Council

5 October 2023



Fitness to Practise Performance Report

Executive Summary

This paper provides:

- An update on the progress of the Fitness to Practise (FTP) Improvement Programme against the targets we set ourselves on improving quality and timeliness of case management.
- A brief update on Phase 2 of the FtP Improvement Programme.

Council is asked to note the progress made.

Previous consideration	Standing item (as of February 2021) to update Council on the progress of the FTP Improvement Plan. Oversight of the progress of our FTP Improvement Plan is also provided by the FTP Improvement Board.		
Decision	The Council is asked to note the update.		
Next steps	The next report on progress will be provided to Council on 30 November 2023		
Strategic priority	Strategy priority 1: Improve our performance to achieve the Professional Standards Authority's Standards of Good Regulation.		
Financial and resource implications	Financial and resource implications are provided for in the FTP 2023-24 budget.		
EDI impact	Improving the quality and timeliness of our management of fitness to practise cases will support all involved in the cases. In particular, Phase 2 improvement programme include developments that will improve our communication and support for those involved in fitness to practise cases and who are particularly vulnerable or in need of additional support and reasonable adjustments.		
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Fitness to Practise Performance Report

1. Introduction

- 1.1. As Council is aware, improving our performance in Fitness to Practise (FtP) remains a priority for the HCPC. The focus remains on embedding the changes we have made to date and continuing with further improvements which focus on the support we provide to those involved in the FtP process and how we communicate during FtP cases.
- 1.2. Our overarching aim is to improve the quality and pace of our management of FtP cases.
- 1.3. This paper provides:
 - An update on our performance in relation to the quality and timeliness of case investigations.
 - An updated on the projects in phase 2 of the FtP Improvement Programme (Annex 1).
 - A summary of key risks and mitigations.

2. Quality of case management

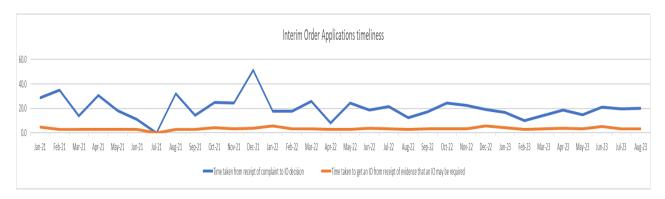
- 2.1. In this section we provide an overview of our performance in relation to the quality of our case investigations. As we have done previously, we have broken this down by themes of the key benefits we are seeking to achieve through this part of our improvement work. These are:
 - Risk management and Interim Order performance.
 - Quality of our risk assessment of cases.
 - Quality of our case planning.

Risk management – Interim Order performance

- 2.2. Identifying high risk cases as soon as possible is a key part of ensuring we protect patients and service users.
- 2.3. A measure of how effectively we complete and keep up to date the risk assessments of our cases is the time it takes to apply for an Interim Order. Figure 1 shows our performance against the two measures of timeliness in relation to Interim Orders.
- 2.4. The orange line in Figure 1 shows how quickly we progress a matter to an Interim Order hearing once we have identified the need for an Interim Order. We continue to maintain performance within our target of 3 weeks.

- 2.5. The blue line identifies how quickly we progress a matter to an Interim Order hearing from receipt of the concern. Our target for this measure is 12 weeks. In August 2023 our performance was 20 weeks. This includes five cases where we had to wait for a third-party investigation to conclude or reach a particular evidential stage before we could apply for an interim order.
- 2.6. The risk presented in a case can change as we progress the investigation. It may be that on receipt of the initial concern the risk is identified as low, but this increases on receipt of further information and a greater understanding of the scale or seriousness of the concern.

Figure 1 – Interim Order performance



Risk management – adherence with our Best Practice Standard

- 2.7. Monitoring the quality and timeliness of our risk assessments continues. In March 2022 we increased our target to 80% adherence from the end of Q1 2022/23, to support our aim to achieve 90% stretch target we have set ourselves.
- 2.8. Figure 2 shows, that we dipped slightly below this target in February and March 2023. In response we provided additional coaching, support and oversight to newer and less experienced Case Managers.
- 2.9. In April 2023, we achieved our target again and have achieved performance above the 80% target in four of the last five months. In August 2023, our compliance with the best practice standard was 88%. This is the highest compliance score since December 2022. This shows that the steps we have taken have enabled us to correct our course quickly and again achieve our quality target.

