Health Professions Council — 20 May 2010

Departmental Work Plans

Executive summary and recommendations

Introduction
The HPC's departmental work plans for 2010 – 2011 have been separately circulated.

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

Background information
None

Resource implications
The resource implications have been incorporated into the individual work plans.

Financial implications
The financial implications have been incorporated into the individual work plans.

Appendices
Individual work plans

Date of paper
10 May 2010

BUSINESS PROCESS IMPROVEMENT Work plan 2010-11

Roy Dunn – Head of Business Process Improvement

Operations Directorate

Introduction

Business Process Improvement maintains develops and promotes the Quality Management System, Information Security, Risk Analysis 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. Business Process Improvement reports to the Audit and Finance & Resources Committee.

This document

This document has been drafted to set out work priorities for the financial year April 2010 – March 2011, 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)

All are trained to carry out internal ISO 9001 audits. As we have operational responsibilities, it is essential that we do not audit our own work.

If ISO27001 and BS25999 are adopted, we will need to ensure this practice continues, to maintain validity of the management control systems.

Tasks and Projects completed in 2009-10

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The ISO9001:2000 standard to which we have been certified has been replaced by an updated standard ISO9001:2008 published in December 2008. Changes to HPC's QMS were made in late 2008-9 early 2009-10 BSI will audited us against the updated standard in April 2009. Our certification was upgraded to the new standard, and our certification is retained.

Business Process Improvement average an internal audit every month over 2009-10. through a combination of Departmental audits, risk based audits and across company audits.

The HPC wide all company training in May 2009 was around the ISO9001 themes of "Continual Improvement" and "Stick to the Process".

The day commenced with apparent disorganisation and little control, and gradually progressed to more detailed direction and information provision. The final output is illustrated below.

A teaser campaign was run prior to the launch of the new intranet, in November, highlighting where the new routes to the QMS would be found.

2) Improvement to Quality Management System software [Risks 2.3, 9.1, Unacceptable service standards, maintenance of ISO registration]
The Quality Management System was created using Microsoft Front Page. The software is no longer sufficient for purpose. An upgrade project for the HPC intranet occurring around the same time allowed the updated Lotus Notes infrastructure to be used as a new platform for the Quality Management System. Additional coding to ensure the existing QMS, and future ISO27001 and BS25999 aspects are appropriately controlled will be required. It is proposed that the Notes developer engaged to update the intranet creates the appropriate customisation for the strict document control in the new QMS.

The planned costs for the package were released back to the Finance department in November 2009.

This project combined the Intranet, Springfield and Quality Management Systems into one navigable whole, by January 2010.

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]

The creation of an ISO27001 Information Security Management System (ISMS) and BS25999 Business Continuity Management system (BCMS)

combined with our existing Quality Management System were postponed due to workload pressures in the IT department. It is proposed to restart this project next financial year.

BPI have produced a major, detailed response to the Poynter Review. **"Response to the Poynter Review and Cross Government Actions: Mandatory Minimum Measures",** and delivered this to the Audit Committee in December 2009

This includes a recommendation to adopt ISO27001 and BS25999 at HPC as best practice. Various additional building and archive security measures were also suggested.

PCI-DSS

Monitoring HPC's compliance against the credit card industry standards has continued over the year. Various new information security processes and hardware were put in place to increase security around credit/debit card details. The hard copy archive has been audited back to 2003 to locate any possible credit / debit card details in the cartons. This unprecedented audit equated to approximately 14% of the archive content. This was completed by end November 2009

4) Update and increase licensing for Geographical mapping system software GEOPLAN
HPC have purchased 2 licences for the mapping system Geoplan updating that 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.

The software was purchased and installed, and continues to be used for reporting purposes..

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 high volume of custom reports have been created around CPD, Online register emulation, various snapshot checks of registration data before and after the running of NetRegulate batch processes.

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.

*This small project was ultimately postponed for a year to constrain costs.

6) Disaster Recovery / Business Continuity – ongoing development, testing and training [Risks 2.1, 2.5, Business Continuity]

HPC have used 3 days of testing at ICM in the 2009-10 financial year. Members of the Registrations and Finance teams were taken to Uxbridge and given a presentation on Disaster Recovery, plus took part in quiz to check understanding.

A full representative group of EMT & CDT were tested over the final day, with full restoration of HPC IT services at the back up data centre in the Bristol area, with access from Uxbridge.

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 was updated and CRM is suggested as a potential requirement from the Poynter Review into information and data security. This is a major structural change to the IT systems used throughout HPC, and the recommendation is to proceed in small steps linking small systems and moving gradually to a few common database structures in the organization.

8) Queen's Award for Enterprise

Documentation around obtaining the Queen's Award for Enterprise were 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 ICR project from 2005 and improvements in the Registrations department have been used in our first application .

We will not hear if we have been successful in our first attempt until May 2010

Additional items
Business Process Improvement have also been involved in the CPD Audit analysis with University of Readings Statistical Services Centre.

2010-11 Activities planned

1) ISO9001:2008   Maintenance and raising the profile of Quality
 [Risks 2.3, 9.1 Quality Management]
Business Process Improvement aim to undertake an average of one internal audit every month over 2010-11. This will be a combination of Departmental audits, risk based audits and across company audits. We will of course take into account the variable workloads in other departments and be as flexible as our time constraints allow.

Two external audits by BSI are due to take place in the financial year. This includes the Strategic Review, with input from Upper Management.

We will continue to improve the documentation design, making the organisation more user friendly and consistent.

Testing that the documentation control is consistent will be an important ongoing requirement as more people have the ability to update the various management systems.

2) Creation of management system and preparation for adoption - ISO27001 (Information Security) standard + ongoing 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.

Consultancy services will be required to carry out the work on our behalf and integrate Information Security to our existing Management System.

Costs to achieve the standard together are in the order of £12,000.

BPI will provide management and guidance on Information Security matters to all parts of HPC, to increase our security.

In the subsequent year (2011-12) HPC may attempt certification against ISO27001 and BS25999 if the combined Management Systems have been running for a minimum 8 months.

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

3) Information Security Awareness Employee and contractor training.
[Risks 2.1, 5.3, 15.7, 17.1, 17.2, 17.3, 17.4; Data Security]

Information Security requires ongoing validated training for all employees and contractors, induction training and specialised training for those involved in implementation or auditing of the standards.

These training requirements will be delivered through a combination of external training and in house developed content.

Initial discussions with a web based supplier of information security training content and testing (**Security Awareness**) is around £7,000 in the first year. Ongoing hosting of this service would be £1000 per year, with the ability to create new employees to be trained within the system.

Other internal information security training for ad-hoc and All staff meeting use will be produced.

4) Creation of required documentation for ISO27001
[Risks 2.1, 5.3, 15.7, 17.1, 17.2, 17.3, 17.4; Data Security]

The following documentation must be created and signed off by "the business".

Records of key management decisions
Information security policy set, including ISMS policy
ISMS scope
Information security procedures
Controls documentation
Risk assessment methods
Risk assessment reports
Risk treatment plan
ISMS operating procedures
Information security metrics
Statement of Applicability
Document control procedure (reused from QMS ISO 9001?)
Records control procedure
Security awareness, training and education records, including test results
Internal ISMS audit plans and procedures
Management review plans and reports
Corrective action procedure
Preventive action procedure

5) Business Continuity Exercise 2010
[Risks 2.1, 2.5]

HPC will carry out it annual Disaster Recovery / Business continuity test in May, 19-21st inclusive with a predefined scenario. The three day test slot will culminate in a live test of international DDI phone redirection and remote update of the live NetRegulate database in Park House from Uxbridge.

Additional services will be tested, on top of those tested in the past.

The scenario is around lack of building access, with IT services and power still operational.

With the Registrations department we will attempt to divert some DDI based telephone services to the ICM suite to be taken by Registration Advisors, updating the live NetRegulate database at Park House.

Early in the financial year we will evaluate existing provision of seats in Uxbridge to determine if this is the most cost effective use of our back up resources. More detail will be provided in the briefing document during the test.

6) 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 high volume of custom reports are regularly created, responding to business need.

 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

This item was postponed in 2009-10 to free up financial resources.
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.

7) Archive Audit and start of document restoration
[Risks 17.2, 17.4; Data Security]

a) Following the move of HPC's paper archive to the mine in Cheshire, a detailed audit will take place following operation for approximately 6 months. This will require the Information Services Manager to stay in Cheshire for 4 nights.

The output will be a check on the categorisation by departmental owner of the new archive, and a check on internal controls around our documentation.

b) Some of HPC's historic documentation, inherited from the CPSM is in need or restoration and preservation. This will be an ongoing process over time. There are also a number of registration documents that were contaminated in a flood in the 1980's. These require specialised cleaning or secure destruction

Cost estimates in 2007 were in order of £30,000. It is intended to tackle a small amount of the documents each year to avoid a major costly exercise. An initial tranche of documents costing around £10,000 would be tackled in the financial year.

8) HPC wide labelling project

HPC currently use a range of bespoke labelling systems within Registrations, HR, and FTP departments. More cost effective solutions may be available, removing the requirement for software and custom labelling solutions.

This will be evaluated with the IT department.

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. The information security standard mandates regular auditor training.

To successfully run ISO27001 and BS25999 we will need to train two internal auditors, at least one on each standard. A Lead Auditor is required for each standard.

The costs of appropriate training over the next **two** years are potentially as follows;
- Lead Auditor ISO27001 (five days) £2200 = Hd of BPI?
- Internal Auditor ISO27001 (two days) £1200 = 1 internal auditor
- Introduction to ISO27001 (one day) £500 = Director of Operations
- Implementer ISO27001 (three days) £1850 = Director of Operations or Hd of BPI + IT?
- Lead Auditor BS25999 (five days) £2200 Hd of BPI?
- Internal Auditor BS25999 (two days) £1200 1 internal Auditor
- Information Risk Management (five days) £2150 Hd of BPI?

The exact timing and sequence of training depends on the timing of the core Information Security Management System development.

Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Sept 2009	Likelihood before mitigations Sept 2009	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Sept 2009
2.1	Inability to occupy premises or use interior equipment	Facilities Manager	4	2	8	Invoke Disaster Recovery/Business Continuity plan	Commercial combined insurance cover (fire, contents, terrorism etc)	-	Low
2.3	Unacceptable service standards	Director of Operations	5	4	20	ISO 9001 Registration, process maps, well documented procedures & BSI audits	Hire temporary staff to clear service backlogs	Market research surveys to prioritise service offerings	Low
2.5	Public transport disruption leading to inability to use Park House	Facilities Manager & Hd Bus Proc	4	5	20	Contact staff via Disaster Recovery Plan process	Make arrangements for staff to work at home if possible	-	Low
5.3	IT fraud or error	Director of IT	3	3	9	Adequate access control procedures maintained. System audit trails.	Regular, enforced strong password changes.	Regular externally run security tests.	Low
9.1	Loss of ISO 9001:2008 Certification	Director of Operations, Head of Business Improvement	4	3	12	Regular & internal audits	QMS standards applied across HPC	Management buy - in	Low
15.7	Registrant Credit Card record	Finance Director	3	1	3	Daily credit card payment reconciliation's in	Tight procedures to retrieve sensitive paper records from	Compliance with credit card record storage standards.	Low

	Risk	Owner				Controls			Rating
	fraud/theft					Finance dept - Streamline to Netregulate and bank statements.	archive, rationalise records kept and retain sensitive current year records with security tagging.		
17.1	Electronic data is removed inappropriately by an employee	Director of IT	5	3	**15**	Employment contract includes Data Protection and Confidentiality Agreement	Adequate access control procedures maintained. System audit trails.	Laptop encryption. Remote access to our infrastructure using a VPN . Documented file encryption procedure	Low
	Links to 5.3								
17.2	Paper record Data Security	Head of Business Improvement	5	3	**15**	Use of locked document destruction bins in each dept. 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 Data Protection Agreement	Low
	Links to 15.7								
17.3	Loss of electronic data held by third party suppliers in the delivery of their services	Director of IT	5	3	**15**	Data Protection/Controller agreements signed by the relevant suppliers. Use of electronic firewalls by suppliers.	Data transfer using file level encryption. Physical transfer of back up tapes using specialist company with locked boxes and sign out procedure.	Remote access to our infrastructure using a VPN. Access to third party infrastructure using agreed secure methods.	Low
17.4	Data received from third parties	Director of Ops, and Director of FTP	5	2	10	Read only, password protected access by a restricted no of FTP employees to electronic KN data.	Registrant payments taken in compliance with Payment Card Industry (PCI) Security standards ie with quarterly PCI testing.	Ensure third party data providers e.g. professional bodies provide the data password protected/encrypted/door to door courier/registered mail/sign in sign out as appropriate.	Low

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Communications Workplan 2010 – 2011

Contents

Introduction

The communication workplan for 2010 - 2011 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 is divided into several sections. It details the communications department, 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 ten employees as follows:

Jacqueline Ladds	Director of Communications
Daniel Knight	Team Administrator
Susan Carini	Events Manager
Ebony Gayle	Press and PR Manager
Tony Glazier	Web Manager
Jonathan Jones	Publications Manager
Mark Potter	CPD Communications Manager
Vacant	Public Affairs Manager
Amy Morgan	Communications Officer
Lauren Gray	Communications Officer (temp contract to end March 2010)

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.

Priorities and issues for 2010 – 2011

The priorities for 2010 – 2011 build on those of the previous financial year and respond to the HPC's opinion polling and market research undertaken in previous years.

Registrants
Key messages to communicate to registrants this financial year continue to include the ongoing need to communicate the CPD standards and audit requirements as well as the benefits of regulation. Informing registrants about our relationship with the professional bodies as well as ensuring registrants know about our public information campaigns and activities will be important. It is evident from 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.

Areas of the workplan which address these issues include our continued talks and presentations across the UK, the content of Listening Events (which will continue to be more specifically refined to address the areas registrants identify as particularly useful), media work with the professional journals, our presence at profession-specific conferences and exhibitions and stakeholder work with employers and professional bodies.

Key stakeholders
Feedback from opinion polling has been generally positive, with good feedback from key stakeholders about the organisation generally. 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 informing key stakeholders of our public protection role 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 has been 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 addresses these areas through the campaigns and stakeholder work. In particular, the stakeholder work outlined for the coming year with professional bodies, employers and others will be an important way of responding to the feedback obtained.

Members of the public
There continues to be a need 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 has 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 and increasing our presence on the internet.

Issues and priorities conclusion
Our focus for the 2010 – 2011 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 also continue to focus on our communications with registrants, in particular promoting the benefits of registration and explaining the requirements of the CPD audits.

Achieving the communication objectives in 2010 - 2011

The Communications Strategy identifies five overall objectives in our communications work.

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 inform key stakeholders of our public protection role through ongoing dialogue and engagement

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.

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	Manage the publications process for all publications, liaising with departments and advising on the content of publications. Possible publications this year include: Annual monitoring supplementary information (Q1) Paramedic report (Q1) Education annual report (Q3) Education process (Q4) FtP annual report (Q2) Review of complaints literature (tbc) Review of standards of proficiency (Q4) Reprint of health/character guidance (Q4) Organise reprints of existing publications ensuring sufficient stock at all times	Present a positive image of the HPC and promote understanding of its role Increased transparency and accountability and improved profile with stakeholders Improved understanding of HPC requirements	Throughout the year and dependant on requirements of other departments See publications schedule for more detail	Publications Manager / Team Administrator
1.2	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 and maintain stock levels	Improved understanding of HPC requirements Increased accessibility for different audiences	Throughout the year and dependant on requests received	Publications Manager / Team Administrator
1.3	Develop the website and its content by working with departments to support their requirements and identify opportunities for development	Work with departments to develop content and pages of website. Specific activities this year will be determined by departmental and organisational requirements Refresh design and content of hpcheck to bring it in line with the HPC's visual identity	Increased understanding of the HPC	Throughout the year dependant on departmental requirements Q3 and Q4	Web Manager

	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 as well as online media channels	Continued implementation of the department's media strategy through: working with departments, identifying news stories, writing articles and issuing releases contact programme with journalists as required, ensuring relevant HPC staff fully media trained and continued development of media infrastructure (eg media lists, coverage reports) development and implementation of joint media campaign with professional body to raise awareness of protected title	Coverage reflects better understanding of issues by journalists and supports our public protection role Improved public understanding of the titles we protect	Throughout the year Throughout the year Q1 research Q2 roll out	Press and PR Manager / Communications Officer / Administrator
1.6	Continue to communicate relevant information about extending regulation to new professions including psychotherapists and counsellors, healthcare scientists, assistants and other groups where relevant	Work closely with Policy to support the work undertaken. Activities will vary depending on profession but may include attendance at relevant meetings, media monitoring, talks and presentations, research, information or attendance at relevant conferences, event support, information on our website, articles in professional journals.	Increased level of understanding of HPC regulation with aspirant groups/new professions	Throughout the year	Director / all
1.7	Continue to promote the Fitness to Practise hearings	Issue weekly media alerts, write and issue releases for suspension and strike off, respond to journalist queries and liaise with journalists at hearings, focus coverage in local and regional media	Increased level of coverage in regional media and increased promotion of public protection role	Throughout the year	Press and PR Manager / Communications Officer

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	Ensure the continued dissemination of public information literature	x 2 GP and pharmacy waiting room distribution x 1 PALS and Wales Community Health Council distribution x 1 Citizen Advice Bureau Research and determine viability of distribution to other networks including charities and advocacy organisations 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	Q1 – April Q3 - Oct Q1 Throughout the year	Press and PR Manager / Communications Officer
2.3	Promote "registered with the HPC" concept to registrants and the public and ensure continued access and usage	Promote to registrants through existing channels, eg HPC In Focus, A5 renewals leaflet, Listening Events and press release to professional journals. Issue press release to consumer media	Engaging with registrants and working with them to promote public awareness	Q1 onwards	Press and PR Manager / Communications Officer
2.4	Continue online presence through existing channels, eg Google and develop new channels (eg Facebook)	Maintain Google adwords Research websites and online information portals where we should have a presence and ensure information about the HPC is available on these sites	Continued reinforcement of public protection role	Quarterly Q1 research Q2 reporting/ implementation	Press and PR Manager / Communications Officer
2.5	Ensure GPs and referrers are informed about the HPC	Develop appropriate programme of communications based on 2009 research eg direct mail, referrers guide, conferences and events	Improved understanding of HPC's role	From Q2	Press and PR Manager / Communications Officer
2.6	Ensure information for complainants is relevant and accessible	Work with the FtP department to undertake activities including, review of brochures, development of website and hearings dvd	Improved understanding of HPC's role, provision of support to complainants		Director / all
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	Quarterly meetings	Press and PR Manager
2.7	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	Q2	CPD Communications Manager

Objective 3: to inform key stakeholders of our public protection role through ongoing dialogue and engagement, we will:

	Main activity	Description	Key deliverables	Timescale	Employees involved
3.1	Develop HPC's profile in the four nations and Europe devising channels of communication which ensure stakeholders are informed and fully aware of our work and role in healthcare regulation	Jointly work with Policy and ensure development across all stakeholder audiences, including parliamentarians, employers, professional bodies and various health departments	Improved understanding of the HPC's role in healthcare regulation		CPD Communications Manager / Communications Officer
		Continue to research contacts and ideas and develop and maintain database of contacts		Q2	
		Undertake at least 2 visits to each country for meetings with stakeholders and conference attendance		Dates (tbc)	
		Monitor European Parliament and stakeholder activities and disseminate information as relevant, organise at least one trip for stakeholder meetings and/or conferences as required.		Dates (tbc)	
3.2	Continue to keep parliamentarians informed and aware of our work and role in healthcare regulation	Organise fringe membership of the Health Hotel and ensure participation in Health Hotel activities at all three main political party conferences	Raised awareness and improved signposting of our role in the future of regulation and public protection	Q1 and Q3	Director / Events Manager / Communications Officer
		Undertake meeting programme and written briefings as required		As required	
		Attendance and exhibitions at four nation political party conferences (eg DUP, SNP and Welsh Labour)		Throughout the year	
		Continued parliamentary monitoring, dissemination of information as required		Throughout year	
		Continue e-politix and editorial/advertorial opportunities as required		As required	

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	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	Undertake five UK-wide employer Events Communication in the form of letters/emails on key areas of importance eg registration renewal/cpd audits and speaker slots Attendance at relevant exhibitions and conferences eg NHS Employers 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	Q4 – Feb / March As required Throughout the year As required	CPD Communications Manager / Events Manager / Communications Officer
3.4	Continue to keep professional bodies informed and engaged with the HPC across all activities and on specific issues	Attend CEO/Chair's programme of annual meetings on renewals, cpd, communication and key issues as required Ensure meetings as part of registration renewal work (see 4.6) Attendance and speaking engagements at conferences and exhibitions, written briefings, access to HPC In Focus	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	Throughout the year Throughout the year Throughout the year	CPD Communications Manager
3.5	Begin to raise awareness with employers of the importance of protected titles and employing HPC-registered practitioner psychologists	Identify/research issues and devise programme of communications work which highlights role of HPC, use of protected title and importance of employing HPC-registered practitioner psychologists	Promote the HPC's key messages to employers, improved understanding of HPC's regulatory role	Q2 and Q3 for research Q4 for roll out	CPD Communications Manager / Press and PR Manager / Communications Officer
3.6	Research relevant activities to promote grandparenting for practitioner psychologists	Begin to research potential communications campaign for roll out Q1 2011/12	Improved understanding of the grandparenting process and its implications for employers and professionals	Q3 and Q4	Press and PR Manager / CPD Communications Manager / Communications Officer
3.7	Ensure clear and relevant communications to stakeholders on our revalidation work	Work with Policy, write communications plan, focus on Phases 1 and 2. External facing activities may include web, stakeholder liaison, events support and articles in HPC In Focus. Internal communications will include all employee meetings, intranet and Update	Improved understanding (internally and externally) of the project work we are undertaking on revalidation	Q1 and then throughout the year dependant on Policy projects	Director / all

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	Ensure presence at approximately 25 professional facing conferences and exhibitions ensuring relevant representation from HPC Research new conferences to attend and maintain calendar of events	Communication of messages Opportunity to listen to feedback and raise HPC profile and present positive image	Throughout the year Reference events schedule for more detail	Events Manager / Communications Officer / representatives from other departments
4.2	Organise Listening Events across the country for registrants	Ensure UK-wide presence – at least 16 meetings in 8 locations. Work includes sourcing locations, booking venues, booking/ briefing panel, issuing invitations, updating presentation and producing evaluation reports	Opportunity to listen to feedback Improved understanding of the HPC's role and activities	Q1 – May Q2 – July Q3 – October Q4 - February	Events Manager / Communications Officer
4.3	Continue to communicate HPC's work and activities in the professional press	With departments identify articles and news stories for professional press including professional body journals, newsletters and website. Issues to include CPD audits, ftp, council appointments, registration renewals and key projects/activities	Improved understanding of what we require of registrants and increased level of coverage	Throughout the year	Press and PR Manager / Communications Officer
4.4	Communicate with registrants through HPC In Focus, developing its content and circulation	Continue to work with departments on content and identify opportunities to increase distribution through for example adverts in professional journals, A5 flyer with certificates, sign up sheets at talks. Manage email distribution lists ensuring they are up to date and accurate	Better informed registrants	Q1 – April/June Q2 – August Q3 – October / December Q4 – February	Publications Manager / Team Administrator
4.6	Provide appropriate and relevant communications to support the registration renewals and the CPD audit processes	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. Promotion of online presentations, attendance at HPC events, talks and presentations as required.	Communication of registration renewal requirements, support lower lapse rates Communication of CPD standards and guidance to registrant s and employers	Throughout the year as professions renew	CPD Communications Manager / Press and PR Manager / Communications Officer
4.7	Provide appropriate and relevant communications for the Safeguarding Vulnerable Adults project	Ensure participation in project group. Write and implement communications plan focusing on registrants, employers and employees	Improved understanding of the Independent Safeguarding Authority requirements and HPC's responsibilities	Throughout the year	Director / 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	Q1 – April / June Q2 - September Q3 - November Q4 – January / March	Events Manager / Team Administrator
5.2	Maintain the intranet ensuring it is up to date, business led and accessible	Liaise with departments to ensure content is up to date, proactively add news stories and items. Undertake key work to ensure the intranet remains relevant and accessible, for example development of work database	Provide information which enables employees to deal efficiently and effectively with enquiries	Throughout the year	Web Manager / Team Administrator
5.3	Organise all employee events	Set dates, book venues Agree format, issues invitations Evaluate	Improved internal communications and team building	Q2 - July Q3 - December	Events Manager / 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	Events Manager / Communications Officer
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	Q1 – April / June Q2 - September Q3 - November Q4 – January / March	Publications Manager / Communications Officer
5.6	Produce electronic issues brief	Develop based on findings of evaluation, gather information from departments and monitoring for inclusion in the brief	Improved understanding of external stakeholder activities and issues influencing the regulatory and health agenda	Weekly	CPD Communications Manager / Communications Officer
5.7	Ensure employees are informed of key organisational and departmental activities	Use full range of internal communications tools to communicate key activities including information security, work on extending regulation, Council, ISA, registration renewals, CSR	Improved understanding of cross departmental and organisational activities	Throughout the year	Director / Team Administrator

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

2011 - 2012

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/seldom heard 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.

- Extending regulation to new professions will continue 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 to the success of opening the Register to 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 four nations 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.

Risk

The key risks for HPC which relate to the Communications Department are failure to inform the 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.

Key stakeholder work
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 - 2010 – 2011 work plan

Osama Ammar, Acting Director of Education

Contents

Introduction

The Education Department work plan details the main areas of work for 2010-2011 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 (2009-10 to 2014-15) identifies the organisation's vision for the future and those areas that form the Council's strategic priorities. The 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 the 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 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, initiate major project, 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 Education Update.
4) To build the evidence base of regulation
Example references in this work plan – education seminars, annual report and review processes.
5) To proactively influence the policy agenda on regulation reforms
Example references in this work plan – post registration qualifications, review of SET 1, modernising scientific careers and new professions.
6) To ensure that our values and processes dovetail with the respective healthcare delivery agendas in England, Wales, Scotland and Northern Ireland.
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 professionals must complete before they can register with us;
- assisting the Council in monitoring programmes which 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 programmes;
- co-ordinating the consideration of complaints about approved programmes;
- 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 2010 – March 2011, 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, supporting activities and 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 the full implications related to the regulation of practitioner psychologists and hearing aid dispensers are still unknown 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 2010-2011

In 2010-2011, the Department intend to balance their immediate commitment of implementing the main operational processes alongside a longer term commitment to enhancing and extending professional regulation.

The main priority for the Department is the day-to-day operation of the approval and monitoring processes. Continuing on from the last year, the majority of this year's work will focus on the consequences of regulating two new professions, namely practitioner psychologists and hearing aid

dispensers' and their incorporation into our approval and monitoring processes. The work will include communication and relationship building as well as engagement with our approval and monitoring processes. The impact of these two new professions will also span into future years. Peak activities will be felt in the 2010-2011 and 2011-2012 academic years, which equates to the 2010-2011 (current), 2011-2012 and 2012-2013 financial years.

Over the last two years we have seen our priorities and resources increasing in the area of communication and relationship management. This year, we intend to consolidate our work in this area around two main topics (i) the area of student conduct and ethics and (ii) the review of SET 1 (level of qualification for entry to the Register). The new guidance on conduct and ethics for students has stimulated debate in this area and will be seen as the starting bloc for engaging and advising education providers and students around this topic. Whilst the review of SET 1 (level of qualification for entry to the Register) will involve a public consultation, it is envisaged that a number of supporting events are necessary to initiate debate and capture feedback on this sensitive and often misinterpreted topic.

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 two specific areas of collaborative working between the two Departments, namely the review of SET 1 (level of qualification for entry to the Register) and post-registration qualifications. Whilst it is also envisaged that there will be ongoing involvement in the discussions around new professions (namely psychotherapists and counsellors, dance movement therapists, acupuncturists, medical herbalists and traditional Chinese medicine practitioners and health care scientists)**,** it is unlikely that significant advances will be made due to the political and legislature landscape. Others areas of partnership working between the Education and Policy and Standards Departments will include the review of the new professions process, the review of the generic standards of proficiency, the review of the health requirements, discussions around the extension of prescribing rights and revalidation.

