Council

25 February 2021

hcpc health & care professions council

Chief Executive's report on organisational performance February 2021

Executive Summary

This paper provides the Council with updates on the organisation's performance since the December 2020 Council meeting. It includes specific projects and activities for the Council to note, stakeholder engagement activity, an update on Covid temporary registration and assessment of performance.

The previously separate Finance report has been included as an appendix.

Background data to the KPI performance is available to Council and on our website for reference.

Previous consideration	This is a standing item, considered at each Council meeting.
Purpose of report	The Council is asked to discuss the paper and provide any feedback on future format and information to be included.
Next steps	The next report will be received in March 2021.
Strategic priority	This report is relevant to all strategic priorities. Once the Strategy starts in April 2021, progress against annual Corporate Plans will be included in this report.
Financial and resource implications	None as a result of this paper.
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Chief Executive's Performance Report

February 2021

Contents

1. Chief Executive's Organisational Assessment

Since the last Council meeting in December the organisation has been operating under the Tier 4 and the national lockdown restrictions. These restrictions have meant that our offices have only been open to maintain essential functions such as processing post and building maintenance. We are using the remote telephony technology which we invested in and implemented since the first lockdown to manage calls coming into the registration and fitness to practice departments. These restrictions, coupled with the restrictions earlier in the year, have had an impact on our operational performance for EMR and international applications as these applications require more manual and paper-based working. SMT is ensuring sufficient resources are allocated to improve performance in this area and is closely monitoring progress.

The extended lockdown has inevitably had an impact on many employees, particularly those who are trying juggle home schooling, childcare or other carer commitments. Working with the Employee Forum, guidance has been issued to managers to empower them to make appropriate flexible working arrangements for their direct reports whilst ensuring business continuity. Our health and wellbeing offer continues to be actively promoted through a regular e-newsletter. The impact of our health and wellbeing initiatives and opportunities for enhancements will be evaluated through a recently launched employee pulse survey.

Despite the challenges presented by the pandemic and continued lockdown, significant progress has been made against a number of our strategic priorities, many of which are on the agenda for this Council meeting. I was delighted that we were able to launch our new Corporate Strategy for 2021-2026 on 21 January. This strategy gives HCPC a clear direction for the next five years. The development of the strategy signals our intention to work collaboratively with our key stakeholders, and I am grateful for valuable contributions from our stakeholders across all of the four nations which have helped develop the organisation's strategic direction.

The draft Corporate Plan for the first year of the strategy is presented for Council's consideration. The SMT is also progressing a range of initiatives to support the embedding of our new corporate values across the organisation and transform HCPC into an agile, collaborative and caring organisation.

Significant progress has also been made with many of the key strategic and cultural change enablers including: the estates strategy, EDI and building the data platform which is needed to support our insight aspirations. Furthermore, the recent progress with implementing the proposed registration fee rise means we can have greater confidence in our future financial position and our ability to realise our strategic ambitions.

Improving our fitness to practice performance is our number one priority. I have confidence in the positive progress that has been made with implementing our FtP improvement plan. The Perform Plus work being supported by PWC has started and I had the benefit of attending some of the launch sessions with colleagues. Additional legal support has been brought in to help progress the case backlogs. A new approach to recruiting case managers has been launched and our FtP apprentices joined early in January. The new Case Management System is on schedule to be implemented in April.

I am delighted to welcome Jo Moore as our new Executive Director of Corporate Services. Jo brings with her a wealth of corporate leadership experience, and her

appointment further progresses the establishment of a new permanent senior leadership team. Interviews for the Executive Director of Professional Practice and Insight post are scheduled to take place on 18 February.

2. Chief Executive's public agenda overview – 25 February 2021

FtP Improvement Plan - Progress report

The Council approved the FtP Improvement Plan and investment at its December 2020 meeting. Since then the Executive has been dedicated to launching the improvement activities and onboarding out consultants PWC to support us. Given the importance of FtP Improvement to the HCPC's future success, this report will remain a standing item on the agenda until such time that we meet all the PSA Standards of Good Regulation for FtP.

Risk Appetite

Our approach to the management of risk has a significant bearing on organisation culture and the pace at which we deliver our new strategic priorities. In October 2020 Council and SMT took part in a workshop to come to common agreement on how our risk appetite needed to change in light of our new Strategy. I am pleased that following engagement with members and the Audit and Risk Assurance Committee we are presenting a new Risk Appetite Statement for Council adoption.

Corporate Plan 2021-22 – Private paper

This is the first Corporate Plan for the first year of the new strategy. The corporate plan focusses on the delivery of FTP improvement and the enabling work that is needed to deliver the strategy over the next five years. I look forward to discussing and agreeing our priorities for development in 2021-22 to set us on a firm footing for ongoing strategy delivery. The final draft of the plan will come back to Council at its March meeting in public session for approval.

Estates Strategy – Private paper

The HCPC's current Estates Strategy was approved in 2018. Much has changed in the way we work since then and the time is right to revisit our Estates Strategy and ensure it is fit for the new ways of working and organisational culture we aspire to.

