

Quality Report to Audit Committee, 27 February 2008

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Introduction

This is the sixth quality report to the Audit Committee.

The purpose of this report is to show the Audit Committee a detailed summary of the quality audit information collated since the last report, and in so doing, provide added assurance to the committee, Council and it's stakeholders that there are systems in place to ensure that the HPC works effectively and provides value for money.

Human Resources

Roy Dunn has taken over as the Head of Business Improvement in early 2008. One of his responsibilities will be the maintenance of the ISO 9001:2000 quality management system.

Internal quality audits

The process of internal quality audits is a requirement of the ISO 9001:2000 standard. We have an internal quality audit schedule that ensures that all areas of the business are reviewed on a regular basis. The frequency of internal quality audits (in line with the standard) is scheduled in accordance with the significance of the business area being audited (as a generally rule, core

departments are reviewed twice a year and support departments once a year).

QMS process updates

It is important that the QMS is kept up to date and the content of this is managed by the Quality Manager. This is the system that external auditors will be assessing so all employees need to be familiar with its content and purpose.

Any changes to QMS and its processes are logged through the helpdesk system. This allows process owners to view the progress of their changes and ensures that the Quality Manager has a complete audit trail of updates for audit purposes.

The Internal Audit schedule has been adjusted to allow for the data security work carried out recently. See Private paper for detail.

Below is a list of recent reviews of the QMS:

- Communications
- Customer Service

- Management Review
- Archiving
- Quality management

Future Internal quality audits

- Registrations International & Grandparenting
- Approvals & Annual Monitoring
- Fitness to Practice
- Secretariat

External quality audits

The participation in external audits is a requirement of our ISO 9001:2000 registration. We are registered with the British Standards Institute (or BSI), who conduct 2 audits a year. The format of these external audits is established with reference to/and to reflect our internal quality audit schedule.

Last BSI audit

The last BS external audit was held on 23 October 2007.

This external audit reviewed the following areas of the management system:-

- Quality management
- Registrations – UK
- Policy
- HR including Partner validation
- Staff training and development

HPC passed this external audit. Overall, the assessment report highlights the good practises that are followed within HPC. These include induction training for new starters, annual job description reviews, annual performance reviews, evaluation of training undertaken to plug any competence gaps, clear links between Corporate Strategy and departmental work plans, regular one to one meetings, monitoring of performance, good use of white communications boards, good use of statistics and reporting, clear meeting structure (with minutes and notes) and a definite link between all performance reviews and the corporate objectives.

The auditor, again mentioned that she was impressed with the way the plan, do, check act cycle (that underpins the ISO 9001:2000 standard) has been imbedded within the organisation,

and is not an “optional extra bolted onto the side,” as she has observed at other organisations.

HPC received 1 non-conformity in Registration. This was identified by the process owner and management before the external audit and was highlighted to the auditor during the audit, as an area for improvement. Corrective action has taken place and a more robust checking mechanism is now in place. This issue also being addressed as part of a bigger business-as-usual project to change the way the performance of individual Registration Advisors, Team Leaders and Customer Services Managers are being assessed.

Next BSI audit

The next BSI external audit is scheduled for 8 April 2008.

This external audit will review the following areas of the management system:-

- Registrations - International & Grandparenting
- Management system organisation and review

Appendix 1 - Summary of quality terminology

Quality terminology

As some of the terms used in this report will be relatively new I thought I would begin by providing some definitions to put the quality terms into context and explain how they constitute the internal quality assurance processes.

Quality management system (QMS)

The quality management system (or QMS) exists to provide a formal framework describing the way HPC conducts its business. Our QMS is an electronic system that stores information on HPCs quality policy and objectives along with details of our processes and procedures.

QMS Process change

It is important that the QMS is kept up to date and the content of this is managed by the Quality Manager. This is the system that external auditors will be assessing so all employees need to be familiar with its content and purpose.

Any changes to QMS and its processes are logged through the helpdesk system. This allows process owners to view the progress of their changes and ensures that the Quality Manager has a complete audit trail of updates for audit purposes.

Quality management system (QMS) review meetings

An additional process has been set up to provide further quality assurance. Review meetings have been established on a cyclical basis giving all process owners a chance to ensure the QMS for their area of the business is reviewed on a regular basis.

