Council

27 May 2021

hcpc health & care professions council

Chief Executive's report on organisational performance May 2021

Executive Summary

This paper provides the Council with updates on the organisation's performance since the March 2021 Council meeting. It includes specific projects and activities for the Council to note, stakeholder engagement activity, an update on Covid temporary registration and assessment of performance.

In this iteration the deliverables for the Corporate Plan 2021-22 are presented as appendix C. The first progress report against these deliverables will be included in the July report.

The Finance report is not included as an appendix in this iteration as the provisional financial outturn for 2020-21 is a separate paper on the agenda.

Background data to the KPI performance is available to Council and on our website for reference.

Previous consideration	This is a standing item, considered at each Council meeting.
Purpose of report	The Council is asked to discuss the paper and provide any feedback on future format and information to be included.
Next steps	The next report will be received in July 2021.
Strategic priority	This report is relevant to all strategic priorities.
Financial and resource implications	None as a result of this paper.
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Chief Executive's Performance Report

May 2021

Contents

1. Chief Executive's Organisational Assessment

I would like to begin by welcoming Naomi Nicholson to her first Council meeting. Naomi joins HCPC as its new Executive Director of Professional Practice and Insight. Naomi joins us from her leadership role at Ofqual where she was Director of Regulation for National Assessments. She brings with her a wealth of experience leading teams focussed on policy, communications, analysis and strategic relationships. This appointment marks a significant milestone. It now means the new permanent Senior Management team, which has been designed to progress the transformation of HCPC and deliver the new Corporate Strategy, is now operational.

On 1 April we published the Corporate Plan for 2021-22. This marks an important step in realising the goals set out in the five year Corporate Strategy. This year's Corporate Plan focusses on:

- Fast tracking improvements to core regulatory functions, in particular in Fitness to Practise;

- Reaching out to registrants and key stakeholders through improved collaboration; and

- Using our data and learnings to enable HCPC to achieve longer-term strategic objectives.

The Corporate Plan deliverables are included as an appendix to this report. As part of the budget discussions, the Executive team is looking at the prioritisation and phasing of some workstreams.

Improving our core regulatory functions

Good progress is being made against all the key elements of the Corporate Plan. The FTP Improvement work continues at pace with positive engagement and feedback from colleagues who have been participating in the Perform Plus improvement work in partnership with PWC. Appointments have now been made to the case manager positions following the successful recruitment campaign. New appointees will be supported through an extensive induction and training programme. Implementation of a new FTP Case Management System (CMS) is progressing. This is a key enabler to achieving the improvements we are seeking in FTP.

The problems arising from the interface between our new registration system and finance processes which resulted in errors with some direct debit collections have been identified and fixes are being worked on. There have been no further direct debit issues.

Collaboration and engagement

I had the pleasure of meeting with the Association of Ambulance Chief Executives (AACE). This meeting identified further opportunities for us to work collaboratively with senior leaders in the ambulance trusts to deliver our professionalism and prevention objectives. Similarly, there have been productive discussions with Health Education England (HEE) on a partnership approach to providing data to inform workforce data.

From a four country perspective, we have recently agreed a Memorandum of Understanding with Health Improvement Scotland (HIS). We are also working with RQIA in Northern Ireland to refresh the MoU we have with them and have joined the Northern Ireland Regulators Forum. This provides an excellent basis through which to share intelligence and gain a better understanding of issues from a Northern Irish perspective. An MoU with Health Education and Improvement Wales (HEIW) is also being actively pursued.

Data and learning

I had the benefit of attending the most recent EDI Forum in April. This provided an early opportunity to share our initial analysis of our diversity data survey, and to seek input to how we can better support international registrants who are entering UK practice. Engagement from stakeholders has been excellent which has been supported by positive feedback on the EDI Forum and strategy.

Covid-19 impacts

Despite the prolonged lockdown colleagues have continued to display incredible resilience and adaptability. This has helped the organisation move to a new 'business as usual' which has, on the whole, mitigated the impacts that Covid-19 has had on business operations. Whilst maintaining customer response service standards remains a challenge, it is worth noting that the increase in processing times for international applicants has been addressed, with applications now being processed within the KPI measure.

Due to Covid-19 variant surge testing in Lambeth and neighbouring boroughs, plans to increase access to the offices at the end of April were temporarily paused. With the latest easing of national restrictions more employers will be able to come into the office where there is a business need to do so or home working is less than ideal. A new ways of working policy is being developed which reflects how we want the organisation to work in the future, post Covid. This will involve working within a reduced office footprint base as well as clarifying what hybrid office/home working entails, i.e. attending the office will be primarily for team meetings, collaboration and activity based working. We anticipate starting the move to more formal hybrid working from July and having this fully embedded by September. This is of course subject to changes to the national restrictions.

Organisational culture

Improving our customer service ethos and reflecting on the impact that our actions, and inactions, can have on our stakeholders has been a key focus of the Executive as part of the broader organisational culture change objective. In addition to the first Customer Engagement and Behavioural Workshop, we have been showcasing examples of unsolicited positive feedback from stakeholders received about individual employees. This is now a regular feature of all employee meetings and supports the role modelling of the values and behaviours we want to embed within HCPC.

