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Audit Committee, 28 November 2013

BSI ISO 9001:2008 AUDIT REPORT

## **Executive summary and recommendations**

### **Introduction**

BSI audited HCPC on the 7 October 2013, as the first audit of the new three year audit cycle across the whole organisation.

The Registrations department were audited (UK Applications process, new employee training and monitoring), along with Policy & Standards, HR Partners (Partner validation), HR Employees (Staff development & training). All areas had been internally audited in advance.

No non-conformances or observations were recorded.

HCPC have been recommended for continued registration.

### **Decision**

EMT is asked to note the report.

### **Resource implications**

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None

### **Financial implications**

None

### **Appendices**

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**BSI November 2013 AUDIT REPORT, ISO9001:2008.**

### **Date of paper**

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8 October 2013



# Assessment Report.

## Health & Care Professions Council

## Introduction.

This report has been compiled by Ali Mian and relates to the assessment activity detailed below:

Visit ref/Type/Date/Duration	Certificate/Standard	Site address
7885597 Continuing Assessment (Surveillance) 07/10/2013 1 day(s) No. Employees: 200	FS 83074 ISO 9001:2008	Health & Care Professions Council Park House 184 Kennington Park Road London SE11 4BU United Kingdom

The objective of the assessment was to conduct a surveillance assessment and look for positive evidence to ensure that elements of the scope of certification and the requirements of the management standard are effectively addressed by the organisation's management system and that the system is demonstrating the ability to support the achievement of statutory, regulatory and contractual requirements and the organisation's specified objectives, as applicable with regard to the scope of the management standard, and to confirm the on-going achievement and applicability of the forward strategic plan and where applicable to identify potential areas for improvement of the management system.

The scope of the assessment is the documented management system with relation to the requirements of ISO 9001:2008 Standard and the defined assessment plan provided in terms of locations and areas of the system and organisation to be assessed.

## Management Summary.

### Overall Conclusion

The objectives of this assessment have been achieved.

I would like to thank all the audit participants for their assistance and co-operation which enabled the audit to run smoothly and to schedule.

Based on the objective evidence detailed within this report, the areas assessed during the course of the visit were found to be effective.

There were no outstanding nonconformities to review from previous assessments.

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

## Areas Assessed & Findings.

### Registrations UK :

This area had very clearly defined reporting requirements and time scales for implementation embedded in the operational processes. There was clear evidence of document validation at each stage.

The following Registration was sampled on the NetRegulate system which is used to support all applicable Registrant details and their Registration status including including DOB, address details, Certified documents, ID, Approved Programme on Electronic Pass List, qualifications, Character References:-

- Physiotherapist Reference AA570936.

The process is carefully controlled using software records to track actions and progress. Target timescales have been put in place for acknowledgement of applications and for progress of the application. The process is monitored via the dedicated resource in place 'Registration Trainer' undertaking controlled Quality Checks (100% for New Starters and a sample selection of 7 forms for experienced staff members).

The following records/documentation was sampled to confirm procedural compliance:-

- Internal Audit Reports dated 13.02.13 and 01.10.13.
- 20131001 Registrations UK Application Process Flow Chart.
- Weekly Schedule 07.10.13 - 11.10.13.
- NetRegulate.
- UK Applications Received Log.
- Electronic Pass List.
- UK Verification.
- Registration Cover Sheet.
- Daily Archiving Spreadsheet.
- Crystal Report.
- UK Application Training Manual Version 4 dated July 2013.

Clear evidence of application of the plan, do, check, act cycle was seen and a clear team structure is in place. Consideration has been given to the monitoring arrangements in place to ensure that processes are working as planned and these checks routinely take place due to the high workload. Records of these checks are in place and form an input to process performance.

**Policy :**

This department appears to fit very well with the plan, do, check, act cycle underpinning ISO 9001:2008. Most of the work undertaken by this team of four is done on a project basis and as such more flexibility is built into the system. Monitoring of performance is undertaken through ongoing communication relating to both progressing and calibre of work. The ultimate check phase comes through approval by Committee, which is recorded in the minutes of their meetings.

Clear links were noted between Corporate Strategy and the Work Plan drawn up by the Policy Department. The following records/documentation were sampled as part of today's assessment:-

- Internal Audit Report dated 13.09.13.
- HCPC Consultation and Publications Legal Sign Off Process as set out in Health and Social Work Professions Order 2001.
- Work Plan Projects Summary 2013 - 2014.
- Consultation on HCPC Registration Fees (Consultation Closed 10.07.2013 - 01.10.2013) including Draft Fee Reviews, Outcomes of Consultation on Registration Fees and Rules, Analysis of Responses, Statutory Rules as prescribed in legislation.
- Fees Review Consultation Response Document.
- Consultation on Service User Involvement in Education and Training Programmes - Consultation Responses and Decisions.
- Consultation List last updated January 2013.

