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## Chief Executive's report on organisational performance July 2024

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### Executive Summary

This report provides my assessment on the HCPC's organisational performance and highlights key developments and pieces of work since the Council last met in May 2024.

Areas discussed are organisation wide including regulation, policy and standards, professional liaison and resources.

At the Council's next meeting in September 2024, my report will provide a detailed update of our performance against our key performance indicators, a review of delivery against our 2024-25 corporate plan and our strategic risks.

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Previous consideration	This is a standing item, considered at each Council meeting.
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Purpose of report	The Council is asked to discuss the report.
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Next steps	The next report will be presented in September 2024.
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Strategic priority	This report is relevant to all strategic priorities.
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Financial and resource implications	None as a result of this paper.
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EDI and Welsh language implications	None as a result of this paper.
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# Chief Executive's Performance Report – July 2024

## 1. Introduction

This report provides my assessment on the HCPC's organisational performance and highlights key developments since the Council last met in May 2024.

At the Council's next meeting in September 2024, my report will provide a detailed update of our performance against our key performance indicators, a review of delivery against our 2024-25 corporate plan and our strategic risks.

Like many of you I have read the Nazir Afzal and Rise Associates' independent review of the Nursing and Midwifery Council's (NMC) culture. The findings are stark, recommendations have been made and the report has been accepted by the NMC in its entirety. The internal culture of any organisation always reflects externally, and this has been highlighted within the report.

It is essential for anyone working in health and care, and particularly us as a regulator, to have a laser-like focus on protecting the public. You can only do that effectively when there is trust, fairness and respect.

The report has made me and the Executive Leadership Team (ELT) rightly reflect on the kind of organisation we have the privilege of leading. I want us all to feel reassured that working for the HCPC means we work for an outstanding organisation and where any concerns are raised by colleagues they are taken seriously. That is why we are undertaking a more detailed review of the recommendations in the NMC report, to make sure we are not missing opportunities to improve ourselves.

As Chief Executive, and with my executive team and the support of the Council, how else do I satisfy myself that the culture of our organisation is where it should be? Well, I can rely on the data that important things like our employee pulse surveys give us. But there's no substitute for being connected with colleagues. I want to have ongoing conversations where people feel safe to raise any concerns with me or anyone else. This will only happen if there is trust, and you have my continued steadfast commitment to developing and maintaining this with all of our colleagues, Council members and our external stakeholders.

We should be confident in our culture here at the HCPC but never be complacent - rightly insisting on the highest standards from each other to ensure we can do our job in protecting the public. We hold each other to account on this commitment equally.

## 2. Engagement

### *Registrants and employers*

As part of my engagement with registrants and employers, on 18 June I visited two healthcare sites in Glasgow which are part of NHS Greater Glasgow and Clyde, the largest NHS organisation in Scotland and one of the largest in the UK, serving a population of approximately 1.3 million people. My day was spent at the Gartnavel Royal Hospital and the Glasgow Royal Infirmary where I met with Fiona Smith (Director of Allied Health Professionals (AHP)) and AHP leads to hear first-hand about some of the opportunities and challenges colleagues face.

### *Professional bodies*

On 20 June we hosted our online Professional Body Forum meeting and had 30 guests – representing 25 professional bodies from 13 of our 15 professions. The session focused on our work around the standards of education and training, the outcome of our English language consultation work, future collaboration on continuing professional development (CPD), and a wider discussion on the future of artificial intelligence (AI) across professions and in regulation. Our next meeting will be in September, in-person at our offices.

The British Association of Art Therapists (BAAT) invited me to prepare a pre-recorded message about the work of the HCPC and art therapists to share at their recent Annual General Meeting (22 June). [You can watch my presentation here](#); I am grateful for the opportunity to talk about the important work of art therapists and I am delighted that my message was well received by BAAT members.