Data Platform Business Case – Private paper

How we use our data to provide insight and inform our decision making is a key theme of our new Corporate Strategy. This business case sets out our approach to building our capacity and capability to learn from the significant data assets we currently hold.

3. Stakeholder engagement summary

Key stakeholders and public affairs

Engagement in this period has included liaison with officials within the Scottish Government and Department of Health & Social Care on the proposed registration fees rises, initially to prepare for the legislative process and the communications

planning. It has also included development work on personal engagement plans for myself and the Chair to strengthen key stakeholder engagement.

Political engagement has continued apace with myself and the Chair meeting Government officials and parliamentarians across the four nations. We used these meetings to specifically make the case for our registrants to be used in the delivery of the COVID vaccines and also to seek clarity on access to vaccines for our professions particularly those working in the independent sectors. The meetings were also a useful opportunity to further address and support the work we have started on registrant health and wellbeing. A full list is appended to this report. We have also submitted evidence to Lords EU sub-committee EU trade deal Inquiry.

Other meetings attended by the Executive included the Royal College of Radiographers' Council meeting where we updated on HCPC developments, including the new corporate strategy, the registrant health & wellbeing strategy and action plan and EDI work including the annual diversity data survey.

Digital communications including email campaigns, web content and social media

In the last period, we have published a series of blogs on Podiatric surgery annotation: One year on and Appointment of Council apprentices brings new voices to HCPC. We have also published the Advanced Practice Full Research Report, worked with key stakeholders across the four nations to update the Vaccinations: what you need to know information in support of our registrants and produced renewal content for Practitioner psychologists.

We have continued to engage stakeholders on our social media channels with the above and content on 'LGBT+ history month', wellbeing and recruitment.

4. Regulatory Development

4.1 Regulatory reform

We have continued to work collaboratively with the Department for Health and Social Care (DHSC) and the other regulators continue to progress the legal instructions setting out the changes to the GMC's legislation as part of the regulatory reform work.

Since my last update, the White paper setting out legislative proposals for a Health and Care Bill was published on 11 February 2021. The proposals in the White Paper include:
- The power to remove a profession from regulation
- The power to abolish an individual health and care professional regulator
- The power to remove restrictions regarding the power to delegate functions through legislation
- Clarifying the scope of section 60 to include senior NHS managers and leaders and other groups of workers.

The timetable for legislation being introduced is to be confirmed and subject to parliamentary time.

4.2 Education quality assurance model implementation

We completed phase one of the project, preparation for the pilot in December. This included the establishment of business processes, definition of the use of standards (how the SETs will be applied to both institution level and programme level), a data and intelligence strategy and a risk-based decision-making framework. We also established an evaluation and development approach. Pilot participant education providers have been engaged and the first 'wave' went live in January. The second 'wave' will go live in March.

Alongside this preparation work we have been developing a provider IT interface, as well as continuing our stakeholder engagement with providers, service users, visitors, professional bodies and the Council of Deans of Health.

The fist evaluation of the pilot will take place in late February. The Education and Training Committee will be undertaking a seminar session in early March to review progress to date and the key milestones ahead.

4.3 Professionalism and prevention

The Professional Liaison Service continues to deliver the #MyHCPCStandards webinar, each one exploring how to meet a different standard in the Standards of conduct, performance and ethics. Webinars exploring standards 1 to 7 have now been delivered and the recordings for these can be found here. Other events delivered have included a webinar to sports and exercise psychologists, which was jointly delivered with a colleague from the British Psychological Society at their annual conference, and a remote consultation webinar delivered with the Scottish government's national lead for Near me network.

We have developed *Becoming a health and care professional* content for first and second year students, which explores the Standards, professionalism, use of social media, confidentiality and raising concerns. The content has been developed in collaboration with lecturers in physiotherapy at Ulster University and will be trialled with a sample of their students in March 2021.

As a result of the increased pressure on health services, it has been necessary to re-schedule some events planned for delivery in January, February and March 2021. These are being rescheduled for later this year.

4.4 Advanced Practice

Following the Council workshop in January with Bradford University to explore the findings of their research, we have commenced work to engage further exploration of the level of risk posed by advanced practice. Later in February we will be holding a two-part workshop with key stakeholders, led by our Expert Reference Group, to identify evidential gaps and further work that needs to be taken forward. Once Covid-19 pressures allow, Community Research will undertake targeted research with employers.

4.5 Professionalism research

As noted in my last report we are producing five case studies from the findings focusing on the themes of communication, competence, reflection, leadership and service user centred care. However, as filming was scheduled for November, unfortunately the new COVID-19 restrictions require us to postpone filming until

restrictions ease. Whilst there continues to be challenges in filming, we have been able to deliver this for two of the five areas of focus. We continue to work to ensure a safe delivery of this work and intend to do a soft release for the first two films through social media. The first of these centres on leadership and touches on the benefits of this within the Covid pandemic, so should provide a very helpful resource for our stakeholders.