2. Chief Executive's public agenda overview – 27 May 2021

Indicative year end financial results

At its meeting in April 2021 the Council approved a three-month interim budget with the agreement that a full year budget would be considered at Council's July meeting. This paper aims to inform future budget planning through understanding the HCPC's financial performance in 2020-21. The results are provisional at this time as there are a number of year end checks and balances in progress to validate the figures. Council will be updated on any changes to the outturn numbers when the full budget is presented in July.

Key Performance Indicators

The Council and Executive took part in a workshop discussion in April to explore what key performance indicators (KPIs) the Council needed in future. This paper presents a proposal for a new set of KPIs for adoption, to be first reported at the July 2021 Council meeting.

Council Appointments 2021

Council members Sonya Lam and Stephen Wordsworth will be leaving Council at the end of 2021, having made significant contributions to the work of the HCPC. This paper sets out the appointments process to be followed to appoint their successors, as well as associated processes related to Council and Committee appointments in 2021.

PSA report – Private paper

This paper presents the initial findings of the PSA's review of our performance in 2020-21. No substantive report has been received to date and so discussion of preliminary results needs to be private session.

Regulatory reform – Private paper

This paper presents a high-level summary of the HCPC's intended response to the Department of Health and Social Care's Consultation, 'Regulating healthcare professionals, protecting the public.' The Council are invited to steer and shape the response as it requires.

3. Stakeholder engagement summary

Key stakeholders and public affairs

Engagement in this period has included liaison with officials within the Scottish Government and Department of Health & Social Care as the registration fees rises have proceeded through the respective legislative processes. The Westminster Statutory Instrument (S.I.) has now successfully passed through, and will come into force as law. We are monitoring progress as the Scottish S.I. reaches its final stage, and will come into force as law on 22 May, should no objections be raised before then.

Political engagement has continued apace with myself and the Chair meeting Government officials and parliamentarians. The focus has been on responding to the proposed government reforms of healthcare regulation, highlighting that we must keep safety as the key regulatory priority, whilst addressing bureaucracy, streamlining processes, breaking down siloes and fostering much greater collaboration. We used these meetings specifically to make the case for what we would like to see from regulatory reform in healthcare. We engaged with MPs and Peers, both from Government and opposition parties. After meeting us, Baroness Finlay used our briefing material in her contribution to the Queen's Speech debate in the House of Lords. We will be following up with her as the Health and Care Bill begins its passage through Parliament. We also had a very fruitful meeting with the Conservative MP Sir Paul Beresford to discuss regulatory reform and agreed several important actions with him. Further political meetings are in the pipeline. We submitted evidence to the Health & Social Care Select Committee inquiry into the NHS White Paper.

I also gave a speech at the Westminster Health Forum, which I used as an opportunity to explain to health leaders HCPC's position on regulatory reform.

Other meetings attended included: an NHS Confederation roundtable event on Integrated Care Systems; a meeting with the Chief Executive of the College of Paramedics; and a meeting with the DHSC regulation team regarding the data section of the Governance and Operating Framework as part of DHSC's Regulating healthcare professionals, protecting the public consultation.

4. Regulatory Development

4.1 Regulatory reform

Since my last report to Council, the government has launched its consultation: *Regulating healthcare professionals, protecting the* public. This consultation seeks views on proposals to modernise the legislation of the healthcare professional regulators. The proposed reforms cover four key areas. These are:

- Governance and Operating Framework
- Education and Training
- Registration
- Fitness to Practise

The consultation also seeks views on the proposed approach to introducing statutory regulation for physician associates and anaesthesia associates.

The proposals contained in the consultation document, on the whole, reflect the discussions HCPC, the PSA and other regulators have had with the Department of Health and Social Care over the past 12 months. Council have an opportunity to consider our proposed response at this meeting.

As reported in my February update, proposals for a Health and Care Bill, including a section relating to professional regulation, were published in February. This focuses on the extension of Section 60 powers under the Health Act 1999 to include:

- The power to remove a profession from regulation
- The power to abolish an individual health and care professional regulator

- The power to remove restrictions regarding the power to delegate functions through legislation
- Clarifying the scope of section 60 to include senior NHS managers and leaders and other groups of workers.

We anticipate these proposals to be progressed as part of the Health and Care Bill included in the recent Queen's Speech.

In support of the policy intent as outlined in the recent White Paper *Integration and innovation: working together to improve health and social care for* all, the DHSC is commissioning an independent review to look at how the regulatory bodies might be reconfigured to achieve maximum public benefit. The independent review will inform advice to Ministers.

As I outlined in my speech to the Westminster Health Forum, there is a real opportunity to recalibrate professional regulation which embeds the learning and experience during the pandemic and provides more efficient and effective public protection.

4.2 Education quality assurance model implementation

Our pilot to implement a new education quality assurance model remains on track to position the Education and Training Committee (ETC) to make a decision on fully implementing the new QA model in September. Cycle 2 of the pilot commenced in March and is scheduled to run to the end of May.