### *Regular engagement*

As part of our close working relationship with officials across the four nations, on 3 June, and together with Andrew Smith, Deputy Chief Executive and Executive Director of Education, Registration and Regulatory Standards, I met with Ruth Crowder (Chief Allied Health Professions Adviser for Wales) and Delia Ripley (Acting Chief Scientific Adviser for Health in Wales). I have separate meetings in the diary with the Chief Allied Health Professions Officer for the Northern Ireland, England and Scotland which I look forward to.

My full meeting list is provided at [appendix A](#).

## 3. Progress against our Corporate Plan for 2024-25

My September report will include more detail against individual milestone areas, highlights for quarter one includes

- *Strengthen our user experience*: successful conclusion of the AI pilot to respond to emails in our registration contact centre. We have agreed to extend this pilot further as we look to how the use of this type of technology forms part of our longer-term systems review that the Council agreed at our last meeting. More information on this is provided in the regulatory development section of this report.

- *Publication of the results from the consultation and final proposals for changes to our English language requirements* for applicants applying to join the HCPC register via our international route to registration. [You can read Tom Miller's, Policy Manager blog here which provides an update;](#)
- *Partnership with the Patients Association:* as part of our commitment to patient and service user engagement; we have agreed a one year contract with the Patients Association and we look forward to working with them on important areas of our work, such as the standards for education and training review.

#### **4. Regulatory Performance**

There is a separate paper on the Council's agenda providing a detailed report on the performance of the Fitness to Practise (FTP) directorate; this section covers education, registration and regulatory development.

##### **Education**

###### *Reducing regulatory burden/overlap*

We are clear that we play an important public protection role in education and training and we fulfil this responsibility by ensuring education providers and programmes meet our high regulatory standards and deliver new registrants who are fit to practise. We recognise that there are many bodies involved in the quality of education, including other professional and systems regulators, and professional bodies.

Through our quality assurance model, which was introduced in September 2021, we have an explicit aim to use our resources well by applying 'right touch' regulation. For example, our approval assessments are split into consideration of institution level standards, and programme level standards. For existing education providers proposing new programmes, we normally do not ask for a detailed documentary submission showing how the institution level standards are met, because we are satisfied they continue to meet these standards through our monitoring assessments and by reviewing data and intelligence from external sources.

In our previous model we required programme level engagement with our regular reviews on a yearly basis, but now assess the whole institution on a periodic basis (which can be up to five years in duration if our risk assessment allows). This can significantly reduce the number of times each education provider needs to engage with us, especially for those who run lots of approved programmes and who we have judged are performing well and low risk.

Our monitoring processes also reduce the level of regulatory burden for lower risk education providers. Our previous model required submissions from all education providers when they made any changes, but our approach now no longer requires this due to our engagement activities with education providers and others, and the data and intelligence we gather. This enables us to intervene where we need to,

outside of the set monitoring period. This means we have already reduced the amount of regulatory burden through our own quality assurance mechanisms, but we recognise we can do more to reduce regulatory overlap with other regulators and bodies.

Within the 2024-25 financial year, we will continue to work with other regulators and professional bodies – aiming to be a leader in the sector - to consider how we can reduce areas of overlap. Our aim is to continue to make good independent regulatory decisions, whilst considering the work of others to reduce the burden for education providers.

To do this, we will consider our previous work in this area and identify how we can apply these approaches to future sector initiatives. For example, when Health Education and Improvement Wales (HEIW) commissioned new AHP programmes to commence in September 2022, we worked with them to understand their commissioning exercise. This provided us assurance that education providers would meet some specific standards, or parts of standards, without the need for us to see the education providers' full submissions.

We have established information sharing arrangements with several professional bodies, which enables us to inform each other's quality assurance activities. We plan to build on these arrangements, to consider where we can rely on each other's judgements, and/or dovetail our assessments to the benefit of education providers undertaking regulatory and professional body processes at the same time. We are currently working with specific stakeholders to understand the appetite for further reducing regulatory overlap and burden. There is a drive for this in the sector currently, with the Council of Deans of Health (CoDoH) calling for reducing regulatory overlap in their manifesto work for the July 2024 general election.

