
FTP Improvement Programme Overview

Executive Summary

The backlog of FTP cases cannot fully explain the failure to achieve the other PSA Standards. The key premise of the FTP Improvement Programme is that sustainable improvements can only be delivered by resolving the root causes rather than managing the symptoms. By resolving the root causes, a solid platform for improvement is created.

Section 8 of the report proposes an initial set of Key Performance Indicators (KPIs) for Council to monitor the improvement trajectory.

Decision	Council is asked to review the FTP Improvement Programme overview and approve the proposed KPIs to monitor the implementation of the FTP Improvement Programme.
Previous consideration	This paper brings together several different FTP Improvement strands into a single document.
Next steps	If approved the KPIs to show progress against the improvement trajectories, will be reported at each future Council meeting.
Strategic priority	The strategic priorities set in 2018 are no longer current. We are developing a new strategy that we aim to confirm at the end of 2020. Improving our FTP performance will remain of key importance.
Risk	Strategic Risk 1 & 3 - failure to deliver effective regulatory functions, failure to be a trusted regulator and meet stakeholder expectations. Risk Appetite consideration: <ul style="list-style-type: none">• Public protection The Council takes a minimal approach to public protection risks. Public protection is our aim and our strategy and processes are intended to provide this.• Innovation - The Council seeks innovation that supports public protection, quality and efficiency. We balance embracing new technology and ideas with impact and financial investment and assess projects accordingly.
Financial and resource implications	Financial implications included in the original 2020-21 budget. This paper has no additional financial implications.
Author	Gordon Dixon, Business Improvement Director gordon.dixon@hcpc-uk.com

Fitness to Practice (FTP) Improvement Programme Update

July 2020

Prepared by Gordon Dixon, Director of Business Improvement

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1. Executive Summary

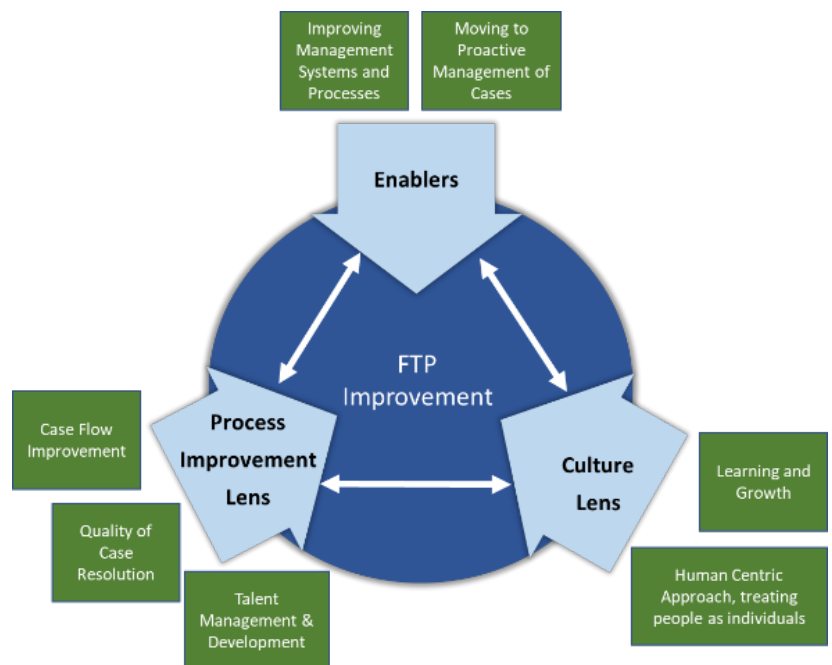
The backlog of FTP cases can explain the impact on timeliness but cannot fully explain the failure to achieve the other PSA Standards. The key premise of the FTP Improvement Programme is that sustainable improvements can only be delivered by resolving the root causes rather than managing the symptoms.

The root cause analysis of the FTP challenges can be categorised as:

- **Demand management**, whereby the FTP case flow was not being managed by number of new FTP concerns or the level of cases within the department but was designed to restrict case-flow to balance the budget;
- **Manual processes**, whereby quality is driven by compliance with written procedures and good manual processes. Current high staff turnover leads to inconsistent application of the processes;
- **Management information**, whereby management information is not robustly captured and cleaned. System data errors are frequent;
- **Case decision-making**, whereby a complex hierarchy of decision making effectively abdicated responsibility from staff;
- **Risk management**, whereby the risk classification used for cases on public protection risk and did not consider the complexity risks that may impact case management; and
- **Change management**, whereby inefficient manual management processes meant there was little ability to embed learning points from reviews and audits.

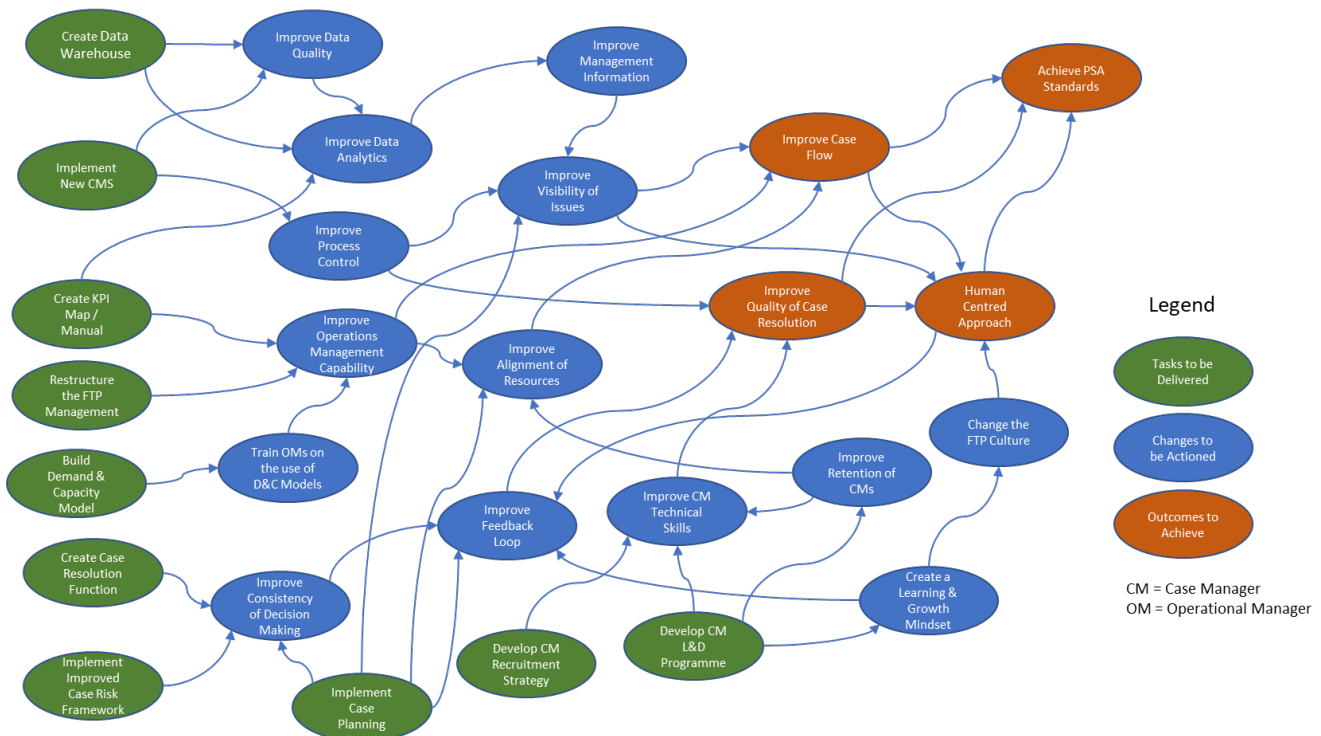
Achievement of the PSA Standards is being used as a proxy for achieving the first phase of FTP Improvement. The tasks that need to be delivered to enable the changes to be actioned have been divided into three themes:

- Enablers;
 - Replacing the Case Management System (CMS);
 - Using the CMS functionality to implement a robust Case Planning;
- Process Improvement;
 - Improving case flow;
 - Improving the quality of decision making;
 - Improving recruitment and retention through a focus on staff development;
- Culture Change
 - Developing a learning and growth culture whereby the department can learn from the challenges and experiences of the team; and
 - Developing a Human Centric Approach, remembering that all stakeholders are individuals who are involved in an emotional challenging process.



There are interdependencies between many of the tasks to be delivered and changes to be actioned so that improvement outcomes can be achieved. These linkages are shown in the diagram below.

FTP Improvement Benefits Realisation Map



The enablers of improving the management systems and processes and changing the philosophy of case management, i.e. pro-actively managing cases to conclusion rather than reactively progressing cases as activities on the case happen, are essential to underpin FTP improvement.

2. Root Cause Analysis

Context

The key premise of the FTP Improvement Programme is that sustainable improvements can only be delivered by resolving the root causes rather than managing the symptoms.

For several years, the FTP Department has had challenges meeting the PSA Standards, which are a proxy for service quality standards. There have been modest improvements, as demonstrated by the HCPC Quality Department audits but these improvements have not been sustainable.

A backlog of cases has been growing year on year. The backlog has been defined as the number of cases in progress that are above the caseload that would be expected in an efficient process. The backlog can explain the impact on timeliness but cannot fully explain the failure to achieve the other PSA Standards.

Root Cause Analysis

To ensure that the Improvement Programme was sustainable, a Root Cause Analysis was undertaken. The analysis indicated that the root cause of the FTP challenges can be summarised as:

- Demand management;
- Manual processes;
- Management information;

- Case decision-making;
- Risk management; and
- Change management.

Demand Management

The assertion is that the FTP Department had focused on balancing the budget rather than creating the capacity to manage the number of cases. The budgeting process started with defining the number of cases that could be afforded with the Case Preparation legal contract and working backwards. The penalty clauses associated with exceeding the planned number of cases¹, together with fixed price to case number cap meant that the FTP flow planning was based on managing the cost of that contract.

While this meant that FTP was able to manage the budget to within a 2.5% tolerance, the actual case flow was disconnected from that required to meet the demand of new concerns being raised.

Manual Processes

HCPC's case management system is Charter CMS. Charter CMS is a case content management system with little process or workflow validation. **Quality is driven by compliance with written procedures and good manual processes rather than having system quality controls.** An example of good manual processes is when Case Managers diarise in their Outlook calendar to provide action prompts outside CMS as there are no system prompts for actions to be taken. High staff turnover in FTP has led to inconsistent application of the manual processes and there has not been consistent sharing of good practices.

Management Information

The management information regarding FTP has data quality issues, underpinned by a lack of data validation within the Charter CMS. In addition, **the little analysis of the data that was undertaken focused on presentation of case numbers and not from an operational management perspective.** This resulted in a lack of visibility of real key performance metrics.

Case Decision-Making

The hierarchy of decision-making was complex with three levels of management. **The manual processes and numbers of approvals required effectively abdicated responsibility from staff** as there was always going to be someone else that would also oversee the decision.

Risk Management

The risk management framework within in FTP was focused on the Public Protection implications of the case and **did not consider the challenges regarding case progression.** Examples of case progression risk include technical complexity and stakeholder complexity. A broader interpretation of risk management would allow improved monitoring of case progression.

