
Fitness to Practise Performance Report

Executive Summary

This paper provides:

- an update on the progress of the Fitness to Practise (FTP) Improvement Programme against the targets we set ourselves on improving quality and timeliness of case management
- a summary of the next phase of the FTP Improvement Programme.

The Council is asked to note the progress made.

Previous consideration	Standing item (as of February 2021) to update the Council on the progress of the FTP Improvement Plan. Oversight of the progress of our FTP Improvement Plan is also provided by the FTP Improvement Board.
Decision	The Council is asked to note the update.
Next steps	The next report on progress will be provided to the Council on 26 September 2024.
Strategic priority	Strategy priority 1: Improve our performance to achieve the Professional Standards Authority's Standards of Good Regulation.
Financial and resource implications	Financial and resource implications are provided for in the FTP 2024-25 budget.
EDI impact	Improving the quality and timeliness of our management of fitness to practise cases will support all involved in the cases. Particular activities in the improvement programme include developments that will improve our communication and support for those involved in fitness to practise cases and who are particularly vulnerable or in need of additional support and reasonable adjustments.
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Fitness to Practise Performance Report

1 Introduction

- 1.1 As the Council is aware, improving our performance in Fitness to Practise (FTP) remains a priority for the HCPC. A key area of focus is on improving the timeliness of our case investigations, as well as continuing to monitor, embed and develop the changes we have delivered in the earlier phases of the improvement programme, which focussed on how we identify and manage risk on cases, quality and consistency of decision-making and how we engage and support those involved in the FTP process in a fair and compassionate way.
- 1.2 Our overarching aim is to improve the quality and pace of our management of FTP cases.
- 1.3 This paper provides:
 - An update on our performance in relation to the quality and timeliness of case investigations.
 - An update on the next stage (phase 3) of our improvement work.
 - A summary of key risks and mitigations.

2 Quality of case management

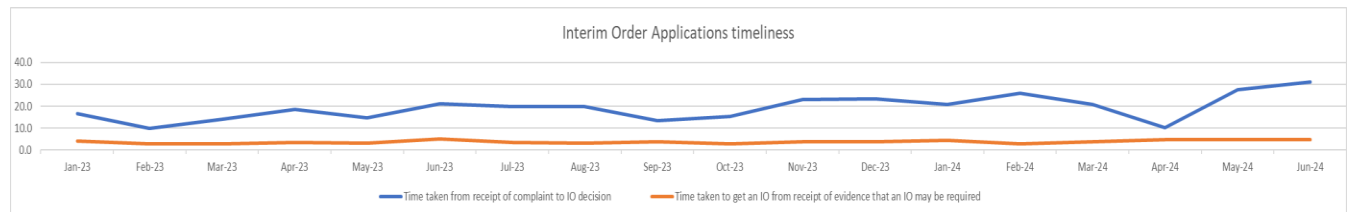
- 2.1 In this section we provide an overview of our performance in relation to the quality of our case investigations. As we have done previously, we have broken this down by themes of the key benefits we are seeking to achieve through this part of our improvement work. These are:
 - Risk management and interim order performance
 - Quality of our risk assessment of cases
 - Quality of our case planning

Risk management – interim order performance

- 2.2 Identifying high risk cases as soon as possible is a key part of ensuring we protect patients and service users.
- 2.3 A measure of how effectively we complete and keep up to date the risk assessments of our cases is the time it takes to apply for an interim order. Figure 1 shows our performance against the two measures of timeliness in relation to interim orders.
- 2.4 The orange line in Figure 1 shows how quickly we progress a matter to an interim order hearing once we have identified the need for an interim order. In June 2024 we were slightly above our three week target at five weeks. This was due to an interim order hearing being adjourned.