4.6   Registrant wellbeing

The Registrant Health and Wellbeing Strategy and action plan was approved by the Council at its December 2020 meeting. Since this approval, our key focus has been to progress our work on tone of voice. A project team has been established to expedite organisational guidance, training and a review of a letter templates to ensure in our correspondence we represent ourselves as the human and compassionate regulator we strive to be. We are also developing customer service focused training for all employees drawing on learning from behavioural science to support change.

4.7   Insight and intelligence

Our new Insight and Intelligence Manager joined us in December and has engaged with the organisation to understand the current and future insight and intelligence requirements. He is engaging closely with the digital transformation team and will bring an Insight and Intelligence Framework to Council in May. Whilst this work progresses, he is also undertaken high priority projects to support a review of our approach to CPD, the work of our Professionalism and Upstream Regulation team, and FtP improvement.

4.8   HCPC Consultations

Standards of proficiency

Given the scale of the changes proposed through responses to the consultation, the Executive will hold a workshop with the Education and Training Committee in March to explore how we take these proposals forward.

SET 1 for Operating Department Practitioners

We launched this consultation in January. We've seen an exceptionally high rate of responses this early in the consultation period, with good representation across the four countries.

Guidance on health and character

We launched this consultation in January. We've seen a fairly small response so far and are monitoring this closely to inform our communications approach and length of the consultation period.

4.9   Inquiries, external consultations and reports

The HCPC has responded to two consultations in the reporting period.

GPhC consultation

The Executive responded to the General Pharmaceutical Council's consultation on its draft strategy for FtP. Many of the aims mirror those set out in our FtP

Improvement work, Registrant Health and Wellbeing Strategy, and Professionalism and Upstream Regulation Framework, and so we provided broad support to their proposals. We did however provide comments on the language used in relation to EDI, cautioned against some aspects of their reflective practice approach in the context of recent gross negligence manslaughter convictions, and highlighted the challenges of facilitating mediation within an FtP setting.

Health Education England standards for the non-regulated foot health workforce consultation

HEE consulted on standards for the non-regulated foot health workforce. We welcomed the standards, but queried what enforcement mechanisms would be in place to ensure compliance, highlighted the importance of four country engagement to reduce the risk of disparity, and welcomed further clarity on plans to create alternative pathways for practitioners and assistants into the regulated profession of podiatrists/chiropodists.

We noted that this work, along with HEE's work to establish the Centre for Advanced Practice's and associated plans for accreditation and credentialing of advanced practice, are setting a precedent for exploration into new territory for HEE in more of a voluntary regulation space. We welcomed further clarity about HEE's future intentions to introduce standards and accreditation in other areas where there are currently no statutory regulation measures.

5. Covid Response

5.1 Temporary Registers

The tables below set out the number of temporary registrants on each of the registers as of 15 February 2021. In summary there are 21,338 temporary registrants.

	Former registrants		
	Reg	Non-reg	Total
AS	265	7	272
BS	3126	64	3190
CH	835	32	867
CS	576	14	590
DT	524	18	542
HAD	154	2	156
ODP	634	40	674
OR	165	6	171
OT	3624	124	3748
PA	1791	57	1848
PH	3103	126	3229
PO	107	1	108
PYL	1418	39	1457
RA	3345	109	3455
SL	1671	51	1722
Total	21338	690	22029

Registered = added to the temporary register
Non-registered = added to the temporary register but subsequently removed

The student temporary register was withdrawn for all professions except for Biomedical scientists and Clinical scientists on the 30 November 2020. A total of 1,497 students were removed, with 37 registrants requesting to remain on the student temporary register.

We remain in close contact with the Chief Allied Health Professions Officers across the four countries on workforce issues during the second wave of the pandemic to ensure we are supporting where we can from a regulatory perspective and to ensure students continue to progress and are able to complete their programmes.

5.2   Supporting Stakeholders

Joint regulator statement

We issued a joint statement from Chief Executives of statutory regulators of health and social care regulators on 13 January. It recognised that in highly challenging circumstances professionals may need to depart from established procedures and that our regulatory standards are designed to be flexible and provide a framework for decision making. It also set out to reassure that context would always be taken into account where concerns are raised. You can read the statement here.

Vaccines delivery plan

We issued a statement in response to the publication of the Government's Covid-19 Vaccine Delivery Plan in January. The Delivery Plan highlights that the UK Government is considering the use of a wider group of healthcare professionals, including occupational therapists, paramedics, physiotherapists and radiographers to deliver the vaccine. In our discussions with NHS bodies across the four nations, HCPC have championed the role of registrants in successfully delivering the vaccine as quickly and safely as possible.

In our response we welcomed the clarification on the role of HCPC registrants in delivering vaccines. However, we noted that there is still a need for some further clarity on how registrants will receive the vaccine. We have worked closely with public health bodies across the UK, to seek further clarity and guidance on this issue, specifically for those working in private practise. This engagement has been productive and we have been able to update our FAQs accordingly.