Change Management

Reliance on manual management processes meant **there was little ability to embed learning points from reviews and audits.** The manual management processes meant that it was challenging to implement process changes and management information was not available to track improvements when changes were being made.

¹ Page 9 contains detail of the penalty calculation

3. Enabling Priorities

The enabling priorities are to:

- Improving Management Systems and Processes; and
- Moving to Proactive Management of Cases.

These enablers will underpin the improved operational delivery of the FTP Department.

Improving Management Systems and Processes

Case Management System

The current Case Management System (CMS) is no longer fit for purpose and needs to be replaced as a priority. Significant work has been undertaken by HCPC to create User Stories as part of the replacement. A tender process was undertaken for the delivery of the system and IBM were the preferred tenderer with a budgeted cost of £1.7m for the first phase of development to produce a minimum useable product. The Business Case produced indicated that the pay-back period was over seven years which indicated that the approach was not value for money.

Working alongside the Digital Transformation Team, off the shelf packages for legal firm case management systems have been evaluated. **Initial evaluation has indicated that legal firm case management systems can deliver circa over 80% of the full HCPC requirement (not just the minimum useable product) for circa less than 20% of the cost and with an initial implementation timeframe of 3 months.**

Besides the implementation time and cost, **the advantage of using an off the shelf legal firm case management system is that the standard legal firm management systems for quality and case monitoring are embedded in the system.** Implementing these quality and case monitoring systems would provide HCPC with a fast track improvement in FTP.

Management Information and Analysis

Initial data analysis undertaken by the Business Improvement Team focused on understanding the issues within FTP. **The focus has changed to converting the hypothesis driven analysis as a diagnostic tool into reporting structure that can be used by the FTP Management Team.** The improvement team's analysis has a high degree of overlap with the standard management information reporting in some the better legal firm case management systems.

Creating the management information is the first step but its effective use is reliant on:

- Developing the analytical capability within HCPC; and
- Increasing the capability of the FTP Management Team to interpret and act on the analysis.

Moving to Proactive Management of Cases

Historically HCPC FTP case activities occur as a result other activity. There is little consistent case planning for progression other than a couple of steps ahead in the process.

Proactive management allows for variations from the planned to be monitored. The forecasting of progression and quality pressure points increases the ability of FTP management to take actions to taken in advance of emerging issues becoming problems.

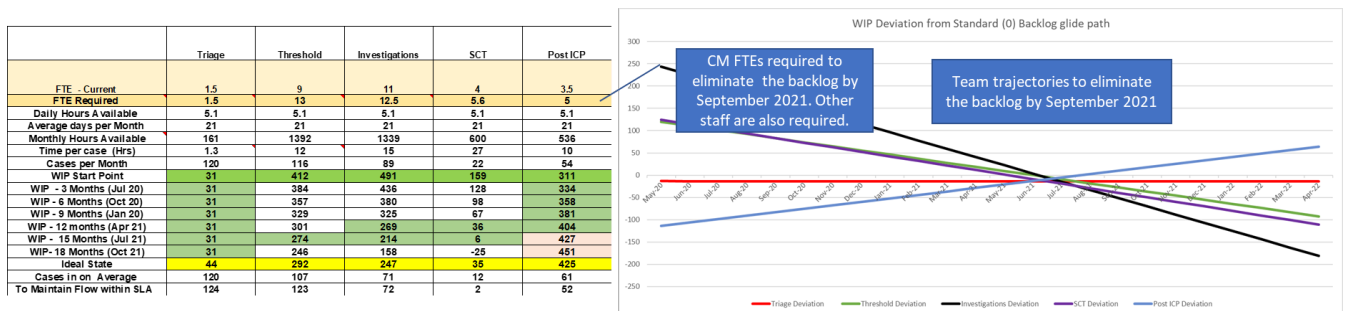
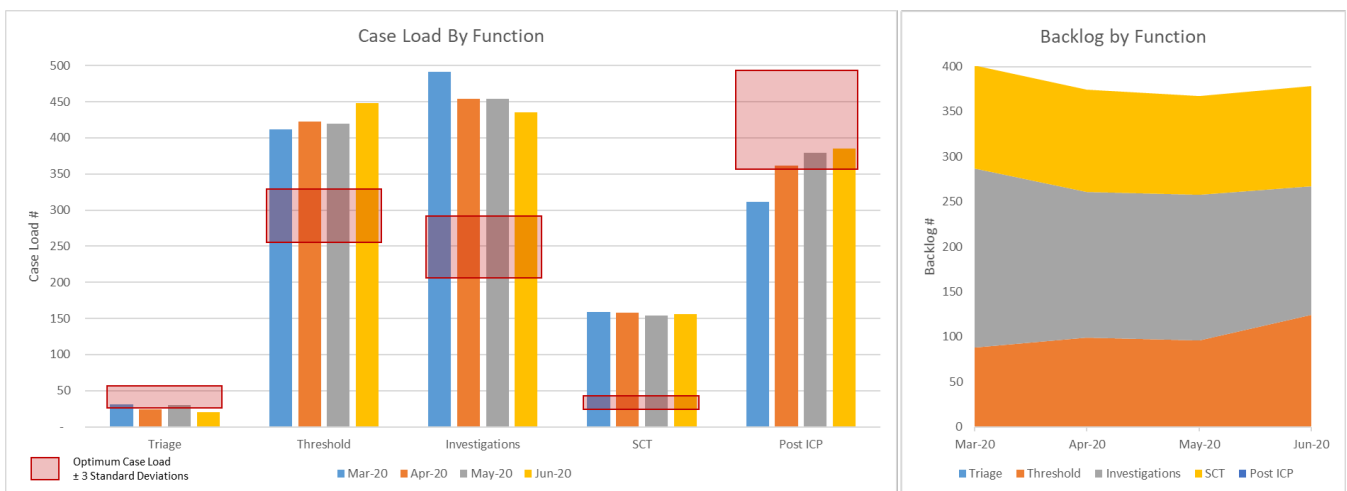
The implementation of robust risk-based case plans early in process, with target dates for all the process stages, will not only improve case-flow but is a critical enabler for a change in philosophical approach.

4. Improved Case Flow

Backlog Management

The Business Improvement Team have built a **Demand and Capacity Model** that allows the forecasting of the resources needed to manage the case flow. This Demand and Capacity Model has been built on analysis of the current effort required to progress a case and allows the capacity of resources required to be forecast. Additional factors such as the skills and experience of the FTP staff also need to be considered, as these may impact the quality of the work.

The target is to have the backlog eliminated by the end of September 2021 which is 18 months from the start of the 2020/21 financial year when the backlog reduction cost was initially budgeted. **Whilst there has been a delay to the speed of backlog reduction because of reacting to Covid-19, the target remains to eliminate the backlog by September 2021.**



The speed of elimination of the backlog must be balanced with the resources required to implement the enabling projects and improving quality. **There is the risk that attempting to eliminate the backlog too quickly will negatively impact the quality of the case resolution.**

Managing the Aged Profile

While timeliness is no longer a standalone PSA standard, managing the aged profile of the cases is critical to improving the FTP service. PSA Standard 15 now requires regulators to 'deal with cases as quickly as is consistent with a fair resolution of the case'. Older cases are an indicator of case progression issues and potentially negatively impacts registrants, complainants, and other stakeholders. **The aged profile of the cases is the second critical measure of case-flow that needs to be balanced with the level of work-in-progress case-loads.**

SUMMARY AT 29-JUN-20

	Total cases	Target	Cases < Tgt	Cases > Tgt	Cases > Tgt	Concerned cases at 150% of Tgt	Issue cases > 150% of Tgt	Cases > Tgt
Triage	20	2 wks	9 45%	11 55%		3 wks -	>3 wks 11	11
Threshold	448	10 wks	146 33%	302 67%		15 wks 91	>15 wks 211	302
Investigations	435	22 wks	182 42%	253 58%		33 wks 102	>33 wks 151	253
SCI	156	12 wks	27 17%	129 83%		18 wks 12	>18 wks 117	129
Total Post-ICP	1,059		364	695		205	490	695
Post-ICP	385	39 wks	245 64%	140 36%		59 wks 85	>58.5 wks 55	140
Total HCPC	1,444		609 42%	835 58%		290 26%	545 38%	835

There will always be a small number of cases that are delayed for reasons outside the HCPC’s control. Reasons for this include the involvement of a police investigation. Systems and processes need to be put in place that ensure that all cases that do not have external constraints are managed within timeframes, and those cases with external constraints are actively managed to minimise the timeframe for case resolution.

Case Plans

The development of Case Plans and forecasting milestone dates early in the process is critical for managing the flow of cases. This approach is used variably across the FTP Department and needs to become an embedded way of managing case progression where the Case Plan is developed and monitored according to the risk and complexity of the case. When implemented and being able to be reported against, **the variation from the case plan supports the learning about expectations of case progression** and supports the achievement of PSA Standard 15 by setting the expectation for timeliness that is consistent with a fair resolution of the case.

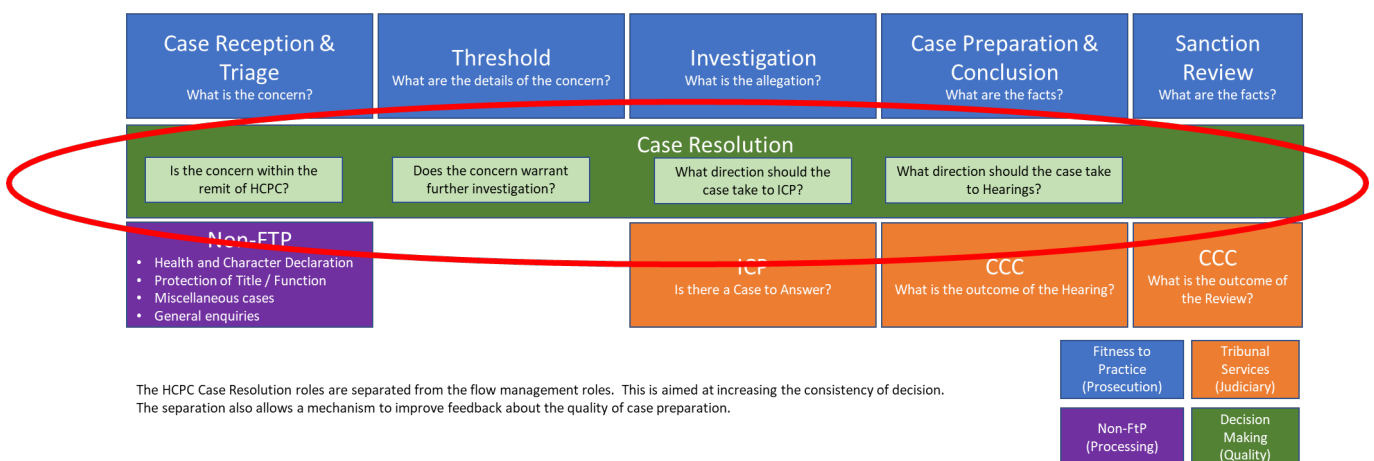
The Case Plan also supports improved stakeholder engagement, where expectations regarding case progression can be set and managed.

The implementation of robust risk-based case plans not only supports improved case-flow, it is a critical enabler to changing the philosophical approach whereby FTP cases are pro-actively managed to conclusion rather than reactively managed against activities.

