Health Professions Council — 20 May 2009

Departmental Work Plans

Executive summary and recommendations

Introduction
The HPC's eleven work plans for 2009 – 2010 has been separately circulated.

Decision
The Council is requested to note the document. No decision is required.

Background information
none

Resource implications
None

Financial implications
none

Appendices
Individual work plans

Date of paper
30 April 2009

BUSINESS PROCESS IMPROVEMENT WORKPLAN 2009-10

ROY DUNN

BUSINESS PROCESS IMPROVEMENT Work plan 2009-10

Roy Dunn – Head of Business Process Improvement

Operations Directorate

Introduction
Business Process Improvement maintains develops and promotes the Quality Management System and information reporting services used by HPC. Management Reporting is carried out, as are ad-hoc reporting and data extraction for the business. Business Continuity and process improvement are also developed and maintained. Equality & Diversity processes are monitored within Quality audits. Information Security will be overseen by Business Process Improvement and reported to the Audit Committee.

Business Process Improvement also reports to the Finance and Resources Committee.

This document
This document has been drafted to set out work priorities for the financial year April 2009 – March 2010, and to provide a basis against which the work of the Business Process Improvement function can be planned and measured.

Resources
The Business Process Improvement consists of 2 employees:

Roy Dunn	Head of Business Process Improvement
Tom Berrie	Information Services Manager
Cherise Evans	PA to Director of Operations (part-time)

Tasks and Projects completed in 2008-9
HPC successfully maintained its ISO 9001:2000 certification throughout the 2008-9 audit period. HPC were audited twice by BSI.

Significant refocus on Risk based internal audits resulted in major work around Information Security, including follow up of the Poynter Review into the HRMC data loss in 2007; and an analysis of the HPC's response to the CHRE report on the Nursing & Midwifery Council. Poynter Review work resulted in a full cross organisational review similar to that for the original CHRE NMC report. This became a significant piece of work over the course of the year, resulting in a paper to Audit and Finance & Resources committees.

ISO9001:2000 "customer service" survey
An internal survey of key process stakeholders was undertaken over summer / autumn of 2008 to evaluate opinions on the usefulness or otherwise of the evolving Quality Management System. This covered sources of information, reasons for support of the audit and ISO process.

A presentation to EMT and All Employees was provided to publicize changes to the way the management system is maintained and used.(January 2009)

PCI DSS Compliance – Credit card industry standard
This project breaks down into several discrete sub projects.
1. To map existing PCI impacting processes
2. To secure existing hard copy data. (one piece cartons with security bar coded plastic single use tags).
3. An IT project to extract any non compliant data within the registrations system "NetRegulate" is due 3rd quarter of 2008-9.
4. To modify existing business processes to ensure future data capture is compliant with PCI DSS v1.2
5. Redrafting the International/Grandparenting application fee payment page.

Disaster Recovery & Business Continuity
A cross HPC DR test took place in May 2008, taking most of EMT off site to our DR recovery centre in Uxbridge. The test was attended by the HPC President, two Council members and HPC's Parliamentary agent.
IT systems were established, and potential improvements to the DR plan discussed. The plan has since been updated and published. (December).

Departmental tests have taken place with the Education Department, in November 2008, and a Registrations Department test is scheduled for January 2008. Tests with Communications and Fitness to Practice will be attempted if time allows within work plans.

Archiving of paper records
A survey of possible archiving suppliers has been completed, and 5 companies were invited to tender using the generic contract as a basis for discussion of terms and conditions. Three responded positively.

An archiving tender group has been established within HPC including the key user departments (FTP, Registrations, Secretariat, HR).

As soon as legal guidance is provided enabling contract negotiation to be concluded, a supplier will be selected and the move of the existing archive planned.

Risk Register maintenance
In the final quarter of the year BPI took over day to day management of the HPC Risk Register, with a modification to the reporting format delivered for the first Audit committee meeting in January 2009.

Departmental Training in 2008-9
Tom Berrie trained on the ISO9001:2000 Internal Auditor course with BSI in July 2008 and Cherise Evans trained on the ISO9001:2000 Internal Auditor course with BSI in March 2009

Roy Dunn trained on Information Security Management principles with Ultima Risk Management in March 2009
2009-10 Activities planned

1) ISO9001:2000   Maintenance and raising the profile of Quality
**   Migration to 9001:2008**
[Risks 2.3, 9.1 Quality Management]
The ISO9001:2000 standard to which we are currently certified is being replaced. The updated standard ISO9001:2008 was published in December 2008, and changes to HPC's QMS will be made early in late 2008-9 early 2009-10 BSI will audit against that updated standard in April 2009.

Business Process Improvement aim to undertake an internal audit every month over 2009-10. This will be a combination of Departmental audits, risk based audits and across company audits.

2) Improvement to Quality Management System software [Risks 2.3, 9.1, Unacceptable service standards, maintenance of ISO registration]
The Quality Management System is currently maintained via Microsoft Front Page. The software is no longer sufficient for purpose. Replacement with Quality Workbench is proposed.

Costs for the package for the first year are £5000. There will be an ongoing support cost of £870 per year going forward.

This project was expanded in February 2009 to include ensuring the Intranet, Springfield and Quality Management Systems are integrated into one navigable whole, by January 2010. No new resources have been allocated to this project.

3) ISO27001 & BS25999 standards + PCI DSS Compliance – Credit card industry [Risks 2.1, 5.3, 15.7, 17.1, 17.2, 17.3, 17.4; Data Security]
BPI aim to map processes and record our adherence to Information Security and Business Continuity standards. Whilst having the standard assists us in insuring we are secure, this also demonstrates we are following best practice for an organisation of our size and operational remit.

Our consultant (John Gillingham) could carry out the work on our behalf and integrate Business Continuity and Information Security to our existing Management System over 10 days work.

Costs to achieve the two standards together are lower than attempting them separately. Consultancy with John Gillingham, is projected at £11,750 plus expenses.

In 2010-11 HPC may attempt certification against ISO27001 and BS25999.

Monitoring HPC's compliance against the credit card industry standards will continue via process audit and monitoring for changes in the PCI standard.

4) Update and increase licensing for Geographical mapping system software GEOPLAN

HPC currently have 2 unsupported licences for the mapping system Geoplan purchased in 2006. This software is used to plot locations of registrant and applicant populations on UK maps. It has been used effectively in the analysis of CPD data.

Software cost and initial support will be £1000 incl vat.

5) Selection and purchase of enhanced statistical reporting tools [Risks 2.3, 9.1, Unacceptable service standards, maintenance of ISO registration]
HPC currently use a combination of Excel, Crystal Reports and DBVisulizer to extract and report on trends in data. A more sophisticated tool is required to enable more robust analysis using standard statistical techniques. This includes Root Cause Analysis, a requirement for maintaining ISO9001:2000/2008 under 8.2.1, 8.4 and 8.5.1

Minitab is a tool that is designed to match the requirements of Six Sigma, a statistically based improvement technique. The cost of a single Minitab licence is £749 + VAT = £880 plus support.

6) Disaster Recovery / Business Continuity – ongoing development, testing and training [Risks 2.1, 2.5, Business Continuity]
Over the past 5 years HPC have developed comprehensive BS25999 compatible disaster recovery plans.

Business Impact Analysis is required for each major function of HPC, to reflect changes to process requirements that must be input to the plan on an ongoing basis.

HPC have up to 3 days testing at ICM/NDR in the coming financial year. This must be taken in one tranche. A series of groups with be trained and tested over this time.

7) CRM project – HPC wide major project [Risks 2.1, 5.3, 15.7, 17.1, 17.2, 17.3, 17.4; Data Security]
A detailed analysis of the options for using CRM at HPC will be produced over 2009-10. CRM is suggested as a potential requirement from the Poynter Review into information and data security.

8) Queen's Award for Enterprise
Documentation around obtaining the Queen's Award for Enterprise may be completed in late summer 2009, for submission in October with the aim of gaining the award. This is based on measurable and verifiable improvement to a product or service.

The Registrations department have agreed to participate.

No costs have been assigned to this project, as they are likely to be internal only. Should HPC achieve this award, some costs could be incurred in small scale publicity effort in communications.

9) Departmental training
Additional training to allow us to progress the management of HPC's take up of either of the new standards are as follows.

Business Continuity training to BS25999
Information Security training to ISO27001

Quality Management

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations February 2009	Likelihood before mitigations February 2009	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2009		RISK score after Mitigation September 2008
9	Quality Management	9.1	Loss of ISO 9001:2000 Certification (becomes 9001:2008 in 2009)	Director of Operations, Head of Business Improvement	4	3	12	Regular & internal audits	QMS standards applied across HPC	Management buy - in	Low		Low
			Links to 2.3, 10.3										
17	Data Security	17.2	Paper record data security	Head of Business Improvement	5	2	10	Use of locked document destruction bins in each department. Use of shredder machines for confidential record destruction in some depts e.g. Finance	Data protection agreements signed by the relevant suppliers. Dept files stored onsite in locked cabinets.	Regarding Reg Appln forms processing, employment contract includes DPAgreement	Low		

Communications Workplan 2009 – 2010

Contents

Introduction

The communication workplan for 2009 - 2010 details our main areas of work and sets out how we will work towards achieving the objectives of the communications strategy.

The communications department is both proactive and reactive in its work and requirements may change, particularly in light of business needs. Significant issues may arise during the course of the year and the department will need to be flexible in the delivery of its workplan in order to respond accordingly.

This document

This document is divided into several sections. It details our resources, the communications tools we will use as well as our priorities for the year and how our activities link to the communication objectives set out in the communication strategy.

Communications Department

The communications department consists of eight employees as follows:

Jacqueline Ladds   Director of Communications
Daniel Knight   Team Administrator
Susan Carini   Events Manager
Victoria Smyth   Communications Manager (currently on maternity leave)
Ebony Gayle   Communications Manager (to cover Victoria's maternity leave)
Tony Glazier   Web Manager
Jonathan Jones   Publications Manager
Nina Blunck   Public Affairs Manager
Mark Potter   CPD Communications Manager

The Director of Communications is responsible for the overall management of the team, the day to day running of the department, the development of the strategy and workplan and the development of new projects.

The Team Administrator provides support to the department across all its activities, particularly booking travel and accommodation, responding to requests for information and publications and the organisation of all employee events.

The Events Manager organises all the HPC's internal and external events, particularly the Listening Events, our attendance at exhibitions, all employee awayday and the co-ordination of the external presentation and talks programme.

The Communication Manager leads on our public facing campaigns, press and media activity and the development of the internal communications function.

The Web Manager is responsible for maintaining and developing the HPC website, the hpcheck microsite as well as the Council extranet and employee intranet.

The Publications Manager leads on all aspects of the publications process, including the visual identity and house style, provides support to departments in the production of

publications and produces the registrant-facing HPC In Focus newsletter and the employee facing HPC Update newsletter.

The Public Affairs Manager is responsible for developing and co-ordinating communications with a range of stakeholders and opinion formers, in particular government and is also responsible for devising and co-ordinating communications programmes with key stakeholder audiences including employers and professional bodies.

The CPD Communications Manager is responsible for managing a range of communications initiatives designed to inform and educate registrants and employers of the HPC's CPD audit requirements. This includes a programme of talks, presentations and workshops, working with professional bodies and raising awareness of the CPD standards through the professional press and the literature we produce.

Communication Activities

There are eight main areas of work undertaken within the Communications Department. The following paragraphs summarises each.

The Health Professions Order 2001 sets out our statutory responsibility to inform and educate the public and registrants of the work we do. We also have a statutory duty to consult other stakeholders, for example when setting standards or issuing guidance.

In order to fulfil our responsibility to inform the public about our work, members of the public should have access to information which promotes the importance of using a regulated health professional, and how to check as well as how to make a complaint when things do go wrong. We take a proactive approach when communicating with the public and much of this is undertaken through the public information **campaigns** we organise.

The **media** is an important tool, particularly in promoting our work through the national, regional and professional media and provides opportunities to promote the HPC and our public protection role. We have an ongoing contacts programme to build relationships with key journalists, we issue media alerts and news releases based on the Fitness to Practise hearings to promote our public protection role through the regional and national media, we have an ongoing programme of releases and articles to the professional press and we issue general organisation wide press releases on a range of issues.

The **web** is an important method of providing comprehensive information to all our audiences in a cost effective and efficient way. We have the main www.hpc-uk.org website which receives approximately 80,000 hits per month, the public facing www.hpcheck.org microsite as well as the Council extranet and the employee intranet.

The **publications** we produce provide an important source of information to all our audiences. Brochures include the Standards of proficiency for each profession, the Standards of conduct performance and ethics as well as the three corporate annual reports and information and guidance on registration, approvals and monitoring, fitness to practise and continuing professional development (CPD).

Events are an increasingly important opportunity for us to engage face to face with all our audiences and provide opportunities to present information about the HPC as well as listen and seek views. We have a programme of Listening Events across the UK which are focused at communicating with our registrants, we exhibit at a range of external conferences

and have an active talks and presentation programme where HPC employees have speaking opportunities at key conferences and events.

Employees play an active role in getting messages to our audiences and should be considered as ambassadors for the HPC. Our **internal communications** programme includes the employee intranet, an annual all employee awayday, bi-monthly all employee briefings, which are led by the CEO, team building events in the summer and winter and a bi-monthly newsletter, HPC Update.

In carrying out our UK-wide role we work closely with a number of other organisations, including professional bodies, government, employers and patient and consumer groups. We have already established good working relationships and our **public affairs** activities include building relationships with parliamentarians through face to face meetings and briefings and the dissemination of information to constituency offices to ensure they are informed of our public protection role. We are also developing a co-ordinated approach to stakeholder activities, focusing on employers and professional bodies through the development of issue specific events, targeted briefings and dedicated information on the website.

We also support organisation-wide **projects** by delivering effective communication plans and activities for projects which may be major areas of change or development for the organisation. Major projects which require communications input include continuing professional development audits; the regulation of new professions, registration and renewals, the online renewals project and the 2009 registration fee increase.

Priorities and issues for 2009 – 2010

The priorities for 2009 – 2010 have been put together in order to build on those of the previous financial year, and also to respond to the HPC's bi-annual opinion polling. 2007's opinion polling, undertaken by Ipsos MORI, included seeking information from registrants, members of the public and stakeholders, and hence provides a broad range of opinions and inputs from which issues and activities have been drawn.

Registrants
Key messages to communicate to registrants this financial year include the ongoing need to communicate the CPD standards and audit requirements, and the benefits of regulation. Informing registrants about our relationship with the professional bodies was another area that came up from the opinion polling, as was the importance of ensuring registrants know about our public information campaigns. It is evident from the research that informing the public is key, not only because it helps to raise awareness, but also because being seen to do so is another way of raising our 'credibility' with registrants, and helping registrants to understand the importance of regulation, including how registration fees are spent.

Another important message for registrants is the changes to HPC arising from the White Paper, including the new structure of the Council.

Areas of the workplan below which address these issues include the work of the CPD Communications Manager, the content of Listening Events (which has been and will continue to be more specifically refined to address the areas registrants identify as particularly useful), media work with the professional journals, our increased presence at profession-specific conferences and exhibitions and public affairs work with the professional bodies.

Key stakeholders

Feedback from the opinion polling was generally positive, with good feedback from key stakeholders about the organisation generally, and many demonstrated a good understanding of our role. Many believed we are going in the right direction, and that the way forward is for HPC to expand and to regulate more professions. Our overall objectives of influencing the regulatory agenda is also important here, both in contributing to cross-regulatory work as well as sharing our expertise with others where appropriate.

Interestingly here, as with registrants, work with the public was emphasised as a key part of our future work, and a way to ensure we are seen by key stakeholders to be fulfilling our role. This group of stakeholders also emphasised the need to communicate more with registrants to promote the benefit of regulation and understanding of the HPC.

The workplan below addresses these areas largely through the campaigns and public affairs areas of work. In particular, the stakeholder work outlined for the coming year with professional bodies, employers, and other stakeholder groups, will be an important way of responding to the feedback obtained.

Members of the public
A small increase was noted in the percentage of members of the public who have heard of the HPC, from 13% two years ago to 15%. There remains the need to do more to raise awareness with this group, in particular our work needs to be targeted and focused to make the most effective use of our available resource.

The majority of the public expressed a preference for information to be provided to them in GPs' surgeries, or on the internet. The former preference was further reinforced by the information that the majority of members of the public stated that they would see a health professional through referral from their GP.

The workplan addresses these areas largely through the Campaigns areas of work, particularly the ongoing dissemination of public-facing literature, targeting GPs and other patient and public facing organisation (eg LINKs and PALs) and increasing our presence on the internet.

Issues and priorities conclusion
Overall, drawing from the findings of the Ipsos MORI polling, our focus for the 2009 - 2010 workplan will continue to be our public information campaigns and the work we are undertaking to raise awareness amongst the public of the HPC and its role and the importance of using a registered health professional. We will be undertaking campaigns targeted at specific groups in order to maximise our effectiveness. We will also continue to focus on our communications with registrants, in particular promoting the benefits of registration and explaining the requirements of the CPD audits. A further key area of work for 2009 – 2010 will be to continue to develop our presence in Scotland, Wales and Northern Ireland.

Achieving the communication objectives in 2009 - 2010

The Communications Strategy identifies five overall objectives in our communications work. In 2009 – 2010 we will undertake the following activities in support of these objectives.

1. To raise awareness and understanding of the HPC's role in regulation across all our audiences
2. To extend our reach to the public enabling them to access easily information about the HPC

3. To influence the regulatory agenda through ongoing dialogue and engagement with key stakeholders
4. To engage with our registrants to ensure they understand the benefits of regulation, the work of the Council and what is required of them
5. To further strengthen and ensure effective internal communications within the organisation

A summary of our approach to achieving the communication objectives is set out in the table on the following pages.

Monitoring and evaluating the communications workplan

The activities in the communications workplan will be continuously monitored by the communications department and progress against the plan will be reported to the Communications Committee.

A more detailed approach to measurement and evaluation is set out in the communications strategy 2007 - 2011

Objective 1: to raise awareness and understanding of the HPC's role in regulation across all our audiences, we will:

	Main activity	Description	Key deliverables	Timescale	Employees involved
1.1	Manage the publications process and support departments in the production of a range of publications	Liaise with departments including FTP and Education on annual reports. Manage the publications process, advise on content of publications and edit, proof, gain feedback from public/patients/stakeholders where relevant and ensure effective dissemination.	Present a positive image of the HPC and promote understanding of its role, Increased transparency and accountability and improved profile with stakeholders	Ongoing	Publications Manager
1.2	To identify need and produce new publications in conjunction with other departments	What is the HPC, guide to filling in your cpd profile, cpd review report, organisation review document, research and policy updates (x6)	Improved understanding of HPC requirements Increased accessibility	Ongoing	Publications Manager
1.3	Continue to distribute publications and brochures on request and ensure availability of publications in large print, Braille, Welsh etc	Respond to requests within reasonable timescale, log requests, maintain stock levels	Improved understanding of HPC requirements Increased accessibility for different audiences	Ongoing	Team Administrator, Publications Manager
1.4	Develop the website and its content by working with departments to support their requirements and identify opportunities for development	Develop website by in particular improving the navigability, and search function. Add sections for specific audiences, eg: new registrants, and students. Develop ideas, proposals and prioritise	Increased understanding of the HPC	Ongoing	Web Manager

Objective 1 (continued)

	Main activity	Description	Key deliverables	Timescale	Employees involved
1.5	Maximise the opportunities to increase coverage about the HPC in the national, regional, professional and consumer press	Continued implementation of the department's media strategy through - work with departments, identifying news stories, writing articles and issuing releases - implementation of contact programme with journalists, ensuring relevant HPC staff fully media trained and continued development of media infrastructure (eg media lists, coverage reports) in place to support this work - development of joint media campaign with professional body to raise awareness of protected title	Coverage reflects better understanding of issues by journalists and supports our leading regulator role Improved public understanding of the titles we protect	Ongoing	Communications Manager, Communications Officer, Administrator
1.6	New professions	Implement communications project plan across all communications functions, publications, web, media, events, public affairs	Communication of registration requirements and public awareness of the regulation of new professions	Ongoing, but specific work dependant on the passage of legislation White Paper timetable	Director/all

Objective 2: to extend our reach to the public enabling them to easily access information about the HPC, we will:

	Main activity	Description	Key deliverables	Timescale	Employees involved
2.1	Continue to promote the Fitness to Practise hearings	Issue weekly alerts, write and issue release for suspension and strike off, focus coverage in local and regional media List hearings and include case studies in HPC In Focus	Increased level of coverage in regional media and increased promotion of public protection role	Ongoing	Communications Manager/ Communications Officer
2.2	Ensure the continued dissemination of public information literature	x 2 GP waiting room distribution, x 1 PALs, and Wales Community Health Council distribution as well as research and determine viability of distribution to pharmacies, Citizens Advice Bureaux, LINKs and local authorities Continued promotion to registrants through A5 flyer in renewals, professional press, events	Promotion of public protection role -- focussed, cost effective way of reaching the public	July and January July Ongoing	Communications Manager
2.3	Promote "registered with the HPC" concept to registrants and ensure continued access and usage	Promote through existing channels, eg HPC In Focus, A5 renewals leaflet, Listening Events	Engaging with registrants and working with them to promote public awareness	Ongoing	Communications Manager

Objective 2 (continued)

	Main activity	Description	Key deliverables	Timescale	Employees involved
2.4	Continue internet and advertising presence through existing channels, eg Yell.com and develop new channels	Maintain a presence in Yellow Pages, renew Yell.com adverts and Google adwords Research websites where we should have a presence, make contact with relevant organisations	Continued reinforcement of public protection role	Ongoing	Communications Manager/ Communications Officer
2.5	Ensure GPs and referrers are informed about the HPC	Undertake research into best way to reach GPs, develop appropriate programme of communications based on research eg direct mail, referrers guide, conferences and events	Improved understanding of HPC's role	September	Director/ Communications Manager
2.6	Continue to participate in patient and public involvement activities through participation in the joint UK heath regulators PPI group	Undertake joint activities as set out in the agreed PPI group workplan, including joint leaflet, development of website	Promotion of public protection role and raised awareness of HPC	Ongoing	Communications Manager

Objective 3: to influence the regulatory agenda through ongoing dialogue and engagement with key stakeholders, we will:

	Main activity	Description	Key deliverables	Timescale	Employees involved
3.1	Develop HPC's profile in the home countries and devise channels of communication which ensure stakeholders are informed and fully aware of our work and role in healthcare regulation	Work with Policy, continue to research contacts and ideas, develop contact programme and encompass public affairs work across all stakeholder audiences, including Parliamentarians, employers, professional bodies and various health departments Undertake at least 2 visits to each home country for meetings with stakeholders and conference attendance	Improved understanding of the HPC's role in healthcare regulation	Ongoing	Public Affairs Manager
3.2	Continue to keep Parliamentarians informed and aware of our work and role in healthcare regulation	Contact and meeting programme, fringe speaking membership of the Health Hotel, participation in all three main political party conferences, written briefings – especially around new legislation, parliamentary roadshows and exhibitions, attendance and exhibitions at home country political party conferences, development of e-politix exposure and advertising/editorial/ interview opportunities opportunities in relevant magazines and publications and continued parliamentary monitoring	Raised awareness and improved signposting of our role in the future of regulation and public protection	Ongoing	Public Affairs Manager, Communications Officer

Objective 3 (continued)

	Main activity	Description	Key deliverables	Timescale	Employees involved
3.3	Continue to keep employers informed and engaged with the HPC across all activities and on specific issues	Programme of at least five Employer Events across the UK, communication in the form of letters and emails on key areas of importance such as renewal of registration, speaking engagements, exhibitions and conferences and rolling programme of news items in bulletins and on the website	Promote the HPC's key messages to employers, improved understanding of HPC's role and how we can assist employers	Ongoing	Public Affairs Manager, Communications Officer
3.4	Continue to keep professional bodies informed and engaged with the HPC across all activities and on specific issues	Rolling programme of meetings including annual meetings on renewals and cpd, ongoing communication and updates on key issues, attendance and speaking engagements at conferences and exhibitions, ongoing articles and news stories in professional body journals, newsletters and website, advertising/editorial opportunities in relevant journals and publications	Promote the HPC's key messages to professional bodies and therefore registrants Improved relationship and understanding of the role of the HPC and increased ways of working together	Ongoing	Public Affairs Manager, Communications Manager
3.5	Ensure patient representative groups, advocacy groups and service users are informed and engaged with the HPC	Research contacts (eg LINKs) and ideas (eg local authorities), implement contact programme as required, attendance at relevant events and conference, promotion of public information materials	Improved understanding of HPC's role	Ongoing	Public Affairs Manager, Communications Manager

Objective 4: to engage with our registrants to ensure they understand the benefits of regulation, the work of the Council and what is required of them, we will:

	Main activity	Description	Key Deliverables	Timescale	Employees involved
4.1	Continue participation in external exhibitions by taking stands and researching new opportunities	Focus on professional exhibitions, research new conferences to attend, ensure literature and banners up to date and relevant, ensure right representation from HPC (eg Registrations, Fitness to Practise)	Communication of messages Opportunity to listen to feedback and raise HPC profile and present positive image	20 per year	Events Manager/ Communications Manager
4.2	Organise Listening Events across the country for registrants	Review presentation, develop interactive format, ensure UK-wide presence, source and brief panel, book venues, issue invitations and produce evaluation reports	Opportunity to listen to feedback Improved understanding of the HPC's role and activities	8 UK wide	Events Manager, Team Administrator
4.3	Continue to communicate HPC's work and activities in the professional press	With departments identify news/stories, issue releases, write articles. Issues to cover include fees increase, cpd audits, council appointments, registration and renewals and key projects and activities	Improved understanding of what we require of registrants and increased level of coverage	Ongoing	Communications Manager/ Communications Officer
4.4	Communicate with registrants through HPC In Focus, developing its content and circulation	Undertake development work across this year (re: content, distribution, media) Continue to work with depts on content and identify opportunities to increase distribution through for example adverts in professional journals, A5 flyer with certificates, sign up sheets at talks etc.	Better informed registrants	Six times a year	Publications Manager

Objective 4 (continued)

	Main activity	Description	Key deliverables	Timescale	Employees involved
4.5	Launch and maintain the information programme for students on HPC approved courses	Work with Registrations and Education Departments, identify needs of audience Implement new media including DVD/website, provide guidance for course tutors etc	Improved understanding of HPC requirements of registrants and stimulate debate about importance of registration	May 2009	CPD Communications Manager
4.6	Ensure registrants are aware of our continuing professional development audit requirements	Manage communications element of project plan, participate in project meeting, co-ordinate communications activity across team. Manage and undertake programme of presentations.	Communication of CPD standards and guidance to registrant and employers	April to July 2009	CPD Communications Manager/ all
4.7	Support the registration and renewals process	Liaise with registration regarding the ongoing renewal of professions' registration. Feed information into ongoing communications with employers and professional bodies. Ensure clear information provided online.	Communication of requirements, support lower lapse rates	Ongoing as professions renew	Director of Communications/ all
4.8	Communicate the 2009 registration fee rise	Manage communications element of project plan, including media, web and events where relevant	Clear communication to registrants of what fees pay for, and why independent regulation is important.	March 2009	Communications Manager/ all
4.9	Support the online applications and online renewals project	Manage communications element of project plan, participate in project group, input to the technical development of this project (Web Manager) and advise on design of the web pages as required (Publications Manager).	Communication to applicants and registrants about online facility.	Ongoing	Director of Communications/ all

Objective 5: to further strengthen and ensure effective internal communications within the organisation, we will:

	Main activity	Description	Key deliverables	Timescale	Lead
5.1	Organise all employee meetings	Set dates in advance, book council chamber and catering, organise programme of speakers, ensure correct set up on the day	Improved understanding of HPC's ongoing work and activities and the Council's direction	6 All employee	Team Administrator
5.2	Maintain the intranet ensuring it is up to date, business led and accessible	Liaise with departments re: currency of information, and updating information. Gain feedback from employees on content. Develop processes and content in response.	Provide information which enables employees to deal efficiently and effectively with enquiries	Ongoing	Web Manager/ Communications Officer
5.3	Organise all employee events	Set dates, book venues Agree format, issues invitations Evaluate	Improved internal communications and team building	Summer bbq Christmas dinner	Team Administrator
5.4	Organise the annual all employee awayday	Set dates, book venue Agree format, speakers, issues invitations Evaluate	Improved understanding of the HPC's strategic aims and direction	May 2009	Events Manager
5.5	Produce the all employee newsletter	Work with departments to collect copy, write and edit content, ensure printed for each all employee meeting	Improved understanding of cross departmental and organisational activities	Six per year	Publications Manager/ Communications Officer

2010 - 2011

Beyond the financial year 2009 – 2010, there are further objectives for our communications work, and these are set out below:

- Further communications work with hard-to-reach groups, building on the work we have done with older people. This could include work looking at communicating with people from black and ethnic minority communities, and different groups of disabled people.
- The on-boarding of new professions continues to be important, particularly in the light of the government's intentions as stated in the White Paper of February 2007. Communications activities will continue to play a vital role in the successful onboarding of new professions, communicating not only with aspirant professional associations, but also with future registrants, and with members of the public.
- Raising the HPC's profile in the home countries will continue to be an important focus for our work, including revisiting the question of whether we should have some kind of physical presence outside England, and if so what form this should take.
- Continuing to raise HPC's profile outside the UK, particularly with key audiences in the European Union, will also be a key future objective. Building on the various pieces of work already undertaken across the organisation, including by the Chief Executive, the Policy and Standards Department, and the Registration Department, it will be important to be involved in future pieces of European legislation at an early stage, in order to influence how they progress. Continued membership of the Alliance of UK Health Regulators on Europe provides a solid foundation for this work.

Risk

The key risks for HPC which relate to the Communications Department are failure to inform public, loss of support from the professional bodies, and inability to inform stakeholders following crisis. The management of these risks is inherent through the whole of the Communications workplan , but particularly through:

Campaigns and the Website
These activities help to inform the public and also help to raise our profile with the professional bodies. Likewise, the effective maintenance of the website, including the ability to update it remotely, helps to mitigate the risk of not being able to communicate with stakeholders after a crisis.

Public Affairs
This area of activity is important in indirectly raising our profile with the public (for example with members of the public who attend their MPs surgeries and may seek information on how to complain about the care they have received), but particularly important in developing our relationships with professional bodies.

Disaster Recovery
Although not situated in Communications, the HPC's approach to disaster recovery is an ongoing piece of work, and the disaster recovery plan is regularly reviewed and updated. Through the Executive Management Team, the Director of Communications contributes to its ongoing currency, and this provides an important safeguard against the risks posed to the organisation by any disaster occurring.

Education Department 2009 – 2010 work plan

Abigail Creighton, Director of Education

Contents

Introduction

The Education work plan details the main areas of work for 2009-2010 and sets out how the Department will develop, review and progress.

The work plan is underpinned by the Council's strategic intent and demonstrates how the Department's work continues to contribute towards the achievement of both the objectives of Council and the Education and Training Committee.

The Council's strategic intent

The Council's current strategic intent (2007 – 2011) identifies three core themes - (i) to improve (ii) to influence and (iii) to promote. Key areas of work across the organisation and within this work plan can be structured around these core themes.

The Council is currently updating their strategic intent. It is anticipated that the final document will identify the organisation's vision and key strategic priorities for 2009 – 2014. The draft document identifies six central objectives; all of which underpin and shape the key areas of work and priorities within this work plan. An example of draft objectives and links to this work plan is below.

1) To maintain and develop good governance during and after the restructuring of the Council
Example references in this work plan - risk register, departmental budget, departmental forecasting of operational processes, departmental training and new committee member training.
2) To maintain and develop efficient business processes throughout the organisation as it grows
Example references in this work plan – review standards, review processes, launch new guidance, partner training and ISO accreditation.
3) To increase understanding and awareness of regulation amongst all stakeholders
Example references in this work plan – publications, website, education seminars, partner training, participation in inter-regulatory and higher education forums and service user involvement.
4) To build the evidence base of regulation
Example references in this work plan – education seminars, annual report, service user involvement research and review processes.
5) To proactively influence the policy agenda on regulation reforms
Example references in this work plan – post registration qualifications, modernising scientific careers and new professions.
6) To ensure that our values and processes dovetail with the respective healthcare delivery agendas in each of the four home countries
Example references in this work plan – education seminars, annual report and participation in inter-regulatory and higher education forums

The Education Department

The Education Department's main responsibilities are:
- assisting the Council in approving programmes which health professionals must complete before they can register with us;
- assisting the Council in monitoring programmes which health professionals must complete before they can register with us;
- co-ordinating approval visits;
- co-ordinating annual monitoring assessment days;
- co-ordinating the consideration of annual monitoring submissions, by correspondence;
- co-ordinating the consideration of major change submissions, by correspondence;
- publishing visitors' reports from approval visits;
- publishing the register of approved programme;
- assisting in the selection and training of Partner visitors; and
- Liaising with education providers and education stakeholders.

This document

This document aims to set out the work priorities for the financial year April 2009 – March 2010, and provide a basis against which the work of the Education Department can be planned and measured.

This work plan attempts to show how the standard operational work and planned projects have been scheduled to ensure successful completion, given the resources and time restraints. The Education Department is both proactive and reactive in its work. As there is still a degree of uncertainty related to the regulation of practitioner psychologists and the transfer of hearing aid dispensers from the Hearing Aid Council the timescales have not been finalised at this stage. We will need to revisit and update this work plan to take these timescales into account once they are finalised. **The Department will therefore need to be flexible in the delivery of its work plan in order to respond accordingly. This document will be kept under review.**

Priorities 2009-2010

The main priority for the Department is the day-to-day operation of the approval and monitoring processes. Unlike the last two years, the majority of this year's work will focus on the preparation and expected transfer of practitioner psychologists and hearing aid dispensers' programmes onto our register of approved programmes and their incorporation into our approval and monitoring processes. The preparation stage of these transfers will include a significant communication and relationship building/management campaign. The real impact of the new programmes into our approval and monitoring processes will not be felt until the 2010-2011 and 2011-2012

academic years, which equate to the 2010-2011, 2011-2012 and 2012-2013 financial years.

This year, the Department will continue to participate in much of the education focussed work outlined in the Policy and Standards work plan. It is envisaged that there will be involvement in the ongoing discussions around post-registration qualifications, modernising scientific careers, the future regulation of psychotherapists and counsellors, the future regulation of acupuncturists, medical herbalists and traditional Chinese medicine practitioners, guidance on our health and character processes, guidance on conduct and ethics for students and the review of the new professions process.

This year a smaller, but still significant, part of the Department's work will cover planned projects. These planned projects are enhancement led projects and focus mainly on operational processes. Unlike the last two years, there will be fewer projects which focus on the more strategic and policy level. This is due to the prioritisation of resources on the work with new professions.

Resources

Financial resources

This work plan is based on the assumption of a team of 13 Education Department employees and a budget of approximately £750,000. The work plan assumes that the HPC is able to manage a maximum of 15 approval visits per month and monitoring relating to approximately 560 approved programmes at any one time. The underlying assumption is that the HPC approves pre-registration programmes in thirteen professions (increasing to fifteen by April 2010) and post-registration entitlement programmes in three areas. The work plan assumes that the practitioner psychologists' part of the register will open on 1 July 2009 and that the hearing aid dispensers' part of the register will open on 1 April 2010.

The budget of approximately £750,000 is based on an estimated 70 approval visit, 6 annual monitoring assessment days (with each considering an average of 33 audit submissions) and 70 major changes submissions. These predicted figures are based partly on the operational levels in the 2008-2009 financial year and partly on the expectation of approximately 80 approved programmes being added to our register of approved programmes for practitioner psychologists and hearing aid dispensers'.

The operational levels in the 2008-2009 financial year show that a pattern of less approval visits and more monitoring submissions is emerging. This is because the majority of our programmes are now approved and taking advantage of our open ended system of approval. This involves the use of our documentary monitoring processes, instead of routine cyclical visits, to inform us of changes to their programmes. In addition, the affect of the changes to our major change process in the 2007-2008 year are now being felt. The notification stage (which involves employees, but not partner visitors) acts as a filter mechanism, which means that whilst the number of queries about changes has increased over the last year, the number being categorised as major change submissions is consistent with previous years.

We expect that there are approximately 80 approved programmes being added to our register of approved programmes for practitioner psychologists and hearing aid dispensers. This represents an increase in the region of 20% in the total number of programme on the register of approved programmes. It is the total number of programme on the register of approved programmes, rather than the total number of registrants which determines the workload of the Education Department. It is envisaged that all these programmes will be recognised as approved programme and that they will all be subject to an approval visit over the next two-three academic years.