UK-Reach research participation

The HCPC has supported the Government funded UK-Reach University of Leicester research study into Ethnicity and COVID-19 Outcomes in Healthcare Workers. We have contacted registrants on the behalf of REACH to invite them to complete a voluntary survey. We have also established a data sharing agreement to share data on an anonymous basis, as have several other regulators. More information on this research can be found here

5.3   HCPC operational impact

FtP

During the third lockdown we have continued to operate business as usual fitness to practise processes. The pressures the pandemic is causing on the NHS and other organisations has impacted our ability to obtain information within our usual timeframes, and we have been flexible in extending deadlines and refining requests

for information to support them to engage with us. We have continued to receive requests from registrants for extensions to provide their representations due to the challenges of front-line working in the pandemic.

In the current lockdown we have also received more requests relating to the difficulties presented by registrants' home schooling. We are mindful of the need to ensure registrants can continue to participate fairly in the FtP process at this time and are working with registrants and/or their representatives to agree appropriate timeframes and additional support where relevant. We continue to undertake hearing activity remotely and are reviewing how we can proceed with hybrid or in-person hearings we were anticipating to hold from March onwards.

Registration

Whilst enabling all registration processes to be undertaken remotely this has also impacted negatively on the productivity of those processes that require manual data entry, with individual performance targets amended accordingly. This has particularly impacted the International and EMR application processes with extra resource assigned to these areas during January and February 2021, by planning the weekly resource rota to focus on these areas, recruiting two new temporary employees and offering overtime to the team.

6. Organisational development

6.1 Establishing a new working culture

We have agreed the HCPC's new values and are currently working with our employees to agree the behaviours that will demonstrate these values, as well as ensuring that these behaviours will be recognised and rewarded. Looking forward we are working on several aspects.

Enhanced recruitment
We are piloting new and innovative approaches to our recruitment campaigns, starting with a pilot in FtP to attract more candidates. We have started to add 'a day in the life of' articles on the intranet, so potential candidates can see what the roles involve We are also introducing assessments, scenarios, and better ways of ensuring people have the skills and mindset to demonstrate our values in their day to day work.

Learning and development
We are reviewing our induction and on job training to ensure when appointed new starters are supported to be effective. This will include introducing reflective learning, to ensure continuous improvement, creating a positive environment and celebrating success. This is reflected in the 'tone of voice' project and newly developed customer service modules which we are starting to roll out to all employees. External training in how to effectively and non-defensively respond to complaints has been provided to managers within FtP, a similar session has been held with Registration managers previously.

Succession planning and career development
We are developing succession plans, reviewing our current progression paths, and identifying where this can be revised and keep the talent we need. The new Perform online performance platform will greatly assist this process and enable organisation

wide visibility for SMT. We are also looking at secondment, job shadowing and coaching to assist in this process.

People and Resources Committee
The People and Resources Committee has a key remit to provide assurance on our culture and the Executive had begun working with this Committee to scope the information they need to fulfil this role.

6.2   Equality Diversity and Inclusion

The 2020-21 registrant EDI survey has returned a 98% increase in responses as compared with the 2019-20 survey, largely due to a targeted communications campaign and close liaison with professional bodies. This means we currently have data for just over 31,000 of our registrants. The survey will shortly close.

Diversity McKenzie, our appointed EDI auditors, are currently undertaking a review of our EDI policies, and have held workshops with around a third of staff across the organisation. This work will inform a revised action plan. The full audit report will be presented at the March Council meeting alongside our draft EDI strategy and action plan for approval.

Internally we have established our EDI Employee Group. The Group will promote, champion and encourage diversity, inclusion and equality at the HCPC and will monitor and provide scrutiny against the key areas of performance set out in the EDI Strategy and Action Plan.

This month at the HCPC we have been celebrating LGBT+ History Month. Employees have been facilitated to share their stories about LGBT+ issues as part of a panel discussion. In late February we will be hosting a virtual get together to celebrate the LGBT+ community.

6.3   Digital Transformation

There continues to be significant activity to move the HCPC along the Digital Transformation roadmap agreed in September. Work is complete on the data architecture and design and the business case for the development of this capability will be considered on this agenda.

From an oversight perspective, the second Digital Transformation Advisory Forum was held at the beginning of February. The purpose of this forum is to ensure all the Digital Transformation Strategy and subsequent implementation activity has external scrutiny. The forum was supportive of the approach HCPC want to take with the development of our data capability and give useful input in the consideration of governance and compliance of the activity on the platform.