The process works well and the staff member was experienced and knowledgeable in the role.

**HR/Partner Validation :**

The Partners Recruitment, Partner Performance Assessment and Partner Training processes were sampled at random using recent examples of work and these appeared to function effectively. Much effort has been put into ensuring the document workflow processes on the quality intranet are kept up to date and key risk points were assessed within each area to ensure the relevant checking level is in place to mitigate the risk of any problems arising. Any issues which do occur are carefully investigated so that improvements can be made and this process appears to work well.

Evidence seen:-

- Internal Audit Report dated 11.09.13.
- 20131002HRP - Partners Recruitment Flow Chart.
- Partner Recruited as Visitor - Education Department including verification of Partner Application Form, Initial Offer Letter. Recruitment Documentation including eligibility to work (ID Check), Interview Notes (competency based), Internal Audit process, Reference Requests, Partner Services Agreement, Amendment on Agreement.
- 20131002 Partner Performance Assessment Process Flow Chart.
- Partner Appraisal Documents.
- Panel Member Performance Observation.
- Self Assessment Submission.
- Renewal Scoring.
- 20131002HRP - Partner Training Flow Chart.
- PM Training Delegate Lists 2013 - 2014.
- Bond HR Professional including a review of Training History.

Overall, there are robust processes and guidelines in place and requirements are clear and unambiguous.

**Staff Development and Training :**

The organisation has an established HR and Training function. The organisation has determined the resources necessary and regular reviews of the organisational structure take place to ensure the business can continue to operate in an effective manner.

Staff training and development processes were assessed for effectiveness and these appeared to meet the requirements of the quality management system. Annual Performance Development Reviews are managed through the HR team and these include an evaluation of training undertaken to plug any competence gaps identified.

Evidence seen:-

- Internal Audit Report HR dated 27.09.13.
- HCPC Organisational Training Plan 2013 - 2014.
- APDRs Received 2013.
- Training Needs Analysis 2013 EMT.
- APDR Form 2013 - 2014.

**Assessment Participants.**

On behalf of the organisation:

Name	Position
Roy Dunn	Management Representative
Tom Berrie	Information Service Manager
Richard Houghton	Head of Registrations Department
Dushyan Ashton	Customer Services Manager
Adam Mawson	Registration Trainer
Michael Guthrie	Director of Policy & Standards
Hayley Graham	Partner & HR Manager
Georgia Akuffo-Kumih	HR Business Partner

The assessment was conducted on behalf of BSI by:

Name	Position
Ali Mian	Team Leader

## Continuing Assessment.

The programme of continuing assessment is detailed below.

Site Address	Certificate Reference/Visit Cycle	
Health & Care Professions Council Park House 184 Kennington Park Road London SE11 4BU United Kingdom	FS 83074	
	Visit interval:	6 months
	Visit duration:	1 Days
	Next re-certification:	01/04/2013

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

# Certification Assessment Plan.

HEALTH-0047125084-000|FS 83074

		Visit1	Visit2	Visit3	Visit4	Visit5	Visit6
Business area/Location	Date (mm/yy):	10/13	04/14	10/14	04/15	10/15	04/16
	Duration (days):	1.0	1.0	1.0	1.0	1.0	1.0
Education				X			
Communications						X	
Customer Services						X	
Finance						X	
Fitness to Practice					X		
HR/Partner Validation		X					
Management System Organisation and Review			X		X		X
Policy		X					
Preparation for Strategic Review						X	
Purchasing & supplier evaluation				X			
Registrations Grand parenting					X		
Registrations International			X				
Registrations UK		X					
Secretariat				X			
Senior Management Interview							X
Staff development and Training		X		X			
Strategic Review							X
Work Environment and Infrastructure			X				



## Next Visit Plan.

### Visit objectives:

The objective of the assessment is to conduct a surveillance assessment and look for positive evidence to ensure the elements of the scope of certification and the requirements of the management standard are effectively addressed by the organisation's management system and that the system is demonstrating the ability to support the achievement of statutory, regulatory and contractual requirements and the organisation's specified objectives, as applicable with regard to the scope of the management standard, and to confirm the on-going achievement and applicability of the forward strategic plan.

The scope of the assessment is the documented management system with relation to the requirements of ISO 9001:2008 Standard and the defined assessment plan provided in terms of locations and areas of the system and organisation to be assessed.

Date	Assessor	Time	Area/Process	Clause
28/04/2014	Assessor 1	09.30	Opening Meeting and organisational update	
	Assessor 1	09.45	Management System Organisation and Review	
	Assessor 1	11.00	Registrations International	
	Assessor 1	12.15	Lunch	
	Assessor 1	13.15	Work Environment and Infrastructure	
	Assessor 1	14.30	Report Preparation	
	Assessor 1	16.00	Closing Meeting	

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

## Notes.

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

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