Figure 2 – quality of risk assessments: performance against target



- 2.10. Monitoring the quality and timeliness of our case plans also continues, and we increased this target to 80% adherence in March 2022 after meeting our initial target of 70% adherence to our best practice standard in January and February 2022.
- 2.11. In March and April 2023 our performance dipped below the target to 75%. In May 2023 it had increased to 92% and we have performed better than our target in each month since. In August our performance against KPI was 92%. As outlined above, this again shows that monitoring our performance closely and taking action when performance does dip enables us to get performance back to our expected levels quickly.

Figure 3 – quality of case planning: performance against target



3. Timeliness of case investigation

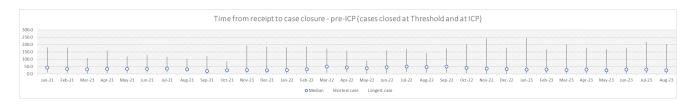
- 3.1. In this section we provide an overview of our performance in relation to the timeliness of our investigation and the age profile of our cases. We have broken this down by:
 - Age profile of cases at the point of case conclusion
 - Case volumes at each stage of the process
 - Age profile of the live caseload

Age profile of cases at the point of case conclusion

- 3.2. To reduce the overall number of cases over our KPI it is important to make sure we do not progress older cases at the expense of younger cases. The median age of cases at the point they are closed provides a useful measure of how well we are balancing the progression of cases across the caseload.
- 3.3. Figure 4 shows the median age of cases closed at the Threshold and Investigating Committee Panel (ICP) stage (i.e., all pre-ICP case closures) month on month.
- 3.4. In August 2023, the oldest case closed was at 205 weeks, and the youngest was 2 weeks. The median age of cases closed in August 2023 was 24 weeks, which falls within the KPI of 33 weeks. This shows we continue to progress our oldest cases, alongside those more recently received.
- 3.5. Our KPI report to Council shows the percentage of cases closed pre-ICP that are within KPI. In June and July 2023, we continued the trend since February

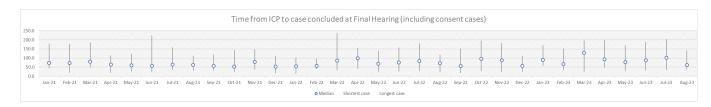
2023 of closing more cases at this stage of the process within our KPI of 33 weeks. In August 2023, 37% of cases closed at this stage were within KPI. This is a result of focused work by the team to progress older cases in that month.

Figure 4 – receipt to closure at Threshold or ICP decision median



- 3.6. Figure 5 shows the median age of cases that were closed at a final hearing (including cases resolved by consent). We expect the median age at this point of case conclusion to be above our KPI of 39 weeks as our older cases move through the process.
- 3.7. In July 2023 we concluded our oldest case at a final hearing since March 2022, at 204 weeks old. The youngest case closed in July was 35 weeks.
- 3.8. The median age of cases concluded at a final hearing in August 2023 was 61 weeks, with the longest case at 142 weeks and the shortest at 38 weeks. The shortest age to conclusion continues to reflect the positive impact of frontloading, and the benefits we are realising in progressing frontloaded cases to a final hearing more quickly. In general, for frontloaded cases the time taken from Investigating Committee panel to final hearing has reduced to 28 weeks, almost three months (11 weeks) faster than our 39 week service standard.
- 3.9. The improvements we have made through introducing frontloaded investigations and legally qualified ICP specific Chairs has also reduced the number of cases being referred for a final hearing. Since the start of this year 61% of cases considered by an ICP are closed at this stage.