This year, the Department anticipate that its project work will focus primarily in the area of one major project. (Review of education systems and processes). This major project involves a pro-active systematic review of all our systems and processes to ensure they remain fit for purpose and efficient as we grow as a regulator. The Department will also participate in another major project (Partner systems review) as an operational departmental representative. Due to the resource intensity related to the major project, there will be a small number of business-as-usual (BAU) projects this year compared to previous years. BAU projects are traditionally enhancement led projects that focus on the operational processes.

Please see appendices one and two for more details related to the planning and delivery of all aspects of this work plan.

Resources

Financial resources

This work plan is based on the assumption of a team of 13 Education Department employees and an overall budget of approximately £875,000. The work plan assumes that the HPC is able to manage a maximum of 18 approval visits per month and monitoring relating to approximately 600 approved programmes at any one time. There is an underlying assumption that the HPC approves pre-registration programmes in fifteen professions and post-registration entitlement programmes in three areas, with the hearing aid dispensers' part of the register opening on 1 April 2010. The work plan also assumes a major project that runs from April 2010 to March 2011 and includes 234 internal resourcing hours (equivalent to 4.5 days per week).

The overall budget of approximately £875,000 is spilt into two separate budgets, namely the Department budget (£735,000) and the major project budget (£141,000). The Department budget of £735,000 is based on an estimated 53 approval visits, 6 annual monitoring assessment days and 71 major changes submissions. These predicted figures are based partly on the operational levels in the 2009-2010 financial year and partly on the requirements related to the approved programmes which were recently added to our register of approved programmes for practitioner psychologists and hearing aid dispensers'.

In the last two financial years, a pattern of less approval visits and more monitoring work has emerged as the majority of our approved programmes have taken advantage of our open ended system of approval. However, in the 2010-2011 financial year we anticipate an increase in the number of approval visits due to the requirements placed on practitioner psychologists and hearing aid dispensers' approved programmes by the Education and Training Committee. Our register of approved programmes increased by approximately 100 in the last year, as 70+ practitioner psychologists' programmes and 10+ hearing aid dispensers' programmes were added. 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.

In effect, the on boarding of a new profession will always result in a peak of approval visits in the immediate financial years following the opening of the Register. The overall monitoring workload will not increase until these approval visits have been concluded, so the affect of new professions on our monitoring workload will always be delayed following the opening of the Register by a few financial years.

It should be noted that both our risk based approach to approval and monitoring continues to make it difficult to generally 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 thirteen permanent employees in the Education Department:

Abigail Gorringe	Director of Education	
Marva Kamaludin	Team Administrator	
Liz Craig	Team PA/Administrator	
Osama Ammar	Education Manager (NNIW team)	
Tracey Samuel-Smith	Education Manager (SES team)	
Paula Lescott	Education Officer	(NNWI team)
Brendon Edmonds	Education Officer	(NNWI team)
Lewis Roberts	Education Officer	(NNWI team)
Mandy Hargood	Education Officer	(SES team)
Ruth Wood	Education Officer	(SES team)
Benjamin Potter	Education Officer	(SES team)
John Archibald	Education Administrator	(NNWI team)
Natalie Fraser	Education Administrator	(SES team)

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

The Education Officers and Education Administrators report to the Education Manager of their team. The Education Managers, Team PA/Administrator and Team Administrator report to the Director of Education. The Director of Education reports to the CEO.

The permanent Director of Education is on maternity leave for the first three quarters of this year and consequently a number of acting up opportunities have been created, which has resulted in the following temporary structure being in place until 31 December 2010.

Osama Ammar	Acting Director of Education	
Marva Kamaludin	Team Administrator	
Liz Craig	Team PA/Administrator	
Tracey Samuel-Smith	Acting Head of Education (SES team)	
Paula Lescott	Acting Education Manager (NNWI team)	
Brendon Edmonds	Acting Education Manager (No specific team)	
Lewis Roberts	Education Officer	(NNWI team)
Ruth Wood	Education Officer	(NNWI team)
Mandy Hargood	Education Officer	(SES team)

Benjamin Potter   Education Officer   (SES team)

John Archibald   Education Administrator   (NNWI team)
Natalie Fraser   Education Administrator   (SES team)

Vacant   Temporary Administrator   (30 weeks cover included in the 2010-2011 budget)

During the temporary structure, the Education Officers and Education Administrators will report to either an Acting Education Manager or the Acting Head of Education, depending on their team. The Team Administrator will report to the Acting Head of Education and the Acting Education Managers and Team PA/Administrator will report to the Acting Director of Education. The Acting Director of Education and Acting Head of Education will report to the CEO.

Recruiting and retaining employees, in order to work effectively and proactively, continues to be a challenge for the Department and is likely to remain a risk for this financial year. This is captured in the HPC's risk register.

During the 2009-2010 financial year, the Education Department recruited to five posts (three replacement Education Officers, one replacement Education Administrator and one new Team PA/Administrator). This included one administrator' position which was vacant as a result of an internal promotion to the Education Officer role. The five posts were appointed as a result of the four recruitment and selection processes; one in September 2009 (where one Education Officer was appointed); one in October 2009 (where one new Team PA/Administrator was appointed); one in November 2009 (where one Education Administrator was appointed) and one in December 2009 (where two replacement Education Officers were appointed).

The Education Officer post has historically been difficult to recruit to; however in 2009-2010 both recruitment and selection processes were successful at their first attempt which was encouraging. This meant that we were able to keep to a minimum the periods when we were operating with a vacancy between resignation and new starter.

Whilst recruiting and retaining employees will continue to be a focal point for the managers within the Department in 2010-2011, it is anticipated that the acting up opportunities and new appointments from last year will create some stability and help retention figures as well as help individuals' career opportunities and development. However, as approximately 40% of employees will have been in their permanent position for less than a year at the start of the 2010-2011 year, employee recruitment and retention continues to be captured in the HPC's risk register.

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 Team PA/Administrator provides direct support to the Director of Education and the Education Managers in a PA capacity as well as providing more generic support to the department across some of its activities.

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.

The permanent Education Department structure was implemented in 2008-2009. The review of this structure was postponed in 2009-2010 due to the temporary structure in 2010-2011 and the complexity that this added to making any revisions to the permanent structure. The experiences of both the permanent structure (2008-2009) and the temporary structure (2010-2011) will be considered alongside possible future growth this year.

Risk management

The Education Department manages those organisational 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 include project management and the recruitment, training and ongoing support of both employees and partners.

Please see 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 all activities in this work plan with a view to identifying and where possible, mitigating any adverse impact to some groups, compared to others.

In the 2009-2010 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 and Standards Departments);
- Trained a number of visitors (new and existing) in equality and diversity (with the Partners Department);
- Produced a number of Education Update publications;
- Reviewed the layout and content of the new student section of the website (with the Communications Department);
- Organised a number of education seminars (general and practitioner psychologists specific) in venues with disabled access and identified and accommodated any additional needs highlighted at an early stage; and
- Reviewed the UK application forms (with the Registrations Department).

During this year, the Education Department intend to address the following action points as part of the department's supporting activities and projects;

- We will continue to work with the Communications Department and Policy and Standards Department to ensure that the new and revised publications adhere to house style.

- We will continue to ensure that Education Update adheres to house style.

- We will continue to 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 continue to reviewed the layout and content of both the education and student section of the website (with the Communications Department);

- We will consider equality and diversity implications within the major project. 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 information about the approved programme lists and the pass list process is accurate, easy to follow and written in easy to understand English.

- We will produce guidance around the welsh language scheme specifically for education providers. This will describe how the delivery and assessment of programmes in welsh relates to our standards and processes.

- We will produce guidance 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 processes as well as the expectations on students and education providers.

- We will continue to look to moving away from medical/clinical model terminology and language via process review days.

Information Security

In 2010-2011, the Business Process Improvement Department intend to create a management system and prepare for the adoption of ISO27001 (information security). Alongside these organisational wide developments, the Education Department intend to take specific measures this year to help identify and where possible, mitigate any key risks.

During this year, the Education Department intend to address the following action points as part of the department's operational processes, supporting activities and projects;

- We will work with the Business Process Improvement Department to train employees and visitors on information security issues and evaluate the effectiveness of this.

- We will incorporate information security into the periodic review our operational processes (using the recommendations from the Potyner review as a starting bloc, assessing their relevance and transferability to our processes).

- We will invoke the 'near miss policy' if appropriate.

- We will continue to reduce our reliance on paper based documents (therefore reducing the associated risks with storage and transfer) and increase our expectations around electronic and on-line submission and storage.

- We will consider information security implications within the major project (using the recommendations from the Potyner review as a starting bloc, assessing their relevance and transferability to our processes).

Main operational processes

There are four 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 2010-2011, we are planning to undertake approximately 53 visits. This will represent an increase in the number of visits compared to the last two financial years. This increase is predominantly accounted for by the number of practitioner psychologist and hearing aid dispenser programmes. In terms of existing professions, we expect to see the patterns of the last two academic years continue (i.e. a slightly higher number of new paramedic science and biomedical science programmes compared to other professions, a considerably lower number of supplementary prescribing programmes compared to three-four years ago and a consistent number of multi-professional visits). Overall, we expect approximately 90% of all visits to be to a single profession and 10% of all visits to be multi-professional. Of the 90% of profession specific visits, we anticipate approximately 20% to include a multiple number of programmes (either distinguishable by mode of study or level of award).

It is likely that the peak months of approval visit activity will be April-June 2010 and January-March 2011 as the majority of approval visits are concurrent with education providers' internal events which take place at these times.

Due to the high number of approval visits that have to be undertaken to practitioner psychologist and hearing aid dispenser programmes in the 2010-2011 academic year and the fact that education providers' prefer concurrent visits with their own internal events, it is likely that we will need to exert tighter controls on visit scheduling in the last quarter of this financial year (and the first quarter of the next financial year). As we have not reached capacity for visits in the last two financial years we have been able to accommodate most education providers' requests, however this year we may need to push back. This reduced flexibility could be perceived as a change in the way that we interact with education providers which could lead to both dissatisfaction and ineffectiveness. To mitigate this risk, we will ensure that the planning cycle is brought forward and the monitoring of the visit schedule carried out more frequently. We will also amend and increase the communication to affected education providers to ensure they have sufficient notice and guidance.

During this year, the Department will also ensure that the approval process is reviewed, both on a specific and continual basis. As in previous years, we will hold an internal review day where we will focus on feedback from key stakeholders and operational enhancements both in the short and long term. In particular, this year the review will consider lessons learnt from the approval of programmes delivered by professional bodies as well as withdrawal/non-approval decisions.

Annual monitoring process
The annual monitoring process will complete its fifth cycle and begin its sixth cycle in the 2010-2011 financial year. The process it is now fully embedded and operating in a pro-active, cost effective and efficient manner. In 2010-2011, we expect to put approximately 450 approved programmes through this process.

It is likely that the peak months of annual monitoring activity will be April-June 2010 and January -March 2011, as this is when most education providers' internal monitoring processes are complete, so they are ready to submit documentation to us. We plan to hold six annual monitoring assessment days to consider the majority of audit submissions. There will be two assessment days in May 2010 (one specifically for practitioner psychologists); two assessment days in June 2010 and one assessment day in March 2011. Approximately 15 annual monitoring submissions will be considered by correspondence in summer 2010 to ensure a timely turnaround. A substantial planning process ahead of the 2010-2011 academic year will take place in autumn 2010.

There is also the possibility of an assessment day specifically for hearing aid dispensers to consider the long term arrangements for reconfirming approval of the 10+ programmes.

As the annual monitoring process is retrospective, we will continue to use the annual monitoring process to ensure that programmes have incorporated the minor changes made to the standards of proficiency in autumn 2007. We will not use the annual monitoring process in the first half of this financial year to ensure that programmes have been updated to reflect the amended and new standards of education and training. However, it will be used in the second half of this financial year to ensure that programmes have been updated to reflect the amended and new standards of education and training. This disparity is due to the mismatch of financial years and academic years.

During this year, the Department will also ensure that the annual monitoring process is reviewed, both on a specific and continual basis. As in previous years, we will hold an internal review day where we will focus on feedback from key stakeholders and operational enhancements both in the short and long term. In particular, this year the review will consider lessons learnt from the annual monitoring of new professions and the effectiveness of considering ensuring successful compliance with revisions to our standards via the annual monitoring process.

Major change process
The major change process will begin its third cycle in the 2010-2011 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 two years show that an average of 50% of submissions are filtered out, into either the annual monitoring or approval process at the earlier opportunity. The revised process is more resource intensive within the Department as the 'notification stage' centres on employee rather than visitor feedback to education providers. The Department will continue to ensure that appropriate and timely feedback is received by education providers from this 'notification stage'.

We expect to put approximately 70 submissions through the full major change process. This figure is comparable to that in the last financial year. It is anticipated that we will receive approximately 35 notifications in addition to these 70 submissions which will be dealt with by Department employees and filtered out into either the annual monitoring or approval process. The major change workload is expected to remain fairly consistent throughout the year, although June – October 2010 is likely to be slightly busier as education providers either prepare for, or report changes that relate to the start of the new academic year.

During this year, the Department will also ensure that the major change process is reviewed, both on a specific and continual basis. As in previous years, we will hold an internal review day where we will focus on feedback from key stakeholders and operational enhancements both for the short and long term. In particular, this year the review will consider the lessons learnt from the submissions from new professions and the effectiveness of the notification stage in making timely and accurate decisions.

Education provider complaints process
The education provider complaints process will complete its first cycle and begin its second cycle in the 2010-2011 financial year. We intend to review the process after its first year of implementation to resolve a few teething problems but to generally ensure that the process and associated guidance is easily understood and realistic in its expectations to both complainants and affected education providers. This will help us ensure a process that is both efficient and cost-effective in terms of decision-making and output.

We expect to put approximately 5 complaints through the full education provider complaints process in 2010-2011. It is likely that guidance will be offered to and initial discussions will be held with a further 5 potential complainants. Whilst there is usually no pattern to when complaints are received, a potential peak time is expected to be around June – October 2010 as this when the majority of assessment related decisions are made by education providers.

Supporting activities

There are seven activities which support the main operational 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 2010-2011, the Department intend to produce and publicise a number of both new and revised publications.

The Department's fourth annual report will be published. This will be a combined annual report covering the 2007-2008 and 2008-2009 academic years. It is anticipated that this will be published in the first half of the financial year

The annual monitoring process supplementary information will be updated and reprinted, with minor revisions that relate to the revised standards of education and training and the departmental review in 2009-2010. It is anticipated that this will be published in the first half of the financial year, for inclusion with the communication to education providers outlining the annual monitoring requirements of the 2010-2011 academic year.

The Department intend to publish a report on the approval visits to paramedic education and training programmes delivered in ambulance trusts. This report has arisen from the review project in 2009-2010 and operational work in 2008-2009. It is anticipated that this will be published in the first half of the financial year.

The Department intend to produce new guidance on the education process. This publication will aim to clarify the key principles of HPC's quality assurance system by comparing and contrasting it to others in further and higher education. In particular, the guidance will aim to explain our system of open ended approval, the relationship between our standards and qualifications and the complex arena of statutory and professional bodies within which we operate. This new guidance will be aimed primarily at new professions, aspirant groups and those involved on the fringes of our approval and monitoring processes. It is anticipated that this guidance will be published at the end of the financial year.

In 2010-2011, the Department intend to publicise the new guidance on conduct and ethics for students and health and character processes. These publications were produced in early 2010 and there has been an exceptional uptake by education providers already. To capitalise on this interest and

consolidate on their importance, we intend to focus on the topic behind these publications in our education seminars in 2010-2011.

Website
The Department is responsible for the online register of approved programmes as well as the online information about our approval and monitoring processes.

In late 2009-2010 the format of the register of currently approved programmes was improved to help accessibility and provide more information to education providers, prospective students and registrants. The Department will monitor its usage and functionality this year for any teething problems and review its general effectiveness. The Department will also publish a register of approved programmes which are no longer approved, but which have retained historical approval for a set time period. This additional part of the register of approved programmes has arisen from the withdrawal of approval project of the last three financial years.

The content of the information pages has become rather dense and information relating to specific guidance and regulations is starting to become dated. An overview of the education pages will be undertaken with a view to updating and streamlining the information provided. 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 clarify around the educational routes for prospective biomedical scientists).

In 2010-2011, the Department will continue to support colleagues in the Communications Department in the maintenance and development of the student section of the website. This new section of the website was launched in 2009-2010. It is likely that a number of new pieces of information will be developed throughout the year from this work plans' activities that will be relevant for publishing via this part of the website (e.g. independent safeguarding authority, pass list process).

Seminars
The Department has run a series of events for education providers each autumn for the last four years. They have become more interactive and facilitative over time and feedback has been consistently positive.

The Department intend to be involved with three different types of seminars in 2010-2011. All will retain the dual purpose of information giving/updating and eliciting feedback, however they will have a slightly different emphasis and overall objective.

The Department envisage running six identical seminars across in the UK on the topic of student conduct and ethics. These seminars will promote our new guidance on new guidance on conduct and ethics for students and take discussions a step further in considering what is meant by 'student fitness for

practice', what the responsibilities of the education provider and the regulator are, as well as sharing good practice. It is anticipated that these seminars will take place between October – December 2010.

The Department intend to working with the Policy and Standards Department to co-deliver a number of events linked to the review of SET 1 (level of qualification for entry to the Register). It is anticipated that these events will either supplement the work of a PLG or feed into a public consultation. The timing of these events will be determined by the Education and Training Committee once they have agreed the overall approach to the review of SET 1 (level of qualification for entry to the Register).

The Department also intend to run two identical seminars aimed specifically at hearing aid dispensers. These seminars will introduce new education providers and stakeholders to our standards and processes and allow them to access employees at the HPC for the first time. These seminars will follow a similar format to those delivered for practitioner psychologists in autumn 2009. It is anticipated that these seminars will take place in autumn 2010.

Partner visitor recruitment, selection and training
The Department is responsible, along with the Partners Department, for ensuring that we have an appropriate quantity and quality of trained visitors to deliver our operational processes.

In 2010-2011, the focus of partner activity will be spilt evenly between recruitment and training. In addition, the Department will participate in a major project, led by the Partners Department, aimed at reviewing and future proofing their processes and information systems.

The current number of visitors is, in general, appropriate for the workload in the 2009-2010 and 2010-2011 academic years. This includes sufficient numbers for the peak of practitioner psychologist and hearing aid dispenser activity. Whilst there is no large scale recruitment campaign planned for this year, some small scale recruitment is needed to address professional variations and general turnover. It is anticipated that this recruitment will take place in autumn 2010.

In addition, the majority of our visitors have to go through a reappointments process in summer 2010 and although it is anticipated that less than 10% will take the opportunity to step down from the role, there is still a risk to manage. This has been mitigated already by gathering succession planning information in 2009-2010, and will be further supported by ensuring resources are deployed in this area to monitor the situation and if necessary initiate contingency recruitment as a priority.

In 2010-2011, we intend to run new and refresher visitor training sessions. One new visitor training day is anticipated for early 2011. This will follow on from the recruitment campaign in autumn 2010 and allow visitors to be used during the peak period of the 2010-2011 academic year.

The Department anticipate running four refresher visitor training sessions, reaching approximately 50% of visitors (i.e. 80-90 individuals). A substantial number of these visitors (approximately 20 individuals) are a priority for a two day refresher training session as they were last trained in 2004 and 2005. The other visitors will be invited to a one day refresher training session as they were last trained two years ago. It is anticipated that all the refresher training sessions will take place between November 2010 – January 2011.

Information systems (database and electronic records)
In 2010-2011, the Department will continue to work with the IT Department to enhance two key information systems (the department bespoke database and net regulate). The enhancements are captured in two small projects outlined in the later section of this work plan.

The Department will also engage in a full scale review of all information systems in 2010-2011 as part of a major project. Again, more information is outlined in the later section of this work plan.

Committee work
In 2010-2011, the Department will continue to work with the Education and Training Committee and its Education and Training Panels. We will continue to work with the Secretariat Department to assist in the training of Education and Training Committee members. There are a number of recent appointees from November 2009 and a new hearing aid dispenser member in 2010 that would benefit from initial and follow up training.

We will also continue to monitor the operating and recording procedures of the Education and Training Panels, with colleagues from the Secretariat Department.

Liaison with stakeholders
In 2010-2011, the Department will continue to work with stakeholders (e.g. general public, professional bodies, partners and educational bodies) in the broad area of education.

In 2009-2010, the Department launched a new means of communication with all our stakeholders. Education Update is now circulated three times a year to approximately 1000 contacts. We intend to refine our internal processes for producing and circulating this publication so that it remains both resource and cost effective. We will also monitor feedback on it.

We will continue to participate in inter-regulatory forums and meetings with bodies such as Quality Assurance Agency and the Council of Deans. There are a plethora of forums and with finite resources we will continue to prioritise our attendance based on the relevancy of agendas and competing priorities.

Projects 2010-2011

This year's work plan has adopted the organisational wide terminology used when categorising project work. There are three broad categories;

1. **Major projects** are those that use large amounts of resources, have a high risk or significant consequences.
2. **Small projects** are those that use small amounts of resources, involve minor changes to business processes, focus around a distinct body of work and normally affect more than one internal department.
3. **Business-as-usual projects** are those that use minimal amounts of resources, involve minor changes to business processes, focus around a distinct body of work and normally affect just one internal department.

Major projects

The Department will take lead responsibility for the 'Education systems and processes' major project in 2010-2011. It is important that this project is completed, both on time and on budget. Consequently, priority will be given to this project in terms of resources (time and people). If resources become stretched at any point, then we will need to revisit the viability of running other projects and supporting activities.

1)   Education systems and processes

The Department is currently responsible for maintaining information about approved programmes in three different areas: the bespoke approvals and monitoring database, the online register and net regulate (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. This project aims to produce a more reliable, pivotal, scalable and partially-automated education system, which will allow the Department to work more efficiently, proactively and in a more integrated manner, with both internal and external customers.

It is envisaged that this project would follow a similar approach to the current FTP case management system project. It will span over a two year period, with the second year being dependent on the outcome of the analysis within the first year. We anticipate completing the planning and design phase in this financial year. It is predicted that this project would use a combination of in-house and external expertise, with a view to buying an external off-the-shelf

product. Building and supporting a bespoke system is both undesirable and unsustainable.

High priority

Small projects
The Department will jointly deliver two small projects in 2010-2011. It is important that these projects are completed, both on time and on budget and that the Department are flexible in working with the other internal departments. Consequently, after the major project, priority will be given to these small projects ahead of the enhancement projects. If resources become stretched at any point, then we will need to revisit the viability of running the enhancement projects and supporting activities.

1)   Education system developments

This project will involve the Education and IT Departments working together, with an external development company, to deliver a number of developments to our bespoke database.

In 2009-2010, the Department identified a number of developments to the system to aid in the efficient running of the function. The developments were prioritised and those with the highest priority delivered in 2009-2010. In 2010-2011 we expect to deliver the next set of prioritised changes. These changes centre around four broad areas – (i) integration of the education provider complaints process (ii) upgrade to the approval process section (iii) upgrade to the major change section and (iv) enhancements to the visitor allocation and selection function.

Although it is anticipated that the bespoke database will be replaced by the end of 2011-2012, the database still needs to operate optimally during the next two financial years. It is anticipated that this small project will take place during the second and third quarters of this financial year.

Medium priority

2)   Net regulate – manage qualifications and institutions functions maintenance

This project will involve the Education, IT and Registrations Departments working together, with the external development and support company, to deliver a number of developments to net regulate. (Net regulate is the bespoke registrations database, used primarily by the Registrations Department to register and renew registrants).

Over the last two financial years, the Education Department has taken over sole responsibility for the approved programmes and education provider information in net regulate. We have completed data verification and assimilation exercises and incorporated data entry and accuracy stages into our main operational processes. We have also made a number of small scale,

low cost technical changes. However to produce a more reliable function within net regulate more substantial and resource intensive technological changes are needed.

At present there is no function to highlight that a programme has closed or had their approval withdrawn. Additionally, the modes of study options are also limited to only full or part time. This means there are no automated safeguards within the system to prevent applicants being registered on a programme which is no longer approved, or only approved in a specific mode of study. This small project aims to develop the capacity in net regulate so the system is more automated. This will improve efficiency and accuracy of data entry and verification and reduce the risk of communicating inaccurate or outdated information and incorrect decision-making.

It is anticipated that this small project will take place during the third and fourth quarters of this financial year.

Medium priority

Business-as-usual projects

There are seven business-as-usual projects in the 2010-2011 financial year. This is significantly less than in previous years and reflects the priority given to operational processes and major and small projects this year. Some business-as-usual projects 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 2010-2011, rather than initiated from the start. A few of these projects involve collaboration with the other Departments, namely Policy and Standards, Registrations and Communications.

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 2010-2011, where there is a lighter workload with our operational processes, supporting activities and other projects. 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 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) Review of IHCD paramedic award approval visits

This project is ongoing from 2009-2010 and follows on from operational work in 2008-2009.

In 2009-2010, the Department analysed the findings from the approval visits to paramedic programmes delivered in ambulance trusts during the 2008-2009 and 2009-2010 academic years to determine if there were any consistent trends and/or underlying concerns. As a result, the Education and Training Committee agreed a variation to the annual monitoring process for all paramedic programmes delivered in ambulance trusts in the 2010-2011 academic year to monitor the long term and universal developments of these programmes.

In 2010-2011, Department intend to publish their analysis from the approval visits to paramedic programmes delivered in ambulance trusts during the 2008-2009 and 2009-2010 academic years into a formal report.

In 2010-2011, the Department will further analyse the engagement and outcome from the amended annual monitoring process for the affected programmes and present this information to the Education and Training Committee.

It is anticipated that this project will be complete by the end of the first half of this financial year.

Medium priority

2) Review of generic standards of proficiency
This project is ongoing from 2009-2010 and is lead by colleagues in the Policy and Standards Department.

The Education Department intend to continue to assess the impact of any changes to these standards on our 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 employees;
- briefing education providers and key education stakeholders;
- briefing visitors;
- updating and circulating publications; and
- updating the website.

Medium priority

3) Withdrawal of approval
This project is ongoing from 2009-2010 and follows on from initial work in 2007-2008 and 2008-2009.

In 2009-2010, the Department contacted all education providers to discuss withdrawing approval from programmes which are either no longer running or have been superseded by new programmes. The outcomes were referred to

the Education and Training Committee in June, September and December 2009.

In 2010-2011 this project will finalise any outstanding decisions from Education and Training Committee and focus on publicising the historical approval status of affected programmes, both internally and externally, so that stakeholders have clear, accessible information.

Medium priority

4) Welsh language schemes
This project is ongoing from 2009-2010, however it is currently on hold due to complementary work being lead by colleagues in the Policy and Standards Department.

The Welsh Language Act 1993 put Welsh and English on an equal basis in public life in Wales. As a result of the Act public bodies have a duty to treat Welsh and English on an equal basis and develop welsh language schemes. The HPC is consulting on our welsh language scheme in the first half of this financial year.

This project proposes to produce guidance for education providers, on the interactions between our welsh language scheme (once agreed), our standards of education and training (especially those in the admissions section and the curriculum section around standards of proficiency) and our processes and activities in Wales (e.g. visits, seminars). As approval of our welsh language scheme is anticipated in autumn 2010, it is proposed that this specific project will not begin until the second half of this financial year.

Low priority

5) Independent safeguarding authority
This project is ongoing from 2009-2010, however it was on hold for the majority of the last financial year due to delays and uncertainties around the legislation.

The Independent Safeguarding Authority (ISA) has been created to help prevent unsuitable people from working with children and vulnerable adults. There is a major project to address the legislative and technological changes required of the HPC. This smaller departmental project is a communications based project aimed specifically at education providers.

The phasing in approach of the ISA means that education providers need to address the registration requirements of their students as they engage with regulated activity (i.e. placements). There is little information currently available to education providers in this area and this project proposes to produce guidance 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.

It is anticipated that this project will take place in the second and third quarters of this financial year.