It should be noted that both our risk based approach to approval and monitoring and the unconfirmed dates for new professions transferring to our register continue to make it difficult to forecast precise numbers of visits and monitoring submissions in advance. The mismatch of the financial year and the academic year also continues to make it complicated to plan ahead.

Human resources

There are currently twelve employees in the Education Department:

Abigail Creighton	Director of Education	
Marva Stewart	Team Administrator	
Osama Ammar	Education Manager	(NNWI team)
Tracey Samuel-Smith	Education Manager	(SS team)
Paula Lescott	Education Officer	(NNWI team)
Brendon Edmonds	Education Officer	(NNWI team)
Neil Strevett	Education Officer	(NNWI team)
Mandy Hargood	Education Officer	(SS team)
Anne Shomefun	Education Officer	(SS team)
Rachel Greig	Education Officer	(SS team)
John Archibald	Education Administrator	(NNWI team)
Ruth Wood	Education Administrator	(SS team)

(NNWI = Northern England, Northern Ireland and Wales)
(SS = Southern England and Scotland)

The Education Officers and Education Administrators report to the Education Manager of their team. The Education Managers and Team Administrator report to the Director of Education.

The 2008-2009 budget included the recruitment of an additional administrator position in the last quarter of the 2008-2009 year. This new position is outstanding and will take place within the first quarter of this financial year.

Whilst recruiting and retaining employees continued to be a focal point for the managers within the Department in 2008-2009, the reorganisation of the department and creation of new positions helped career opportunities and progression and there was an improvement in the retention figures.

During the 2008-2009 financial year, the Education Department recruited to four posts (two replacement Education Officers and two new Education Officers). The four posts were appointed as a result of the two recruitment and selection process; one in December 2008 (where one replacement and one new Education Officer were appointed) and one in January 2009 (where another replacement and another new Education Officer were appointed). This was very encouraging as the Education Officer post has historically been difficult to successfully recruit to, mainly due to the combination of relevant experience and willingness to travel regularly needed for this role.

Despite the positive experiences in the 2008-2009 financial year, employee recruitment and retention remains a risk for this financial year. Only one third of Education Officers have been in the Department for over a year. For this

reason, employee recruitment and retention continues to be captured in the HPC's risk register. This will be reviewed after the experience of another year.

Responsibilities

The Director of Education is responsible for the overall management of the department, the development and implementation of the strategy and work plan and the development of new projects.

The Team Administrator provides support to the department across all its activities. This includes responding to all generic education requests for information and publications and the logging and tracking of all department invoices.

The Education Managers have management responsibility for the development and management of their team including work allocation, process planning and development. The operational work is divided up on a regional basis and the supporting activity and project work are divided up very broadly on the team's focus area (approval or monitoring). They currently line manage three Education Officers and one Education Administrator each.

The Education Officers implement and maintain the main operational processes, manage the supporting activities and contribute to the delivery of departmental projects. This includes coordinating and attending approval visits, annual monitoring assessment days and education seminars.

The Education Administrators provide support to their team across all their activities. This includes liaising with education providers and partners about approval visits and monitoring submissions, generating correspondence and maintaining information systems.

This department structure was implemented was 2008-2009. In 2009-2010, the department structure will be reviewed. The experiences of the last year will be considered alongside possible growth in the future.

Risk management

The Education Department manages those organisation risks that are primarily concerned with:

- Employees within the Education Department (issues such as turnover, skills development and managing performance); and
- Education providers (issues such as compliance with our processes, communication and support).

Activities outlined in this work plan also help mitigate organisation risks managed by other departments. Key areas into project management and the recruitment, training and ongoing support of both employees and partners.

Please see the appendix three for more details and links between the HPC's risk register and this work plan.

Equality and diversity

The Education Department will continue to scrutinise and monitor our processes and work with a view to identifying and where possible, mitigating any adverse impact to some groups, compared to others.

In the 2008-2009 financial year, the Department accomplished the following action points as part of the wider organisation's Equality and Diversity Scheme;

- Reviewed a number of publications (with the Communications and Policy & Standards Departments);
- Trained a number of visitors (new and existing) in equality and diversity (with the Partners Department): and
- Produced an age discrimination position statement (with the Policy & Standards Department).

In the forthcoming year, the Education Department intends to address the following action points as part of the department's supporting activities and projects;

- We will work with the Communications Department and Policy & Standards Department to ensure that the new publications adhere to house style.
- We will work with the Communications Department to ensure that the layout and content of new student section of the website is as accessible as possible.
- We will continue work with the partner manager to train visitors on equality and diversity issues and evaluate the effectiveness of this.
- We will continue to ensure that the organisation of our education seminars identifies and accommodates any additional needs at an early stage.
- We will ensure that any guidance for education providers around service user involvement is appropriate, accessible and inclusive.
- We will consider equality and diversity implications when we review our Education systems and processes. In particular, we will consider accessibility of our current processes, standard communication tools and possible technological developments, for both internal and external users. We hope to use the equality and diversity internal working group to assist in this project.
- We will work with the Registrations Department to ensure that the changes to the UK application forms are accurate, easy to follow and written in easy to understand English.
- We will produce an information sheet around welsh language schemes specifically for education providers. This will describe how the delivery and assessment of programmes in welsh links with our standards and approval process.
- We will produce an information sheet around the independent safeguarding authority (ISA) specifically for education providers. This will describe how the requirements of the ISA and placement education link with our standards and approval process.

Main operational processes

There are three main processes which generate the bulk of the Department's work and are the top priorities. The following paragraphs summarise these activities.

Approval process
The approval of pre-registration programmes will continue to be the crux of the Department's work. In 2009-2010, we are planning to undertake approximately 70 visits. We are expecting the patterns of 2008-2009 to continue for the existing professions (e.g. slightly higher number new paramedic science and biomedical science programmes compared to other professions, considerably lower number of supplementary prescribing programmes compared to two/three years ago, slight rise in the number of multi-professional visits). It is likely that the peak months of activity for the existing professions will continue to be April-June 2009 and February-March 2010 as the majority of visits piggyback education providers' internal events which take place at this time. We anticipate that 75% of the visits will be to programmes from the existing professions and the remaining 25% to practitioner psychologists' programmes. We are expecting to visit the practitioner psychologists' programmes between January-March 2010 only, as no visits will take place to professions from new profession until at least six months after the opening of their part of the register.

Annual monitoring process
The annual monitoring process will complete its fourth cycle and begin its fifth cycle in the 2009-2010 financial year. As a process it is now fully embedded and operating in a pro-active, cost effective and efficient manner. In 2009-2010, we expect to put approximately 450 approved programmes through this process. We will use the annual monitoring process to ensure that programmes have incorporated the minor changes made to the standards of proficiency in autumn 2007. We plan to hold six annual monitoring assessment days to consider the majority of submissions. A smaller number of submissions will be considered by correspondence to ensure a timely turnaround. We anticipate that the busiest months will be April-June 2009 and January-March 2010 as this is when most education providers' internal monitoring processes are complete, so they are ready to submit documentation to us.

Major change process
The major change process will begin its second cycle in the 2009-2010 financial year. The revised process was fully implemented during the 2008-2009 financial year and has lead to more effective decision-making and cost savings. The revised process centres on a 'notification stage' which means that not all submissions continue through to the full major change process. The figures from the first year show that around 50% of submissions are filtered out, into either the annual monitoring or approval process. The revised process is more resource intensive within the Department as the 'notification stage' centres on employee rather than visitor feedback to education providers.

We expect to put approximately 70 submissions through the full major change process. This figure is less than the 2008-2009 financial year due to the efficiencies of the new process. It is anticipated that we will receive approximately 35 notifications in addition to these 70 submissions which will be dealt with by Department employees.

Supporting activities

There are eight activities which support the main approval and monitoring processes. These activities aim to raise awareness of our processes amongst key education stakeholders and help promote an open, transparent and collaborative approach to approval and monitoring.

Whilst these activities provide a solid and desirable foundation onto which to operate our main processes, at certain times of the year they do not take priority and some activities, may, if resources are stretched need to be revisited in their totality. The following paragraphs summarise these activities.

Publications
In 2008-2009, the annual monitoring process supplementary information was updated and republished. An updated approval process supplementary information is due for republication shortly. Two new publications are also due for publication shortly, namely the approvals and monitoring annual report 2007-2008 and the education complaints process guidelines.

In 2009-2010, the standards of education and training and the standards of education and training guidance will be reprinted following the review of these standards in 2008-2009. Minor revisions (in the forms of addendums) will also be made to the major change supplementary information to align it to the new standards of education and training.

In 2009-2010, the new guidance on our health and character processes and guidance on conduct and ethics for students will be printed following the current consultation. The Education Department will support colleagues in the Policy & Standards Department in the production of these publications.

The Department will also publish their fourth annual report (covering the 2008-2009 academic year) in this financial year.

Website
The Department is responsible for the online register of approved programmes as well as the information online about our approval and monitoring processes. In 2008-2009 the format of both the register and education section was improved to help accessibility and provide more information to education providers, prospective students and registrants.

In 2009-2010, the Education Department will support colleagues in the Communications Department in the production of a student section of the website. The Department will also scrutinise the enquiries log (a record of all generic education enquiries received by email, telephone and letter) to determine whether there is a demand for additional online resources in specific areas (e.g. prescribing rights or educational routes for prospective biomedical scientists).

Seminars

The Department has run a series of events for education providers in autumn for the last three years. In 2008-2009, we held six seminars across the UK; which were much more interactive and facilitative than the presentations delivered in previous years. The feedback was very positive.

The Department intend to run similar seminars in 2009-2010. They will retain the dual purpose of information giving/updating and eliciting feedback. The Department envisage the seminars including the following areas – the revised standards of education and training, the new guidance on our health and character processes, the new guidance on conduct and ethics for students, service user involvement and independent safeguarding authority.

Partner visitor recruitment, selection and training

In 2008-2009, the Department recruited and trained a number of new visitors from our current professions. The current number of visitors is now appropriate for the workload in the 2008-2009 and 2009-2010 academic years and no additional recruitment is planned. Nevertheless, the Department will continue to monitor visitors' numbers and if necessary instigate contingency recruitment.

In 2009-2010, the focus of partner activity will be on refresher training for current visitors, initial training for hearing aid dispenser visitors and contingency recruitment and training for practitioner psychologist visitors.

The refresher training will be for appropriately 50% of visitors (70-80 individuals); the majority of which were last trained in 2005 and 2006. The initial training will be for appropriately 5 hearing aid dispenser visitors and 10 practitioner psychologist visitors. Appropriately 20 practitioner psychologist visitors were trained in 2008-2009.

Information systems (database and electronic records)

In 2009-2010, the Department will continue to work with the IT Department (via the standard IT help desk ticketing service) to enhance and revise the bespoke approval and monitoring database. The enhancement and revisions are links to two projects outlined in the later section of this work plan – 'netregulate approved programme maintenance' and 'recording of contact details from education providers'.

Committee Work

In 2009-2010, the Department will continue to work with the Education and Training Committee and the Education and Training Panels. We will continue to monitor the revised operating and recording procedures of the Education and Training Panels, with colleagues from the Secretariat Department.

We will also support the Secretariat Department in the changes likely to the membership, composition and format of Council and its Committees and

Panels, following the legislative changes to the constitutional orders. It is envisaged that this will include training for new members of the Education and Training Committee and its Panels at the very least.

Liaison with stakeholders
In 2009-2010, the Department will continue to work with stakeholders (e.g. general public, professional bodies, partners and educational bodies) in the broad area of education. We will circulate the biennial questionnaire to education providers asking for their feedback on our operational processes and supporting activities.

Unlike previous years, where the majority of work in this area has been reactive, the Department hope to adopt more of a proactive position. We intend to circulate a newsletter to education providers and partners three times a year and engage in more inter-regulatory forums and meetings with bodies such as Quality Assurance Agency and the Council of Deans

Complaints about an approved programme
In 2009-2010, the Department will continue to follow the complaints procedure. We expect to receive a maximum of five complaints in 2009-2010.

Projects 2009-2010

There are fourteen planned projects for the 2009-2010 financial year. All of these projects are enhancement focused; some aim to develop our work at an operational level whilst others aim to improve our communication and relationship building with key stakeholders. Some of the projects have been carried over from the 2009-2010 year, so are already midway through and need to be completed in 2009-2010, rather than initiated from the start. A small number of these projects will involve collaboration with the Policy and Standards, Registrations and Communications Departments.

Whilst it is important that these projects are completed, there is less of an urgency to complete them in a specific time period. Consequently, all of these projects have been allocated a long lead time and scheduled for implementation in the periods of 2009-2010, where there is a lighter workload with our operational processes and supporting activities. This intends to make best use of the resources available in the Department, both in terms of personnel and time. **If resources become stretched at any point, then we will need to revisit the viability of running all of these projects to the proposed timescales.**

The following paragraphs summarise these planned projects and indicate their individual urgency and importance.

1) Standards of education and training and guidance
This first phase of this project was completed in 2008-2009. The second phase will be initiated and completed during this year.

In 2008-2009, Council agreed to a number of revisions to the standards of education and training and their guidance. The Education Department participated in the professional liaison group meetings, publicised the consultation (through seminars and training sessions) and supported the Policy & Standards Department in redrafting of the publications. The new standards and guidance will become effective from September 2009.

Ahead of September 2009, the Department intend to assess the impact of the new standards on their processes and implement changes at the operational level, including;
- updating and circulating publications;
- updating relevant forms/reports;
- briefing education officers;
- briefing education providers and key education stakeholders;
- briefing visitors; and
- updating the website.

High priority

2) Professional body approval

This first phase of this project was completed in 2007-2008. The second phase was started in 2008-2009 and is due for completion during this year.

The Council need to visit the two programmes which the biomedical science and clinical science professional bodies run, to ensure that all students who complete them meet our standards of proficiency and that the programmes themselves meet the standards of education and training. These programmes have never been visited by the HPC due to the atypical nature of their delivery, organisation and resourcing levels. The Education Department has recommended a model for approval for Committee and intends to complete the pre-visit communication stage as well as the visit itself this year.

High priority

3) Review of IHCD paramedic award approval visits

This project follows on from an initial project in 2007-2008 and a large piece of operational work in 2008-2009.

During 2008-2009, the HPC visited all the IHCD paramedic award programmes which ambulance trusts intend to continue delivering after April 2009. The majority of these programmes are still engaged within the 'post visit' phase of the approval process.

In 2008-2009, the Education and Training Committee and its Panel raised the idea of analysing the approval visits to all the IHCD paramedic award programmes to establish whether there were any patterns or trends. They had observed that the programmes were consistently being recommended for ongoing approval subject to a substantial number of conditions and that the documentary process to consider conditions involved significant work.

In 2009-2010, the Department will analyse the findings from the approval visits to determine if there are any consistent trends and/or underlying concerns. The piece of work will also consider the long term stability of these programmes, given the degree of uncertainty which still remains over the future intentions of the validating body (EdExcel) as well as ongoing communication with paramedic and education stakeholders.

High priority

4) Health and character guidance and student conduct and ethics guidance

The Policy & Standards Department is currently overseeing the consultation on these two new pieces of guidance. It is anticipated that results of the consultation will be considered by Council in July 2010, with the publication of appropriately revised publications shortly after.

The Education Department intend to support the Policy & Standards Department in finalising these publications and then implement and publicise the publications into our supporting activities. This will include;

- briefing education officers;
- briefing education providers and key education stakeholders;
- briefing visitors;
- circulating publications; and
- updating the website.

<div align="right">Medium priority</div>

5)   Review of generic standards of proficiency

The Policy and Standards Department is intending to review the generic standards of proficiency as part of this year's work plan. It is assumed that results of this consultation will be considered by Council in December 2009, with the publication and implementation of any revised standards thereafter.

The Education Department intend to assess the impact of any changes to these standards on their processes and determine how education providers should inform the HPC that their approved programmes continue to meet these standards. The Department also need to implement changes at the operational level, including;
- updating relevant forms/reports;
- briefing education officers;
- briefing education providers and key education stakeholders;
- briefing visitors;
- updating and circulating publications; and
- updating the website.

<div align="right">Medium priority</div>

6)   Standards of proficiency for chiropodists/podiatrists

This first phase of this project was completed in 2008-2009. The second phase will be initiated and completed during this year.

In 2008-2009, Council agreed that the optional standards of proficiency for chiropodists/ podiatrists in the area of local anaesthesia and prescription only medicine should become mandatory from September 2009. The Education Department communicated the intentions to the appropriate education providers and stakeholders and assessed the impact on our operational processes.

Ahead of September 2009, the Department will implement the following changes at the operational level;
- update relevant forms/reports,
- update and circulate publications; and
- update website.

<div align="right">Medium priority</div>

7)   Recording of contact details from education providers (database)
This project was intended for completion in 2008-2009, however due to resources the viability and priority of this project was revisited. Only initial research and scoping work has been completed to date.

The Department intend to work with the IT Department to redesign the bespoke approval and monitoring database, so that the contact details of education providers can be recorded and used in a different format. In autumn 2007, the Department carried out a feedback survey with all education providers (approximately 300 contacts). Across all areas, the feedback was very positive. The biggest and most consistent piece of negative feedback was about our communication with education providers. 20% of respondents said that the communication was sent to the wrong or inappropriate person. This was not due to data entry inaccuracies, but due to education providers having different positions and structures in place and requesting different lines of communication with us. The database currently has limited flexibility to allow different positions or structures to receive communication from us; as a result we send communications (including publications) to people who do not require it, or who we have been asked not to send information to, creating dissatisfaction and sometimes confusion in education providers. We hope that a redesigned database will allow us to hold different contact details and reduce the quantity and improve the quality of our communication with education providers. The current contact details and methods are also often used by the Policy and Standards Department (consultations, PLGs, working groups etc) and the Registrations Department (pass list), so the updated database will benefit the wider organisation.

Medium priority

8)   Withdrawing approval
This first phase of this project was completed in 2007-2008. The second phase was started in 2008-2009 and is due for completion during this year.

The Education Department has contacted all education providers to discuss withdrawing approval from programmes which are either no longer running or have been superseded by new programmes. We intend to refer the outcomes to the Education and Training Committee for their consideration in June and September 2009. Withdrawing approval from these programmes will remove the risk of education providers recommencing closed programmes and allow us to create a part of the register of approved programmes which lists programmes which are no longer approved, together with a record of the periods in respect of which they were approved.

The Department also intend to produce a new protocol (for internal use within the Department) to ensure that withdrawal of approval will be routinely dealt with in the future when current programmes are closed and/or superseded.

Low priority

9)   Service user involvement

This project was started in 2008-2009 and is due for completion during this year.

In 2008-2009 we sought the views of education providers and other stakeholders about how our standards and processes might better support the involvement of service users in programme delivery and design. We sought these views via the standards of education and training consultation, the seminars for education providers and stakeholders and the training events for visitors.

Changes to our standards, guidance and processes were agreed in March 2009. These top level changes now need to be operationalised and communicated to education providers and stakeholders. A lot of this work will be dovetailed in with the roll out of the revised standards of education and training and guidance. The implementation of these changes will include the following:

- updating and circulating publications;
- updating relevant forms/reports;
- briefing education officers;
- briefing education providers and key education stakeholders;
- briefing visitors; and
- updating the website.

Further research was agreed in March 2009. This research will explicitly look into the composition of our visit panels and the value and effectiveness of including service users. This research is expected to involve an evaluation of other stakeholders and education providers' experiences in this area as well an resource and operational impact assessment.

Medium priority

10)   Education systems and processes

This project is in preparation for a potential major project in 2010-2011. It is a preliminary scoping project to establish the need and rationale for the major project in the next financial year.

The Education Department is currently responsible for maintaining information about approved programmes in three different areas: the bespoke approvals and monitoring database, the online register and netregulate (the bespoke registrations database). The Department's workload is currently managed through the bespoke approvals and monitoring database, a series of external reports (crystal reports), a series of calendars and individual files (letters and reports) located on a shared electronic drive. There is also interaction with information systems (databases and spreadsheets) owned by other departments (e.g. Partners, Finance, IT).

The current systems and processes have grown organically and although the Department have reviewed and refined the processes on an annual basis, there is a need to reduce inefficiencies and risks in preparation for future

growth. This project will review and verify the operational processes with a view to enhancing the reliability, security, linkages and automation of the information systems.

<div align="right">Medium priority</div>

11) Welsh language schemes

The Welsh Language Act 1993 put Welsh and English on an equal basis in public life in Wales. As a result of the Act the public sector bodies have a duty on them to treat Welsh and English on an equal basis and develop welsh language schemes.

This project proposes to produce an information sheet for education providers, on the interactions between the Welsh Language Act, Welsh Language Schemes and our standards of education and training, especially those in the admissions section around criminal conviction checks and the curriculum section around standards of proficiency.

<div align="right">Medium priority</div>

12) Independent safeguarding authority

The Independent Safeguarding Authority (ISA) has been created to help prevent unsuitable people from working with children and vulnerable adults. The ISA is due to go live on 12 October 2009**.** After this date anyone entering or changing jobs in 'regulated activity' will be required to register with the ISA Scheme. Members of the workforce already in regulated activity will have their registrations phased in over a period of five years. There is a major project to address the legislative and technological changes required of the HPC. This small departmental project is a communications based project aimed specifically at education providers.

The phasing in approach of the ISA means that education providers will need to address the registration requirements of their students as they are will be engaging with regulated activity (i.e. placements) from autumn 2009. There is little information currently available to education providers in this area and this project proposes to produce an information sheet on the role of the ISA and the interaction with our standards of education and training, especially those in the admissions section around criminal conviction checks. We also anticipate that we may have questions from education providers around the cost and timing of ISA registration; whether ISA and criminal conviction checks fulfill the same function; the impact of ISA registration on placement commencement and completion and how positive responses are dealt with.

<div align="right">Low priority</div>

13)   UK application forms

The Education Department intend to work with the Registrations Department to ensure that the application forms (for use in UK registrations) are updated.

The current application forms have specific sections and requirements for prospective paramedic and biomedical scientist registrants about their educational achievements. These requirements are based around two educational routes, namely the IHCD paramedic award and the IBMS Certificate of Competence. The application forms need to be updated to account for the increasing number of paramedic and biomedical scientist registrants who are completing approved programmes in other education providers. In addition, the paramedic section of the form needs to reflect the change in the approach to how the IHCD paramedic award is now approved (i.e. approval is now by education provider, rather than by validating body).

Low priority

14)   Netregulate approved programme maintenance

This first phrase of this project was started in 2008-2009. The second phase of this project is scheduled for commencement and completion during this year.

In 2008-2009, the Department took over responsibility for the approved programmes and education provider information in Netregulate (the bespoke registrations database), from the Registrations Department. We completed data verification and assimilation exercise and incorporated all future data entry and amendments into our main operational processes.

This new, but related, project arose out of the data verification and assimilation exercise where the limitations of the current database design were realised. Technological changes are needed to increase the information capacity within Netregulate, expand data security options and improve user accessibility. Currently, there are limited fields within the database which means that not all information is immediately clear to users. Additionally, there are no design features which prevent the registration of new registrants from programmes which are closed or have had their approval withdrawn. The reliance on text fields and users means there is always an element of risk that incorrect registration decisions may be processed. Whilst this has been a minimal risk in the past, with the conclusion of the withdrawal of approval project and the change in approach to how the IHCD paramedic award are now approved, the risk will increase in the future.

Low priority

2010-2011

It is likely that 2010-2011 will be a year where the Department's work will be shaped greatly by the impact of regulating new professions and the preparation for future extensions to professional regulation.

It is likely that the operational activities and supporting activities in 2010-2011 will primarily focus on the regulation of practitioner psychologists and hearing aid dispensers. Due to the built in prior notice periods of the approval and monitoring processes and the academic year calendar, it is likely that the peak of approval visits and monitoring submissions for practitioner psychologists' and hearing aid dispensers programmes will not be felt until six - twelve months after the opening of their registers. For this reason, we currently anticipate that the 2010-2011 and 2011-2012 financial years will experience peak operational activities in response to the regulation of practitioner psychologists and hearing aid dispensers.

We also intend to continue to develop a proactive approach in terms of communicating with new education providers and stakeholders, prioritising presentations and the distribution of publications so the requirements of our approval and monitoring processes are clear and accessible from the outset.

In 2010-2011, the Department will have to balance their immediate commitment to operating the main operational processes alongside a longer term commitment to extending professional regulation. We envisage continuing to work with colleagues in the Policy & Standards Department over areas such as post-registration qualifications, modernising scientific careers, the future regulation of psychotherapists and counsellors, the future regulation of acupuncturists, medical herbalists and traditional Chinese medicine practitioners, the future regulation of dance movement therapists, the future regulation of healthcare scientists, the future regulation of support workers, the extension of prescribing rights, standard of education and training one and standard of education and training (section two in the health area specifically).

We also envisage initiating a major project, at a more operational level, to ensure that our processes and systems remain fit for purpose and efficient as we grow as a regulator.

At this stage, it is likely that our smaller enhancement project work in 2010-2011 will be minimal. However, possible areas include the role of commendations in our monitoring processes and a pre-visit reading guide for visitors.

Appendices

Appendix one provides detailed information of the intensity of our work plan activities over the year.

Appendix two shows the work plan's peak activities in a calendar format.

Appendix three provides information on the risks managed by the Education Department.

Appendix 3

Risk		Section of risk register	Risk owner	Significance (Feb 2009)	Probability (Feb 2009)
7.1	**Non-detection of low education providers standards**	Approvals & Monitoring	Director of Education	Low	Low
Mitigations: Main operational processes ; supporting activities (complaints about an approved programme); projects (standards of education and training and guidance, professional body approval; review of IHCD paramedic award approval visits; review of generic standards of proficiency; withdrawing approval; service user involvement; Education systems and processes; Welsh language schemes)					
7.2	**Education providers refusing visits or not submitting data**	Approvals & Monitoring	Director of Education	Low	Low
Mitigations: Legal powers (HPO 2001; and supporting activities (publications, website and seminars.					
7.3	**Inability to manage education provider visits**	Approvals & Monitoring	Director of Education	Low	Low
Mitigations: Adequate resourcing and training; hire staff to backfill or clear backlogs of work; review new department structure and main operational processes and Education systems and processes project.					
7.4	**Loss of support from education providers**	Approvals & Monitoring	Chief Executive	Low	Low
Mitigations: Main operational processes; supporting activities (publications, website, seminars, feedback questionnaire, partner visitor recruitment, selection and training and liaison with stakeholders); projects (standards of proficiency for chiropodist/podiatrists project; recording of contact details from education providers (database) project;standards of education and training and guidance;Health and character guidance and student conduct and ethics guidance; review of generic standards of proficiency; service user involvement; Welsh language schemes; Independent safeguarding authority)					
6.1	**Inability to recruit and/or retain suitable Partners**	Partners	Partners Manager	Low	Low
Mitigations: (Education Department only) Supporting activities (publications, website and partner visitor recruitment, selection and training)					
6.2	**Incorrect interpretation of law and/or SI's resulting in CHRE review**	Partners	Director of Fitness to Practice & Director of Operations	Low	Low
Mitigations: (Education Department only) Supporting activities (publications, website and partner visitor recruitment, selection and training)					
8.4	**Failure to regulate a new profession or a post-registration qualification as stipulated by legislation**	Partners	Director of Operations, Project Manager, Registration Manager & Director of Policy & Standards	Low	Low
Mitigations: (Education Department only) Main operational processes and priorities 2009-2010					
8.9	**Pracitioner Psychologists on boarding**	Project Management	Director of Operations		
Mitigations: (Education Department only) Main operational processes and priorities 2009-2010 and and Education systems and processes project.					
11.2	**High turnover of employees**	HR	HR Director	Low	Low
Mitigations: (Education Department only) Adequate resourcing and training; hire staff to backfill or clear backlogs of work; review new department structure and and Education systems and processes project.					
11.3	**Inability to recruit suitable employees**	HR	HR Director	Low	Low
Mitigations: (Education Department only) Adequate resourcing and training; hire staff to backfill or clear backlogs of work; review new department structure and and Education systems and processes project.					

Finance Department

2009-2010 Work Plan

Simon Leicester

Contents

Introduction

The Finance department

The Finance department's main responsibilities are:

- To monitor the financial well-being of the HPC and advise the Council and Committees of the need for adjustments to the business plan and strategy in a timely manner,
- To produce the statutory financial statements and the financial sections of the HPC Annual Report,
- To produce the monthly management accounts,
- To provide financial forecasting and analysis to support the Council and Committees in developing strategy and policy,
- To maintain good internal financial control and risk management including compliance with the HPC Financial Regulations,
- To manage the payroll/pensions process and arrange supplier payments,
- To collect fee income and ensure the Netregulate Registration System records are accurately updated for financial transactions,
- To manage the relationship with key external suppliers; the HPC's bankers, internal auditors, external auditors, financial software providers, HMRC, building valuers, investment fund managers and pension scheme providers,
- To provide procurement guidance including; tenders, supplier analysis, supplier credit ratings, supplier spend and supplier record management (Lotus Notes supplier database).
- To deliver Finance projects to enable process improvement and enhance risk management.

This document

This document aims to set out the work priorities for the financial year April 2009-March 2010 and provide a basis against which the work of the Finance department can be planned and measured.

The work plan outlines details of the operational work and planned projects, given the resources, service standards and process deadlines. The Finance department aims to be both proactive and reactive in its work. The reactive element arises as a result of changes in the external environment which impact the department directly, or indirectly in the form of support to other departments. For example, changes in government legislation and changes to the onboarding timetable for new professions, the timing of which is difficult to predictable.

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Priorities 2009-2010

A key priority for the Finance department is effective day-to-day management of the main operational processes. Key goals are; policy compliance, service consistency, accuracy, process efficiency and timely completion of the process (to deadlines).

A second key priority is effective management of the supporting activities. These activities typically include utilising external expertise to provide timely advice and diversify risk. Examples include; converting from UK GAAP to IFRS reporting, managing money market and investment funds, closing old pension schemes, updating the Fees Order legislation for fee changes and developing procurement documentation.

A third key priority is the effective delivery of projects. Finance department employees are involved in managing finance projects, completing project tasks and providing support (typically in the design and testing aspects) for some projects run by other departments. All finance projects involve assistance from at least two other departments i.e. the IT department and Operations Office (project management assistance). Some projects involve using external parties. For example, in software development and/or providing legal expertise.

From a stakeholder perspective, key stakeholders for the department include; Registrants (Fee rises and Netregulate financial transaction queries), the Council and its Committees - particularly the Finance & Resources Committee and Audit Committee, the Executive Management Team, budget holders, HPC employees and suppliers.

Resources

The 2009-2010 Finance department budget and work plan involve utilising a team of eight full time Finance employees. The eight roles are: Director of Finance, Financial Controller, Management Accountant, Financial Accountant, Finance Officer, Purchase Ledger Officer, Transaction Manager and Transaction Officer.

Regarding financial resources, the work plan assumes a Finance department operating cost budget for 2009-2010 of approximately £635k, and Fee Rise budget of £8K.

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External resources are used to provide person cover (for annual and sick leave) on key processes. Aspects of some Finance projects and Finance supporting activities are performed by external suppliers, as outlined above.

Risk Management & Business Continuity Planning

The Finance department manages a range of ongoing HPC risks using various risk mitigations. The risks can be grouped under six broad themes as follows:

Financial accuracy
For example, risks associated with financial reporting, ensuring tax legislation compliance and obtaining an unqualified audit opinion on the financial statements (year end statutory reporting and annual report process).

Cost control
For example, risks associated with large capital project cost over runs or an unexpected rise in operating expenses.

Asset value protection
For example, risks associated with the value of bank deposits and investment funds.

Financial liquidity
For example, risks associated with insufficient cash available to meet commitments.

Financial solvency
For example, risks associated with implementing fee rises (Fee rise project) and collecting fee income from registrants.

Financial service provision
For example, risks associated with financial distress of HPC suppliers (impacting HPC processes and projects) and inability to pay creditors.

The disaster recovery site at Uxbridge has been set up to provide alternative physical premises. Periodically a business continuity exercise is carried out which tests each department's ability to ensure service provision. Other mitigations are also in place including; financial procedure documentation, person cover, daily data backups, offsite record archiving, storing financial stationery and equipment at the Uxbridge site. Refer also Risk Register, section 2 on Operations and section 17 on Data Security.

See also Appendix One for how Finance processes relate to the risks outlined in the Risk Register.

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Main Operational Processes

There are six main processes which generate the bulk of the Finance department's work throughout the year. The processes are; the year end statutory reporting & annual report process, the monthly reporting process, the payroll/pensions process, the supplier payment process, the forecasting & budgeting process and the transaction management process. The following paragraphs provide further detail on these processes.

1. Year end statutory reporting and annual report process

Production of year end financial statements is performed during the period April to July inclusive, in accordance with UK generally accepted accounting principles (UK GAAP) and the Government Financial Reporting Manual (FReM), published by H.M. Treasury. The management commentary, audit reports, statement of internal control, financial statements, accounting policies and notes to the accounts are included in the final sections of the Annual Report.

The Annual Report is produced jointly by the Communications department, Secretariat and Finance departments, with input from a number of contributors. After the Annual Report has been audited by HPC's external auditors and the National Audit Office[1], it is submitted for approval to the Finance & Resources Committee, Audit Committee and Council and then tabled in Parliament. Once approved by Parliament, the Annual Report is published and made generally accessible.

2. Monthly reporting process

The year to date management accounts and variance commentary are produced by the Finance department, reviewed by budget holders and EMT and submitted to the Finance & Resources Committee to note progress against budget. The management accounts report departmental and project spending (opex and capex) against budget to highlight year to date income and spending, balance sheet, cash flow statement and significant deviations from budget.

3. Payroll and pensions administration process

Employee payroll and pension contribution payments are processed on a monthly basis by the Finance and HR departments. Finance processing includes updating the Payroll system for new starters, leavers, overtime and salary changes, issuing payslips, making tax & NI deductions & payments and making salary payments using Natwest Autopay facility. There are approximately 113 permanent employees

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[1] The latest HPC s60 Order enables the Controller & Auditor General (C&AG) to act as HPC's statutory auditor, subject to the C&AG resolving any professional ethics issues which might arise from performing both the statutory audit and the certification & oversight roles outlined under the 2001 HPC Order.

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and 55 pension scheme members. Category one[2] Council and Committee members payroll processing is also performed once a month and is processed separately from the employee payroll.

4. Supplier payment process

Supplier pay runs for approved suppliers are performed every two weeks by the Finance department, with employee expense claims processed on a weekly basis. There are four types of supplier payments; trade supplier payments, employee expense claims, category two[3] Council & Committee member payments and partner payments. One off supplier payments are actioned on an ongoing basis.

5. Forecasting and budgeting process

Each year, the Finance department works with all other departments to compile three forecasts and one annual budget.

The most significant forecast is the Five Year Plan, produced in August-September. The Five Year Plan links to the Strategic Intent document in quantifying key assumptions, financial projections of income & cost by department, the capital expenditure plan and cash flow projections. It includes headcount projections by department, registrant & applicant volumes by profession including new professions. It also includes registrant and applicant volumes by type (International, UK Graduate Registrants etc).

Year one of the Five Year Plan essentially becomes the basis of the forthcoming Annual Budget and relates to project and departmental work plans over the forthcoming financial year. A further benefit in updating the Five Year Plan is in identifying changes in cost structure as background for future fee-setting.

The income model within the Five Year Plan identifies accrued income in the forthcoming financial year by profession and fee type. A key component of the Income Model is registrant and applicant volume-forecasting. Volume forecasting (existing and new professions) is a service provided by the Policy & Standards department with input from other departments.

The six and nine month forecasts are high level forecasts prepared in October and January respectively, to forecast the year end income and expenditure result.

Finally, the Annual Budget process. It involves all departmental budget holders, and input from the Operations Office in compiling the project

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[2] Council and Committee members who declare themselves to be HPC office holders and are not self-employed.
[3] Council and Committee Members who declare themselves to be principally employed by another employer and are not self-employed.

plan. Compilation of the budget by the Finance department runs over the period November to March and involves several review steps. The final steps are to gain approval from Council in March 2009 and to phase the budget by month.

6. Transaction management process

A key aspect of the Netregulate Register is maintaining the accuracy of the Sales and Debtor's Ledgers within Netregulate. Each month, the Finance dept extracts and summarises the detail from Netregulate for financial reporting purposes.