While the pilot sample is limited at present, early feedback indicates we are moving towards a truer risk-based approach which enables visitors to make good decisions. Risk profiling institutions is also providing better context for visitors to frame their enquiries.

4.3 Professionalism and prevention

Our focus on the paramedic profession continues and we have met with the Chair of the Association of Ambulance Chief Executives (AACE) and presented at the AACE Ambulance Leadership forum in May 2021. We also continue to partner with an Ambulance Trust and are a member of their professional standards group, and will shortly begin delivering our Professionalism in practice programme within that Trust. We also met with the Foundation for Higher Education in Paramedic Science to explore resources and support for paramedic students, and continue to work with identified providers to develop materials for students.

We have piloted the Becoming a health and care professional programme with physiotherapy students in Northern Ireland and have begun delivering the Professionalism in practice programme to registrants within their workplace. This has included delivering a workshop for AHP Aspiring Leaders in the West Suffolk Foundation Trust and AHPs at Kent Community Health NHS Foundation Trust. Both events were a success and feedback was very positive. We have delivered the final webinar in the #MyHCPCstandards series.

We have held focus groups with some of our international registrants to better understand the challenges they face when they move to UK practice and to inform the development of our Professionalism in practice: joining the UK workforce workshops.

4.4 Advanced Practice

Following the University of Bradford's research report and the stakeholder workshops we held in February and March, we identified a number of areas in which we needed a stronger evidence base. As a result, we have commissioned Community Research to undertake some detailed engagement with employers and we are consulting members of the medical royal colleges and the BMA to establish views of the medical profession. We plan to bring a substantive paper to Council at its meeting in July with proposals for our future regulatory approach in this area.

4.5 Professionalism research

The filming for our professionalism resources is progressing steadily with reductions in COVID restrictions. Once completed we will commence work to establish these resources on our website, to support registrants understanding of professionalism in practice.

4.6 Registrant wellbeing

The Registrant health and wellbeing strategy and action plan are now published on our website. A significant volume of the action plan centres around our work on tone of voice, which has been paused whilst we prioritise our corporate plan deliverables and finalise our budget. Once that resource is established, we will develop and roll-out guidance and training for staff to ensure a more supportive and compassionate approach to our communications.

4.7 Insight and intelligence

Our Insight and Intelligence Manager has been analysing the data we collected through our most recent Registrant EDI survey, and will present these findings to Council at its meeting in July. We have successfully recruited an Insight and Intelligence Analyst, and are currently developing the framework and action plan to support delivery of this function. Initially the actions that flow from the Insight and Intelligence Framework will include analysis of our data we hold on EDI, FTP and CPD.

4.8 Returning to practice

We recently held workshops with key stakeholders on our Returning to practice guidance, which were well attended. We will bring consultation papers to Council in July with a view to holding a public consultation over the Autumn.

4.9 HCPC Consultations

In April our consultations on increasing SET1 for ODPs and revisions to the Guidance on health and character closed, with good response rates. We are currently analysing the results and engaging closely with Scottish stakeholders in relation to any potential change to SET1 for ODPs. We will bring the consultation analysis to Council at its meeting in July.

4.10 Inquiries, external consultations and reports

In May, we responded to the Royal Pharmaceutical Society's consultation on their Competency Framework for Prescribers, which we adopt as the requirements for our

registrants. We have been closely engaged with the development of the new standards and have been supportive of the approach.

5. Covid Response

5.1 Temporary Registers

The tables below set out the number of temporary registrants on each of the registers as of 17 May 2021. In summary there are 21,312 temporary registrants.

	Former registrants		
	Reg	Non-reg	Total
AS	261	7	268
BS	3102	64	3166
CH	836	32	868
CS	574	14	588
DT	522	18	540
HAD	150	2	152
ODP	634	40	674
OR	165	6	171
OT	3623	126	3749
PA	1791	58	1849
PH	3117	126	3243
PO	107	1	108
PYL	1416	42	1458
RA	3343	111	3454
SL	1671	51	1722
Total	21312	698	22010

Registered = added to the temporary register
Non-registered = added to the temporary register but subsequently removed

As part of the ongoing maintenance of the Temporary Register, a communication was sent on the 29 April 2021 to all registrants on the Temporary Register who left the permanent Register more than three years ago. This communication advised they would be removed from the Temporary Register, unless they confirm by the 31 May 2021 they have previously or are currently practising in a role related to the Covid-19 pandemic.

5.2 HCPC operational impact

FtP

COVID impact is now being managed as business as usual activity within FTP. We continue to receive a small number of concerns relating to COVID. Common themes are around registrant's use of social media and breaching lockdown rules or local guidance and procedure.

The impact of COVID on the court system means that we have seen delays to cases relating to an ongoing criminal investigation, but we continue to monitor these cases and seek regular updates from the relevant organisation. We are preparing such cases so they are ready for an ICP as soon as we receive the outcome of a criminal investigation.

Due to the continued uncertainty caused by the pandemic, we are listing the majority of hearings as fully virtual or hybrid events until October, when the legislation that gives rise to our emergency Rules is due to be reviewed. We are planning for the return to in-person hearings from October and exploring how we can best utilise remote hearings after that date to offer a mixed economy of hearing methods.