Low priority

6)   Registration Department liaison project

This project is new for 2010-2011 and aims to review and enhance existing internal processes and practices.

This project involves the Education Department working with colleagues in the Registrations Department, although it is envisaged that the Education Department will take the lead in terms of resources. It is anticipated that the project will focus on two specific areas, which are of mutual concern and benefit to both departments, namely (i) the register of approved programmes (current and historical) and (ii) the pass list process (incorporating communication and liaison with education providers and internal usage).

There have been a number of changes to the register of approved programmes (current and historical) and UK application forms in recent years and the Education Department is keen to ensure that colleagues in the Registrations Department are cognisant of the rationale and principles behind these changes and that the new ways of working are feasible and in keeping with their internal procedures. This enhancement project aims to further mitigate some of the risks highlighted in the small project around net regulate. It recognises the ongoing reliance of data entry and verification by individuals and the risks associated to incorrect decision-making at the point of registration, therefore indirectly mitigating the work and cost of registration panels.

There have been a number of changes to the pass list process in recent years and this part of the project aims to both resolve a few teething problems (mainly around communication and expectations on education providers) so that the process is easily understood and realistic in its expectations to both education providers and the Registrations Department. This part of the project will also consider further enhancements to the pass list process to ensure that the information supplied by education providers is accurate and explicit, to mitigate the risk of incorrect decision-making at the point of registration.

Overall, the project aims to improve the understanding between the two departments of their respective roles and responsibilities, to increase the effectiveness of available resources within both departments engaged in these two areas; to consider the strengths and limitations of the current

processes and information systems and to consider the effectiveness of initial and refresher training of employees.

It is anticipated that this project will take place over an extended period, during the last three quarters of the financial year.

Medium priority

7)   Practitioner Psychologists project
This project is new for 2010-2011; however it arises out of operational work from the last year.

There are two areas which would benefit from further work and review during this year. The Department has published a register of approved practitioner psychologist programmes which are no longer approved, but which have retained historical approval for a set time period. This register has undergone various reiterations since the register opened in July 2009. The Department intend to review the process for agreeing this register to ensure it is definitive, accessible and easily understood by both internal and external stakeholders.

The second area for review centres on the joint approval visits to practitioner psychologist programmes, with the professional body, in the 2009-2010 academic year. The department will work with the professional body and education providers to review both their experiences to fine-tune our communication and preparation for approval visits to practitioner psychologists programmes in the 2010-2011 and 2011-2012 academic years, so that they are appropriate and effective to this new audience.

Low priority

2011-2012

It is likely that 2011-2012 will be a year where the Department's work will continue to be shaped greatly by the impact of regulating new professions and the preparation for extending professional regulation further.

The Department anticipate continuing to balance their immediate commitment to operating the main operational processes alongside the longer term commitment to extending professional regulation and consolidating our communication and relationship management with key stakeholders.

It is likely that the operational activities in 2011-2012 will continue to focus primarily 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, the impact of regulating new professions is not felt until at least six - twelve months after the opening of their registers.

In 2011-2012, it is likely that our communication work will built on from areas of policy development in 2010-2011. It is envisaged that the key communication themes for 2011-2012 will be around SET 1 (level of qualification for entry to the register), post-registration qualifications and the generic standards of proficiency.

It is envisaged that phase two of the major project will take place in 2011-2012, focusing on the build and implementation of a new system. All of which would involve collaborative working with internal colleagues (IT, Registrations, Communications) and external suppliers.

The Department anticipate continuing to work with the Policy and Standards Department over areas such as the future regulation of new professions (including psychotherapists and counsellors, dance movement therapists, acupuncturists, medical herbalists and traditional Chinese medicine practitioners, healthcare scientists) and new groups (including assistant and support workers). In addition, the Department envisage engaging in new work with the Policy and Standards Department around research (possibly in the area of interprofessional learning) and developing curriculum framework and guidance (following on from the review of SET 1 in this financial year).

The Department also envisage working with the Communications Department to discuss the idea of raising the profile of the regulator with students. The organisation currently has limited direct engagement with students and the Department would like to revisit this following our recent work in the area of student conduct and ethics and the ongoing revalidation work.

In 2011-2012, it is likely that the Department will continue to carry out a number of smaller enhancement projects. Possible areas for inclusion include – reviewing the provisions around comparable qualification in the Health Professions Order; reviewing the list of recognised courses in English language for entry onto the Register; producing position statements on

preceptorship, mentorship and dual registration; producing a document retention policy specific to the approval and monitoring processes and producing service level agreements specific to the approval and monitoring processes.

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Operational Processes

Approvals

31/03/11
01/04/10

Major change
31/03/11
01/04/10

Annual monitoring
31/03/11
01/04/10

Approval

Approval visit schedule
31/12/10
03/05/10

Approval process review
31/08/10
01/07/10

Annual Monitoring

Annual monitoring schedule
29/10/10

Annual monitoring process review
31/08/10
01/09/10
02/08/10

Major change

Major change review
29/10/10
01/10/10

Major change timescale monitoring
31/03/11
01/04/10

Complaints

Complaints process review
30/09/10
02/08/10

New Professions

Practitioner Psychologists

Website review
30/07/10
01/06/10

Visit review
30/07/10
01/07/10

Hearing Aid Dispensers

Finalisation of 09-10
30/04/10
01/04/10

Assessment Day
31/05/10
03/05/10

Committee Paper
30/06/10
01/06/10

Supporting activities

Publications

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Progress	Rolled Up Task	Split
Milestone	Rolled Up Milestone ◇	External Tasks
Project Summary		
Group By Summary		
Deadline ⇨		

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27	Ambulance Trust — 01/04/10
28	— 30/06/10
29	Annual Monitoring Supp — 01/07/10 ... 29/10/10
30	Website
31	Content review — 01/04/10 ... 31/03/11
32	Student section — 01/04/10 ... 31/03/11
33	Seminars
34	General — 01/07/10 ... 31/12/10
35	Hearing Aid Dispensers — 01/07/10 ... 31/12/10
36	SET 1 — 01/07/10 ... 31/12/10
37	Partners
38	Reappointments process — 01/06/10 ... 30/07/10
39	Recruitment — 01/10/10 ... 31/12/10
40	Refresher training
41	Committee work — 01/09/10 ... 30/11/10
42	ETC
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45	September — 13/09/10 ... 16/09/10
46	New training — 03/01/11 ... 31/01/11
47	November — 15/11/10 ... 18/11/10
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49	ETP
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May — 19/05/10 ... 20/05/10
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Task
Progress
Milestone
Summary
Rolled Up Task
Rolled Up Milestone
Rolled Up Progress
Split
External Tasks
Project Summary
Group By Summary
Deadline

Project: Workplan 10-11 2
Date: Fri 07/05/10

Timeline headers: Apr '10 | May '10 | Jun '10 | Jul '10 | Aug '10 | Sep '10 | Oct '10 | Nov '10 | Dec '10 | Jan '11 | Feb '11 | Mar '11 | Apr '11

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- 54 — September — 15/09/10 — 16/09/10
- 55 — October — 20/10/10 — 21/10/10
- 56 — December — 08/12/10 — 09/12/10
- 57 — February — 15/02/11 — 16/02/11; March — 30/03/11 — 31/03/11
- 58 — Information systems
- 59 — Education system developments (Phase 2) — 01/07/10 — 31/08/10
- 60 — Netregulate — 01/10/10 — 31/03/11
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- 62 — Education Update
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- 66 — Projects
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- 68 — Education systems and processes (phase 1) — 01/04/10 — 31/03/11
- 69 — Partners system review (phase 1) — 02/08/10 — 31/03/11
- 70 — Business as usual
- 71 — Review of IHCD paramedic award approval visits
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- 73 — Withdrawal of approval — 01/07/10 — 30/06/10
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- 76 — Review of generic SOPs — 01/04/10 — 31/05/10
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Legend:
- Task
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79		01/04/10					Equality and diversity							31/03/11
80		01/04/10					Information security							31/03/11

	Task		Summary		Rolled Up Progress		Project Summary	
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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 2010-March 2011 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.

Priorities 2010-2011

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; Ensuring compliance to IFRS and FReM, 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, 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 it's Committees - particularly the Finance & Resources Committee and Audit Committee, the Executive Management Team, budget holders, HPC employees and suppliers.

Resources

The 2010-2011 Finance department budget and work plan involve utilising a team of eight full time Finance employees. The current eight roles are: Director of Finance, Financial Controller, Management Accountant, Financial Accountant, Finance Officer, Purchase Ledger Officer, Transaction Manager and Transaction Officer.

As part of a review of the working arrangements within the Finance department there is a planned re-organisation within the department.

Regarding financial resources, the work plan assumes a Finance department operating cost budget for 2010-2011 of approximately £647k.
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.

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

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 International Financial Reporting Standards (IFRS) 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 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, 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. At stages throughout the year, re-forecasts are undertaken to establish any changes to the year end position compared to the original 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 147 budgeted permanent employees and currently 61 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.

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[1] The latest HPC s60 Order enables the Controller & Auditor General (C&AG) to act as HPC's statutory auditor and the certification & oversight roles outlined under the 2001 HPC Order.

[2] Council and Committee members who declare themselves to be HPC office holders and are not self-employed.

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 forecasts and the annual budget.

The most significant forecast is the Five Year Plan which 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).

A 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 by profession and fee type. A key component of the Income Model is registrant and applicant volume-forecasting.

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 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.

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

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 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.

Refunds[4] of fee overpayments and collection of outstanding debtor balances (failed direct debit arrangements) is an ongoing process performed by the Finance department.

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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 closing down the legacy pension schemes should be completed in 2010-2011. The other activities will be ongoing beyond the 2010-2011 financial year. The supporting activities are as follows:

1. **IFRS reporting**

   In accordance with H.M Treasury FReM reporting requirements, the HPC has moved to full reporting under International Financial Reporting Standards (IFRS) for the year ending 31 March 2010 onwards. The main changes form the previous method is twofold. Firstly, adjustments to some financial numbers and secondly, relabeling of some items in the financial statements, with modified notes to the accounts.

2. **Cash and investments management**

   The HPC has money market investments with an approximate value of £5M. This is 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 £1.9M 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 scheme. Currently there are 61 members in the Friends Provident scheme. The CPSM scheme is expected to be closed down completely in the early part of 2010-2011 financial year. Steps are also in progress to close down the Flexiplan scheme. The work plan implications for the Finance department largely involve monitoring progress of the professional trustee for winding up the Flexiplan. The HPC will need to seek & act on pension scheme legal advice regarding closing the Flexiplan scheme, 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[5], 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.

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

5. Committee work

In 2010-2011, 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.

Projects

The Finance department has a key role to play in implementing several HPC projects during 2010-2011. The project to determine a fee rise in April 2011 will commence during 2010. 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.

Finance Projects and System Enhancements in 2010-2011

Finance department reorganisation

As part of the need to continue to evolve there is a planned reorganisation for the Finance department in 2010-11. The aim of this is to:

- Provide a more effective, efficient and professional service to our stakeholders.
- Develop finance staff and broaden their experience within the organisation.
- Enable finance staff to provide cover for other roles within the department.
- Provide relevant experience for those members of the finance team who are studying for professional accounting qualifications.

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 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 review 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 may be provided, e.g. revalidations, these incur start up and ongoing costs, which might 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.

Credit / Debit Card Automation

PCI card payment companies have joined forces to create the Payment Card Industry Data Security Standard (PCI DSS) with the aim of safeguarding sensitive card data.

At HPC Credit/ Debit Card details are taken over the phone when a registrant wishes to make a payment to renew their membership or register for the first time.

The card payment companies require such information to be processed in compliance with the PCI DSS code.

There have been recent changes to the code which requires HPC to change the method used to process these transactions. This project aims to take professional advise on the options open to the

organisation the be compliant with the revised code and to make appropriate changes to procedures & processes.

System Enhancements

Purchase Requisition System (PRS)

In preparation for a major project planned in 20011-12, the finance department will undertake a project to investigate how PRS can be put to better use by the organisation. There are a number of other customers who have had a very good experience in implementing the PRS product. It is planned that the finance department will find out from other departments in HPC what issues are causing difficulties with the current system. Based on this research visits are planned to other PRS customers to see what they have done to overcome these issues.

SAGE Accounting system improvements

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.

Bank Statements

Line details on Nat West bank statements are manually keyed into the cash book in Sage. There is functionality in Sage to import this directly in the cash book provided that the correct electronic file is available from the bank. Working with our service provider we need to establish if this can be automated as this will provide a more efficient process.

Link between Lotus Notes and Sage purchase ledger

Automate the current process where new supplier's details entered in the Lotus Notes database are automatically recorded in Sage accounting package.

Supplier Due Dates

Update supplier due date records to enable more accurate reporting of late payment to our suppliers and identify reasons where supplier invoices are held.

Year Two projects and system enhancements (2011–2012)

The following are some projects and system enhancements proposed for year two, subject to budget approval. In addition, members of the finance team 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.

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
Introduce updated version of PRS across the organisation which is expected to offer additional functionality over the present version. These improvements include: ability for budget holders to see an electronic version of the supplier's invoice and real time commitment reports to help manage budgets better.

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 (2012-2013)
The following list of projects are proposed for year three, subject to budget approval. In addition, members of the finance team may be involved in aspects of project design and testing for other department's projects.

- Implementation of fully automated linked purchase order to supplier databases for high volume items e.g. stationery.
- Fee Rise 2013 project
- Implement an automated costing system (activity costing) linked to the SAGE financial system.
- Integrating Sage to non financial records to assist in better resource planning.
- Investigate the benefit of migrating 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.

Appendix Two – Finance department risks

Appendix Two attached provides details on the risks managed by the Finance department during 2010-2011 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.

Risk Theme	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations February 2010	Likelihood before mitigations February 2010	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2010	RISK score after Mitigation September 2009

Year End statutory reporting and annual report process

Risk Theme	Ref #	Description	Risk owner	Impact	Likelihood	Risk Score	Mitigation I	Mitigation II	Mitigation III	RISK after Feb 2010	RISK after Sep 2009
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	Auditor early in Annual Report preparation process.	Low	Low
Financial Accuracy	15.15	**Qualified opinion received by the Auditors on the Statutory Financial Statements**	Finance Director	5	1	5	Tinely accrual postings supported by source documentation. Interal control compliance (regularity of spending). Audit findings compliance.	FReM compliance & timely expert valuations eg investments, land and buildings	Reliable financial systems. Income & Expense and Stetement of Financial Position Reconciliation's. Matching Sage TB to Mgt Accs & Mgt Accs to Statutory Financial Statements	Low	Low
Financial Accuracy	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	5	10	If an employer shortfall crystalises, finance the HPC liability from money market deposits, or from £1.4M of managed funds. Scheme assets are under Scotish Life professional funds management involving diversification until conversion into beneficiary annuities.	Work with the trustees to update the actuarial valuation of the fund to identify whether pension assets will cover pension liabilities. Make financial provisions where a shortfall is indicated generating an employer liability.	Monitor the winding up schedule with the scheme trustees and administrators. Seek secialist pensions legal advice as required	Low	Low
Financial Accuracy	16.2	**Non compliance with pensions legislation.**	Finance Director	4	2	8	Notional membership by six scheme members to avoid triggering s75 liability before scheme closure	Liaison with with scheme trustees and administrators.	Seek specialist pensions legal advice as required.	Low	Low
Financial Accuracy	16.3	**Capita Flexiplan funding liability resulting from scheme valuation deficit**	Finance Director	4	4	16	If an employer shortfall crystalises, finance the HPC liability from money market deposits, or from £1.4M of managed funds. Scheme assets are under professional funds management involving diversification until conversion into beneficiary annuities.	Work with the trustees to update the actuarial valuation of the fund to identify whether pension assets will cover pension liabilities. Make a financial provision where a shortfall is indicated and the HPC's portion of the shortfall is subsequently identified	Monitor actions of the Employers' Consultative Group in working with the scheme trustees and administgrators to wind up the Flexiplan scheme. Seek specialist pensions legal advice as required.	Low	Low

Monthly reporting process

Risk Theme	Ref #	Description	Risk owner	Impact	Likelihood	Risk Score	Mitigation I	Mitigation II	Mitigation III	RISK after Feb 2010	RISK after Sep 2009
Cost control	15.3	**Major Project Cost Over-runs**	Project Lead/ EMT	4	2	8	Effective project specification including creating decision points. Effective project management and timely project progress reporting (financial and non financial).	Creation of a project capex contingency budget. Project exception reports including revised funding proposal is presented to EMT for approval.	Finance & Resources Committee review of the project spendng variances to date	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	RISK after Feb 2010	RISK after Sep 2009
Financial Accuracy	15.18	**PAYE/NI compliance**	Finance Director	3	2	6	Effective payroll process management. Payroll system tax deductions set up using valid tax codes. Tax provisions made and tax returns filed on a timely basis.	Signed disclosure forms indicating tax category status for all Council and Committee members. Professional tax advice sought, including status of CCM's and partners.	Tax Provisions maintained for legacy PAYE/NI payable relating to Council and Committee members. PAYE Settlement Agreement also being sought from HMRC relating to Category One Council and Committee members.	Low	Low
Asset value protection	15.11	**Unauthorised payments to personnel**	Finance Director	3	3	9	Effective expense claim and payroll authorisation processes. Segregation of duties.	Regular audits. Whistleblowing policy.	Professional Indemnity & fidelity (fraud) insurance for first £100k of loss	Low	Low
Financial service provision	15.22	**Payroll process delay or failure**	Finance Director	5	2	10	Agreed monthly payroll process timetable (with slack built in). Person cover for the payroll administrator (system access and documented procedures). If process delayed, payment may be made by CHAPS (same day payment), cash or cheque.	Restoration of overnight backup files for Sage Payroll system (software application and transactions)	Hard copy records held securely. Restricted system access.	Low	Low

Risk Theme	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations February 2010	Likelihood before mitigations February 2010	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2010	RISK score after Mitigation September 2009

Supplier payment process

Risk Theme	Ref #	Description	Owner	Impact	Likelihood	Score	Mitigation I	Mitigation II	Mitigation III	After Feb 2010	After Sep 2009
Asset value protection	15.13	**Mis-signing of cheques (forgery)**	Finance Director	4	3	12	Minimial use of manual chqs. Segregation of duties (preparation and signing). Two signatories required on all cheques.	Photocopies of one off supplier cheques held on file. Monthly bank reconciliations. Whistleblowing policy.	Professional Indemnity & fidelity (fraud) insurance for first £100k of loss	Low	Low
Financial Accuracy	15.19	**Corporate Tax compliance**	Finance Director	3	1	3	Preparation and filing of the Corporation Tax return (CT600 form) following determination of Corporate tax liability during Annual Report process.	Professional tax advice sought e.g. Corporate Tax Return preparation (including capital allowance claims) and filing.		Low	Low
Asset value protection	15.10	**Unauthorised payments to organisations**	Finance Director	3	2	6	Requirement for the relevant signed PO's and invoices to support payments to preferred and one off suppliers. Regular audits. Pro-forma invoice register. Segregation of duties.	Maintenance of the aproved purchase order and invoice signatory list. PRS PO's have system pre-set approval routes. Regular audits. Whistleblowing policy.	Professional Indemnity & fidelity (fraud) insurance for first £100k of loss	Low	Low

Supplier payment process & Forecasting/Budgeting process

Risk Theme	Ref #	Description	Owner	Impact	Likelihood	Score	Mitigation I	Mitigation II	Mitigation III	After Feb 2010	After Sep 2009
Financial service provision	15.5	**Inability to pay creditors**	Finance Director	5	2	10	Effective payment process management with regular review of aged creditors listing and supplier statements	Effective cash-flow forecasting. Registrant creditors policy compliance.	Extensive use of preferred suppliers with bank account details and payment terms loaded into Sage.	Low	Low

Forecasting & Budgeting process

Risk Theme	Ref #	Description	Owner	Impact	Likelihood	Score	Mitigation I	Mitigation II	Mitigation III	After Feb 2010	After Sep 2009
Cost control	15.2	**Unexpected rise in operating expenses**	EMT	3	1	3	Budget holder accountability for setting budgets and managing them. Timely monthly reporting and regular budget holder reviews held. Finance & Resources Committee review of the monthly variances year to date.	Six and nine month reforecasts with spending plan revisions as feasible and appropriate.	Legal cost insurance for FTP cases. Capped FTP legal case costs.	Low	Low
Cost control	15.9	**Mismatch between Council goals & approved financial budgets**	Chief Executive	4	2	8	Close and regular communication between the Executive, Council and its Committees.	Adequate quantification of the budgetary implications of proposed new initiatives	Use of spending prioritisation criteria during the budget process with capex contingency amount held in reserve	Low	Low

Forecasting/Budgeting process and Transaction Management process

Risk Theme	Ref #	Description	Owner	Impact	Likelihood	Score	Mitigation I	Mitigation II	Mitigation III	After Feb 2010	After Sep 2009
Liquidity	15.1	**Insufficient cash to meet commitments**	Finance Director	5	1	5	Maintain an appropriate level of cash reserves to meet ongoing needs and comply with the Reserves policy. Effective management of collections and payments processes.	Regular cash forecasts and reviews	Annual and Five Year Plan forecasting of income (volumes & fees) and costs. Fee rises an DoH grant applications as required.	Low	Low

Transaction Management process

Risk Theme	Ref #	Description	Owner	Impact	Likelihood	Score	Mitigation I	Mitigation II	Mitigation III	After Feb 2010	After Sep 2009
Solvency	15.6	**Inability to collect from debtors**	Finance Director	5	2	10	Collection via Direct Debit instruction for approximately 80% of renewal fees value	Registrant debtors policy compliance	Prompt actioning of rejected DD's. 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.	Compliance with credit card record storage standards.	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) including person cover.	Monthly revenue reconciliation's between Netregulate and SAGE	-	Low	Low

Cash and investments management

Risk Theme	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations February 2010	Likelihood before mitigations February 2010	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2010	RISK score after Mitigation September 2009
Asset value protection	15.17	**Professional Fund Manager insolvency**	Finance Director	2	1	2	Client monies (HPC) contractually separated from fund manager own holdings. Monthly itemised valuations for all investments held, bought and sold.	Periodic credit rating checks of fund manager firms used	Professional Indemnity & fidelity (fraud) insurance for first £100k of loss by supplier acting on HPC's behalf.	Low	Low
Asset value protection	15.20	**Money market provider insolvency**	Finance Director	5	2	10	Funds diversification - money market funds spread across three mainstream UK money market institutions, independently owned with at least an 'AA minus' credit rating.	FSA insurance for proven financial loss of up to £50k of funds held per UK financial institution.	Professional Indemnity & fidelity (fraud) insurance for first £100k of loss by supplier acting on HPC's behalf.	Low	Low
Asset value protection	15.4	**Loss in value of investment fund portfolio**	Finance Director	2	5	10	Professional funds management involving diversification (by asset class, market, sector) and "lower risk side of neutral" investments	Adherence to the HPC Investments policy. Long run investment view.	Relatively small balances held in the investment portfolio (£1.4M), compared to money market (£5M) and property investments held (£3M). Approx 10% of Annual income value.	Low	Low

Procurement guidance

Financial service provision	15.21	**Financial distress of trade suppliers causes loss of service**	Finance Director	4	4	16	Financial monitoring of key suppliers via Busibody credit asssessment	Escrow agreements	Alternative suppliers	Medium	Medium

Project management

Solvency	8.1	**Fee change processes not operational by April 2011**	Finance Director	3	3	9	Project managed as part of major project portfolio.	Project progress monitored by EMT & stakeholders.		Low	Low

Fitness to Practise Workplan 2010–2011

Introduction

This document sets out the resources, responsibilities and priorities for the financial year April-March 2010-2011. 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.

Resources

Human Resources

It is anticipated that the fitness to practise directorate will increase from a permanent headcount of 35 employees in 2009-2010 to a permanent headcount of 41 employees in 2010-2011

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
Vacancy	Investigations Manager
Zoe Maguire	Lead Case Manager
Paul Robson	Lead Case Manager
Ciara O'Dwyer	Lead Case Manager
Sabrina Adams	Lead Case Manager
Bahar Ala-Eddini	Case Manager
Nafeesah Aumeerally	Case Manager
Rachel Bull	Case Manager
Rodney Dennis	Case Manager
Jonathan Dillon	Case Manager
Cara Donald	Case Manager
Grant Edgeworth	Case Manager
Delwyn King	Case Manager
Gareth Llewellyn	Case Manager
Sonia Okoruwa	Case Manager
Joanna Power	Case Manager
Alan Shilabeer	Case Manager
Simon Thompson	Case Manager
Dominic Williams	Case Manager
Vacancy	Case Manager
Vacancy	Case Manager
Vacancy	Case Support Officer (New Position 2010-2011)
Vacancy	Case Support Officer (New Position 2010-2011)

Adjudication

Hearings Team

Alison Abodarham	Head of Adjudication
Vacancy	Lead Hearings Officer
Vacancy	Scheduling and Witness Manager
Salma Begum	Hearings Officer
James Bryant	Hearings Officer
Jason Rowbottom	Hearings Officer
Kabir Siddiqui	Hearings Officer
Akua Dwomoh-Bonsu	Hearings Officer
Ola Odusanya	Scheduling Officer
Eleanor Wilson	Scheduling Officer
Sarah Gourlay	Scheduling Officer

Administration Team

Jameel Anwar	Administration Manager
Corrado Palmas	Team Administrator.
Gary Rope	Team Administrator
Cirene Chagas	Team Administrator

The Investigations Manager and Administration Manager report to the Head of Case Management. In 2010-2011 we will have 4 case teams, each led by a lead case manager reporting to the Investigations Manager. Those case teams will comprise of a mixture of case managers and case support officer. The case support officer role is a new role for 2010-2011 and it is anticipated that the role will provide the case teams with the extra case and administrative support they will require from an increase in the number of allegations. Each case team reports to a lead case manager. The Head of Adjudication, Head of Case Management and PA to the Director of Fitness to Practise report to the Director of Fitness to Practise. A review of the organisational structure of the department will take place in 2010-2011 to ensure that it remains appropriate for the forecasted increase in resources.

Financial Resources

It is anticipated that there will be a fitness to practise budget of approximately £7.1million.

Forecasting

This budget is based on an estimated 820 new allegations being received in 2010-2011 (an increase of approximately 24% from 2010-2011). It is anticipated that case managers in case teams one, two and four will manage approximately 1200 cases over the course of the financial year

It is anticipated that there will be approximately 945 days of hearing in 2010-2011

(comprising of full hearings, consent applications, interim orders, review hearings, investigating panels and registration appeal panels). It is anticipated that approximately 373 cases will be concluded in 2010-2011, an increase of approximately 24% from 2009-2010. The budget is based on hiring external venues outside of London 150 days per year as approximately 15% of hearings are held in Northern Ireland, Scotland, Wales and other English venues every year.

It is anticipated that there will be an increase in the number of health and character cases due to the physiotherapists renewing their registration. We also anticipate a slight increase in the number of 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 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 Investigation Manager and the Administration Manager.

Case Teams

There will be four case teams within the directorate in 2010-2011 each managed by a lead case manager. Each lead case manager has management, auditing and project responsibilities. The lead case managers are managed by the Investigations Manager.

Case teams 1, 2 and 4 comprise of case managers who are responsible for the management and investigation of allegations and the presentation of fitness to practise cases and of case officers who provide case support to the case managers.

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 Head of Adjudication 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. The Lead Hearings Officer is responsible for the day –to- day work allocation of the hearings team. This includes allocating resources and ensuring availability of facilities.

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

In 2010-2011 there will be 3 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 scheduling officers will report to the Scheduling and Witness Manager.

Administration

The Administration Manager manages the team administrators and ensures that the necessary administrative support is provided to the department.

The Team Administrators provides support to the department across all of its activities. This includes hearing preparation, some elements of the witness support provisions, logging and tracking invoices and maintenance of the fitness to practise alerts system.

The PA to the Director of Fitness to Practise undertakes all diary management and secretarial duties for the Director.

Main Operational Processes

There are five main processes which generate the majority of the department's work. These are listed below. This work plan will be amended accordingly in line with increased operational requirements.