At renewal, fee charges are automatically put on Registrant records, with the Registrations and Finance departments jointly collecting the income (direct debit, cheque and credit card payment). Updating the billing records in Netregulate for DD collections is done using payment reports downloaded from BACS. The average volume of registrant collections made via DD is about 22,000 per month with an average value of about £39. The Finance department reconciles the streamline report (credit card receipts) to bank statement details & the SAGE cashbook on a daily basis and arranges the daily banking of cheques received.

Rejections arise when the HPC receives notice from the registrant's bank that their direct debit mandate arrangement has been rejected. Unpaid registrations are followed up with reminder to pay letters (using mail merge and form letters) sent out to registrants within ten days of receiving the bank notification. Three weeks grace is then given to respond, a final letter sent out (with a further 2 weeks grace period) and the registrant then lapsed as a final resort. The average volume of rejected items is about 365 per month with an average value of about £32.

Refunds[4] of fee overpayments and collection of outstanding debtor balances (failed direct debit arrangements) is an ongoing process performed by the Finance department. The average volume of refunds made to registrants is about 105 per month with an average refund value of about £43.

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[4] Refunds arise from voluntary removal from the register, registrants being lapsed but having a credit on their account, or registrants making an overpayment.

Supporting activities

There are five main supporting activities that contribute to the Finance department's workload during the year. The IFRS conversion and closing down the legacy pension schemes are activities that should be completed in 2009-2010. The other activities will be ongoing beyond the 2009-2010 year. The supporting activities are as follows:

1. IFRS conversion

In accordance with H.M Treasury FReM reporting requirements, the HPC will move to reporting under International Financial Reporting Standards (IFRS) for the year ending 31 March 2009 onwards. Work has been completed already to restate March 2008 balances under IFRS (as last year comparatives). The changes are largely twofold. Firstly, adjustments to some financial numbers and secondly, relabeling of some items in the financial statements, with modified notes to the accounts. Additional one time audits are required of the IFRS financial statements, following completion of the 31 March 2009 financial statements under UK GAAP[5] reporting for the final time. The IFRS statements will be prepared and audited during the period July-September.

2. Cash and investments management

The HPC has money market investments with an approximate value of £5M. These are essentially registrant income received in advance (deferred income balances) and are placed with several mainstream UK financial institutions. Further investment funds with a market value of approximately £1.4M are managed by Rensburg Sheppards, professional funds managers in a diversified investment portfolio. Sufficient funds are also held in a Natwest Business Reserve account to meet short term working capital needs e.g. payment runs.

3. Legacy pension scheme administration

The HPC has two legacy pension schemes, the CPSM scheme which closed in 1995 and the Capita Flexiplan scheme. Active employee contributors elected to migrate from the Capita Flexiplan scheme in May 2007 to the current Friends Provident (FP) scheme. Currently there are 55 members in the FP scheme. Steps are in progress to close down the CPSM scheme in the period June-September. Steps are also in progress to close down the Flexiplan scheme, however a likely final date for closure has not yet been given by the trustees. The work plan implications for the Finance department largely involve monitoring progress of the professional trustees (Capital Pension Trustees Ltd for the CPSM scheme and Entrust for the Flexiplan scheme) in winding up the schemes. To value any employer liability at Year End Balance Date, the schemes need updated solvency or actuarial valuations from Scottish Life and KPMG respectively. The HPC will need to seek & act

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[5] GAAP is an acronym for generally accepted accounting principles.

on pension scheme legal advice regarding closing the schemes, as appropriate.

4. Procurement guidance

To date, procurement of goods and services from suppliers has been performed by HPC budget holders and project leads. Procurement includes tendering and managing the supplier relationship e.g. agreeing trading terms and conditions, updating prices, doing service level agreement reviews etc. The work plan implications for the Finance department are in approving/declining new preferred supplier applications to be set up in the Lotus Notes database[6], running credit checks on new suppliers, reporting on annual spend by supplier, providing procurement guidance notes to new users, updating the tendering policy & procurement procedures. In the 2009-2010 year further work will also be done to complete a generic HPC supplier contract for use in appointing suppliers.

5. Committee work

In 2009-2010, the Finance department will continue to prepare and present briefing papers to various Committees on a variety of financial issues. The Committees receiving the greatest number of papers from the department include the Finance & Resources Committee and Audit Committee. The Remuneration Committee, Education & Training Committee and Council also receive briefing papers (papers requiring a decision, or papers to note). Key papers typically include; the remuneration rise paper, the annual budget, the Annual Report & yearly financial statements, the Five Year Plan, audit findings reports, expense and allowance fee changes and fee rise papers.

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[6] An HPC database holding centralised supplier records including; supplier contact details, price lists, supplier contract details and data protection agreements, as appropriate.

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Projects

The Finance department has a key role to play in implementing several HPC projects during 2009-2010. The project to effect a fee rise in April 2011 will commence during 2009. Likewise, some PRS and Netregulate enhancements will streamline the use of the PRS system and how the Transactions management process is performed respectively. Further SAGE enhancements will streamline the monthly reporting process. In addition, Finance people resources may be involved in aspects of project design and testing for other department's projects. An example is in payments testing for the Online Renewals project.

Finance Projects completed in 2008-2009

- Finance System Upgrade project (SAGE upgrade and PRS introduction)
- Netregulate Access Rights project
- Fee Rise 2009 project (go live date 1 April 2009)

Finance Projects and System Enhancements in 2009-2010

Fee Rise 2011 project

HPC is reliant on funding from Registrant and applicant fees to meet its objectives as a UK statutory regulator of health professionals. Following the last fee rise in June 2007, a project was launched to increase HPC fees, broadly in line with inflation from 1 April 2009. The intention is to revise fee levels every two years and propose suitable adjustments, after considering stakeholder consultation feedback and forecast changes in the HPC cost structure. To elaborate, changes in the cost structure are influenced heavily by fitness to practise costs and changes in registrant and applicant volumes over time. As additional services are progressively provided, e.g. revalidations, these incur start up and ongoing costs, which also need to be funded from HPC income.

The fee change project involves input from a number of departments including Finance, Communications, Registrations, Operations Office, IT, Policy & Standards and the Secretariat. The cost model relating to the fee rise proposals will be updated in the period July-August 2009.

System Enhancements

Purchase Requisition System (PRS)

In June-July 2009, processing, some enhancements will be made to streamline the use of the system. Enhancements include; archiving completed purchase orders (PO's), enabling document attachment to PO's raised, creating a system warning flag if attempt to pay a PO without the goods being first received,

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improving the web based service and creating a screen message to guide future action when a user enters a higher quantity of goods received than was approved.

Subject to external resource and budget availability, some or all of the following enhancements will be incorporated into the suite of Netregulate system enhancements.

1. **Intermediate Lapsing Phase Two - cancellations**
    Extend intermediate lapsing to automate the intermediate lapsing for registrant rejected cheques. This will generate process time savings in the Finance department.

2. **View processed DDI's enhancement**
    Move the processed direct debit interface (DDI) from the DDI process screen in the "financials" section of Netregulate to provide an HPC audit trail to match the bank's audit trail, in order to resolve direct debit problems. Benefits include process time savings and improved internal control.

3. **Automated refunds enhancement**
    Automate the current process for generating Registrant refunds. This is likely to result in process time savings in refund cheque preparation. The average volume of refunds made to registrants is about 105 per month.

4. **Netregulate transaction mispostings enhancement**
    Reverse a transaction payment without creating a Netregulate "REJ" status transaction. This will create process time savings in updating the Rejection Control account in the SAGE financial system.

Year Two projects and system enhancements (2010–2011)

The following are some projects and system enhancements proposed for year two, subject to budget approval. In addition, Finance people resources may be involved in aspects of project design and testing for other department's projects.

Note that further work needs to be done to investigate and evaluate the most appropriate project designs closer to the time, taking into account vendor software improvements made in the interim that would benefit HPC. For example, if SAGE introduce additional generic functionality into their existing suite of SAGE 200 software modules. Also, if further HPC Finance/HR software rationalisation occurred, this may impact the details of year two and three finance projects for the Finance department work plan.

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Fee Rise project 2011
> Complete the final stages of the Fee rise project in accordance with the project timetable.

Netregulate billing transactions
> Redesign details of how fee charges and payments are applied to registrant accounts, so becomes easier for Netregulate users to interpret the transaction history.

System enhancements

PRS enhancement
> Redesign PO approvals so if that individual PO line values are below an approval threshold but the total PO is above the threshold, the total PO needs to be approved at the higher threshold level.

Income download reporting
> Automate the monthly income record transfer (fee transaction records summarised by profession and fee type) from Netregulate into the SAGE financial system. This is a customised modification, with time savings for the monthly reporting process.

Online forecasting
> Implement an electronic forecasting system that is linked to SAGE financial system, encompassing faster reforecasts of income and expenditure and associated cashflow forecasts.
>
> Some or all of the following to be incorporated into the suite of Netregulate system enhancements, subject to resource and budget prioritisation.

Email access/Communications Log enhancement
> Email directly from Netregulate and store a communications log. This will allow information on registrant account statuses to be held in one central place and enable faster emailing directly from Netregulate.

Netregulate rejections enhancement
> Change the date notation in Netregulate to the date the direct debit, cheque or credit card transaction is rejected, not the date when the payment or charge was applied.

Netregulate multiple batches enhancement
> Modify Netregulate to allow multiple batches (from multiple registrant advisors) to be matched to a single pay in slip, to streamline cashbook reporting.

Year Three projects (2011-2012)

The following list of projects are proposed for year three, subject to budget approval. In addition, Finance people resources may be involved in aspects of project design and testing for other department's projects.

- Fee Rise 2013 project
- Implement an automated costing system (activity costing) linked to the SAGE financial system.
- Incorporate the Lotus Notes Supplier functionality (procurement and supplier non financial records) into the SAGE system to link more closely with purchasing and payment processes.
- Migrate the fixed assets register from a spreadsheet file to the fixed assets module of the SAGE system.

Equality and Diversity Impact Assessment Statement

Aspects of the work highlighted above will have an impact on equality and diversity at the HPC. To elaborate,

- During the consultation phase of the Fees Project 2011, we will consider the equality and diversity implications of the HPC's existing fees and any proposed new fees, drawing on the existing data we hold.
- Provision of the childcare voucher scheme from 1 April 2009 (within the Payroll/Pensions process) for those employees that elect to use it.

Appendices

Appendix One – Finance department risks

Appendix One attached provides details on the risks managed by the Finance department during 2009-2010 that relate to the work plan. They have been grouped under the relevant Finance processes as outlined in the work plan.

They have also been identified under five broad themes of: financial solvency, financial liquidity, financial accuracy, asset value protection and financial service provision.

HPC RISK MATRIX

IMPACT		Negligible 1	Rare 2	Unlikely 3	Possible 4	Probable 5
Catastrophic 5		5	10	15	20	25
Significant 4		4	8	12	16	20
Moderate 3		3	6	9	12	15
Minor 2		2	4	6	8	10
Insignificant 1		1	2	3	4	5

LIKELIHOOD

Key		
>11	High Risk: Urgent action required
6 - 10	Medium Risk: Some action required
<5	Low Risk: ongoing monitoring required

Risk Theme	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations February 2009	Likelihood before mitigations February 2009	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2009	RISK score after Mitigation September 2008

Year End statutory reporting and annual report process

Risk Theme	Ref #	Description	Risk owner	Impact	Likelihood	Risk Score	Mitigation I	Mitigation II	Mitigation III	After Feb 2009	After Sep 2008
Financial Accuracy	15.14	**Non compliance with FReM reporting**	Finance Director	3	1	3	Periodic reviews of HM Treasury and NAO information updates. Technical updates from CA firms. Clarifications sought, as required.	Employee training	-	Low	Low
Financial Accuracy	15.15	**Qualified opinion received by the Auditors on the Statutory Financial Statements**	Finance Director	5	1	5	Internal control compliance and actioning of audit findings.	FReM compliance & timely market valuations eg investments, land and buildings	Reliable financial systems. Income, Expense & Balance Sheet Reconciliation's. Matching Sage TB to Mgt Accs & Mgt Accs to Statutory Financial Statements	Low	Low
	15.16	**Late submission of the Annual Report, beyond sector standards**	Secretary to Council	3	1	3	Upfront agreement on the Year End and Annual Report reporting process dates	Process management	-	Low	Low
Financial Accuracy	16.1	**Under-funded pension liabilities (CPSM Retirement Benefits Scheme*)**	Finance Director	2	3	6	Benefits secured by insurance policies issued by the Scottish Life Assurance (SLA)	Periodic review of the actuarial valuation of assets of the fund to cover pension liabilities.	Specialist pensions legal advice sought as required	Low	Low
Financial Accuracy	16.2	**Section 75 (Pensions Act 1995) liability for employer share of Flexiplan pension scheme deficit**	Finance Director	4	2	8	Notional membership by six scheme members to avoid triggering s75 liability before scheme closure	Specialist pensions legal advice sought	-	Low	Low
Financial Accuracy	16.3	**Capita Flexiplan funding liability resulting from scheme valuation deficit**	Finance Director	4	4	16	Monitor actions of the Employers' Consultative Group in working with the Professional Trustee to wind up the Flexiplan scheme.	Periodic review of the actuarial valuation of the fund (whether pension assets cover pension liabilities).	Specialist pensions legal advice sought as required	Low	Low

Monthly reporting process

Risk Theme	Ref #	Description	Risk owner	Impact	Likelihood	Risk Score	Mitigation I	Mitigation II	Mitigation III	After Feb 2009	After Sep 2008
Cost control	15.3	**Large Capital Project Cost Over-runs**	EMT	4	2	8	Finance & Resources Committee review of the project spendng variances to date	Effective project specification, management and project progress reporting (financial and non financial)	Guidelines on project spending. Project exception reports promptly presented to EMT for review	Low	Low

Payroll & pensions administration process & supplier payment process

Risk Theme	Ref #	Description	Risk owner	Impact	Likelihood	Risk Score	Mitigation I	Mitigation II	Mitigation III	After Feb 2009	After Sep 2008
Financial Accuracy	15.18	**PAYE/NI compliance**	Finance Director	5	2	10	Professional tax advice sought, including status of CCM's and partners	Payroll process management. Tax provisions made. PAYE Settlement Agreement sought (via Baker Tilly). Signed disclosure forms (Categories)	HMRC website periodic reviews. Employee training (CPD hours)	Low	Low
Asset value protection	15.11	**Unauthorised payments to personnel**	Finance Director	5	3	15	Payroll & Expense claim processes	Signatory list reviews	Professional Indemnity & fraud insurance	Low	Low

Supplier payment process

Risk Theme	Ref #	Description	Risk owner	Impact	Likelihood	Risk Score	Mitigation I	Mitigation II	Mitigation III	After Feb 2009	After Sep 2008
Asset value protection	15.13	**Mis-signing of cheques (forgery)**	Finance Director	4	3	12	Regular reviews of cheque signatories against invoices paid by cheque. Photocopies of one off supplier cheques held.	Monthly bank reconciliations	Minimial use of manual chqs. Two signatories required on all cheques.	Low	Low
Financial Accuracy	15.19	**Corporate Tax compliance**	Finance Director	4	1	4	Professional tax advice sought e.g. Corporate Tax Return preparation and filing.	Tax provisions made	-	Low	Low

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Risk Theme	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations February 2009	Likelihood before mitigations February 2009	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2009	RISK score after Mitigation September 2008
Asset value protection	15.10	**Unauthorised payments to organisations**	Finance Director	5	2	10	Purchase Order approval compliance	Signatory list maintenance	Approved and one-off supplier processes	Low	Low

Supplier payment process & Forecasting/Budgeting process

Risk Theme	Ref #	Description	Risk owner	Impact	Likelihood	Risk Score	Mitigation I	Mitigation II	Mitigation III	RISK after Feb 2009	RISK after Sep 2008
Financial service provision	15.5	**Inability to pay creditors**	Finance Director	5	2	10	Effective payment process management	Adequate cash-flow forecasting	Monthly Aged Creditors review	Low	Low

Forecasting & Budgeting process

Risk Theme	Ref #	Description	Risk owner	Impact	Likelihood	Risk Score	Mitigation I	Mitigation II	Mitigation III	RISK after Feb 2009	RISK after Sep 2008
Cost control	15.2	**Unexpected rise in operating expenses**	EMT	3	1	3	Finance & Resources Committee review of the Monthly variances year to date. Regular budget holder reviews held. Budget holder accountability.	Budgetary control clarity around permanent and timing (reversing) differences. Correct treatment of prepayments.	Out turn forecasts and review of remaining annual spend	Low	Low
Cost control	15.9	**Mismatch between Council goals & approved financial budgets**	Chief Executive	4	2	8	Adequate quantification of the budgetary implications of proposed new initiatives	Close and regular communication between the Executive, Council and its Committees.	Spending prioritisation criteria	Low	Low

Forecasting/Budgeting process and Transaction Management process

Risk Theme	Ref #	Description	Risk owner	Impact	Likelihood	Risk Score	Mitigation I	Mitigation II	Mitigation III	RISK after Feb 2009	RISK after Sep 2008
Liquidity	15.1	**Insufficient cash to meet commitments**	Finance Director	5	1	5	Maintain an appropriate level of cash reserves for ongoing cashflow planning. Effective collections process (80% of registrants pay by DD) and applicant payment process (by credit card).	Annual and Five Year Plan forecasting of income (volumes & fees) and costs to ensure adherence to Reserves Policy. Fee rises as required.	Monthly forecasts/reviews	Low	Low

Transaction Management process

Risk Theme	Ref #	Description	Risk owner	Impact	Likelihood	Risk Score	Mitigation I	Mitigation II	Mitigation III	RISK after Feb 2009	RISK after Sep 2008
Solvency	15.6	**Inability to collect from debtors**	Finance Director	5	2	10	Collection via Direct Debit for >80% of fees income	Registrant debtors policy compliance.	Request new DD details from Registrants when informed by the bank that the Registrant's DD was rejected. Periodic reviews and actioning of Misc Debtors.	Low	Low
Asset value protection	15.7	**Registrant Credit Card record fraud/theft**	Finance Director	3	1	3	Daily credit card payment reconciliation's in Finance dept - Streamline to Netregulate and Bank records.	Tight procedures to retrieve sensitive paper records from archive, rationalise records kept and retain sensitive current year records with security tagging and in compliance with cr card record storage stds.	-	Low	Low
Solvency	15.8	**Receipt of fee income as per collection schedule**	Finance Director	3	3	9	Netregulate processes & controls in place (charging & receipts)	Monthly revenue reconciliation's between Netregulate and SAGE	-	Low	Low

Cash and investments management

Risk Theme	Ref #	Description	Risk owner	Impact	Likelihood	Risk Score	Mitigation I	Mitigation II	Mitigation III	RISK after Feb 2009	RISK after Sep 2008
Asset value protection	15.17	**Professional Fund Manager insolvency**	Finance Director	3	1	3	Client monies (HPC) contractually separated from fund manager own holdings.	Periodic credit rating checks of fund manager firms used		Low	Low

Risk Theme	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations February 2009	Likelihood before mitigations February 2009	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2009	RISK score after Mitigation September 2008
Asset value protection	15.20	**Money market provider insolvency**	Finance Director	5	4	20	Money market funds spread across at least two UK money market institutions, independently owned with at least an AA minus credit rating	Periodic credit rating checks of money market providers used eg Standard & Poors & Fitch rating monitoring.	-	Low	Low
Asset value protection	15.4	**Loss in value of investment fund portfolio**	Finance Director	3	5	15	Adherence to Investments and Reserves policies. Long run investment view.	Professional funds management involving diversification (by asset class, market, sector) and "lower risk side of neutral" investments	Relatively small balances held in the investment portfolio (£1.4M), compared to money market (£5M) and property investments held (£3M)	Low	Low

Procurement guidance

Risk Theme	Ref #	Description	Risk owner	Impact before mitigations February 2009	Likelihood before mitigations February 2009	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2009	RISK score after Mitigation September 2008
Financial service provision	15.21	**Financial distress of suppliers**	Finance Director	4	4	16	Financial monitoring of key suppliers via Busibody credit asssessment	Escrow agreements	Alternative suppliers	Medium	Low

Project management

Risk Theme	Ref #	Description	Risk owner	Impact before mitigations February 2009	Likelihood before mitigations February 2009	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2009	RISK score after Mitigation September 2008
Solvency	8.1	**Fee change processes not operational by April 2009**	Finance Director	5	3	15	Project progress monitored by EMT	Apply HPC's project management methodology	Maintain regular informal contact with Privy Council staff throughout all stages of the project	Low	Low

Glossary & Abbreviations

Term	Meaning
AGM	Annual General Meeting
CDT	Cross Directorate Team (formerly HPC's Middle Management Group)
CHRE	Council for Healthcare Regulatory Excellence
CPD	Continuing Professional Development
EEA	European Economic Area, = European Economic Union, plus Norway, Iceland, plus for our purposes Switzerland
EMT	HPC's Executive Management Team
EU	European Economic Union (formerly known as the "Common Market")
FReM	Financial Reporting Manual
FTP	Fitness to Practise
GP	Grandparenting
HPO	Health Professions Order
HR	Human Resources
HW	Abbreviation for computer hardware
Impact	The result of a particular event, threat or opportunity occuring. Scored between 1 least effect on HPC and 5 maximum effect on HPC.
ISO	International Standards Organisation (the global governing body for the Quality standards used by HPC)
ISO 9001:2000	The Quality Management Standard used by HPC, shortly being migrated to the latest version ISO9001:2008
IT	Information Technology
Likelihood	Used to mean Probability of the event or issue occurring within the next 12 months
MIS	Management Information System
NetRegulate	The bespoke computer application used to manage the application, registration and renewal processes, and publish the online register
OIC	Order in Council
Onboarding	The process of bringing a new profession into statuatory regulation from HPC's viewpoint
OPS	Operations
PLG	Professional Liason Group
Print UK	A supplier of printing and insertion/mailing services to HPC
Probability	Likelihood, chance of occurring. Not the "mathematical" probability. Scored between 1 least likely and 5 most likely to occur within the next year.
QMS	Quality Management System, used to record and publish HPC's agreed management processes
Risk	An uncertain event/s that could occur and have an impact on the achievement of objectives
Risk Score	Likelihood x Impact or Probability x Significance
Significance	Broadly similar to Impact
SSFS	Scheme Specific Funding Standard, a set of standards relating to pensions services
STDS	Standards
SW	Abbreviation for computer software
VPN	Virtual Private Network, a method of securely accessing computer systems via the public internet

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Fitness to Practise Workplan 2009 –2010

Contents

Introduction

This document sets out the resources, responsibilities and priorities for the financial year April-March 2009-2010. It addresses how the Fitness to Practise department will grow, develop, improve and progress and provides a basis against which the work of the Fitness to Practise department can be planned and measured.

As in previous years, the Fitness to Practise department due to the nature of its work, will also have to manage high profile cases which will attract media interest, respond to High Court appeals and manage allegations which require an interim order. It is important that departmental planning allows for timely responses to unpredictable situations when they arise.

The Council's current strategic intent (2009 – 2014) was agreed at its meeting in March 2009. The strategic objectives outlined in the strategic intent document are repeated below together with an indication of how the work of the fitness to practise department helps to contribute towards those objectives.

1. To maintain and develop good governance during and after the restructuring of the Council
   Example references in this work plan - risk register, departmental budget, departmental forecasting of operational processes and departmental training
2. To maintain and develop efficient business processes throughout the organisation as it grows
   Example references in this work plan – review and update practice notes, review and update operating guidance, development of an integrated case management system, development of sifting tools and partner training
3. To increase understanding and awareness of regulation amongst all stakeholders
   Example references in this work plan – publications, website, employer events, partner training, development of signposting documents and participation in inter-regulatory forums
4. To build the evidence base of regulation
   Example references in this work plan – fitness to practise annual report, expectations of complainants research.
5. To proactively influence the policy agenda on regulation reforms
   Example references in this work plan – working with the policy and standards to respond to consultations.
6. To ensure that our values and processes dovetail with the respective healthcare delivery agendas in each of the four countries
   Example references in this work plan – liaison with stakeholder in the four countries and participation at employer events.

Resources

Human Resources

The fitness to practise directorate currently consists of 28 employees (as at 1 April 2009). It is anticipated that in 2009-2010 this will increase to 30.

Kelly Johnson   Director of Fitness to Practise
Beth Shaw   PA to the Director of Fitness to Practise

Case Management

Eve Seall   Head of Case Management

Case Team 1

Zoe Maguire   Lead Case Manager
Hannah Essex   Case Manager
Katherine Finn   Case Manager
Ciara O'Dwyer   Case Manager
Simon Thompson   Case Manager
Padideh Dolatashi   Case Manager

Case Team 2
Russell Brown   Lead Case Manager
Sabrina Adams   Case Manager
Victoria Adams   Case Manager
Nick Grassby   Case Manager
Dominic Williams   Case Manager

Case Team 3

Paul Robson   Lead Case Manager
Rodney Dennis   Case Manager
Jonathan Dillon   Case Manager
Grant Edgeworth   Case Manager

Adjudication

Hearings Team

Alison Abodarham   Hearings Manager

Salma Begum	Hearings Officer
James Bryant	Hearings Officer
Jason Rowbottom	Hearings Officer
Anaru Smiler	Hearings Officer
Rachel Bull	Scheduling Officer
Ola Odusanya	Scheduling Officer

Administrators

| Jameel Anwar | Team Administrator |
| Corrado Palmas | Team Administrator. |

The Lead Case Managers and Administrators report to the Head of Case Management, each case team reports to a lead case manager. The Hearings Manager, Head of Case Management and PA to the Director of Fitness to Practise report to the Director of Fitness to Practise.

Financial Resources

It is anticipated that there will be a fitness to practise budget of approximately £5.6million

This budget is based on an estimated 550 new allegations being received in 2009-2010 and a handover of approximately 45 practitioner psychologists' cases which are at the investigating panel stage. It is anticipated that case managers in case teams one and two will manage approximately 840 cases over the course of the financial year

It is anticipated that there will be approximately 635 days of hearing in 2009-2010 (comprising of full hearings, consent applications, interim orders, review hearings, investigating panels and registration appeal panels). The budget is based on hiring external venues in the home countries for approximately 50 days a year.

It is anticipated that there will be a slight increase in the number of health and character and registration appeal cases and that the number of protection of title cases will remain steady.

The case forecasting model is attached to this document as appendix 2.

The budget estimate also includes CHRE and registrant appeals to the High Court, appeals against registration appeal decisions, protection of title field work and other tribunal related works. The costs of appeals that were made in previous financial years and but not concluded are also included in the 2009-2010 budget.

The budget is also predicated on fitness to practise case managers presenting interim orders, Article 30 review hearings, consent applications and some conviction FTP cases. Case Managers/Officers present all investigating panel and health and character cases to the investigating/registration panel.

Responsibilities

The Director of Fitness to Practise is responsible for the overall management of the team, the development and implementation of the strategy and work plan and the development and management of new projects. The Director of Fitness to Practise also has specific responsibilities as set out in the Scheme of Delegation.

Case Management

The Head of Case Management is responsible for HPC's Case Management function across the directorate's range of responsibilities. This includes the management, presentation and investigation of fitness to practise case, the investigation and management of protection of title offences and the management of registration appeals and health and character declarations. She manages the lead case managers in the department and the team administrators.

Case Teams

There are three case teams within the directorate each managed by a lead case manager. Each lead case manager has a case load and management and auditing responsibilities.

Case teams 1 and 2 comprise of case managers who are responsible for the management and investigation of allegations and the presentation of fitness to practise cases.

Case team 3 has responsibility for registration appeals, prosecution of offences, incorrect entry cases, conviction FTP cases and health and character cases.

Adjudication – Hearings Team

The Hearings Manager manages the hearings team and she is responsible for the management of this team. She is also responsible for partners as they affect the work of the fitness to practise department.

Hearings Officers are responsible for arranging fitness to practise hearings including review of orders and interim orders. They also act as clerk to the tribunal. They undertake follow-up work after a hearing and some elements of HPC's witness support provisions.

There are 2 full time scheduling officers who ensure a steady progress in the fixing of cases. The other hearings officers will continue to clerk and then fix cases on the days where they are not clerking.

The Lead Hearings Officer will be responsible for the day –to- day work allocation of the hearings team. This will include allocating resources and ensuring availability of

facilities. They will also aid the Hearings Manager in a future review of the hearings function

Administrators

The Team Administrators provides support to the department across all of its activities. This includes hearing preparation, some elements of the witness support provisions and maintenance of the fitness to practise alerts system.   The Administration Co-ordinator will coordinate this activity.

The PA to the Director of Fitness to Practise undertakes all diary management and secretarial duties for the Director. She is also responsible for the logging and tracking of all invoices to ensure that costs billed were incurred.

Main Operational Processes

There are five main processes which generate the majority of the department's work. These are listed below. In each area of work, we will continue to review, refine and improve existing processes

1. Fitness to Practise Allegations

The investigation of allegations to the effect that a registrant's fitness to practise is impaired and the management of cases through to their conclusion. This includes witness liaison, instructing lawyers and preparing and presenting cases at investigating, interim order, final and review stage.

2. Hearings Management

The organisation and scheduling of all fitness to practise hearings and all follow up work related to hearing outcomes

3. Health and Character Declarations management

The process by which HPC manages declarations from registrants and applicants on admission, readmission and renewal to the register and via the self-referrals process.

4. Prosecutions of Offences

The investigation and management of offences under Article 39 of the Health Professions Order 2001. This includes field investigation and prosecuting offences in the magistrates court.

5. Registration Appeals

The management of cases where an applicant or registrant has appealed against a registration decision. This includes the organisation of hearings to hear such cases.

Other Activities

There are a number of other areas and activities which support and affect the processes operated by the Fitness to Practise department. The following paragraphs summarise these activities.

1.   Publications

A number of publications are produced by the fitness to practise team – ranging from the fitness to practise annual report and brochures explaining the processes, through to practice notes on interim orders and allegations, and other documents such as those explaining the registration appeals process. These documents are updated and reviewed regularly.

2.   Website

The department is responsible for information provided on the HPC website regarding fitness to practise hearings as well as the information online about the fitness to practise and protection of title processes. In 2009-2010 we will review the information that is available on the HPC website about the fitness to practise process.

3.   Panel recruitment, selection and training

In 2009-2010 the department will work with the Partner Manager to appoint and train new panel members and legal assessors and train new panel chairs.

Review days will take place for Legal Assessors and Panel chairs. These review days are used to update legal assessors and panel chairs on regulatory law updates, provide feedback on CHRE learning points and look at ways to improve decision making. The department will lead in the training of all new panel members, including two day training sessions for all new panel members, and refresher training for 50% of our panel members. We will continue to send regular updates to all partners in the form of a newsletter on the work of the department and other relevant updates.

4.   Committee Work

The fitness to practise department works with a number of committees – including the three fitness to practice committees on fitness to practise issues and the Education and Training Committee with regards to the health and character process.

5.   Liaison with stakeholders

We will continue to work with all stakeholders (including employers of registrants) to improve understanding and accessibility and feedback trends that have arisen out of fitness to practise cases.   The department will continue to support the Communications department with representation at conferences and employer events and will continue to present to relevant stakeholders on the fitness to practise

process. We will continue to be involved in advisory groups (such as those run by CHRE and the Department of Health).

6. Transfer of new professions

We will work to ensure the effective and efficient handover of fitness to practise cases from the British Psychological Society and ensure readiness for the planned transfer by the Department of Health and the Department of Business, Enterprise and Regulatory Reform (BERR) of the Hearing Aid Council to the remit of the HPC.

7. High Court cases

We will continue to manage high court cases – this includes both cases when registrants appeal the decision to find their fitness to practise impaired and/or impose a sanction and when CHRE refer a case in accordance with Section 29(4) of the National Health Service Reform and Health Care Professions Act 2002. We will ensure that we disseminate outcomes as appropriate and make any necessary changes or improvement to fitness to practise processes.

8. Supplier Management

We will complete the tender for transcription writer services in 2009-2010, review the facilities that we use for external hearings and review the catering facilities as they relate to fitness to practise. We will also closely manage our relationship with all our key suppliers, including keeping under review our contracts and service level agreements with these suppliers.

9. Major Projects

Members of the fitness to practise department will also contribute to and be on the project team for the following major projects:

- Fitness to Practise Case Management System
- Renewals Cycle review
- Transfer of the Hearing Aid Council
- Onboarding of Applied Psychologists
- Independent Safeguarding Authority

10. Other

We will work with the Registrations department in their review of the application process to identify improvements so that we can reduce the risk of exposure of identity theft.

The Fitness to Practise Department are due to be audited as part of HPC's ISO accreditation in April 2009. We will ensure that we have the capacity to manage the requirements of this.

We will also ensure that we have the resources to meet the demands of the CHRE audit of the initial stages of the fitness to practise process which is due to begin in 2009.

We will also work with policy and standards department in responses to consultations, the CHRE performance review and in providing statistical information for research and work that that department is undertaking.

Achieving the Fitness to Practise Department Objectives 2009-2010

The headline objectives for 2009-2010 are broadly the same as 2008-2009 but with different tasks to meet the objectives. 2009-2010 will be a year in which will look at further refinement, review and development of existing processes and procedures. A number of the items listed below are referenced earlier in this document but are listed here for completion

Fitness to Practise Objective – Ensure accessibility and improve communication and information provision

We will continue to look at ways in which we can ensure that all stakeholders that come into contact with any element of the work of the Fitness to Practise Department receive a high quality of information, service and that we continue to ensure that the departmental processes are accessible. To this end we will;

1. continue to produce and further develop the Fitness to Practise annual report;
2. complete our equality and diversity actions points;
3. produce a witness support brochure;
4. research and develop a Fitness to Practise hearings DVD;
5. provide feedback and learning from fitness to practise cases;
6. continue to contribute to and attend employer events;
7. undertake a whole scale review of the documentation produced by the fitness to practise department;
8. produce a practice note manual;
9. further develop and review service level standards;
10. ensure that processes to make a complaint are accessible;
11. develop a signposting document to provide alternative sources of information for those involved in the fitness to practise process ; and
12. work with the Policy and Standards department in researching consumer complaints, the unfair consumer practices directive and the Office of Fair Trading approved code.

Fitness to Practise Objective – Effective Management and Development of Legislative and New Operational requirements

There are a number of legislative and operational projects and developments which will require the input and involvement of the fitness to practise department in 2009-2010. We will ensure that we manage these projects and developments within agreed timescales. For completeness, those projects are listed below:

1. Development of an integrated case management system
2. Transfer of the Hearing Aid Council
3. Onboarding of the Practitioner Psychologists

4. Independent Safeguarding Authority
5. Renewals Cycle review
6. Improve Identity checks
7. Initial Audit of Fitness to Practise decisions
8. Panel Member Appraisal

Fitness to Practise Objective –Consistent and effective decision making

This objective is broadly the same as 2008-9 in that we will continue to undertake and be involved in the following activities:

1. Feedback learning points from CHRE's review of conduct and competence and health cases to those involved in the fitness to practise process
2. Closely monitor updates in regulatory law and update polices and practices where appropriate
3. Hold review days for legal assessors, panel chairs and panel members;
4. Appointment and training of new panel members, panel chairs and legal assessors
5. Production of a quarterly newsletter for fitness to practise partners.

However, to also meet this objective we will;

1. undertake a whole scale review of the Indicative Sanctions Policy;
2. produce a practice note on impairment;
3. look into mechanisms to quality assure the decisions made by fitness to practise panels;

Fitness to Practise Objective – Ensure processes and procedures are working to their best effect;

As well as continually reviewing and refining all of our processes we will;

1. undertake research into the expectations of complainants;
2. review service level standards;
3. develop and implement "sifting tools";
4. work with professional bodies and employers in developing information about what registrants can do when they are suspended from the register;
5. further produce, develop and refine Fitness to Practise Operating Guidance; and
6. keep under review the length of time it takes for cases to conclude and ensure and ensure the expeditious management of cases.

Fitness to Practise Objective – Ensure Effective Management of Resources

To ensure that resources are used to their best effect we will;

1. work with the partners team on the process to appoint, reappoint and train partners
2. continue to undertake risk assessment for cases;
3. monitor existing budgetary controls to ensure the proper management of the fitness to practise budget;
4. further develop systems of operational forecasting;
5. complete the fitness to practise department skills audit; and
6. design and deliver a long term training plan.

Fitness to Practise Objective Ensure effective management of risk

The Fitness to Practise department manages a number of risks in relation to its functions. The key areas of risk in the fitness to practise area are as follows:

1. legal cost over-runs;
2. legal challenge to HPC operations;
3. exceptional tribunal costs;
4. witness non-attendance;
5. physical assault by hearing attendees;
6. registration appeals; and
7. data received from third parties

We will ensure appropriate measures are in place to mitigate against these risks.

