	Catastrophic 5 Unfunded pressures greater than £1 million	Incompetence/ maladministration or other event that will destroy public trust or a key relationship				
Significant 4	Significant 4	Significant 4				
A systematic failure for which HCPC are ultimately responsible for, exposes more than 10 people to harm in cases where mitigation was expected.	Unfunded pressures £250k - £1 million	Incompetence/ maladministration that will undermine public trust or a key relationship for a sustained period or at a critical moment.				
Moderate 3	Moderate 3	Moderate 3				
A systemic failure for which HCPC are ultimately responsible for exposes more than 2 people to harm in cases when mitigation was expected.	Unfunded pressures £50,000 - £250,000	Incompetence/ maladministration that will undermine public trust or a key relationship for a short period. Example Policy U-turn				
Minor 2	Minor 2	Minor 2				
A systemic failure which results in inadequate protection for individuals/individual communities, including failure to resolve celebrity cases.	Unfunded pressures between £20,000-£50,000	Event that will lead to widespread public criticism.				
Insignificant 1	Insignificant 1	Insignificant 1				
A systemic failure for which fails to address an operational requirement	Unfunded pressures over £10,000	Event that will lead to public criticism by external stakeholders as anticipated.				

LIKELIHOOD AREAS

Strategic	Programme / Project	Operational		
Probable 5	Probable 5	Probable 5		
"Clear and present danger", represented by this risk - will probably impact on this initiative - sooner rather than later.	Likely to occur in the life-cycle of the project, probably early on and perhaps more than once.	The threat is likely to happen almost every day.		
Possible 4	Possible 4	Possible 4		
Likely to happen at some point during the next one or two years.	Likely to happen in the life-cycle of the programme or project.	May well happen on a weekly basis.		
Unlikely 3	Unlikely 3	Unlikely 3		
May well occur during the lifetime of the strategy.	May occur during the life of the programme or project.	May well happen on a monthly basis.		
Rare 2	Rare 2	Rare 2		
Only small chance of occurring in the lifetime of the strategy.	Not likely to occur during the lifecycle of the programme of project.	Does not happen often - once every six months.		
Negligible1	Negligible1	Negligible1		
Extremely infrequent – unlikely to happen in a strategic environment or occur during a project or programmes lifecycle. May occur once a year or so in an operational environment.	Extremely infrequent – unlikely to happen in a strategic environment or occur during a project or programmes lifecycle. May occur once a year or so in an operational environment.	Extremely infrequent – unlikely to happen in a strategic environment or occur during a project or programmes lifecycle. May occur once a year or so in an operational environment.		

LIKELIHOOD

Page 78 of 78