Figure 5 – ICP to final hearing decision median



Case volumes at each stage

3.10. Figures 6 to 8 show the number of open cases in our Threshold, Investigations and Post-ICP teams respectively.

- 3.11. Since June we have received noticeably more new FtP concerns each month than in the same period last year. We will continue to monitor the number of new FtP concerns received, and that meet our triage test and go on to become FtP investigations. This increase in new concerns since June is reflected in the volume of cases at the Threshold stage, which was 629 at the end of August. The caseload is still lower than the volume of Threshold cases in October 2022 (712 cases) and the team have responded well to manage this increase.
- 3.12. In February 2023, we began introducing new ways of working within our Investigations team, to respond to an increasing caseload for that team. This has included working closely with the management team responsible for our investigations to ensure they have the governance structure and oversight required to drive performance and throughput of cases.
- 3.13. In April 2023 we saw that the open investigations caseload had begun to reduce (from 891 cases in March to 764 cases in April). The caseload has been maintained at under 800 cases since then, and at the end of August was 798 cases. 88 of these cases are currently listed for a future Investigating Committee Panel. 30 of them are on hold pending the conclusion of a third-party investigation. This means the number of cases under active investigation in the Investigations team is 680.
- 3.14. The number of cases at the post-ICP stage remains below 500 cases, as it has done since February 2022. In August 2023 the caseload was 459. 67 of these cases are listed for a future final hearing and a further 50 are in the process of being scheduled for a final hearing.

Figure 6 – number of open Threshold cases

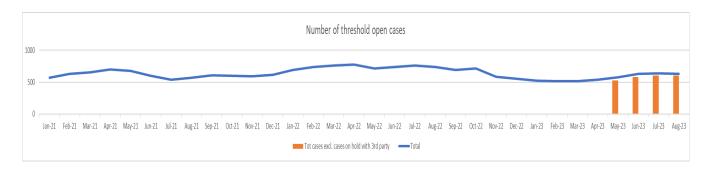
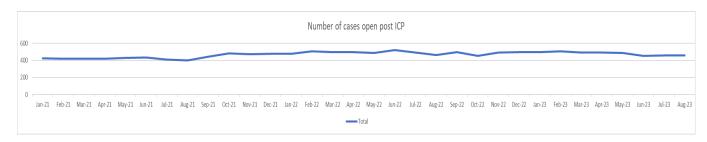


Figure 7 – number of open Investigations cases



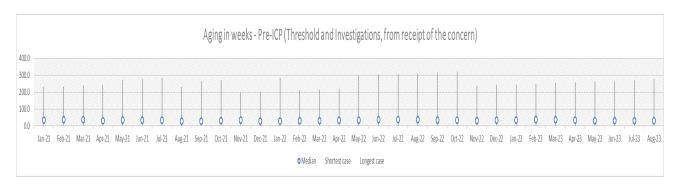
Figure 8 – number of open post-ICP cases



Age profile of the live caseload

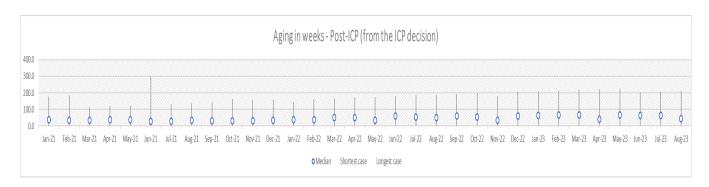
3.15. Figure 9 shows the median age of our live pre-ICP caseload. At the end of August 2023, the median age of our open pre-ICP caseload was 31 weeks, which is within our KPI of 33 weeks for this stage of the process. We have consistently maintained the median age within KPI since April this year. The youngest case was less than one week and the oldest was 276 weeks. The oldest case had previously been on hold due a third-party investigation.

Figure 9 – median age of live pre-ICP caseload



3.16. As our older cases progress through to the post-ICP stage, the median age of cases at this stage of the process increases. At the end of August 2023, the median age of cases at this stage was 45 weeks, which continues to sit above our KPI of 39 weeks from the ICP decision. The youngest case at this stage was 1 week and the oldest at 212 weeks.