6.4   Regulatory IT systems

Registration

The high priority finance interface implementation issues I reported in December have mostly been resolved. Unfortunately new issues have emerged around the Direct Debit collection process. A file that was created and loaded on 24 December ready for the January collection and the subsequent one created for the February collection resulted in a number of issues caused by a combination of system bugs, incorrect data or process gaps. This resulted in the following errors:-

- when the direct debit file was loaded on 24 December, the collection date was set to 24 December instead of 4 January (the next working day after 1 January). Consequently, collections were taken earlier than should have been. The file has now been updated, so that it now uses the date that we provide in the collection file. Impacted registrants were notified after the event and HCPC offered to reimburse any additional costs incurred. 6 registrants have taken up this offer;

- some registrants had money taken when they had already paid upfront. This was due to incorrect mapping of migrated data and has now been rectified by Finance. These registrants were reimbursed;

- some people who had a deregistered status had money deducted from their account as part of the DD collection process. This was because their mandate had not been cancelled on deregistration. This was a system bug that has now been corrected by IBM. These registrants were reimbursed;

- the direct debit collection failed for around 600 registrants due to system coding errors. These issues have been rectified by finance and IBM; and

As well as refunding money collected in error, we of course sincerely apologised to the impacted registrants and former registrants for this error.

I have formed a task force lead by SMT to ensure we have identified and corrected all issues in the system. We have engaged with a specialist organisation with experience of the system to validate the design, interfaces and business rules to provide assurance to our registrants and the Council, that no other issues that are being masked.

Unfortunately, this issue has impacted our ability to progress with the online registrations process at the pace we would have wanted.

Fitness to Practise

The initial development phase of the new FtP Case Management System (CMS) continues at pace and is being showcased regularly to users and key stakeholders. We now aim to go live with a new CMS in April. The slippage was a result of some of the workflows required for our Minimum Viable Product being more complex than first thought. We should not lose sight of the fact that this an aggressive implementation schedule for HCPC and will demonstrate the organisations ability to deliver off the shelf, best of breed, software in a fraction of the time and cost of previous bespoke platforms.

Education

Development work on the new Education system has progressed well over. Using an agile methodology, we have developed a minimum viable product of the application on time to support the pilot of the new Education Quality Assurance Model.

6.5 Senior Management Team

Jo Moore joined the HCPC on 15 February as our new Executive Director of Corporate Services. I am pleased to welcome Jo to the team in what is a key role for ensuring the HCPC's future effectiveness. As Council is aware the HCPC is seeking

an Executive Director of Professional Practice and Insight to complete the new structure of the SMT.

6.6 Finance

A full finance report is included as appendix C. Our headline position is a year to date surplus of £24k, which is a favourable variance of £585k when compared to the quarter two forecasted deficit of £561k. The variance is mainly due to lower FtP hearing costs.

6.7 Fee increase

Following our extensive engagement with stakeholders to understand the impact of our proposed fee rises, the necessary legislation will be laid in the UK and Scottish Parliaments. Subject to Parliamentary approval, the reduced fee-rise of £8.12 will take effect on 1 July 2021 which means Clinical Scientists, Prosthetists / orthotists and Speech & Language Therapists will be the first professions subject to the new renewal fee of £98.12 per year. There will be similar increases across our other fees.

A communications plan has been developed, which runs alongside the legislative process. This has commenced, and includes engagement with key political contacts and key stakeholders including professional bodies and unions as well as registrants themselves. It also includes updates to the relevant materials and web pages.

6.8 Risk management development

We continue to develop our approach to risk management. The SMT have developed new Strategic Risks to compliment our Strategy for the Audit and Risk Assurance Committee and Council to consider in due course. Our project to renew our operational risk system continues with each department at the HCPC taking part in a facilitated workshop to build their risks from the bottom up anew. Feedback on these have been positive and it is encouraging to see good engagement on what can be technical area.

7. Brexit

Registration impact

The end of the transition period on the 31 December 2020 resulted in a significant area of change relating to the future of the mutual recognition of professional qualifications (MRPQ).

The European Mutual Recognition (EMR) application route was withdrawn from the 1 January 2021 and all European qualified applicants now need to apply to register with us through the international applications route. Unless, an applicant is eligible to apply for registration based on mutual recognition under the Swiss Citizens Rights Agreement for which a new application route, Swiss Mutual Recognition (SMR), has been developed.

The European Professional Card (EPC) application route has also been withdrawn for physiotherapists. The temporary or occasional application route for visiting European professionals has also been withdrawn for all future applicants.

The main impact of this change was the uncertainty surrounding HCPC's access to the Internal Market Information System (IMI), a secure multilingual online tool that facilitates the exchange of information between public authorities. The Registration Department utilises IMI to process EPC applications online and to communicate with European competent authorities to verify individual's information contained within EMR applications.

Unfortunately, we were not notified that we would retain access to IMI until the week starting the 22 December 2020 and as a result beforehand we needed to plan for its removal and consequently invest more resources to ensure we had processed all EPC applications received, to enable access to this information on our own registration system, should IMI have been removed. Whilst HCPC does now have access to IMI until September 2021, the government is working on implementing a replacement so that we maintain an effective online tool to communicate to competent authorities across Europe.

Our employees

We have applied for sponsorship to allow us to appoint non-UK nationals using the new points-based system. It will take up to 8 weeks for approval. We have reviewed the impact on current employees from the EU and have communicated to all staff the implications and signposted to where additional support can be found.