Review meetings are organised by the Quality Manager on a monthly basis and the outcomes of the meetings tend to fall into 2 categories;

- 1) Highlighting areas for improvement; and/or
- 2) Highlighting the need for changes to the content of the QMS

QMS feedback loop

It is a requirement of the ISO 9001:2000 standard that all employees be given the opportunity to provide input to the QMS. To further enhance communication and allow all employees provide quality input, an anonymous feedback loop has been set up so that all employees can provide feedback on quality related issues.

The role of the Quality Manager is to use this information to ensure that the business functions as effectively as possible. All employee feedback issues are logged by the Quality Manager and followed up with relevant process owners to ensure wherever possible action is taken to address them.

Quality process

Internal audits

The process of internal quality audits is a requirement of the ISO 9001:2000 standard. We have an internal quality audit schedule that ensures that all areas of the business are reviewed on a regular basis. The frequency of internal quality audits (in line with the standard) is scheduled in accordance with the significance of the business area being audited (core departments are reviewed twice a year and support departments once a year).

External audits

The participation in external audits is a requirement of our ISO 9001:2000 registration. We are registered with the British Standards Institute (or BSI), who conduct 2 audits a year in April and October. The format of these external audits is established with reference to/and to reflect our internal quality audit schedule

Outcomes of quality audits

There are various outcomes of both internal and external audits. In the unlikely event that an auditor does not find any area that does not meet the requirements of the ISO 9001:2000 standard a report will be produced with no follow on actions or recommendations.

More commonly issues do arise and these fall into 2 categories:

- 1) Non conformities (or issues as they are referred to by BSI); and
- 2) Observations

Non Conformities

Non conformities are raised by an auditor where evidence of a shortfall in how the business is functioning in relation to the requirements of the ISO 9001:2000 standard is recognised.

Taking action on non conformities is compulsory. For all non conformities identified (from both internal and external quality audits) we need to be able to demonstrate that we are taking action to address each shortfall. An auditor can make a recommendation but the specific action taken is entirely our choice and can be in whatever form we feel is appropriate as long as the shortfall identified is addressed. All non conformities are logged by the Quality Manager and followed up with the relevant process owners to ensure action is taken to address them.

Observations

Observations (or issues as they are sometimes called) are areas that an auditor has drawn our attention to as there is the possibility for potential improvement or change to ensure the business functions as effectively as possible.

Taking action on observations is not compulsory but at HPC we feel it is best practise to do so. All observations are logged by the Quality Manager and followed up with the relevant process owners to see if action can be taken to address them.

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2008-02-18	d	OPS	PPR	Audit Committee report on Quality	Draft DD: None	Public RD: None

Appendix 2 – BSI Audit Report October 2007

Assessment Report



Organisation Health Professions Council
Report Author Lisa Clarke
Visit Start Date 23/10/2007



Introduction

This report has been compiled by Lisa Clarke and relates to the assessment activity detailed below:

Visit ref/Type/Date/Duration	Certificate/Standard	Site address
4898222 Continuing assessment 23/10/2007 1 day(s)	FS 83074 BS EN ISO 9001:2000	Health Professions Council Park House 184 Kennington Park Road London SE11 4BU United Kingdom

The objective of the assessment was to seek evidence of application of the principles underlying the ISO 9001:2000 standard within the areas of Registrations (UK), Policy and HR.

Management Summary

The areas assessed during the course of the visit were generally found to be effective.

There were no outstanding issues/nonconformities to review from previous assessments.

An issue requiring attention was identified. This, along with other findings, is contained within subsequent sections of the report.

An issue relates to a single identified lapse, which in itself would not indicate a breakdown in the management system's ability to effectively control the processes for which it was intended. It is necessary to investigate the underlying cause of any issue to determine corrective action. The proposed action will be reviewed for effective implementation at the next assessment.

Please submit a plan to BSI detailing the nonconformity, the cause and your proposed corrective action, with responsibilities and timescales allocated. The plan is to be submitted no later than 30/10/2007 by e-mail to caps@bsi-global.com or by fax to +44 (0)1908 228123, referencing the report number.

Areas Assessed & Findings

Registrations UK

Clear evidence of application of the plan, do, check, act cycle was seen and a clear team structure is in place. Lots of examples of best practice were seen including good use of statistics and reporting, a clear meeting structure (with minutes and notes) and a definite link between all performance reviews and the corporate objectives. However, it is important to give consideration to the monitoring arrangements in place to ensure that processes are working as planned and these checks have not taken place recently due to the unusually high workload. Records of these checks are also necessary and should form an input to management review (process performance).

Good use of white communications boards was also seen. All relevant details are updated on a daily basis and this provides a powerful source of information for staff.