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 and registration appeals 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.

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.

3. Panel recruitment, selection and training

In 2010-2011 the department will work with the Partners Team to appoint, reappoint, train and appraise panel members and panel chairs. We will also contribute to the major project to review the partner systems and procedures

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 the ongoing programme of refresher training. 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

We will continue to work with the Fitness to Practise Committee, Education and Training Committee, Finance and Resources Committee and Council as appropriate.

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. We also review the information that we provide to those involved in the fitness to practise processes operated by the HPC. 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 Hearing Aid Council.

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 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
- Partner Systems and Process review
- Transfer of the Hearing Aid Council
- Independent Safeguarding Authority

10. Other

We will work with the Registrations department to ensure that common areas of work are effectively managed.

We will also ensure that we have the resources to meet the demands of the second CHRE audit of the initial stages of the fitness to practise process which will take place in December 2010. We will also review the learning from the first audit in continuing review of our processes and procedures.

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 2010-2011 are broadly the same as previous years but with different tasks to meet the objectives. Those objectives are as follows:

- **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 and service.

- **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, involvement and leadership of the fitness to practise department in 2010-2011. We will endeavour to ensure that those projects and developments are managed within agreed timescales.

- **Consistent and effective decision making –** We will endeavour to continue to improve the quality, consistency and effectiveness of decision making, both by panels and members of the department.

- **Ensure processes and procedures are working to their best effect –** We will continue review our way of working to ensure we meet the HPC's goal to ensure public protection whilst balancing the human rights of registrants.

- **Ensure effective management or resources –** We will undertake a number of activities to ensure we manage effectively the resources in place to support the work of the department.

- **Ensure effective management or risk –** The Fitness to practise directorate manages a number of risks in relation to its functions. We will ensure we will continue to manage these risks appropriately.

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.

Appendix 1: Fitness to Practise Activities Table 2010-2011

The table below sets out the fitness to practise department's timetable in achieving the objective set out in the work plan above and the priority work for the department.

Appendix 2: Fitness to Practise Forecast

This document sets out the case, hearings and resource forecast for 2010-2011.

Appendix 3: Fitness to Practise Activities 2009-2010

This document sets out fitness to practise department activities in 2009-2010.

Appendix 4: Risk Register

This document sets out the risks managed by the fitness to practise department.

Appendix 1: Fitness to Practice Activities Table 2010-2011

Ensure accessibility and improve communication and information provision

Activity	Rationale	Description	Timescale	Role(s) responsible
Expectations of Complaints Research	Outcomes of Expectations of Complainants research and ensure HPC is providing appropriate information	Review and update Existing Publications and produce new publications where necessary - The fitness to practise process: Information for employers - What happens if a complaint is made against me? - How to make a complaint about a health professional - Information for witnesses - Reporting a concern form General review of relationship with employers including: - a referral form for employers - self-referral form for registrants Review structure and content of fitness to practise section of the HPC website Hearings DVD explaining how HPC FTP procedures operate General review of contact with witnesses	April – September 2010 June – December 2010	Lead Case Managers Lead Case Managers

			December 2010	Lead Case Managers and Lead Hearings Officer
				Head of Adjudication
			April – September 2010	Case and Witness Liaison Manager and Lead Hearings Officer
			June 2010	
Fitness to Practise Annual Report	Legislative requirement	Production of 2010-2011 Fitness to Practise Annual Report	April – June 2010 – write report	Lead Case Manager, Case Team 1
			June 2010 – seek committee approval	
			July 2010 – seek Council approval	

			September 2010 - publish	
Practice Notes	Aid to all parties that are involved in fitness to practise proceedings and ensure HPC proceedings remain open and transparent to all parties A Court of Appeal decision specifically referred to the provisions of Article 30(7), further guidance to panels is therefore required	Ensure all practice notes are kept up to date, remain fit for purpose and take account of relevant High Court or Court of Appeal Decisions Produce a practice note on how to apply Article 30(7) of the Health Professions Order 2001	Ongoing June 2010	Director of Fitness to Practise Lead Case Manager
Standard letters review	This is a key part of the way the fitness to practise department communicates. It is also required as part of the implementation of the case management system	Review of standard letters to ensure they remain fit for purpose	July 2010	Lead Case Managers and Lead Hearings Officer
Attendance at Employer events	Ensure awareness of how the fitness to practise process works	Attend and participate in the continuing series of employer events	December 2010	All

Effective Management and Development of Legislative and New Operational requirements

Activity	Rationale	Description	Timescale	Role(s) responsible
Implementation of an integrated case management system	Ensure HPC is able to continue to effectively manage all types of cases and hearing	- Initiate phase 2 of project - Analyse and design configuration of system - Build and test system - Complete User Acceptance Testing - Migrate data and integrate Electronic Document Records Management System (EDRMS), reporting tool and bundling tool	March 2010 – March 2011	Director of Fitness to Practise
Transfer of the Hearing Aid Council	Legislative requirement	Effective transfer of cases from the remit of the Hearing Aid Council to the HPC	April 2010	Lead Case Manager (Case Team 1)
Implementation of the requirements of the Protection of Vulnerable Groups and Safeguarding Vulnerable Groups act	Legislative requirement	Ensure HPC systems can capture and record barring numbers Review process of referring cases to the appropriate scheme	April – July 2010 Ongoing	Head of Case Management Director of Fitness to Practise
Review the approach the FTP team take towards Freedom of Information Act and Data Protection Act requests including evidence management	Increasing number of requests	Ensure the department has a clear and consistent approach to the management of such requests and ensure evidence is managed in accordance with those principals	April – July 2010	Director of Fitness to Practise

Partner Systems review	Ensure the effective management of the partner department	Contribute to the partner department's review of their processes and procedures	April – December 2010	Head of Adjudication and Director of Fitness to Practise
Revalidation	A major piece of work for the HPC	Provide relevant fitness to practise data to the revalidation project	Ongoing	Director of Fitness to Practise

Consistent and effective decision making

Activity	Rationale	Description	Timescale	Role(s) responsible
Work with the partner department to review the appraisal system used for panel members and panel chairs	Ensure that the systems to appraise partners work to their best effect	See Activity	April 2010 – April 2011	Director of Fitness to Practise
Panel Chair, Legal Assessor and Panel Member review and training days	Ensure effective decision making and that information is properly disseminated	Prepare and present review and training days for FTP partners	April – Panel Chairs May – New Legal Assessors July – Legal Assessors Ongoing for panel members	Head of Adjudication, Head of Case Management, Director of Fitness to Practise

Monitor updates in regulatory law	Ensure processes and polices accurately reflect changes in the law	Monitor updates in regulatory law to ensure that HPC policies and procedures properly reflect any relevant regulatory case law	Ongoing	Director of Fitness to Practise
Quarterly newsletter for fitness to practise partners	Ensure effective decision making and that information is appropriately disseminated	Send out a quarterly newsletter to fitness to practise partners providing them with information on new practice notes, regulatory case law and CHRE learning points	April 2010 July 2010 September 2010 December 2010	Head of Adjudication
CHRE learning points	Ensure cases are appropriately managed and that decisions are well reasoned	Feedback learning points from CHRE's review of the initial stages of fitness to practise decision making and from their Section 29 role to improve HPC's processes and procedures and to improve decision making	Ongoing	Director of Fitness to Practise
Qualitative review of decisions	Ensure effective decisions and feedback any learning from this into policy documents and feedback for stakeholders	Feedback learning from decisions to registrants and stakeholders and relevant policy documents and ensure decisions are of a high quality	Ongoing	Director of Policy and Standards, Director of Fitness to Practise
Implement mechanisms to quality control decisions	Ensure effective and high quality decisions	Implement mechanisms to quality assure decisions made by panels and members of the directorate	Ongoing	Head of Case Management Head of Adjudication

Ensure processes and procedures are working to their best effect;

Activity	Rationale	Description	Timescale	Role(s) responsible
Alternative methods to resolve complaints/ disputes		Work with the policy and standards department to consider alternative mechanisms to resolve of complaints/ allegations including: - A literature review of alternative dispute resolution and of mediation - A review of what other "complaints" organisations do to resolve complaints - Implementation of sifting tools - Review other mechanisms for complainant support - Review whether panels should provide "learning points" when they no case to answer an allegation	April – December 2009	Director of Fitness to Practise Director of Policy and Standards
Review occupational therapist health declarations	A high number of health declarations are from occupational therapists	Work with the professional body to ensure that there is an understanding amongst occupational therapists of the type of issues they need to declare to the regulator	March 2011	Head of Case Management
Review mechanisms of dealing with drink drive or drug convictions	Ensure that all cases are managed appropriately and investigated fully	Work with other organisations to assess whether any other information is requires in cases where registrants have been convicted of drink drive or drug offences	March 2011	Head of Case Management
Operating Guidance and decision making templates	Ensure that all cases are managed appropriately	Produce operating guidance and templates as required to aid the work of FTP employees and ensure the effective management of case	Ongoing	FTP Managers

Ensure Effective Management of Resources

Activity	Rationale	Description	Timescale	Role(s) responsible
Reappointment of Partners	A number of partner contracts are due to expire in July 2010	Undertake an exercise to reappoint (or not) existing panel members	April – July 2010	Head of Adjudication and Director of Fitness to Practise
Ongoing recruitment of partners	Ensure that there are enough partners to undertake the work of the department	Ongoing exercise to recruit partners	Ongoing	Head of Adjudication
Review "human resources" within the FTP department	Ensure that resources are managed to their best effect	Undertake a review to ensure work is appropriately managed in situations where there is an unanticipated increase in workload or absence	April 2010	Director of Fitness to Practise
Ongoing Skills audit of the FTP team	Ensure that resources are being used to their best effect	Take steps to ensure that all members of the team are appropriately trained	Ongoing	Head of Adjudication and Head of Case Management
Operational Forecasting	As above	Ongoing forecasting of the number of cases and hearings that are expected	Ongoing	Director of Fitness to Practise
Budgetary Controls	As above	Ensure effective controls are in place to manage the fitness to practise budget	Ongoing	Director of Fitness to Practise

Fitness to practise		Final Position 2008-09	6 Month reforecast 2009-10	December reforecast 2009-10	Forecast 2010-2011
Allegations Management	Allegations Received	483	660	757	818
	Ongoing Case Load	278	323	345	345
	Closed Cases (No ICP Panel)	115	146	174	194
	Allegations Managed	730	938	1035	1141
ICP Cases	Cases Considerd	363	514	516	646
	Concluded at ICP	355	514	516	646
	Referral rate	57%	58%	60%	53%
	Cases referred	206	298	310	343
Post ICP Cases	Ongoing Case Load	185	234	240	210
	Total Cases Instructed	382	514	520	583
	Number of Outstanding Reviews	90	106	106	149
	Concluded Cases	175	280	280	373
	Adjourned/Part Heard	50	92	92	93
	Review cases heard	92	86	94	121
	Interim Order Panels	85	0	126	148
Days of Hearing	Total Days of Final Hearing		588	599	745
	Total Days of Interim Orders		0	42	49
	Total Days of Review Hearings		43	47	60
	Days of ICP	49	70	71	81
	Registration Appeals	10	7	6	10
	Total All Hearings	**59**	**708**	**765**	**945**
	Allegations Managed per year		938	1035	1141
	Post Case to Answer Work				

Case Management Res

Review and consent Hearings presented In house		45	53	109
Interim Orders Presented		0	115	135
Conviction Casess		1	1	1
Witness Assessments		10	10	10
Witness Statements Workload (Days of case)		79	203	293
Review Hearings presentation and preparation		57	66	136
Interim Orders presentation and preparation		0	115	135
Conviction Cases presentation and preparation		2	2	2
Witness Assessments		20	20	20
Witness Statements		1	1	1
Total Working days per Case Manager	210	210	210	210
Case Managers required for presentation and preparation work	**1**	**0**	**1**	**1**
Carry over of Pre-ICP Cases	278	323	345	345
Cases to Panel per month	355	514	516	646
Increse in allocation of work per month(total)	22	23	29	25
Average length of case from receipt to ICP		7	7	6
Case Managers requred for allegations management		**15**	**17**	**16**
Total Case Managers/Case Support Officers required		**15**	**18**	**17**

Hearings Officers and Rooms

Lead Case Managers required		3	4	3
Working Days per Hearings Officer		210	210	210
Lieu per year per Hearings Officer		14		15
Days to Clerk per Hearings Officer		118		117
Days to fix per Scheduler		354		473
Hearings Officers required to clerk		5		7
Schedulers Required		2		2.25
Hearings to be Fixed		58		
Review Hearings to be Fixed		18		
Room K				179
Room J				210
Room D&G				164
Room D				65
Room G				65
Rooms at EA				100
Scotland, NI, Wales and other E				142
External Venue				20
POT				
Cases received	383	322		375
Carry over from previous year	103	103		103
Cases closed	330	365		418
Increase in cases per month				
Average open per month		61		70
Total cases managed	486	425		478
Health and Character				
Cases received	383	611		740
Outstanding H&C case load	50	75		75
Cases closed	358	626		755
Average open per month				
Total cases managed	433	686		815
Registration Appeals				
Cases received	55	50		50

	Outstanding Reg Appeal case load	27	29		29
	Cases to appeal panel	47	44		44
	Cases closed	49	44		44
	Total cases managed	82	79		79
Case Team Three requirements					
	Total Case Team 3case load	1001	1190		1372
	Cases per person per year (H&C, RA, POT)	286	298		343
	FTP cases managed	0	40		41
	COs required for case management	4	4		4
	Attendance at reg appeals	59	7		10
	Lieu days	3	3		3
	Field work	3	10		10
	Working days per Case Officer	210	210		210
	Case Officers required for other work	0	0		1
	Total Case Managers required	**4**	**4**		**5**
	Lead Case Manager	**1**	**1**		**1**
	Total Case Team 3	5	5		6
Administration Work					
	ICP bundles - (number of ICP days)	49	70		81
	Final hearing bundles	225	372		466
	Review hearing bundles	92	86		121
	IO bundles	85	0		148
	Appeal Bundles Alerts lists - every 2 months	6	6		6
	Website updated - every 2 weeks	26	26		26
	Catering orders - once a week	52	52		52
	Transcripts handled	451	528		816
	Hearing prep	451	528		816

	Travel bookings (how many on average per hearing) - 10 per month	120	420		420
	FTP cases to log	483	660		818
	H&C cases to log	383	611		740
	POT cases to log	383	322		375
	RA cases to log	55	50		50
	Archiving - every 2 months	6	6		6
	Other general admin - calls, emails, assisting CMs (in hours)		210		210
	Invoicing		6425		9907
Admin time/people required	in days				
	Bundle days		43		64
	Alerts lists days - every 2 months, 1/2 day per list	3	3		3
	Website updated days- every 2 weeks, 1 hour per week	2	0		0
	Catering orders - 2 hour per week	15	15		15
	Transcripts handled - 1 hour per week	7	19		29
	Hearing prep - 30 mins per hearing	32	38		58
	Travel bookings (how many on average per hearing) - 2 hours per booking	34	120		120
	FTP cases to log - 1 hour	69	94		117
	H&C cases to log - 30 mins	27	44		53
	POT cases to log - 30 mins	27	23		27
	RA cases to log - 30 mins	4	4		4
	Archiving - every 2 months, 1 day	6	12		13
	Other general admin - calls, emails, assisting CMs - 2.5 hours a day per person	186	90		90

Invoicing		214		330
Admin manager time		158		158
Total days	413	876		1081
Total working days per administrator	210	210		210
Total people required	**2**	**4**		**5**

Appendix 3: Fitness to Practise work plan update

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

Activity	Start date	End date	Progress report
Fitness to Practise Annual Report 2009-10	January 2010	September 2010	Work on the annual report will begin in early 2010 and conclude when the report is published in September 2010. The report will be presented to the FTP Committee for discussion and approval on 3 June 2010 and Council on 7 July 2010.
Witness Support Brochure	July 2009	Mid March 2010	The brochure has been approved by the Plain English Campaign and content agreed. Correspondence with the printers has now begun about the print. The brochure is expected to be received by the HPC in mid March 2010.
Fitness to Practise Hearings DVD	July 2009	June 2010	We have reviewed other similar productions and have produced our detailed requirements. The production of the DVD itself is a project for 2010
Practice Note Manual	June 2009	June 2009	A manual of Practice Notes is now available at every hearing in Park House or available electronically at hearings held externally. All practice notes were reviewed, updated or produced over the course of the summer and approved by the Council at its October meeting.

Activity	Start date	End date	Progress report
Signposting document	April 2009	August 2009 (revised on an ongoing basis)	Internal guidance was produced for the FTP team and made available in August 2009. The document will be kept under review and updated on a regular basis to ensure it remains current.
Consumer Complaints	April 2009	On-going	Meetings have taken place with the Policy team and around signposting and further meetings are planned particularly in relation to hearing aid dispensers. A paper on consumer complaints was considered by the Fitness to Practise Committee at its meeting in October 2009.
Attendance at Employer Events	November 2009	December 2010	Department members attended the employer events on 24 and 26 November and 1 and 2 December 2009 in London, Cardiff, Belfast and Glasgow. Similar events will be organised by the Communications department for 2010-2011. A number of other events have been attended by various members of the department over the course of the year including Independent Living Scotland, British Dietetic Association Conference, Biomedical Science Congress and NHS Employers.
Document Review	April 2009	Ongoing	Standard documents are kept under review. Many letters were updated in June/July 2009 to take account of the regulation of practitioner psychologists and further changes will be made in preparation for the on-boarding of Hearing Aid Dispensers. A more extensive review of standard letters will take place in 2010 to coincide with the Case Management system project.
Development of Service Level Standards	Ongoing	Ongoing	The FTP department service standards were presented to the FTP Committee in October 2009. Service standards have been monitored by the department on a monthly basis since April 2008 with consideration given to whether the standards need amending in light of the performance of the department.

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

Activity	Start date	End date	Progress report
Development of an integrated case management system	April 2009	April 2011	The project is proceeding in line with the project plan. All departmental processes have been documented and reviewed and a full review of the current systems has been undertaken. Vendor(s) have now been selected and the we are currently reviewing the terms and conditions for the solution. We are also developing our detailed functional and non functional requirements with a number of workshops having taken place between October 2009 and February 2010.
Transfer of the Hearing Aid Council	Ongoing	April 2010	Preparations are being made for the transfer of fitness to practice cases and meetings between the Hearing Aid Council and FTP representatives will continue to take place between now and 1 April 2010.
Transfer of the Practitioner Psychologists	Ongoing	July 2009	Internal guidance was produced for the FTP team on the management of cases transferred from the BPS and AEP. Standard letters and IT systems were updated to incorporate the new profession. Panel members were recruited and the majority have now been trained. Practitioner psychologist FTP cases were transferred to the HPC on 1 July 2009. In total 44 cases were transferred at various stages of the process with a number of those cases now concluded. The action taken in relation to the retransferred cases is as follows: • 3 cases with BPS conditions of practice at the time of transfer have been reviewed and HPC conditions imposed • 1 case has been concluded and the registrant admitted to the register with conditions or practice • 1 case had a preliminary hearing in January 2010, with the final hearing listed to take place in May 2010

			• 3 cases were adjourned/part heard in January 2010 and have been re-listed to conclude in March 2010 • 2 cases are listed for hearing in February and April 2010 • 13 cases transferred from the BPS with ongoing investigations have been considered by the Investigating Committee. No case to answer was found in 11 cases, 1 case was referred back for further information and 1 case was referred to the Conduct and Competence Committee • 12 cases have been closed as they do not meet HPC's standard of acceptance for allegations • 10 cases are awaiting consideration by the Investigating Committee
Implementation of the requirements the Protection of Vulnerable Groups and Safeguarding Vulnerable Groups Act	September 2009	On-going	We have attended number of meetings and briefings with the Independent Safeguarding Authority and the Protecting Vulnerable Groups Scheme in Scotland. Preparations, such as changes to the FTP database were made for the requirements that come into effect in October 2009. A practice note was produced and approved for managing barring allegations. Work is on-going in relation to the requirements that will come into effect in 2010, this includes the development of a number of assessment forms for referral decisions to be made.
Renewals Cycle Review	April 2009	October 2010	A definitive decision regarding the implementation of an alternative process will be made once until online renewals data has been gathered as this will have an influence on the decision whether or not to proceed with this project.
Improve Identity Checks	June 2009	Ongoing	The Registration Department have identified a third party provider to assist with validating registrant's qualifications and employment history, submitted with an application to the Register, and negotiations are underway to implement this new process
Initial Audit of Fitness to Practise decisions	November 2009	February 2010	The CHRE audit was scheduled to take place between 30 November 2009 and 12 January 2010, however finished in the week of 21 December 2009.

			The CHRE report is due to be published at the end of February 2010. It is anticipated that the report will be on the Council agenda for March 2010. An audit was also conducted by PKF in relation to the risks managed by the department and a selection of cases and a report was considered by the Audit Committee in December 2009. A paper is due to be considered by the Fitness to Practise Committee in February 2010.
Panel Member Appraisal	Ongoing		All panel chairs have been appraised. The Partners department are now sending out papers to other panel members for the 180 degree appraisals.

Fitness to Practise Objective –Consistent and effective decision making

Activity	Start date	End date	Progress report
Review Indicative Sanctions Policy	June 2009	December 2009	The policy was discussed and approved at the October 2009 Council meeting. Reviews from across the directorate have been fielded.
Impairment Practice Note		July 2009	This practice note was approved in April 2009 and subsequently updated and approved by the Council in October 2009.
CHRE learning points feedback		Ongoing	We ensure we update our documents with any relevant learning points. We also provide feedback from CHRE learning points in the FTP newsletter. The lead hearings officer also provided feedback to the individual panel members and legal assessors where appropriate.
Monitor updates in regulatory law		Ongoing	We continually monitor this to ensure changes are appropriately reflected in all of our documents. We also provide feedback from this to the legal assessors.
Panel Chair, Legal Assessor and Panel Member Review Days		Ongoing	A review day for panel chairs is planned for early 2010. The last legal assessor review day took place in September 2009. All but 14 panel members have attended refresher training days and the next tranche of training for 2010 is currently being planned.
Appointment and training of new panel members, panel chairs and legal assessors		Ongoing	Seven panel chairs were appointed after interviews in April 2009. We have also appointed a number of new panel members. Practitioner psychologist panel members were appointed and trained and are have begun sitting on panels. Hearing Aid Dispenser panel members have also been trained. An advert for legal assessors closes on 05 February 2010 to cope with the increase in the number of hearings.
Quarterly newsletter for fitness to practise partners		Ongoing	A quarterly newsletter is circulated to all FTP partners raising a range of issues, updates and areas of learning.

Activity	Start date	End date	Progress report
Quality Assurance of Decisions		Ongoing	Mechanisms to formalise existing processes to quality assure panel decisions are currently being explored. In association with the work undertaken on not well found cases this work should feed into refresher training sessions and further review of FTP Practice Notes.

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

Activity	Start date	End date	Progress report
Complainant Expectations research	April 2009	March 2010	A research brief was issued and IPSOS MORI commissioned to undertake the work. The research proposal was finalised interviews and discussion groups took place in October and November 2009. The research and a work plan for the implementation of the recommendation will be considered at the Fitness to Practise Committee in February 2010.
Develop and Implement Sifting tools	April 2009	December 2010	A review was undertaken and resulted in the redrafting of the Allegations practice note which will be considered by the Fitness to Practise Committee in February 2010.
Suspended registrants	October 2009	December 2010	This area of work will be taking place in early 2010.
Produce, develop and refine Fitness to Practise Operating Guidance	Ongoing	Ongoing	A number of FTP operational guidance documents have been drafted and updated. New guidance documents include public or private hearings, vexatious complaints, file structure, taking complaints over the phone and signposting.
Keep under review the length of time it takes cases to conclude	Ongoing	Ongoing	Monthly reports are produced on the length of time cases take to reach various stages in the FTP process. A paper will be considered by the Fitness to Practise Committee in February 2010.
Review Service Level Standards	Ongoing	Ongoing	As above

Fitness to Practise Objective – Ensure Effective Management of Resources

Activity	Start date	End date	Progress report
Skills Audit	April 2009	Ongoing	Training has been identified and accounted for in the 2010/11 budget.
Long term training plan	April 2009	March 2010	Members of the team have completed the following training this year to date: • Contact management (all) • Understanding psychological therapies (all) • Team away day focusing on communication and insight (all) • Time management • Leadership/management • Personal development • Equality and diversity • Advocacy • Transfer of psychologists Further training will take place in relation project management, facilitation and the on-boarding of hearing aid dispensers later in the year. An internal FTP induction programme has been developed to standardise the induction given to new employees. Generic and individual training needs for the coming year have been reviewed and incorporated into the budgets for 2010/11. This includes BTEC in investigative practice, assertiveness, time management and team leadership and management.
Budgetary controls	Ongoing	Ongoing	We have completed the tender for transcription writer services.

Fitness to Practise

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations February 2010	Likelihood before mitigations February 2010	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2010	RISK score after Mitigation September 2009
13	Fitness to Practise	13.1	Legal cost over-runs	FTP Director	4	4	16	Processes and strict arrangements with law firm suppliers	Professional Indemnity Insurance	Good process management for arranging hearings	Low	Low
			Links to 13.4, 15.2									
		13.3	Tribunal exceptional costs, FTP, Registrations and CPD Appeals	FTP Director	5	5	25	Quality of operational processes	Quality of legal advice	Legal insurance	High	High
		13.4	Rapid increase in the number of tribunals and resultant legal costs	FTP Director	3	3	9	Accurate and realistic budgeting	Resource planning	-	Low	Low
			Links to 13.1									
		13.5	Witness non-attendance	FTP Director	4	2	8	Vulnerable witness provisions in the legislation	Witness support programme	Witness summons	Low	Low
		13.6	Employee/Partner physical assault by Hearing attendees	FTP Director	5	5	25	Advice sought from the Police	Adequate facilities security	Periodic use of security contractors and other steps	Low	Low
		13.7	High Number of Registration Appeals	FTP Director & Director of Operations, Head of Registrations	3	5	15	Training and selection of Registration Assessors, so reasoned decisions are generated	Quality of operational processes	-	Low	Low

Human Resources Department 2010 – 2011 Workplan

Contents

Introduction

This document sets out the work priorities of the HR Department for the financial year April 2010 – March 2011. It addresses how the department will progress over the next year to support the HPC's business strategy and objectives, to encourage high employee and partner performance, and to support the HPC's positive working culture and commitment to continuous improvement. The organisation is growing and as with previous years, there will be a focus on recruiting employees and partners with the appropriate competencies to fulfil all roles.

Staffing Resources

The Human Resources Department consists of the following posts:

<u>HR Team</u>
Teresa Haskins   Director of Human Resources
Rachel Watson   Human Resources Manager
Sam Ha   Human Resources Co-ordinator (on maternity leave)
Marche Wilson   Human Resources Administrator (secondment to cover
                           Sam Ha's maternity leave)
<u>Partners Team</u>
Kathryn Neuschafer   Partner Manager (part time)
Deborah Dawkins   Partner Co-ordinator
Hanna Crease   Partner Administrator

A second partner administrator post has been included in the 2010 – 2011 budget. This new post will be essential to the implementation of an adequate partner appraisal system.

The **Director of Human Resources** is responsible for the overall management of the HR and partner functions, and the development and implementation of HR and partners strategies, workplans, policies and projects.

The **Human Resources Manager** is responsible for the whole range of operational human resources services including recruitment, management of sick leave, management of conduct and capability cases, higher level HR database management, and providing an advisory service to managers and employees.

The **Human Resources Administrator** provides support for employee management functions including co-ordination of recruitment and training, conducting inductions and exit interviews, dealing with first line queries and maintaining database and filing systems.

The **Partner Manager** is responsible for the day to day management of the partner team and ensuring that the partner budget and partner objectives in the HR workplan are delivered to schedule. Her duties include reviewing and implementing partner policies and procedures and working closely with departmental managers who make use of partners.

DateVer.Dept/CmteDoc TypeTitle**Status**Int. Aud.