#### *Education annual report – continued engagement*

We [published](#) our education annual report in April 2024. This report sets out a 'state of the nation' for education and training our professions. Through the report we have focused on key areas linked to the quality of education for programmes leading to HCPC registration and key challenges faced by the sector. To date, we have run four webinars with combined attendance of 364.

### **Registration**

The restructure of the Registration team is progressing well – a number of the new roles within the team are currently being advertised. As reported to the Education and Training Committee, the Registration team continues to provide a good service during this period of change, which is a testament to the professionalism of the team.

### *Customer service*

Our contact centre continues to provide a good service for telephone, email and letter enquiries. The telephone call answer rate was 98% for April 2024 and 97% for May 2024.

We continue to respond to emails in a timely manner. We responded to 98% of emails within five working days during May 2024 and are currently responding to emails within one working day – this has been assisted by the use of AI as outlined above.

### *UK applications to join our Register*

We received a total of 1,295 applications to join our Register from students completing UK education programmes during the period from April to May 2024. The team has managed the demand well and the median time to assess and process UK applications has been one working day.

### *International applications to join our Register*

During the period from April to May 2024, we received 765 and 775 applications each month, respectively. The time to assess international applications in April and May 2024 was 53 and 30 working days respectively. Application numbers are currently around 50% higher than forecast in the annual budget and as a result on 21 May 2024 the ELT approved recruitment of an additional seven employees on 12 month fixed term contracts (FTCs) to assist with this additional demand. This demonstrates we are actively monitoring the data to ensure we resource the team appropriately to cope with demand. FTCs gives us flexibility should demand reduce in the future.

### *Registration renewals*

The renewal process has been running well.

- On 31 May 2024 art therapists ended their renewal period with 93.9% of registrants having renewed their registration compared to 93.4% in 2022;
- On 30 June 2024 dietitians ended their renewal window with 95.1% of registrants having renewed their registration compared to 94.6% in 2022;
- On 1 May 2024 chiropodists/podiatrists began their renewal period. At the time of writing this report, 81% of chiropodists/podiatrists had renewed;
- On 1 May 2024 hearing aid dispensers began their renewal period. At the time of writing this report, 68.7% of hearing aid dispensers had renewed.

We continue to engage with the relevant professional bodies before and during the renewal windows; this includes us sharing renewal rates periodically and providing information to support registrants to renew their registration throughout the renewal window.

## **Regulatory development**

We have completed a proof of concept using AI-powered software to assist us in responding to email queries into the registration contact centre. This six-week pilot provided valuable insight and learning into how AI can help us provide better quality and more efficient service to applicants and registrants.

We were able to move from five working days to provide a response to enquiries to provide a largely same-day service. AI has also helped us to analyse why individuals contact us. This has allowed us to consider how we can service high-volume enquiry types more effectively, and where possible remove the need to contact the HCPC altogether. For example, we could clearly see that a high proportion of requests were from registrants requesting documents for registration certificates and payment confirmation (for tax and claims purposes). We have streamlined this process as a result and have prioritised making these documents available for registrants to download via their portal account.

Given the success of the pilot, an extension of the pilot has been agreed by the ELT and we will look to widen its application over the coming months to other teams as part of the extended pilot.

## **5. Policy and Standards**

### *Research into Artificial Intelligence and our professions*

We are in the early stages of scoping a research project which will help us understand how our registrants may be working with AI systems, what their experiences are and what impact this may be having on the way they practise.

We want to work closely with all our key stakeholders to commission research that will help us understand these experiences and determine how the HCPC needs to respond to ensure the public are protected. Through this collaboration we want to ensure that we build on the existing knowledge base and produce research that will have a positive impact on our registrants. So far, we have discussed our research aims in both the Professional Body and Equality Diversity and Inclusion (EDI) Forums and have already received valuable input from our stakeholders. We are also grateful to Council members who are helping inform the scope of this work.