Equality and Diversity Impact Assessment

We will ensure that as we complete our work plan and review the policies and procedures that are in place, we will ensure we will take into account any issues that could have an adverse impact and mitigate against this.

We will continue to aim to improve accessibility to the fitness to practise process.

Fitness to Practise Department activities in 2008-2009

Provided as appendix 3 to this document is a review of the work undertaken and completed in 2008-2009.

Appendix 1: Fitness to Practise Activities Table 2009-10

The table below sets out the fitness to practise department's timetable in achieving the tasks set out in the work plan above and the employee who will take the lead on the specific area of work

Appendix 2: Fitness to Practise Forecast

This document sets out the case, hearings and resource forecast for 2009-10

Appendix 3: Fitness to Practise Activities 2008-9

This document sets out fitness to practise department activities in 2008-9

Appendix 1: Fitness to Practice Activities Table 2009-2010

Fitness to Practise Objective: Ensure accessibility and improve communication and information provision

Activity	Description	Rationale	Timescale	Person(s) responsible
Fitness to Practise Annual Report	Production of 2009-2010 Fitness to Practise Annual Report	Legislative Requirement	January 2010-September 2010	Eve Seall
Witness Support Brochure	Develop witness support material and review witness expense policy	To ensure those that are attending fitness to practise hearings are supported appropriately	April-September 2009	Alison Abodarham
Fitness to Practise Hearings DVD	Research and develop a DVD which sets out and explains the hearings process	As above	September 2009 – April 2010	Alison Abodarham
Practice Note Manual	Produce a practice note manual to aid those that are involved in the fitness to practise process	Aid to those who are involved in the fitness to practise process	September 2009	Russell Brown
Signposting document	Develop a signposting document to provide alternative sources of information who may wish to make a complaint or are seeking further information about registrants	Ensure that complainants are being signposted to appropriate organisation and that the department is fully aware of changes to legislation which affects how other organisations deal with complaints	April - October 2009	Paul Robson
Consumer Complaints	Work with the policy and standards team in researching consumer complaints, the unfair consumer practices	As above	April-October 2009	Zoe Maguire

	directive and the Office of Fair Trading Approved code			
Attendance at Employer Events	Attend and participate in the continuing series of employer events	Stakeholder engagement	Ongoing	All
Document Review	Ongoing review of standard letters and documents produced by the fitness to practise department	Good practice	Ongoing	Lead Case Managers
Development of Service Level Standards	Further develop and review the Fitness to Practise department service level standards	Ensure the expeditious management of cases and that those involved in the process receive a good service	Ongoing	Eve Seall
Accessibility of process	Further develop processes to ensure that they remain accessible to all users	Ensure accessibility	Ongoing	All

Fitness to Practise Objective – Effective Management and Development of Legislative and New Operational requirements

Activity	Description	Rationale	Timescale	Person(s) responsible
Development of an integrated case management system	Map all fitness to practise department processes, research and develop an integrated case management system	Ensure that the fitness to practise department is able to meet the demands of new professions and increased numbers of allegations, cases and hearings	April 2009-April 2011	Kelly Johnson
Transfer of the Hearing Aid Council	Effective transfer of cases from the remit of the Hearing Aid Council to the HPC.	Legislative Requirement	April 2010	Zoe Maguire/Kelly Johnson
Transfer of the Practitioner Psychologists	Effective transfer of practitioner psychologist cases from the remit of the British Psychological Society to the HPC. This will include ensuring systems are adapted and the production of new operating guidance.	Legislative Requirement	July 2009	Kelly Johnson/Eve Seall
Implementation of the requirements the Protection of Vulnerable Groups and Safeguarding Vulnerable Groups Act	Ensure that HPC registration systems can capture and record barring numbers, production of practice notes to provide guidance to panels on when case should be referred to the IBB and training of the team and partners	Legislative Requirement	September 2009-Ongoing	Kelly Johnson

Renewals Cycle Review	Work with the registrations department in their review of the renewals cycle to ensure the operational demands of both departments are managed	Effective management of resources	April – October 2010	Eve Seall/Paul Robson
Improve Identity Checks	Work with the registrations department in their project to improve identity check on applicants and registrants	Good Practice	June 2009 and ongoing	Eve Seall
Initial Audit of Fitness to Practise decisions	The Health and Social Care Act 2008 has been amended to allow CHRE to audit cases that have not been referred to a final fitness to practise panel. We will need to ensure that we have the resources to manage this new requirement	Legislative Requirement	November 2009 – February 2010	Eve Seall/Kelly Johnson
Panel Member Appraisal	Follow up any issues that arise out of panel member appraisal and work with the partners team of the further development of the panel member appraisal system	Effective management of resources and good practice	Ongoing	Alison Abodarham

Fitness to Practise Objective –Consistent and effective decision making

Activity	Description	Rationale	Timescale	Person(s) responsible
Review Indicative Sanctions Policy	Undertake a wholescale review of the Indicative Sanctions Policy	Ensure consistency in decision making and to ensure it reflects any legislative changes	December 2009	Kelly Johnson
Impairment Practice Note	Produce a practice note on finding impairment to provide guidance to those involved in the fitness to practise process	Ensure consistency in decision making	July 2009	Kelly Johnson
CHRE learning points feedback	Feedback learning points from CHRE to those involved in the fitness to practise	Ensure consistency in decision making	Ongoing	Kelly Johnson
Monitor updates in regulatory law	Monitor updates in regulatory law to ensure that HPC policies and procedures properly reflect any relevant regulatory case law	Ensure processes accurately reflect changes in the law	Ongoing	Zoe Maguire
Panel Chair, Legal Assessor and Panel Member Review Days	Prepare and present review days for FTP partners	Ensure consistency in decision making and that information is properly disseminated	Ongoing	Kelly Johnson/Eve Seal/ Alison Abodarham
Appointment and training of new panel members, panel chairs and legal assessors	Sit on appointment panels for new FTP partners and subsequently prepare and present at training sessions	Ensure that there are enough partners to meet the operational requirements of the fitness to practise department	Ongoing	Kelly Johnson/ Eve Seall/ Alison Abodarham
Quarterly newsletter for fitness to practise partners	Send out a quarterly newsletter to fitness to practise partners providing them with information	Ensure consistency in decision making	Ongoing	Alison Abodarham

	on new practice notes, regulatory case law and CHRE learning points			
Quality Assurance of Decisions	Develop mechanisms to quality assure decisions made by fitness to practise panels, registration panels and registration appeals panels	Ensure consistency in decision making	Ongoing	Alison Abodarham/Eve Seall/Paul Robson

Fitness to Practise Objective – Ensure processes and procedures are working to their best effect;

Activity	Description	Rationale	Timescale	Person(s) responsible
Complainant Expectations research	Undertake research into the expectations of complainants when the make a complaint and increase understanding of the experience of complainants	Increase understanding of the expectations of complainants to aid future work planning	April 2009-March 2010	Kelly Johnson/Zoe Maguire
Develop and Implement Sifting tools	Develop sifting tools to identify cases where there is a low incidence of case to answer or impairment being found and establish robust and transparent processes for dealing with such cases	Ensure cases are being managed appropriately	April-December 2010	Kelly Johnson/Eve Seall
Suspended registrants	Work with employers and professional bodies to provide further information on what registrant's can do whilst they are subject to a suspension		December 2010	Russell Brown
Produce, develop and refine Fitness to Practise Operating Guidance	Develop further operational guidance to aid the team in the development of their work	Ensure consistency in the management of cases as the team increases in size	Ongoing	All
Keep under review the length of time it takes cases to conclude	Ensure that cases are being managed in an expeditious time frame and take action when cases are taking longer than expected	Ensure that cases are being managed in an expeditious time frame	Ongoing	Eve Seall/Alison Abodarham
Review Service Level Standards	Review service level standards to ensure they are working appropriately	Ensure a good provision of service	Ongoing	Eve Seall

Fitness to Practise Objective – Ensure Effective Management of Resources

Activity	Description	Rationale	Timescale	Person(s) responsible
Skills Audit	Undertake a skills audit of the fitness to practise department	As above	April 2009	Paul Robson
Long term training plan	Develop a long term training plan to ensure human resources are being developed appropriately	As above	April 2009	Kelly Johnson/Eve Seall/Alison Abodarham
Budgetary controls	Ensure effective controls are in place to manage the fitness to practise budget	Ensure that resources are being used to their best effect	Ongoing	Kelly Johnson
Operational forecasting	Ongoing forecasting of number of cases and hearings that are expected	As above	Ongoing	Eve Seall/Alison Abodarham

Appendix 2 - Fitness to Practise Forecasting Model

		2008-2009	2009-2010	Psychologists 2009-2010	Total 2009-2010
Pre ICP information					
	Allegations Received	455	486	62	548
	Outstanding pre-ICP case load (end of March 2008 carry over)	247	224	45	269
	Closed Cases prior to ICP	95	87	13	100
	Total Allegations Managed	**702**	**710**	**107**	**817**
ICP information					
	Total cases considerd	384	399	50	449
	Referral rate %	0.57	0.57	0.40	0.55
	Total cases referred	**217**	**228**	**20**	**248**
Final/review hearing information					
	Outstanding cases to be heard	176	188	12	200
	Total cases instructed	393	415	32	447
	Open Review Cases	89	99	7	106
Cases heard	Concluded final hearing cases	206	228	10	238
	Adjourned/Part heard final hearings	36	36	2	38
	Review cases heard	92	100	15	115
	Interim order panels	80	88	11	99
Days of hearings	Total Days of Public Hearing	474	428	20	448
	Days of IO		42	5	47
	Days of Review		50	8	58
	Days of ICP	49	72	0	72
	Days of registration appeals	9	12	0	12
	Total days of hearings	**532**	**604**	**33**	**637**
Hearings Team work load/people required					
	Working Days per Hearings Officer	210	210	210	
	Lieu per year per Hearings Officer	17	20	20	
	Days to Clerk per Hearings Officer	100	138	138	
	Days to fix per Scheduler	N/A	302	16	319
	Hearings Officers required to clerk	5	4	0	4
	Days to fix cases	93			
	Hearings Officers to fix case / Total Schedulers	6	2	0	2
	Total hearing team(exlcuding Hearings Manager)	**6.5**	**5.8**	**0.3**	**6.1**
	HearingsTeam (including HM)	**7**	**7**		**7**
Case Manager work load/people required					
	Allegations Managed per year	699	710	107	817
	Post case to answer cases	528	515	47	562
	Review & ConsentHearings presented In house	64	65	0	65
	Interim orders presented in house	68	88	11	99
	Conviction cases presented in house	13	14	0	14
	Witness assessments	16	16	1	17
	Witness statements	2	0	0	0

Case Manager- time required	Review & Consent Hearings presentation and preparation (calculated at 1.25 day)	64	81	0	81
	Interim Orders presentation and preparation (calculated at 1 day)	68	88	11	99
	Conviction Cases presentation and preparation (calculated at 1.5 days)	20	20	0	20
	Witness Assessments (calcualted at 1 day 2CM's)	27	32	1	33
	Witness Statements (calcualted at 1 day)	4	0	0	0
	Total working days	**183**	**221**	**13**	**234**
Case Managers - people required	Working days per Case Manager	210	210	210	210
	Case Managers required for presentation and preparation work	0.9	1.1	0.1	1.1
	Carry Over of pre ICP cases 2007-2008	248	224	45	269
	Cases to ICP	392	399	50	449
	Increse in allocation of work per month(total)	26	26	5	31
	Live Cases per month	273	250	50	300
	Managed Cases per month		283	54	337
	Case Managers requred for allegations management (calculated at 38 cases assigned per CM)	7	7	1	9
	Total Case Managers required	**8.1**	**8.5**	**1.5**	**10.0**
	Lead Case Managers	2.0	2.0	0.0	2.0
	Head of Case Management	1	1	0	1
	Total	**11**	**12**	**0**	**13**
Protection of Title	Cases received	436	436	0	436
	Outstanding POT case load	132	70	0	70
	Cases closed	498	445	0	445
	Increase in cases per month			0	0
	Average open per month		70	0	70
	Total cases managed	**568**	**506**	**0**	**506**
Health and Character	Cases received	470	511	60	571
	Outstanding H&C case load	75	50		50
	Cases closed	495	505	60	565
	Average open per month				
	Total cases managed	**545**	**561**	**60**	**621**
Registration Appeals	Cases received	46	65		65
	Outstanding Reg Appeal case load	27	23		23
	Cases to appeal panel	50	60		60
	Cases closed	50	60		60
	Total cases managed	**73**	**88**		**88**
Case Team Three requirements	Total Case Team 3case load	1186	1155	60	1215
	Cases per person per year (H&C, RA, POT)	339	339	339	339
	FTP cases managed	0	78	10	88
	COs required for case management	4	3	0	4

	Attendance at reg appeals	9	12		12
	Lieu days	3	3		3
	Field work	3	30		30
	Working days per Case Officer	210	210		210
	Case Officers required for other work	0	0		0
	Total Case Managers required	**4**	**4**		**4**
	Lead Case Manager	**1**	**1**	**0**	**1**
	Total Case Team 3	**5**	**5**	**0**	**5**
Administration Work					
	ICP bundles - (number of ICP days)	49	72	0	
	Final hearing bundles	242	264	12	
	Review hearing bundles	92	100	15	
	IO bundles	80	88	11	
	Alerts lists - every 2 months	6	6	0	
	Website updated - every 2 weeks	26	26	0	
	Catering orders - once a week	52	52	0	
	Transcripts handled	463	524	38	
	Hearing prep	472	536	38	
	Travel bookings (how many on average per hearing) - 10 per month	120	130		
	FTP cases to log	455	486	62	
	H&C cases to log	470	511	0	
	POT cases to log	436	436	0	
	RA cases to log	46	65	0	
	Archiving - every 2 months	6	6	0	
	Other general admin - calls, emails, assisting CMs				
Admin time/people required		in days			
	Bundle days	80	95	5	101
	Alerts lists days - every 2 months, 1/2 day per list	3	3	0	3
	Website updated days- every 2 weeks, 1 hour per week	2	2	0	2
	Catering orders - 2 hour per week	15	15	0	15
	Transcripts handled - 1 hour per week	7	7	0	7
	Hearing prep - 30 mins per hearing	34	38	3	41
	Travel bookings (how many on average per hearing) - 2 hours per booking	34	37	0	37
	FTP cases to log - 1 hour	65	69	9	78
	H&C cases to log - 30 mins	34	36	0	36
	POT cases to log - 30 mins	31	31	0	31
	RA cases to log - 30 mins	3	5	0	5
	Archiving - every 2 months, 1 day	6	6	0	6
	Other general admin - calls, emails, assisting CMs - 2.5 hours a day per person	186	186	0	186
	Total days	**500**	**531**	**17**	**548**
	Total working days per administrator	**210**	**210**	**210**	**210**
	Total people required	**2**	**3**	**0**	**3**

Appendix Three – Fitness to Practise work plan update 2008-2009

Work plan items

Activity	Start Date	End Date	Progress Report
Fitness to Practise Annual Report	January 2009	September 2009(for publication)	Work will begin on the FTP annual report in January 2009. The 2008 report will be published imminently
Collection of Equality and Diversity Data Equality and Diversity Action Points	April 2007 (Ongoing)	Ongoing	The forms are now sent at a earlier stage in the process. We are currently reviewing the effectiveness of this. We are also considering legal advice provided to Council regarding the collection of equality and diversity data as it links to FTP A policy on the handling and purchasing of religious books was considered by the three Fitness to Practise committees at their September 2008 meeting

Review of arrangements put in place to support witnesses/complainants	Ongoing	Ongoing	We are currently collating the data from the witness questionnaire, have produced FAQ's and have reviewed the frequency of contact with witnesses and complainants in line with the development of service level standards. We are also reviewing the expense policy for witnesses and have produced a hostile witnesses FOG and are in the process of reviewing the arrangements for expert witnesses
Communication with employers	Ongoing	Ongoing	Ongoing (including writing to all employers and the employer events)
CHRE learning points	Ongoing	Ongoing	Learning points continue to be disseminated to panels as and when appropriate and at all training sessions
Implementing the requirements of the Safeguarding and Protecting Vulnerable Groups Act	Ongoing	Ongoing	It is anticipated that the implementation of PVG and SVG will begin in Autumn 2009. Meetings with the implementation team will continue throughout the

			remainder of the financial year
Trends Analysis of health and character process			The Education and Training committee considered the review of the health and character process in March 2008 and recommended that guidance for registration panels was produced to aid panels in their decision making.
Implement the recommendations of the Health and Character review and provide guidance for education providers			The Education and Training Committee considered guidance for education providers at its December meeting. The committee also approved the revised Health and Character policy
Review Indicative Sanction Policy and provide regular updates in regulatory case law	May 2008	September 2008	The Council considered and approved the revised Indicative Sanctions Policy at its meeting in December New Case Law is disseminated through training sessions with Partners and filed for reference use at Hearings.
Review days for legal assessors and panel chairs	Ongoing	Ongoing	Panel chair training took place on 27 June 2008. The next session is scheduled for 24 February 2008. A legal

			assessor review day took place on 5 September 2008
Partner newsletter	Ongoing	Ongoing	A newsletter for fitness to practise partners is issued every three months. This document includes items on CHRE learning points, information on decision making, the case to answer tests, scheduling information and updates on the work of the department
Continual review of prosecutions of offences policy	Ongoing	Ongoing	Case Team 3 is now at full capacity, led by Paul Robson, lead case manager. All correspondence has been reviewed and FOG on implementing the policy and protection of title field visits have been issued

Review of fitness to practise processes	Ongoing	Ongoing	
			Practice Notes New and updated practice notes have been issued and/or produced in the following areas: • Case to Answer • Equal Treatment • Preliminary Meetings • Cross Examination in Cases of a Sexual Nature • Finding impairment **Policy development** The following policies have been approved by Committees(s) • Frivolous, Abusive and Vexatious Complaints • Article 30 advice • Handling and purchasing of religious books • Indicative Sanctions Policy

			• Health and Character The following policies are currently under development and will be complete by the end of the financial year 2008-09 • Disclosure • Data Retention and Destruction **Fitness to Practise Operating Guidance** Fitness to Practise Operating Guidance (FOG) have been produced and issued on the following subjects: • Controlled Substances • Watch list • Health and Character Process • Investigations and Allegations (including • Investigative Report Writing • Obscene Image Storing • Physical Evidence

			Management • Police Station Paramedics • Protection of Title Offences • Registration Appeals • Requiring Disclosure of Information • Risk Profiling • Three Year Rule • Witness Interviews • Witness Management, • Assessing Vulnerable witnesses • Witness Statements • Presenting Officers, • Instructing and Seeking Advice • Handling obscene/sexually explicit material • Fixing Hearings • Handling Complaints about an Education or Training Programme • Hearings Risk Management • Protection of Title Field Visits

			• Adjournment Requests • Binding Over and Discharge by Criminal Courts We are currently reviewing the following processes (this includes the production of FOG: • Taking complaints over the telephone • Consent • Case Directions • Signposting **Speciman directions** • Specimen directions for legal assessors on dealing with delay, the civil standard of proof and the Donkin judgement have been issued **Process and IT reviews** We are currently reviewing the effectiveness of the fitness to practise processes. This

			includes reviewing the effectiveness of the IT systems in place to support the work of the department. Reviews of the following processes have taken place: • Investigating Panel Fixing • Organising Interim Order Reviews • Initial Enquiry and Pre ICP. • ICP bundles • Logging cases • Travel process • Miscellaneous cases • Review of external venue hire costs • Hearing bundles • Distribution of hearings papers • Hearing prep • Shorthand writers • Stationary ordering • Alerts lists • Presenting Officer preparation • Article 30 reviews

			- File Audit - Case review meetings - Service Standards - Ordering catering Reviews will take place of the following areas over the coming months: - Filing structure - Updating the website - Archiving - Pre ICP case management - Post ICP case management - Watchlist - Health and character database - ISO processes - Consent **Other** - We anticipate tendering for the supply of transcription services at FTP hearings before the

			end of the financial year
			• We are currently in the process of applying to instruct barristers directly
			• We are currently collating panel feedback on hearings
			• File audits take place on a monthly basis
			• A review of length of time takes place on a monthly basis
			• The production of more information for appellants
			• Reorganisation of G drive
			• Further development of service level standards
			• We are in the middle of writing to the Notifiable Occupations Scheme regarding the role of the HPC
			• Follow up to the review of external complaints literature
			• Standard documents and templates are continually reviewed (including

			decision templates, Article 22(6), changing the register) • We now receive bundles from Kingsley Napley electronically, cutting down on photocopying costs • We have produced a plain English version of the case to answer practice note for complainants. • Also kept under review are standard letters that are sent to those involved in the fitness to practise process. There are proformas for most correspondence

Training of Fitness to practise team	Ongoing	Ongoing	The following training courses have been completed by members of the fitness to practise department • BTEC in Investigative Practice • Advocacy Training – Part 1 • Essentials of Leadership • Excel (Basic and Advanced) • Getting Organised • Dealing with individuals with high levels of stress and mental illness • Performance management; • Interview training • Equality and diversity • The Health Professions Order • Understanding the Data Protection and Freedom of Information Acts • Visits to the High Court, and the other regulatory bodies • Dealing with Vexatious

			Complaints • Excel • Increasing understanding of the professions regulated by the HPC • Leadership Skills
Risk Assessment	Ongoing	Ongoing	FOG on the risk assessment of cases, hearings risk assessment and protection of title field visits have now been produced
Information Technology improvements	Ongoing	Ongoing	See above re the review of fitness to practise processes.
Net Regulate Statuses Project	July 2008	April 2009	The Net Regulate statuses project will make operational and technology changes to optimise the use of the registration system within FTP. This includes updating the statuses captured within Net Regulate and providing a link on the online register when conditions of practice are imposed on a registrant. This project is due for completion at the end of February 2009

Net Regulate Testing	Ongoing	Ongoing	Various members of the department are involved in testing the Net Regulate system as required
Finance System Upgrade			The Director of FTP and Team Administrators are on the project team to move from a manual to an electronic purchase order system
Partner Training, reappointment and appointment	Ongoing	Ongoing	Training for new partners took place at the end of July Refresher training for approximately 50% of our existing partners took place between October and December 2008. Psychologists partner appointments took place in June 2008 with training due to take place in March 2009. We are currently advertising for new panel chairs and the Director and Hearings Manager will be on the panel for this

			vacancy
Operational Forecasting	Ongoing	Ongoing	This is an ongoing area of work but includes ensuring enough resources to schedule hearings.
Transfer of New Professions	Ongoing	Ongoing	The following areas of work are part of the transfer for the fitness to practise department: • Case transfer and the issues associated with the transfer (including how to deal with those registrants who are subject to undertakings and conditions, statistical forecasting and data protection policies) • FOG on the case transfer
Risk Management and adequate budgetary controls	Ongoing	Ongoing	Ongoing

Human Resources Department 2009 – 2010 Workplan

Contents

Introduction

As the HPC continued to expand its employee numbers, the focus of the Human Resources Department in 2008-2009 was on recruitment, induction, training, and completing the process of re-organisations in four departments. For the first time an employee attitude survey was conducted. The partner role was heavily focussed on contractual renewals and recruitment, with partners being recruited and selected for the anticipated practitioner psychologists coming onto the register. Training was a time consuming aspect of that year, with all existing Visitor Partners receiving refresher training amongst other regular training events.

During 2009-2010 in the employee area, the focus will largely be in the training area as well as on regular projects such as equality and diversity which contain ongoing actions. In the partner area, there will also be an emphasis on training and on the various performance management systems, including training of new partners and also refresher training for all Registrations Assessors.   Half of the Panel Members, and half of the Visitors who were untrained in the refresher training in 2008 also

The ability of the Human Resources Department to respond to events which could not be anticipated has been an important attribute in delivering the services required every year. This will also be a key feature of the 2009-2010 workplan as there must be the ability to adjust work where needed to meet any unexpected demands that arise.

This document

This document explains the work priorities for the financial year April 2009 – March 2010. It addresses how the Human Resources Department will progress over the next year to meet new legal obligations and progress improvements for employee management at the HPC. The organisation is a rapidly growing one and as with previous years, there will be a continued focus in the workplan on recruiting employees and partners with the appropriate competencies to fulfil all roles. This will be of particular importance in 2008 with the need to fill the new partner role of CPD Assessors and for the partner functions that will be required when the Applied Psychologists and Hearing Aid Audiologists are regulated by the HPC.

It should be noted that the Human Resources Department does not manage any of the human resources related functions which apply to Council (such as recruitment of Council members) and that this work is delivered by the Secretariat Department.

Resources

The Human Resources Department consists of five employees as follows:

Teresa Haskins   Director of Human Resources (From 1 April 2009)
Joan Mc Brearty   Human Resources Manager
Sam Ha   Human Resources Team Administrator
Kathryn Neuschafer   Partner Manager

Marche Wilson   Partner Administrator

There are currently no plans to increase the Department with any additional permanent team members. However Deborah Dawkins, Registrations Advisor, will be Acting-Up as Partner Manager for the first six months of the 2009 calendar year due to maternity leave being taken by Kathryn Neuschafer.

The Director of Human Resources is responsible for the overall management of the team, the day-to-day running of the department, the development of the strategy and the workplan and the development and management of new projects. The Director is a member of the Executive Management team and is involved in most capability or disciplinary hearings and the provision of human resources related advice to managers.

The Team Administrator provides administrative support in relation to the employee management functions (not the partner functions). This primarily involves co-ordinating the paperwork associated with recruitment and training, conducting inductions, and maintaining databases and filing systems.

The Human Resources Manager is responsible for the whole range of generalist human resources tasks. The current Human Resources Manager, Joan, started with the department in January 2009. These include interviewing, management of sick leave across the organisation, drafting policies, higher level HR database management, advising and note taking in formal HR meetings, and advising managers and employees generally.

The Partner Manager provides a service to the partners of HPC and the department heads who manage the various partners. Their activities incorporate the day to day management of partner issues such as recruitment, induction and training of partners and implementing partner policies. The Partner Manager administers the Partner Handbook including its complaints and expenses policies.

The Partner Administrator assists the Partner Manager with all of the above activities and plays a key role in organising recruitment and training. This is alongside database management and completion of paperwork around all partner matters including performance management, contract administration and partner training.

Human Resources activities in 2009 - 2010

There are seven main areas of work undertaken within the Human Resources area. The following paragraphs summarise the headline employee and partner activity for the year.

Employees

Recruitment, selection and induction will form a less significant part of the department's workload than previous years in 2009, due to less recruitment across the business generally. Employee numbers now total 121 and along with filling any ad hoc vacancies which arise as a result of resignations, 7 newly approved

permanent posts in the 2009-2010 budget require advertising (along with 1 post in Education carried over from 2008).

The newly approved posts for 2009 are;

Secretariat Department
- Freedom of Information Officer 1

Communications Department
- Communications Officer 1

Fitness to Practise Department
- Case Manager 2
- Team Administrator 1
- Case Manager (six month contract) 1

Education Department
- Education Administrator 1

Total 7

Please note the Education vacancy is not a new post, it is carried over from the 2008-2009 budget year due to the delay of the Practitioner Psychologists coming onto the HPC Register.

Whilst the employees voted to have a pre-existing agreement set up under the **Information and Consultation of Employees Regulations 2004** in 2008, the agreement is in its initial stages with consultation still taking place through negotiating employee representatives. Throughout 2009 an agreement should be finalised and employee and management representatives elected with regular meetings and consultation with employees taking place.

Support and training for managers and employees will continue to take time for the department in the coming year. Whilst the equality and diversity training has now been conducted organisation wide, there are training opportunities in other areas (for example some in house HR training and project training for project leads).

There are a number of ongoing activities that are part of the human resources plan every year including annual position description updates, co-ordinating the annual pay review with the external salary evaluation company and managing the annual performance review process in the final quarter of each year.

There will always be challenging employee relations issues to deal with in any HR department including management of employment tribunal claims from time to time. It is important that the department retain the flexibility and ability to respond to these as required and ensure fairness and consistency in the application of human resources procedures across the business.

Partners

Partner training will form the main area of work for the partner management function in 2009 (see Appendix 2).   Whilst last year the focus was on contract management and recruitment for the partners associated with the Practitioner Psychologists coming onto the register, the coming year will concentrate on training these partners as well as those in preparation for the Hearing Aid Council being placed under HPC.

Refresher training will be conducted for all Registration Assessors in 2009 which is a significant exercise in terms of co-ordination and general organisation. Refresher training will also be conducted for half of the Visitors and the Panel Members who were not trained in 2008 will also be trained.

There will be a strong focus in 2009 on the **performance appraisal mechanisms** for partners. With all systems now running and the Fitness to Practise system currently being rolled out, it is a good opportunity to evaluate the effectiveness of the three systems and see how effective and useful they are.

There will be **recruitment** to undertake however less than previously as it will largely consist of replacement posts or new CPD Assessor posts.

There will also be an internal focus in 2009 on the **partner database and paperwork**. There are many paper based files and we will be moving to a scanned system for partner records to increase efficiency and reduce cupboard space taken by the paper files. We also aim to do some auditing to ensure all paperwork details are accurately recorded on the partner database.

Employees and partners

In both the employee and partner areas of the human resources department, we will continue to undertake various actions for the organisation wide **equality and diversity** project.

Budget Management

The department manages both the human resources general budget and the partner budget. The general human resources budget totals £367,517.   Headline areas of the budget consist of £40,000 for organisation wide training, £25,000 allocated to legal expenses associated with employment related matters and £58,000 budgeted for organisational recruitment.

The partner budget of £380,871 largely consists of provisions for partner recruitment and training. Two significant sums forming part of this figure are £53,170 which has been allocated for partner recruitment, and £246,182 for training.

Achieving the Human Resources Objectives in 2009 - 2010

We have identified eight objectives in the strategy. In 2009-2010 we will undertake the following activities in support of these objectives.

Please note that most of the employee HR Objectives have not been written so that the new Director can determine what they would like to do in 2009.

Human Resources (Employees) Objective 1: Consultation Agreement

To continue with our agreed development and implementation of a pre-existing agreement under the Information and Consultation of Employees Regulations (2004) we will:

- develop and agree the provisions of pre-existing agreement through negotiations with employees; and
- implement the agreement ensuring meetings are conducted (and subsequent consultations) in accordance with the provisions of the agreement and with human resources support and advice.

The timescale for this is ongoing throughout 2009 however the agreement must be written and implemented within six months of the commencement of negotiations with employees.

Human Resources (Employees) Objective 2: Training

To progress and build on the provision of organisational Training we will:

- investigate and research potential for training plans for new managers which sees them undertake a set programme of formal and informal training in management areas such as budgeting, workplans, appraisal and human resources procedures;
- continue to co-ordinate annual training on diversity, interview techniques, appraisals; and
- take-over responsibility for arranging organisation-wide IT training (this was previously managed in the IT department).

Human Resources (Employees) Objective 3: Customer Service

To maintain and improve our levels of Customer Service to managers and employees we will:

- work with the IT department to introduce and roll-out an electronic system for starter and leaver forms for both temporary agency staff and HPC employees.
- continue to carry out exit interviews with leaving employees and assemble an annual report on trends.

Human Resources (Partners) Objective 4:

To address training needs across all partner roles we will:

- provide training for all newly appointed CPD assessors;
- provide refresher training for all Registration Assessors (totalling 120);
- provide refresher training for the Panel Members (90 in total) and Visitors (85 in total), half of whom were not trained in 2008 and therefore require training in 2009; and
- provide training for all new partners associated with the Hearing Aid Council partners coming on board (approximately 16 partners).

The timescale for this training will be throughout the year as per the attached training schedule.

Human Resources (Partners) Objective 5:

To recruit and select the numbers and types of partners required for HPC to perform its functions we will:

- Recruit new CPD Assessors for the remaining professions to be audited, which are Biomedical Scientists, Prosthetists and Orthotists, Paramedics, Physiotherapists, Arts Therapists, Dieticians, Clinical Scientists, Speech and Language Therapists, Radiographers, Orthoptists, and Occupational Therapists as required throughout the year; and
- Recruit any other ad hoc vacancies that arise through general turnover or through additional needs.

The timescale for this recruitment is throughout the year but for CPD Assessors will be from April 2009 to March 2010.

Human Resources (Partners) Objective 6:

To ensure that the HPC is fulfilling best practise in terms of performance management of partners, we will:

- ensure that the Fitness to Practise partner performance appraisal system is fully rolled out and partners trained on this system;
- conduct an evaluation to ensure that the Visitor and Registration Assessor performance management systems are being used correctly, and to ensure that these are effective;
- take feedback from partners and department heads as to how effective the existing systems are and as to whether any changes may need to be considered to the systems; and
- take any agreed changes to the Finance and Resources Committee for discussion and approval.

The timescale for this is January 2010.

Human Resources (Partners) Objective 7:

To better manage our resources internally and potentially provide a better customer service externally to our partners we will:

- scan all partner documents that are currently held on hard copy files onto one database; and
- develop a system for ensuring that all future documentation is placed in a methodical manner that is easy to retrieve on our electronic human resources database;
- conduct an audit of our paper based files and our electronic database to ensure that all information is up-to-date and accurate;
- develop and introduce an exit interview/feedback form to gain an insight into the reasons partners resign and any opportunity for improvement; and
- investigate options of a partner extranet and any additional newsletters required.
- conduct a succession planning exercise by writing to all partners and asking them to advise if they anticipate leaving their posts within the next three years.

The timescale for this is September 2009.

Human Resources (Partners and Employees) Objective 8:

To ensure that we fulfil our departmental obligations under the overall Equality and Diversity scheme we will continue to:

- continue our rolling programme of diversity training for all new employees;
- conduct training of all new and existing partners through an equality and diversity session at each refresher training day or days for any new partner training, and
- analyse recruitment and selection statistics, exit interview results and any other relevant data, to monitor key trends.

2010 - 2011

2010 and 2011 will provide the opportunity for an established human resources department to review its practices and procedures and examine what has worked well and where opportunities for improvement and revision may lie. For example, the employee and partner handbooks will require continual review. An employee attitude survey should ideally be conducted on a regular basis to ensure that attitudes are monitored and actions developed. The pre-existing agreement development under the Information and Consultation of Employees Regulations will require review in 2010 ready for its 2011 expiry date. The day to day activities of recruitment and training will only increase in both the partner and employee area.

Human Resources Activities in the Past Year 2008 - 2009

It is useful to review the activities contained in the workplan which was submitted one year ago as part of the background for the current work being proposed to be

undertaken by the department. Nine major objectives for 2008- 2009 were agreed by the Finance and Resources Committee and were completed as follows:

1. To maintain our increase in the level of customer service from human resources to employees and managers through the HR intranet function we committed to monitoring the newly developed intranet function of the human resources database (Professional Personnel) and address any "teething difficulties", investigate improvements and cross-training for the team.

This objective was achieved. There were regular meetings and phone calls to the developers in Swindon, and the IT team and HR team met weekly to ensure all functional difficulties or issues were resolved expeditiously. The team in HR has now been cross-trained on functionalities such as running reports, attaching paperwork to individual's electronic records and recording all recruitment information. Several tailored improvements were developed for the system (for example, for partners with multiple roles, the different contract expiry dates are now recorded electronically, and when the Finance and Resources Committee approved changes to the equality and diversity monitoring form, the system was changed to meet the new requirements).

2. The second objective was to conduct a training needs analysis, train new managers across several areas including management of probationary employees.

This objective was fully completed. New managers were trained on the HPC's performance management system and on managing equality and diversity within their teams. A training needs analysis was conducted following the performance reviews being conducted. Kelly Webster, Human Resources Manager, trained all managers over three sessions on the management of probationary employees and legal requirements.

3. We committed to researching our obligations under the Information and Consultation of Employees Regulations when the HPC employee numbers reach the appropriate level and to commencing the process of negotiating an information and consultation agreement.

Following Finance and Resources Committee approval, a vote was taken in 2008 as to whether the employees wished to have a pre-existing agreement. Over 25% of employees voted 'yes' and employee negotiating representatives were elected. An agreement is currently being drafted and will be taken forward by the new Director of Human Resources.

4. In the interests of high customer service to employees and in maintaining positive employee relations we ensured that regular contact with our pensions advisors occurred and that all pensions matters were dealt with effectively and efficiently; that we would investigate and trial options for adding a 360 degree feedback mechanism within the organisation to improve communication and feedback channels on performance; and finally, conduct an employee attitude survey.