Registration

During this period the majority of our registration team worked from home with a small number of registration employees attending the office three days per week to manage post and scan paper documents. This has enabled the majority of the team to work remotely.

6 Organisational development

6.1 Corporate Plan 2021-22

Appendix C of this report sets out the deliverables and benefits of the HCPC's Corporate Plan 2021-22. The first progress update will be presented to the Council at it's July 2021 meeting. Further work is ongoing to produce a full budget for 2021-22, also to be presented for approval at the Council's July 2021 meeting. Projected delivery dates for the Corporate Plan will be agreed alongside the full year budget to ensure affordability and expenditure forecasting accuracy.

6.2 Establishing a new working culture

The first Customer Engagement and Behavioural Workshop took place on 18 May and will add to the behaviours expected of all employees for each competency at each level, this will be mirrored in the 'Commitment Charter' that will be set out in the new People Strategy – stating what HCPC will do for employees, what Managers will do, and what Employees are expected to do. This in effect will make up the 'behavioural contract' we have discussed previously.

The HR and Executive Teams have held workshops to explore what the 'new normal' or 'new better' will look like, building on the principles set out by the earlier working party and also to see if we can expediate the right Estates to fit the new culture. The outputs are to be included in our new 'People Strategy' which will encompass new recruitment strategies, succession planning, training, and employee engagement.

The Employee EDI Forum has been established and training is due to commence. We continue to celebrate diversity and wellbeing days and hosted a further discussion on women's safety following the tragic murder of a young woman close to the Kennington Offices

6.3 Equality Diversity and Inclusion

We are currently analysing the results of our recent EDI survey with a report to be brought to Council in July and published shortly after. We hope to recruit an EDI advisor over the summer to enable us to develop the EDI action plan.

6.4 Digital Transformation

We are in the process of recruiting the Head of IT and Digital Transformation and Head of Business Change roles to ensure we have the top level structure of the technology and change operating model in place prior to the departure of the Executive Director of Digital Transformation.

6.5 Regulatory IT systems

Registration

Since the last update to Council there have been no further direct debit issues to report, the one noteworthy issue is an incorrect communication went out to a group of Practitioner Psychologists that had been impacted by the direct debit issues. This has now been resolved and the correct communications delivered.

The recent focus on the registration system has been around managing the year end process, which is now in the process of being concluded by finance. It has highlighted a small number of issues in the way that the new BC/CE registration system process accounts for income and deferred income that will need to be resolved. This is currently being specified with a finance expert from IBM and will be progressed once a solution that meets our needs is agreed.

Fitness to Practise

The new FtP Case Management System is scheduled to go live on 24 May. The additional week's delay is to ensure all the data is correctly migrated and high priority user acceptance testing issues are resolved and there is enough time for the organisation to complete all the readiness activities prior to go live. At the point of writing, we are 80% confident of achieving the new date.

6.6 Senior Management Team

Following approval by Council last year, I have been working to establish a permanent Executive team to support the delivery of our new ambitious Corporate Strategy. This process is now complete, and the new Executive team and directorate names formally commenced on 10 May. The new executive team is as follows:

- John Barwick, Chief Executive and Registrar
- Claire Amor, Head of Governance & Deputy Registrar
- Jo Moore, Executive Director of Corporate Services
- Naomi Nicholson, Executive Director of Professional Practice & Insight
- Andrew Smith, Executive Director of Regulation & Deputy Registrar

The establishment of the permanent executive team structure means we will be saying farewell to several interim colleagues who have been ably supporting HCPC on its transformation journey. Gordon Dixon, the Interim Director of Business Improvement left at the end of March. Neil Cuthbertson (Interim Director of Digital Transformation) and Claire Holt (Interim Director of HR and OD) will be leaving us at the end of June 2021. I would like to put on record my thanks for the significant contribution that Gordon, Neil and Claire have made to the HCPC as well as the personal support, encouragement and challenge they have provided.

As the position of Executive Director Policy and External Relations has been made redundant Jacqueline Ladds will be leaving the organisation in the summer. We will be celebrating the significant contribution Jacqueline has made to the organisation over many years before she leaves.

6.7 Finance

The provisional year end out-turn for 2020-21 is included on the meeting agenda. For this reason, no sperate finance appendix is included in this report.

6.8 Fee increase

The proposed registration fees rise have proceeded through the respective legislative processes. The Westminster Statutory Instrument (S.I.) has now successfully passed through and will come into force as law. We are monitoring progress as the Scottish S.I. reaches its final stage, and will come into force as law on 22 May, should no objections be raised before then.