5. Improved Quality of Case Resolution

A consistent issue raised in the PSA Audits and the internal HCPC Audits is about the quality and consistency of case conclusion or progression decisions. The proposed FTP operating model places responsibility for these decisions with a Case Resolution Team.

To Be - FTP Process Model – Level 0



This means that the Pre-ICP Case Progression Specialists would no longer be embedded in the functional silos but would be within a separate team. This approach also means that the FTP Department would start to manage the Case Preparation & Conclusion legal contract based on potential outcomes rather than inputs.

The segregation of the roles is targeted at ensuring that:

- **Decision makers are independent from the case managers, having quality of cases as their primary KPI rather than case flow. This creates a tension between case flow and quality that needs to be managed;**
- **Case risks are independently monitored, creating a cross check with the work of the case managers; and**
- **A central function has the oversight of the case review and audit learning points, being responsible for tracking implementation and outcomes.**

6. People and Culture

Talent Management

Historically, HCPC has had a reputation for developing its people but this focus has drifted in recent years within FTP. There is planned to be an increased focus on Talent Management within FTP and **a the role of Operational Manager – Work-practice Improvement has the accountability for working with the HCPC Human Resources Department to ensure that the FTP Department becomes a beacon of good practice.**

Building Management Capability

Underpinning the building of the management capability is documenting of the FTP Operating Model and supporting frameworks such as KPI maps. When combined with the implementing of to legal firm case management structures and processes will provide FTP with the appropriate management frameworks and structures. **These frameworks and structures can then be used as the base for developing FTP managers in the technical skills of operational management.** Key areas for development include productivity management and improvement, and people performance management.

In addition, the FTP Department needs to support the management building capability through techniques such as coaching, co-coaching and mentoring. These activities when combined with continuous improvement techniques, such as lean six sigma, will support the creation of a learning and growth culture within the FTP Department.

Improving Recruitment and Retention

The hypothesis is that by investing in people, both recruitment and retention will be improved. The commitment to investing in people with **structured learning and development and clearly defined career progression paths is required for all FTP staff** but needs to be specific for roles.

For example, in conjunction with the HR Department, initial discussions have commenced with various education providers about the feasibility of FTP introducing an Advanced Apprenticeship or other form of graduate scheme that would mean that graduates could be employed with the structured support frameworks to develop into a strong para-legal workforce. The development of a graduate scheme will mean that the structured learning and development needs for case managers and their career progression can be clearly defined. This career development framework for case managers then can be used as the basis for developing the framework for existing FTP case managers, so that they are also offered a career development pathway. These career pathway developments are aimed at improving the technical skills of the case managers

resulting in an improved quality of service delivery.

The role of Operational Manager – Work-practice Improvement will be responsible for working with the HR department to develop similar staff development strategies for all FTP staff.

Changing the Culture

The success of the FTP Improvement Programme will be based on changing the culture within FTP. The culture change focus is:

- **A Human Centred Approach; and**
- **Becoming a Learning and Growth department.**

Human Centred Approach

The Human Centred Approach is defined as treating individuals involved in the FTP process as individuals. The current FTP process is very process driven. There is the need to ensure that individuals involved in the process, including registrants, complainants, witnesses and other stakeholders, perspectives are considered, and the processes are appropriately adapted.

The Policy Department have been doing work on supporting Registrants through activities such as Schwartz Rounds. Many of these developments can also be used internally within the FTP Department to support the development of a Human Centred Approach.

Learning and Growth

Becoming a Learning and Growth department is defined as:

- **Having a no blame culture whereby mistakes and errors can be used as for learning and improvement; and**
- **There is a continuous improvement philosophy whereby the department is striving to always improve the way the service is delivered.**

To be embedded in the department this approach requires a mindset change within the department as well as the development of the systems and processes to support its implementation. Systems required include the implementation of Root Cause Analysis review processes that allow the underlying issues to be defined. This is different to the current approach whereby there is often a short-term reaction to a symptom of the issue rather than taking the time and exploring the underlying reasons.

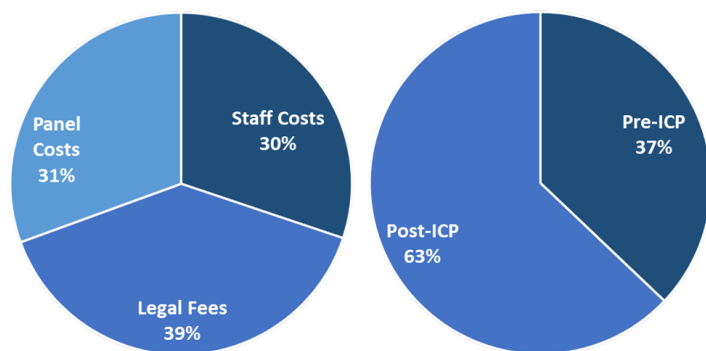
7. Financial Implications

Cost Allocation

Historically HCPC has not recorded costs in a manner that facilitates activity-based cost analysis. The Business Improvement Team have therefore used high level assumptions to allocate costs to gain a better understanding of the cost drivers of FTP delivery.

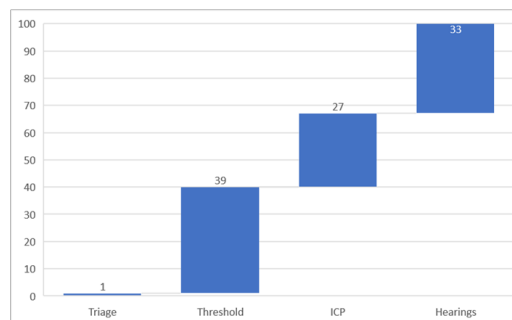
Direct FTP costs, i.e. excluding facilities, IT and systems usage and other overhead allocations, accounts for circa 50% of HCPC's total cost base.

Estimated FTP Cost Allocations – 2019/20 Actuals



FTP Case Conclusion Cascade

Apr-19 to Mar-20 – all non-SW cases concluded



While Final Hearings account for 33% of FTP concerns, the cost of those cases at Final Hearing (excluding the cost of getting those cases to the ICP) account for circa 63% of FTP’s cost base. **This means the direct costs of the Post-ICP cases account for over 30% of HCPC’s current cost base.**

Marginal Costs

The marginal cost of an additional FTP case dramatically increases post ICP.

Stage	Marginal Cost	Comments
Triage	Nil	The Case Managers manage a portfolio of cases. As the case load increases an additional Case Manager will need to be appointed. However, with the Demand and Capacity model, and recruiting to the forecast requirements, 1 additional case should not have a marginal cost increase.
Threshold	Nil	As with Triage
Investigation	£580	The marginal cost is associated with the proportion of cost associated with an additional ICP. Pre-Covid-19 an ICP heard an average of 6 cases per day.
Final Hearing	£21,660	The marginal cost is associated with an additional case preparation instruction (circa. £12k) and the costs of a panel its associated witness costs.

There is a new Case Preparation and Conclusion contract from the 1st April 2020, but the previous contract had a penalty clause that triggered additional payments. For the year 2019-2020, the contract number of cases was set at 373 cases and a fixed price was set for this number of cases. Under the contract, an additional 10% (37 cases) was permitted for no additional cost to the fixed price, however if this additional 10% was exceeded than 75% of the costs associated with those cases would be payable. In effect, **for the 2019-2020 financial year, the marginal cost of the 411th case conclusion instruction was circa £277,500. Because of this payment trigger, the number of post-ICP instructions was restricted.** Discussions with the legal firm providing the services indicated that this clause was part of the HCPC tender specification for the 10% additional cases for no additional cost, but the legal firm was willing to renegotiate this part of the HCPC specification. The case preparation contract that commenced on the 1st April 2020 is constructed without the penalty clauses.

8. Key Performance Indicators (KPIs)

Overview

The KPI development process to build a robust FTP performance management framework has commenced. This starts at the FTP team level to ensure that all components of the FTP process can be measured and then cascades upwards. This will take some time to embed in FTP, therefore it is proposed to implement some temporary KPIs to give Council the assurance that the FTP is achieving the performance improvement trajectory.

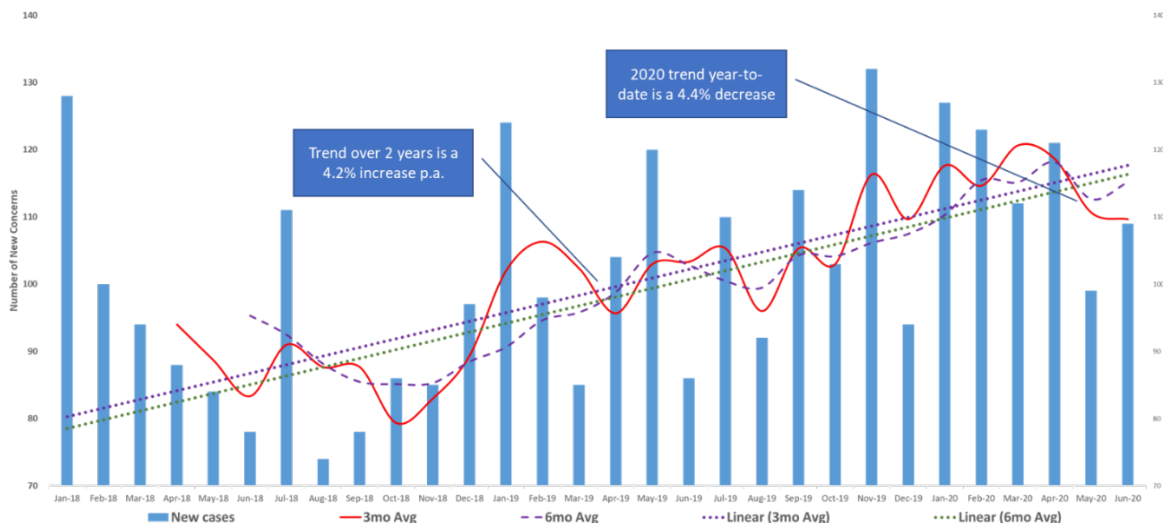
The key questions to be answered by the temporary KPIs are:

- **What is the trend of new FTP concerns?** – this a demand KPI;
- **Is the number of live FTP concerns decreasing?** – this is a performance KPI;
- **Is the backlog of FTP concerns decreasing?** – this is a performance / risk KPI;
- **Is the number of old cases decreasing?** – this is a performance / quality KPI;
- **What is the Full Time Equivalent (FTE) rate?** – this is a resource capacity KPI; and
- **What is the short-term sickness rate?** – this is a staff wellbeing KPI.

Demand

Understanding the demand trend is important to understanding the future workload of FTP. For example, an increasing trend of 1.0% in FTP concerns means that, with everything else remaining the same, there will an additional 4 ICPs and 2 Final Hearings required in the next 12 - 24 months. With all other things remaining the same, this will require an additional budget of circa £45k to stop the backlog from re-emerging.

The number of new concerns being received each month is variable, but it is the overall trend that is important.



From the analysis that has been undertaken, the rolling six-month trend is the most appropriate indicator of new concern trend. Using this measure, the current average monthly increase is 4.2%.

Performance

In a steady-state position, the level of WIP will have reached an equilibrium and will be changing within an acceptable range based on the variability and trend of new concerns being received.

The proposed question is ‘Is the number of live FTP concerns decreasing?’ is only valid while FTP is in a recovery position, as per the current circumstances. However, in the current recovery circumstances, it is probably the single most important KPI. The essential target is that each month there be less live cases that the previous month.