Observation:

Action points arising from meeting minutes could be separated and/or emboldened so they can be seen at a glance.

Policy

This new department (set up 2 years ago) appears to fit very well with the plan, do, check, act cycle underpinning ISO 9001:2000. Most of the work undertaken by this team of four is done on a project basis and as such more flexibility is built into the system. Monitoring of performance is undertaken through ongoing communication relating to both progressing and calibre of work. The ultimate check phase comes through approval by committee, which is recorded in the minutes of their meetings. Regular one to one meetings with the Director of Policy are noted in individual books which detail the everyday operations of the Policy team.

Clear links were noted between Corporate Strategy and the work plans drawn up by the Policy department.

Observation:

Recording of one-to-ones in individual booklets is good practice and may be worth considering elsewhere in the organisation. Please remember, however, that these books must be treated as quality records and controlled as such.

HR - Staff development and training

Staff training and development processes were assessed for effectiveness and these appeared to meet the requirements of the quality management system. Induction training for new starters includes an introduction to the principles of ISO 9001:2000 and an awareness of quality management systems in operation within HPC. Annual job description reviews and performance reviews are managed through the HR team and these include an evaluation of training undertaken to plug any competence gaps identified.

Strategic Assessment Plan

Please refer to report 4877095 for details of the assessment plan for 2007 to 2010.

Issues Arising from this Assessment

Ref	Area/Process	Clause
A116929/1	Registrations	8.2.3/8.2.4
Details:	No records were available to demonstrate in-process checking arrangements are being carried out at present.	

Assessment Participants

The assessment was conducted on behalf of BSI by:

Name	Role
Lisa Clarke	Team leader

... and on behalf of the organisation:

Name	Position
Greg Ross-Sampson	Director of Operations
Claire Harkin	Customer Service Manager
Adam Mawson	Team Leader
Rachel Tripp	Director of Policy & Standards
Larissa Foster	Director of Human Resources
Yasmin Hussain	Partner Manager
Kelly Webster	Human Resources Manager

Continuing Assessment

BSI believes in a partnership approach that provides added value service. It is on this basis that we propose a programme of continuing assessment as detailed below.

Site Address	Certificate Reference/Visit Cycle
Health Professions Council Park House 184 Kennington Park Road London SE11 4BU United Kingdom	FS 83074
	Visit interval: 6 months
	Visit duration: 7 hours
	Next re-certification: 01/04/2007

Re-certification by Strategic Review will be conducted on completion of the cycle, or sooner as required. The

review will focus on the strengths and weaknesses of your Management System.

Next Visit Plan

Visit objectives:

The objective of the visit next time is to seek evidence of ongoing compliance to the requirements of ISO 9001:2000 and to the plan, do, check, act cycle within the departments detailed below.

Visit scope:

As detailed below

Date	Assessor	Time	Area/Process	Clause
08/04/2008	Lisa Clarke	09.30	Opening meeting	
		10.00	Registrations - International & Grandparenting	
		12.30	Lunch	
		13.30	Management system organisation and review*	
		15.00	Report writing and closing meeting	

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

Notes

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

If you wish to distribute copies of this report external to your organisation, then all pages must be included.

BSI, its staff and agents shall keep confidential all information relating to your organisation and shall not disclose any such information to any third party, except that in the public domain or required by law or relevant accreditation bodies. BSI staff, agents and accreditation bodies have signed individual confidentiality undertakings and will only receive confidential information on a 'need to know' basis.

'Just for Customers' is the website that we are pleased to offer our clients, designed to support you in maximising the benefits of your BSI registration - please go to www.bsi-emea.com/JustForCustomers to register. When registering for the first time you will need your client reference number and your certificate number.

The CO2 emissions due to the planning, delivery and administration of this assessment have been fully offset through the BSI CarbonNeutral® project. For more information on CarbonNeutral® please visit www.bsi-uk.com/carbonneutral.

Should you wish to speak with BSI in relation to your registration, please contact our Operations Support Team:

BSI Management Systems UK
PO Box 9000
Milton Keynes
MK14 6WT

Tel: +44 (0)845 080 9000

Fax: +44 (0)1908 228123

Appendices

Management system organisation and review:

- Any actions arising from this report
- Management review - records to be available for sampling at random

- Internal audits - schedule and reports to be available for sampling at random
- Customer feedback and any complaints (if any received) - records/details to be available for sampling at random
- Process performance data
- Reporting and analysis
- Trends identified and improvement opportunities noted
- Risks/planning for change
- Corrective actions taken as a result of any of the above