Appendix A

Chief Executive – John Barwick

Meeting schedule period covering 23 March – 26 May 2021

Chief Executive Steering Group Forum	24 March 2021
Mark Bennett Deputy Director – Professional Regulation DHSC	25 March 2021
HCPC/BDBP Monthly review call	26 March 2021
Ruth Bourne, T-Three – SMT development	29 March 2021
Justin Madders MP	31 March 2021
Chief Allied Health Professions Officer Forum	12 April 2021
Rachel Harrison, GMB	12 April 2021
HCPC EDI Forum	14 April 2021
AHPs Into Action Programme Board	15 April 2021
Suzanne Rastrick, NHS England and NHS Improvement	16 April 2021
Richard Lodge, Pre-Hospital Emergency Care Council (Ireland)	19 April 2021
Daren Mochrie and Anna Parry, Association of Ambulance Chief Executives Marcial Boo, Chief Executive - UK Public Health Register	19 April 2021
Nicola Hill, Kingsley Napley contract meeting	22 April 2021
Julie Nichols, DHSC - governance and operating framework data reforms	29 April 2021
CEORB Forum	30 April 2021
Baroness Finlay	4 May 2021
Ruth Bourne, T-Three - SMT development	5 May 2021
Catherine Ross, Chief Healthcare Sciences Officer for Scotland	6 May 2021
Northern Ireland Regulators Forum	7 May 2021
Nick Jones, Chief Executive - GCC	10 May 2021

Tracy Nicholl, College of Paramedics	11 May 2021
Health Education England – data sharing	
Shane Boothby, Chambers Administrative and Public	
Sir Paul Beresford MP	13 May 2021
NHS Confederation roundtable- Imagining system regulation in the age of statutory ICSs	
Council of Deans of Health Strategy consultation	
Northern Ireland Joint Regulators' Forum	
Regulation and Quality Improvement Authority MOU	17 May 2021
Alan Clamp, PSA Reform proposal consultation	19 May 2021
Alan Clamp, PSA	20 May 2021

Key Performance Indicators dashboard

Registration

Measure	**Median processing time for UK graduates: 10 working days**								**Period**		May	
Executive commentary	Performance is consistently better than the KPI.											
Year to date		**May-20**	**Jun-20**	**Jul-20**	**Aug-20**	**Sep-20**	**Oct-20**	**Nov-20**	**Dec-20**	**Jan-21**	**Feb-21**	**Mar-21**	**Apr-21**
	Working days	1	2	4	2	4	5	6	6	3	5	5	5
Previous year		**May-19**	**Jun-19**	**Jul-19**	**Aug-19**	**Sep-19**	**Oct-19**	**Nov-19**	**Dec-19**	**Jan-20**	**Feb-20**	**Mar-20**	**Apr-20**
	Working days	2	4	10	10	12	12	9	10	2	3	3	5

Measure	**Median processing time for International applications (European Mutual Recognition): 60 working days**								**Period**		May	
Executive commentary	The volume of EMR applications processed in April was lower than in previous months as we focus on the completion of the assessment process for those applications submitted by 31 December 202 before the UK left the EU.											
Year to date		**May-20**	**Jun-20**	**Jul-20**	**Aug-20**	**Sep-20**	**Oct-20**	**Nov-20**	**Dec-20**	**Jan-21**	**Feb-21**	**Mar-21**	**Apr-21**
	Working days	53	62	53	57	63	65	69	71	69	64	50	72
Previous year		**May-19**	**Jun-19**	**Jul-19**	**Aug-19**	**Sep-19**	**Oct-19**	**Nov-19**	**Dec-19**	**Jan-20**	**Feb-20**	**Mar-20**	**Apr-20**
	Working days	39	41	42	45	53	58	50	47	48	46	49	38

Measure	**Median processing time for International applications (Non-European Mutual Recognition): 60 working days**								**Period**		May	
Executive commentary	Performance has improved and is now in line with the KPI.											
Year to date		**May-20**	**Jun-20**	**Jul-20**	**Aug-20**	**Sep-20**	**Oct-20**	**Nov-20**	**Dec-20**	**Jan-21**	**Feb-21**	**Mar-21**	**Apr-21**
	Working days	58	76	48	36	72	62	71	74	83	73	60	57
Previous year		**May-19**	**Jun-19**	**Jul-19**	**Aug-19**	**Sep-19**	**Oct-19**	**Nov-19**	**Dec-19**	**Jan-20**	**Feb-20**	**Mar-20**	**Apr-20**
	Working days	40	46	42	44	53	56	48	49	44	47	52	46

Measure	Number of upheld appeals against registration decisions								Period		May	
Executive commentary	Appeal outcomes are consistent.											
Year to date		May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21
	Concluded	0	0	0	4	2	4	3	1	2	2	4	2
	Upheld	0	0	0	2	1	2	2	1	1	0	1	1
Previous year		Aug-19	Sep-19	Oct-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20
	Concluded	4	4	3	4	4	3	5	5	4	4	3	0
	Upheld	2	2	1	2	2	1	5	1	2	2	3	0

Education

Measure	Rolling 12 month median time to produce visitors reports following a visit: one calendar month								Period		May	
Executive commentary	Performance within target – changes to internal timeframes for report production milestones starting to bring figure further below 30 day mark. The average in month results for February, March and April were 21, 22 and 23 respectively.											
Year to date		May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21
	Days	27	28	29	29	29	29	29	29	29	29	28	27
Previous year		May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20
	Days	28	27	27	27	27	27	25	26	27	26	28	28

Finance

Measure	Performance against budgeted operating expenditure in range of 97.5% to 102.5%									Period		May
Executive commentary	Provisional financial outturn for 2020-21 is included on the meeting's agenda as enclosure 6.											

