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### Chair's Report – March 2024

#### 1. Purpose of Report

To flag developments at HCPC from the Chair's perspective and to update on activities of note.

#### 2. HCPC People

I had an inaugural review of HCPC topics with David Stirling, the Senior Council Member.

#### 3. Governance

Together with our Head of Governance, I am in the early stages of planning a governance and non-executive leadership effectiveness review for the latter part of the year.

I shared my thinking on the next set of objectives for our Chief Executive, with Remuneration Committee colleagues. The consensus was that these were challenging, but well advised and supported, and should be achievable. The final version will be circulated to Council for information.

#### 4. PSA Standards

As previously reported, I chaired a recent Fitness to Practise (FTP) Performance Improvement Board. Indications are that the HCPC's progress continues to be sustained in key metrics, the emergence of potential trends is closely monitored and hotspots addressed collaboratively.

#### 5. Stakeholders

During the period, I met stakeholders including:

- Chair and Chief Executive of the Professional Standards Authority (PSA) – the PSA's latest manifesto themes were outlined and its key recommendations for government are to:
  - Prioritise work to modernise the powers of the healthcare professionals' regulators
  - Ensure that public inquiries and reviews result in lessons learned and are acted upon
  - Develop a regulatory strategy to support delivery of the NHS Long-Term Workforce Plan and manage risks to safety and public confidence
  - Take steps to enhance professional development and accountability of senior managers in the NHS

- Support robust action within health and care to address discrimination in the workplace.
- General Pharmaceutical Council Chair – as well as updating on the joint health and care Chairs’ project convened by myself for the HCPC, we talked about additional areas of potential collaboration.
- Chief Allied Health Professional (England) – the main focus was workplace behaviours and the challenges facing the ambulance sector in particular. We will be exploring a technology approach that could support protected ‘speaking up’.
- The Department of Health and Social Care (DHSC) – a strategic update covering several themes. I encouraged the Department to press ahead with regulatory reform and flagged the process necessities (dual Parliament) that remain in place (such as for fees consultations, however modest). I also advocated for a national focus on the relatively untapped potential of allied health professionals (AHPs) in the workforce. Much has been made of anaesthesia associates (AAs) and physician associates (PAs), yet their number is relatively small, whereas AHPs (320,000+) are regulated, in position and, because of the flexible and efficient way in which HCPC regulates, can extend their scope safely without undue bureaucracy or additional hierarchy.
- Chief Allied Health Professional (NI) – a fascinating first conversation with this new-in-post leader, that spanned hospital discharge, an impact vision for AHPs, ‘patients as partners’ in diverse cultures and how to engage a population in its health and care.
- The CQC Chair and I are due to meet before our next Council gathering.

## **6. Fee increases for registrants**

As promised, having secured a headline fee rise that will be implemented over the usual two year cycle, the HCPC will now be introducing routine, regular fee rises to keep pace with external economics and our plans to deliver for patients, service users and registrants, as well as remaining sustainable.

## **7. External engagements**

I visited an NHS hospital trust on the borders of Kent and Sussex and had an excellent discussion with the Chief of Service for Core Clinical Services about the current and potential scope for AHPs in the workforce and in senior positions, as well as having equity of opportunity in such important matters as protected CPD time. I followed up with some of the excellent data we now have (thank you Dr. Gareth Davies, Head of Insight and Analytics and colleagues) on retention of AHP modalities. This was very well received, and I anticipate further interaction, and action.

## **8. Committees**

I am delighted to report that following an open invitation to Council Members, Helen Gough has joined the Audit and Risk Assurance Committee and Dr. Rebecca (Bekah) Eglington, the Education and Training Committee.

Thanks to the – not forgotten HCPC hero-persons who are engaged in hearing registration appeals. We learn much from this work and it is crucial to our having fair and robust processes, so I wanted to give a 'shout out' to David Stirling, Professor Valerie Webster, John McEvoy and Lianne Patterson.

## **9. Other Themes**

I continue to champion and take a close interest in the technological empowerment of our organisation. I have met a number of times with PwC, who have been leading an appraisal and review for us.