It is proposed that the monthly net movement in live FTP cases is the appropriate KPI.

	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	YTD Total
Case Load Net Movement	-2	12	13	10										35

Risk

The backlog of FTP concerns is an indicator of previous performance issues which result in an increased performance risk for the current FTP operations. Reduction of the backlog is critical to the performance recovery of the FTP department.

The FTP budgets have been prepared on the assumption that the backlog will be eliminated over an 18-month period. It is proposed that the trajectory be a straight-line reduction in the backlog, starting with the backlog number being that as at 31st March 2020 and the final point being no backlog as at 30th September 2021. **The proposed risk KPI is the variation, positive or negative, from the trajectory that backlog will be eliminated by 30th September 2021.**

	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Backlog Trajectory	401	379	357	335	313	291	269	247	225	203	181	159	137
Backlog Actual	401	374	367	378									
Difference	0	-5	10	43									

Quality

Each stage of the FTP progress has an expected timeframe, e.g. Triage - two weeks, Threshold - 10 weeks, Investigation – 12 weeks plus 10 weeks for the registrant to prepare for the ICP and Final Hearings – 39 weeks.

There will always be a small a number of cases that will exceed the timeframe, so an aspiration KPI, for when the FTP department is in steady state, is that 95% of cases should have completed the stage of the process within the expected timeframe.

The backlog means that are delays to the expected timeframes, but this cannot explain the long delays with some cases. Long delays with cases indicate that there may be issues with progressing the case. To allow for the current level of backlog it is proposed to set the quality criteria threshold at the expected time plus 50%, i.e. reporting on any triage case that has been in triage for more than three weeks, any threshold case that has been at the threshold stage for more than 15 weeks, etc.

There is a significant number of old cases that exceed this quality threshold. It is proposed that these old cases be reduced over a 12 month period with the trajectory being set as a straight-line from the level as at 31st March 2020 and with a target for elimination of these very old cases by 31st March 2021. **The proposed quality KPI is the variation, positive or negative, from the trajectory that cases older than the expected time plus 50% will be eliminated by 31st March 2021.**

	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Old Cases Trajectory	663	608	553	498	443	388	333	278	223	168	113	57	0
Cases >1.5 Target Actual	663	665	467	545									
Difference	0	57	-86	47									

Resource

Have the right level of staff is essential in providing the capacity to manage the demand of FTP cases. The budgeted FTE forms the basis of the forecast FTP performance including reduction of the backlog and old cases. **The FTE fill rate as a percentage of budgeted FTE (as a converse of vacancy rate) indicates the capacity levels in delivering FTP performance.** With a target of 100%, the proposed capacity KPI is the FTE fill rate as a percentage of budgeted FTE.

	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Budgeted Establishment	129.0	101.2	101.2	101.2	108.0	108.0	108.0	108.0	108.0	108.0	108.0	108.0	108.0
Permanent Staff	76.6	75.6	76.6	79.8									
Fixed Term Staff	4.0	7.0	5.0	6.0									
Agency Staff	15.0	18.0	16.0	15.0									
Total Staff	95.6	100.6	97.6	100.8	-	-	-	-	-	-	-	-	-
FTE Fill Rate	74.1%	99.4%	96.4%	99.6%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

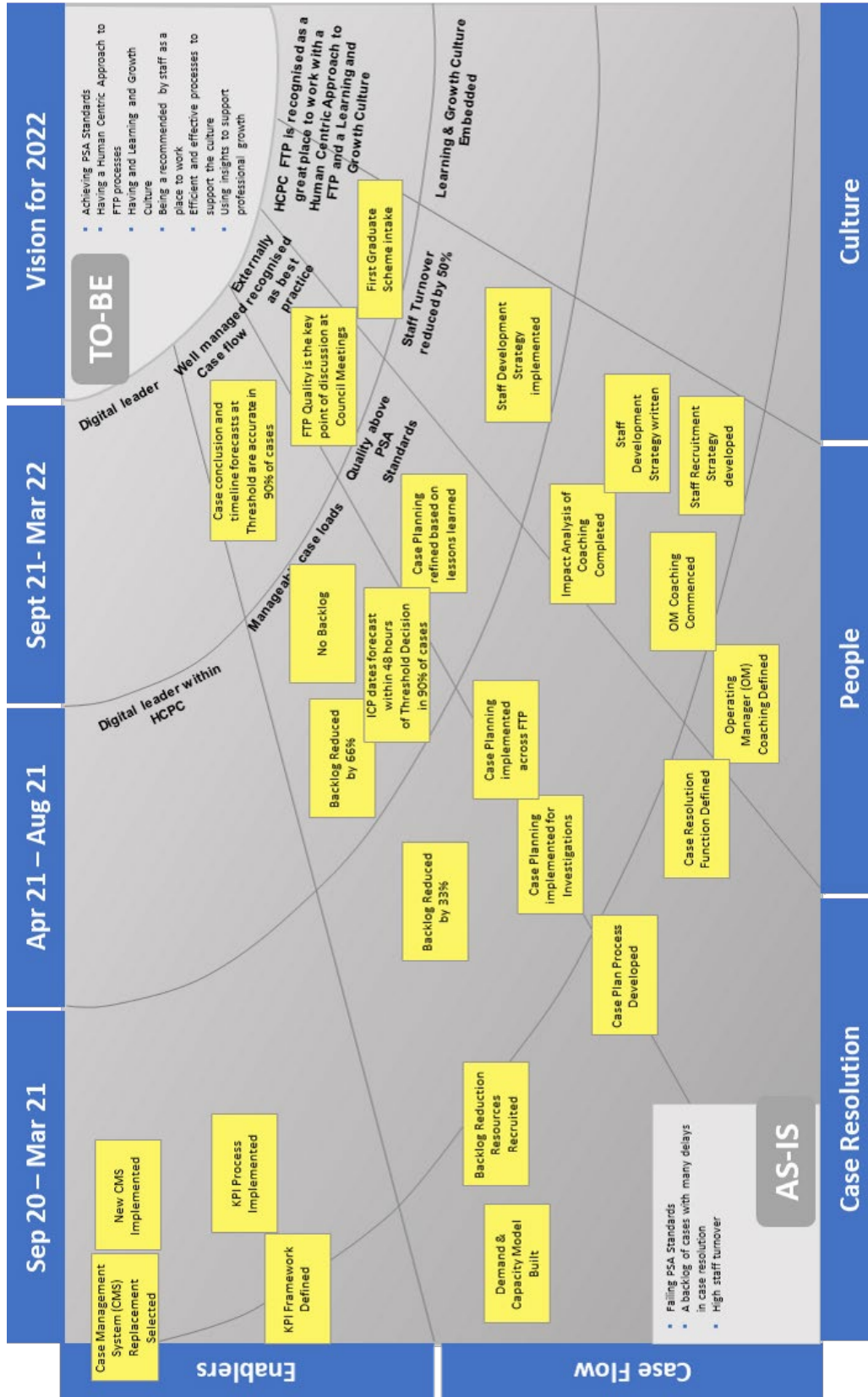
Staff Well-being

Short-term sickness is an indicator of staff well-being. Other possible indicators of staff well-being include staff turn-over rates and levels of temporary staff. **We propose to use short-term sickness as the top-level indicator of staff well-being but with the more detailed staff well-being indicators sitting alongside talent management indicators such as training completion rates as part of the more detailed management indicators within FTP.**

Sickness - Days	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Short-term	22.00	14.75	2.50	8.75									
Long-term	30.00	-	-	17.00									

Appendix A - Timetable

Innovation Management



Appendix B - Draft FTP Operating Model

As Is - FTP Process Model – Level 0

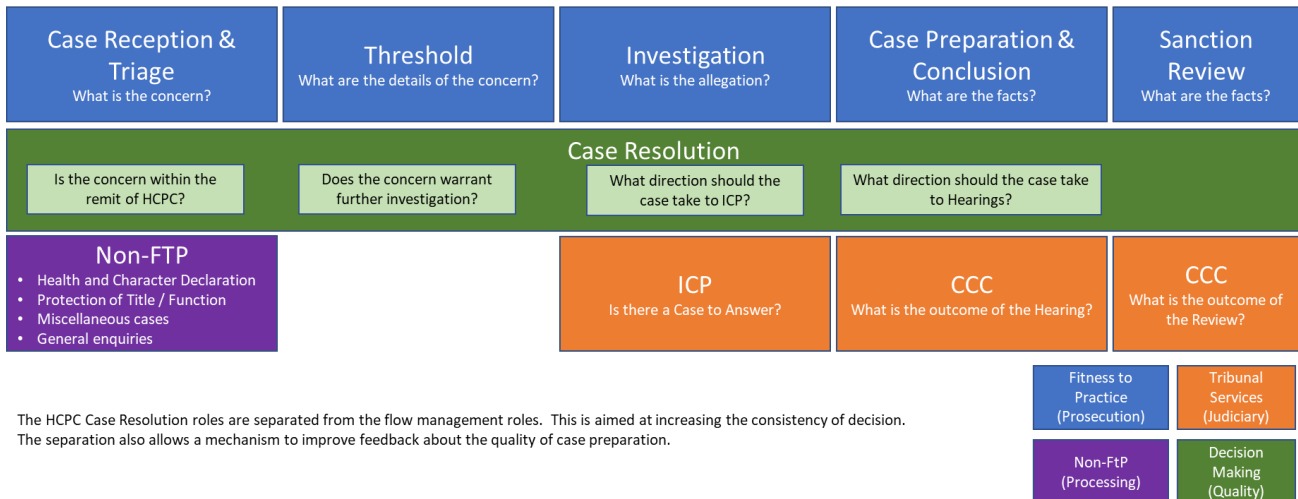


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Developing Draft for Discussion

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To Be - FTP Process Model – Level 0



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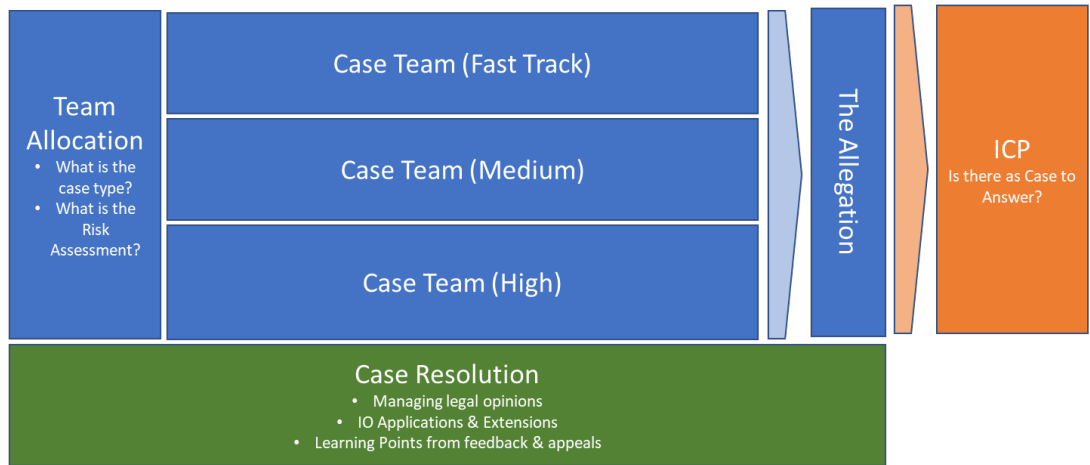
Developing Draft for Discussion