Year to date	(,000)	**May-20**	**Jun-20**	**Jul-20**	**Aug-20**	**Sep-20**	**Oct-20**	**Nov-20**	**Dec-20**	**Jan-21**	**Feb-21**	**Mar-21**	**Apr-21**
	YTD Actual	4,251	6,199	8,177	10,215	12,068	14,199	16,535	18,945	21,346			
	YTD Budget	5,642	8,155										
	YTD Forecast			8,598	11,277	13,865	14,498	16,944	19,416	21,944			
	YTD Variance	1,391	1,956	421	1,062	1,798	299	409	471	598			
	Actual as % of budget	75%	76%	95%	91%	87%	98%	98%	98%	97.3%			
Previous year	(,000)	**May-19**	**Jun-19**	**Jul-19**	**Aug-19**	**Sep-19**	**Oct-19**	**Nov-19**	**Dec-19**	**Jan-20**	**Feb-20**	**Mar-20**	**Apr-20**
	YTD Actual	6,466	9,356	12,306	15,025	17,973	21,149	23,942	26,456	28,001	30,393	32,745	2,353
	YTD Budget	7,069	10,076	13,129	16,111	19,191	22,221						3,204
	YTD Forecast							24,027	26,919	28,164	30,720	33,422	
	YTD Variance	603	720	822	1,087	1,218	1,488	85	463	164	327	677	851
	Actual as % of budget	94%	93%	94%	93%	94%	95%	100%	98%	99%	99%	98%	73%

Information technology

Measure	Availability of HCPC websites (including Register and online portal): 99.5%									Period		May
Executive commentary	System availability has remained stabled and consistent through the reporting period.											

Year to date		**May-20**	**Jun-20**	**Jul-20**	**Aug-20**	**Sep-20**	**Oct-20**	**Nov-20**	**Dec-20**	**Jan-21**	**Feb-21**	**Mar-21**	**Apr-21**
	Availability	100%	99.7%	100%	100%	99.76%	85.71%	100.0%	100.0%	100.0%	100%	100%	100%
Previous year		**May-19**	**Jun-19**	**Jul-19**	**Aug-19**	**Sep-19**	**Oct-19**	**Nov-19**	**Dec-19**	**Jan-20**	**Feb-20**	**Mar-20**	**Apr-20**
	Availability	99.4%	98.9%	99.9%	99.6%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100%

Human Resources

Measure	Employee voluntary turnover: 22% (21.8% London average, Xpert HR labour turnover rates, published 5 May 2018)								Period		May		
Executive commentary	Between the 3-month period, we have had 15 Leavers. Fitness to Practise (FTP) continues to have the highest level of turnover which accounted for 60% of all leavers. The second highest is Registration and HR at 13.3% each and Finance and IT at 6.7%. Of the leavers within Fitness to Practise, Investigations team had the highest number of leavers followed by Triage. The majority (73.3%) of these Leavers were all due to Resignation whilst the remainder were due to the end of fixed term contract, end of probation (compulsory) or agreement to terminate employment.												
Year to date		May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21
	Turnover	41%	41%	41%	40%	39%	38%	34%	32%	27%	38%	36%	40%
Previous year		May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20
	Turnover	21%	21%	21%	22%	23%	25%	31%	32%	35%	37%	23%	41%

Measure	Employee sickness absence								Period		May		
Executive commentary	From Feb 21 – April 21 there was a total of 308 days of sickness, nearly half of that was long term sickness (155 days) based on 4 employees being on LTS in that period. The top three departments that account for the sickness for that quarter is FTP (with more than half), HR and Registration accounting for a quarter of the sickness each.												
Year to date		May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21
	Sick days	33	79	71	75	99	65	104	27	59	88	128	92
Previous year		May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20
	Sick days	161	206	194	148	228	231	293	245	277	277	143	78