All of these objectives were met. We conducted an employee attitude survey and presented the findings to employees in October 2008. We trialled a 360 degree feedback system using the Executive Management Team and two departments (Education and Policy). We also had regular briefings and one-to-one sessions by Barnett Waddingham with employees to help monitor the transition of their funds to Friends Provident and address any concerns promptly.

5. All Partner agreements expiring in July 2008 were to be extended to June 2010.

This objective was met. For any partners not wishing to renew their agreement, vacancies were assessed as to whether they were still required, and advertised in 2008.

6. This objective addressed the need to recruit, select and train the numbers and types of partners required for HPC to perform its CPD functions.

We liaised with the Office for the Commissioner of Public Appointments and department heads in recruiting vacancies from our existing partner pool for CPD Assessors (12 ODP Assessors and 15 Chiropodist Assessors were recruited for July 2008). Any vacancies which were not filled from our existing partners were advertised externally. We provided training to existing and new partners on this new partner role and recruited towards the latter part of 2008-2009 for the other professions that we would need to be audited.

7. This objective also centred around recruitment through the recruitment, selection and training of partners ready for the Practitioner Psychologists coming onto the HPC Register.

Again this was successfully achieved through two rounds of advertising in various publications. We continued to liaise with the Office for the Commissioner of Public Appointments, the project team and relevant department heads in recruiting for these partners. In total 71 partners were recruited across all partner roles and training organised for March/April 2009.

8. The eighth objective was a general training objective to ensure that our partners could continue to fulfil their roles effectively.

This objective was met as we provided training for all new partners and for all existing partners taking on new partner roles as well as refresher training for all partners generally (in particular Visitors were the focus for 2008 with refresher training being conducted in September and October 2008 for all existing Visitors). We also continued our rolling programme of training all partners in equality and diversity. Due to the time commitment for this though we did not meet part of this objective which was to investigate options for a future partner extranet and a newsletter in conjunction with the Communications Department. This will be carried over into general work for 2009.

9. The final objective addressed our departmental obligations under the overall Equality and Diversity Scheme.

We analysed partner and employee diversity statistics and presented these to the Finance and Resources Committee in June 2008. We also continued our rolling programme of diversity training for all new employees, and continued our training of all new and existing partners through an equality and diversity session at each refresher training day or days for any new partner training. We also introduced new methods of measuring data so that statistics will be are available in the future to identify possible improvements. This was achieved by additional questions within the employee exit questionnaire about equality and diversity and making the voluntary equal opportunities monitoring form compulsory for all partner and employee job candidates to fill in (whilst retaining a "would rather not state option" under all categories.   We also ensured that the internal employee equality and diversity working group retained its profile and work through the election of a new Chair and Deputy Chair, and regular meetings.

Risk Management

The Human Resources Department manage risks within the HR department and throughout the HPC in relation to overall employee management.

Key areas are recruitment and health and safety for both employees and partners. Within the employee risk management area are issues such as turnover, skills development, managing employee performance matters and ensuring compliance with employment legislation including managing any litigation.

Please see the appendix (1) below for details.

Appendix 1: Risks Managed by the Human Resources Department (Employees)

THE HEALTH PROFESSIONS COUNCIL

RISK ASSESSMENT February 2009

HR

Ref	Category	Ref	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigation February 2009	Likelihood before mitigation February 2009	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2009	RISK score after Mitigation September 2008
11	HR	11.1	Loss of key HPC employees (person cover risk)	President, Chief Executive and EMT	3	1	3	Committee chairmen cover for President loss, President and EMT cover for CE loss until interim appointment made	Cross training (partial or full) and process documentation	Chief Executive succession plan held by HR Director. Succession planning generally.	Low	Low
		11.2	High turnover of employees	HR Director	1	1	1	Remuneration and HR strategy	Regular performance reviews	Exit interview analysis	Low	Low
			Links to 11.3									

		11.3	Inability to recruit suitable employees	HR Director	1	3	3	HR Strategy and adequate resourcing of the HR dept	Careful specification of recruitment adverts and interview panel selection	Hire skilled temporary staff in the interim	Low	Low
			Links to 4.10, 6.1, 11.2, 11.8									
		11.4	Lack of technical and managerial skills to delivery the strategy	Chief Executive	1	3	3	HR strategy and goals and objectives (buy in the skills v staff upskilling on the job v training)	Training needs analysis & training delivery.	Some projects or work initiatives delayed or outsourced	Low	Low
			Links to 1.1									
		11.5	Health & Safety of employees	Chief Executive	3	1	3	Health & Safety Training, policies and procedures	H&S Assessments (Lawrence, Webster Forrest).	Personal Injury & Travel insurance	Low	Low
			Links to 4.9, 6.3									
		11.6	High sick leave levels	EMT	1	3	3	Adequate staff (volume and type) including hiring temporary staff	Return to work interviews and sick leave monitoring	Regular progess reviews	Low	Low

		11.7	Employee and ex-employee litigation	HR Director	1	5	5	Regular one on one sessions between manager and employee and regular performance reviews.	HR legislation and HR disciplinary policies	Compromise agreements	Low	Low
		11.8	Employer/employee inappropriate behaviour	HR Director	1	1	1	Whistle blowing policy	Other HR policy and procedures	Employee Assistance programme	Low	Low
			Links to 11.3									
		11.9	Non Compliance with Employment legislation	HR Director	1	1	1	HR Strategy	Obtain legislation updates and legal advice	HR policies and Manager training	Low	Low

Appendix: Risks managed by the Human Resources department (Partners)

THE HEALTH PROFESSIONS COUNCIL

RISK ASSESSMENT February 2009

Partners

Ref	Category	Ref	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigation February 2009	Likelihood before mitigation February 2009	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2009	RISK score after Mitigation September 2008
6	Partners	6.1	Inability to recruit and/or retain suitable Partners	Partner Manager	1	1	1	Sound recruitment strategy. Training	HR Strategy: Appropriate compensation package in place.	Regular appraisal system	Low	Low
			Links to 4.10, 11.3, 7.3, 7.5									
		6.2	Incorrect interpretation of law and/or SI's resulting in CHRE review	Director of FTP & Director of Educations	1	1	1	Training	Legal Assessors advice availability	Regular appraisal system	Low	Low

		6.3	Health & Safety of Partners	Partner Manager	1	1	1	Personal Injury and Travel insurance. Liability Insurance	Road Safety policy (for vehicle drivers) with training to follow	Restricted access to the building site (22/26 Stannary St)	Low	Low
			Links to 4.9, 11.5									

	Apr-09	May-09	Jun-09	Jul-09	Aug-09	Sep-09	Oct-09	Nov-09	Dec-09	Jan-10	Feb-10
Appendix 2											
	Reg Assessor Refresher Training	Reg Assessor Refresher Training	Reg Assessor Training (new)					Registration Assessor Training - New - Hearing Aid Audiologists			
	Advertising - CPD Assessor - CS, PO, SL and OT & BS				Advertising - CPD Assessors - RA		Advertising - CPD Assessors - PH		Advertising - CPD Assessors - AS & DT		
	Interviews - CPD Assessor - OR & PA	Interviews - CPD Assessors - CS, PO, SL and OT & BS				Interviews - CPD Assessors - RA		Interviews - CPD Assessors - PH		Interviews - CPD Assessors - AS & DT	
		w/c 17.05.08 - CPD Training Day OR & PA	w/c 21.06.09 CPD Training Day CS, PO, SL	w/c 19.07.09 CPD Training Day OT, BS	w/c 16.08.09 CPD Training Day OT, BS			w/c 16.11.09 CPD Training Day RA		w/c 18.01.10 CPD Training Days x 2 PH	
		New Panel Chair Training (x8)					Panel Chair refresher training (early Oct)	Panel Member Training - New - Hearing Aid Audiologists			Panel Chair refresher training (TBC - per budget)
	New Panel members training (PA / AS - music)	Panel member refresher training	Panel member refresher training								
	Panel Members (Med Ass) advertising		Panel Members (Med Ass) Training			Legal Assessor Refresher training (Late Sept)					
					Visitor Refresher Training			Visitor Training - New - Hearing Aid Audiologists			

Key:		
Registrations		OR=Orthoptist
FTP		PA=Paramedic
Education		CS=Clinical Scientist
		PO=Podiatrist
		SL = Speech and Language Therapist
		RA= Radiographer
		PH=Physiotherapists
		AS- Arts Therapist
		DT=Dietician

Mar-10
w/c 22.03.10 CPD Training Day AS/DT

Information Technology Work plan 2009 – 2010

Contents

AOD	2009 workplan	Final DD: None	Internal RD: None	14/05/2009		a	ITD

Glossary

BAU…………………………..	Business As Usual
Blackberry…………………….	Remote diary and calendar management technology
CRM……………………………	Customer Relationship Management
Crystal Reports……………….	Report writing software package
Customer	Individuals who purchase or commission an IT service
FTE…………………………..	Full Time Equivalent
FTP……………………………..	Fitness To Practice
HR Info………………………...	Software package that provides Human Resources management functionality
ISP	Internet Service Provider
IT………………………………….	Information Technology
ISA……………………………..	Independent Safeguarding Authority
LAN…………………………….	Local Area Network
Lotus Notes…………………...	Software package that provides application and mail functionality
MS-Word……………………….	Microsoft Word
User	Individuals who use an IT service

Introduction

The Health Professions Council (HPC) has entered a period of fundamental change as it transforms from a small to a medium sized organisation. This change has a significant impact on the internal supporting service providers required to create an infrastructure that will enable the continued development of HPC.

The current HPC business strategy identifies the three central priorities for the organisation: *to Improve; to Influence* and *to Promote*. The core function of the Information Technology (IT) department is to support and enable the business to realise these priorities through the achievement of the business objectives.

As an internal service provider, the IT function operates proactively managed services to enable current business processes to function. Also, a large element of the service is reactive to incidents in the infrastructure and changes to business priorities as HPC adapts to the changing external environment.

The challenge facing the IT department is to manage the conflicting demands of both reactively and proactively provided services without hindering business momentum. This has begun with a very successful 2008/9 year delivering substantial changes to the IT infrastructure improving the foundations of current services and introducing additional business driven services.

The IT function needs to build on previous successes to create solid foundations that enable business growth. Additionally, the overall aim of the IT function is to improve

AOD	2009 workplan	Final DD: None	Internal RD: None	14/05/2009	a	ITD

efficiency and effectiveness whilst delivering value for money. These aims will be achieved through a process of evolution rather than revolution.

This document

This work plan is underpinned by the HPC Strategic Intent and the IT strategy and defines the current Information Technology services provided as well as the work priorities and objectives for the financial year 2009-2010. The document provides a basis against which the work of the IT department can be planned and measured.

Equality and Diversity Scheme

The Information Technology department does not have any specific action points under the HPC equality and diversity scheme but plays an important role in the delivery of action points in other areas.

The IT department continues to address specific individual needs as identified by department managers and ensures that technical standards are embedded into projects to address areas of accessibility such as W3C guidelines for web development. The IT department will consider accessibility for those with impairments as part of the Online Renewals major project.

Resources

Human resources
Following a reorganisation of the Information Technology Department the team consists of six employees.

Guy Gaskins   Director of Information Technology
James McMahon   IT Support Analyst
Jason Roth   IT System and Network Administrator
Rick Welsby   IT Service Support Manager
Richard Watling   IT Support Analyst
Tyrone Goulbourne   IT Infrastructure Support Manager

Role descriptions
The Director of Information Technology has overall accountability for the IT provision at HPC. The position is responsible for the security and integrity of the IT infrastructure and systems, as well as providing support to and developing the core applications of the organisation.

Service Support Team

The IT Service Support Manager has overall responsibility for the Service desk function and manages the IT Support Analysts. Additionally, the role is responsible for maintaining and developing our bespoke database applications providing email and specialist application services.

The IT Support Analyst reports to the IT Service Support Manager and has responsibility for the identification and resolution of incidents within the IT infrastructure. The role is the first point of contact between the organisation and the IT team; they operate the Service desk function and provide first and second level support for PC and business applications incidents.

Infrastructure Support Team

The IT Infrastructure Support Manager role is primarily responsible for the network and server hardware infrastructure support and development including backup and recovery, availability and capacity management.

The IT System and Network Administrator reports to the IT Infrastructure Manager and supports the network and server hardware infrastructure for both locally and remotely hosted services.

Resource allocation

For the 2009/2010 financial year the IT resource has been allocated against three categories of work: Business As Usual (BAU), Major project delivery and Small project delivery.

BAU effort has been estimated through a process of identifying recurrent tasks and approximating the effort required to fulfil them over a twelve month period. This includes activities such as incident and problem management, third party supplier management, capacity planning, and penetration testing etc.

Major project delivery effort has been estimated using the available high level project plans.

Small project delivery effort has been estimated looking at the high level project objectives.

Category	HPC IT FTE
Business-as-usual	3
Major projects	1.5
Small projects	1.5

Financial resources

The 2009/2010 work plan assumes an operating budget of £945,000 (excluding depreciation) and a capital budget of £69,500. This represents approximately a 3% reduction on operating expenditure and a 16% reduction in capital expenditure on the 2008/2009 budget. This reflects improvements in the way we engage with external support providers and an improved focus on our core IT services.

Budget	2008/2009	2009/2010
Operating expenditure (excluding depreciation)	£971,500	£945,000
Capital expenditure	£83,000	£69,500

Achieving the IT Objectives in 2008 - 2009

Progress against objectives set for 2008 – 2009 can be summarised as:

Information Technology Objective 1:

To improve the capability of the current services delivered and ensure the IT function supports HPC growth.

- The IT department processes were reviewed and new processes implemented within the ITIL framework for Change management and Incident management;
- The IT department underwent a reorganisation to improve the effectiveness of the function. This included the recruitment of an additional employee to support a new role;
- A Customer satisfaction survey to benchmark service quality and customer satisfaction is planned for distribution at the end of March with analysis to follow in 2009/10.

Information Technology Objective 2:

To comply with our legal obligations and promote best practice.

- Reviewed and improved our software deployment and tracking processes by implementing a specialist product called ENTEO; and
- Conducted a quarterly audit of our license compliance by a third party organisation.

Information Technology Objective 3:

To support the Major projects change programme of HPC.

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- Reviewed the engagement model with key third parties and improved the efficiency and quality of the deliveries. This was used to great effect on the Online Renewals Project;
- Improved the resource planning of internal IT resource and supported both Small and Major projects effectively whilst improving existing IT services;
- Directly supported the following Major projects:
  - Fees 2009 – **completed successfully**;
  - FTP Registration system statuses rationalisation – **completed successfully;**
  - Equality and Diversity – **completed successfully**;
  - Online Renewals – **on plan for completion in 2009/10**;
  - Finance System Upgrade - **completed successfully**;
  - Registration of Practitioner Psychologists – **on plan for completion in 2009/10**; and
  - Registration of Hearing Aid dispensers - **on plan for completion in 2009/10**.

Information Technology Objective 4:

To support the Small projects change programme of HPC.

- Directly supported the following Small projects:

  - Network Switch upgrades – **completed successfully**
    Review the existing architecture for the Local Area Network (LAN). Improve the reliability, resilience, capacity of the Network infrastructure enabling Power over Ethernet (POE) functionality

  - Data line installation – **completed successfully**
    Increase the capacity of the telephone system to meet peak usage

  - User Acceptance Test application provision – **completed successfully**
    Improve the quality of the User Acceptance Test cycles for application development cycles by employing a specialist tool for controlling, monitoring and reporting against test scripts

  - 'HR Info' enhancement and 'Time off in lieu' development – **completed successfully**
    Support the development of the 'HR Info' system to meet the new requirements as defined by the Human resources department

  - FTP application development – **completed successfully**
    Analyse, develop and implement new requirements to the Fitness To Practice Lotus Notes system supporting the FTP Work Plan

  - Mobile personal mailing service implementation – **completed successfully**
    Implement the Blackberry service to support mobile mailing and diary

management

- o CRM iExtensions upgrade – **redundent**. On investigation the issues that we were trying to address with an upgrade to a newer version of the software were resolved by applying a number of discrete 'bug' fixes to the application. We have had confirmation that support will continue for our version of this product.
  Upgrade the Customer Relationship Management system iExtensions to retain support and resolve existing known Errors

- o Lotus Notes upgrade – **on schedule to complete**
  Upgrade the Lotus Notes environment to retain support and maintenance

- o New Starters Leavers application development – **on schedule to complete**
  The development has completed and we are waiting to complete User Acceptance Training.
  Analyse, develop and implement new requirements for the New Starters and Leavers application to support the Human Resources Work Plan

- o Remove processed Direct Debit Instructions, application development for the Registration system – **postponed.** This was not progressed past the design phase following a reallocation of the funding by Finance.
  Support the analysis, development, testing and implementation of changes to the Registration system to improve Financial processing

- o Recording Cohort data for Approvals system - **postponed**
  This has been postponed whilst the business team confirm exact requirements.
  Analyse, develop and implement new requirements for the Approvals and Monitoring database to support the Approvals and Monitoring Work Plan

- o Software package and deploy service – **completed successfully**
  Analyse requirement for and implement an application to control, manage, deploy and report against software deployed against the IT infrastructure

- o PC hardware technology refresh – **on schedule to complete**
  Plan and implement the replacement of obsolete desktop personal computers at HPC. Define and implement a standard build

- o Communication Enhancement Project – **postponed**
  This has been postponed whilst the business team confirm exact requirements.
  Analyse, develop and implement new requirements for the Approvals and Monitoring database to support the Approvals and Monitoring Work Plan

Information Technology Activities in 2009 - 2010

The activities of the IT department can be categorised as either:
- Services that support the current operations
- Development that will alter an existing service or introduce a new one.

Services

The IT function provides a number of end-to-end services comprising several technologies and sub-services that are transparent to the Customer or User. The delivery of each service encompasses all of the enabling functions e.g. the delivery of the Registration service also encompasses the availability of the Network to connect to the Registration system.

Existing services

1. Personal computing (including printing and network storage)
   Supply, installation and management of personal computers and all associated software and peripheral devices e.g. scanners

2. Registration
   Availability, capacity and performance management of the Registration system

3. Application development
   Project management, development and implementation of small scale application development

4. Application support
   Availability, capacity and performance management of the many separate internally developed applications:
   - i. Freedom of Information system
   - ii. Fitness to Practice system
   - iii. HR Starters and Leavers system
   - iv. Intranet information service
   - v. Employee database system
   - vi. Suppliers database
   - vii. Pass list database
   - viii. World wide regulators website
   - ix. IT training book library
   - x. Private Papers Document Store
   - xi. Partners Database
   - xii. Meeting room/ resource database
   - xiii. Form request (request application pack on internet)
   - xiv. Registration - Temporary Registration Database
   - xv. Secretariat – Document management system

5. Education, Approvals and Monitoring
    Availability, capacity and performance management of the Education and Monitoring database system

6. Email and web browsing
    Availability, capacity and performance management of the email function and ability for HPC employees to browse the internet

7. Desktop telephony
    Availability, capacity and performance management of the desktop telephony function including call recording and queue management

8. Customer Relationship Management system (CRM)
    Availability, capacity and performance management of the Customer Relationship Management system iExtensions.

9. Financial ledger
    Availability, capacity and performance management of the SAGE 200 Financial general ledger system

10. Financial Payroll
    Availability, capacity and performance management of the SAGE 50 Payroll system

11. Human Resources Information
    Availability, capacity and performance management of the 'HR Info' system for managing the HR requirements HPC

12. Web site hosting (Internet, intranet, extranet)
    Availability, capacity and performance management of the hosting only for the HPC websites both internal and external

13. Data extraction support
    Limited *provision of data extraction from key systems to aid complex requirements for functions such as the elections process (initial support for report generation, statistical production and data extraction is within the Operations directorate and the Information Management team).*

14. Video Conferencing
    Availability, capacity and performance management of the video conference function (excluding the video equipment which is supported by Facilities)

15. Mobile personal mailing service
    Availability, capacity and performance of the Blackberry function enabling remote and personal diary and mail synchronisation.

AOD	2009 workplan	Final DD: None	Internal RD: None	14/05/2009	a	ITD

New Services for 2009/2010

1. Online Renewals Portal
   Availability, capacity and performance management of the Online Renewals system

Development

In 2009/2010 the following Major and Small projects will be supported and/or delivered by the IT department.

Major Projects

- Registration of Practitioner Psychologists
- Fees 2011
- FTP Case Management system phase 1
- Registration of Hearing Aid dispensers
- Independent Safeguarding Authority phase 1
- Online Renewals phase 1
- NetRegulate System Improvements
- Renewals Cycle Review
- Stannery St building project phase 2
- IT external hosting transfer to new provider

Small Projects

- Laptop technology refresh
- NetRegulate backup encryption review and implement
- Network and Server review and service improvement
- Network drive and removable media encryption review and implement
- Network segmentation implementation
- Service desk tool implementation

Achieving the IT Objectives in 2009 - 2010

There are a number of objectives that the Information Technology department will need to achieve in 2009/2010.

Information Technology Objective 1:

To drive efficiencies within the organisation by the use of Information Technology and Information Systems, we will:

- Implement the Online Renewals Phase 1 Major project to develop a new web channel enabling Registrants to electronically self service key business processes;

AOD	2009 workplan	Final DD: None	Internal RD: None	14/05/2009		a	ITD

- Implement the IT external hosting transfer of Services to a new provider Major project which will reduce the HPC support overhead and reduce costs for our outsourced hosting and ISP services following the go-live of the Online Renewals project;
- Continue to identify opportunities to consolidate infrastructure hardware and software to reduce support overhead and duplicated data silos;
- Implement the Independent Safeguarding Authority phase 1 Major project;
- Implement the NetRegulate Improvements Major project to affect a number of discrete changes within the Registration system to improve function;
- Review the IT Network and Server infrastructure to consolidate where possible to reduce support overhead; and
- Review key contracts to ensure value for money services.

Timescale March 2010

Information Technology Objective 2:

To apply Information Technology within the organisation where it can create business advantage we will:

- Support the FTP Case Management system phase 1 Major project to enhance service and reduce organisational risk within key FTP processes;
- Implement the IT aspects of the Stannery St building project phase 2;
- Implement the Registration of Practitioner Psychologists to the HPC register;
- Implement the Registration of the Hearing Aid dispensers to the HPC register;
- Support the Fees 2011 Major project for changes to the HPC renewal fees;
- Support the Renewal Cycle Review Major project to identify the business case and possible implementation for altering the Renewals cycle for professions; and
- Reduce the number of data and functional silos, consolidating application requirements to support generic business functions across teams and directorates.

Timescale March 2010

Information Technology Objective 3:

To protect the data and services of HPC from malicious and unexpected events we will:

- Implement the IT external hosting transfer to new provider Major project which will reduce the HPC support overhead and reduce costs for our outsourced hosting and ISP services following the go-live of the Online Renewals project;
- Implement a Laptop technology refresh addressing obsolete hardware, improving usability, strengthening security and maintainability;

						a	ITD
AOD	2009 workplan	Final DD: None	Internal RD: None	14/05/2009			

- Review the options for encrypting the backup for the NetRegulate application and if appropriate implement a relevant strategy;
- Implement a service improvement to the HPC network by segmenting the network to reduce contention, improve performance, security and maintainability;
- Conduct quarterly independent penetration tests of our environment to assure adequate security controls; and
- Conduct a quarterly audit of our license compliance by a third party organisation.

Timescale March 2010

Information Technology Objective 4:

To meet internal organisation expectations for the capability of the IT function we will:

- Refine the change management process to protect the production environment from outages;
- Refine the incident and problem management processes to efficiently process support requests;
- Implement the new Service desk tool to support new ITIL processes and the Service desk function;
- Develop a configuration management database to support effective execution of the problem and change management processes;
- Realign the published service levels to better reflect the organisation need against the service catalogue;
- Document service catalogue and agreed software list; place under change control; and
- Develop effective availability management processes supporting the IT infrastructure.

Timescale March 2010

AOD	2009 workplan	Final DD: None	Internal RD: None	14/05/2009		a	ITD

Information Technology activities for 2010 - 2011

We plan to implement best practice and further develop our infrastructure to gain efficiencies whilst improving value for money by:

- continuing to improve our processes and procedures;
- starting to prepare for upgrading the PC operating system to Windows 7 by auditing and replacing non-compliant PC applications;
- dependent upon analysis in 2009/10 we may gain efficiencies in the infrastructure by implementing a virtualisation technology to consolidate our technical infrastructure;
- investigating and if appropriate implementing changes to how we perform our enterprise backup and recovery strategy;
- review and republish the IT Security Policy;
- Upgrade our existing Microsoft SQL Server databases to a new version to retain support;
- review and if appropriate implement improvements to the mechanism for remote access to HPC services to improve accessibility and security; and
- plan for the upgrade of server operating systems to new version to retain support.

We will also support the Major projects which are expected to include:
- the technical implementation of the FTP Case Management System;
- on boarding of new professions, potentially:
    - Acupuncture, Traditional Chinese Herbal Medicine and Herbal Medicine;
    - The Outcome to Modernising Scientific Careers (MSC);
    - Psychotherapists and Counsellors;
    - Assistance practitioners.
- Independent Safeguarding Authority implementation phase 2;
- Implementation of outcome of the Renewals Cycle review;
- Online Renewals Project phase 2;
- Education, Approvals and Monitoring systems & process review.

We will deliver the agreed Small project list to support the achievement of the directorate work plans.

AOD	2009 workplan	Final DD: None	Internal RD: None	14/05/2009	a	ITD

Risk Management

The Information Technology department manages those organisation risks that are primarily concerned with:

- Information security - the authentication and authorisation of individuals to gain access to defined services and data
- Information Technology Continuity – the ability to recover from a disaster scenario
- Perimeter protection – the ability to manage the threat of external intrusion through hacking and virus propagation
- Obsolescence – management of the supportability and maintainability of the IT infrastructure

Please see the appendix below for details.

Appendix: Risks Managed by the Information Technology department

Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations February 2009	Likelihood before mitigations February 2009	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2009	RISK score after Mitigation September 2008
IT	5.1	Software Virus damage	Director of IT	4	4	16	Firewalls and anti-virus SW checks run	Adherence to IT policy, procedures and training	Regular externally run security tests and probes	Low	Low
		Links to 2.3, 10.2									
	5.2	Technology obsolescence, (HW or SW)	Director of IT	2	2	4	Accurate asset records and technology refresh strategy	Employ mainstream technology with recognised support and maintenance agreements	Annually review IT technology strategy	Low	Low
		Links to 2.6, 10.2									
	5.3	IT fraud or error	Director of IT	3	3	9	Adequate access control procedures maintained. System audit trails.	Regular, automatic password changes. External reviews. Daily backups.	Regular externally run security tests and probes	Low	Low
Registration	10.2	NetRegulate Registration system failure	Director of IT	5	3	15	Effective backup and recovery procedures	Third party maintenance and support contract	Disaster recovery tests	Low	Low

HR	11.1	Loss of key HPC employees (person cover risk)	President, Chief Executive and EMT	4	4	16	Committee chairmen cover for President loss, President and EMT cover for CE loss until interim appointment made	Cross training (partial or full) and process documentation	Chief Executive succession plan held by HR Director. Succession planning generally.	Low	Low
	11.6	High sick leave levels	EMT	2	3	6	Adequate staff (volume and type) including hiring temporary staff	Return to work interviews and sick leave monitoring	Regular progess reviews	Low	Low
Finance	15.2	Unexpected rise in operating expenses	EMT	3	1	3	Finance & Resources Committee review of the Monthly variances year to date. Regular budget holder reviews held. Budget holder accountability.	Budgetary control clarity around permanent and timing (reversing) differences. Correct treatment of prepayments.	Out turn forecasts and review of remaining annual spend	Low	Low
	15.3	Large Capital Project Cost Over-runs	EMT	4	2	8	Finance & Resources Committee review of the project spending variances to date	Effective project specification, management and project progress reporting (financial and non financial)	Guidelines on project spending. Project exception reports promptly presented to EMT for review	Low	Low
Data Security	17.1	Electronic record Data Security	Director of IT	5	3	15	Employment contract includes Data Protection Agreement	Adequate access control procedures maintained. System audit trails.	Laptop security encryption and VPN access.	Low	Low

| | 17.3 | Data held by third parties | Director of Ops and Director of IT | 5 | 3 | 15 | Data Protection/Controller agreements signed by the relevant suppliers. Use of electronic firewalls by suppliers. | Use of locked tape archive boxes and sign out procedures. | Digital Steps Ltd (Netregulate developer) access Netregulate via a secure VPN and password security. Only sample set of data held by DSL. Print UK password encryption. Peladon access using remote access tool. Electoral Reform Society data is password protected | Low | Medium (Servicepoint tamper proof boxes still to arrange) |

hpc health professions council

Policy and Standards Department

2009/2010 Workplan

Michael Guthrie
Acting Director of Policy and Standards

March 2009

Contents

1. Introduction

1.1 This document

This document has been drafted to set out work priorities for the financial year 2009/2010 and to provide a basis against which the work of the Policy and Standards Department ('the Department') can be planned, resourced and measured. This document details how the Department will continue to develop, to build on its work in embedding itself within the Health Professions Council (HPC) and in the wider policy arena and assist the Council in preparing for the changes ahead in the regulation of healthcare professionals.

1.2 The Policy and Standards Department

The Department's main responsibilities are:

- assisting the Council in developing strategy and policy;
- assisting the Council in setting and reviewing standards;
- assisting the Council in drafting guidance;
- managing and supporting Professional Liaison Groups (PLG);
- running consultations;
- managing the new professions, or 'aspirant groups' process;
- liaising with the Council for Healthcare Regulatory Excellence on their annual performance review, and other cross-regulatory projects; and
- ensuring consistency of approach across all HPC departments.

The regular Department activities to meet these responsibilities include researching and writing papers for the Council, Committees and PLGs, responding to correspondence and emails on policy matters and meeting with and presenting to stakeholders.

1.3 Policy and Standards planning

The nature of the issues that the Department deals with are such that work undertaken will comprise of both planned projects and work which arises as a result of external factors, such as changes in legislation, changes to the professions, and other developments that are often unpredictable. Hence, in allocating resources, maintaining the ability to respond to the external environment is an important factor.

The priority projects outlined in this paper are projects with a statutory element such as work necessary to prepare for the regulation of new professions, which includes responding to government consultations and standards drafting work. The projects for 2009/2010 that as a result are of particular priority and have or have the potential to have significant resource implications include:

- The regulation of new professions, particularly work related to the regulation of psychotherapists and counsellors
- Revalidation
- Post-registration qualifications

This document explains in relation to each project area the nature of any external factors on the likely timetable, if applicable. Where a project is not a priority and may be ongoing into the following financial year, this is indicated.

1.4 Resourcing

The Department currently consists of four employees:

Rachel Tripp, Director of Policy and Standards (currently on maternity leave)
Michael Guthrie, Policy Manager (currently Acting Director of Policy and Standards)
Sam Mars, Policy Officer
Charlotte Urwin, Policy Officer (Policy Manager on a 12 month contract basis from 1 April 2009)

Unfilled position, Policy Officer (to be filled in April 2009)

The Director of Policy and Standards is responsible for devising and writing the Department workplan, and overseeing its resourcing and implementation, the day-to-day running of the department, managing and developing the Policy team, and the development of new projects.

The Policy Manager takes particular responsibility for the area of professional standards, writing and managing the Standards workplan which sits underneath the Department workplan, managing and overseeing pieces of work relating to standards, and developing relationships with stakeholders who are particularly interested in our standards function.

The Policy Officers each take on a variety of different projects to enable them to gain a breadth of experience, including education, standards, Europe, and other areas of the Department's work.

Rachel Tripp is expected to return from maternity leave in July 2009.

1.5 About this document

The projects outlined in this document are structured into three areas: standards and guidance; regulation of new professions; and other projects.

2. Policy and Standards and the strategic intent

The Department achieves the broad aims to improve, influence and promote outlined in the existing strategic intent document, and referred to in the draft strategic intent document recently considered by the Council.

The broad aims of the Department under these headings are outlined below. The nature of the work of the Department is such that projects cut across these areas and cannot easily be categorised under only one of these headings.

2.1 Aims

The HPC, through the work of its Policy & Standards department, aims:

Improve:

- To continue to respond to the recommendations of the White Paper 'Trust, Assurance and Safety: The Regulation of Health Professionals in the 21st Century', published in February 2007, including, where appropriate, sharing information about best practice and participating in working groups, and also engaging with the issues raised in order to implement improvements to regulation.

- To review its standards, guidance and policies, including engaging with and consulting stakeholders, to gain feedback, and to make improvements to ensure that these continue to reflect the Council's purpose and principles.

- To collect information gathered and to analyse this information, and act upon it appropriately. This could include, for example, making the information available publicly, including to other potentially interested stakeholders, feeding this information into the Communications strategy, and / or making changes to processes where appropriate.

- To engage with and consult with stakeholders, and take account of their input in its work, to ensure that the HPC's work is informed by the wider healthcare and regulatory landscape, and that our knowledge of multi-professional regulation can be shared.

- To continue to improve the way that healthcare professionals are regulated, by developing new guidance, new processes, or new requirements where appropriate.

Influence and promote:

- To build on its growing reputation as a respected voice within the policy arena of the regulation of healthcare professionals and other healthcare workers, and to use this reputation to pro-actively influence the external agenda, in the interests of protecting the public.

3. Trust, assurance and safety: the regulation of health professionals in the 21st century

3.1 Introduction

The White Paper, 'Trust, Assurance and Safety – The Regulation of Health Professionals in the 21st Century' was published in February 2007.
The White Paper was published as a result of the Chief Medical Officer's review of medical regulation, the parallel review of non-medical regulation (sometimes also called the 'Foster review') and the resulting consultation. The paper sets out the Government's vision and priorities for how the regulation of health care professionals should work in the future, in order to respond to increasing expectations of the public and other stakeholders.

Although published more than two years ago, the White Paper still remains an important driver for the Department's work.

The main project areas relevant to the White Paper in this financial year are:

- Revalidation

- Post-registration qualifications

- Health and character

- Guidance on conduct and ethics for students

- Health and disability

- Regulation of support workers / occupations

- Professional indemnity insurance

- Regulation of new professions

4. Standards and guidance

The Department undertakes work to review existing standards where necessary and to write standards for new professions that are to be regulated by the HPC in the future.

The Department also produces guidance on its standards or on other standards related matters where this might help to explain the Council's processes and approach to its stakeholders.

The Council's standards workplan establishes the concept of ongoing and periodic review of the standards and sets out an indicative timetable for periodic standards review. It also sets out some broad principles for when the Council might consider publishing guidance on its standards. The Standards workplan has been updated and is appended to this workplan.

4.1 Standards

4.1.1 Standards of education and training

The standards of education and training and standards of education and training guidance were reviewed from September 2007 by a Professional Liaison Group.

A consultation was held between August and November 2008. The consultation responses document and revised standards and guidance are due to be considered by the Education and Training Committee and the Council for approval in March 2009.

Timetable
Subject to Council and Committee approval in March 2009, the standards will be republished and will become effective from the 2009/2010 academic year.

The Department will work with the Communications and Education Departments to roll out the revised standards and guidance ready for the start of the 2009/2010 academic year.

4.1.2 Amendments to the standards of proficiency for chiropodists and podiatrists

The Council consulted between December 2007 and March 2008 on making the standards of proficiency for chiropodists and podiatrists relating to local anaesthetics and prescription only medicines entitlements compulsory.

In 2008, the Education and Training Committee and Council considered the responses to the consultation and agreed to make the standards compulsory with effect from 1 September 2009.

Timetable
The Department will work with the Communications Department to publish the revised standards and communicate the change and its implications in the lead up to the 1 September 2009 effective date.

4.1.3 Generic standards of proficiency

Revised standards of proficiency for the first 12 professions regulated by the Council, including generic standards, became effective on 1 November 2007.

During the course of the work to draft standards of proficiency for practitioner psychologists, it was suggested that we might review the generic standards of proficiency in order to ensure that they were widely applicable, as far as possible, to all the professions, including those likely to become regulated by the HPC in the future.

At its meeting in December 2008, the Education and Training Committee agreed to a timetable to review the generic standards. However, this review has been delayed because of other work pressures on the Department.

Timetable

Early in the next financial year, a letter will be sent to stakeholders inviting comments on the existing standards of proficiency.

A meeting will be held with representatives from the Education and Training Committee and Policy and Standards Department to discuss the comments received about the generic standards and a revised draft of the standards.