### *Standards of Education and Training review (SETs)*

We have completed initial engagement for the review of the SETs. In May, we held a workshop with the education team discussing the current SETs, their clarity and if there are ways they could be improved. We also held a workshop with education providers. This interactive session asked education providers about how they use the SETs, what they find beneficial and whether there are any barriers to the application of the SETs. We also discussed the progress of the review at recent meetings in June: Education and Training Committee (ETC), Professional Body Forum and the EDI Forum.

We will be using these interactions to inform the next stage of our review – formulating our proposals. This stage of the review will include identification and convening of expert panels and presentation of our initial proposals to the ETC. We will also begin drafting an equality impact assessment (EIA) of the standards and we will further engage stakeholder groups.

### *Equality, Diversity and Inclusion activity*

Now our EDI data for registrants is at 99% we are able to start the analysis of the impact of our regulatory functions on different groups. We have supported the work to look at understanding who is more or less likely to be involved in our fitness to practise processes and if any groups of international applicants are more or less likely to be successful in their application to join the Register. We continue to develop a policy for an organisation-wide approach to provide support and adjustments for people who need them.

On 15 July we held a meeting of our external EDI Forum, where registrants and their professional bodies meet with the HCPC to discuss EDI issues, and to provide input and challenge on work that requires a specific EDI consideration. At this meeting, we shared the Council's decision on the proposals to revise our approach to evidencing English language standards proposed, discussed the impact of AI on different groups of people who share protected characteristics, and sought feedback on the explanatory materials that support the revised standards for conduct, performance and ethics.

## **6. Insights and Analytics**

The data sharing agreement with the Chartered Society of Physiotherapy (CSP) was signed off and the Insights and Analytics team duly supplied an anonymised dataset to the CSP. The CSP dashboard was due to go live at the end of June. The Insight and Analytics team finalised a report on the reasons why registrants leave the HCPC Register, which will be published in due course. We will keep the Council updated on progress.

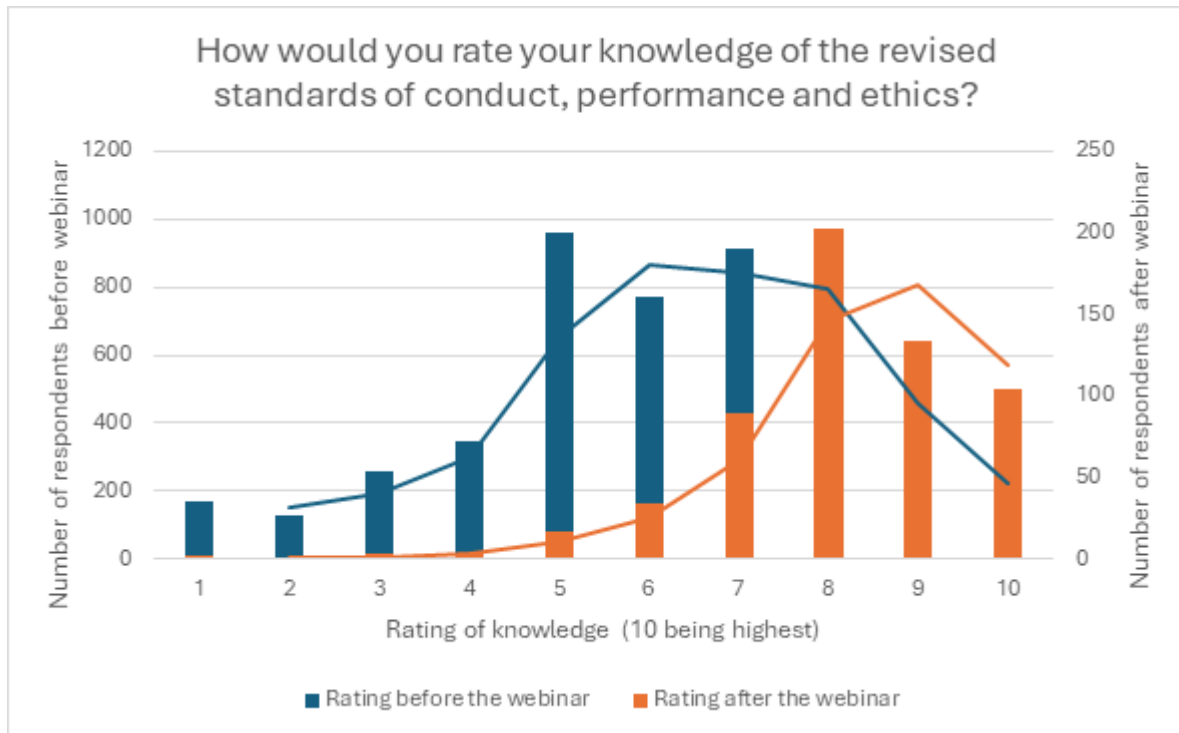
## **7. Professionalism and Upstream Regulation**