Chief Executive – John Barwick

Meeting schedule period covering 25 November 2020 – 25 February 2021

Matthew Smith, BDBPitmans – Monthly Meeting	25 November 2020
Chief Scientific Officers - Request for new temporary registration arrangement for BS/CS students	
CEORB Forum Meeting	26 November 2020
Alan Clamp, PSA	27 November 2020
Pelham Allan	30 November 2020
Simon Whale, Luther Pendragon – Corporate Strategy	
Robin Swann MLA	2 December 2020
Unite the Union	4 December 2020
Pelham Allan – Catch up	
Mark Bennett, DHSC	
Prof Mike Wang – Association of Clinical Psychologists UK	
HENSE Qtr 4 Forum	9 December 2020
Alan Clamp and Antony Townsend, PSA Performance Report and FtP Improvement	11 December 2020
Nicola Hill, Kingsley Napley	
Andrew RT Davies MS Welsh Assembly	14 December 2020
Donald Cameron MSP, Scottish Parliament	
GMB	
Behavioural Science - Simon Maule and Simon Whale, Luther Pendragon Meeting	15 December 2020
BDBPitmans Monthly High Court Case review	16 December 2020
Unison	
AHP Workforce and Education Strategic Oversight Forum	17 December 2020
CESG Forum Meeting	18 December 2020
Martin Marshall, Royal College General Practitioners	6 January 2021
Deloitte / HCPC Meeting	7 January 2021
SoR - HCPC attendance at UK Council meeting	13 January 2021
Suzanne Rastrick, NHS England NHS Improvement	
Charlie Massey GMC & Andrea Sutcliffe, NMC	15 January 2021
AHPs into Action Programme Board	21 January2021
BDBPitmans – Monthly High Court Case Review Meeting	22 January 2021
Donald Cameron MSP, Scottish Parliament	25 January 2021
CQC - Health and Social Care Regulators Forum	27 January 2021
Matthew Smith, BDBPitmans – Monthly Meeting	28 January 2021
CEORB Forum Meeting	29 January 2021
Alan Clamp, PSA	1 February 2021
Jenny Keane, NI Gov – Student Temporary Registration	4 February 2021
Vaughan Gething MS officials, Welsh Assembly	8 February 2021
DHSC - White Paper for the Health and Care Bill Forum	11 February 2021
CoDH Supporting Student Progression	
CQC - Learning from Covid-19 HSCRF sub-group meeting	15 February 2021

Key Performance Indicators dashboard

Registration

Measure	**Median processing time for UK graduates: 10 working days**								**Period**		February	
Executive commentary	This indicator is in line with the optimum figure.											
Year to date		**Feb-20**	**Mar-20**	**Apr-20**	**May-20**	**Jun-20**	**Jul-20**	**Aug-20**	**Sep-20**	**Oct-20**	**Nov-20**	**Dec-20**	**Jan-21**
	Working days	3	3	5	1	2	4	2	4	5	6	6	
Previous year		**Feb-19**	**Mar-19**	**Apr-19**	**May-19**	**Jun-19**	**Jul-19**	**Aug-19**	**Sep-19**	**Oct-19**	**Nov-19**	**Dec-19**	**Jan-20**
	Working days	7	10	9	2	4	10	10	12	12	9	10	2

Measure	**Median processing time for International applications (European Mutual Recognition): 60 working days**								**Period**		February	
Executive commentary	The closure of the office due to the COVID-19 crisis, the management of the COVID-19 Temporary Registers and initial issues relating to the delivery of the new registration platform has impacted the processing of EMR applications.											
Year to date		**Feb-20**	**Mar-20**	**Apr-20**	**May-20**	**Jun-20**	**Jul-20**	**Aug-20**	**Sep-20**	**Oct-20**	**Nov-20**	**Dec-20**	**Jan-21**
	Working days	46	49	38	53	62	53	57	63	65	69	71	
Previous year		**Feb-19**	**Mar-19**	**Apr-19**	**May-19**	**Jun-19**	**Jul-19**	**Aug-19**	**Sep-19**	**Oct-19**	**Nov-19**	**Dec-19**	**Jan-20**
	Working days	55	55	38	39	41	42	45	53	58	50	47	48

Measure	**Median processing time for International applications (Non-European Mutual Recognition): 60 working days**								**Period**		February	
Executive commentary	The closure of the office due to the COVID-19 crisis, the management of the COVID-19 Temporary Registers and initial issues relating to the delivery of the new registration platform has impacted the processing of International applications.											
Year to date		**Feb-20**	**Mar-20**	**Apr-20**	**May-20**	**Jun-20**	**Jul-20**	**Aug-20**	**Sep-20**	**Oct-20**	**Nov-20**	**Dec-20**	**Jan-21**
	Working days	47	52	46	58	76	48	36	72	62	71	74	
Previous year		**Feb-19**	**Mar-19**	**Apr-19**	**May-19**	**Jun-19**	**Jul-19**	**Aug-19**	**Sep-19**	**Oct-19**	**Nov-19**	**Dec-19**	**Jan-20**
	Working days	57	51	39	40	46	42	44	53	56	48	49	44