The Education and Training Committee will be asked to agree draft generic standards for consultation in September 2009. The Council will be asked to ratify the Committee's decision in October 2009. A consultation will then be held between November and January 2009, with consultation responses and revised standards coming back to the Education and Training and the Council for approval in March 2010.

The revised generic standards could then subsequently become effective on a rolling basis.

4.1.4 Standards of proficiency and threshold level of qualification for practitioner psychologists

The Council consulted between November 2007 and February 2008 on draft standards of proficiency and the threshold level of qualification for practitioner psychologists (standard one of the standards of education and training).

The consideration of the outcome of these consultations has been delayed in light of delay in the publication of the Section 60 Order necessary to bring practitioner psychologists into statutory regulation.

In the coming financial year, the standards of proficiency for practitioner psychologists will be published. The standards of education and training will also be amended to reflect the threshold level of qualification for entry to the Register for this profession.

Timetable

It is anticipated that standards of proficiency and the threshold level of qualification for entry to the Register will be agreed by the Education and Training Committee and the Council in March 2009, following the publication of the Section 60 Order.

4.2 Guidance

4.2.1 Health and character

At its meeting in December 2008, the Council agreed to consult on guidance on the health and character process. The guidance is aimed at applicants, registrants and education and training providers and provides accessible guidance about how the HPC deals with health and character declarations.

In 2009/2010, the results of the consultation will be analysed, the guidance revised and published in hard copy and on the HPC website.

Timetable

The consultation on the draft guidance will close on 30 April 2009. The Education and Training Committee will consider the consultation responses and revised guidance at its meeting on June 2009, with the Council asked to ratify any decisions made at its meeting in July 2009.

The Department will then work with the Communications Department to achieve a Plain English Campaign crystal mark for the guidance, publish the final guidance, by November 2009, and promote the guidance to stakeholders.

4.2.2 Guidance on conduct and ethics for students

This piece of work came out of the Department's previous work looking at student registration. At its meeting in December 2008, the Council agreed to consult on guidance on conduct and ethics for students. The guidance builds upon the standards of conduct, performance and ethics to provide some easy to understand information for students about expectations of their behaviour.

In 2009/2010, the results of the consultation will be analysed, the guidance revised and published in hard copy and on the HPC website.

Timetable

The consultation on the draft guidance will close on 30 April 2009. The Education and Training Committee will consider the consultation responses and revised guidance at its meeting on June 2009, with the Council asked to ratify any decisions made at its meeting in July 2009.

The Department will then work with the Communications Department to achieve a Plain English Campaign crystal mark for the guidance, publish the final guidance, by November 2009, and promote the guidance to stakeholders.

5. Regulation of new professions

The regulation of aspirant groups by the Council is an important area of work, particularly given the clear message given by the White Paper that there will be no additional regulators created, and that the HPC is likely to be the regulator for future groups coming into regulation.

The White Paper identifies psychologists, psychotherapists, counsellors and healthcare scientists as the next professions that are the highest priority for regulation.

The work that the Policy and Standards Department will do in this area will be divided into two areas:

- The provision of information to groups seeking to apply to the Council, and liaising with those who have already applied to the Council. This includes producing written information and formal speaking commitments.

- Preparing for the regulation of groups who are mentioned in the White Paper, including the process of preparing standards and being part of any cross-department operational projects to open a new part of the Register.

The timing of work around drafting standards is heavily dependent upon the priorities of the UK departments of Health, and the timetable for legislation, which is subject to change. Hence, the work below has been planned as flexibly as possible, in order to make pragmatic decisions about allocating resources.

5.1 New professions

5.1.1 Practitioner psychologists

The Register for practitioner psychologists is anticipated to open in July 2009.

The standards of proficiency and threshold level of qualification for entry to the Register will be considered by the Education and Training Committee and the Council in March 2009.

The Education and Training Committee and the Council will be asked to approve consultation documents on grandparenting criteria for practitioner psychologists and amendments to the Registration and Fees Rules in order to set the registration cycle for practitioner psychologists.

In 2009/2010, the Department will continue to participate in the cross-department project team for this work, and continue to liaise and meet with stakeholders, including speaking to groups of psychologists and other stakeholders about regulation.

Timetables

The Education and Training Committee and the Council will be asked to approve consultation documents on grandparenting criteria and amendments to the Registration and Fees Rules at their meetings in March 2009. The results of the consultations will be brought back to the Committee and the Council in May 2009.

5.1.2 Hearing aid dispensers

Hearing aid dispensers (also known as hearing aid audiologists) are a profession currently regulated by the Hearing Aid Council (HAC). The Hearing Aid Council is due to be abolished and its professional regulatory functions transferred to the HPC.

In 2008/2009, the Council consulted jointly with the Hearing Aid Council on standards of proficiency and the threshold level of qualification for entry to the hearing aid dispensers part of the Register. The standards of proficiency and threshold level were agreed by the Council at its meeting in December 2008.

A consultation was held between August and November 2008 on the amendments to the Registration and Fees Rules in order to set the registration cycle for hearing aid dispensers. The consultation proposed that the registration cycle for hearing aid dispensers would be 30 June in odd numbered years. However, the anticipated date for the regulation of hearing aid dispensers by the HPC is now 31 March 2010. As such, the Register will now open in an 'even' numbered year and the registration cycle for this profession needs to be re-considered accordingly. In 2009/2010, a further consultation will be held to set the registration cycle for hearing aid dispensers.

The Department has continued to work with internal colleagues on the project team for this work and to meet with and present to hearing aid dispensers and other stakeholders with an interest in regulation of this profession. The Department has also attended Department of Health 'Quadrilateral meetings' at which the Hearing Aid Council and Department for Business Enterprise and Regulatory Reform (DBERR) are also represented, to discuss the Section 60 Order necessary to bring hearing aid dispensers into regulation by the HPC.

In 2009/2010, the Department will continue to participate in these fora, as well as meeting with and presenting to other stakeholders with an interest in the regulation of hearing aid dispensers. Once the consultation on the Section 60 Order is published, the Department will work with internal colleagues to put together the Council's response. This consultation is anticipated early in the 2009/2010 financial year.

Timetable

The Council will be asked to agree a consultation document at its meeting in July 2009. A consultation will then be held between July and October 2009, with the Council being asked to consider the outcomes of the consultation in December 2009.

The Council will be asked to consider its response to the Section 60 Order consultation on the regulation of hearing aid dispensers at its next meeting following the publication of the consultation.

5.1.3 Psychotherapists and Counsellors

A Professional Liaison Group was established in 2008 to discuss and make recommendations to the Council about the regulation of psychotherapists and counsellors.

The PLG has met three times since December 2008 and has been making good progress in discussing and making preliminary recommendations about the structure of the Register, protected titles, education and training and standards of proficiency. Two further meetings are planned in April and May 2009 (2 day meeting). The report of the group will be subsequently considered by the Council and a consultation held before recommendations are made to the Secretary of State for Health about the regulation of these professions.

In March 2009, a meeting is being held to update a wider group of stakeholders on the work of the PLG, and to seek further views. A further such meeting might be held in 2009/2010, perhaps during the consultation period, subject to the progress of the PLG and an assessment of the outcomes of the March 2009 meeting. The Executive is also talking to a patient advocacy organisation about ways of gaining the feedback of service users on this topic, and this might include a focus group being held in 2009/2010.

In 2009/2010, the Department will continue to meet with and present to stakeholders with an interest in this topic and undertake work internally to increase understanding of the regulation of these groups. This might include producing a series of briefing papers in order to increase internal and external understanding.

Timetable

The timetable for this work is subject to the progress of, and decisions made by, the PLG. In particular, it relies upon a report being made to the Council in July 2009 with no further meetings necessary to complete this work.

The following is the expected timetable:

- July 2009 – report to the HPC Council.

- July to October 2009 – consultation on the HPC's recommendations to the Secretary of State.

- December 2009 – finalisation of Council recommendations to the Secretary of State.

5.1.4 Dance Movement therapists / psychotherapists

In March 2004, the Association of Dance Movement Therapy, now the Association of Dance Movement Psychotherapy (ADMP), applied to the Council for the regulation of dance movement therapists as part of the Arts therapists part of the Register. The Council made a recommendation to the Secretary of State for the regulation of this profession.

In 2009/2010, the Department will work with the ADMP to produce profession-specific standards of proficiency for dance movement therapists. The Department will also bring a paper to the Council summarising the ADMP's application in 2003, and inviting the Council to formally agree recommendations about the structure of the Register, protected titles, standards of proficiency, education and training, voluntary register transfer and grandparenting. A consultation would then be held on the regulation of dance movement therapists, alongside the consultation on the regulation of psychotherapists and counsellors, and recommendations subsequently made to the Secretary of State.

Timetable
Liaison work with the ADMP would be undertaken in early 2009/2010, with a view that a paper should be considered by the Council in May and/or July 2009. The remainder of the timetable for this work would be as for psychotherapists and counsellors (5.1.3).

5.1.5 Healthcare scientists

In 2008/2009, the Department drafted the Council's response to the UK Health Departments consultation on Modernising Scientific Careers, a project looking at reforming the career structure for scientists working in healthcare.

Since 2003, the Council has recommended the following healthcare scientist professions for regulation to the Secretary of State:

- Clinical perfusionists (September 2003)
- Clinical physiologists (October 2003)
- Clinical technologists (May 2004)

- Medical illustrators (May 2004)
- Maxillofacial prosthetists and technicians (September 2005)

In its response to the consultation, the Council said that it believed that there are no reasons why the statutory regulation of these five groups cannot proceed in parallel with this project, on the basis of the existing risk to patient safety

In 2009/2010, the Executive will continue to meet with the project team and other stakeholders about this area. The further work that might be necessary in this area will be dependent upon the progress of the modernising scientific careers project. Depending on the outcomes, this might include beginning the process of putting together standards of proficiency.

Timetable
The timetable for the work in this area is subject to the outcomes of the Modernising Scientific Careers project.

5.1.6 Acupuncturists, medical herbalists and traditional Chinese medicine practitioners

In July 2008, the Steering Group for the statutory regulation of acupuncture, herbal medicines, traditional Chinese medicine and other traditional medicine systems practising in the UK reported to Ministers. The Group recommended that these professions should be regulated by the HPC. In September 2008, the Council considered the Group's report and recommended the regulation of these groups to the Secretary of State.

In the spring of 2009, a Department of Health consultation on the Steering Group's recommendation is expected. The Department will work with internal colleagues to put together the Council's response to this consultation.

In 2009/2010, the Department will also undertake work to better understand the nature of these professions and the issues previously identified as salient to regulation. The Department will also continue to meet with stakeholders as appropriate.

Dependent upon the outcome of the consultation and any subsequent decisions, the Department will begin planning work to produce standards of proficiency and agree the threshold level of qualification for entry to the Register.

Timetable
The Department will put together a response to the Department of Health consultation once it is published and bring this to the next Council meeting for consideration.

Any other work in this area is ongoing, or subject to the external environment and therefore subject to change.

5.1.7 The regulation of support workers / occupations

The White Paper discusses the regulation of healthcare support workers, and in particular the Scottish pilot project to implement employer-led regulation.

The White Paper also says that the government 'will consider whether there is sufficient demand for the introduction of statutory regulation for any assistant practitioner roles at levels 3 and 4 on the Skills for Health Career Framework.'

This is in accordance with the Council's view that some form of statutory regulation is necessary for these groups, in the interests of public safety.

At its strategy meeting in February 2009, the Council considered a draft discussion paper from the Executive on the regulation and licensing of support workers / occupations. This paper is due to be revised and brought back to the Council for approval.

The Department will keep abreast of developments in this area and continue to keep the Council informed.

Timetable
The discussion paper will be brought back to the Council at its meeting in May 2009. Any subsequent work on this would depend upon the Council's discussion and any developments in the external environment.

5.2 Review of the new professions process

The Council has to date considered 11 applications for the regulation of new professions, and has recommended ten of these groups for regulation to the Secretary of State for Health. The remaining application is ongoing. In the same period, only one new profession has come on to the HPC Register.

In October 2008, the Council agreed an amendment to the new professions process so that the Council would consult on regulation, including the relevant standards, prior to making recommendations to the Secretary of State.

In 2008/2009, the Department of Health Extending Professional Regulation Working Group has been considering the new process of regulating new professions, including developing criteria for deciding which professions should be regulated and which should not. This report is anticipated shortly.

In 2009/2010, the Department plans to review the new professions criteria and guidance notes in light of the Council's experience of handling applications from aspirant professions and the recent change to the process. This will include reviewing the applicability of the criteria, and rewriting the guidance notes, as appropriate. Additional guidance might also be considered, to cover the process of statutory regulation from the beginning, including the new professions process and continuing as a professional body after regulation.

Timetable
The timetable for this work is subject to other factors, including the publication of the Department of Health Extending Professional Regulation Working

Group report, and other new professions work. A preliminary timetable for the work at this stage would include a paper and discussion at the Council meeting in September 2009, or the Council away day in October 2009, a further paper in December 2009 or March 2010, and a subsequent consultation.

5.3 Aspirant groups liaison work

In 2008/2009, two applications were considered by the Council under the new professions process, one of which is outstanding. The Department also liaised with a number of aspirant professions about the new professions criteria and anticipates a forthcoming application from at least one group in the coming financial year.

Throughout 2009/2010, the Department will continue to liaise appropriately with aspirant groups. This includes responding to requests for meetings, identifying groups to meet with, drafting information for publication on the HPC website or on other groups' websites. This liaison work applies to groups who have applied to the Council, and also those groups that have not and are considering doing so.

In addition, the Department will liaise with any group wishing to make an application to the Council this year, and will score the application against the 10 existing new professions criteria to aid the Council's consideration.

Timetable
Ongoing 2009/2010

6. Other projects

6.1 Revalidation

In 2008, the Continuing Fitness to Practise Professional Liaison Group (PLG) published its report. The report was approved by the Council at its October 2008 meeting.

The report concluded that whilst an additional layer of inspection was not indicated at this time, further work was necessary, in particular to explore the link between pre-registration education and training and subsequent fitness to practise action.

In December 2008, the Department of Health Working Group for Non-Medical Revalidation published principles for revalidation and asked each regulator to respond, explaining their proposals and how they met the principles. The Department of Health's response to the HPC's submission is currently awaited.

In line with the recommendations of the Continuing Fitness to Practise Professional Liaison Group, in 2009/2010, the following research will be commissioned:

- A retrospective study looking at the links between fitness to practise and student conduct (2009-2011).

- A prospective study piloting a professionalism tool in pre-registration education and training and tracking progress over five years (2009-2014).

In addition, the Department will work with other Departments to analyse other data relevant to revalidation including:

- Analysis of fitness to practise data to explore correlations between age, gender, location of practice and fitness to practise.

- Analysis of the outcomes of the CPD audits.

The Department will also continue to attend meetings of the regulators' leads for revalidation, any further meetings of the Department of Health Non-Medical Revalidation Working Group (with the President) and any other meetings with stakeholders to explain the HPC's approach in this area.

Timetable
Research briefs will be written by the end of March 2009, with a view to commission research early in the 2009/2010 financial year.

The Council will be regularly updated with any further developments in this area.

6.2 Post-registration qualifications

In 2008/2009, the Education and Training Committee discussed this area, in light of a discussion meeting held in February 2008. At its meeting in December 2008, the Committee agreed that the Register should only be annotated where annotation would improve the protection of the public and where a qualification permitted an extension of scope of practice; and that the HPC should directly approve programmes leading to annotation of the Register.

The Committee agreed that a position statement should be produced and considered by the Committee following the publication of the report of the Department of Health Extending Professional Regulation Working Group. The Committee might then consider the qualifications it considers are priorities for annotation of the Register.

In February 2009, the Department provided a submission to the Council for Healthcare Regulatory Excellence (CHRE), who have been commissioned by the Department of Health to look at the regulators' approach to 'advanced practice'. Any developments in this area may therefore be relevant to this work.

Timetable
The report of the Department of Health Extending Professional Regulation Working Group has yet to be published. However, it is anticipated that it will be shortly.

The Education and Training Committee will consider a position paper and next steps following the publication of this report, potentially at its meeting in June 2009.

6.3 Health and disability

At its meeting in December 2008, the Education and Training Committee considered a paper on the recommendations made in the Report of the Disability Rights Commission (subsequently replaced by the Equality and Human Rights Commission) 'Maintaining Standards: Promoting Equality'.

The Committee agreed that the Executive should undertake further work to explore the current requirement for health references on admission and readmission to the Register and to bring back any recommendations about changes to these requirements and the associated Rules.

Timetable

The Department will work with the HPC solicitor and internal colleagues to bring back a paper on this topic to the Education and Training Committee's meeting in June 2009.

Further work on this topic may be necessary, dependent on the Committee's discussion in June 2009.

6.4 Professional indemnity insurance

The 2007 White Paper says that: 'In response to a government initiative, indemnity insurance is also becoming a requirement.' Professional indemnity insurance was also mentioned in the Council for Healthcare Regulatory Excellence's performance review report for the Nursing and Midwifery Council.

The Executive has been contacted by the Department of Health who have indicated that a statutory requirement for professional indemnity insurance might potentially be included in legislative amendments later in 2009.

At its meeting in March 2009, the Council is considering a discussion paper from the Executive on professional indemnity insurance.

Timetable

The timetable in this area is subject to the Council's discussion in March 2009, and any decisions made by the Department of Health in this area.

6.5 Welsh language scheme

In 2009/2010, the Department plans to consult on and publish a Welsh Language Scheme. This scheme will bring together existing practice across the organisation to explain how the HPC meets the requirements of the Welsh Language Act to treat the English and Welsh languages on an equal basis.

A draft scheme has already been produced and is being discussed with internal colleagues. A meeting has also been held with the Welsh Language Board who has to approve a draft of the scheme prior to consultation, and a finalised scheme for publication. The consultation document and final scheme must also be published in both English and in Welsh.

This work has been carried over from the 2008/2009 financial year following preliminary work undertaken in that year.

Timetable

The Council will be asked to approve a consultation on a Welsh Language Scheme in May 2009. Following a three month consultation and further liaison with the Welsh Language Board, the Council might be asked to approve a final copy of the scheme at its meeting in October or December 2009.

Welsh Language Schemes are subject to the approval of the Welsh Language Board and therefore the dates outlined above may be subject to change.

6.6. Consumer complaints

The Hearing Aid Council currently regulates both hearing aid dispensers and hearing aid dispensing businesses and receives some complaints which a related to the consumer aspects of the service they have received (price, payment terms, quality of products and so on) rather than the fitness practise of individual dispensers.

This is likely to have an impact upon the Fitness to Practise Department, as the normal first port of call for consumers who have complaint about the service they have received. If a complaint is not about the fitness to practise of a registrant (and therefore does not meet the standard of acceptance for allegations), consumers will need to be signposted to the best source of help, including trading standards and other consumer codes currently being produced.

This is also likely to be an area of increasing importance to other professions regulated by us, as more registrants are self-employed or in private practice.

The Department will work with the Fitness to Practise Department to scope this area and produce a paper for the Fitness to Practise Forum (or its equivalent under the new Council from July 2009).

Timetable
A paper will be considered by the Fitness to Practise Forum in September 2009.

6.7. CHRE performance review

Every year, the Council for Healthcare Regulatory Excellence (CHRE) reviews the performance of all nine health regulators. Assembling the HPC's submission to the performance review is co-ordinated by the Department. This process involves submitting a report to CHRE, attending initial meetings, and follow-up meetings, providing additional information as required, and approving the final report(s).

Timetable
The performance review for the financial year 2009/2010, if similar to that of last year, will involve submitting the initial report to CHRE in January 2009, with the results of the review being published in April 2009.

6.8. European Union

In 2008/2009, the Department continued to attend meetings of the Alliance of UK Regulators in Europe (AURE) and Health Professions Crossing Borders (HPCB) to keep up to date with developments in Europe and share information between European Regulators. Updates on work in Europe have been made to the Education and Training Committee and the Council.

In 2008/2009, a productive trip was made to the European parliament and useful contacts made with stakeholders in European Directorates and other organisations.

In 2009/2010, the Department will continue its involvement in work in this area and will:

- continue membership of the Alliance of UK Health Regulators in Europe (AURE), as an effective way of making shared UK regulatory issues heard in Europe;

- continue to implement and review the recommendations from the European conference on Healthcare Professionals Crossing Borders, October 2005. This includes working with colleagues in European competent authorities around implementing the next steps of the consensus, particularly around sharing information in Europe;

- continue ongoing updating and development of www.healthregulation.org as a worldwide resource for all regulators to enable effective sharing of information, particularly around fitness to practise;

- put together a series of briefing notes, or a 'Europe manual' for internal use which would draw together relevant UK and European legislation, HPC's processes, and previous legal advice in an easy to understand resource that might be used as a reference source for internal colleagues. This would help ensure increased understanding within the Department and amongst internal colleagues more generally. (Dependent on other priorities, this piece of work may be ongoing into 2010/2011.)

6.9 Stakeholder liaison

The Department will continue to work with the Chief Executive, and the Communications Department (and particularly the Public Affairs and Stakeholder Manager) to ensure a consistent and strategic approach to stakeholder relationships.

In particular, a joint approach by the Department and the Communications Department in making dedicated trips to a home country over several days in the last two financial years has been very successful in building and developing new and existing relationships respectively. Further to these meetings, contacts have been followed up, areas of common interest have been identified, and working relationships improved.

In 2009/2010, the Department will work with the Communications Department to continue regular visits to stakeholders in the home countries. These contacts are complementary to the regular meetings with government representatives from all four home countries undertaken by the Chief Executive and President.

6.10 Continuing Professional Development (CPD) sample profiles

The Department will continue to work with the professional bodies to produce sample profiles for the professions that do not yet have a profile.

Profiles are drafted by professional bodies and then checked by a member of the Department and two members of the Education and Training Committee to ensure that they are of a good standard for publication. Feedback is provided to the authors and the profiles redrafted. Profiles often go through two or three drafts before they are approved for publication.

At present the following professions do not have a published profile:

- Art therapists
- Music therapists
- Radiographers

The Department is in receipt of further draft profiles for radiographers and draft profiles for practitioner psychologists and aims to publish these in 2009/2010.

The Department will also work with professional bodies in the field of hearing aid audiology to produce profiles for hearing aid dispensers ready for the opening of the Register in March 2010.

Timetable

The Department will work towards publishing at least one profile for each part of the Register by the end of 2009.

6.11 Safeguarding vulnerable groups

Legislation is being introduced to implement the recommendations of the Bichard report around the protection of children and of vulnerable adults. This is being implemented via the Safeguarding Vulnerable Groups legislation in England, Wales and Northern Ireland, and the Protection of Vulnerable Groups legislation in Scotland.

This legislation will create two barring systems, which are intended to prevent individuals from working with children and / or vulnerable adults if they are considered not safe to do so. It is important that HPC works with these new barring arrangements to fully understand the impact that these will have on our processes, particularly for registration, and the interaction with our fitness to practise process.

The Department has worked with the Fitness to Practise Department to respond to initial consultations on the setting up of barring arrangements and the Department will continue to be part of the cross-department project group for implementation, providing research and recommendations on ways forward.

Timetable
Ongoing 2009-2010.

6.12 Consultation responses
The Department will continue to respond to other organisations' consultations that are directly concerned with health professionals' regulation, and will aim to respond to those relevant consultations on issues related to health, consumer issues, and regulation more broadly.

Timetable
Ongoing 2009-2010.

Responses to consultations relating to the regulation of new professions and other consultations by the UK Departments of Health, and other government departments salient to regulation and the HPC's role, will be priorities for the Department.

6.13 Briefing papers
The Department aims to keep stakeholders, both internal and external, including Council and Committee members, well informed about policy developments in the external environment and the HPC's view about these.

The Department also needs to develop ways of working which will ensure that information is easily accessible and knowledge retained within the Department. Such briefing notes might also be helpful for the President, other Council members and the Chief Executive in undertaking external meetings and speaking commitments.

In 2009/2010, the Department aims to produce a small number of 'briefing papers' on discrete topics. For example, a briefing note on the regulation of acupuncturists, medical herbalists and traditional Chinese medicine practitioners might provide a clear summary of developments in this area, including a concise summary of the nature of the practice in each of these areas. Such briefing papers might be posted on to the Council member's extranet or included as papers to note at Council or Committee meetings.

Timetable
The timetable for this area of work will be ongoing and dependent upon the other projects outlined in this document.

The Department aims to produce briefing notes on the regulation of acupuncturists, medical herbalists and traditional Chinese medicine practitioners and the regulation of hearing aid dispensers in 2009/2010. However, this area of work may be subject to change because of the other priorities outlined in this document.

6.14 Practice Committee Constitution Rules

The Council launched a consultation in February 2009 on the Health Professions Council (Practice Committees (Constitution) and Miscellaneous Amendments) Rules 2009. These rules make proposed changes to the constitution of the fitness to practise committees, and some minor amendments to other Rules.

These Rules are in preparation for The Health Care and Associated Professions (Miscellaneous Amendments and Practitioner Psychologists) Order 2009 which has been laid before the Scottish and UK parliaments.

This consultation will end on 13 April 2009.

Timetable
The results of the consultation and final Rules will be brought to the Council at its meeting in May 2009.

If approved by the Council, the Rules will become effective subject to parliamentary approval of The Health Care and Associated Professions (Miscellaneous Amendments and Practitioner Psychologists) Order 2009.

6.15 Consultation on an amendment to the Standards for Continuing Professional Development

The Department launched a consultation in February 2009 on a minor amendment to the standards for continuing professional development. The proposed amendment to standard five would make it clear that profiles submitted by registrant's need to be their own work.

Timetable
The consultation will close on 11 May 2009. The results of the consultation will be brought to the Council at its meeting in May 2009, and the Council asked to agree any change to the CPD standards.

6.16 Projected registrant numbers
In the last two financial years, the Department has worked with the Finance Department and other Departments to put together projected registrant numbers which have formed the basis of the Five Year Plan.

In 2009/2010, further data may be available about cohorts on approved programmes to help in further developing the projection model currently used.

Timetable
A paper will be considered by the Finance and Resources Committee in November 2009.

7. Equality and Diversity

The Council has agreed its Equality and Diversity Scheme, which details, amongst other areas:

- action points for each department;
- the employee diversity group; and
- collecting demographic data.

The Department continues to provide the project lead for this important part of the Council's work. This now involves overseeing the completion of action points, in conjunction with the Head of Business Process Improvement.

The Department also participates in the Joint Regulators' Equality and Diversity Forum.

Although only an ongoing piece of work is identified as a project in this area for 2009/2010, the work of the Internal Equality and Diversity Working Group may influence the Department's activities in the coming year. In particular, this Group's work on impact assessment might meaningfully feed into further development of this area, either in this coming financial year, or in 2010/2011.

Impact assessment

In carrying out its activities, the Department needs to ensure that any equality and diversity implications are taken into account and brought to the Council or a Committee's attention as appropriate.

For example, the report to the Council of the Psychotherapists and Counsellors PLG will need to include an assessment of the potential equality and diversity impact of the recommendations contained within. In its standards work, the Department will continue to highlight to PLGs, the Education and Training Committee, and the Council, the need to consider any potential adverse impact in setting standards.

7.1 Yearly progress reports

The Department will continue to write the yearly progress report to update the Council as to the achievement of the action points in the equality and diversity scheme. The report for 2009 will be considered at a future meeting of the Council, but in subsequent years will be considered at the March Council meeting each year.

Timetable

A yearly progress report will be written and considered by the Council in March 2009.

8. 2010 – 2012

The Policy and Standards Department will continue to work flexibly, adapting plans for delivering work in response to changes in the external environment. It is anticipated that future important areas of work will include the following:

Revalidation

Overall, it is expected that the work of the Department to 2012 will continue to be heavily influenced by the recommendations made in the White Paper for revalidation. In particular, the Department will want to monitor developments in this area, publish the outcomes of its research in this area and commission further research in line with the Council's approach to this topic. The Department will need to respond flexibly to any developments in government policy in this area.

Evidence-based regulation

Building upon the research referred to in relation to revalidation, in 2010 to 2012 it is likely that resources will need to be allocated to commissioning further research in areas of interest to the Council and in considering ways in which the Council can promote the outcomes of this research widely to stakeholders. This area is identified in the draft strategic intent recently considered by the Council.

New professions

The area of new professions will continue to be a significant project area for the Department in 2010 to 2012

Preparation for the review of regulation

In addition, the White Paper 2007 said that in 2011 a further review of regulation would be undertaken, to look again at some of the questions that were originally considered by the Foster review. Although at this stage little is known about what form this review could take, it is therefore sensible to assume that in 2010/2011 some resources will be dedicated to providing information to, or participating in, this review.

Equality and Diversity

The Council published its equality and diversity scheme in January 2008 with a currency of three years. In 2010/2011, the Department will need to work with the Internal Equality and Diversity Working Group in order to review the existing scheme and develop a new scheme for the following three years.

The Department will also need to take into account any changes in legislation in this area or any policy developments from the Commission for Equality and Human Rights and Equality Commission for Northern Ireland.

9. Risk management

Managing risks is also a vital part of the Department's work over the coming year. The main risks that are owned by the Department are:

12.1 Incorrect process followed to establish standards/guidance/policy (i.e.: no relevant Council decision)

12.2 Inappropriate standards/guidance published e.g. standards are set at inappropriate level, are too confusing or are conflicting

12.3 Changing/evolving legal advice rendering previous work inappropriate

12.4 Inadequate preparation for a change in legislation (Health Professions Order, or other legislation affecting HPC)

In summary, however, it should be noted that although it's separately dealt with here, risk management is in fact embedded into much of the workplan for this coming year. For example:

Resourcing
Increasing the number of employees, particularly those with good previous experience, increases the capacity of the Department, and also helps to manage all the relevant risks in the Department, but particularly risks 12.3 and 12.4.

Networking and engagement
Making good contacts with external organisations feeds into the Council's overall aim to influence and promote, and also helps to manage risk 12.4.

Quality management
Working with the Head of Business Process Improvement, particularly around internal audits, not only links with the Council's aim to improve, by keeping ISO registration, but also helps to manage risk 12.1.

Policy and Standards Department
Standards workplan

1. This document

This document sets out broad areas for the future direction of the Council's work in the area of standards. It is designed to bring together information about the background to the Council's standards, establish some broad principles, particularly around standards development and review, and indicate past, present and possible future activities, linked to the overarching Policy and Standards Department workplan.

The document includes information about past activities in relation to the standards and planned or possible future activities. It should be read in conjunction with the workplan for the Policy and Standards Department.

This document was first approved by the Council December 2006, and has been revised for 2009/2010. It will be revised and brought back to the Council alongside the Policy and Standards Department workplan in future years.

1.1 The standards

The Council produces four key standards which are the subject of this document. They are:

- Standards of proficiency
- Standards of conduct, performance and ethics
- Standards of education and training
- Standards of continuing professional development

The Council also publishes requirements for returning to practice.

Setting standards is one of the Council's key processes and the standards are central to how individuals become and remain registered.

1.2 Overall aims

The Council's standards should:

- effectively protect the public;

- not hinder the development by education providers, registrants and others of innovative and pragmatic ways of working;

- be applicable to all or most registrants (except in the case of profession-specific standards of proficiency);

- be written in broad terms to allow for developments in best practice, technology and legislation;

- be set at a 'threshold' level – e.g. the level which is necessary for safe and effective practice, and public protection; and

- describe outcomes or broad principles and not be prescriptive about ways of meeting the standards

1.3 Overarching aims

The overarching aims identified in the Policy and Standards Department workplan and most relevant to the areas outlined in this document are:

1.3.1 Improve

- The council aims to review its standards, guidance and policies, to consult with stakeholders, to gain feedback and to make improvements to ensure that these continue to reflect the Council's purpose and principles.

1.3.2 Influence and promote

- The Council aims to build on its growing reputation as a respected voice within the policy arena on the regulation of healthcare workers.

- The Council aims to promote its standards and guidance to its stakeholders.

- The Council aims to influence the development of other standards and guidance relevant to its aims. It also aims to learn from the experience of other organisations and engage its stakeholders when producing standards and guidance.

2. Background to the standards

2.1 Standards of proficiency

Legal background
Article 5 (2) (a) of the Health Professions Order 2001 says that the council shall:

'establish the standards of proficiency necessary to be admitted to the different parts of the register, being the standards it considers necessary for safe and effective practice under that part of the register.'

Summary
The standards are set at a threshold or 'necessary' level and play a central role in entry to the register.

The standards are used in the following ways:

- in making decisions against the standards about international and grandparenting (route b) applications;

- in assessing education programmes to decide whether the learning outcomes meet the standards of proficiency; and

- in making decisions about lack of competence fitness to practise cases.

The standards include a 'generic core' which is common to all professions on the register and profession-specific standards.

Although the standards are threshold standards for entry to the register, the interaction between the standards and the standards of education and training means that a small number of standards relate to additional or post-registration entitlements and are therefore 'optional'. For example, the standards for radiographers, physiotherapists and chiropodists and podiatrists include a standard which relates to supplementary prescribing entitlements. It is only necessary for registrants to meet this standard if they wish to practise as a supplementary prescriber.

2.2 Standards of conduct, performance and ethics

Legal background

Article 21 (a) says that the Council shall –

'establish and keep under review the standards of conduct, performance and ethics expected of registrants and prospective registrants and give them such guidance on these matters as it sees fit.'.

Article 27 (a) (i) further provides the Conduct and Competence with the role of advising the Council on the *'performance of the Council's functions in relation to standards of conduct, performance and ethics expected of registrants and prospective registrants'.*

Rule 8 of The Health Professions Council (Practice Committees) (Constitution) Rules Order of Council 2003 says that the Conduct and Competence Committee must review the standards each year.

Summary

The standards describe our expectations of registrants in terms of their professional attitudes and behaviour. They:

- may be taken into account by fitness to practise panels in deciding whether the fitness to practise of a registrant is impaired; and

- are used in making health and character decisions on admission to the register.

The standards are generic across all registered professionals and specifically apply to prospective registrants. Applicants for registration are asked to confirm that have read and understood the standards and will keep to them once registered.

2.3 Standards of education and training

Legal background
Article 15 (1) (a) says that:

The Council shall from time to time establish—

'the standards of education and training necessary to achieve the standards of proficiency it has established under article 5 (2).'

Article (6) (a) further provides that –

'In respect of additional qualifications which may be recorded on the register the Council may establish standards of education and training'.

Summary
The standards ensure that education programmes allow graduates to successfully meet the learning outcomes described in the standards of proficiency. The standards cover such areas as admissions, assessments and practice placements.

The standards are generic and are monitored via the Council's approvals monitoring processes.

2.4 Standards of continuing professional development

Legal background
Article 19 (1) says that:

'The Council may make rules requiring registrants to undertake such continuing professional development as it shall specify in standards.'

Summary
The standards of continuing professional development (CPD) link the learning and development of registrants to continued registration, meaning that health professionals must continue to learn while they are registered, to help ensure that they remain safe and effective practitioners.

The standards are generic and focus on the outcomes of registrants' learning,

All registrants are required to confirm when renewing their registration that they understand and meet the Council's standards. From 2008 a sample of registrants will be audited to ensure that the standards have been met.

2.5 Requirements for returners to practice

Legal background
Article 19 (3) says that:

'The Council may by rules require persons who have not practised or who have not practised for or during a prescribed period, to undertake such education or training or to gain such experience as it shall specify in standards.'

Summary
The Council has defined the practise of a profession as someone drawing on their professional skills in some way in the course of their work. The returners to practice requirements make additional requirements of registrants who have been out of practise for more than two years in order to remain registered or readmit to the register. The requirements also apply to someone who has never been registered, who has been out of practise for more than two years and who holds an approved qualification which is over five years old.

Health Professionals are required to undertake a period of updating which may include supervised practise, formal study or private study and provide evidence of this in order to become re-registered.

3. Workplan

This workplan is divided into five areas relevant to the Department's standards work.

An aim / objective for each area of the Department's standards work is identified, background provided for that area and general principles established that will influence the Department's approach in this area.

3.1 Develop and review standards

Aims / Objectives

- All standards reviewed on an ongoing and periodic basis in accordance with review policy and timetable

3.1.1 Standards for new professions

Whenever a new part of the HPC Register is opened, the Council needs to publish standards for proficiency and amend standard one of the standards of education and training ("SET 1") to establish the threshold level of qualification for entry to the Register.

A Professional Liaison Group (PLG) was established to put together draft standards of proficiency for practitioner psychologists and the psychotherapists and counsellors PLG is also tasked with putting together draft standards. However, this approach has not been followed in relation to other professions. For example, the standards of proficiency for operating department practitioners were put together by a professional body, with input from the Executive. The standards of proficiency for hearing aid audiologists were put together by a group convened by the Hearing Aid Council, on which the Executive was represented.