				2010-03-02	a	HRD
STRAT	2010 workplan	Final DD: None	Internal RD: None			

The **Partner Coordinator** is responsible for coordinating the recruitment, selection, training and performance management of partners and ensuring that partner processes are run effectively and in accordance with policies and good practice.

The **Partner Team Administrator** is responsible for the administration and customer service to partners for recruitment, selection, training, appraisal and assessment. She also maintains the partner databases and data sources.

Budget Management

The department manages both the human resources budget and the partner budget. The human resources budget for 2010 – 2011 totals £516,133. Headline areas consist of £40,000 for organisation wide training, £25,000 allocated to legal expenses for employment related matters and £190,000 for organisational recruitment.

The partner budget of £387,919 largely consists of provisions for partner recruitment and training. Two significant sums forming part of this figure are £47,225 allocated for partner recruitment, and £224,442 for training.

Human Resources activities in 2010 - 2011

The following paragraphs summarise the main employee and partner activities for the coming year.

Employees

Recruitment, selection and induction will continue to form a significant part of the department's workload. Employee numbers now total 131 and along with vacancies which arise as a result employee turnover, there are 9 new permanent posts requested in the 2010-2011 budget.

- Management Accountant   1
- Partner Administrator   1
- Lead Case Manager   1
- Scheduling Officer   1
- Case Support Officers   3
- Hearings Officer   1
- Case Manager   1

         Total   9

Review of Pay Policy and Process: Planning, communication with employees and line managers and implementation of a new pay system in time for April 2011 will take up a significant amount of the HR Director's and the HR department's time in the coming financial year.

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				2010-03-02		a	HRD
STRAT	2010 workplan	Final DD: None	Internal RD: None				

Support, advice and training for managers and employees will continue to occupy the team. There are training requirements in a number of areas (for example some in house HR training, project training for project leads, management development training).

Completion of an **employee engagement survey** and taking appropriate action based on the results is another key objective for 2010 – 2011.

There will always be challenging **employee relations** issues to deal with in any HR department including occasional management of employment tribunal claims. 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.

There are various **ongoing activities** that are part of the employee section of the human resources plan every year including:

- annual job description updates
- review of employment policies and practices to ensure best HR practice and legal compliance
- conducting exit interviews and analysing findings
- managing the annual performance review process in the final quarter of each year.
- Informing and consulting with employees about employment related issues

Partners

The core functions of **recruitment, selection and training** will continue to occupy the majority of the partner team's resources in 2010-2011. Replacement recruitment is anticipated across the Visitor, Panel Member and Registration Assessor roles and additional Fitness to Practice partners will be recruited to accommodate the increased activity in this area. Refresher training, which partners normally undergo every two years, will take place for all roles which fall due in 2010 - 2011.

Partner **appraisals and assessment** will be taking on an increased focus. The panel member appraisals will continue to be rolled out and the appraisal process for Visitors and Registration Assessors will be implemented.

In 2010-2011 80% of all partner agreements are due for renewal. Panel Member and Panel Chair **reappointments and agreement renewals** for other categories of partners are key objectives for the first half of the year.

The **partner systems review project** will also be a key objective for the Department.

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 Scheme.**

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				2010-03-02		a	HRD
STRAT	2010 workplan	Final DD: None	Internal RD: None				

Human Resources Objectives in 2010 - 2011

We have identified the following objectives for the financial year 2010 – 2011. Unless stated otherwise the timescale is on-gong throughout the year.

Employees Objective 1: Facilitate Employee Engagement

- Carry out an employee engagement survey (last survey carried out in 2008) and take appropriate action in response to the findings.

- Continue to provide support and advice to the new Employee Consultation Group.

- Continue to carry out exit interviews with leaving employees, report on trends and take appropriate action in response to key trends

Employees Objective 2: Support Training and Development

- Improve central co-ordination and provision of training and development including development of an organisational training plan to include shared learning needs, evaluation and training indicators (training spend per employee, no of days training per employee)

- Investigate and implement a practical programme of management development for line manager's people management, coaching and leadership skills

- Continue to co-ordinate annual training on diversity, appraisals and IT skills

Employees Objective 3: Improve Pay Processes and Policies

- Design a new pay system, plan implementation, communicate with employees and line managers about the system, train line managers and implement the new system within the required budget in time for the April 2011 pay review (by January 2011)

Employees Objective 4: Ensure Best Practice and Legal Compliance

- Continuously review employment policies and practices to ensure that they comply with current legislation and best HR practice

- Continue to provide HR advice to managers to enable them to get the best out of their people

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				2010-03-02		a	HRD
STRAT	2010 workplan	Final DD: None	Internal RD: None				

Employees & Partners Objective 5: Demonstrate Commitment to Equality and Diversity

- Work with and advise the Diversity Working Group on specific projects

- Continue to provide diversity training to all new employees and partners

- monitor and report on employee and partner diversity statistics

Partners Objective 6: Revise and improve the partner agreement prior to issuing it to all partners whose agreements expire in 2010-2011

- Gain Finance and Resources Committee and Council's approval for the proposed changes to the partner agreement

- Issue revised agreements to partners whose current agreements are due to expire (by 4th June)

Partners Objective 7: Manage Refresher Training to all partners who are due to be retrained in 2010-2011

- All Panel Members, Panel Chairs and Legal Assessors
- 80 Visitors
- Registration Assessors – Practitioner Psychologists

Partners Objective 8: Manage Partner Recruitment and Induction for the following partners:

- Lay and profession specific Panel Members, Legal Assessors
- Visitors
- Registration Assessors

Partners Objective 9: Continue to administer Partner appraisals and performance management as follows:

- Appraisals for 10 Panel Members per month
- Appraisals for 5 Registration Assessors per month from July 2010
- Visitor Appraisals across 4 Annual Monitoring Days and 23 visits (April – July 2010) plus further Annual Monitoring Days (October 2010 – March 2011) and Visits (Sept – March 2011)
- Roll out the FTP partner reappointment process and evaluate its effectiveness (by 30 April)
- Evaluate the effectiveness of Panel Member appraisals and make recommendations for improvements

Partners Objective 10: Partner Systems Review Project Stage 1

- Complete stage one of the Partner Systems Review major project by carrying out a review of all partner data sources across departments (Partners, Fitness to Practice, Education, Registrations and Finance) and identifying and designing a solution to eliminate issues identified (April to November 2010)

Partners Objective 11: Improve Communications with Partners

- Review information provided on the partner web pages and investigate the potential for other forms of communication with partners such as a newsletter

2011 - 2012

Employee and partner numbers are likely to increase in 2011 - 2012, which will lead to further recruitment and training in both areas.

One of the main objectives for the HR function in financial year 2011 – 2012 is likely to be a review of the effectiveness of a new pay system, and possibly further work on refining pay and performance management systems. Further development of organisational training and management skills is likely to be needed, building on work done in 2010 -2011.

A major area of work for the partners team will be carrying out Stage 2 of the partner Systems Review Project. In addition the team will continue to review partner appraisal processes to ensure they are an effective tool, and build on partner communications work commenced in 2010 - 2011 Partner refresher training will continue across all roles.

Human Resources Activities in the Past Year 2009 - 2010

The HR team underwent a period of significant change during the financial year 2009 – 2010 with staffing changes in all three roles. A new Director joined the HPC in April 2009, a new HR Manager in November 2009 and a new HR Team Administrator in February 2010. In spite of these changes the HR team managed to deliver the full range of operational functions, make service improvements and identify key requirements for policy and process change.

The Partner team's main areas of focus in 2009-2010 were partner recruitment and training, particularly for Continuing Professional Development (CPD) Assessors across eleven professions. In addition the team started to administer panel member appraisals, as well as identifying major areas for improvement such as partner agreements, renewal processes and data systems.

A review of the eight major objectives for 2009- 2010 is set out below.

Employees Objective 1: To continue with our agreed development and implementation of a pre-existing agreement under the Information and Consultation of Employees Regulations (2004).

This objective was fully achieved as follows:

- An Employee Consultation Group has been set up to operate under the terms of a pre-existing agreement. The agreement has been finalised, employee representatives have been trained, and the group has met three times.

Employees Objective 2: To progress and build on the provision of organisational training

This objective was partly achieved as follows:

- We continued to co-ordinate annual training on diversity and appraisals;
- We took over responsibility for arranging organisation-wide IT training (this was previously managed in the IT department).

Work on management development was not progressed due to employee turnover within HR and the need for the Director to focus on the more pressing need of reviewing the pay system.

Employees Objective 3: To maintain and improve our levels of Customer Service to managers and employees

This objective was fully achieved as follows:

- We worked with the IT department to design and introduce an electronic system for new starters to replace paper forms
- We have continued to carry out exit interviews with leaving employees and assembled an annual report on trends

Partners Objective 4: To address partner training needs

This objective was fully achieved as follows.

- All newly appointed CPD Assessors and Panel Chairs were trained
- All new Partners for the new professions of Practitioner Psychologists and Hearing Aid Dispensers were trained
- All new Panel Members for the professions of Arts Therapists – Music and Paramedics were trained
- 180 Registration Assessors attended one day refresher training
- Refresher training was held for some Panel Members and Visitors and all Legal Assessors

DateVer.Dept/CmteDoc TypeTitl**eStatusInt. Aud.**

				2010-03-02	a	HRD
STRAT	2010 workplan	Final DD: None	Internal RD: None			

Partners Objective 5: To recruit and select the numbers and types of partners required for the HPC to perform its functions.

This objective was fully achieved as follows.

- CPD Assessors were recruited for eleven professions to enable assessment of all required CPD profiles as they fell due by profession.
- All partner roles required in anticipation of the on-boarding of Hearing Aid Dispensers were filled.
- Practitioner Psychologists targeted by role and modality were recruited to cover specific shortages.
- Recruitment was undertaken in the following roles as a result of resignations or to increase partner numbers; Panel Chairs, Registration Assessors; Prosthetists and Orthotists and Clinical Scientists-Clinical Physiology.

Partners Objective 6: To ensure that the HPC is fulfilling best practice in terms of performance management of partners

This objective was partially achieved as follows:

- 50 Panel Members were appraised.
- A process to assess Panel Members and Chairs prior to reappointment was approved by Council and will be rolled out in 2010
- No Visitors or Registration Assessors were appraised due to insufficient resource in the Partners function. An additional post has been requested in the 2010-2011 budget to address this issue.

Partners Objective 7: To better manage our resources internally and potentially provide a better customer service externally to our partners.

This objective was fully achieved (other than investigation of partner communications which slipped due to lack of capacity, but which will be carried out in 2010-2011)

- A proposal to scan all paper based partner files into a database was explored and rejected in favour of developing a proposal for a major project to review partner data sources and develop an integrated solution
- Paper based filing systems were reviewed and are being restructured to improve information access and retrieval
- A system to monitor numbers and reasons for partner resignations has been implemented
- a succession planning exercise was conducted by writing to all partners and asking them if they anticipated leaving their roles within the next three years.

Employees and Partners Objective 8: To ensure that we fulfil our obligations under the overall Equality and Diversity scheme

This objective was fully achieved as follows:

- The rolling programme of diversity training for all new employees continued;
- Work with the Equality and Diversity Group continued
- An analysis of employee and partner diversity statistics was presented to the Finance and Resources Committee in July 2009
- Improvements have been made in the process for capturing diversity information from both applicants, employees and partners
- All new Panel Chairs, Panel members and Visitors underwent Equality and Diversity training.
- By the end of March 2010 we will have set up a timetable to ensure that Equality and Diversity training is included in partners' refresher training at appropriate intervals.

Risk Management

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

Please see the Appendix 1 for the HPC Employees and Partners risk assessments

HR (Employees) RISK ASSESSMENT February 2010

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations February 2010	Likelihood before mitigations February 2010	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2010		RISK score after Mitigation September 2009
11	HR	11.1	Loss of key HPC employees	Chair, Chief Executive and EMT	4	4	16	Chief Executive succession plan held by HR Director. Succession planning generally.	Departmental cross training (partial or full) and process documentation		Low		Low
		11.2	High turnover of employees	HR Director	3	2	6	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	2	2	4	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	4	3	12	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										

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations February 2010	Likelihood before mitigations February 2010	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2010		RISK score after Mitigation September 2009
		11.5	Health & Safety of employees	Chief Executive & Facilities Manager	5	4	20	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	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
		11.7	Employee and ex-employee litigation	HR Director	4	3	12	Regular one on one sessions between manager and employee and regular performance reviews.	HR legislation and HR disciplinary policies	Employee surveys, Exit Interviews	Low		Low
		11.8	Employer/ employee inappropriate behaviour	HR Director	4	4	16	Whistle blowing policy, Code of Conduct & Behaviour	Other HR policy and procedures	Employee Assistance programme	Low		Low
			Links to 11.3										
		11.9	Non Compliance with Employment legislation	HR Director	5	2	10	HR Strategy	Obtain legislation updates and legal advice	HR policies and Manager training	Low		Low

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Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations February 2010	Likelihood before mitigations February 2010	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2010		RISK score after Mitigation September 2009
6	Partners	6.1	Inability to recruit and/or retain suitable Partners	Partner Manager	4	4	16	Sound recruitment strategy. Training	HR Strategy: Appropriate compensation package in place.	Regular appraisal system	Low		Low
			Links to 4.10, 11.3, 7.3, 18.1										
		6.2	Incorrect interpretation of law and/or SI's resulting in CHRE review	Director of FTP, Director of Education, Head of Registration, Partner Manager	5	2	10	Training	Legal Assessors advice availability	Regular appraisal system	Low		Low
		6.3	Health & Safety of Partners	Partner Manager	4	2	8	H&S briefing at start of any HPC sponsored event.	Road Safety policy (for vehicle drivers).	Personal Injury and Travel insurance. Liability Insurance	Low		Low
			Links to 4.9, 11.5										
		6.4	Partners poor performance	Director of FTP, Director of Education, Head of Registration, Partner Manager	4	4	16	Regular appraisal system	Regular training		Low		Low

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Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations February 2010	Likelihood before mitigations February 2010	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2010	RISK score after Mitigation September 2009
		6.5	Incorrect interpretation of HPO in use of Partners	Director of FTP, Director of Education, Head of Registration, Partner Manager	3	2	6	Correct (robust) selection process and use of qualified partners	Effective process allocating partners to specific functions; Visits, Hearings etc	Accurate and up-to-date Partner list	Low	Low

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Information Technology Work plan 2010 – 2011

Contents

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 commissions 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
PC…………………………….…...	Personal Computer
User	Individuals who use an IT service

Introduction

The Health Professions Council (HPC) continues to transform 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.

In order to achieve the primary purpose of the HPC, to "safeguard the health and wellbeing of persons using or needing the services of registrants", the current business strategy identifies six business objectives which embed the three central themes 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 the primary purpose 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 continues to be achieved as we deliver 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. The overall aim of the IT function is to improve efficiency and effectiveness whilst delivering value for money. These aims will be achieved through a risk based approach adopting 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 2010-2011. 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.

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 Service Support Analysts. Additionally, the role is responsible for maintaining and developing our bespoke database applications providing email and specialist application services.

The IT Service Support Analyst role 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 2010/2011 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 2010/2011 work plan assumes an operating budget of £1,042,000 and a capital budget of £141,000. This represents approximately a 10% increase in operating expenditure and an 86% increase in capital expenditure as compared to the 2009/2010 budget.

The increase in budget predominantly reflects the transfer of costs from other HPC budget centres to the IT budget (£80,000 Opex, £12,000 Capex), the increased running costs with the introduction of the Online Renewal system (£114,000 Opex) and the purchase of Microsoft desktop software (£50,000 Capex).

Budget (,000)	2008/2009 (actual)	2009/2010	2010/2011
Operating expenditure (excluding depreciation)	£820	£944	£1,042
Capital expenditure	£83	£76	£141

Achieving the IT Objectives in 2009 - 2010

Progress against the objectives set for 2009 – 2010 can be summarised as:

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. **Achieved.**
- 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. **On plan, due for delivery by the end of March 10.**
- Continue to identify opportunities to consolidate infrastructure hardware and software to reduce support overhead and duplicated data silos. **Achieved and ongoing.**
- Implement the Independent Safeguarding Authority phase 1 Major project. **Achieved.**
- Implement the NetRegulate Improvements Major project to affect a number of discrete changes within the Registration system to improve function. **Small changes have been implemented throughout the year although the major project was postponed following the revised release date of the Online Renewals project.**

- Review the IT Network and Server infrastructure to consolidate where possible to reduce support overhead. **Achieved by implementing a virtualised environment for secure access, Test and Production environments.**
- Review key contracts to ensure value for money services. **Ongoing but external hosting service contracts were reviewed and changed accordingly.**

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. **Achieved.**
- Implement the IT aspects of the Stannery St building project phase 2. **Achieved.**
- Implement the Registration of Practitioner Psychologists to the HPC register. **Achieved.**
- Implement the Registration of the Hearing Aid dispensers to the HPC register. **The project continues on plan with a transfer date of the 31 March 2010.**
- Support the Fees 2011 Major project for changes to the HPC renewal fees. **Achieved.**
- Support the Renewal Cycle Review Major project to identify the business case and possible implementation for altering the Renewals cycle for professions. **Achieved.**
- Reduce the number of data and functional silos, consolidating application requirements to support generic business functions across teams and directorates. **Ongoing. There has been consolidation with the www.healthregulation.org web site transferred to our main web site infrastructure as well as the replacement of the renewals pack request service and the contact details update service by the online renewals application.**

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. **On plan, due for delivery by the end of March 2010.**

- Implement a Laptop technology refresh addressing obsolete hardware, improving usability, strengthening security and maintainability. **On plan, due for delivery by the end of March 2010.**
- Review the options for encrypting the backup for the NetRegulate application and if appropriate implement a relevant strategy. **Postponed.**
- Implement a service improvement to the HPC network by segmenting the network to reduce contention, improve performance, security and maintainability. **On plan, due for delivery by the end of March 2010.**
- Network drive encryption review and implement. **Management of the encryption services has been centralised, the laptop encryption software has been upgraded and software to control the writing of data to USB sticks deployed. The network encryption software is not yet mature and will be revisited in 2011-2012.**
- Conduct quarterly independent penetration tests of our environment to assure adequate security controls. **Achieved.**
- Conduct a quarterly audit of our license compliance by a third party organisation. **Achieved, although the audit has been changed to annually.**

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. **Achieved.**
- Refine the incident and problem management processes to efficiently process support requests. **Achieved.**
- Implement the new Service desk tool to support new ITIL processes and the Service desk function. **This has been delayed following issues with the software purchased. It is now expected to be delivered by the end of March 2010.**
- Develop a configuration management database to support effective execution of the problem and change management processes. **Ongoing.**
- Realign the published service levels to better reflect the organisation need against the service catalogue. **Postponed due to delays in the implementation of the Service Desk tool. The Service levels are reliant upon accurate statistics being generated from the service desk to support the performance indicators.**
- Document service catalogue and agreed software list; place under change control. **Achieved.**
- Develop effective availability management processes supporting the IT infrastructure. **Achieved.**

Timescale March 2010

Information Technology Activities in 2010 - 2011

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

2. 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. IT training book library
      ix. Private Papers Document Store
      x. Partners Database
      xi. Meeting room/ resource database
      xii. Registration - Temporary Registration Database
      xiii. Secretariat – Document management system
      xiv. Secure transmission of print files.

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

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

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

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

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

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

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

10. Financial Purchase Order service
    Availability, capacity and performance management of the PRS Financial purchase order system.

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

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

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

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

15. Purchase Order service
    Availability, capacity and performance management of the PRS purchase order system.

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

17. Service Desk
    Respond to and resolve Incidents, Problems and Requests for Change within the IT infrastructure.

18. Video Conferencing
    Availability, capacity and performance management of the video conference

function (excluding the video equipment which is supported by Facilities).

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

New Services for 2010/2011
1. *Fitness to Practice system.*

Development

In 2010/2011 the following Major and Small projects will be supported and/or delivered by the IT department.

Major Projects
- MP45 - Credit card handling outsourcing (PCI/DSS)
- MP46 - Education systems and process review
- MP43 - Fees 2011
- MP36 - FTP Case Management system
- MP4 - Hearing Aid Council
- MP31 - Independent Safeguarding Authority (Applicants)
- MP44 - Independent Safeguarding Authority (Registrants)
- MP49 - Linking Register to Electronic Staff Records (ESR) Project
- MP50 - NetRegulate System Improvements
- MP47 - Partner Systems review
- MP48 – Registrant publication preferences

Small Projects
- DP1 – Sage 200 improvements
- DP2 – Purchase Minitab15
- DP3 – Notes development of ISO 9001 system to integrate with the intranet
- DP4 – Notes development of customer services tracking system
- DP14 – Implementing a controlled virtual infrastructure
- DP15 – Windows 7 preparation
- DP16 – Doc XP upgrade
- DP17 – Extension of HPC network to EA
- DP18 – Telephony system development cycle
- DP19 – Blackberry server upgrade
- DP20 – NetRegulate backup encryption
- DP21 – Remote access security
- DP22 – Upgrade MITEL controller
- DP24 – Education system small changes

Achieving the IT Objectives in 2010 - 2011

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:

- Continue to identify opportunities to consolidate infrastructure hardware and software to reduce support overhead and duplicated data silos;
- Upgrade our existing Microsoft SQL Server databases to a new version to retain support and improve IT continuity provision;
- Support the registrant publication preferences project to improve the method by which HPC support alternative printing formats for individual registrants e.g. Braille;
- Implement an upgrade to the Scanning solution of the Registration system to apply software fixes to a number of known errors;
- Implement a controlled virtual infrastructure to reduce the proliferation of physical servers and reduce the incidents of application conflicts;
- Support the implementation of small changes to the Sage 200 Financial general ledger system to improve departmental efficiencies; and
- Support the NetRegulate Improvements major project to affect a number of discrete changes within the Registration system to improve function.

Timescale March 2011

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 major project to enhance service and reduce organisational risk within key FTP processes;
- Support the Education systems and process review project to enhance service and reduce organisational risk;
- Implement the Registration of the Hearing Aid dispensers to the HPC register;
- Implement the Independent Safeguarding Authority major projects for applicants and registrants;
- Extend the HPC network to the Evangelical Alliance building to enable employees to work effectively;
- Support the Fees 2011 Major project for changes to the HPC renewal fees;
- Manage a telephony system development cycle to implement a prioritised list of changes to improve the effectiveness of the system;

- Implement an upgrade to the Mobile Personal Mailing Service (Blackberry) to improve maintainability and security;
- Support the linking of the register to electronic staff records (ESR) at the NHS (England and Wales);
- Replace the Mitel 3300 telephony controller to retain support and apply new telephone functionality;
- Manage the application of a prioritised list of small changes to the Education, Approvals and Monitoring system;
- Support the Partner systems review project to enhance service and reduce organisational risk;
- Prepare for the upgrade of the desktop operating system by auditing and replacing applications that are not certified with Windows 7;
- Implement the Minitab business intelligence tool to support the Operations team provide higher quality statistical information;
- Support the Operations team to deliver changes to the intranet to improve the ISO 9001 system and customer services tracking system; and
- Reduce the number of data and functional silos, consolidating application requirements to support generic business functions across teams and directorates.

Timescale March 2011

Information Technology Objective 3:

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

- Support the project to outsource credit card handling to reduce organisation risk of fraud;
- Review the options for encrypting the backup for the NetRegulate application and if appropriate implement a relevant strategy;
- Review and implement a two factor security mechanism for remote access to the HPC information technology services;
- Conduct quarterly independent penetration tests of our environment to assure adequate security controls; and
- Conduct an annual audit of our license compliance by a third party organisation.

Timescale March 2011

Information Technology Objective 4:

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

- Refine the processes and develop reporting for the new Service desk tool to support new ITIL processes and the Service desk function;

- Continue to build the 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; and
- Refine the availability management processes supporting the IT infrastructure.

Timescale March 2011

Information Technology activities for 2011 - 2012

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;
- Upgrade the PC operating system to Windows 7;
- Review the IT policy;
- Review for the next 4th generation Registration system; and

We will also support the Major projects which are expected to include:

- The technical implementation of the Education System;
- On boarding of new professions, potentially:
    - Acupuncture, Traditional Chinese Herbal Medicine and Herbal Medicine;
    - The Outcome to Modernising Scientific Careers (MSC);
    - Dance Therapists
    - Psychotherapists and Counsellors;
    - Assistance practitioners.
- Independent Safeguarding Authority implementation phase 3;
- Online Renewals Project phase 3;
- HR and Finance systems consolidation review;
- Purchase Order system review;
- Newsletter emailing;
- Telephony system review;
- Implementation of the Partner system review.

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

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
Operations	2.10	Telephone system failure causing protracted service outage	Director of IT	4	3	12	Support and maintenance contract for hardware and software of the ACD and PABX	Backup of the configuration for both the ACD and PABX	Diverse routing for the physical telephone lines from the two exchanges with different media types	Low	Low
IT	5.1	Software Virus damage	Director of IT	4	5	20	Anti-virus software deployed at several key points. Perimeter controls enabled.	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	Delivery of the IT strategy including the refresh of technology	Employ mainstream technology with recognised support and maintenance agreements	Accurately record technology assets.	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

	5.4	Failure of IT Continuity Provision	Director of IT	4	3	12	Annual IT continuity tests	IT continuity plan is reviewed when a service changes or a new service is added	Appropriate and proportionate technical solutions are employed. IT technical staff appropriately trained.	Low	Low
	5.5	Malicious damage from unauthorised access	Director of IT	4	2	8	Security is designed into the IT architecture, using external expert consultancy	Regular externally run security penetration tests	Periodic and systematic proactive security reviews of the infrastructure. Application of security patches in a timely manner. Physical access to the IT infrastructure restricted and controlled.	Low	Low
Education	7.5	Education database failure	Director of IT	3	2	6	Effective backup and recovery processes	In house skills to support system	DR/BC tests	Low	Low
Registration	10.2	Protracted service outage following a NetRegulate Registration system failure	Director of IT	5	3	15	Effective backup and recovery procedures	Maintenance and support contracts for core system elements	Annual IT Continuity tests	Low	Low
HR	11.1	Loss of key HPC employees (person cover risk)	President, Chief Executive and EMT	4	4	16	Chief Executive succession plan held by HR Director. Succession planning generally	Departmental cross training (partial or full) and process documentation		Low	Low

		Risk	Owner	Impact	Likelihood	Score	Internal Control	Additional		Current Risk	Target Risk
	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 progress reviews	Low	Low
Policy and Standards	14.4	Inadequate preparation for a change in legislation (Health Professions Order, or other legislation affecting HPC)	EMT	3	1	3	EMT responsible for remaining up to date relationships with governemnt depts and agencies	HPC's 5 year planning process	Legal advice sought	Low	Low
Finance	15.2	Unexpected rise in operating expenses	EMT	3	1	3	Budget holder accountability for setting budgets and managing them. Timely monthly reporting and regular budget holder reviews held. Finance & Resources Committee review of the monthly variances, year to date accountability.	Six and nine month reforecasts with spending plan revisions as feasible and appropriate.	Legal cost insurance for FTP cases. Capped FTP legal case costs.	Low	Low
	15.3	Major Project Cost Over-runs	EMT	4	2	8	Effective project specification including creating decision points. Effective project management and timely project progress reporting (financial and non financial).	Creation of a project capex contingency budget. Project exception reports including revised funding proposal is presented to EMT for approval.	Finance & Resources Committee review of the project spendng variances to date	Low	Low

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Data Security	17.1	Electronic data is removed inappropriately by an employee	Director of IT	5	3	15	Employment contract includes Data Protection Agreement	Adequate access control procedures maintained. System audit trails.	Laptop encryption. Remote access to our infrastructure using a VPN . Documented file encryption procedure	Low	Low
	17.3	Loss of electronic data held by third party suppliers in the delivery of their services	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.	Data transfer using file level encryption. Physical transfer of back up tapes using specialist company with locked boxes and sign out procedure.	Remote access to our infrastructure using a VPN. Access to third party infrastructure using agreed secure methods.	Low	Low

<p style="text-align:center">Contents</p>

1. Introduction

1.1 This document

This document has been drafted to set out work priorities for the financial year 2010/2011 and to provide a basis against which the work of the Policy and Standards Department ('the Department') can be planned, resourced and measured.