Measure	Number of upheld appeals against registration decisions									Period		February
Executive commentary												
Year to date		Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21
	Concluded	4	3	0	0	0	0	4	2	4	3	1	
	Upheld	2	3	0	0	0	0	2	1	2	2	1	
Previous year		May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20
	Concluded	6	5	4	4	4	3	4	4	3	5	5	4
	Upheld	5	4	1	2	2	1	2	2	1	5	1	2

Education

Measure	Rolling 12 month median time to produce visitors reports following a visit: one calendar month									Period		February
Executive commentary	Performance within operational target.											
Year to date		Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21
	Days	26	28	28	27	28	29	29	29	29	29	29	29
Previous year		Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20
	Days	28	28	28	28	27	27	27	27	27	25	26	27

Information technology

Measure	Availability of HCPC websites (including Register and online portal): 99.5%									Period		February
Executive commentary												
Year to date		Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21
	Availability	100.0%	100.0%	100%	100%	99.7%	100%	100%	99.76%	85.71%	100.0%	100.0%	100.0%
Previous year		Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20
	Availability	100.0%	100.0%	99.52%	99.4%	98.9%	99.9%	99.6%	100.0%	100.0%	100.0%	100.0%	100.0%

Finance

Measure	Performance against budgeted operating expenditure in range of 97.5% to 102.5%									Period		February
Executive commentary	Performance against forecasted operating expenditure is just lower than the optimum range. This is mainly due to the lower than anticipated non-pay expenditure directly related to partners and property costs around predicting the impact of COVID-19. Also, some staff related cost; which are staff recruitment and training. Full financial information including the variance commentary, income and expenditure figures and the statement of financial position can be found in the finance update paper.											

Year to date	(,000)	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21
	YTD Actual	30,393	32,745	2,353	4,251	6,199	8,177	10,215	12,068	14,199	16,535	18,945	21,346
	YTD Budget			3,204	5,642	8,155							
	YTD Forecast	30,720	33,422				8,598	11,277	13,865	14,498	16,944	19,416	21,944
	YTD Variance	327	677	851	1,391	1,956	421	1,062	1,798	299	409	471	598
	Actual as % of budget	99%	98%	73%	75%	76%	95%	91%	87%	98%	98%	98%	97.3%
Previous year	(,000)	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20
	YTD Actual	31,522	34,957	3,606	6,466	9,356	12,306	15,025	17,973	21,149	23,942	26,456	28,001
	YTD Budget			4,016	7,069	10,076	13,129	16,111	19,191	22,221			
	YTD Forecast	32,151	35,472								24,027	26,919	28,164
	YTD Variance	628	516	410	603	720	822	1,087	1,218	1,488	85	463	164
	Actual as % of budget	98%	98%	90%	94%	93%	94%	93%	94%	95%	100%	98%	99%

Human Resources

Measure	Employee voluntary turnover: 22% (21.8% London average, Xpert HR labour turnover rates, published 5 May 2018)									Period		February
Executive commentary	Between the 3-month period, we have had 13 Leavers. Fitness to Practise (FtP) continues to have the highest level of turnover which accounted for over half of all leavers at 61%. The second highest is Registration and Finance at 15.5% each and Human Resources at 8%. Within Fitness to Practise, Case Preparation and Conclusion had the highest number of leavers accounting for 37.5%, closely followed by Investigations and Triage at 25% each, with Hearings at 12.5%. 100% of these Leavers were all due to Resignation. Of all leavers 35% declared that they resigned due to enhanced job opportunities elsewhere.											

Year to date		Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21
	Turnover	37%	23%	41%	41%	41%	41%	40%	39%	38%	34%	32%	27%
Previous year		Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20
	Turnover	21%	19%	19%	21%	21%	21%	22%	23%	25%	31%	32%	35%

Measure	Employee sickness absence										Period		February	
Executive commentary	The period of sickness that is being covered is between November 2020 – January 2021. There have been 190 days of sickness within this period, with long-term sickness accounting for 37%.													
Year to date		Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	
	Sick days	277	143	78	33	79	71	75	99	65	104	27	59	
Previous year		Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	
	Sick days	169	207	154	161	206	194	148	228	231	293	245	277	

hcpc health & care professions council

P10 January 2021
Management Accounts Overview

YTD to January 2021 - YTD Variance Analysis

■ Increase ■ Decrease ■ Total

1. Lower training, partner related costs, staff recruitment and staff rewards. The previous staff bonuses were absorbed in the individual departments in December.

2. Impact of 2ⁿᵈ lockdown on property costs and forecasted professional fees for the Estates project not yet incurred.

3. Registration partner related costs and printing costs lower than forecast. The catch up of expenditure on the assessors fees has already started this month.

4. Income has been manually calculated since November 20. More reconciliation work is underway to rectify the BC issues and implement a seamless automation of the interfacing for income processing from BC into the accounting system.

5. Settlement costs forecasted in December not yet incurred. This cost will be re-forecasted in the last quarter of the financial year.