Appendix C - Corporate Plan deliverables

Strategic theme 1- Continuously improve and innovate			Benefit measure
		Key milestones	
Improving our FtP performance Improved: • age profile of cases at each stage of our FtP process; • quality of investigations; • quality of decisions; and • relationships with key FtP stakeholders.	A1	New Case Management System launched	• Improved management systems and information, enabling easy visibility of departmental performance to varying degrees of granularity • Move off an unsupported heritage system (Charter) • <u>Improved</u> FTP case progression, utilising workflows to ensure SLAs are met • Improved quality of risk assessments completed on cases • Efficiency savings
	A2	Oldest cases either closed at threshold or progressed to ICP	Oldest 280 cases as of Feb 2021 closed or progress to ICP stage – improving the age profile of cases
	A3	Legally qualified Chairs introduced at ICP	• Efficiency savings – circ £74k in 2021-22 and £80k in 2022-23 • Reduced NWF cases at HCPTS (currently 25%) • Improved quality of ICP decisions and determinations
	A4	Frontloading pilot complete, if successful, adopted as business as usual	• Efficiency saving circa £1k per case in pilot • Improved quality of case management – reduced percentage of NWF at HCPTS stage
	A5	Cases awaiting final HCPTS hearing (which were postponed due to COVID-19 restrictions) concluded	All postponed hearings held
Delivering online Registrations • A fully online process which allows applicants to join our Register more efficiently • Improved customer experience • Increased EDI and workforce data	B1	UK Applicants will be able to register online	• Improved User Experience for UK Applicants • Increased EDI data capture • More efficient registration processing, will require less manual processing leading to efficiency savings - Reduction of temporary employee contracts / overtime needed to cover the peak UK application process for 6 months over the summer period (including B2 circa £100k savings)
	B2	International applicants will be able to register online	• Improved User Experience for international Applicants • Increased EDI data capture • More efficient registration processing less manual processing leading to efficiency savings - Estimated there will be a 50% reduction in data entry required from the Registrant Advisors which will increase productivity to feed into Quality Assurance activities by 50%. (including B1 circa £100k savings)
	B3	We will deliver the first iteration of an integrated user experience	Fully automated application process - Improved user experience and access to registration services for external users

	B4	We will deliver the second iteration of an integrated user experience	Integrated Application & Registrant Portal - Improved user experience and access to registration services for external users
A new Education Quality Assurance Model • A new model of quality assurance of education providers that is flexible, intelligent, data led and risk based	C1	Delivery of pilot	Pilot completed on time, producing full evaluation of benefits realised through new model
	C2	Decision on full implementation	SMT / ETC positioned effectively to decide on full implementation of new model
	C3	Full implementation of the new model	Stakeholders, systems and processes prepared for full implementation by target date. Evaluation continues to demonstrate benefits realised

Strategic theme 2 – Promote high quality professional practice			Benefit measure
		Key milestones	
Building our professionalism and prevention approach	D1	Complete evaluation of initial year of professional liaison team	Learning and impact from first year identified and used to inform development of the professional liaison service
	D2	Learning materials for education providers and students developed	Education providers supported and able to deliver learning on professionalism, standards and regulation
	D3	Commence increase partnership working & support for identified employers	Influenced the creation of supportive cultures and working environments within identified employers
	D4	Develop content for employer hub & e-newsletter and evaluate use/impact	• Learning and impact identified and used to inform future development of hub and e-newsletter • Increased understanding amongst employers of HCPC role, support and resources, and employer responsibilities
	D5	Professional liaison service developed and expanded	Increased engagements, support, education and influence of employers, registrants and other stakeholders
	D6	Programme of employer events delivered through the year and impact evaluated	Increased engagement with understanding amongst employers of HCPC role, support, resources and employer responsibilities
	D7	Develop a programme of support for international registrants	International registrants understand and can embed HCPC standards as they integrate into UK practice

Strategic theme 3 – Develop insight and exert influence			Benefit measure
		Key milestones	
Delivering leadership in regulatory policy development	E1	Commence review of our regulatory position on aesthetic/cosmetic practice	Clear regulatory position for our stakeholders on aesthetic/cosmetic practice
	E2	Scope and begin to deliver thought leadership work on for example registrant health & wellbeing, professionalism, multi-professional regulation & impact on patient safety	• Professionalism – positive impact reported by our stakeholders in relation to the resources available on our website/delivered through our liaison work • Health and wellbeing – We will see an improvement in perceptions of the HCPC and our processes from registrants and other key stakeholders, through stakeholder polling, complaints and feedback, FTP registrant feedback forms and future research
	E3	Council decision on our regulatory approach to advanced practice	Clear position for our stakeholders on the risks posed (if any) by advanced practice, and the action we will take
Developing our data, analytics and reporting ability We will develop a consistent organisation wide approach to managing our data and create a single view of our registrants to enable insight.	F1	Insight & Intelligence framework approved by Council	Clarity for Council and our stakeholders about the realisation of improved insight and intelligence delivery. Planning can commence in relation to project work arising from framework.
	F1i	Publication of analytical reports as set out in the framework.	This will cover areas such as EDI, FtP and CPD.
	F2	Priority reporting needs defined and agreed	Working data platform, ingesting all HCPC data sources. Skilled users gaining new insights
	F3	Delivered our first tranche of operational and performance reports	Derivation of value from effective and repeatable operational and performance reporting. Effective Data collection, cleansing, and enrichment. Joining of HCPC datasets to facilitate ability to find patterns, trends to allow analytical insight and intelligence.
	F4	Deliver a tool kit that allow HCPC to become more predictive in its use of data	Joining of HCPC datasets to look for patterns, trends, and analytical insight and intelligence. HCPC are able to use data to inform key stakeholder groups to improve education, employment, professional behaviours to prevent/reduce the concerns being raised and maintain/enhance public protect
	F5	Deliver an operating model that allows HCPC to deliver new reporting, insights and data sources	HCPC confident in the way it operates the data platform with necessary Data Governance rules and processes in place to ensure HCPC are compliant with all legislation.