4



Investigation Process Model – Level 1

Cases streamed by Risk & Case Classification

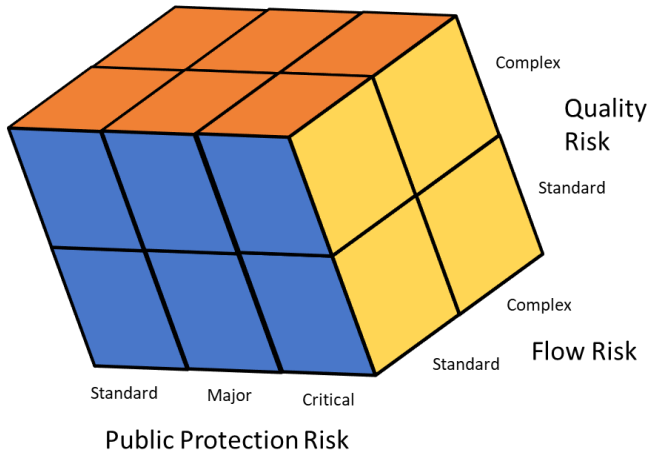


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Risk Model – Level 1



A 3x2x2 risk classification matrix creates 12 possible combinations

Public Protection	Flow Risk	Quality Risk
Critical	Complex	Complex
Critical	Complex	Standard
Critical	Standard	Complex
Critical	Standard	Standard
Major	Complex	Complex
Major	Complex	Standard
Major	Standard	Complex
Major	Standard	Standard
Standard	Complex	Complex
Standard	Complex	Standard
Standard	Standard	Complex
Standard	Standard	Standard

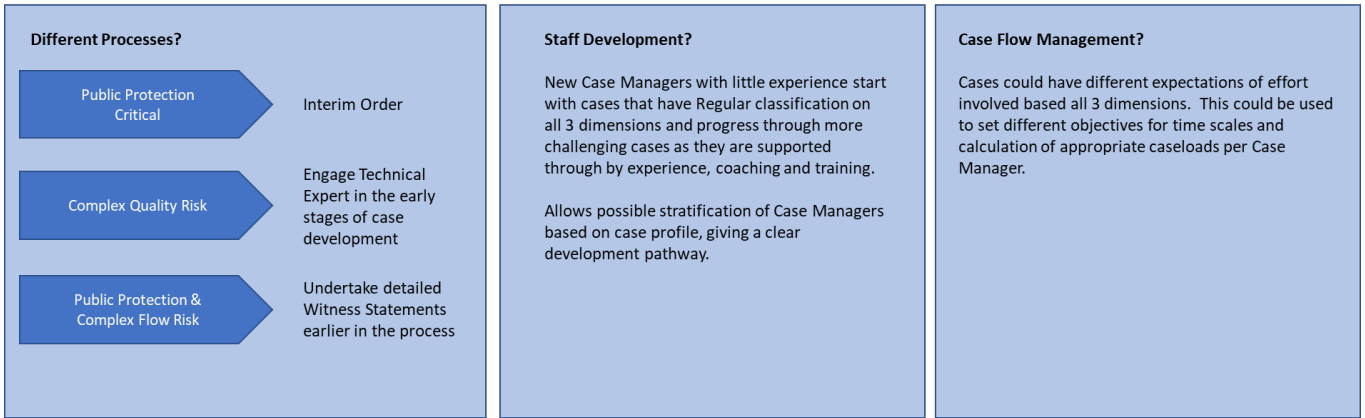
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Risk Model – Level 1

How could a Risk Model be used?

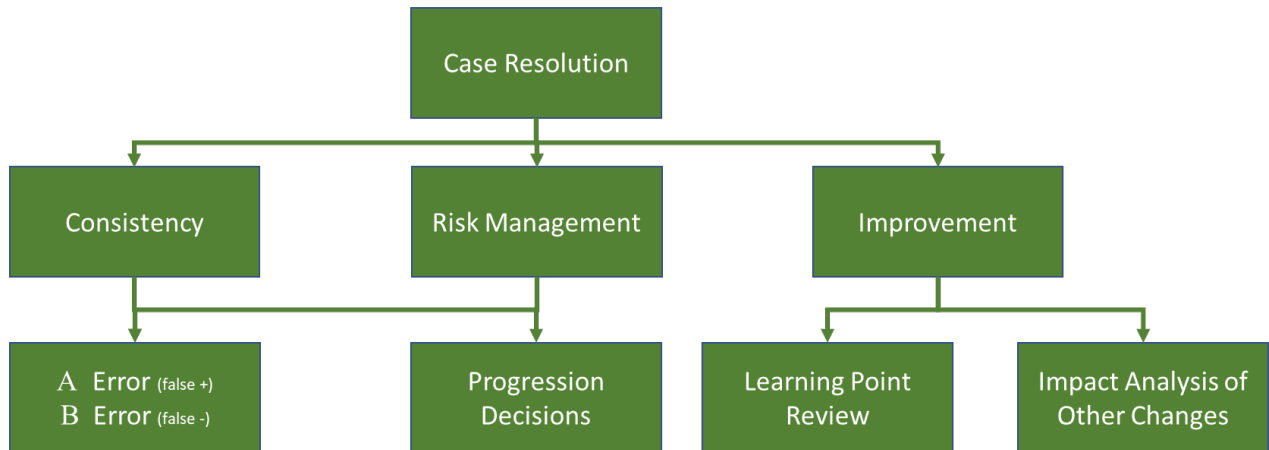


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Case Resolution Model – Level 1



Case Resolution Errors

Is there room for interpretation? If so, then:

- The **Alpha Error** is that that the case passes the decision point when it could have been concluded. This adds to the workload, time and registrant stress but does not impact public protection;
 - The **Beta Error** is that the case doesn't pass the decision when it should have. This does impact public protection as cases are concluded before a thorough decision could be made.
- Where there is room for interpretation, allowing an Alpha Error allows for a robust decision at the next stage where a Beta Error needs to be avoided.

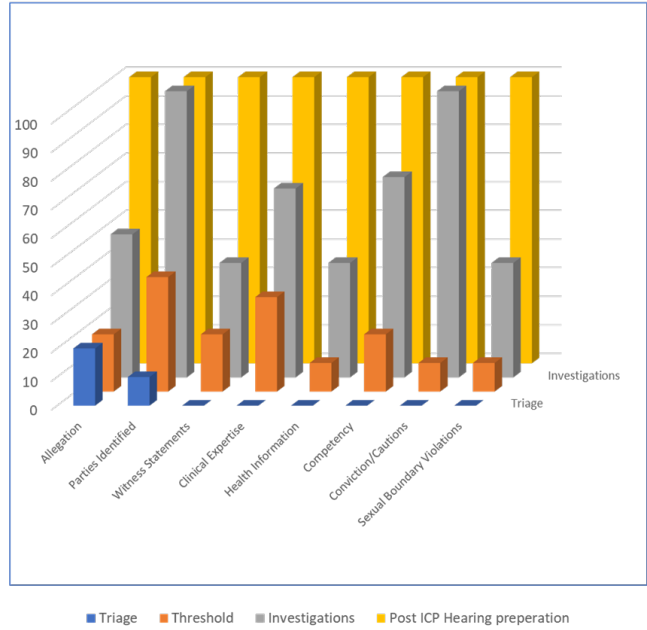
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High Level Case Build by Process Stage

	Triage	Threshold	Investigation	Post ICP – Hearing Preparation
Allegation	Initial compliant statement	Allegation based on compliant	Allegation based on investigation and referenced to the legislation	Confirmed allegation
Identification of parties	Registrant only	Registrant, Employer, Compliant	All relevant parties identified	All parties assessed for their contribution
Witness statements	No witness statements	Simple overview to confirm witness presence	Witness statement to support the allegation drafting	Detailed witness statement to support hearing
Clinical Expertise	Not obtained at this stage	Registrant Assessor (to support closure)	Registrant Assessor (to better understand and draft allegation)	Expert evidence
Health Information	Initial statement	Allegation based on initial compliant	GP Reference / Medical Practitioner Report	Expert evidence – directed medical report
Competency	Initial statement	Audit / Summary of concerns	Individual case records / audits	Breakdown of evidence, with witness support
Convictions / Cautions	Initial statement	Allegation based on initial compliant	Copy of Convictions / Cautions	Copy of Convictions / Cautions
Sexual Boundary Violations	Initial statement	Allegation based on initial compliant	Informal statement of events	Engagement with witness / victim. Witness statements.