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 2010/2011 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.

1.4 Resourcing

The Department currently consists of five employees:

Michael Guthrie	Director of Policy and Standards
Megan Scott	Policy Manager
Charlotte Urwin	Policy Manager
Alison Dittmer	Policy Officer
Unfilled position	To be confirmed

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 Managers often take particular responsibility for a broad area of work and the projects in that area (e.g. standards) or work across different areas, taking responsibility for more complex projects or pieces of work and supporting the work of the Director of Policy and Standards. One of the existing Policy Managers is working predominantly on the revalidation project (see section 6.1).

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. Their work comprises both responsibility for small projects and assisting the Policy Managers in undertaking tasks within their area of responsibility.

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. Projects delivered in 2009/2010

This section outlines some the projects successfully delivered in the last financial year.

Standards and guidance

- The review of the standards of education and training was concluded with new standards and guidance becoming effective from the 2009/10 financial year.

- Amendments to the standards of proficiency for chiropodists and podiatrists to make the standards relating to anaesthetics and prescription only medicines compulsory were implemented.

- The review of the generic standards of proficiency was commenced.

- A minor amendment was made to standard five of the standards for continuing professional development.

- Guidance on health and character and on conduct and ethics for students was published.

- A review of the first standard of the standards of education and training, the threshold level of qualification for entry to the Register, was commenced.

New professions

- The Department continued to participate in the cross-department project to bring practitioner psychologists into regulation. Standards of proficiency and the threshold level of qualification for entry to the Register for practitioner psychologists were agreed and standards published.

- The psychotherapists and counsellors PLG continued to meet, a consultation was held on the report of the PLG and the Council made initial conclusions about the potential regulation of psychotherapists and counsellors

- A consultation was held on the potential regulation of dance movement therapists and recommendations made to the Secretary of State for Health and Scottish Ministers as a result.

- The Department continued to participate in the cross-department project to bring hearing aid dispensers into regulation. The Department attended and delivered presentations at a number of meetings and events.

- The Council considered a paper discussing the outcome and implications of the Department of Health Extending Professional Regulation Working Group report. This fed into the Council's February strategy workshop where the Council considered papers looking at influencing the agenda; the purpose of the new professions process; and the licensing of support workers.

Other

- A consultation was held on removing the health reference requirement for entry to the HPC Register.

- A Welsh Language scheme was developed and agreed for consultation.

- The Department co-ordinated HPC's CHRE performance review submission for 2009/2010 and participated in a number of CHRE projects.

- A project plan was put together for work to explore revalidation and a number of pieces of work completed, including commissioning the University of Durham to undertake qualitative and quantitative studies looking at the link between pre-registration education and training and subsequent fitness to practise action.

- The Department responded to 9 external consultations and 9 HPC external consultations were either commenced or concluded in 2009/2010.

- The Department attended numerous meetings with stakeholders and delivered presentations on a number of different topics including revalidation, CPD, the regulation of practitioner psychologists and the potential regulation of psychotherapists and counsellors.

3. Policy and Standards and the strategic intent

The Department has a number of broad aims which link to the strategic objectives outlined in the Council's strategic intent for 2009/10 to 2014/15.

3.1 Strategic objectives and Department aims

The strategic objectives particularly relevant to the work of the Policy and standards Department in the projects it undertakes (and in joint working and supporting the work of other Departments) are:

- To increase understanding and awareness of regulation amongst all stakeholders.
- To build the evidence base of regulation.
- To proactively influence the policy agenda on regulation reforms.
- To ensure that our values and processes dovetail with the respective healthcare delivery agendas in England, Wales, Scotland and Northern Ireland.

The HPC, through the work of the Policy and Standards Department, seeks to contribute towards the fulfilment of these strategic objectives by achieving the following broad Department aims. These are grouped below under the headings of improve, influence and promote – the overarching 'themes' acknowledged in the introduction to the strategic intent.

Through the work of the Policy and Standards Department the Council aims to:

Improve:
- To continue to respond to changes in the external environment including the recommendations of the White Paper 'Trust, Assurance and Safety: The Regulation of Health Professionals in the 21st Century', published in February 2007, the recommendations of the Council for Healthcare Regulatory Excellence (CHRE).

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

- 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 gather and analyse information collected via the consultation process, stakeholder engagement and other means and act upon it appropriately. This could include, for example, widely disseminating the outcomes of policy development or formal research to potentially interested stakeholders, feeding this information into the Communications strategy, and / or making changes to processes where appropriate.

- 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.

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

4.1 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 three years ago, the White Paper still remains an important driver for developments and debate in the professional regulatory arena, and hence for the Department's work.

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

- Revalidation

- Post-registration qualifications

- Removing the health reference as a requirement for entry to the Register

- Professional indemnity insurance

- Regulation of new professions

- Review of the new professions process

The White Paper said that a number of areas would be subject to further review in 2011, including changes of the regulators' governance arrangements and the number of regulators. 2010/11 is therefore an opportune time for the Council to review its progress against the conclusions and recommendations outlined in the White Paper and this is included as a piece of work in this workplan.

5. 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 Review of the generic standards of proficiency

In September 2009 and January 2010 a small group of the Education and Training Committee met to review the generic standards of proficiency. In doing so, the group took into account the comments on the existing generic standards we had received in recent consultations, including consultations on standards for practitioner psychologists and for psychotherapists and counsellors.

At its meeting in January 2010 the group considered whether minor changes were necessary to the existing standards or whether, in light of the feedback we received, more substantial changes were necessary. The group recommended to the Education and Training Committee an approach which would see the generic standards become more overarching and top level. The existing profession specific standards could then be augmented to include some of the existing detailed generic standards and to revise terminology to express standards in the correct profession-specific language.

The Education and Training Committee agreed and recommended to the Council the next steps for this piece of work at its meeting in March 2010. The Council will be asked to ratify the Education and Training Committee's decision at its meeting in March 2010.

Timetable

The ongoing timetable for this work is subject to Council approval. However, the outline timetable is as follows:

- A public consultation on the key generic standards between mid July and mid October 2010.

- Approval of new standards following consultation – December 2010.

- January 2011 to 2013 – rolling process to review profession-specific standards, consult and implement new standards.

4.1.2 Threshold level of qualification for entry to the Register
Standard one of the standards of education and training sets out the normal threshold level of qualification necessary for entry to the Register. Each time a new profession is regulated a consultation is held on the proposed threshold level for the group and the standards updated.

The Education and Training Committee and the Executive have identified that the purpose and function of the threshold level should be reviewed, in light of previous discussion by the Committee and at PLG and Council level, and in light of responses received to previous consultations about setting the level for new professions.

A number of points have been raised about the existing standard including:

- The purpose of the existing standard and its role in delivering safe and effective practice and public protection. In particular, how meaningful the standard is given its normative status.

- The factors to be taken into account in setting the threshold level for a new profession. In particular, whether it is possible to read across from the standards of proficiency to establish the level necessary to successfully deliver those standards.

- The question of whether the standards should be expressed in terms of levels linked to qualification frameworks rather than by the names of academic awards.

- The factors to be taken into account in considering whether the threshold level for an existing profession should be raised.

At its meeting on 10 March 2010 the Education and Training Committee did not reach a final decision as to the next steps of the review. A further paper is planned for the June 2010 meeting of the Committee.

Timetable
The timetable for this work is subject to the discussion and future decisions of the Council and Education and Training.

However, any change to the standard would require a public consultation and it will important to involve key stakeholders, including education providers, professional bodies and visitors, in any further work in this area.

4.1.3 Health psychologists' standards of proficiency

The standards of proficiency for practitioner psychologists were published in July 2010. The standards were put together by a Professional Liaison Group and revised following a publication consultation which ran from December 2007 to February 2008. The standards include standards which apply to all seven domains of psychology practice and standards which are only applicable to each domain. For example, there are profession-specific standards which are applicable to health psychologists only.

The Division of Health Psychology of the British Psychological Society has raised an issue about one of the profession-specific standards for health psychologists only. The standard currently reads 'be able to integrate and implement therapeutic interventions based on a range of evidence-based models of formal psychological therapy, including the use of cognitive behavioural therapy'.

However, it has emerged that, although cognitive behavioural therapy may be one of the therapies covered in health psychology pre-registration education and training, it is not a routine or compulsory part of that entry education and training.

Although we would normally avoid making changes to the standards of proficiency until the end of a new profession's grandparenting period, the current standard has the potential to cause unnecessary difficulties in the approval of education and training programmes and in other processes in which the decisions are made using the standards.

In 2010/2011 a short consultation will take place on a proposal to amend this standard to read: 'be able to integrate and implement therapeutic interventions based on a range of evidence-based models of formal psychological therapy'.

Timetable

Subject to the approval of Council, a consultation will take place for 3 months from April 2010, with the Education and Training Committee and Council asked to consider the outcomes of the consultation at their meetings in September or October 2010.

Subject to the outcome of the consultation, the change to the standard might be effective from the date of the Council's decision.

4.2 Guidance

4.2.1 Whistleblowing

At its meeting on 20 May 2009 the Council considered a paper which outlined a small number of recent concerns raised about service standards in NHS hospitals. The paper also referred to a fitness to practise case considered by the Nursing and Midwifery Council (NMC) which had received some media attention.

The Council agreed to consider producing guidance on whistleblowing / reporting concerns, subject to a further paper on the topic. Since the Council's decision, the NMC has undertaken work with a range of stakeholders looking at this issue and is consulting on draft guidance. The Executive plans that the Council should consider a further paper on this topic which will include looking at the NMC's draft guidance and considering whether similar HPC guidance would be appropriate or necessary.

Timetable
The Council will consider a discussion paper at its May 2010 meeting.

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 psychotherapists, counsellors and healthcare scientists as the next professions that are the highest priority for regulation. Practitioner psychologists became regulated by the HPC on 1 July 2009.

The report of the Department of Health Extending Professional Regulation working Group was published in July 2009 and discusses future government policy in extending regulation to new groups. This is likely to influence the Council's strategic thinking and the work of the Department in the coming year.

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 interested in regulation or 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. External developments in the areas of new professions may be relatively limited in the coming financial year given a likely May 2010 general election.

5.1 New professions

5.1.1 Hearing aid dispensers

Hearing aid dispensers (also known as hearing aid audiologists) are a profession currently regulated by the Hearing Aid Council (HAC). The required Section 60 Order under the Health Act 1999 has now been approved by parliament; the Hearing Aid Council is due to be abolished and its professional regulatory functions transferred to the HPC on 1 April 2010.

The Council has agreed the standards of proficiency, threshold level of qualification for entry to the Register and 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 the regulation of this profession. This has included close liaison with the Hearing Aid Council, producing frequently asked questions for the website, delivering training for registration advisors and supporting the Communications team in delivering the communication strategy.

In 2010/2011, hearing aid dispensers will be HPC registered. The Department will continue to support internal colleagues and liaise with stakeholders in the field in the period following the registration of hearing aid dispensers.

Timetable
Ongoing early 2010/2011.

5.1.2 Psychotherapists and Counsellors

A Professional Liaison Group (PLG) was established in 2008 to discuss and make recommendations to the Council about the regulation of psychotherapists and counsellors. The PLG met five times over 8 days to make recommendations about the structure of the Register, protected titles, voluntary registers, grandparenting, education and training and standards of proficiency. A consultation was held on the conclusions and recommendations of the PLG between July and October 2010.

At its meeting in December 2010, the Council discussed the responses to the consultation and agreed a number of initial conclusions about how psychotherapists and counsellors might be regulated (subject to a policy decision by Government and subsequent parliamentary approval). The Council also identified a number of areas which needed to be explored further, including the issue of differentiation between psychotherapists and counsellors and whether those practitioners qualified to work with children and young people should be specifically identified in the structure of the Register. The Council also identified that further work would be necessary on standards of proficiency, after the completion of the current review of the HPC's existing generic standards of proficiency.

At its March 2010 meeting, the Council will consider a workplan for any future meetings of the PLG and any future stakeholder engagement work.

Timetable
The timetable for this work is subject to the Council's discussion and decision at its March 2010 meeting.

5.1.3 Healthcare scientists

In 2008/2009, the Council responded 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)

The Modernising Scientific Careers project is still ongoing.

In 2010/2011, 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.

5.1.4 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 November 2009, the Department responded to the Department of Health consultation on the regulation of these groups. The consultation followed the publication of the report of the Department of Health Extending Professional Regulation Working Group and looked broadly at the regulatory options including statutory regulation and a licensing model.

In 2010/2011, the Department of Health may publish the outcome of the consultation and indicate the potential future direction of government policy in this area.

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

Timetable
Ongoing 2010/2011.

5.1.5 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.

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

Timetable
Ongoing 2010/2011.

5.2 Review of the new professions process

The Council has to date considered 12 applications for the regulation of new professions, and has recommended all of these groups for regulation to the Secretary of State for Health. In the same period, only two new professions have come on to the HPC Register.

The report of the Extending Professional Regulation Working Group was published in July 2009 and looks at the question of how decisions about extending regulation should be made. In particular, the report suggests a new 'Gatekeeper' role to decide on the basis of a thorough assessment of risk and readiness for regulation, the relative merits of regulating different groups. The response to the report from Ministers in the four countries made no conclusions about the feasibility of such a role, but did conclude that the HPC should continue its process for considering readiness for regulation in the interim period. In late 2009, the Finance and Resources, Communications and Education and Training Committees and the Council considered a paper from the Executive discussing the potential implications for the HPC and the new professions process of the Extending Professional Regulation report.

The Council also considered a paper about the purpose and future role of the new professions process at its February 2010 strategy workshop.

In 2010/2011, the Department plans to review the new professions process, new professions criteria and guidance notes in light of the Council's experience of handling applications from aspirant professions and changes to the external environment. This will include reviewing whether the current arrangements for considering applications directly from representative organisations should continue; reviewing the relevance and 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 the agreement of the Council but the following outline timetable is anticipated:

- Council – July 2010 meeting. The Council will be asked to consider a paper about the overall approach to the review and will be asked to discuss and agree in principle the process that should be followed in making recommendations about the regulation of new professions.

- September and December 2010 meetings. The Council will consider subsequent papers reviewing the existing criteria and guidance.

- A consultation might be held on the revised new professions process, criteria and guidance early in the 2011/2012 financial year.

5.3 Aspirant professions liaison work

In 2009/2010, the Council considered two applications via the new professions process and recommended the regulation of both groups.

The Department also liaised with a number of aspirant professions about the new professions criteria. At the time of writing, at least two further aspirant professions were in the process of putting together an application to the Council.

Throughout 2010/2011, the Department will continue to liaise appropriately with aspirant groups. This includes responding to requests for meetings, identifying groups to meet with and drafting information for publication on the HPC website. 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, provide feedback on draft applications where helpful and will score the application against the 10 existing new professions criteria to aid the Council's consideration.

Timetable

Ongoing 2010/2011.

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.

In May 2009, the HPC received a grant of £360,000 from the Department of Health to explore the evidence which will inform any revalidation system; and the potential feasibility of possible models of revalidation. A Policy Manager is in place to deliver the revalidation project.

The following projects form part of that work. Some of the projects are ongoing from 2009/2010.

- The link between conduct during pre-registration education and training and subsequent fitness to practise action (external research commissioned in 2009/2010).
- Piloting a pre-registration education and training 'professionalism tool' (external research commissioned in 2009/2010).
- Analysis of HPC's fitness to practise data to identify trends regarding fitness to practise concerns across the Register.
- Analysis of HPC's CPD audit profiles to identify trends regarding CPD profiles and assessment results across the Register
- Literature review of the fitness to practise of the professions regulated by the HPC.
- Literature review of the fitness to practise trends regarding professions other than those regulated by the HPC.
- Review of existing revalidation processes that have been implemented by international regulators.
- Review of existing revalidation processes that have been implemented or are being developed by other regulators.
- Review of patient feedback tools currently being developed by other health regulators.

The content of these projects is set out in more detail in the Council paper 'Revalidation project update' (10 December 2009). However, some of the key activities involved include managing relationships with externally commissioned researchers; collating data from the fitness to practise process and from the outcomes of CPD audit; undertaking desk research; meeting

with other regulators and professional bodies to discuss revalidation; undertaking a fact-finding trip to regulators in north America; and producing project briefs, papers and reports at regular intervals for the Council.

Timetable
The timetable for this project is ongoing through 2010/2011.

Some key milestones are:

- Successful delivery of a qualitative study looking at the link between pre-registration education and training and subsequent fitness to practise action; reports from initial stages of quantitative study piloting the use of professionalism measures – by end of 2010/2011.

- Successful delivery of research looking at data from CPD audits and fitness to practise data – ongoing and by end of 2010/2011.

- Fact-finding trip undertaken to international regulators to explore other models of revalidation; a full report will be written and presented to the Council - trip by June / July 2010; report by September 2010.

Regular updates will be provided to the Council.

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.

At is meeting in March 2010, the Education and Training Committee will be asked to agree an approach in this area. In particular, the Committee will be invited to consider whether the Executive should begin to undertake work to explore the feasibility of annotating the Register for podiatric surgeons and neuropsychologists.

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'. The CHRE has also been commissioned by the Department of Health to look at the issue of distributed regulation with a report due in April 2010. These reports will be taken into account in the planned work in this area.

Timetable

The Education and Training Committee agreed a timetable for this work at its meeting in March 2010, including a further paper in June 2010 and a subsequent consultation on an approach to making decisions about the annotation of the Register; and a proposal that qualifications in podiatric surgery and neuropsychology might be annotated on the HPC Register.

The Council will be asked to ratify the Education and Training Committee's decision at its March 2010 meeting.

6.3 Removing the health reference as a requirement for entry to the Register

At its meeting in November 2009, the Education and Training Committee agreed to consult on a proposal to remove the existing health reference requirement for entry to the Register and replace it with a self-declaration. This decision was made as a result of review of the existing requirement and in light of reports by the Disability Rights Commission (replaced by the Equality and Human Rights Commission) and the Council for Healthcare Regulatory Excellence into health and registration.

If agreed, this change would bring the requirement for entry to Register into line with the existing requirement for renewal of registration. The consultation opened on 4 January 2010 and will close on 9 April 2010.

Timetable
A timetable for this work has been agreed by the Education and Training Committee and the Council.

The Education and Training Committee and the Council will consider the outcomes of the consultation at their meetings in June and July 2010. If the change is agreed, a further consultation would be held from August 2010 on relevant amendments to the 'Guidance on health and character', with implementation of the change anticipated in February / March 2011.

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.

In early 2009 the Department of Health indicated that it might seek to introduce compulsory professional indemnity insurance for the professions regulated by the HPC in forthcoming legislative amendments. In March 2009 the Council considered a paper from the Executive on professional indemnity insurance and the Council identified a number of potential problems if a compulsory requirement was to be introduced.

In May 2009, following concerns raised about the impact that a compulsory requirement might have upon independently practising midwives, the Department of Health decided to review its policy. A review group has been established and a member of the Executive has attended a stakeholder meeting. The timetable for the review includes further engagement with stakeholders early in 2010 with a report to the Secretary of State in May 2010.

If the Department of Health introduces legislation to make professional indemnity insurance a compulsory requirement, the Policy and Standards Department will work with the Operations Department to ensure that the HPC is compliant with the new legislation in a timely manner.

Timetable
The Executive will continue to attend and participate as appropriate in any further meetings on this issue. A further paper will be brought to the Council following the publication of the review group's report.

6.5 Welsh language scheme

In 2009/2010 the Executive undertook work to develop a Welsh language scheme for HPC. The draft scheme brings 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.

The Council approved a draft scheme for consultation at its meeting in February 2010. This work was delayed because of a delay in gaining the necessary approval from the Welsh Language Board. It is anticipated that the consultation will take place between April and June 2010 with final sign off at the September 2010 Council meeting.

Timetable

A three month consultation will take place following Welsh Language Board approval. The HPC is required to ensure that the consultation document is available in both English and Welsh.

Following the consultation the results will be analysed and the Council invited to invite to approve a final copy of the scheme. The consultation analysis and final scheme will need to be approved by the Welsh Language Board prior to publication.

6.6. Review of fitness to practise decisions

At its meeting on 25 February 2010, the Fitness to Practise Committee approved an approach to reviewing the decisions reached by panels of the Practice Committees.

The review is aimed at providing a systematic way through which the Executive can review the decision making quality of panels, including checking adherence to the applicable law and to HPC policy in a given area, rather than 'second guessing' or 'going behind' the decisions of panels. It is hoped that this assessment might feed into refresher training for panels as well as flagging areas where further policy development would be helpful.

The review will involve completing an audit form for each decision. The audit forms will then be reviewed a report written.

The forms reviewing case to answer decisions by the Investigating Committee will be completed by the relevant Fitness to Practise Case Manager. The report on those forms will then be written by a member of the Policy and Standards Department

The forms reviewing final panel decisions will be completed by a member of the Policy and Standards Department who will also write a report against those forms.

This project will assist the Fitness to Practise Department to review an important part of its work by providing a more 'arms length' assessment of decisions reached by panels.

Timetable
Ongoing 2010/2011.

Reports are planned for the Fitness to Practise Committee in November 2010.

6.7 Health for health professionals
In 2008, the Department of Health in England established a working group looking at health issues for professionals which affect their ability to practise. This work has been primarily focused on establishing a pilot specialist health referral service for doctors. The aim is that early intervention will prevent health problems from deteriorating and affect doctors' ability to remain in practise. The working group consisted of a broad range of stakeholders including regulators and employers and the HPC was represented on this group by Chair of the Council.

The report of the working group should be published in March or April 2010. Whilst the pilot project is focused on doctors, the report is likely to make more general conclusions about the regulators' approach to issues related to health. Following the publication of the report the Executive plans to produce a paper for the Council discussing the implications of the report for the HPC.

Timetable
A paper will be considered by the Council following the publication of the health for health professionals report.

6.8 Alternative mechanisms for resolving disputes
At its October 2009 away day the Council discussed the potential role of mediation or alternative dispute resolution (ADR) in fitness to practise proceedings. The Council discussed the purpose of mediation and identified a number of questions and issues that might need to be explored further. The Fitness to Practise Department has identified this as a subject on which further research might be helpful.

The topic of mediation, its role in fitness to practise proceedings and the suitability of HPC's fitness to practise proceedings has also been the subject of recent debate in the psychotherapy and counselling field.

This piece of work will look broadly at alternative ways of resolving disputes or complaints between registrants and the public, including, but not limited to, exploring processes for mediation and ADR. This work will explore whether such arrangements have a place in the fitness to practise process or whether there are other steps that the HPC could take in order to help 'resolve' issues and concerns about registrants which fall short of impairment of fitness to practise.

Timetable
This work will include:

- An externally commissioned literature review of the material available in this area. This will include exploring any evaluations of the benefits

and usefulness of the mediation, ADR and conciliation processes adopted by other organisations. It is planned that the literature review will be completed by August 2010.

- A stakeholder engagement event is planned for September 2010. This event is planned to build upon the discussion of the Council at its away day in October 2009 by holding an event to engage with a wider group of stakeholders across the professional regulatory field, which might include professional bodies; patient and consumer advocacy groups; and other regulators, both professional and service related, in healthcare and elsewhere. The event would be discursive and deliberative in nature with the aim of seeking the wider views of the professional and regulatory field on the principle of mediation, ADR and other ways of resolving disputes, as well as debating the challenges of implementing such approaches. It is planned that this event will take place in late September 2010.

- The Policy and Standards Department and Fitness to Practise Department will work together to carry out ongoing reviews of no case to answer and not well founded decisions. This will assist in identifying those cases where an alternative method of resolving complaints might be helpful. It is planned that this should be ongoing with a report to the Fitness to Practise Committee at its November or December 2010 meeting.

- Following the delivery of the points above and on the previous page, the Executive will consider the outcomes of the project and put together a discussion paper for the Fitness to Practise Committee in November / December 2010 looking at the various options and recommending the next steps.

6.9 Fees rise consultation
The current registration fee is £76 per year. The Council is required to consult each time it proposes to change the level or structure of the registration and scrutiny fees. An amendment to the Registration and Fees (Rules) Order of Council 2003 is also required before any change to the fees can be implemented.

The Finance and Resources Committee and the Council considers the five year plan each year and keeps under review whether changes to the current fee levels are necessary.

If a fees rise is proposed, the Department will work with internal colleagues to put together a consultation document. It will also analyse the responses to any consultation and present the findings to the relevant Committees and to the Council.

Timetable
Subject to decisions taken by the Finance and Resources Committee and the Council.

6.10 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 meetings, providing additional information as required, and approving the final report(s).

The CHRE is consulting from January to April 2010 on revised standards and process for the performance review. The changes proposed appear relatively minor and include moving the standards to a more outcome-based approach. If agreed, the new standards and process would apply for the 2010/2011 performance review.

Timetable
The Executive will respond to the CHRE consultation in April 2010.

The performance review for the financial year 2010/2011, if similar to that of last year, will involve submitting the initial report to CHRE in December 2010, with the results of the review being published in June / July 2011.

6.11 CHRE commissions and projects
The CHRE is often commissioned by the Department of Health to produce reports on regulatory topics and also undertakes projects which arise from the performance review.

Typically the CHRE will either seek to meet with members of the Executive to discuss the project they are undertaking or will invite the regulators to respond to a series of questions, normally based on a CHRE discussion paper. The CHRE will then consider all the responses before producing a final report which is published on their website. Submissions are normally written by the Policy and Standards Department with input from colleagues in other Departments. The Education and Training Committee and the Council have considered papers as a result of the CHRE reports in the last year.

The Executive has responded to the following CHRE projects:

- Protecting the public from unregistered practitioners
- Should the regulators receive the outcomes of student fitness to practise committees
- Maximising the contribution of regulatory bodies' registers to public protection
- Distributed regulation
- Healthcare for people with disabilities
- Handling complaints – sharing the registrant's response with the complainant
- How regulatory bodies approach the problem of data misuse

- Scope for sharing functions amongst the regulators
- Advanced practice
- Regulatory bodies health requirements for registrants
- Quality Assurance of Undergraduate Health Education

Timetable
Ongoing – The Department will continue to participate in CHRE projects and will update the Education and Training Committee and the Council as appropriate. In particular:

- The Education and Training Committee will consider a paper on the CHRE report on receiving the outcomes of student fitness to practise committees at its meeting in June 2010.

- The Council will consider a paper on the CHRE report on the registers of the regulatory bodies at its meeting in May 2010.

6.12 European Union

In 2009/2010, 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 in the past been made to the Education and Training Committee and the Council.

In 2010/2011, 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 strategy / workplan document articulating the objectives that the Council seeks to achieve in its work in Europe and outlining any ongoing work to meet those objectives.

Timetable
Ongoing 2010/2011.

6.13 Stakeholder liaison

The Department will continue to work with the Chief Executive, and the Communications Department 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 one or more of the four countries 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 2010/2011, the Department is likely to continue to work with the Communications Department to continue regular visits to stakeholders in the four countries. These contacts are complementary to the regular meetings with government representatives from all four home countries undertaken by the Chief Executive and Chair of the Council.

Timetable
Ongoing 2010/2011

6.14 Continuing Professional Development (CPD) sample profiles

The Department will continue to work with the professional bodies to produce sample profiles. We have now published at least one sample profile for 13 parts of the HPC register (with the exception of practitioner psychologists). However, we have not to date published sample profiles for art or music therapists.

Profiles are drafted by professional bodies and then checked by a member of the Department and three volunteers from 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.

We are currently working with the representative organisations in the following professions to produce sample profiles:

- Art therapists
- Dietitians
- Hearing aid dispensers (due to become regulated by the HPC 1 April 2010)
- Music therapists
- Practitioner psychologists
- Clinical scientists (cytogeneticists)

Timetable
Ongoing 2010/2011.

6.15 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. The Department will keep the Council informed of developments in this area as appropriate.

Timetable
Ongoing 2010/2011.

6.16 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.

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.

Timetable
Ongoing 2010/2011.

6.17 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 Chair of Council, other Council members and the Chief Executive in undertaking external meetings and speaking commitments.