The Council will normally establish a Professional Liaison Group (PLG) to draft the standards of proficiency for a new part of the Register. However, where substantial work has already been undertaken to draft standards of proficiency (for example, by a professional body or bodies), a PLG may not be necessary. The HPC's new professions process includes a requirement for a profession seeking regulation to include standards of proficiency with their application.

The Council is required to consult before publishing or amending any standards.

When a new profession is regulated, there will normally be a time-limited grandparenting period. The HPC has in the past committed to keeping the standards the same during the grandparenting period to ensure consistency and fairness. The standards of proficiency for the first 12 professions regulated, and the standards for operating department practitioners, were reviewed following the end of their respective grandparenting periods.

The Education and Training Committee should consider at the end of the grandparenting period whether it is necessary to review the standards of proficiency for new professions.

- A consultation was held between November 2007 and February 2008 on the threshold level of qualification for entry for the Register for practitioner psychologists.

- A Professional Liaison Group (PLG) was established in the autumn of 2008 to discuss the statutory regulation of psychotherapists and counsellors, including putting together draft standards of proficiency.

- A joint consultation with the Hearing Aid Council on standards of proficiency for hearing aid audiologists was held in 2008, in advance of the anticipated opening of the Register, delayed to March 2010.

3.1.2 Ongoing and periodic review

Ongoing and periodic will ensure that the standards continue to be fit for purpose and that their content is well understood by the Council's stakeholders. Some general principles are established below:

Ongoing review should focus on ensuring that the standards continue to be fit for purpose. 'Ongoing review' is the 'day-to-day' reviewing of the standards by the Council, its Committees and the Executive. This will ensure that the standards do not limit effective ways of working for health professionals and education providers.

A **periodic** review should be more thorough and comprehensive. The purpose of periodic review is to:

- ensure that the standards remain fit for purpose – in making decisions about education programmes and in making fitness to practise decisions, for example;

- ensure that they are well understood by our stakeholders including registrants, patients, education providers and the public; and

- ensure that they take account of change including changes in practice, legislation, technology, guidelines and wider society.

In addition:

- Ideally, no more than one periodic review of the Council's standards should take place in any one financial year. This ensures that any confusion is avoided, allows the Council to more effectively engage with its stakeholders, and allows for the effective use of resources.

- Any periodic review should have a clear workplan. A periodic might involve establishing a Professional Liaison Group (PLG) if the Council and/or a sponsoring Committee considered this to be helpful approach.

- Periodic reviews should take place no more than once every five years. This five year period will normally be from the date of the republication of the standards following the last review.

Whilst the principle is established that a periodic review should normally not take place more than once every five years (subject to the provisions of ongoing review), the exact timing of a review may be subject to change. The timing of any review would be influenced by the Council's priorities in any given year and therefore the budget and resource considerations of the Policy and Standards Department.

- Profession-specific standards of proficiency for operating department practitioners were reviewed in 2007, consulted on between November 2007 and March 2008, and republished in July 2008.

- A Professional Liaison Group (PLG) was established to review the standards of education and training in September 2007 and a consultation held on revised standards and guidance between August and November 2008.

- A consultation was held between November 2007 and March 2008 on making the standards of proficiency for chiropodists and podiatrists which relate to supplementary prescribing and prescription only medicines compulsory. The changes were subsequently agreed and will become effective 1 September 2009.

- A consultation is currently ongoing on a proposed minor change to standard five of the CPD standards. This change was suggested as part of ongoing review.

3.2 Standards guidance and information

Aims / Objectives

- To improve understanding of, and compliance with, the standards amongst registrants.

- To improve understanding of the standards amongst other stakeholders.

The Hampton review concluded that regulators place insufficient focus on providing advice to ensure compliance and recommended that regulators should provide more advice as 'better advice leads to better regulatory outcomes'. [1]

The Council presently publishes guidance on topics in a small number of areas directly related to the standards or on topics building upon the principles expressed in the standards, for example:

- Standards of education and training guidance for education providers
- Managing fitness to practise
- A disabled person's guide to becoming a health professional

A distinction is drawn between publications providing information about the Council's processes and publications which provide specific guidance on standards or standards related issues.

In particular, the Executive has identified the potential need for guidance to the standards of conduct, performance and ethics in a small number of discrete areas.

Formal guidance should be produced if:

- there is good evidence to suggest that guidance would be helpful;

- the topic is not substantially covered in another HPC publication or another authoritative sources;

- the topic is relevant to most professionals who are registered; and

- the topic builds upon the existing standards.

Whilst links to the Council's key fitness to practise functions should be clear, any guidance should be positive in nature by focusing on ways of meeting the standards rather than situations would not meet the standards or the possible consequences of a failure to meet them. Guidance should focus on the importance of health professionals making individual decisions which are informed and reasonable.

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[1] Hampton, Philip (HM Treasury), Reducing administrative burdens: effective inspection and enforcement, March 2005, p.10 and p.15.
http://www.hm-treasury.gov.uk/media/A63/EF/bud05hamptonv1.pdf.

Where a need for guidance might be identified, but such guidance would not be sufficiently substantial to justify separate published guidance, the Executive might consider published information on the HPC website with links to other sources of guidance.

The Council recognises the important role of professional bodies and other organisations in publishing guidance and information to assist registrants in meeting the standards. Any guidance should not seek to replace this role and should provide signposts to other information available where possible.

- Confidentiality guidance was published following consultation in July 2008.

- Consultations are currently ongoing on guidance on the health and character process, and guidance on conduct and ethics for students (building upon the standards of conduct, performance and ethics).

3.3 Standards and ethics queries

Aims / Objectives

- Responses to standards and ethics queries are appropriate and consistent.

We regularly receive letters and e-mails from registrants and employers asking questions about our standards, particularly the standards of conduct, performance and ethics. Most commonly we receive enquiries asking about how to interpret the standards, particularly registrants and employers seeking assurances that their working practices meet our standards. (Queries received from individual registrants on matters related to fitness to practise are answered by the Fitness to Practise Department.)

We are also regularly asked for information on topics with some relevance to the standards such as the drug administration entitlements of those we register.

The Policy and Standards Department will work with the Fitness to Practise Department to ensure consistency and best practice in answering standards and ethics queries. The last workplan suggested that one way in which this could be achieved would be a database to track standards queries. However, the Executive has concluded that, at this stage, the numbers of enquiries are too small to make such a system necessary.

3.4 Involve

Aims / Objectives

- To involve stakeholders in developing standards and guidance.
- To be involved in the development of standards and guidance by other organisations where this is relevant to the Council's aims.
- To be recognised as a source of expertise in producing clear, accessible and appropriate standards and guidance.

The Council will involve its stakeholders in the production of its standards and guidance. For example, the Council invited input from charities and disability groups when it established a PLG to consider issues around health, disability and registration. It also invited input from a member of a patient public involvement forum when reviewing the standards of proficiency.

The involvement of external stakeholders benefits the Council in developing its standards and guidance in a number of ways. The Council benefits from the knowledge and expertise of its stakeholders, often profession-specific and drawn from a wide range of practice areas. Involving our stakeholders in the development of standards and guidance (rather than simply at the consultation stage) also ensures 'buy-in' from stakeholders and improved dissemination of the completed work. It also raises the profile of the organisation.

The Council also involves its stakeholders by consulting whenever it produces guidance or standards. It also provides input into other standards development by others by responding to external consultations where appropriate.

The Council is often involved in the development of standards and guidance by other organisations.

Becoming involved in the development of standards and guidance by other organisations will:

- allow sharing of knowledge, expertise and best practice for mutual benefit;
- provide opportunities for networking; and
- raise our profile.

- Regular participation in cross-regulatory fora which often consider standards related matters.

- The Psychotherapists and counsellors PLG has a representative from an organisation representing the interests of service users. Consideration is currently being given to ways in which the input of service users might be achieved.

- Public consultation and responding to other organisations consultations on standards related matters.

- 'A disabled person's guide' was cited as an example of good practice within current regulatory requirements in the Disability Rights Commission's report 'Maintaining Standards: Promoting Equality'

3.5 Communicate

Aims and Objectives

- To effectively communicate the role and purpose of the Council's guidance to its stakeholders.

The Council should aim to effectively communicate the role and purpose of its standards to a variety of different stakeholders including employers, registrants and education providers.

The Policy and Standards Department will work with the Communications Department to develop effective ways of communicating the purpose and function of the Council's standards and guidance.

This could include:

- using opportunities to promote the Council's standards work at events;

- producing content for the newsletter which explores standards and ethics type issues;

- developing the HPC website; and

- exploring possibilities of standards focused consultation events in the future.

- Press releases for reviews and consultations

- Regular 'HPC In Focus' articles on standards consultations and other related matters.

- Numerous presentations given to stakeholders on topics including the standards of conduct, performance and ethics, CPD standards and returns to practice requirements.

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4. Indicative periodic review timetable

Standard	Date of first publication	Date of first review (financial year)	Date of re-publication	Date of subsequent review (financial year)
Standards of proficiency	2003	2005/06	2007	2012/13
Standards of conduct, performance and ethics	2003	2007/08	2008	2013/14
Standards of education and training	2004	2007/08	2009	2014/15
Standards for continuing professional development**	Effective 2006	TBC	n/a	TBC
Returners to practice requirements	2005	2010/11*	n/a	

*This forms part of the Department's equality and diversity action points
NB: The above timescales are subject to the information in section 3.1 of this document
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Policy and Standards Department
Standards workplan

1. This document

This document sets out broad areas for the future direction of the Council's work in the area of standards. It is designed to bring together information about the background to the Council's standards, establish some broad principles, particularly around standards development and review, and indicate past, present and possible future activities, linked to the overarching Policy and Standards Department workplan.

The document includes information about past activities in relation to the standards and planned or possible future activities. It should be read in conjunction with the workplan for the Policy and Standards Department.

This document was first approved by the Council December 2006, and has been revised for 2009/2010. It will be revised and brought back to the Council alongside the Policy and Standards Department workplan in future years.

1.1 The standards

The Council produces four key standards which are the subject of this document. They are:

- Standards of proficiency
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- Standards of education and training
- Standards of continuing professional development

The Council also publishes requirements for returning to practice.

Setting standards is one of the Council's key processes and the standards are central to how individuals become and remain registered.

1.2 Overall aims

The Council's standards should:

- effectively protect the public;

- not hinder the development by education providers, registrants and others of innovative and pragmatic ways of working;

- be applicable to all or most registrants (except in the case of profession-specific standards of proficiency);

- be written in broad terms to allow for developments in best practice, technology and legislation;

- be set at a 'threshold' level – e.g. the level which is necessary for safe and effective practice, and public protection; and

- describe outcomes or broad principles and not be prescriptive about ways of meeting the standards

1.3 Overarching aims

The overarching aims identified in the Policy and Standards Department workplan and most relevant to the areas outlined in this document are:

1.3.1 Improve

- The council aims to review its standards, guidance and policies, to consult with stakeholders, to gain feedback and to make improvements to ensure that these continue to reflect the Council's purpose and principles.

1.3.2 Influence and promote

- The Council aims to build on its growing reputation as a respected voice within the policy arena on the regulation of healthcare workers.

- The Council aims to promote its standards and guidance to its stakeholders.

- The Council aims to influence the development of other standards and guidance relevant to its aims. It also aims to learn from the experience of other organisations and engage its stakeholders when producing standards and guidance.

2. Background to the standards

2.1 Standards of proficiency

Legal background
Article 5 (2) (a) of the Health Professions Order 2001 says that the council shall:

'establish the standards of proficiency necessary to be admitted to the different parts of the register, being the standards it considers necessary for safe and effective practice under that part of the register.'

Summary
The standards are set at a threshold or 'necessary' level and play a central role in entry to the register.

The standards are used in the following ways:

- in making decisions against the standards about international and grandparenting (route b) applications;

- in assessing education programmes to decide whether the learning outcomes meet the standards of proficiency; and

- in making decisions about lack of competence fitness to practise cases.

The standards include a 'generic core' which is common to all professions on the register and profession-specific standards.

Although the standards are threshold standards for entry to the register, the interaction between the standards and the standards of education and training means that a small number of standards relate to additional or post-registration entitlements and are therefore 'optional'. For example, the standards for radiographers, physiotherapists and chiropodists and podiatrists include a standard which relates to supplementary prescribing entitlements. It is only necessary for registrants to meet this standard if they wish to practise as a supplementary prescriber.

2.2 Standards of conduct, performance and ethics

Legal background

Article 21 (a) says that the Council shall –

'establish and keep under review the standards of conduct, performance and ethics expected of registrants and prospective registrants and give them such guidance on these matters as it sees fit.'.

Article 27 (a) (i) further provides the Conduct and Competence with the role of advising the Council on the *'performance of the Council's functions in relation to standards of conduct, performance and ethics expected of registrants and prospective registrants'.*

Rule 8 of The Health Professions Council (Practice Committees) (Constitution) Rules Order of Council 2003 says that the Conduct and Competence Committee must review the standards each year.

Summary

The standards describe our expectations of registrants in terms of their professional attitudes and behaviour. They:

- may be taken into account by fitness to practise panels in deciding whether the fitness to practise of a registrant is impaired; and

- are used in making health and character decisions on admission to the register.

The standards are generic across all registered professionals and specifically apply to prospective registrants. Applicants for registration are asked to confirm that have read and understood the standards and will keep to them once registered.

2.3 Standards of education and training

Legal background
Article 15 (1) (a) says that:

The Council shall from time to time establish—

'the standards of education and training necessary to achieve the standards of proficiency it has established under article 5 (2).'

Article (6) (a) further provides that –

'In respect of additional qualifications which may be recorded on the register the Council may establish standards of education and training'.

Summary
The standards ensure that education programmes allow graduates to successfully meet the learning outcomes described in the standards of proficiency. The standards cover such areas as admissions, assessments and practice placements.

The standards are generic and are monitored via the Council's approvals monitoring processes.

2.4 Standards of continuing professional development

Legal background
Article 19 (1) says that:

'The Council may make rules requiring registrants to undertake such continuing professional development as it shall specify in standards.'

Summary
The standards of continuing professional development (CPD) link the learning and development of registrants to continued registration, meaning that health professionals must continue to learn while they are registered, to help ensure that they remain safe and effective practitioners.

The standards are generic and focus on the outcomes of registrants' learning,

All registrants are required to confirm when renewing their registration that they understand and meet the Council's standards. From 2008 a sample of registrants will be audited to ensure that the standards have been met.

2.5 Requirements for returners to practice

Legal background

Article 19 (3) says that:

'The Council may by rules require persons who have not practised or who have not practised for or during a prescribed period, to undertake such education or training or to gain such experience as it shall specify in standards.'

Summary

The Council has defined the practise of a profession as someone drawing on their professional skills in some way in the course of their work. The returners to practice requirements make additional requirements of registrants who have been out of practise for more than two years in order to remain registered or readmit to the register. The requirements also apply to someone who has never been registered, who has been out of practise for more than two years and who holds an approved qualification which is over five years old.

Health Professionals are required to undertake a period of updating which may include supervised practise, formal study or private study and provide evidence of this in order to become re-registered.

3. Workplan

This workplan is divided into five areas relevant to the Department's standards work.

An aim / objective for each area of the Department's standards work is identified, background provided for that area and general principles established that will influence the Department's approach in this area.

3.1 Develop and review standards

Aims / Objectives

- All standards reviewed on an ongoing and periodic basis in accordance with review policy and timetable

3.1.1 Standards for new professions

Whenever a new part of the HPC Register is opened, the Council needs to publish standards for proficiency and amend standard one of the standards of education and training ("SET 1") to establish the threshold level of qualification for entry to the Register.

A Professional Liaison Group (PLG) was established to put together draft standards of proficiency for practitioner psychologists and the psychotherapists and counsellors PLG is also tasked with putting together draft standards. However, this approach has not been followed in relation to other professions. For example, the standards of proficiency for operating department practitioners were put together by a professional body, with input from the Executive. The standards of proficiency for hearing aid audiologists were put together by a group convened by the Hearing Aid Council, on which the Executive was represented.

The Council will normally establish a Professional Liaison Group (PLG) to draft the standards of proficiency for a new part of the Register. However, where substantial work has already been undertaken to draft standards of proficiency (for example, by a professional body or bodies), a PLG may not be necessary. The HPC's new professions process includes a requirement for a profession seeking regulation to include standards of proficiency with their application.

The Council is required to consult before publishing or amending any standards.

When a new profession is regulated, there will normally be a time-limited grandparenting period. The HPC has in the past committed to keeping the standards the same during the grandparenting period to ensure consistency and fairness. The standards of proficiency for the first 12 professions regulated, and the standards for operating department practitioners, were reviewed following the end of their respective grandparenting periods.

The Education and Training Committee should consider at the end of the grandparenting period whether it is necessary to review the standards of proficiency for new professions.

- A consultation was held between November 2007 and February 2008 on the threshold level of qualification for entry for the Register for practitioner psychologists.

- A Professional Liaison Group (PLG) was established in the autumn of 2008 to discuss the statutory regulation of psychotherapists and counsellors, including putting together draft standards of proficiency.

- A joint consultation with the Hearing Aid Council on standards of proficiency for hearing aid audiologists was held in 2008, in advance of the anticipated opening of the Register, delayed to March 2010.

3.1.2 Ongoing and periodic review

Ongoing and periodic will ensure that the standards continue to be fit for purpose and that their content is well understood by the Council's stakeholders. Some general principles are established below:

Ongoing review should focus on ensuring that the standards continue to be fit for purpose. 'Ongoing review' is the 'day-to-day' reviewing of the standards by the Council, its Committees and the Executive. This will ensure that the standards do not limit effective ways of working for health professionals and education providers.

A **periodic** review should be more thorough and comprehensive. The purpose of periodic review is to:

- ensure that the standards remain fit for purpose – in making decisions about education programmes and in making fitness to practise decisions, for example;

- ensure that they are well understood by our stakeholders including registrants, patients, education providers and the public; and

- ensure that they take account of change including changes in practice, legislation, technology, guidelines and wider society.

In addition:

- Ideally, no more than one periodic review of the Council's standards should take place in any one financial year. This ensures that any confusion is avoided, allows the Council to more effectively engage with its stakeholders, and allows for the effective use of resources.

- Any periodic review should have a clear workplan. A periodic might involve establishing a Professional Liaison Group (PLG) if the Council and/or a sponsoring Committee considered this to be helpful approach.

- Periodic reviews should take place no more than once every five years. This five year period will normally be from the date of the republication of the standards following the last review.

Whilst the principle is established that a periodic review should normally not take place more than once every five years (subject to the provisions of ongoing review), the exact timing of a review may be subject to change. The timing of any review would be influenced by the Council's priorities in any given year and therefore the budget and resource considerations of the Policy and Standards Department.

- Profession-specific standards of proficiency for operating department practitioners were reviewed in 2007, consulted on between November 2007 and March 2008, and republished in July 2008.

- A Professional Liaison Group (PLG) was established to review the standards of education and training in September 2007 and a consultation held on revised standards and guidance between August and November 2008.

- A consultation was held between November 2007 and March 2008 on making the standards of proficiency for chiropodists and podiatrists which relate to supplementary prescribing and prescription only medicines compulsory. The changes were subsequently agreed and will become effective 1 September 2009.

- A consultation is currently ongoing on a proposed minor change to standard five of the CPD standards. This change was suggested as part of ongoing review.

3.2 Standards guidance and information

Aims / Objectives

- To improve understanding of, and compliance with, the standards amongst registrants.

- To improve understanding of the standards amongst other stakeholders.

The Hampton review concluded that regulators place insufficient focus on providing advice to ensure compliance and recommended that regulators should provide more advice as 'better advice leads to better regulatory outcomes'. [1]

The Council presently publishes guidance on topics in a small number of areas directly related to the standards or on topics building upon the principles expressed in the standards, for example:

- Standards of education and training guidance for education providers
- Managing fitness to practise
- A disabled person's guide to becoming a health professional

A distinction is drawn between publications providing information about the Council's processes and publications which provide specific guidance on standards or standards related issues.

In particular, the Executive has identified the potential need for guidance to the standards of conduct, performance and ethics in a small number of discrete areas.

Formal guidance should be produced if:

- there is good evidence to suggest that guidance would be helpful;

- the topic is not substantially covered in another HPC publication or another authoritative sources;

- the topic is relevant to most professionals who are registered; and

- the topic builds upon the existing standards.

Whilst links to the Council's key fitness to practise functions should be clear, any guidance should be positive in nature by focusing on ways of meeting the standards rather than situations would not meet the standards or the possible consequences of a failure to meet them. Guidance should focus on the importance of health professionals making individual decisions which are informed and reasonable.

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[1] Hampton, Philip (HM Treasury), Reducing administrative burdens: effective inspection and enforcement, March 2005, p.10 and p.15.
http://www.hm-treasury.gov.uk/media/A63/EF/bud05hamptonv1.pdf.

Where a need for guidance might be identified, but such guidance would not be sufficiently substantial to justify separate published guidance, the Executive might consider published information on the HPC website with links to other sources of guidance.

The Council recognises the important role of professional bodies and other organisations in publishing guidance and information to assist registrants in meeting the standards. Any guidance should not seek to replace this role and should provide signposts to other information available where possible.

- Confidentiality guidance was published following consultation in July 2008.

- Consultations are currently ongoing on guidance on the health and character process, and guidance on conduct and ethics for students (building upon the standards of conduct, performance and ethics).

3.3 Standards and ethics queries

Aims / Objectives

- Responses to standards and ethics queries are appropriate and consistent.

We regularly receive letters and e-mails from registrants and employers asking questions about our standards, particularly the standards of conduct, performance and ethics. Most commonly we receive enquiries asking about how to interpret the standards, particularly registrants and employers seeking assurances that their working practices meet our standards. (Queries received from individual registrants on matters related to fitness to practise are answered by the Fitness to Practise Department.)

We are also regularly asked for information on topics with some relevance to the standards such as the drug administration entitlements of those we register.

The Policy and Standards Department will work with the Fitness to Practise Department to ensure consistency and best practice in answering standards and ethics queries. The last workplan suggested that one way in which this could be achieved would be a database to track standards queries. However, the Executive has concluded that, at this stage, the numbers of enquiries are too small to make such a system necessary.

3.4 Involve

Aims / Objectives

- To involve stakeholders in developing standards and guidance.
- To be involved in the development of standards and guidance by other organisations where this is relevant to the Council's aims.
- To be recognised as a source of expertise in producing clear, accessible and appropriate standards and guidance.

The Council will involve its stakeholders in the production of its standards and guidance. For example, the Council invited input from charities and disability groups when it established a PLG to consider issues around health, disability and registration. It also invited input from a member of a patient public involvement forum when reviewing the standards of proficiency.

The involvement of external stakeholders benefits the Council in developing its standards and guidance in a number of ways. The Council benefits from the knowledge and expertise of its stakeholders, often profession-specific and drawn from a wide range of practice areas. Involving our stakeholders in the development of standards and guidance (rather than simply at the consultation stage) also ensures 'buy-in' from stakeholders and improved dissemination of the completed work. It also raises the profile of the organisation.

The Council also involves its stakeholders by consulting whenever it produces guidance or standards. It also provides input into other standards development by others by responding to external consultations where appropriate.

The Council is often involved in the development of standards and guidance by other organisations.

Becoming involved in the development of standards and guidance by other organisations will:

- allow sharing of knowledge, expertise and best practice for mutual benefit;
- provide opportunities for networking; and
- raise our profile.

- Regular participation in cross-regulatory fora which often consider standards related matters.

- The Psychotherapists and counsellors PLG has a representative from an organisation representing the interests of service users. Consideration is currently being given to ways in which the input of service users might be achieved.

- Public consultation and responding to other organisations consultations on standards related matters.

- 'A disabled person's guide' was cited as an example of good practice within current regulatory requirements in the Disability Rights Commission's report 'Maintaining Standards: Promoting Equality'

3.5 Communicate

Aims and Objectives

- To effectively communicate the role and purpose of the Council's guidance to its stakeholders.

The Council should aim to effectively communicate the role and purpose of its standards to a variety of different stakeholders including employers, registrants and education providers.

The Policy and Standards Department will work with the Communications Department to develop effective ways of communicating the purpose and function of the Council's standards and guidance.

This could include:

- using opportunities to promote the Council's standards work at events;

- producing content for the newsletter which explores standards and ethics type issues;

- developing the HPC website; and

- exploring possibilities of standards focused consultation events in the future.

- Press releases for reviews and consultations

- Regular 'HPC In Focus' articles on standards consultations and other related matters.

- Numerous presentations given to stakeholders on topics including the standards of conduct, performance and ethics, CPD standards and returns to practice requirements.

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4. Indicative periodic review timetable

Standard	Date of first publication	Date of first review (financial year)	Date of re-publication	Date of subsequent review (financial year)
Standards of proficiency	2003	2005/06	2007	2012/13
Standards of conduct, performance and ethics	2003	2007/08	2008	2013/14
Standards of education and training	2004	2007/08	2009	2014/15
Standards for continuing professional development**	Effective 2006	TBC	n/a	TBC
Returners to practice requirements	2005	2010/11*	n/a	

*This forms part of the Department's equality and diversity action points
NB: The above timescales are subject to the information in section 3.1 of this document
 .

Projects Workplan 2009/10

Contents

1

Introduction

The aims of the 2009/10 projects' workplan are to:

- o Timetable projects appropriate to the resource availability within the organisation.
- o Conduct a Lessons Learned analysis to determine potential improvements in project management and how HPC conducts its projects.

Project Planning

The driving forces behind the projects for this year are:

- o To implement the statutory projects required by government and Council.
- o To implement initiatives to improve processes and technology solutions that will enable the organisation to cope with rising numbers of registrants, applicants and Fitness to Practise cases.

Lessons Learned

Following the review of the Project Management processes last year, it was identified that a general Lessons Learned analysis would be useful to current project teams in order to improve working practices.

The project management process will have been in place for 3 years in June and therefore there is a fair body of work which can now be drawn upon to identify key learning points.

This analysis should also allow the management teams to assess any trends, to ensure that we are learning from each project and to ensure that common mistakes are not being replicated over time.

This document

This document provides a summary of the projects that will be undertaken this year. The dates indicated are provisional, driven by resource constraints (both internal and external), legislative deadlines and business need.

The timelines of those projects with a technology aspect have been estimated based on initial requirements and therefore may be subject to change once further analysis has been completed.

Should further legislation or business priorities require changes to the timetable or for additional projects to be added, the project planning process will be followed and the portfolio and / or project timeline altered accordingly.

It is intended that the list of projects be reviewed mid-year to validate the portfolio.

Resources

All budgeted expenditure is noted in the table below and projects will be run using existing human resources within the organisation.

Equality and Diversity Assessment

During project initiation each of the projects will be assessed to establish the equality and diversity impact.
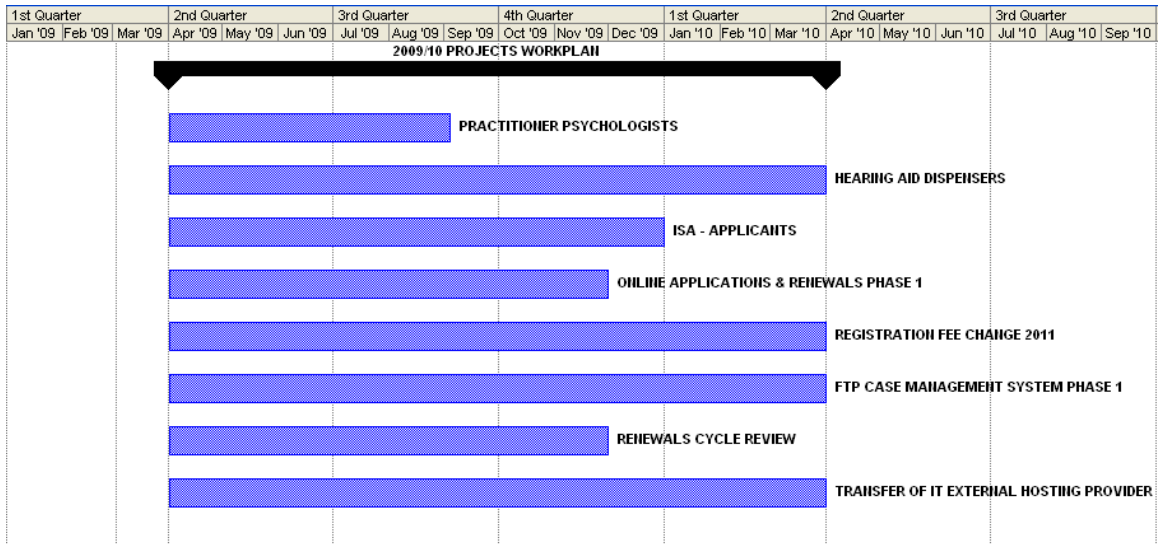
Annex 1 Project timeline

No.	Project name	Summary	Owning Dept	Departments impacted	Timeline	Capital Expen-diture	Oper-ational Expen-diture	Risk ref.
MP3	Opening of the register for Practitioner Psychologists	Registration of the Practitioner Psychologists	Oper-ations	Reg, FTP, Comms, Part, IT, Apps & Mon, Sec, Policy	1st Apr 09 to 3rd Sept 09 Dates dependent on legislation	£100,000	£143,760	8.2 8.7
MP4	Opening of the register for Hearing Aid Dispensers	Registration of Hearing Aid dispensers	Oper-ations	Reg, FTP, Coms, Part, IT, Apps & Mon, Sec, Policy	1st Apr 09 to 31st Mar 10	£55,000	£27,310	
MP31	Independent Safeguarding Authority (Phase 1 – applicants)	Operational and technology changes to comply with the requirements of the Independent Safeguarding Authority protecting children and vulnerable adults	FTP	Reg, FTP, Policy, IT	1st Apr 09 to 31st Dec 09	£15,000	£28,225	8.8
MP34	Online Applications and Renewals – Phase 1 renewals	Operational and technology changes to allow registrants to renew online	Regis-trations	Reg, IT	1st Apr 09 to 30th Nov 09	£300,480	£127,552	8.6

No.	Project name	Summary	Owning Dept	Departments impacted	Timeline	Capital Expenditure	Operational Expenditure	Risk ref.
MP35	Registrations Fees change 2011	Implementation of updated fees	Finance	Reg, Fin, IT, Sec, Policy, Comms	1st Apr 09 to 31st Mar 10	Nil	£8,000	
MP36	FTP case management system – Phase 1	Analysis of the technology solutions available that would allow the FTP department to work from a single case management system	FTP	FTP, IT	1st Apr 09 to 31st Mar 10	£134,000	£11,400	
MP37	Renewals cycle review	Operational review of current renewal cycle dates to assess if there would be a benefit in changing the dates to remove the peaks and troughs in the renewal cycle	Registrations	Reg, IT, Comms	1st Apr 09 to 30th Nov 09	£11,750	Nil	
MP38	Transfer of IT external hosting provider	Transfer of the HPC IT Continuity and Web services to an alternate supplier	IT	IT, Business Continuity Co-ordinator, Comms	1st Apr 09 to 31st Mar 10	£15,000	£73,950	

Abbreviations:

Reg – Registrations, Fin – Finance, Comms – Communications, FTP – Fitness to Practise, Apps & Mon – Approvals & Monitoring, Sec - Secretariat

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Annex 2 Project Gannt Chart

1st Quarter			2nd Quarter			3rd Quarter			4th Quarter			1st Quarter			2nd Quarter			3rd Quarter		
Jan '09	Feb '09	Mar '09	Apr '09	May '09	Jun '09	Jul '09	Aug '09	Sep '09	Oct '09	Nov '09	Dec '09	Jan '10	Feb '10	Mar '10	Apr '10	May '10	Jun '10	Jul '10	Aug '10	Sep '10

2009/10 PROJECTS WORKPLAN

PRACTITIONER PSYCHOLOGISTS

HEARING AID DISPENSERS

ISA - APPLICANTS

ONLINE APPLICATIONS & RENEWALS PHASE 1

REGISTRATION FEE CHANGE 2011

FTP CASE MANAGEMENT SYSTEM PHASE 1

RENEWALS CYCLE REVIEW

TRANSFER OF IT EXTERNAL HOSTING PROVIDER

Annex 3 Risk Register Extract

Ref #	Description	Risk owner	Impact before mitigations February 2009	Likelihood before mitigations February 2009	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2009		RISK score after Mitigation September 2008
8.2	Failure to regulate a new profession or a post-registration qualification as stipulated by legislation	Director of Operations Project Manager Head of Registrations, Director of Policy & Standards	5	1	5	Project progress monitored by EMT	Apply HPC's project management methodology	Maintain regular informal contact with Privy Council staff throughout all stages of the project	Low		Low
	Links to 1.1, 15.3										
8.6	Online Renewals Project	Director of Operations, Project Manager	4	4	16	Engagement of experts in usability, scalability and security	Project progress monitored by EMT	Apply HPC's project management methodology	Low		Low
8.7	Practitioner Psychologists on-boarding	Director of Operations, Project Manager	5	3	15	Project progress monitored by EMT	Apply HPC's project management methodology		Low		Low
8.8	Bichard Project	Director of Fitness to Practise, Project Manager	5	2	10	Project progress monitored by EMT	Apply HPC's project management methodology		Low		Low

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Registration Department

2009 – 2010 Work Plan

Richard Houghton

March 2009

Registration Department Work Plan 2009 - 2010

Contents

Introduction

Providing a high level of customer service is crucial to the long term success of the Health Professions Council (HPC) and demonstrates our commitment to all of our stakeholders - registrants, members of the public, our employees, our suppliers and the elected members of our Council. As the standard of customer service increases in other service sectors such as financial services, telecommunications, local government, retail and leisure so does the service quality expectations of their customers. Similarly, HPC's 'customers' will continue to have higher expectations of their own customer service experience which includes having a wider range of service delivery options, with customers wanting more choice of how they interact with us.   We will increase their expectations by increasing the registration fees in 2009. Coupled with this increased expectation of service delivery is an increase in registrant number growth.   Registrant numbers have increased at an average rate of 5% per year over the last five years and with the regulation of new professions such as practitioner psychologists the demand for these services will increase.

It is clear that we need to continue to develop our customer service delivery strategy that is based on the present and future needs and expectations of stakeholders. It is also important to maintain the positive, pride of workmanship, feeling of community, enjoyable and fun working environment that exists at HPC as customer satisfaction generally moves in the same direction as employee satisfaction.

The 2009 - 2010 registration work plan builds on our previous achievements. Employing the best people in a good working environment and supporting them with ongoing training, reliable equipment and up-to-date systems. Recognising individuals and teams by promoting from within wherever possible and encouraging everyone to enjoy rewarding careers and provide job satisfaction. The relocation of the registration area has brought new challenges but also new benefits. The continued investment in technology to reflect business rules and processes will speed up processing, improve job satisfaction and offer our customers more service delivery channels.

It is important to remember that it is the continuation of a journey in registration.

The Registration Department

The Registration Department sits within the Operations Directorate of the HPC.

The Registration Department's main responsibilities are:

- processing application forms from individuals who have undertaken an approved course in the UK;
- processing applications for readmission to the Register;
- processing registrants registration renewal forms;
- processing international/EEA application forms;
- processing grandparenting application forms;

- processing incoming general correspondence including letters, requests for de-registration, change of addresses;
- co-ordinating continuing professional development (CPD) profile assessment days;
- Replying to emails and
- Answering incoming telephone calls with call types relating to the above mentioned processes.

This document

This document aims to set out the work priorities for the financial year April 2009 – March 2010, and provide a basis against which the work of the Registration Department can be planned and measured.

This work plan attempts to show how the standard operational work and the planned projects have been scheduled to ensure successful completion, given the resources and time restraints. The Registration Department is both proactive and reactive in its work so the requirements may change, particularly in light of business needs. **The department will therefore need to be flexible in the delivery of its work plan in order to respond accordingly. This document will be kept under review.**

Priorities 2009 – 2010

The main priority for the department is the day-to-day operation of the registration processes. For this year, this includes the preparation and expected transfer of the practitioner psychologists onto our Register. Another significant amount of work this year will be the management of the CPD audit process for the remaining professions who will be audited for the first time. The department will also be involved in a number of projects at both an operational level and a more strategic level.

Resources

This work plan is based on a budget of £2,048,387 which allows for a team of 37 registration employees which represents no increase in the year on year headcount. The registrant statistics included in the 'Finance and Resources Committee paper - Projected registrant numbers', dated 17 November 2008, have been utilised to determine the Registration Department resource requirements for 2009 - 2010.