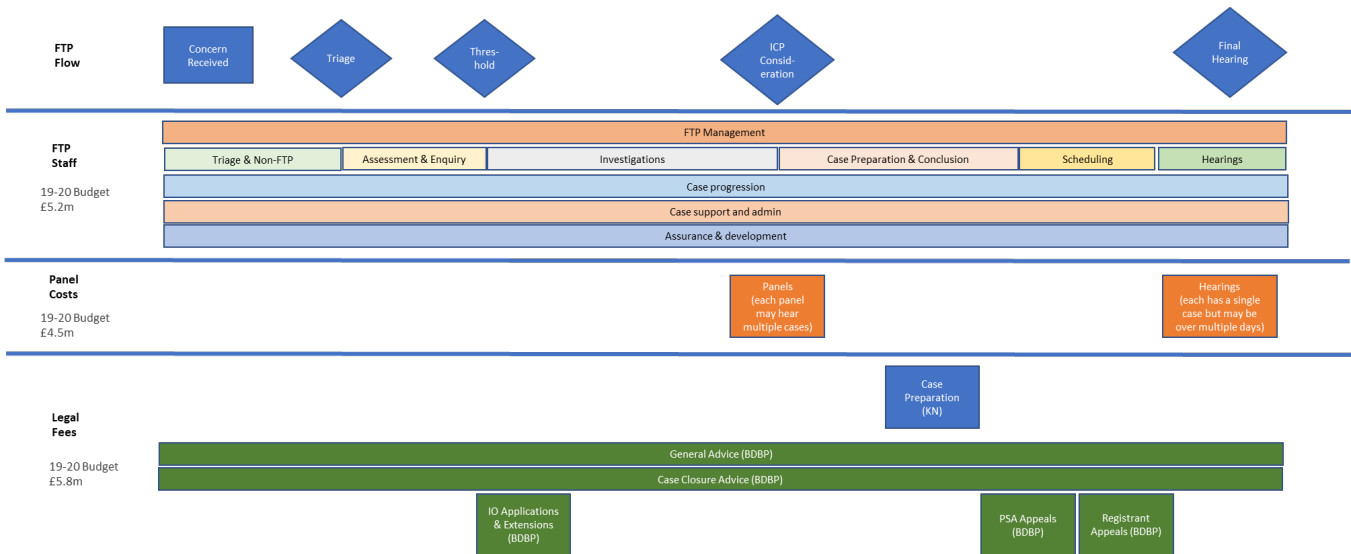


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FTP Cost Model

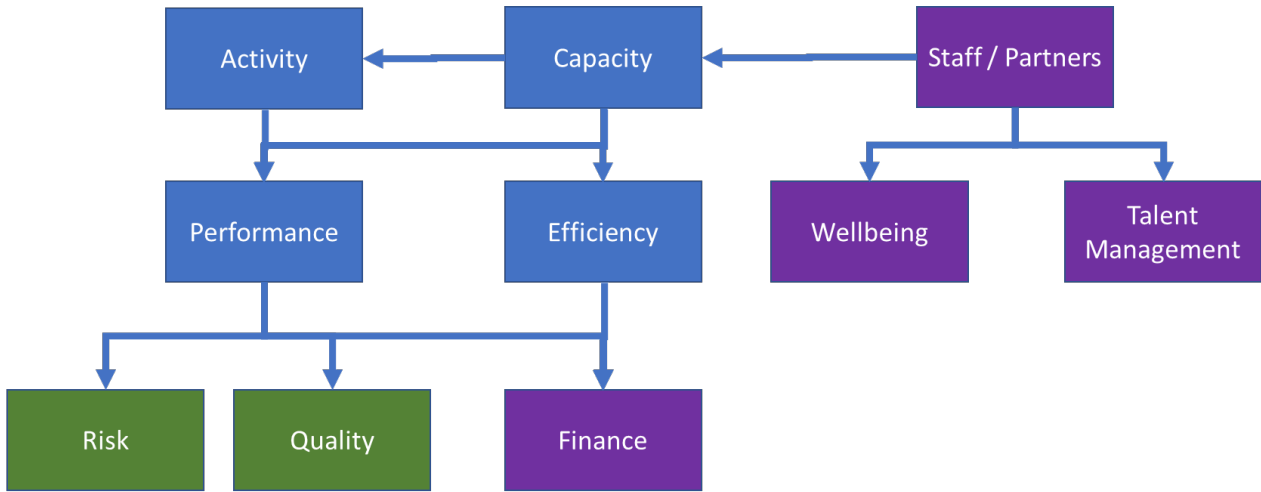


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FTP Performance Model



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FTP Performance Reporting

Data is divided into segments



Dashboard analysis is cycled on a quarterly basis

Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Performance Overview	Performance Overview	Performance Overview	Performance Overview	Performance Overview	Performance Overview	Performance Overview	Performance Overview	Performance Overview	Performance Overview	Performance Overview	Performance Overview
Case Flow	Decision Making	Staff & Finance	Case Flow	Decision Making	Case Flow	Case Flow	Decision Making	Staff & Finance	Case Flow	Decision Making	Case Flow
					Decision Making						Decision Making
					Staff & Finance						Staff & Finance

6 Monthly Position Statements

Position Statement composition

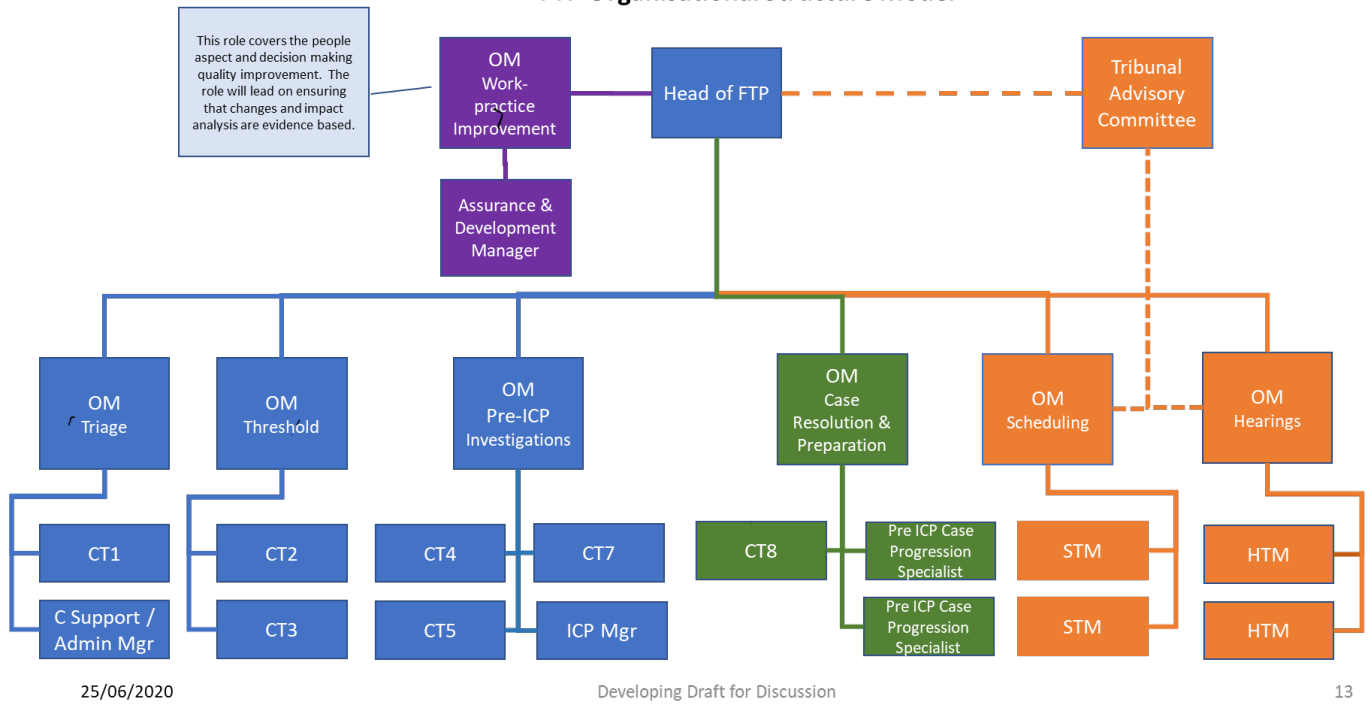
- Where were we 6 months ago?
- Where are we now?
- What has been achieved? (celebrate)
- Where are we off track (positive and negative) and what has been the impact?
- Confirm what we want to achieve in the next 6 months (objective confirmation)
- How are we going to achieve the objectives?
- What challenges do we need to overcome to achieve the objectives?

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FTP Organisational Structure Model



Appendix C – FTP Case Data (as at 29 June 2020)

NOTES

SUMMARY

Total cases: Total open cases at period-end.

Target: Target weeks for movement of cases to next stage in process.

Cases < Tgt: Total cases currently within the target weeks benchmark.

Cases > Tgt: Total cases currently beyond the allotted target weeks benchmark.

Concerned cases = 50% >Tgt: Making an assumption that cases beyond target are actively being worked and could likely be concluded with x1.5 the target weeks. These cases should be of concern to the OM/CTM and should be reviewed.

Issue cases > 50%: These are the residue of cases and should be reviewed as a matter of urgency.

TEAM GRAPHS

Two graphs per team.

Graph [A] is a histogram (frequency distribution) showing the age of open cases in 2-week buckets for 12 months. All open cases beyond 12 months are collected in the right-most bucket. Cases within 4 weeks of their target weeks are shown as amber (orange). All other cases within target are shown as green. Cases beyond the target weeks are shown as red. The black dotted line indicates the target for case movement.

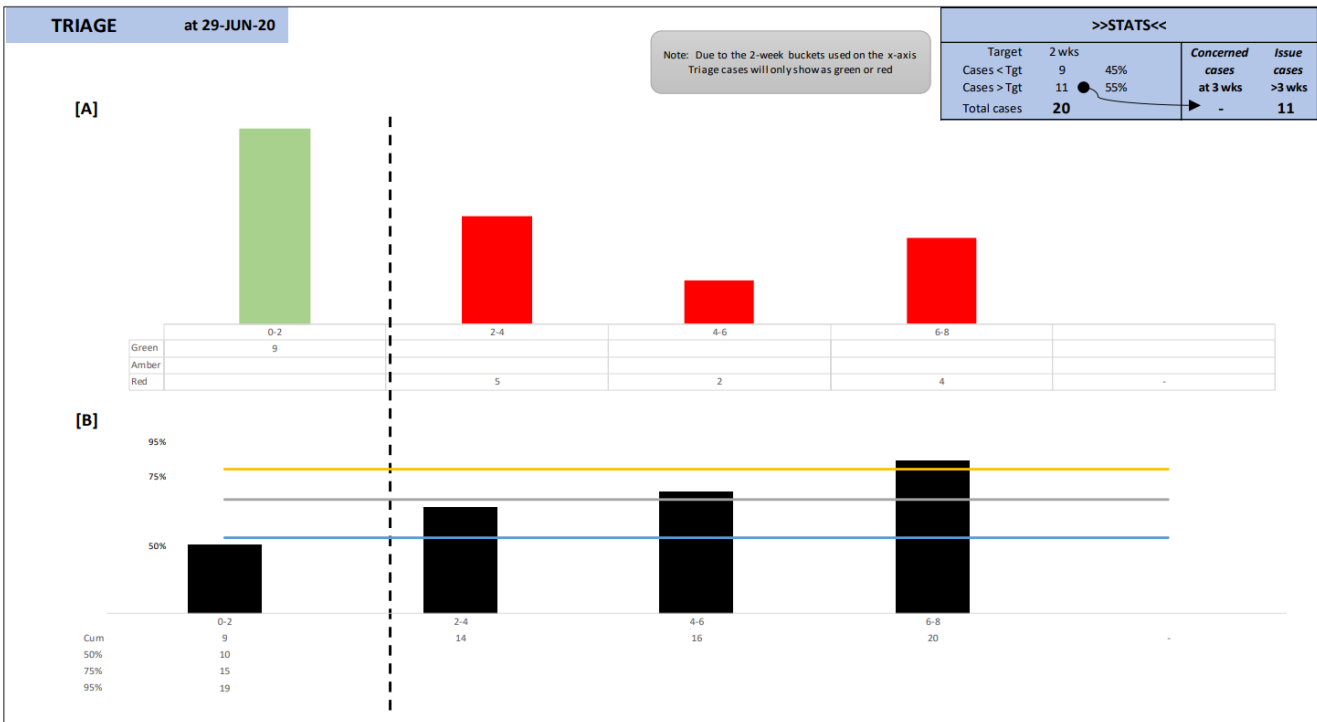
Graph [B] is a cumulative representation of the histogram above showing the total number of cases open at that point. Each successive point is the sum of all cases before it. Where the lines at 50%, 75% and 95% cut their first bar indicates how long that volume of