In 2010/2011 the Department aims to produce a small number of 'briefing papers' on discrete topics in order to ensure that policy developments are widely disseminated. For example, we plan to produce a briefing note on the structure of the NHS in England, Scotland, Wales and Northern Ireland in order to assist other colleagues in their interaction with stakeholders and ensure that the appropriate terminology is used. 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 need and the other projects outlined in this document.

6.18 Review of White Paper recommendations
The 2007 White Paper identified a number of areas, including the governance arrangements of the regulators and the number of regulators which should be reviewed by 2011.

As the White Paper is now four years old, 2010/2011 seems an appropriate point for the Council to review the conclusions and recommendations of the White Paper; to review the progress made by Government / the HPC in relation the conclusions and recommendations; and to review whether any further work is necessary.

The Council will be asked to discuss a paper which will look at all the conclusions and recommendations against the progress made and work undertaken by the HPC to date.

Timetable
A paper will be drafted for the Council meeting in September or October 2010.

7. Department improvements

In 2010/2011 the following pieces of work are planned to review and improve the operation of the Department:

7.1 Review of consultation methodology and analysis

In May 2008 the Council considered a paper from the Executive reviewing the HPC's consultation process. The Council agreed a series of principles for future consultation work as a result. The Executive also made changes to the information about consultations available on the website and put together a more standardised format for information about HPC and consultations for inclusion in consultation documents.

In 2009/2010 the consultation on psychotherapists and counsellors received more than 1,100 responses. We have also seen a general increase in responses to other consultations where the topic is widely applicable across the regulated professions. As the HPC regulates more professions it is likely that the number of responses received to consultations will continue to increase overall and it is important that arrangements are put in place to allow for thorough quantitative and qualitative analysis. The current approach can be very resource intensive if high volumes of responses are received.

In 2010/2011 the Department plans to internally review the approach used by the Department to formally consult with stakeholders to improve the way in which the Department undertakes analysis of consultation responses.

The Department intends to undertake the following pieces of work:

- To review the implementation of the points agreed by the Council in May 2008 and check whether any other operational changes are necessary.

- To put together a template / internal policy document to standardise further the content and format of HPC consultation documents.

- To review the way in which consultations are currently formally conducted. In particular, respondents are currently asked to respond in writing, by email or post. Some other organisations create forms for respondents to complete and send back, or have some kind of online form that respondents can paste or write their answers into and submit directly. These approaches may be helpful in increasing the accessibility of the consultation process as well as making consultation analysis easier to undertake. The Department will consider the feasibility of these approaches, as well as considering whether software packages aimed at consultation analysis would be helpful.

- To review and put together a template / internal policy document to standardise the content, format and approach adopted in putting together HPC consultation response documents. The approach used in

consultation analysis and the format and content of consultation responses documents has evolved over time and is often tailored towards the individual consultation and the number of responses received. However, this has also led to some inconsistency in approaches between employees and between consultations. The Department plans to review the consultation response documents put together since the Department was created in 2005 and to work towards developing an internal policy to ensure a flexible but consistent approach.

Timetable
By end of 2010/2011.

7.2 Standard format for policy reports and papers

The format of policy and standards reports and papers to the Committees and the Council has evolved over a period of time.

Whilst the overall standard of reports and papers has increased over time and papers are generally well received by the Council and its Committees, there is some inconsistency. In addition, as Council and Committee papers are subject to increasing scrutiny by external stakeholders it is important that papers are clear and comprehensive.

In 2010/2011, the Department will produce an internal policy document to standardise the format for policy and standards reports and papers.

Timetable
By end of 2010/2011.

7.3 Auditing responses to emails to the policy inbox and producing standard responses to questions

The Department is responsible for the policy@hpc-uk.org and consultation@hpc-uk.org inboxes. The inboxes are managed by the Department's two policy officers who answer the emails, escalating more complex enquires to the Policy Managers or Director of Policy and Standards as appropriate. The Department aims to respond to emails within five working days of receipt.

In 2010/2011, we will continue to audit responses to emails to the policy inbox and to produce internal guidance / standard responses to questions to ensure consistency.

Timetable
Ongoing.

8. 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.

In past years the Department has provided the lead for the HPC's Equality and Diversity Scheme. In 2010/2011, the Department will support the work of the Internal Equality and Diversity Working Group. In 2010/11 the Working Group will be compiling a progress report which will report on progress in meeting the action points contained within the scheme over the past year.

The existing scheme expires in early 2011 and the Working Group aim to present a new scheme outlining actions for the following three years at the Council meeting in March 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, 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.

9. 2011 – 2013

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 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 2011 to 2013 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. Building the evidence base of regulation is one of the Council's key strategic objectives.

New professions
The area of new professions will continue to be a significant project area for the Department in 2011 to 2013.

In particular, on present timescales, it is anticipated that the regulation of psychotherapists and counsellors and healthcare scientists may occur during this period.

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.

Appendix 1

Policy and Standards Department Standards workplan

2010/2011

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. It should be read in conjunction with the workplan.

This document was first approved by the Council December 2006, and has been revised for 2010/2011. 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, 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.

- The Council aims to engage with and consult 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.

1.3.2 Influence and promote

- The Council aims 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.

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.

The Executive will be undertaking a project in 2010/2011 on post-registration qualifications. Subject to decisions by the Education and Training Committee and the Council, the Executive may develop additional standards related to post-registration entitlements.

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 registrants 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 for CPD. Since 2008, the Council has audited registrants to ensure that they meet the standards. The Council will shortly publish the first annual report for CPD, which includes information on the audit process and the outcomes of the process.

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.

Registrants 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 was 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 dispensers 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 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 consultation was held between July and October 2009 on the proposed statutory regulation of psychotherapists and counsellors. This included a consultation on draft standards of proficiency. The outcomes of the consultation were considered by Council in December 2009.

- A consultation was held between July and October 2009 on proposals for the regulation of dance movement therapists. This included a consultation on draft standards of proficiency. The outcomes of the consultation were considered by Council in December 2009.

- A joint consultation with the Hearing Aid Council on standards of proficiency for hearing aid dispensers was held in 2008, in advance of the opening of the Register on 1 April 2010. These standards were agreed by the Council in February 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.

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 registrants 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 review 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.

- 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. The changes were subsequently agreed and the standards were effective from September 2009.

- 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 was held on a proposed minor change to standard five of the CPD standards. This change was agreed and is now effective.

- A consultation will shortly be held on a minor amendment to the standards of proficiency for health psychologists.

- A review group was established in September 2009 to review the generic standards of proficiency. The recommendations of the review group are being considered by the Education and Training Committee and Council in March 2010.

- A paper was brought to the Education and Training Committee on standard one of the standards of education and training, the threshold level of qualification. Depending upon the outcomes of the discussion, further work may be undertaken to review or amend this standard.

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
- A disabled person's guide to becoming a health professional
- Confidentiality – guidance for registrants

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 registrants making individual decisions which are informed and reasonable.

Where a need for guidance might be identified, but such guidance would not be sufficiently substantial to justify separate published guidance, the Executive might

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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.

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.

- Guidance on the health and character process was published in January 2010.

- Guidance on conduct and ethics for students was published in January 2010.

- The Executive will be undertaking a project in 2010/2011 to identify discrete areas within the standards of conduct, performance and ethics where further guidance may be needed and appropriate.

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.

In 2010/2011 the Policy and Standards Department will carry out an internal audit of the responses received to emails in the policy inbox. The department will produce internal guidance or standard responses to questions which will ensure consistency.

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.

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.

- 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 returners 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	2009/2010 (ongoing)
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	TBC*	n/a	

NB: The above timescales are subject to the information in section 3.1 of this document.

*In 2010-2011 an amendment to the HPC registration database is planned to allow reporting on returners to practise requirements. A review of the requirements will take place at a suitable time after this change has been made.

Projects Workplan 2010/11

Contents

Introduction

The aim of the 2010/11 Projects workplan is to:

- o Timetable projects appropriate to the resource availability within the organisation.

The aims of the Projects workplan have been limited due to the impact of the Project Portfolio Manager's planned maternity leave.

<u>Project Planning</u>

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.

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 list

No.	Project name	Summary	Owning Dept	Departments impacted	Timeline in financial year 10/11	Oper-ational Expen-diture	Capital Expen-diture	Risk ref.
MP4	Opening of the register for Hearing Aid Dispensers	Registration of Hearing Aid dispensers	Oper-ations	Reg, FTP, Comms, Part, IT, Edu, Sec, Policy	1st Apr 10 to 30th Apr 10	£37,500	-	8.2 8.10
MP40	Outcome to Modernising Scientific Careers	Registration of the professionals affected by the Modernising Scientific Careers programme	Operations	Reg, FTP, Comms, Part, IT, Edu, Sec, Policy	1st March 11 to 31st March 11	-	-	8.2
MP41	Opening of the register for Psychotherapists and Counsellors	Registration of Psychotherapists and Counsellors	Operations	Reg, FTP, Comms, Part, IT, Edu, Sec, Policy`	1st March 11 to 31st March 11	-	-	8.2 8.11
MP42	Opening of the register for Dance Therapists	Registration of Dance Therapists	Operations	Reg, FTP, Comms, Part, IT, Edu, Sec, Policy	1st March 11 to 31st March 11	-	-	8.2
MP31	Vetting and Barring Scheme* (Phase 1 – applicants) *ex Independent Safeguarding	Operational and technology changes to comply with the requirements of the Independent Safeguarding Authority protecting children and	FTP	Reg, FTP, Policy, IT	1st Apr 10 to 31st Mar 11	£35,000	£45,000	8.8

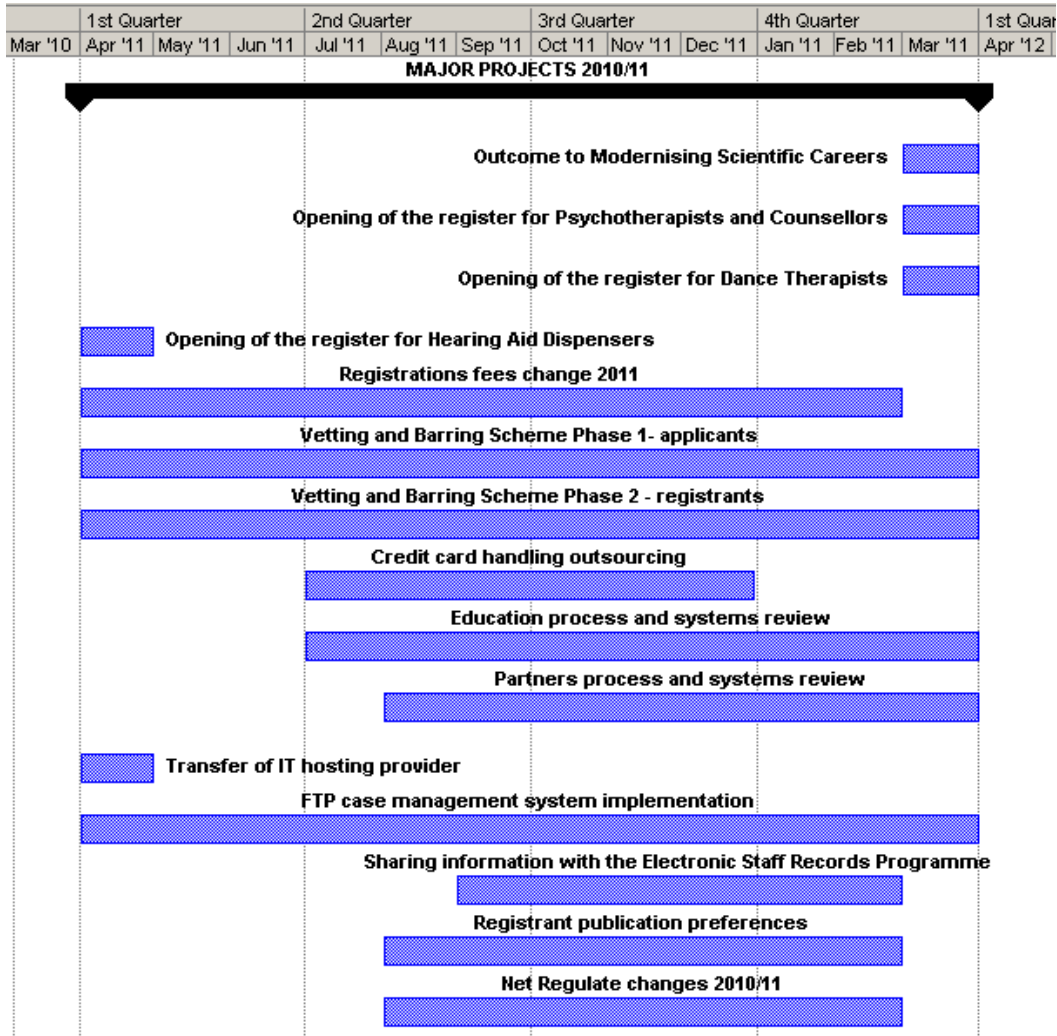| No.	Project name	Summary	Owning Dept	Departments impacted	Timeline in financial year 10/11	Oper-ational Expen-diture	Capital Expen-diture	Risk ref.
	Authority project	vulnerable adults						
MP44	Vetting and Barring Scheme (Phase 2 registrants)	Operational and technology changes to comply with the requirements of the Independent Safeguarding Authority protecting children and vulnerable adults	FTP	Reg, FTP, Policy, IT	1st Apr 10 to 31st Mar 11	£7,000	-	8.8
MP35	Registrations Fees change 2011* * dependent on Committee and Council approval	Implementation of updated fees	Finance	Reg, Fin, IT, Sec, Policy, Comms	1st March 10 to 28th Feb 11	£4,500	£2,000	8.1
MP45	Credit card handling outsourcing	Outsourcing of the credit card handling processes to comply with PCI / DSS	Finance	Reg, Fin, IT	1st Jul 10 to 1st Jan 11	£50,000	-	
MP36	FTP case management system – Phase 1	Implementation of a single FTP case management system	FTP	FTP, IT	1st Apr 10 to 31st Mar 11	£67,200	£563,057	8.9
MP46	Education systems and process review	Analysis of the processes undertaken within the Education department and analysis	Education	Edu, Part, IT	1st July to 31st Mar 11	£10,800	£130,000	

No.	Project name	Summary	Owning Dept	Departments impacted	Timeline in financial year 10/11	Oper- ational Expen- diture	Capital Expen- diture	Risk ref.
		of the technology solutions available to assist in delivering the Education department objectives						
MP47	Partners System review	Analysis of the processes undertaken within the Partners department and analysis of whether an alternate technology solution would better assist in delivery of the Partners department objectives	Partners	Part, Edu, FTP, Reg, IT	1st Aug 10 to 31st March 11	£36,000	£35,000	
MP38	Transfer of IT external hosting provider	Transfer of the HPC IT Continuity and Web services to an alternate supplier	IT	IT	1st Apr 10 to 30th Apr 10	-	-	
MP49	Sharing information with the Electronic Staff Records Project	Enabling the transfer of registration data from HPC to the Electronic Staff Records project (NHS)	Reg	Reg, IT, Comms	1st Sept 10 to 28th Feb 11	£12,500	£45,000	
MP48	Registrant publication preferences	Net Regulate change to enable storage of registrant's preferences	Reg	Reg, IT, Comms	1st Aug 10 to 28th Feb 11	£12,875	£35,000	

No.	Project name	Summary	Owning Dept	Departments impacted	Timeline in financial year 10/11	Oper-ational Expen-diture	Capital Expen-diture	Risk ref.
		to receive publications in Braille, Welsh, Audio etc.						
MP50	Net Regulate changes 2010-11	A collection of eight technology changes to improve Net Regulate functionality	Reg	Reg, IT, Ops, Fin, Edu	1st Aug 10 to 28th Feb 11	£12,500	£110,000	

Abbreviations:

Reg – Registrations, Fin – Finance, Comms – Communications, FTP – Fitness to Practise, Apps & Mon – Approvals & Monitoring, Sec – Secretariat, Part – Partners

Annex 2 Project Gannt Chart

	1st Quarter			2nd Quarter			3rd Quarter			4th Quarter			1st Quar
Mar '10	Apr '11	May '11	Jun '11	Jul '11	Aug '11	Sep '11	Oct '11	Nov '11	Dec '11	Jan '11	Feb '11	Mar '11	Apr '12

MAJOR PROJECTS 2010/11

Outcome to Modernising Scientific Careers

Opening of the register for Psychotherapists and Counsellors

Opening of the register for Dance Therapists

Opening of the register for Hearing Aid Dispensers

Registrations fees change 2011

Vetting and Barring Scheme Phase 1- applicants

Vetting and Barring Scheme Phase 2 - registrants

Credit card handling outsourcing

Education process and systems review

Partners process and systems review

Transfer of IT hosting provider

FTP case management system implementation

Sharing information with the Electronic Staff Records Programme

Registrant publication preferences

Net Regulate changes 2010/11

Annex 3 Risk Register Extract

RISK ASSESSMENT February 2010

Project Management

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations February 2010	Likelihood before mitigations February 2010	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2010	RISK score after Mitigation September 2009
8	Project Management	8.1	Fee change processes not operational by April 2011	Director of Finance Project Portfolio Manager	3	3	9	Project is managed as part of major projects portfolio	Project progress monitored by EMT & stakeholders		Low	Low
			Links to 1.1, 15.3									
		8.2	Failure to regulate a new profession or a post-registration qualification as stipulated by legislation	Project Lead Project Portfolio Manager	5	1	5	Project is managed as part of major projects portfolio	Project progress monitored by EMT & stakeholders		Low	Low
			Links to 1.1, 15.3									
		8.8	Failure to deliver the requirements of the Vetting & Barring Scheme	Director of Fitness to Practise, Project Portfolio Manager	5	2	10	Project is managed as part of major projects portfolio	Project progress monitored by EMT & stakeholders		Low	Low
		8.9	Failure to deliver a strategic view of FTP Case Management	Director of FTP Project Portfolio Manager	3	3	9	Conduct Research project	Project is managed as part of major projects portfolio	Project progress monitored by EMT & stakeholders	Low	Low
		8.10	Failure to successfully open the Hearing Aid Practitioner register	Director of Operations, Project Portfolio Manager	5	3	15	Project is managed as part of major projects portfolio	Project progress monitored by EMT & stakeholders		Low	Low
		8.11	Failure to successfully open the Counsellors & Psychotherapist register	Director of Operations, Project Portfolio Manager	5	3	15	Project is managed as part of major projects portfolio	Project progress monitored by EMT & stakeholders		Low	Low

Registration Department Work Plan 2010 - 2011

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 have increased 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 has increased.

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 2010 - 2011 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 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 2010 – March 2011, 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 2010 – 2011

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 hearing aid dispensers onto our Register. 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 £1,628,624 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 2009, have been utilised to determine the Registration Department resource requirements for 2010 - 2011.

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.

The department structure consists of two service teams now primarily providing front line customer service for the UK, international, CPD and grandparenting processes and a support team primarily dealing with the renewals and application entry processes. There has been a significant amount of investment in cross

training of registration advisors and this has enabled the department to respond rapidly and effectively to the significant increases in demand that is received.

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 and Appendix six details all the risks that are mitigated by the Registration Department. 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, five and six 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 further in Appendix one together with the current service standards which will be reviewed as part of this work plan.

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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 2010 – 2011, 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 further significant piece of work this year will be to support the Partners Department with introducing a registration assessor performance appraisal system for 234 registration and CPD assessors.

2) Information systems (database and electronic records)
In 2010 – 2011, the department will work with the IT Department to both enhance and revise the NetRegulate registration system. The following changes to the NetRegulate registration system will be managed this financial year:

- **Photographs on registration cards** – Development to incorporate registrants' photographs on their registration card.
- **Supplementary prescribing on certificates** – Currently this information is not displayed on registration certificates. This project will ensure that this information is included on registration certificates.
- **Returned mail flag** – There is currently no returned mail flag on NetRegulate and whilst we receive returned mail we do not remove the registrants address and we continue to send out final renewal notices and invites to listening events. A returned mail flag will be introduced which would enable the Registration Department to record this information and enable us to stop sending out mailings to addresses that are not current.
- **Readmission of lapsed registrants selected for CPD** – Improve the NetRegulate system to ensure that when registrants that are selected for CPD audit apply for readmission onto the Register without fulfilling the CPD audit requirements NetRegulate places the registrant back into selected for CPD audit status to ensure the registrant complies with the CPD audit.
- **Batch process scheduler visible audit trail** - The batch process scheduler within NetRegulate controls the generating of renewal and final renewal notices, renewal certificates, lapsing, direct debit payments and payment charges. If we decide to amend run dates within the batch scheduler e.g. if we extend a professions renewal window there is no audit trial contained within the system to state when and who made the change. This change will ensure that NetRegulate contains a userlog of activities.

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The Registration Department will also work with the IT Department to eliminate the need for Registration Advisors to manually calculate a new registrants registration fees when inputting applications and dealing with general telephone enquiries. A registration fee calculator will be developed using excel software that will accurately calculate the registration fees depending on the position within the renewal cycle for each profession.

3) Liaison with stakeholders
In 2010 – 2011, 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, employer events and various presentations which also provides valuable experience for registration employees and the department as a whole.

4) Committee and Council work
In 2010 – 2011, 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.

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 2010 – 2011

We have identified a number of objectives that will require action and completion in 2010 – 2011.

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 and enabling the department to identify any recurring process failures;
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) continue to develop a customer research programme to:
    - gain an in-depth insight into the overall customer service experience from a registrant viewpoint;
    - gain qualitative feedback on call handling quality;
    - have a clear basis for making decisions about future service developments.

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) benchmark our planning process with similar size service centres.

Registration Objective – Improve application verification checks
It is incumbent upon us to ensure the integrity of our Register, including taking steps to prevent fraudulent or erroneous entry to the Register. We already have processes in place for checking qualifications. For example, applicants from the international route are required to provide certified copies of their identification documents and of their qualifications. There are processes in place for applications via the UK route to check that the applicant holds an approved qualification which confers eligibility to be HPC registered.

We aim to improve our verification process by:

1) reviewing the application process to identify improvements that will improve verification of qualifications, employment history and reduce the risk of exposure to identity theft;

2) designing a process with a third party background screening provider who will be able to assist us in performing checks to verify an applicant's identity, employment history and professional qualifications when we are unable to do so;
3) build a database to store examples of valid worldwide competent authority contact details and verification documentation.

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 registration employees to gain an accredited customer service qualification;
2) develop customer service training to improve skills to deal with more challenging situations;
3) developing and delivering the long term training plan;
4) continuing to review the registration advisor training manual and introduce 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 – Develop external relationships with suppliers

The Registration Department is reliant on a number of key suppliers in order to deliver and improve the service that it delivers. The department needs to continue to develop good working partnerships with these suppliers to ensure a seamless and improved service is delivered in a cost effective manner. The department needs to ensure:

1) Print UK print all registration renewal forms, registration application forms, publication material, letters and registrant certificates effectively and efficiently;

2) Maintel provide effective technical maintenance support for the Registration Department's telephony system and provide recommendations on how we can utilise our existing technology more effectively;

3) Statistical Services Centre, University of Reading develop and provide regular CPD data summary reports from the CPD audit process in order to assist with identifying potential CPD non – compliance areas;

4) Sevicepoint scan and copy all registration renewal and application forms effectively and efficiently.

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) **Hearing Aid Council (HAC)** - Project dealing with the transfer of the HAC's Register to the HPC.

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2) **Linking Register to Electronic Staff Records (ESR) Project** – Develop a process to provide on a regular basis NHS electronic staff records (ESR) with an electronic subsection of the HPC Register.

3) **Registration fee change 2011** – Realignment of registration fee charges.
4) **Registrant publication preferences -** Project to provide registrants with the option to request brochures in alternative formats such as braille, large text and Welsh. Provide HPC with the ability to store HPC publication, correspondence and renewal preferences within NetRegulate.

5) **Vetting and Barring Scheme Phases 1 and 2** – Project to design and implement processes to ensure the HPC complies with the Safeguarding of Vulnerable Groups Act.

6) **Registration / Education Department Liaison Project -** This project aims to review and enhance existing internal processes and practices.
This project involves the Registration Department working with colleagues in the Education Department, although it is envisaged that the Education Department will take the lead in terms of resources. It is anticipated that the project will focus on two specific areas, which are of mutual concern and benefit to both departments, namely (i) the register of approved programmes (current and historical) and (ii) the pass list process (incorporating communication and liaison with education providers and internal usage).

There have been a number of changes to the register of approved programmes (current and historical) and UK application forms in recent years and the Education Department is keen to ensure that colleagues in the Registration Department are cognisant of the rationale and principles behind these changes and that the new ways of working are feasible and in keeping with their internal procedures.

There have been a number of changes to the pass list process in recent years and this part of the project aims to both resolve a few teething problems (mainly around communication and expectations on education providers) so that the process is easily understood and realistic in its expectations to both education providers and the Registrations Department. This part of the project will also consider further enhancements to the pass list process to ensure that the information supplied by education providers is accurate and explicit, to mitigate the risk of incorrect decision-making at the point of registration.

Overall, the project aims to improve the understanding between the two departments of their respective roles and responsibilities, to increase the effectiveness of available resources within both departments engaged in these two areas; to consider the strengths and limitations of the current processes and information systems and to consider the effectiveness of initial and refresher training of employees.

7) **Outcome to Modernising Scientific Careers** – Project dealing with the potential regulation of Healthcare scientists.

8) **Psychotherapists and Counsellors** – Project dealing with the potential regulation of Psychotherapists and Counsellors.

9) **Dance Therapists** – Project dealing with the potential regulation of Dance Therapists.

10) **Credit Card Handling Outsourcing** – Project to ensure HPC is compliant with the Payment Card Industry Data Security Standard (PCI DSS) when taking credit card details over the telephone when a registrant wishes to make a payment to renew or register for the first time. This project will investigate the possibilities of arranging collection of payments by a third party provider which is compliant with PCI DSS to allow such transactions.

11) **Partner Systems Review** – This project will review all partner data sources across departments (Partners, Education, Fitness to Practice, Registration and Finance). Stage one of this project will involve reviewing existing systems and departmental requirements and identification and design of a new database to encompass all department requirements. Stage two off the project may result in the building of the new database in the financial year 2011 – 2012.

The table in Appendix five sets out the Registration Department's day to day activities in the delivery of the registration objectives.

Priorities 2011 – 2012

2011 – 2012 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 2013 such as dance movement therapists, counsellors and psychotherapists and healthcare scientists will have a significant impact on the workload of the Registration Department.

Depending upon the success of the online renewals implementation, 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.

Registration Department activities in 2009 - 2010

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 met. Service standards were met or exceeded throughout the year.

Registration Objective – Improve quality of service

This objective was met. A quality checks programme was in operation with call monitoring, application entry and renewal processing checks undertaken and feedback given to registration advisors. A business partner has been identified and work has begun in obtaining feedback from Registrant's to gain an in depth insight into the overall service experience from a registrant viewpoint.

Registration Objective – Effective capacity planning

This objective was met. Specialist contact centre planning training has enabled the development of the capacity planning process which has enabled the Registration Department to deliver improved performance over the past 12 months.

Registration Objective – External recognition

This objective was met. An application for the Queen's Award for Enterprise and Innovation was submitted but no feedback has been received at the time of publication of this work plan. National Customer Service Week celebrations were led by the Registration Department across the whole organisation.

Registration Objective – Employee development

This objective was partially met. There a number of Customer Services Managers and Team Leaders who still need to attend a professional contact centre management course and it is planned that all new senior members of the team will attend a course within the next 12 months. A number of new registration employees have not had the opportunity to gain an accredited customer service qualification but will be given this opportunity over the forthcoming 12 months. 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.