The 37 Registration Department employees consist of: one Head of Registration, three Customer Service Managers, three Team Leaders and 30 Registration Advisors.

Recruiting and retaining employees, in order to work effectively and proactively, continues to be a big challenge for the department and is likely to remain a risk for this financial year.

In April 2008, the department reorganised its structure with two service teams now primarily providing front line customer service for the UK, international, CPD and potential grandparenting processes and a support team primarily dealing with the renewals and application entry processes. The relocation of the department to one floor in the Stannery Street building in April 2008 has also enabled the cross training of registration advisors to answer the increased number of telephone calls received throughout the last 12 months. During the forthcoming 12 to 18 months all registration advisors will also be involved with handling the new CPD processing for the remaining 11 professions and potential practitioner psychologist grandparenting applications.

Risk management

The Registration Department manages those organisation risks that are primarily concerned with:

- customer service failures;
- inability to detect fraudulent applications;
- backlog of registration applications;
- mistakes in the registration process leading to liability for compensation to the registrant or applicant;
- CPD processes not effective.

Activities outlined in this work plan also help mitigate organisation risks managed by other departments. As part of the HPC equality and diversity scheme the Registration Department will also continue to scrutinise and screen our processes and work to make sure that we identify and, where possible, mitigate any adverse impact to some groups, compared to others.

Please see Appendices four and five for more details and links between the HPC's risk register and this work plan.

Registration Department main operational activities

There are 11 main processes which generate the majority of the department's workload and the volumes for each process vary throughout the year with significant peaks and troughs in demand for any individual process. Appendices two and three illustrate this change in demand for the UK application and renewals processes. The department continues to ensure it delivers the best possible service to registrants, applicants and the public by cross training all registration advisors to deliver all registration processes efficiently and effectively within our service standards. The 11 main operational processes are detailed in Appendix one together with the current service standards which will be reviewed as part of this work plan.

Supporting activities

There are five activities which support the main Registration Department processes. Whilst these activities provide a solid and desirable foundation onto which to operate our main processes, at certain times of the year some of them do not take priority and some activities, may, if resources are stretched need to be revisited in their totality. The following paragraphs summarise these activities.

1) Partner assessor recruitment, selection and training
In 2009 – 2010, the department will work with the Partners Department to ensure registration assessor numbers are maintained and appropriate for the planned operational processes. This will include the selection, recruitment and training of new registration assessors to fill identified gaps. A significant piece of this work will involve the recruitment of 61 CPD registration assessors for the 11 professions that are due to be audited over the next 12 to 18 months. This recruitment process will also result in a considerable amount of assessor training for new partners or partners new to the CPD registration assessor role.

There will also be refresher training for the existing 166 registration assessors in 2009 – 2010. This will include training on the Health Professions Order and operational processes. We will also assist the Partners Department with introducing a registration assessor performance appraisal system.

2) Information systems (database and electronic records)
In 2009 – 2010, the department will work with the IT Department to both enhance and revise the NetRegulate registration system. In 2009 – 2010 it is expected that an upgraded financial system will come into operation. The department will work with the Finance Department to ensure a smooth transition and also take the opportunity to review their administrative and financial processes to assist efficient ordering and payment of registration assessors, employees and suppliers.

3) Liaison with stakeholders
In 2009 – 2010, the department will continue to work with stakeholders (e.g. general public, professional bodies, and registrants) in the broad area of registration. The department will endeavour to support the Communications Department with representation at conferences, listening events and various presentations which also provides valuable experience for registration employees and the department as a whole.

4) Committee and Council work
In 2009 – 2010, the department will continue to work with the Finance and Resources Committee, the Education and Training Committee and Council. We will ensure that they are kept up-to-date with operational performance and approval for appropriate changes to existing processes and the introduction of new processes is gained in a timely, robust and cost effective manner.

5) Publications

The department is responsible for producing a number of publications, including the registration certificate, and the UK, international, grandparenting application forms and guidance notes. These documents are updated and reviewed regularly. In 2009 – 2010 the department will also work with the Communications Department to publish the first CPD annual report following the completed audit of the first two professions, chiropodists / podiatrists and operating department practitioners.

The table in Appendix four details the Registration Department's core activities together with details of which item on the Risk Register they mitigate.

Achieving the Registration Department objectives 2009 – 2010

We have identified a number of objectives that will require action and completion in 2009 – 2010.

Registration Objective – Improve quality of service
Customer service is an important aspect of any organisation as it can support the health and growth of that business. The Registration Department will continue to build upon the foundations already in place and improve the service we deliver by ensuring that we:

1) conduct, deliver and review the quality checks programme providing registration advisors with individual feedback in regular 1 to 1 meetings;
2) conduct, deliver and review the call monitoring process to deliver individual feedback to registration advisors;
3) develop and publish revised Registration Department service standards;
4) working with the Communications Department to introduce a means to measure the customer service experience externally.

Registration Objective – Effective capacity planning
To ensure that we effectively plan the use of our resources we will:

1) continue to develop our capacity planning process to accurately forecast workload;
2) identify a back office planning specialist training provider and arrange for Registration Department representation on a training course;
3) identify small contact centre specialist training provider and arrange for Registration Department representation on a training course;
4) benchmark our planning process with similar size service centres.

Registration Objective – External recognition
This is an opportunity for the Registration Department to demonstrate our service capability and obtain external recognition by:

1) submitting an application for the Queen's Award for Enterprise: Innovation;
2) celebrating National Customer Service Week.

Registration Objective – Employee development
Our employee development policy needs to aim to ensure that we place the right people in the right role and we invest in their recruitment, training and development by:

1) arranging for all Customer Services Managers and Team Leaders to gain a professional customer service management qualification;
2) arranging for all registration employees to gain an accredited customer service qualification;
3) designing and delivering long term training plan;
4) continuing to review the registration advisor training manual and explore the possibility of introducing a full learning management system which will enable the Registration Department to develop and deliver its training online;

5) continuing to cross train all registration advisors.

Registration Objective - Manage projects within agreed timescales
The environment within which HPC operates is not static, but is instead changing as a result of many factors which include changes to legislation, to professions and to best practice. The following part of this document details the projects that will be resourced over the coming financial year towards meeting this aim:

1) **Practitioner psychologists** - Project dealing with the regulation of the practitioner psychologists.

2) **Hearing Aid Council** – Project dealing with the transfer of hearing aid dispensers to the HPC Register.

3) **Online renewals** – Develop and introduce an online system to provide registrants with the ability to renew their registration with the HPC via the web.

4) **Improve identity checks** – Review of the application process to identify improvements that will reduce the risk of exposure to identity theft.

5) **Registration fee change 2009 and 2011** – Realignment of registration fee charges.

6) **Independent Safeguarding Authority** – Project to design and implement processes to ensure the HPC complies with the Safeguarding of Vulnerable Groups Act.

7) **Renewals cycle review -** This project can be split into two distinct pieces of work with phase one of the renewals cycle review project involving an operational review of the current renewal cycle dates to assess whether there would be a benefit to the business if these dates were changed to remove the peaks and troughs in the renewal cycle. This initial investigation work will enable the executive to make a decision as to whether or not to progress to phase two of the project in the financial year 2010 - 11, which would involve the implementation of a revised renewal cycle.

The table in Appendix five sets out the Registration Department's day to day activities in the delivery of the registration objectives.

Priorities 2010 – 2011

2010 – 2011 will be a year in which we continue to undertake our established activities and improve our processes and service delivery. Taking on new professions that are anticipated up to 2012 such as dance movement therapists, counsellors and psychotherapists and healthcare scientists will have a significant impact on the workload of the Registration Department.

The department will implement phase two of the renewals cycle review project subject to the findings of phase one which would involve rescheduling registration renewal dates so that the number of renewals is spread evenly over the two year renewal cycle. Depending upon the success of the online renewals implementation in 2009, project work will begin in designing an online applications process providing new applicants with the ability to apply for registration with the HPC via the web. The Registration Department will also explore the possibility of introducing an online solution to support the CPD audit process.

Registration Department activities in 2008 - 2009

It would be useful to review the activities contained in the work plan which was submitted one year ago as part of the background which has formed the basis of this new work plan. Five objectives were set and the progress of each is detailed below:

Registration Objective – Manage business as usual activities within agreed service standards
This objective was partially met with service standards met or exceeded for the majority of the year. However, these were not entirely met during a period when the department received exceptionally high volumes of telephone calls as a result of disruption in the postal service and also when the department relocated to the Stannery Street premises. During the year the department did process more applications to the Register and answered more telephone calls than forecast.

Registration Objective – Improve quality of service
This objective was met. A quality checks programme is now in operation with regular call monitoring undertaken and feedback given to registration advisors. All registration employees now have their own individual skill set when logging onto the telephone system so that telephone calls are answered by the most appropriately trained member of the team.

Registration Objective – Improve capacity planning
This objective was met. The department now has a forecasting model which has resulted in the majority of the work being processed on the same day of receipt since the beginning of November 2008.

Registration Objective – Employee development
This objective was met. Customer Services Managers and Team Leaders attended a professional contact centre management course and it is planned that all new senior members of the team will attend a similar course within the next 12 months. All registration employees have had the opportunity to gain an accredited customer service qualification and all new registration employees will be given this opportunity. There is a long term training plan in place to ensure that we continue to cross train all registration employees. There is a detailed training manual in operation which is constantly reviewed and updated.

Registration Objective – Manage projects within agreed timescales
The progress the department made against each of the planned projects in 2008 – 2009 is detailed below:

1) **Practitioner psychologists** – The department has completed all assigned objectives in the project plan on time but delays in the legislation have delayed this project.

2) **Hearing Aid Council** – The department has completed all assigned objectives in the project plan on time but delays in the legislation have delayed this project.
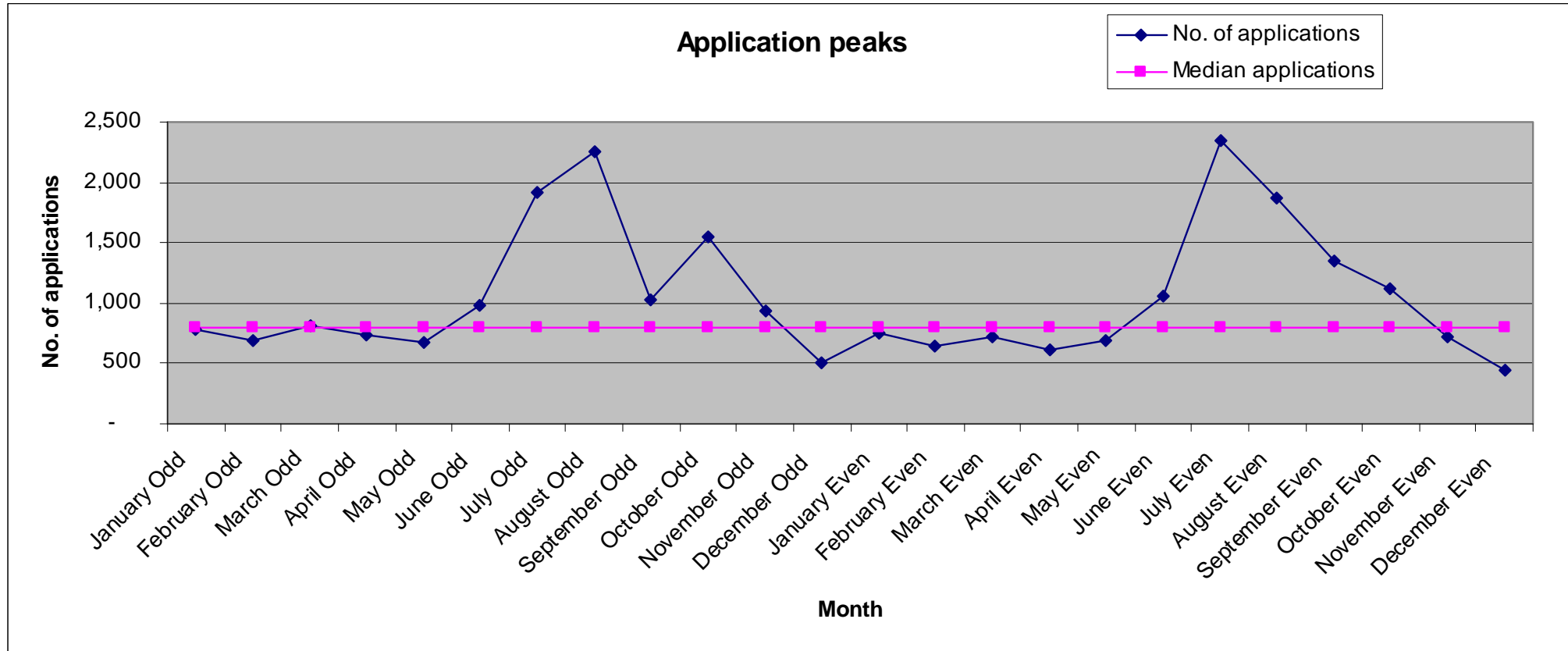
3) **Equality and Diversity Demographic Data Collection** – This project was completed four months ahead of schedule.

4) **Online renewals** – The department has completed all assigned objectives in the project plan on time but the complexity of this project has resulted in the completion date being extended to November 2009.

5) **CPD** – This project was delivered on time and a PKF CPD process implementation review achieved a sound assurance level.

6) **Improve identity checks** – The UK, international and grandparenting forms are currently being amended to allow the HPC to carry out identity checks and a third party provider has been identified who can perform checks to verify an applicant's identity, professional qualifications and employment history. The department has also purchased a database which contains examples of identity documents from over 180 counties worldwide.

7) **Registration fee change 2009** – The department has completed all assigned objectives in the project plan on time.

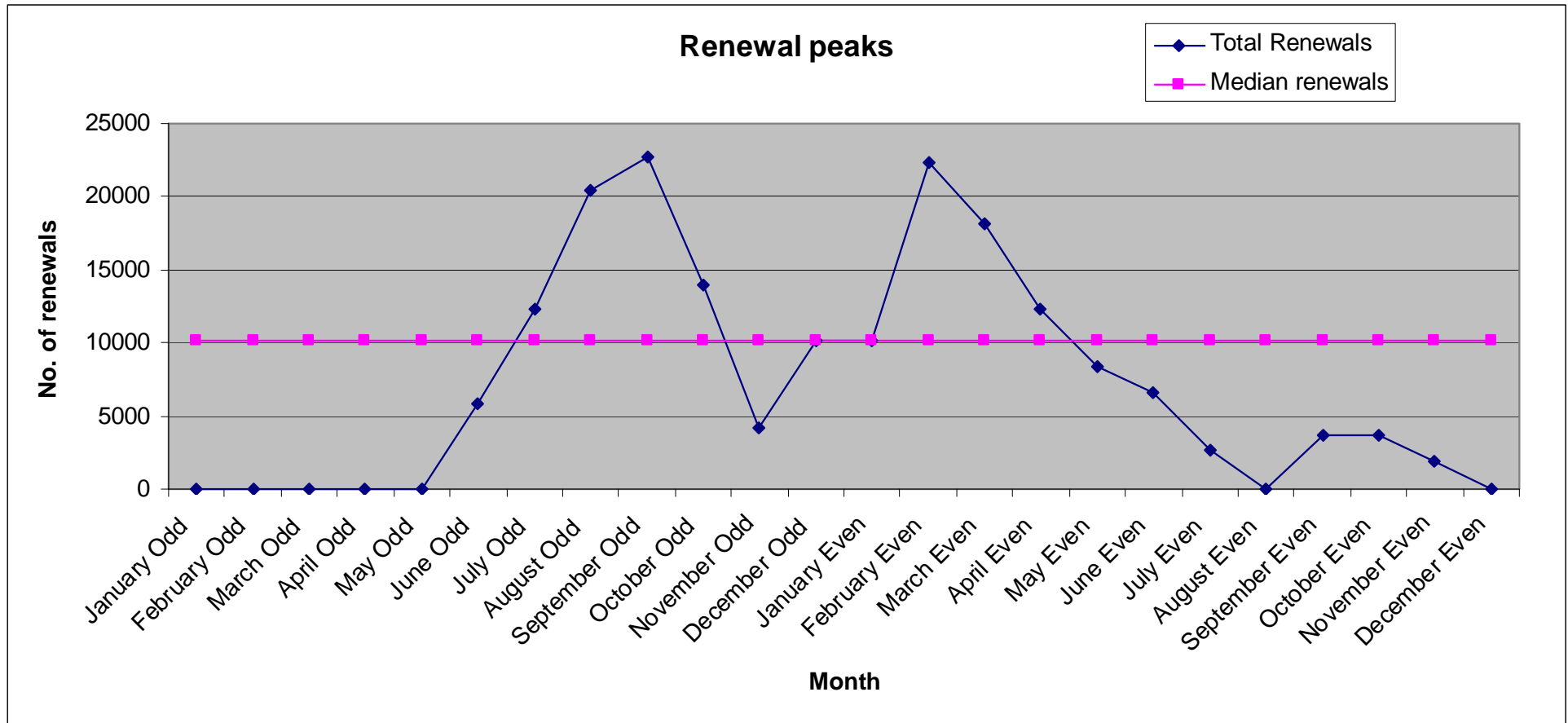8) **Independent Safeguarding Authority** – Delays in the legislation have delayed this project.

Appendix one – Registration Department processes and service standards

Process	Service Standards 2008 - 2009 to be reviewed 2009 - 2010
UK applications	Ten working days processing
Readmissions	Ten working days processing
International/EEA applications	Processed within three months of receipt of all documents
Grandparenting applications	Processed within three months of receipt of all documents
Continuing Professional Development (CPD) audits for the following professions in 2009/2010: • orthoptists; • paramedics; • clinical scientists; • prosthetists / orthotists; • speech and language therapists; • occupational therapists; • biomedical scientists; • radiographers; • physiotherapists; • arts therapists.	Processed within three months of receipt of all documents
Renewals batch letters sent on time for the following professions in 2009/2010: • orthoptists; • paramedics; • clinical scientists; • prosthetists / orthotists; • speech and language therapists; • occupational therapists; • biomedical scientists; • radiographers; • physiotherapists; • arts therapists.	Renewal notice sent not less then three months before publicly published renewal dates. Final renewal notice sent not less then one month before publicly published renewal dates
Renewal cycle batch processing	Complete renewal (lapsing) process run within five days of publicly published dates
Written complaints	18 days response
Emails	Five days response
Telephone call answering	80% of calls answered within 30 seconds
Process equality and diversity data for new applicants to the Register	Ten working days processing

Appendix two – UK application volumes

Appendix three – Renewal volumes

Renewal peaks

Legend: Total Renewals, Median renewals

Y-axis: No. of renewals (0, 5000, 10000, 15000, 20000, 25000)

X-axis (Month): January Odd, February Odd, March Odd, April Odd, May Odd, June Odd, July Odd, August Odd, September Odd, October Odd, November Odd, December Odd, January Even, February Even, March Even, April Even, May Even, June Even, July Even, August Even, September Even, October Even, November Even, December Even

Appendix four Registration Department activities table 2009 – 2010

The table below sets out the Registration Department's core activities.

Activity	Mitigate risk register item	Start date	Completion date	Lead
Manage the Registration Department's main operational processes within service standards	2.3	1 April 2009	Ongoing	RH, CH, NC
Partner assessor recruitment, selection and training	6.1,13.7	1 April 2009	Ongoing	RH, CH
Information systems enhancements and revisions	10.2	1 April 2009	Ongoing	RH, CH, NC
Liaison with stakeholders	3.2	1 April 2009	Ongoing	RH, CH, NC
Committee and Council work	4.1	1 April 2009	Ongoing	RH
Improve Registration Department publications	10.5	1 April 2009	Ongoing	CH, NC

Key

RH - Richard Houghton
CH - Claire Harkin
NC – Neil Cohen

Appendix five Registration Department objectives table 2009 – 2010

The table below sets out the Registration Department's objectives.

Objective	Activity	Mitigate risk register item	Start date	Completion date	Lead
Improve quality of service	1) Conduct, deliver and review the quality checks programme providing registration advisors with individual feedback in regular 1 to 1 meetings.	10.5	1 April 2009	Ongoing	CH, NC
	2) Conduct, deliver and review the call monitoring process to deliver individual feedback to registration advisors.	10.5	1 April 2009	Ongoing	CH, NC
	3) Develop and publish revised Registration Department service standards.	10.1	1 June 2009	30 September 2009	RH
	4) Working with the Communications Department to introduce a means to measure the customer service experience externally.	10.1	1 April 2009	31 December 2009	RH

Objective	Activity	Mitigate risk register item	Start date	Completion date	Lead
Effective capacity planning	1) Continue to develop our capacity planning process to accurately forecast workload.	10.1, 10.4	1 April 2009	Ongoing	NC
	2) Identify a back office planning specialist training provider and arrange for Registration Department representation on a training course.	10.1, 10.4	1 April 2009	30 September 2009	RH
	3) Identify small contact centre specialist training provider and arrange for Registration Department representation on a training course.	10.1, 10.4	1 April 2009	30 September 2009	RH
	4) Benchmark our planning process with similar size service centres.	10.1	1 September 2009	Ongoing	NC
External recognition	1) Submitting an application for the Queen's Award for Enterprise: Innovation.	10.1, 11.2	1 July 2009	31 October 2009	CH
	2) Celebrating National Customer Service Week.	10.1,11.2	1 July 2009	31 October 2009	CH, NC

Objective	Activity	Mitigate risk register item	Start date	Completion date	Lead
Employee development	1) Arranging for all Customer Services Managers and Team Leaders to gain a professional customer service management qualification.	11.4	1 April 2009	Ongoing	RH
	2) Arranging for all registration employees to gain a customer service qualification.	11.4	1 April 2009	Ongoing	CH, NC
	3) Designing and delivering long term training plan.	11.4	1 April 2009	Ongoing	CH,NC
	4) Continuing to review the registration advisor training manual and explore the possibility of introducing a full learning management system to enable the Registration Department to develop and deliver its training online.	11.4	1 April 2009	Ongoing	CH,NC
	5) Continuing to cross train all registration employees.	11.4	1 April 2009	Ongoing	CH, NC

Objective	Activity	Mitigate Risk Register item	Start date	Completion date	Lead
Manage projects within agreed timescales	1) Practitioner psychologists. 2) Hearing Aid Council. 3) Online renewals. 4) Improve identity checks. 5) Registration fee change. 6) Independent safeguarding authority. 7) Renewals cycle review.	8.7 8.2 8.6 10.3 8.1 8.8 10.1, 10.4	1 April 2009 1 April 2009 1 April 2009 1 April 2009 1 April 2009 1 April 2009 1 April 2009	3 September 2009 31 March 2010 1 November 2009 31 March 2010 31 March 2010 31 December 2009 30 November 2009	RH,CH RH,CH RH,CH, RH,NC RH,CH, RH,NC RH,CH, NC

Key

RH - Richard Houghton
CH - Claire Harkin
NC – Neil Cohen

Contents

Introduction

The Health Professions Council (HPC) Secretariat was established in January 2004.

Its role is to support the Council, committees and profession liaison groups of the HPC so that they are carry out their governance role effectively. The Secretariat works closely with the Chair, Chairmen and members of Council and with members of the Executive in providing this support.

The Secretariat also leads on matters relating to the Freedom of Information and the Data Protection Acts.

Main Areas of Responsibility

The Secretariat main areas of responsibility are:

(i)   Provision of support, and implementation of best practice in relation to support, of Council and Committees;

(ii)   Implementation of governance processes and procedures which have been agreed by Council;

(iii)   Work with Council and Committees in review and updating of standing orders and related documents;

(iv)   Organisation of induction and on-going training of members as agreed with the Chair and members;

(v)   Provision of information for members in the form of a members' information pack and members' extranet;

(vi)   Design of members' self-assessment system for agreement by Council, organisation of members performance reviews and implementation of required follow-up;

(vii) Work with the Appointments Commission in the management of the recruitment process of the Chair, the Council members and the non-council Committee members;

(viii) Organisation of annual meeting and Council away day;

(ix)   Preparation of timetable for, and drafting content of, annual report;

(x)   Drafting policies and procedures in relation to the Freedom of Information Act and Data Protection Act.

This document

This document: This document sets out the Secretariat workplan for the year 2009-2010.   With the Section 60 legislation due to be laid in Parliament imminently, much of the work of the Secretariat will be focussed on implementing the revised governance arrangements arising from the new legislation.

Resources

The Secretariat consists of four employees as follows;

Colin Bendall	Secretary to Committees
Louise Hart	Secretary to Council
Steve Rayner	Secretary to Committees
Natasha Williams	Team Administrator

Secretary to Committees

The support of Committees is divided between two committee secretaries. The distribution of some of the other activities undertaken by the Secretariat, i.e. organisation of members' induction and training, performance review etc, between the two posts recognises the fact that the workload in support of some committees is higher than that for others. Once the Section 60 legislation has been passed, there is likely to be changes to the current Committee structure. As a result, workloads of the two Secretaries to Committees will be reviewed over course of the year, with changes to responsibilities as necessary.

Secretary to Council

The Secretary to Council is responsible for the management of the department. The Secretary provides support to the Council. A major part of this work involves drafting governance policies and processes for agreement by Council.

Team Administrator

The team administrator provides administrative support for the department and organises the Council away day and annual meeting. The team administrator also works with the finance department in the administration of members' claims.

Secretariat Activities 2009 – 2010

Review of Governance Policies i.e. Standing Orders, Terms of Reference, Scheme of Delegation.

The new Section 60 legislation will introduce revisions to the Rules for both the Education and Training Committee and the Fitness to Practise Committees. As a result, it will be necessary to review all of HPC's governance policies such as the Standing Orders, the Terms of Reference for each of the Committees and the Scheme of Delegation to ensure that they are in line with the new legislation and continue to be fit for purpose.

In reviewing these documents, the Secretariat will take the opportunity to bring them all together to produce a "Code of Corporate Governance." The Code of Corporate Governance will incorporate a series of regulatory documents and protocols which govern how HPC operate, take decisions and the procedures followed to ensure that our actions are fair, efficient, transparent and accountable to our stakeholders.

The timescale for completion of this objective is July 2009 and ongoing.

Support for Council and Committees
With the appointment of the restructured Council scheduled for July 2009, the provision of secretariat support for Council and its Committees will continue to be the main focus of the Secretariat's activities. Currently the Secretariat supports the Council, four statutory committees, three non-statutory committees, the meetings of the Professional Liaison Groups and the Chairs' Liaison Group, although the number of Committees is likely to change with the passing of the Section 60 Order.

The Secretariat will continue to work closely with the Chair, Committee Chairs and members of the Executive in planning meetings, preparation of agendas and the provision of advice and support at meetings and the preparation of a programme of action points.

The Secretariat is currently working on the organisation of the annual Council away day which has been scheduled to be held in Belfast on 6-8 October.

The timescale for completion of this objective is ongoing.

This activity links to risks 1.1, 4.1 and 4.3 of the risk register.

Structure of the Fitness to Practise Committees
In line with changes being made to the governing legislation of the other regulators, the Section 60 Order will remove any policy or oversight function from the Fitness to Practise Committees. Going forward, their role will be limited to hearing individual fitness to practise cases.

The change is an interim step towards fully separating the adjudication and policy functions and enabling the regulators to merge or abolish committees. As a result, the Secretariat will give consideration to the establishment of a separate, non-statutory, Fitness to Practise Committee to advise the Council on matters related to FTP policy and will make recommendations to Council accordingly.

The timescale for completion of this objective is - March 2009.

This activity links to risks 4.12 of the risk register.

Members' training
In preparation for the appointment of the restructured Council, the Secretariat will undertake a review of the current induction and, in doing this, will seek feedback from current members and from members of the Executive. Arising from the review, the Secretariat will then develop a comprehensive induction plan for the restructured council. This will include a two day training session in July comprising a briefing from all members of the Executive, a strategic session presented by the Chair and a presentation on the Council's

responsibilities and the importance of corporate governance and effective decision-making from the HPC solicitor and Parliamentary agent.

The Secretariat will continue to work with the Audit Committee in organising an annual training session for the Committee and also in sourcing other training in line with the Committee's needs.

Following analysis of the members' self-assessment reviews further training will be offered to individual members as required.

This activity links to risks 4.3, 4.5 and 4.6 of the risk register.

The timescale for completion of this objective is ongoing.

Provision of information for members

A members' information pack was first produced in February 2004. Since that date, it has been updated on an annual basis and the content has expanded considerably year on year.   Members were issued with updates for the pack in March of this 2007.

The information provided to members will require reviewing and updating in light of the new legislation and the new structure of Council. It is therefore proposed to produce an information pack for members made up of three constituent parts; the first will include the code of corporate governance referred to earlier in the work plan, the second will be "transactional" information such as how members should make claims, the travel policy, the issues surrounding allowances and tax etc. The third element will comprise organisational-wide and strategic documents such as the latest version of the Strategic Intent, the Risk Register, the Fitness to Practise Annual report, the departmental work plans etc. This information will continue to be made available through the members' extranet.

This activity links to risk 4.1 and 4.5 of the risk register.

Members' extranet

The Secretariat established a members' extranet which is currently accessible to all Council and non-Council Committee members and some members of the Executive. All updated Council policies are available on the extranet. There is also a news section and an information board. The extranet is used consistently by a number of Council members.   Over the coming year the Secretariat will continue to update the information posted on the extranet and ensure that the content is expanded in line with users' needs.

The timescale for completion of this objective is ongoing.

This activity links to risks 4.5 of the risk register.

Members' Self-Assessment System

The members' self-assessment system was reviewed by Council at its October 2007 away day and it was agreed that it met the needs of all members.

Over the coming year, the Secretariat will continue to work with the Chair in timetabling the telephone and face-to-face interviews. Once completed, the Secretariat will work with the Chair in analysing the information gathered to ascertain patterns or trends in terms of training needs and identify the relevant training courses.

The timescale for completion of this objective is – July 2009.

This activity links to risks 4.5 and 4.6 of the risk register.

Recruitment of Council and non-council committee members

The Secretary to Council will continue to act as the main point of contact and liaison with the Appointments Commission in the recruitment process, and, once the Council Members have been appointed, identify the HPC's requirements in terms of non-council committee members. Once identified, the Secretary to Council will work with the Appointments Commission in the preparation of the role description, information pack and terms and conditions of appointment for the non-council committee members.

The timescale for completion of this objective is – September 2009.

This activity links to risks 4.10 of the risk register.

Review of Committee documentation Presentation

Over the course of the year, the Secretary to Council will give consideration to the presentation of Committee and Council papers with a view to decreasing costs, making more efficient use of the department's time and ensuring that the papers submitted to Council and Committee are well presented and clear to assist in the decision-making process. Once a new system is devised, feedback will be sought prior to extending the new presentation to all Committee and Council papers.

The timescale for completion of this objective is – April 2009.

This activity links to risks 4.1 and 4.3 of the risk register.

Review of the Travel Scheme
Currently, members of Council are responsible for booking their travel for HPC related journeys. This is done mainly using Co-op, HPC's travel agent, and occasionally directly with the transport provider. The Secretary to Council will over the next few months and, with the help of the Chair, review the current travel scheme in order to ensure that HPC are achieving value for money.

The timescale for completion of this objective is – July 2009.

This activity links to risks 15.2 of the risk register.

External communications

Regulators' Governance Group
In 2006, the then Secretary to Council took the lead in working with other regulators in setting up a governance group to compare processes and discuss issues of common interest. Meetings are held 3 times a year and there are currently 15 members.   A group emailing system has also been established and members meet on an individual basis from time-to-time.

The Secretary to Council will continue over the coming year to play an active role in this group, sharing information and best practise where possible.

The timescale for completion of this objective is – ongoing.

External facing activities

Annual report and accounts
As part of its ongoing activities the Secretariat co-ordinates the planning process for the preparation of the annual report and prepares the content of the committee section of the report. The Secretariat will continue to work with other departments within the HPC, most notably the Communications Department in the preparation of the 2009 annual report.

The timescale for completion of this objective is – ongoing.

Annual meeting
Over the last two years, an annual meeting has been held in September to provide stakeholders with an opportunity to ask a panel (comprising Committee Chairmen) about the HPC's annual report.

The Secretariat will give consideration together with the Communications Department about the arrangements for the 2009 meeting.

The timescale for completion of this objective is - September 2009.

Privy Council – relationship management

Recently, the Secretary to Council has become responsible for the management of the HPC's relationship with the Privy Council Office and also the management of processes associated with changes to the Health Professions Order 2001, the Rules and other related legislation.

Over the coming year the Secretary to Council will continue to act as a point of contact between the HPC Solicitor and Parliamentary Agent regarding the new legislation and rules required following the passing of the section 60 Order. The Secretary to Council will also work with the project manager in ensuring that the timetable for legislation is reflected in the project plans.

The timescale for completion of this objective is ongoing.

This activity links to risk 14.4 of the risk register.

Internal communications

Teams meetings

Members of the Secretariat team have been discussing how we can understand and balance the needs of all our users both in terms of Council members and members of the Executive and also ensure that all users understand the function of the Secretariat and the services it provides. Over the coming year, members of the Secretariat will attend team meetings of HPC departments to provide briefings on the work of the Secretariat together with information on the restructured council and the revised Committee structure.

The timescale for completion of this objective is December 2009.

Forward agenda plan

In order to support effective and informed decision-making, the Secretariat is currently working on an agenda plan for Council and committee meetings for distribution to the executive to assist in work planning

The timescale for completion of this objective is December 2009.

Document retention, freedom of information and data protection

The Secretariat has established a searchable electronic storage facility for the retention of Council and Committee papers whereby all Council and Committee papers are uploaded onto the system. The Secretariat is working with the Information Technology Department to enable access for those staff that require the facility.

The Secretary to Council will carry out a review of the existing Freedom of Information and Data Protection processes to ensure full compliance,

streamlined processes and the role of the Secretariat in overseeing this statutory requirement to respond to requests.

In addition, the Secretary to Council will build on the work undertaken on policies relating to information storage, retention and processing to ensure that these are in line with best practice. This will also involve giving consideration to the recommendations made by the Information consultants on the HPC's information management strategy.

The timescale for completion of this objective is ongoing.

Team development

The Secretariat is a small department which provides a wide range of services to Council and Committee members and the executive. Team members undertake relevant training in order to maintain and improve the quality and the range of services provided. As part of the annual performance and development review system a programme of development which is tailored to the specific requirements of each team members' role is agreed.

The timescale for completion of this objective is ongoing.

This activity links to risk 11.4 of the risk register.

Equality and diversity impact assessment statement

Council and committee meetings

The Secretariat will ensure that meetings held at Park House and elsewhere are accessible to those with disabilities.

Council recruitment

The Secretariat will work with the Appointments Commission to ensure that candidates from a diverse range of backgrounds are targeted in the recruitment exercise for new members.

Members' training

All current members have received equality and diversity training. An ongoing training programme will be established for new members.

Provision of Council and committee papers

The Secretariat will work with the Communications Department to develop the format of Council papers to ensure that these are accessible to all.

Appendix 1: Achieving Secretariat Objectives in 2009 - 2010

Objective	Activity	Risk Register Item	Completion Date
Facilitate the governance role of Council and Committees	• Review of Governance Policies; • Provision of support for Council, Committees, Chairmen's Liaison Group and PLGs; and • Review of Committee structure.	1.1, 4.1, 4.3	July 2009 and ongoing
Members' Development & Training	• Provision of induction and Training for restructured Council; • Updating members' information pack; • Ensure extranet remains up to date and fit for purpose; and • Ongoing implementation of members' competency based self-assessment system and analysis of information.	4.1, 4.3, 4.5, 4.6, 4.10	July 2009 and ongoing
Ensure an effective recruitment process for Council and non-council Members	• Liaison with Appointments Commission; and • Preparation of role description, information pack and terms and conditions of appointment.	4.10	September 2009

Review of Committee documentation	• Review presentation of Council and Committee papers; and • Review agenda format.	4.1, 4.3	April 2009
Review of the Travel Scheme	• Undertake comprehensive review of the current travels scheme to ensure HPC is achieving Value for Money.	15.2	July 2009
Sharing of governance information among regulators	Organisation of email contact and meetings of governance leads from regulators,	4.1	Ongoing
Relationship with Privy Council	Management of amendments to legislation	14.4	Ongoing
Ensure that HPC's FOI and Data Protection policies are in line with best practice	Review of HPC's policies relating to FOI and Data Protection		Ongoing
Team Development	Ensure team undertake training as appropriate	14.4	April 2010

Appendix 2: Risk Register Extract