6. The professional research has been delayed because of COVID. Its unlikely to be completed this financial year; so no costs has been incurred.

Income and Expenditure Account

Income and Expenditure Account YTD up to end of January 21	Actual £	Year to date Forecast £	Variance £	Full Year 6+6 forecast £
Income (A)				
Registration Income	22,202,622	22,289,265	(86,642)	26,770,850
Other Income	155,281	155,100	181	184,767
Income (A)	22,357,904	22,444,365	(86,462)	26,955,617
Pay Costs	9,649,603	9,803,644	154,041	11,942,776
Non-Pay Costs	11,046,622	11,517,497	470,875	14,021,166
Depreciation	649,923	622,961	(26,962)	780,528
Total Operating Exp (B)	21,346,147	21,944,101	597,954	26,744,470
Corporation Tax	0	0	0	35,106
Turnaround Costs	541,888	647,542	105,654	647,542
Total Expenditure ©	21,888,035	22,591,643	703,609	27,427,118
COVID-19 (D)	(445,929)	(413,597)	(32,331)	(220,426)
Total Surplus/(Deficit) E= (A-C+D)	23,940	(560,876)	(584,816)	(691,927)

Income By Activity

Income By Activity	Jan-21	Year to date
Graduate Registration Fees	174,322	1,348,854
Readmission Fees	16,740	198,423
Renewal Fees	1,728,106	18,568,706
International Scrutiny Fees	395,010	1,325,610
UK Scrutiny Fees	37,845	735,224
Other Registrant Income	465	25,806
Registration Income	2,352,488	22,202,622

Due to the outstanding issue of the interface between the new Registration system and the Finance system. The monthly income has been calculated manually since November 2020. The income by profession table and further analysis and commentary on the income variance will be provided in due course.

Expenditure

Expenditure Jan-21	Year to Date Pay	Non-Pay	Total
Chair, Council & Committee	0	230,880	230,880
Chief Executive	799,582	795,114	1,594,696
Policy & External Relations	616,886	358,888	975,774
HR & Office Services	914,499	1,920,975	2,835,473
IT & Major projects	920,000	1,659,370	2,579,370
Governance & QAD	366,607	38,467	405,074
FTP	3,623,529	5,260,497	8,884,025
Registration	1,631,094	537,683	2,168,777
Education	435,953	67,509	503,462
Finance	341,454	177,239	518,693
Depreciation	0	649,923	649,923
Transformation Costs	0	541,888	541,888
Total	9,649,603	12,238,432	21,888,035
COVID 19	111,660	334,269	445,929

Summarised Departments by Exec Directors with larger departments still shown separately

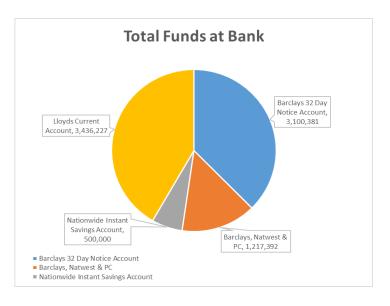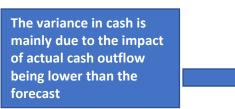Commentary on expenditure variances situated in the bridge on page 2.

Colour Legend

Colour Legend	
(blue)	More than 5% better than Forecast
(red)	More than 5% worse than Forecast
(green)	Close to Forecast
(yellow)	Between 2.5% & 5% better than Forecast
(orange)	Between 2.5% & 5% worse than

Total Funds at Bank

- **Barclays 32 Day Notice Account, 3,100,381**
- **Lloyds Current Account, 3,436,227**
- **Nationwide Instant Savings Account, 500,000**
- **Barclays, Natwest & PC, 1,217,392**

Legend:
- Barclays 32 Day Notice Account
- Barclays, Natwest & PC
- Nationwide Instant Savings Account

The variance in cash is mainly due to the impact of actual cash outflow being lower than the forecast

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At the end of Jan 21; the cash balance at the banks were £8.3m; of which £3.1m was held on fixed term deposit and £5.2m was in instant access accounts.

The interest rate on our main instant account is now 0%.

The chart shows the cash balance as @ 31st of Jan 21.

Statement of Financial Position Balance Sheet	Actual Jan-21	YTD Forecast Jan-21
Total Fixed Assets	**9,933,369**	**10,486,585**
Current Assets		
Other Current assets	2,120,902	1,026,212
Cash & cash equivalents	8,254,807	7,941,723
	10,375,708	**8,967,935**
Total Assets	**20,309,078**	**19,454,520**
Current Liabilities		
Current Liabilities	2,058,084	1,700,925
Deferred Income	13,572,634	13,660,051
Total current liabilities	**15,630,718**	**15,360,976**
Liabilities greater than one year	163,052	163,052
Total Assets less liabilities	**4,515,308**	**3,930,492**
Reserves	(4,491,368)	(4,491,368)
This Period's **(surplus)**/deficit	(23,940)	560,876
General Fund c/fwd	**(4,515,308)**	**(3,930,491)**