SUMMARY AT 29-JUN-20

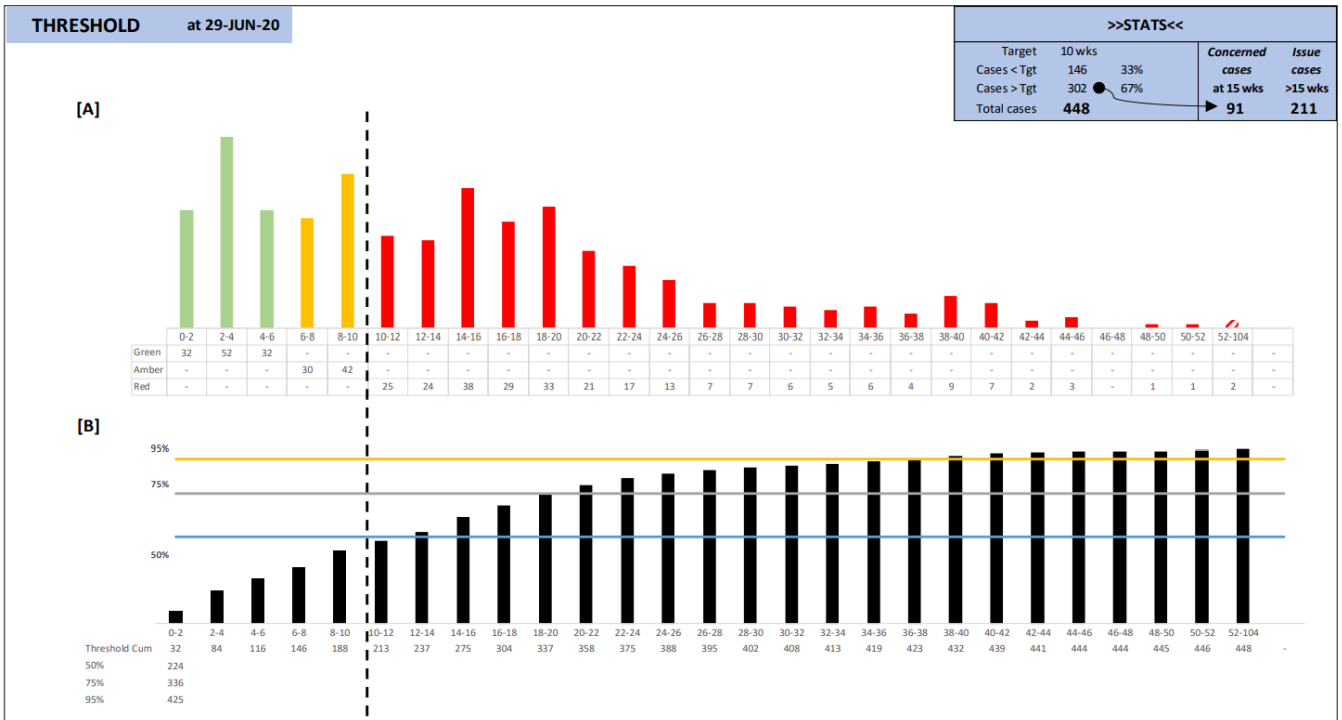
	Total cases	Target	Cases < Tgt	Cases > Tgt	Cases > Tgt	Concerned cases at 150% of Tgt	Issue cases > 150% of Tgt	Cases > Tgt	(MEMO) Total cases / May	Mvmt
Triage	20	2 wks	9 45%	11 55%	3 wks	-	>3 wks 11	11	29	(9)
Threshold	448	10 wks	146 33%	302 67%	15 wks	91	>15 wks 211	302	420	28
Investigations	435	22 wks	182 42%	253 58%	33 wks	102	>33 wks 151	253	458	(23)
SCT	156	12 wks	27 17%	129 83%	18 wks	12	>18 wks 117	129	151	5
Total Post-ICP	1,059		364 34%	695 66%		205	490	695	1058	1
Post-ICP	385	39 wks	245 64%	140 36%	59 wks	85	>58.5 wks 55	140	379	6
Total HCPC	1,444		609 42%	835 58%		290 20%	545 38%	835	1437	7

HISTORY AT 29-JUN-20

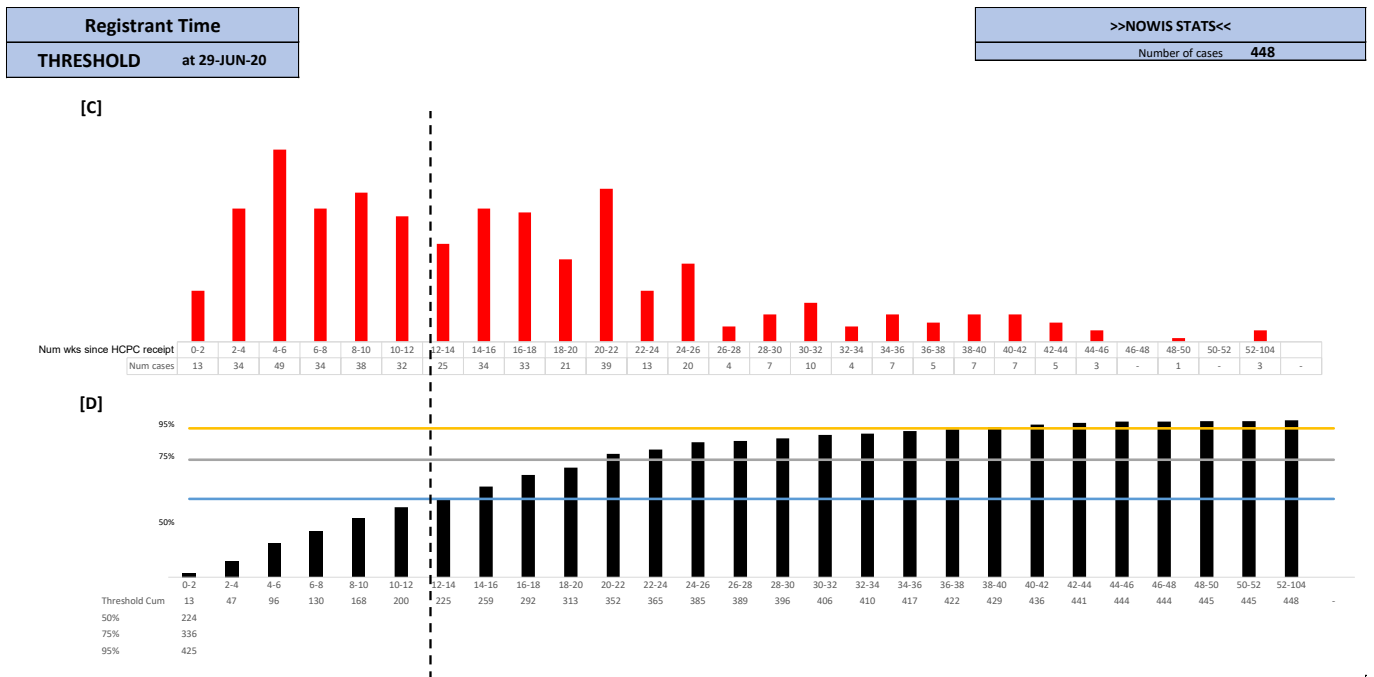
	Mar-20	Apr-20	May-20	Jun-20	Mvmt	Jul-20	Mvmt	Aug-20	Mvmt	Sep-20	Mvmt
Total cases	1,367	1420	1437	1,444	0.5%						
Cases < Tgt			676	609	-9.9%						
Cases > Tgt			761	835	9.7%						
Concerned cases 150% of Tgt			294	290	-1.4%						
Issue cases > 150% of Tgt			467	545	16.7%						
Cases > Tgt			761	835	9.7%						



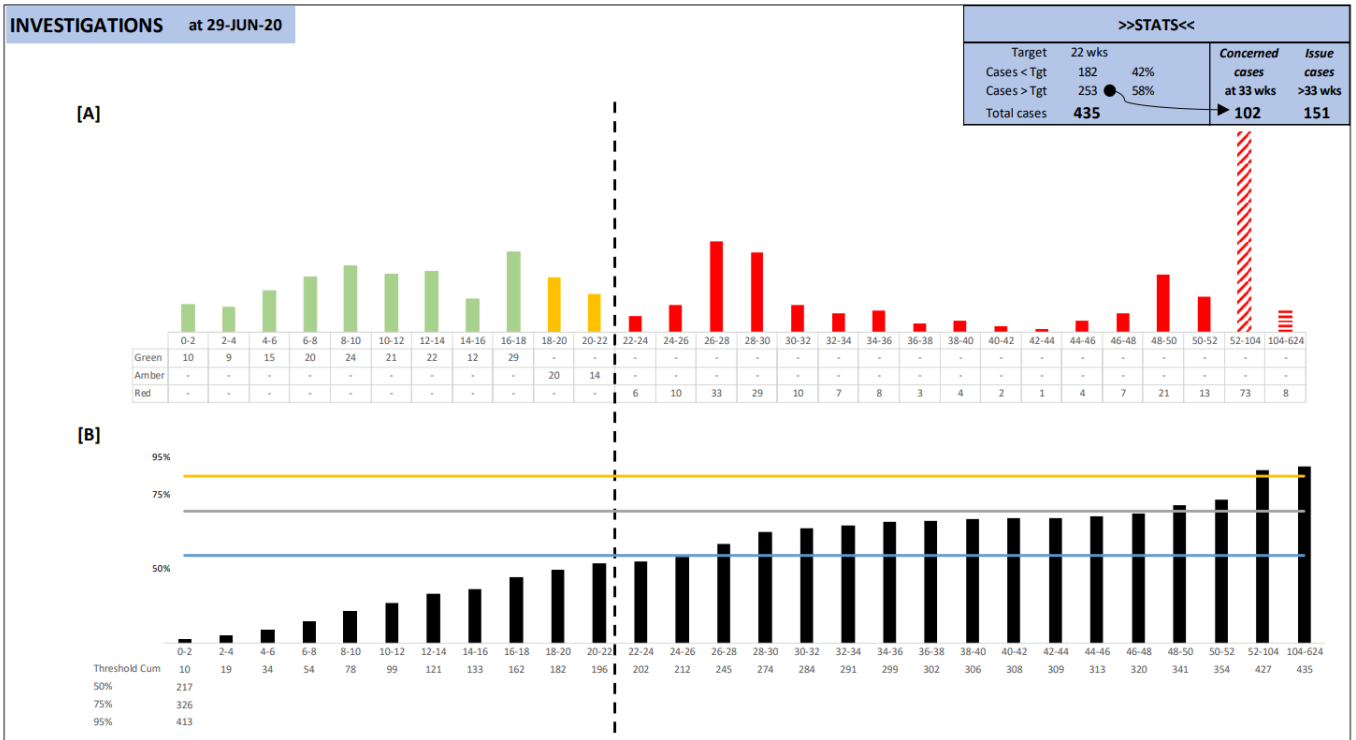
This chart indicates how long the Threshold Team has had the case in its workload.