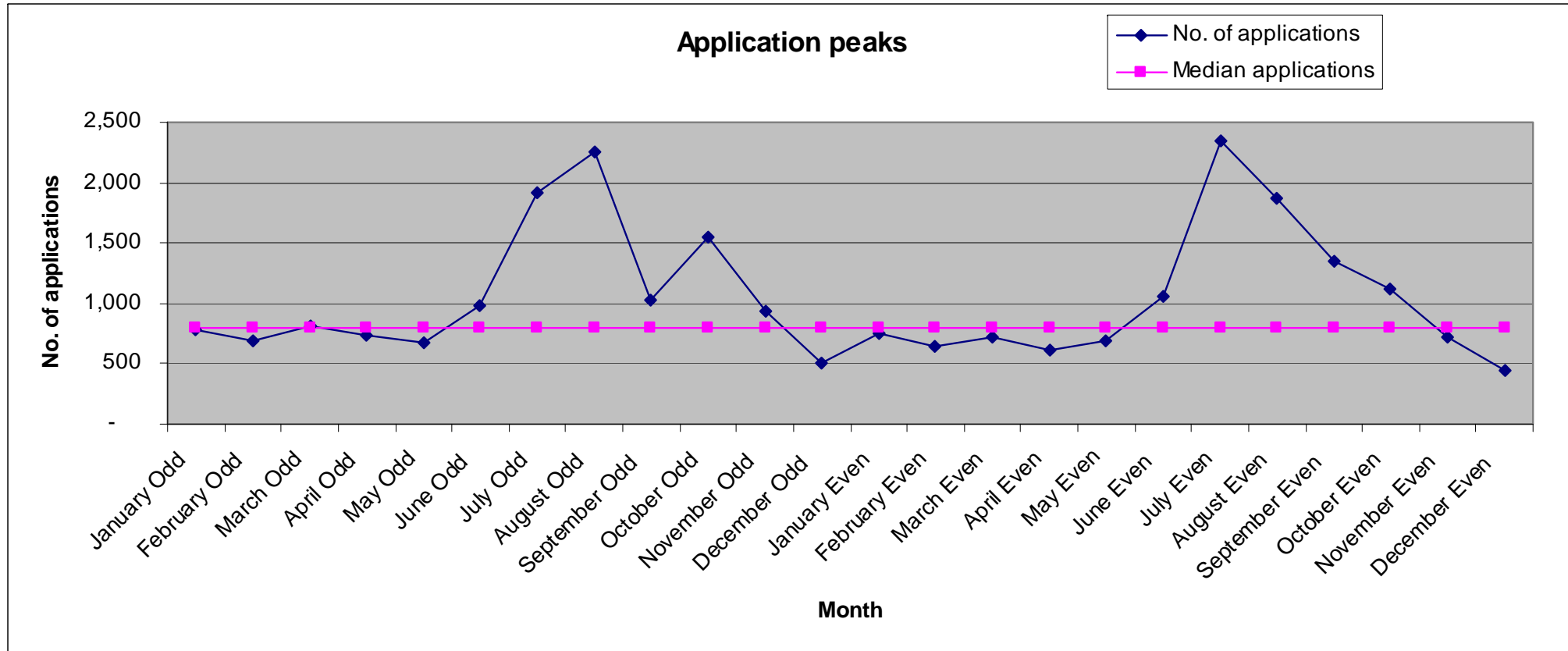**Registration Objective – Manage projects within agreed timescales**

The progress the department made against each of the planned projects in 2009 – 2010 is detailed below:

1) **Practitioner psychologists** – The statutory regulation of practitioner psychologists was delivered.

2) **Hearing Aid Council** – The department has completed all assigned objectives in the project plan on time with the regulation of hearing aid dispensers by HPC due to commence from the 1 April 2010.

3) **Online renewals** – The department has completed all assigned objectives in the project plan on time with the system made available to registrants as from February 2010.

4) **Improve identity checks** – The UK, international and grandparenting forms have been amended to allow the HPC to carry out identity checks and the department currently undertakes checks of international applicants to confirm their identity and qualifications. The department is currently designing a process with a third party background screening provider who will be able to assist us in performing checks to verify an applicant's identity and professional qualifications when we are unable to do so.

5) **Registration fee change 2009 and 2011** – The department completed all assigned objectives in the project plan on time.

6) **Independent Safeguarding Authority** – The department completed all assigned objectives in the project plan on time.

7) **Renewal cycle review** - This project was 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 involved deciding on the most appropriate renewal cycle for the organisation and then assessing the business benefits. Detailed discussions were also held with our NetRegulate software supplier Digital Steps to assess if the desired approach could be implemented together with an assessment of the risks and costs that this would involve. The project team shortlisted four possible options and the Executive Management Team (EMT) were asked to consider whether to proceed with phase 2 of this project and implement one of these options in the financial year 2010. It was decided not to proceed to phase 2 on the basis that a definitive decision could not be made until the impact of online renewals could be evaluated.
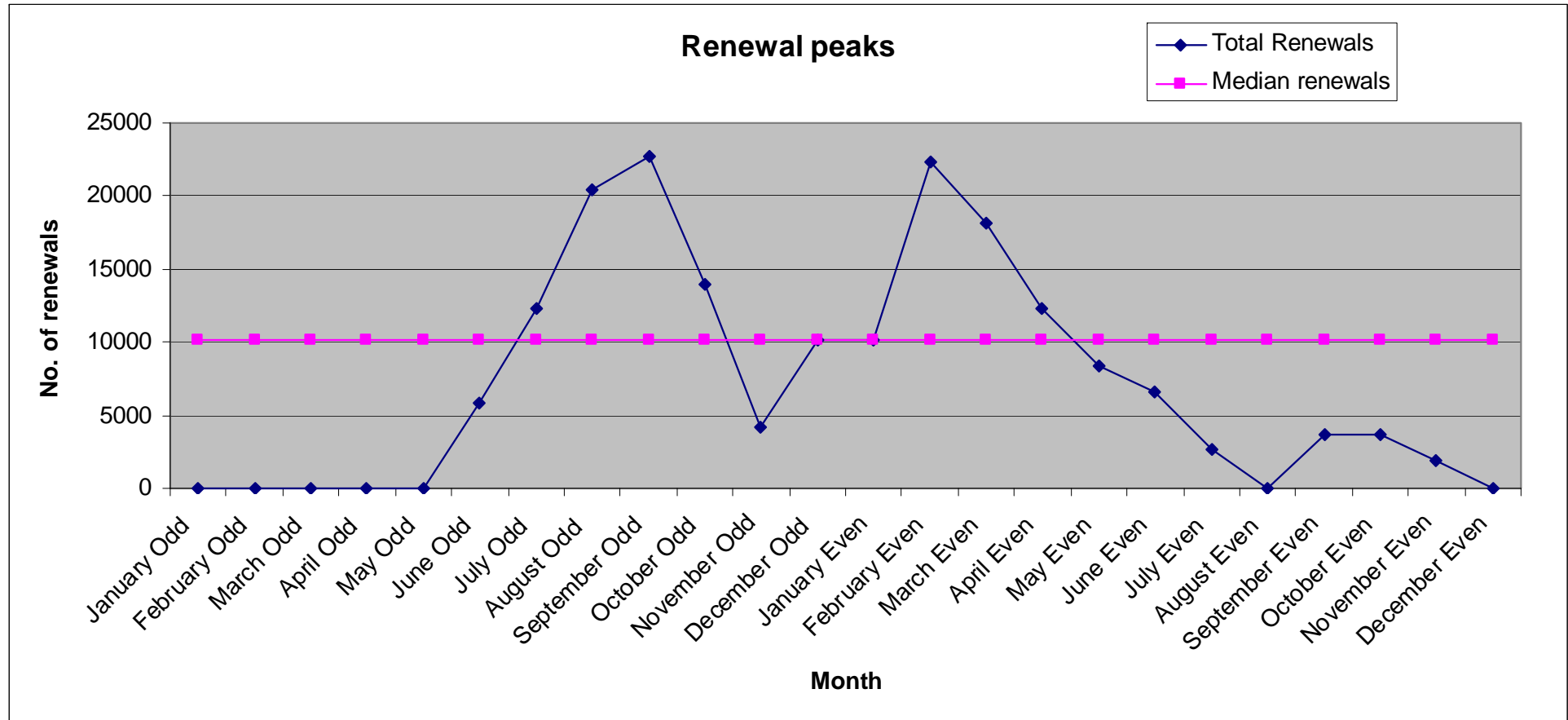
Appendix one – Registration Department processes and service standards

Process	Service Standards 2010 – 2011
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 2010 / 2011: • physiotherapists; • arts therapists; • dietitians; • chiropodists; • operating department practitioners.	Processed within three months of receipt of all documents
Renewal batch letters sent on time for the following professions in 2010 / 2011: • physiotherapists; • arts therapists; • dietitians; • chiropodists; • operating department practitioners.	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

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Appendix two – UK application volumes

Application peaks

Legend:
- No. of applications
- Median applications

Y-axis: **No. of applications** — 2,500 / 2,000 / 1,500 / 1,000 / 500 / -

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 three – Renewal volumes

Renewal peaks

No. of renewals

Legend:
- Total Renewals
- Median renewals

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

Y-axis: 0, 5000, 10000, 15000, 20000, 25000

Appendix four Registration Department activities table 2010 – 2011

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, 1.5, 10.1, 10.4	1 April 2010	Ongoing	RH, CH, NC,DW
Partner assessor recruitment, selection and training	6.1	1 April 2010	Ongoing	DW
Information systems enhancements and revisions	10.1	1 April 2010	Ongoing	RH, CH, NC, DW
Liaison with stakeholders	3.2	1 April 2010	Ongoing	RH, CH, NC, DW
Committee and Council work	4.1	1 April 2010	Ongoing	RH
Improve Registration Department publications	10.5	1 April 2010	Ongoing	CH, NC

Key

RH - Richard Houghton
CH - Claire Harkin
NC – Neil Cohen
DW – David Waddle

Appendix five Registration Department objectives table 2010 – 2011

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 and enabling the department to identify any recurring process failures.	10.5	1 April 2010	Ongoing	CH, NC, DW
	2) Conduct, deliver and review the call monitoring process to deliver individual feedback to registration advisors.	10.5	1 April 2010	Ongoing	CH, NC, DW
	3) Develop and publish revised Registration Department service standards.	10.1	1 June 2010	30 September 2010	RH
	4) Continue to develop a customer research programme to; • gain an in-depth insight into the overall customer service experience from a registrant viewpoint; • gain qualitative feedback on call handling quality; • have a clear basis for making decisions about future service developments.	10.1	1 April 2010	Ongoing	RH

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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 2010	Ongoing	NC
	2) Benchmark our planning process with similar size service centres.	10.1	1 September 2010	Ongoing	RH
Improve application verification checks	1) Review the application process to identify improvements that will improve the verification of qualifications, employment history and reduce the risk of exposure to identity theft.	10.3	1 April 2010	30 September 2010	RH
	2) Design a process with a third party background screening provider who will be able to assist us in performing checks to verify an applicant's identity, employment history and professional qualifications when we are unable to do so.	10.3	1 April 2010	30 September 2010	RH
	3) Build a database to store examples of valid worldwide competent authority contact details and verification documentation.	10.3	1 April 2010	Ongoing	DW

Objective	Activity	Mitigate risk register item	Start date	Completion date	Lead
Employee development	1) Arranging for all registration employees to gain a customer service qualification.	11.4	1 April 2010	Ongoing	RH
	2) Develop customer service training to improve skills to deal with more challenging situations.	11.4	1 April 2010	Ongoing	RH
	3) Developing and delivering the long term training plan.	11.4	1 April 2010	Ongoing	CH,NC, DW
	4) Continuing to review the registration advisor training manual and introduce a full learning management system which will enable the Registration Department to develop and deliver its training online.	11.4	1 April 2010	Ongoing	CH, NC, DW
	5) Continuing to cross train all registration employees.	11.4	1 April 2010	Ongoing	CH,NC, DW
Develop external relationships with suppliers	1) Print UK print all registration renewal forms, registration application forms publication material, letters and registrant certificates effectively.	10.1	1 April 2010	Ongoing	CH
	2) Maintel provide effective technical maintenance support for the Registration Department's telephony system and provide recommendations on how we can utilise our existing technology more effectively.	2.10	1 April 2010	Ongoing	RH
	3) Statistical Services Centre, University of Reading develop and provide	18.1	1 April 2010	Ongoing	RH

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Objective	Activity	Mitigate risk register item	Start date	Completion date	Lead
Develop external relationships with suppliers	regular CPD data summary reports from the CPD audit process in order to assist with identifying potential CPD non – compliance areas. 4) Servicepoint scan and copy all registration renewal and application forms effectively and efficiently.	10.1	1 April 2010	Ongoing	NC
Manage projects within agreed timescales	1) Hearing Aid Council.	8.10	1 April 2010	30 April 2010	NC,RH
	2) Linking Register to Electronic Staff Records Project.	3.2	1 September 2010	28 February 2011	RH
	3) Registration fee change 2011.	8.1	1 April 2010	1 March 2011	CH
	4) Registrant publications preferences.	1.6	1 August 2010	28 February 2011	RH
	5) Vetting and Barring Scheme Phases 1 and 2.	8.8	1 April 2010	28 February 2011	NC
	6) Registration / Education Department Liaison Project.	10.1	1 July 2010	Ongoing	NC,RH
	7) Outcome to Modernising Scientific Careers.	8.2	1 March 2011	Ongoing	DW
	8) Psychotherapists and Counsellors.	8.11	1 March 2011	Ongoing	CH,DW
	9) Dance Therapists.	8.2	1 March 2011	Ongoing	NC
	10) Credit Card Handling Outsourcing.	15.7	1 July 2010	31 December 2010	DW,RH
	11) Partner Systems Review.	6.5	1 August 2010	31 March 2011	DW

Key

RH - Richard Houghton   NC – Neil Cohen
DW – David Waddle   CH - Claire Harkin

Appendix six Risk Register risk items mitigated by the Registration Department

Risk Register item reference	Description
1.5	Loss of reputation
1.6	Failure to abide by current equality and diversity legislation
2.3	Unacceptable service standards
2.10	Telephone system failure causing protracted service outage
3.2	Loss of support from key stake holders
4.1	Council inability to make decisions
6.1	Inability to recruit and / or retain suitable partners
6.5	Incorrect interpretation of HPO in use of partners
8.1	Fee change processes not operational by April 2011
8.2	Failure to regulate a new profession or a post-registration qualification as stipulated by legislation
8.8	Failure to deliver the requirements of the Vetting and Barring Scheme
8.10	Failure to successfully open the Hearing Aid Practitioner register
8.11	Failure to successfully open the Counsellors and Psychotherapist register
10.1	Customer service failures
10.2	Protracted service outage following a NetRegulate registration system failure
10.3	Inability to detect fraudulent applications
10.4	Backlog of registration applications
10.5	Mistake in the registration process leading to liability for compensation to registrant or applicant
11.4	Lack of technical and managerial skills to deliver the strategy
15.7	Registrant credit card fraud / theft
18.1	CPD processes not effective

SECRETARIAT DEPARTMENT 2010-2011 WORK PLAN

CONTENTS

Introduction

The Health Professions Council (HPC) Secretariat was established in January 2004. Its role is to support the Council, Committees and Professional Liaison Groups of the HPC so that they carry out their governance role effectively. The Secretariat works closely with the Chair of the Council and Committees and members of Council and the Executive in providing this support.

This document

The Secretariat work plan details the main areas of work for the financial year April 2010-2011, and provides a basis against which the work of the Secretariat can be planned and measured.

This work plan attempts to show how the standard operational work together with the planned projects can be delivered within existing resources and time restraints. The work plan is underpinned by the Council's Strategic Intent and demonstrates how the work of the department will continue to contribute towards the objectives of Council.

The Council's Strategic Intent

The Council's current Strategic Intent, which was agreed by Council at their meeting in March 2009, identifies the organisation's vision and key strategic objectives for 2009/10 to 2014/15[1]. The strategic objectives particularly relevant to the work of the Secretariat are:-

- ➢ **To maintain and develop good governance during and after the restructuring of the Council**
    - Continue to invest in training of Council members to develop skills;
    - Continue to operate annual performance review of Council members and Chair to ensure the skill set of the members is adequate for the needs of the Council.

- ➢ **To maintain and develop efficient business processes throughout the organisation as it grows**
    - Revise and update standards and processes as required across the functions;
    - Maintain and expand ISO Registration;
    - Maintain and develop equality and diversity policies.

- ➢ **To increase understanding and awareness of regulation amongst all stakeholders**
    - Extend engagement with the public through improved access to information about the HPC through publication of all Council and Committee papers.

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[1] http://www.hpc-uk.org/aboutus/aimsandvision/

Secretariat Department

The Secretariat's main areas of responsibility are:

(i) Provision of support, and implementation of best governance 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 the 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 of policies and procedures in relation to the Freedom of Information Act and Data Protection Act.

Resources

Human Resources

The Secretariat consists of four employees as follows:-

Louise Hart: Secretary to Council
Colin Bendall: Secretary to Committees
Steve Rayner: Secretary to Committees
Natasha Williams: Team Administrator

Whilst there was an allocation in the 2009-2010 budget for a Data protection officer based on a 6 month contract, after consideration and review, it was decided that this allocation was not necessary as the responsibilities around data protection could be covered within existing resources. The allocation was subsequently reallocated within the organisation.

The Team Administrator is due to embark on a period of full time study starting in September 2010 and so a recruitment exercise to fill this post will be carried out in due course.

Financial Resources

The Secretariat manages both the departmental budget together with the Council and Committee budgets. The Secretariat budget, which stands at approximately £250k for 2010/11 represents a 17% reduction in operating expenditure on the previous financial year.

The Council and Committee budgets total almost £400,000 and largely consist of provisions for member attendance and subsistence at Committee and Council meetings and also a provision to cover member training and attendance at conferences. This figure for 2010/11 represents an 11% reduction compared with the budget for 2009/10 which is a reflection of the reduction in the size of Council and Committees since July 2009.

Responsibilities

The Secretary to Council is responsible for the overall management of the department, the development and implementation of the work plan and the development and management of new projects.

The support of Committees is divided between two committee secretaries. Following the restructuring of Council and the Committee structure, a review was carried out to ensure a balance of workload between the two secretaries. This resulted in some changes to the servicing of Committees. The other activities undertaken by the Secretariat such as the handling of Freedom of Information Requests and member training and development, are divided between the two secretaries.

The Team Administrator provides administrative support for the department, assisting with members' claims, the Council away day and annual meeting, and general support for the team.

Risk management

The Secretariat Department manages a number of risks in relation to its functions and those of Council and Committees. The key areas of risk are associated with the meetings of Council and Committee and ensuring that the meetings are quorate and well-informed decisions are made and the performance of Council and Committee members.

As you will see from the extract of the risk register appended to this work plan, the Secretariat ensure that appropriate measures are in place to mitigate against these risks and, in addition, ensure that the mitigations are continually kept under review.

Equality and Diversity

Council and Committee meetings
The Secretariat will ensure that meetings held at Park House and elsewhere are accessible to those with disabilities.

Council and Committee recruitment
The Secretariat will work with the Appointments Commission to ensure that candidates from a diverse range of backgrounds are targeted in any recruitment exercises carried out.

Members' Training
The subject of Equality and Diversity was discussed as part of the Council Away Day in October 2009. The Secretariat will ensure ongoing training of members in this regard.

Main operational processes

There are 6 main processes which generate the majority of the department's work and these are detailed below. In each area of work, the Secretariat will continue to review, refine and improve existing processes.

1. **Council/Committee meetings and Professional Liaison Groups**
   The organisation of the calendar of meetings and the provision of support of Council and Committee meetings and professional liaison groups. This includes, the timely preparation of papers for the meetings, the production of the minutes and the procedural advice during the course of the meeting to the Chairs.

2. **Freedom of Information/Data Protection**
   Co-ordination of the Freedom of Information system, ensuring that legislation is adhered to across the organisation and responses to FOI and subject access requests are logged, responded to within the prescribed timeframe and are in accordance with the FOIA/DPA.

3. **Member Training**
   The organisation of induction programmes for newly-appointed members and the provision of on-going training of members as agreed with the Chair and members, through internal training and attendance at conferences together with council-wide training.

4. **Members' self-assessment**
   Each year, members undertake a self-assessment which is combined with the appraisal of the Chair, with a report outlining feedback received submitted to a meeting of Council for information. The self-assessment process is organised and run by the Secretariat, with the report drafted in conjunction with the Chair.

5. **Council Away Day**
   Organise the annual council away day, rotating each year between England, Northern Ireland, Scotland and Wales.

6. **Annual report**
   Co-ordinate and oversee the production of the annual report in accordance with the Health Professions Order 2001.

Projects 2010-2011

There are eight planned projects for the 2010-2011 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 stakeholders. A small number of these projects will involve collaboration with the Communications Department.

1. **Review the member appraisal system**
   Since the restructuring of Council in July 2009, all members of Council are now appointed by the Appointments Commission on behalf of the Privy Council and, in order to ensure that the terms of office did not expire at the same time, the appointments were phased for periods of between two and four years.

   In previous years, the reappointment of lay members was dependent, amongst other things, upon the completion of a satisfactory appraisal. Whilst the HPC's appraisal system is recognised as an area of best practice (the Secretariat have presented on it to CHRE and other health regulators have sought advice and have used our structure and documentation when developing report systems for their new Councils), it is important to ensure the process in place is fit for purpose, particularly since the restructuring of Council has changed the method of appointment for members.

   During 2010 and, in advance of the reappointment process which will be initiated in Spring 2011, the department will undertake a review of the existing appraisal system. This will be done in conjunction with the Chair and the Appointments Commission, to ensure that appraisal system can effectively feed into the reappointments process. A report will be submitted to Council for approval.

2. **HAD: Recruitment of ETC member**
   The Education and Training Committee Rules require that the committee is made up of at least one registrant member from each of the relevant professions. Since the HPC are due to open the Register to Hearing Aid Dispensers on 1 April 2010, it is necessary to recruit a Hearing Aid Dispenser member of the Education and Training Committee in advance of their first meeting after 1 April 2010, being 8 June 2010.

   The Secretariat will undertake the recruitment exercise which will result in the name of the successful candidate being submitted to Council on 20 May 2010 for approval. It is possible that certain elements of the recruitment exercise will have been initiated during the current year, with the completion of the exercise during 2010/2011.

3. Review of annual meeting

The annual meeting, held in September each year, is an opportunity to present the annual report to a variety of stakeholders and for HPC to present on their work over the last year.

A similar format whereby stakeholders are invited to Park House has been used since the inception of HPC and in recent years, there has been a steady decline in the number of stakeholders attending the meeting. For that reason, Secretariat has undertaken to review the format of the annual meeting, with a view to ensuring the format and content is relevant, topical and our stakeholders remain engaged.

A new approach to the annual meeting will be introduced at the September 2010 meeting.

4. Review of Outside Body representation

The HPC are represented on a number of outside bodies by Council and Committee members and there is a clear policy in place for the approval of such appointments.

Following the restructuring of Council in 2009, a number of these appointments became vacant as members' terms of office came to an end at the HPC. It became apparent at that time that the HPC did not have sufficient information on the background to these appointments and useful information such as the commitment expected from its members.

This year the Secretariat will undertake a review of these groups that we have representation on to ensure that the records of the HPC are up-to-date and when a vacancy arises, the secretariat are able to provide sufficient information to members on the role etc. In addition, the opportunity will be taken to ensure that the representation we have on these bodies continues to be appropriate.

5. Review declaration of interests form

If members are participating in Council or Committee business where they might have, or be seen to have, an interest in the outcome or any interest which could otherwise prejudice their decision, that interest should be declared through their declarations of interest form and at the start of each Council and Committee meeting.

A declaration of interests form was introduced at the inception of HPC and all new members are required to complete the form on their appointment to the HPC. However, it has become apparent that other public authorities have adopted a form which provides more comprehensive disclosure and so to ensure that the HPC remains in line with current best practise, it is proposed to review the current form.

In accordance with the HPC's commitment to transparency and openness, the declaration of interests form will be reviewed to ensure that all relevant information is captured. A paper will be submitted to Council for approval.

6. **Streamlining of FOI/DP processes**
Currently, freedom of information (FOI) e-mails are sent either to the FOI portal, which is overseen by the secretariat department, or to individuals around the organisation directly. When received through the portal, they are logged using the "FRINK" system and assigned to the relevant individual for response. Those requests that are sent directly to individuals are responded to although not always logged using the "FRINK" system.

The Secretariat will undertake a review of the current process in order to establish a streamlined process for responding to FOI requests, with a view to all correspondence being channelled through the Secretariat. The opportunity will be taken to draft some guidance for employees on the issues around FOI and DP and to standardising the response letters.

7. **Review and redraft of Committee handbook**
The Secretariat maintain a number of internal handbooks which contain guidance notes for employees on a variety of issues ranging from the production and publication of papers through to the process for the appointment of members onto Committees.

There is however some duplication between handbooks and many of the guidance notes are now covered by the Code of Corporate Governance which was agreed by Council in May 2009. It is therefore necessary to streamline the information in order to produce one "Committee handbook" which will sit alongside the HPC's Code of Corporate Governance, although will be for internal use only.

If it becomes apparent that changes are required to any of the current processes detailed within the handbooks, appropriate approval will be sought.

8. **Establishment of networking opportunities for prospective members**
Over the next few years, vacancies are expected to arise on the Council, be it ad hoc vacancies or those anticipated when terms of office come to an end.

It is proposed to establish some networking opportunities for prospective members so that when vacancies arise, those individuals interested in joining the HPC already have some background knowledge on the organisation, its functions and the role of a Council/Committee member.

Secretariat will undertake to establish such networking opportunities during the course of this year

Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations February 2010	Likelihood before mitigations February 2010	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation February 2010		RISK score after Mitigation September 2009
4.1	Council inability to make decisions	Secretary to Council	3	1	3	Regular meetings, agendas and clear lines of accountability between Council and committees	Well researched and drafted decision papers at meetings	Attendance by external professionals as required	Low		Low
4.4	Failure to meet Council/Committee quorums	Secretary to Council	4	3	12	Clear communication of expectations of Council members' duties upfront	Adequate processes notifying Council & committee members of forthcoming meetings prior to meeting including confirmation of attendance	Committee secretaries and chairmen advised that inquorate meetings must not proceed	Low		Low
4.9	Failure to insure the Health & Safety of Council Members	Secretary to Council & Facilities Manager	4	2	8	Safety briefing at start of each Council or Committee meeting. H&S information on Council Extranet	Road safety policy (for vehicle drivers)	Personal Injury and Travel insurance	Low		Low
4.11	Expense claim abuse by members	Secretary to Council	4	2	8	Members Code of Conduct (public office)	Clear and comprehensive policies posted on the Council member Extranet and made clear during induction	Budget holder review and authorisation procedures	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. Committee	Effective process management	-	Low		Low

						approval of the Audit Plan(s).				
4.2	Council members conflict of interest	Chair	4	4	**16**	Disclosure of members' interests to the Secretariat and ongoing Council & committee agenda item	Disclosure of conflict of interest in the Annual Report & on the HPC website	Member induction and training	Low	Low
4.3	Poor decision-making eg conflicting advice or conflicting advice and decisions	Chair	4	1	4	Well-researched & drafted decision papers, Clear lines of accountability and scheme of delegation	Chair's involvement in the appointments process for lay members, induction and relevant training	Attendance by external professionals, as required.	Low	Low
4.5	Members' poor performance	Chair	4	1	4	Chair's annual appraisal of Council members	Training & support at Away Days and Inductions	Removal under Sch 1, Para 9(1)(f) of the HPO 2001	Low	Low
4.6	Poor performance by the Chair	Council	5	1	5	Appointment against competencies	Power to remove the Chair under Sch 1, Article 12(1) C of the HPO 2001	-	Low	Low
4.7	Poor performance by Chief Executive	Chair	5	1	5	Performance reviews and regular "one to ones" with the Chair	Contract of Employment	-	Low	Low
4.8	Improper financial incentives offered to Council members/employees	Chair and Chief Executive	4	2	8	Gifts & Inducements policy	Council member code of conduct	Induction training re:adherence to Nolan principles	Low	Low
4.10	Member recruitment problem (with the requisite skills)	Chair	4	2	8	Maintenance of a detailed role description for these positional applicants on to HPC or its committees	Use of the Appointments Commission or Commissioner to recruit new members	Use of the Office of Public Appointments for advice (on recruitment of the requisite skills)	Low	Low
4.12	Operationalise Section 60 legislation	Council	5	2	10	Scheme of delegation	MIS	EMT & CDT	Low	Low