We completed the programme of four #myhpcstandards sessions that were designed to support registrants to understand and achieve the updated standards of conduct, performance and ethics, which come into effect on 1 September 2024. Just over 1,500 registrants attended the live webinars, which included registrants from each profession and each UK country. Two of the sessions will be repeated in September and recorded versions will be made available as a resource.

The aim of the sessions was to increase registrants understanding of the updated standards of conduct, performance and ethics related to the topics of the webinar. We tested this by asking 'how would you rate your knowledge of the updated standards of conduct, performance and ethics?' before (blue) and after (orange) the sessions. The graph below shows the distribution of registrants (numbers on the



side) scores. The graph shows a clear shift towards the higher scores of knowledge after attending the session.



## 8. Resources

The fees consultation has recently concluded and we have prepared further advice for the Council on the next steps in the process, which is separately on the agenda. Teams across the HCPC have been contributing to preparation of the draft 2023-24 annual report and accounts. Audit fieldwork by the external auditors is under way and the latest draft of the report will shortly be circulated to the Audit and Risk Assurance Committee, in line with the timetable for the accounts to be laid in October 2024, subject to the parliamentary timetable.

HR have provided support to the restructure of the Registration department, as well as supporting FTP and other teams in recruitment to permanent vacancies. Finance have successfully completed the first full month-end exercise using the new Business Central system; the latest finance report incorporates a number of new graphs and other visuals enabled by Business Central, which aim to set out trends and issues more clearly.

Work is under way on the next stage of the work on implementing the regulatory systems technology road map, following the Council's discussion at its last meeting, with detailed investment plans being prepared for the ELT. The Business Change team are also coordinating work on a range of other priority projects, including FTP frontloading and developing the future partners operating model. IT are working on a range of project and ongoing priorities, including further strengthening our cyber defences and preparing to roll out an upgraded intranet in late July, in partnership with the Communications team and content owners across HCPC.

**Appendix A - Chief Executive's external meeting schedule covering 24 May 2024 – 17 July 2024**

Nursing and Midwifery Council (NMC) – Andrea Sutcliffe, Chief Executive	24 May
Chief Executives of Health and Social Care Regulators Board meeting (CEOB)	31 May
HCPC Fitness to Practise Improvement Board meeting	13 June
Chief Executives of Health & Social Care Regulators Steering Group (CESG)	28 June
Ruth Crowder, Chief Allied Health Professions Adviser (Wales); Delia Ripley, Acting Chief Scientific Adviser for Health (Wales)	3 July
Professional Standards Authority (PSA) - Alan Clamp, Chief Executive	10 July
Dr Adrian Whittington - National Clinical Lead for Psychological Professions, NHS England	17 July