Figure 10 – median age of the live post-ICP caseload



4. Overview of phase 2 improvement projects

- 4.1. We decided to stagger the start of the six projects included in Phase 2 of the FTP Improvement Programme. This was to enable us to embed the improvements delivered in Phase 1. A progress update is provided in Annex A, and the following are highlighted:
 - Tone of voice review We have completed the review of the templates and creation of new information sheets and are on track to go live with the new templates in the first week in October, in line with the current project plan.
 - Protection of title cases we have completed the initial scoping and review of our existing policies and have developed an outline of a new process. Work has commenced with the team to develop and define this further

5. Key risks and mitigation

- 5.1. As we have shared with Council, the current trend of gradual, incremental improvements are vulnerable to a number of risk factors, both internal and external:
 - Time it takes time for improvement work once delivered to be seen as a sustained and noticeable impact on performance measures. We have seen the impact of phase 1 of our improvement plan, which focused on the quality and consistency of our investigations, decision making and management of risk in cases, in the PSA's Performance Review report for 2022-23. We continue our improvement programme to ensure this work is embedded and sustained. Phase 2 of our improvement programme has a strong emphasis on the support we provide to those in the FtP process, and we expect to see the tangible impacts of that work during this year.
 - Transition to frontloading we have been planning the changes needed to enable us to undertake frontloaded investigations in-house. This requires changes to our processes and recruitment in all areas. We are carefully phasing in the changes needed to ensure minimal impact on the timeliness and quality of our case management work.
 - Resource whilst turnover has improved, we continue to work on ensuring stability across the FTP teams and reducing our dependence on temporary and fixed term contracts. Recruitment remains a challenge and three recent campaigns have resulted in us not being able to fill all the vacancies we advertised for. We successfully recruited a new Operational Manager for our Investigations team, who joined us at the end of September. Two new Case Team Managers will also join us during October and November. We still have one team manager vacancy, which we will go out to advertise for shortly. Recruitment of

new legal roles that will be required for frontloaded investigations started in August.

• Need for regulatory reform – the changes we are making are helping progress older cases and improve the quality of our decision-making and investigations. However, to be able to accelerate the improvement of the timeliness of our FTP process, we need legislative change to enable us to conclude cases earlier on in the process. At the moment, all cases where there is a case to answer (which is a low bar) must go to a final hearing. We continue to work closely with the DHSC on the plans for regulatory reform and proactively working with the DHSC on the GMC's draft legislation which will be the blueprint for the other regulators

6. Next steps

6.1. We will continue to update Council on our progress against our improvement plan at each meeting, or until Council has sufficient assurance of our progress to reduce the frequency of reporting.

Annex A

Project	RAG	Progress update	R&I	Plan		
Risk assessment quality and adherence to best practice standard internal review		In progress. Monthly quality assurance checks in the department continue as part of our business- as-usual processes. Ongoing QA team support of the process is in place.				
Improving communications, engagement and support we provide:						
Workstream 1: Tone of voice review		In progress. A project plan is in place to continue the review of templates supported by colleagues in the Business Change Team. The review of all templates and information sheets has concluded and the templates will go live at the start of October. Training for all team members on tone of voice has taken place. This is amber to reflect that this project has been carried over from last year's Corporate Plan. However we are confident we remain on track against the revised plan and the RAG status is therefore green.				
Workstream 2: QA review of case plans and stakeholder engagement		In progress. Monthly quality assurance checks in the department continue as part of our business- as-usual processes. Ongoing QA team support of the process is in place.				
Workstream 3: Developing additional guidance and support for unrepresented registrants and encouraging all registrants to engage earlier in the process		Not yet started. We are phasing the start of this project to ensure we focus on embedding the changes from the projects in Phase 1 and to manage our capacity.				
Workstream 4: Lay advocacy service		Completed. Lay Advocacy service went live in September 2022.				
Workstream 5: Registrant support line		Completed. Registrant support line went live in April 2023.				
Consensual resolution of cases – ensuring our policy is applied consistently and at the point of referral from the ICP		Completed. Regular review of cases for consent is now embedded in the post-ICP case management process.				
Case management and investigation – embedding the learning from the frontloading pilot.		In progress. Frontloading of case investigations with our providers commenced in July 2022. Work to develop our operating model to support in-house frontloaded investigations is underway.				
CMS – phase 2 – this will be managed by the HCPC's Major Projects team		Completed. All items have now been delivered. Project close down actions are now underway.				
Review of KPIs and process for Protection of Title cases		In progress – initial project scoping and review of existing policies and processes has concluded. Proposed new process has been drafted and work is underway with the team to develop this further.				