

Council Meeting, 11 February 2016

Summary of the HCPC's memorandums of understanding with other organisations

Executive summary and recommendations

Introduction

The memorandums of understanding (MoUs) the HCPC has with other organisations formally agree how we will work with each other to support common goals.

This paper briefly summarises our current MoU's and those we are developing.

Decision

The Council is requested to discuss this paper. No decision is required.

Background information

Copies of our memorandums of understanding can be found on the website at <http://www.hcpc-uk.co.uk/aboutus/stakeholders/mou/>

Resource implications

None.

Financial implications

None.

Date of paper

19 January 2016.

1. Introduction

- 1.1 The memorandums of understanding (MoUs) the HCPC has with other organisations formally agree how we will work with each other to support common goals.
- 1.2 This paper briefly summarises our current MoU's and those we are in the process of developing.
- 1.3 We are proactive in our approach to MoUs and often invite organisations to develop one with us, however we usually only develop MoUs with organisations which:
 - inspect and/or investigate UK health services; or
 - are a UK devolved regulator of the professions we regulate in England; or
 - are a non UK government whose laws require professionals to be on the HCPC register.
- 1.4 Our MoU's are both national and international and cover a range of organisations. Some MoU's are departmental focused whereas others apply to the organisation as a whole. For some organisations, a formal MoU may not be appropriate and instead we may develop less formal information sharing agreements or we may agree specific contacts within each organisation to facilitate working with each other.
- 1.6 We currently have seven MoUs and have four in development. Our current MoUs are available on our website at <http://www.hcpc-uk.org/aboutus/stakeholders/mou/>. The MoUs are living documents and are regularly reviewed. Most of the MoUs specify a HCPC responsible officer, who will lead on the management of the MoU together with its review.

2. MoU's with organisations which inspect and/or investigate UK health services

2.1 Care Quality Commission (reviewed in November 2015)

The Care Quality Commission (CQC) is the regulator of health and adult social care in England. The MoU sets out how we will work together to safeguard the well-being of the public receiving health and care services in England. This includes the cross referral of concerns; routine sharing of fitness to practise information; and sharing feedback about specific providers on request from the CQC to assist with their regulatory activity. The MoU also contains specific contacts to assist with requesting information about CQC investigations which is relevant to our fitness to practise investigations.

Under the MoU, we share (on a monthly basis) the outcome of final, review and interim order hearings, together with case to answer decisions. We also share (on a weekly basis) information we hold about final hearing allegations

which either occurred at, or involved a registrant employed by, specific providers due to be inspected by the CQC.

We also refer cases to the CQC where we identify potential system concerns with a provider. Similarly, the CQC refers to us any concerns about our registrants they may identify during the course of their inspections.

We are in the process of agreeing a similar MoU with the independent health and social care regulator in Northern Ireland, the Regulation and Quality Improvement Authority (RQIA). In addition, we are developing a similar MoU with the independent inspectorate and regulator of all healthcare in Wales, the Healthcare Inspectorate Wales (HIW).

2.2 NHS Trust Development Authority (signed in June 2015)

The NHS Trust Development Authority (NHS TDA) oversees clinical quality, performance and finance in NHS Trusts. It also approves Foundation Trust applications to proceed to Monitor. The MoU sets out how we will work together to support a co-ordinated regulatory system in England. This includes the cross referral of concerns, sharing information on special request and advising NHS Trusts as appropriate.

When we refer concerns to the CQC, we also refer the concerns to the NHS TDA if the provider is a NHS Trust without Foundation Trust status.

From 1 April 2016, the NHS TDA will merge with Monitor to form a new organisation, NHS Improvement. Our MoU with the NHS TDA will therefore cease at the end of this financial year. We may then work with NHS Improvement to develop a new MoU in 2016-17.

2.3 NHS Protect (signed in October 2015)

NHS Protect is the statutory body responsible for identifying and tackling crime across the health service in England and Wales. Its purpose is to safeguard NHS resources so that the NHS is a safe and secure environment in which to deliver and receive care. The MoU sets out how we will work together to tackle fraud, corruption and theft in the NHS in terms of sharing information and intelligence. It also sets out how we will investigate those health and care professionals who commit such crimes. This includes the cross referral of allegations relating to fraud, corruption and theft against registrants and sharing information about the investigation of those allegations.

Due to the sensitivity of the information which may be exchanged (i.e potential criminal offences) the MoU is supported by a detailed Information Sharing Agreement which ensures robust data protection practices are followed by both organisations when sharing information.

NHS Protect was formerly known as NHS Counter Fraud Services. We agreed a Protocol with them in 2005, which was used until the new MoU was signed.

We are currently developing a similar MoU with NHS National Services Scotland – Counter Fraud Services.

2.4 Office for Standards in Education, Children’s Services and Skills

The Office for Standards in Education, Children’s Services and Skills (Ofsted) inspect and regulate services that care for children and young people and services providing education and skills for learners of all ages. We are currently in the early stages of developing a MoU with Ofsted and it is anticipated it will be signed by June 2016. The MoU will facilitate sharing information about Ofsted investigations which is relevant to our fitness to practise investigations, and vice versa. It will also facilitate sharing information about trends.

3. Organisations which are a UK devolved regulator of the professions we regulate in England

3.1 Northern Ireland Social Care Council, Scottish Social Care Council and the Care Council for Wales (reviewed in November 2013)

As the statutory organisations responsible for the regulation of social workers and the approval of social work education across the UK, the purpose of this MoU is to set out the framework for the working relationship between all four regulators. It sets out specifics in relation to education; registration; cross referral of concerns; which organisation will take responsibility for investigating concerns about dual registered social workers; information sharing; and media and publications.

Under the MoU each organisation shares (on a weekly basis) the outcome of final, review and interim order hearings, together with case to answer (or equivalent) decisions.

4. MoU’s with organisations which are a non UK government whose laws require professionals to be on the HCPC register

4.1 Department of Health Isle of Man (signed in April 2013)

By virtue of the Health Professions Order 2002, a person may only practise in the Isle of Man using a title protected by us, if they are registered with us. The MoU builds on the relationship we have established with the Department of Health in the Isle of Man and sets out that we will share information about fitness to practise concerns and investigations. It also specifies that any fitness to practise proceedings will take place in England however that the Department of Health may provide reasonable assistance.

4.2 Gibraltar Medical Registration Board (signed in January 2015)

By virtue of section 24B(1) of the Gibraltar Act, a person may only practise a relevant profession if they are of good character and if they are registered with us. The MoU sets out the importance of communication and coordination and that we will share information about fitness to practise concerns and investigations. It also specifies that any fitness to practise proceedings will take place in England however that the Registration Board may provide reasonable assistance.

4.3 It is anticipated we will sign a similar MoU with Jersey in early 2016. We then intend to approach the government of Guernsey to reach a similar agreement.

5. Other

5.1 Disclosure and Barring Service (signed in August 2014)

The Disclosure and Barring Service (DBS) is a non-departmental government body sponsored by the Home Office with statutory responsibilities for processing criminal record checks; deciding whether it is appropriate for a person to be placed on or removed from a barred list; and placing or removing people from the DBS children's barred list and adults' barred list for England, Wales and Northern Ireland.

Under the Safeguarding Vulnerable Groups Act 2006, we are a Keeper of a Register and as such have a legal duty to make referrals to the DBS as appropriate. The MoU sets out how both organisations will facilitate this process. Given the highly operation nature of this MoU it is not available on the website.