Strategic theme 4 – Be visible, engaged and informed				Benefit measure
		Key milestones		
Developing effective mechanisms to reach all stakeholders	G1	Personal engagement plans for Chair & Chief Executive implemented, to deliver engagement with key external stakeholders		Our key stakeholders will report greater visibility and engagement
	G2	Maintain engagement across 4 nations with a specific focus to build relationships in Wales and Scotland post elections		Our key stakeholders in each of the four countries will report greater engagement with HCPC
	G3	Conduct perceptions survey to establish stakeholder views on our regulatory functions and how we can improve and create action plan		Qualitative and quantitative measures of understanding of stakeholder views
Strengthening our organisational approach to EDI	H1	Complete analysis of data from second annual diversity data		Increased insight into registrant demographics
	H2	EDI employee forum established		Employees report increase in engagement and support in EDI matters, positive feedback in pulse surveys and engagement in EDI activities such as group discussions LGBT etc.
	H3	Commence implementation of EDI action plan		Realisation of the HCPC EDI strategic objectives
	H4	2021 Diversity report outlining findings published		• Stakeholders understand our diversity data and see our commitment to EDI matters • HCPC commences planning work to address key findings
	H5	Project to capture diversity data at initial point of registration and renewal completed (see B1 & B2)		Completion rates for EDI data increase significantly (increased to at least 30% of the Register)

Strategic theme 5 – Build a resilient, healthy, capable and sustainable organisation			Benefit measure
	Key milestones		
Establishing the culture we need HCPC will only achieve its strategy if its employees understand the vision, their contribution to it, and have the skills and motivation to make it happen.	I1	The Culture we need is defined and agreed by Council	All employees understand the culture of the organisation, and feel motivated to contribute and champion this culture evidenced by APDR's and also response to employee satisfaction and pulse surveys
	I2	All employee customer focus workshops delivered	All employees deal with internal and external customers consistently and professionally, where it is recognised there has been a clear culture shift to one of empathy and professionalism evidenced by a reduction of complaints in regard to tone of voice
	I3	Organisational behaviours and values integrated into our performance management system	This will ensure that all colleagues can see what is expected of them in both terms of objectives and the behaviours that will be rewarded and see a clear link to the Corporate plan and overall strategy. This will be evidenced in APDR's and the responses to employee satisfaction and pulse surveys
	I4	All HR policies reviewed and modernised	To allow clear guidance and better management policies need to be succinct, up to date in both practice and law, recognising 'new ways of working' and flexible working. This will be evidenced by less reliance on HR and fewer ER cases
	I5	Succession planning and career development plans agreed	There is continuity of delivery, staff are motivated as they can see clear progression paths and are trained appropriately
Pursuing our Digital Transformation Strategy and building our Change Management capability We will improve our digital experience to meet our users' needs and ensure our content is seen	J1	New Case Management System launched	See A1
	J2	UK online registration process will have been rolled out using an agile delivery process putting our registrants needs at the heart of the process	See B2 & B3
	J3	Conversion rate optimisation programme in place.	Measurable increase in the reach of HCPC key messaging. E.g. Bounce rate , Time on Site, Pages Per Visit, New vrs Returning Visitors, Plus social media
	J4	Digital transformation operating model and change management capability and capacity.	New Change (PMO) IT and Digital Transformation Operating model implemented with permanent Heads of Department in place

Ensuring our financial sustainability	K1	Medium-Term Financial Strategy incorporating an efficiency action plan	Budget Efficiency Strategy agreed by Council with clear actions which sets out how we will ensure that we an efficient and effective organisation over the medium-term.
	K2	Fee Income Strategy agreed.	Clear and robust approach agreed and documented which ensures that we are able to implement any future fee changes at the appropriate time

Strategic theme 6 – Promote the value of regulation			Benefit measure
		Key milestones	
Delivering year one of our Registrant health and wellbeing strategy	L1	Engage key stakeholders to establish key misconceptions and where communications can be improved	We have a clear understanding of misconceptions and next steps to improve
	L2	Undertake tone of voice review, prioritising templates and developing employee training and guidance materials	We will see an improvement in perceptions of the HCPC and our processes from registrants and other key stakeholders, through stakeholder polling, complaints and feedback, FTP registrant feedback forms and future research
	L3	Incorporate the research and registrants' experiences film into all employee learning and development and inductions	Improved understanding from employees about impact leading to improved customer service levels
	L4	Continue to engage stakeholders on the provision of mental health support (Policy team)	Our registrants are better supported, mental health issues are reduced ensuring patient safety issues are reduced
Preparing for Regulatory Reform We will work with our stakeholders on the reforms and improvements to the legislative framework that underpins professional regulation and our work across the UK.	M1	HCPC response to the DHSC consultation	HCPC voice is heard and informs future direction
	M2	Development of messages and dedicated engagement for the *Future of Health and Care* White Paper, including responding to the Health & Social Care Select Committee inquiry	
	M3	Engagement and communications with key stakeholders, ministers, and officials in DHSC and UK parliamentarians regarding the anticipated Health and Care Bill	
	M4	Influence the policy on how consolidation of regulators should align with regulatory reform	