

Business Process Improvement – Roy Dunn

Human Resources

No changes.

Quality Management System (QMS) review meetings and internal audits

The internal audit schedule for 2009-10 continues.

The Policy, Finance and Communications departments have been audited.

An audit of document cartons at the hardcopy archive will have been completed by the time of this report. 422 of 3000 cartons have been examined. Very few credit or debit card details have been located in the archived registrations application material

QMS process updates

Communications processes in greater detail has been completed.

Some Finance department processes have been refreshed. International and Grandparenting application processes have been updated.

Information & data security work across HPC is ongoing with the development of some of the draft required policies.

The Poynter review, our response to “Review of information security at HM Revenue and Customs. Final report”. Kieran Poynter (June 2008) has been completed, and is presented as a separate item during this meeting.

BSI Audit

BSI audited HPC to the ISO9001:2008 standard, on 21st October. Registrations - Grandparenting, Communications, Customer Service, Finance and Quality Management were examined. No non-conformances were located, A copy of the report is attached. We verbally received praise for our efforts in promoting the use of processes and illustrating their value at the All Employee training day earlier in the year.

A copy of the report is included.

Business continuity

Small changes and additions to processes are being made to keep the Disaster Recovery plan current.

Information & data management

Integration of all intranet based information sources, Springfield, QMS and “Intranet” is now in the testing phase. Post roll out further work will be required to implement automated document and change control within the QMS part of the system

We are obtaining insurance cover to the value of £3 million.

Risk Register

The initial work on the next version of the Risk Register has commenced.

Item of interest, our former NAO auditor is using a copy of our Risk Register as an example of good practice in Albania.

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2009-11-27	a	QUA	RPT	Audit Comm report Business Process Improvement December 09	Final DD: None	Public RD: None

Assessment Report

Health Professions Council



Report Author

Lisa Clarke

Visit Start Date

21/10/2009



Introduction

This report has been compiled by Lisa Clarke and relates to the assessment activity detailed below:

Visit ref/Type/Date/Duration	Certificate/Standard	Site address
7265176 Continuing Assessment (Surveillance) 21/10/2009 1 day(s) No. Employees: 125	FS 83074 ISO 9001:2008	Health Professions Council Park House 184 Kennington Park Road London SE11 4BU United Kingdom

The objective of the assessment was to continue progress of the assessment programme leading up to the strategic review in April 2010.

Management Summary

The areas assessed during the course of the visit were found to be effective.

There were no outstanding nonconformities to review from previous assessments.

No new nonconformities were identified during the assessment. Enhanced detail relating to the overall assessment findings is contained within subsequent sections of the report.

Areas Assessed & Findings

Registrations – Grandparenting

The grand parenting process is in use for the psychologists who now need to register with HPC as a statutory requirement. The process has not been used for 3 years and has been thoroughly reviewed and updated in preparation for the new profession intake. Samples were used to demonstrate compliance with the plans and these appeared to demonstrate that the system works well so far. Fewer applications have been received than anticipated and it is proving difficult to forecast when the remainder will arrive over the coming 3 year period.

The process is carefully controlled using software records to track actions and progress. Target timescales have been put in place for acknowledgement of applications and for progress of the application.

The processes are monitored via a series of spot checks which are recorded. Historical statistics are being built up and will be used to identify any learning gaps or improvement potential within the team.

Communications

The communications team are responsible for communications strategy within the Health Professions Council. Their work is covered by the quality management system and is split between process driven tasks and project based work. This is organised via a work plan which links to a five year plan.

The main processes within Communications are controlled via process documentation, which has been written by the Director of Communications with input from the team. Quality and progress of work is reviewed regularly via update meetings and team meetings. There is also a monthly report to the Communications committee.

Customer Services

Customer service is a high priority for the Council, and it is a stated objective to ensure that all complaints are responded to promptly in a full and frank manner. Reporting on customer satisfaction has been developed over the last six months and better statistical information is now available for analysis.

Finances

Financial processes are included in the quality system and these are currently undergoing a thorough review by the new Financial Director, who has plans to transfer them into a Visio format. Risk points in the system have been identified, and these have been planned to include second person intervention with authority levels as appropriate.

The department works on a rolling five year plan linking to the annual budget and work plans. The teams are split two ways - accounting and transactions. An away day is planned and will include Sage accounting, team building and some emphasis on the redevelopment of the quality processes in Visio.

Suppliers are managed via Sage. They are reassessed every 4 years with a tender process in place for high level spend.

Assessment Participants

On behalf of the organisation:

Name	Position
Roy Dunne	Head of Business Process Improvement
Cherise Evans	PA to Operations Directorate
Tom Berrie	Information Services Manager
Greg Ross-Sampson	Operations Director
David Waddle	Customer Services Manager
Richard Houghton	Head of Registrations
Jacqueline Ladds	Director of Communications
Tony Glazier	Web Manager
Charlotte Milner	Financial Controller
Gary Butler	Director of Finance

The assessment was conducted on behalf of BSI by:

Name	Position
Lisa Clarke	Team leader

Continuing Assessment

The programme of continuing assessment is detailed below.

Site Address	Certificate Reference/Visit Cycle	
Health Professions Council Park House 184 Kennington Park Road London SE11 4BU United Kingdom	FS 83074	
	Visit interval:	6 months
	Visit duration:	7 hours
	Next re-certification:	01/04/2007

Re-certification by Strategic Review will be conducted on completion of the cycle, or sooner as required. The review will focus on the strengths and weaknesses of your Management System.

Certification Assessment Plan

		Visit 1	Visit 2	Visit 3	Visit 4	Visit 5	Visit 6
Business area/Location	Date (mm/yy):	10/07	04/08	10/08	04/09	10/09	04/10
	Duration (days):	1	1	1	1	1	1
Registrations UK		<input type="checkbox"/>					
Registrations International			<input type="checkbox"/>				
Registrations Grand parenting					<input type="checkbox"/>		
Communications						<input type="checkbox"/>	
Approvals & Monitoring				<input type="checkbox"/>			
Fitness to Practice					<input type="checkbox"/>		
HR/Partner Validation		<input type="checkbox"/>					
Purchasing & supplier evaluation				<input type="checkbox"/>			
Secretariat				<input type="checkbox"/>			
Customer Services						<input type="checkbox"/>	
Finance						<input type="checkbox"/>	
Management System Organisation and Review			<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
Senior Management Interview							<input type="checkbox"/>
Preparation for Strategic Review						<input type="checkbox"/>	
Strategic Review							<input type="checkbox"/>
Staff development and Training		<input type="checkbox"/>		<input type="checkbox"/>			
Policy		<input type="checkbox"/>					

Next Visit Plan

Visit objectives:

The next visit will conclude the current 3 year assessment cycle. This will include a review of the recertification pack and will also assess the various senior management responsibilities via interview with one of the top management team.

Visit scope:

As detailed below:

Date	Assessor	Time	Area/Process	Clause
	Lisa Clarke	09.30	Opening meeting - BSI formalities, updates.	
		10.00	Review of recertification pack	
		11.00	Senior management interview	
		12.00	Any outstanding assessment activity	
		12.30	Lunch	
		13.30	Quality system*	
		14.30	Report writing and certification decision	
		16.00	Closing meeting	

Please note that BSI reserves the right to apply a charge equivalent to the full daily rate for cancellation of the visit by the organisation within 30 days of an agreed visit date. It is a condition of Registration that a deputy management representative be nominated. It is expected that the deputy would stand in should the management representative find themselves unavailable to attend an agreed visit within 30 days of its conduct.

Notes

The assessment was based on sampling and therefore nonconformities may exist which have not been identified.

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