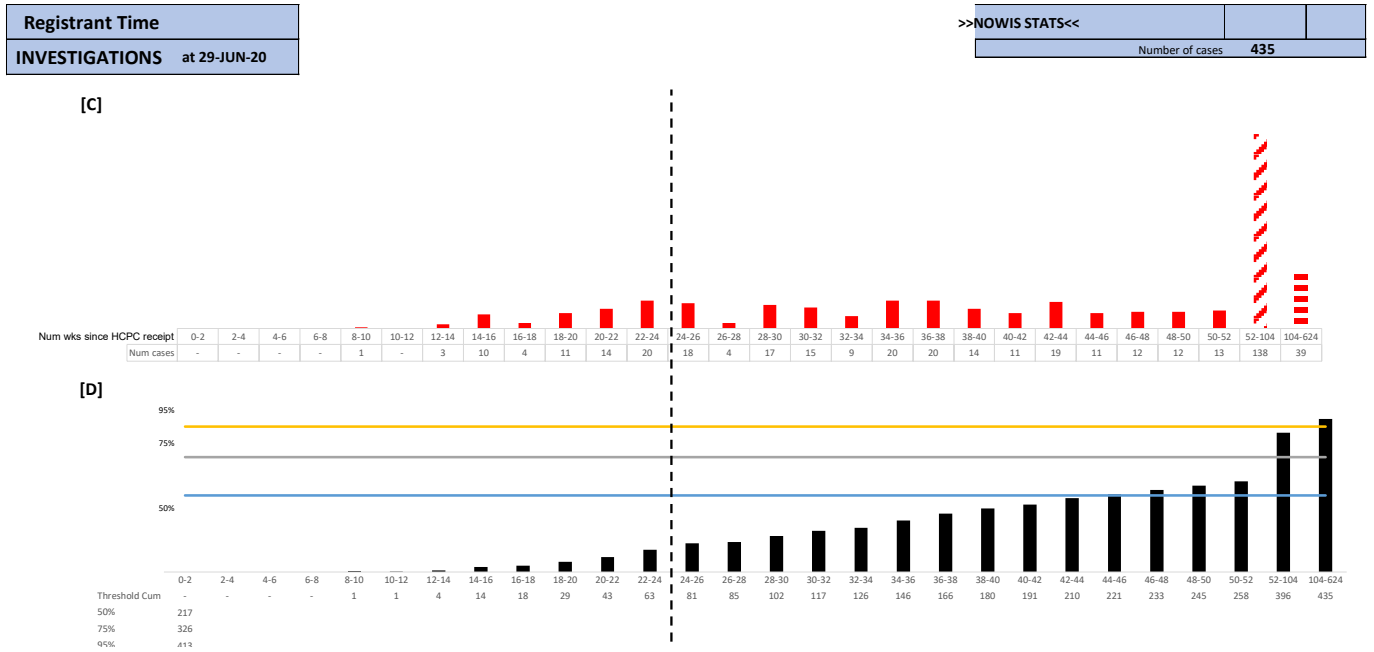
This chart indicates how long HCPC has had the concern as part its workload i.e. it is the cumulative time.



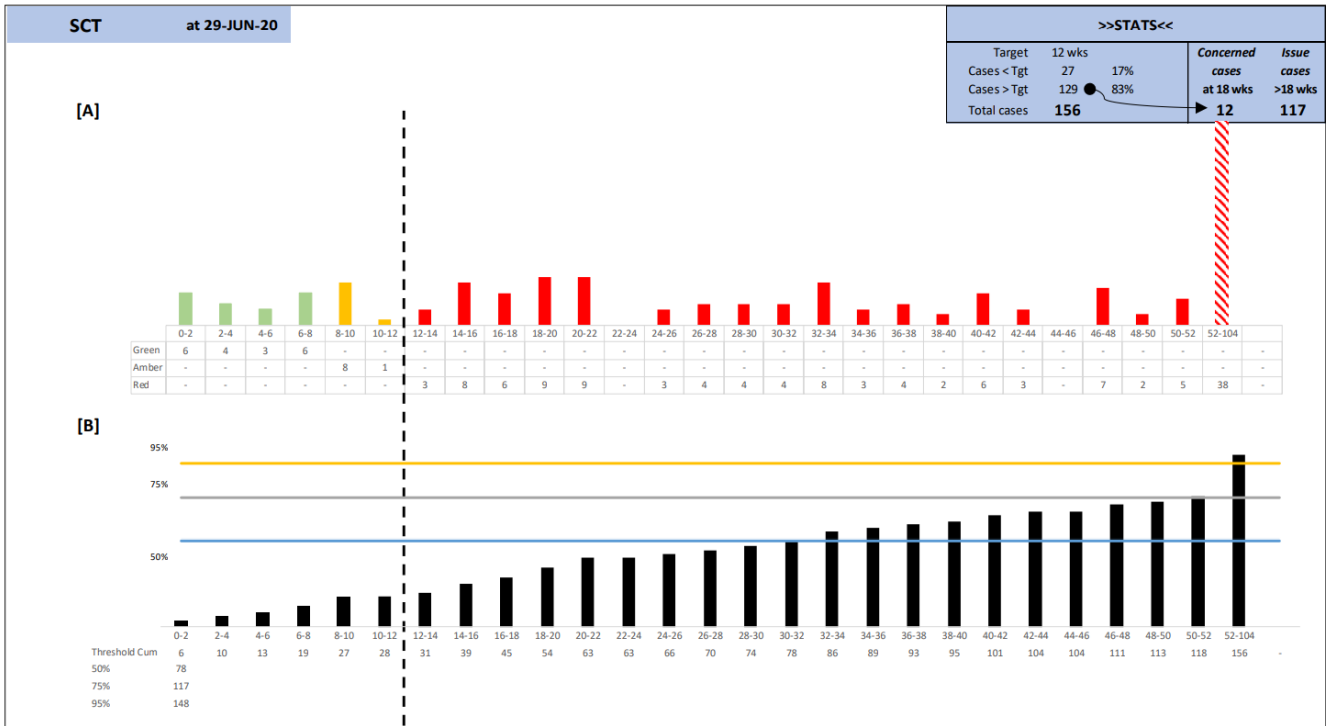
This chart indicates how long the Investigation Team has had the case in its workload.



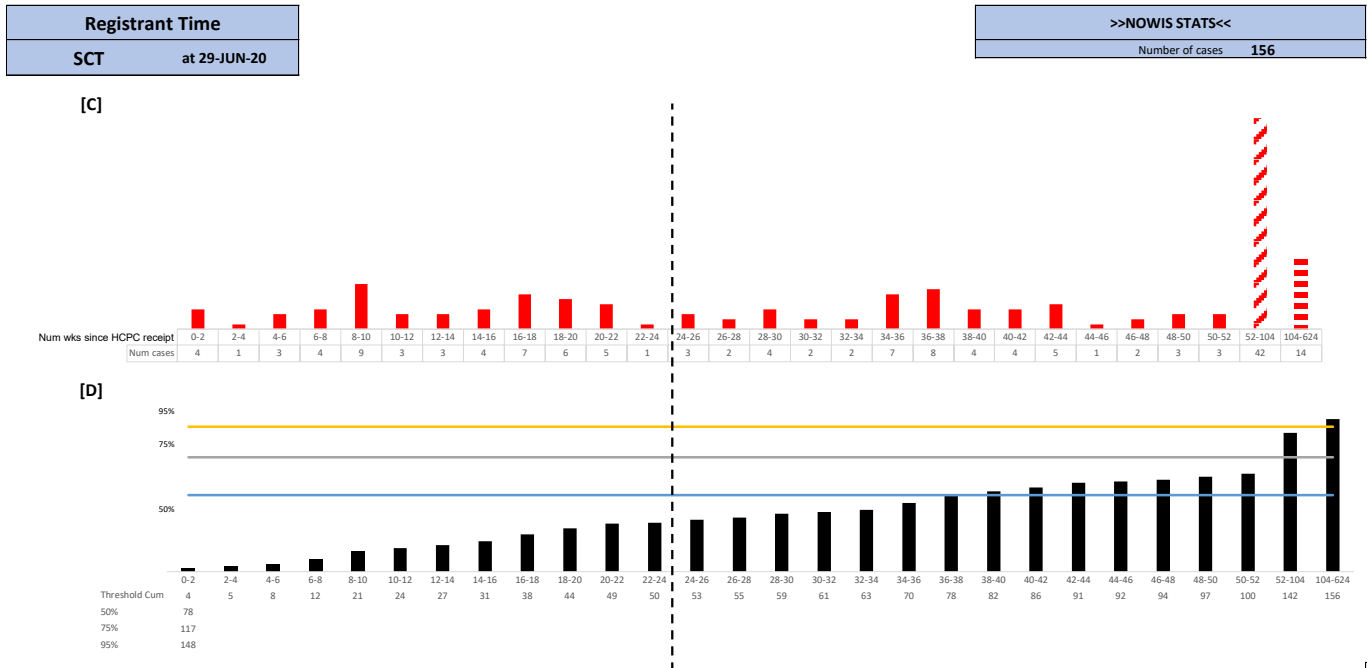
This chart indicates how long HCPC has had the concern as part its workload i.e. it is the cumulative time.



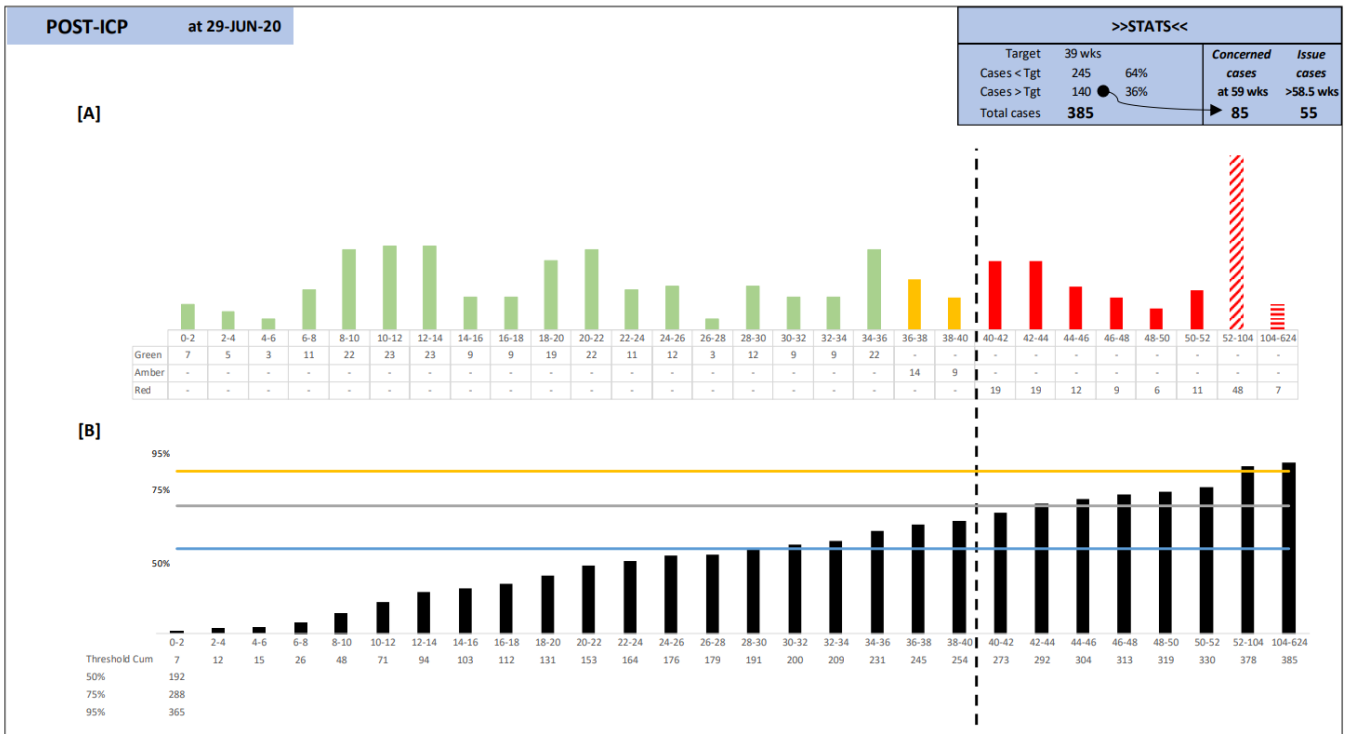
This chart indicates how long the Serious Case Team has had the case in its workload.



This chart indicates how long HCPC has had the concern as part its workload i.e. it is the cumulative time.



This chart indicates how long the Case Conclusion Team has had the case in its workload.



This chart indicates how long HCPC has had the concern as part its workload i.e. it is the cumulative time.