2.5 The blue line identifies how quickly we progress a matter to an interim order hearing from receipt of the concern. Our target for this measure is 12 weeks. In June 2024 our performance was 31 weeks which is noticeably above our 12 week KPI (key performance indicator). This was due to a number of cases that had been subject to a third party investigation reaching the evidential stage required for an interim order, and one case where new information that increased the risk profile of the case was provided at a late stage in the FTP process.

Figure 1 – Interim order performance

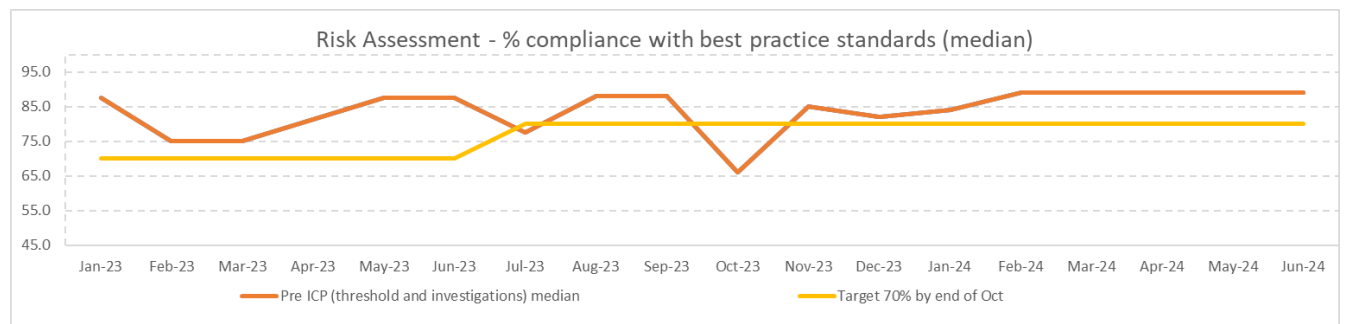


Risk management – adherence with our Best Practice Standard

2.6 Monitoring the quality and timeliness of our risk assessments continues. Our target is to achieve 80% adherence with our Best Practice Standard with a stretch target of achieving 90% compliance.

2.7 Figure 2 shows that we have consistently achieved or exceeded the 80% target since November 2023. We have achieved 89% compliance with the Best Practice Standard in every month since February 2024, meaning we are close to meeting our stretch target.

Figure 2 – quality of risk assessments: performance against target



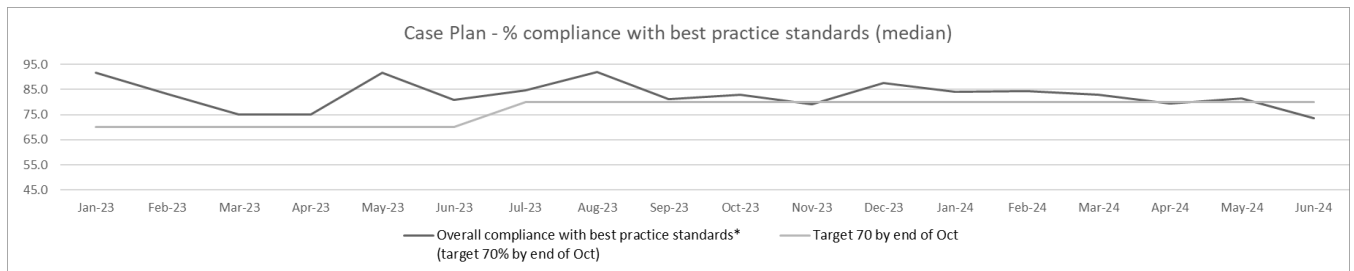
Case planning – adherence with our Best Practice Standard

2.8 Monitoring the quality and timeliness of our case plans also continues, and our target is 80% adherence with our Best Practice Standard.

2.9 In June 2024 our performance was below the target at 74%, following six months where we had met or exceeded the target consistently. The main theme behind our performance in June related to delays to updating case plans. We have identified actions to take forward to support teams to update their case plans in a timely manner. In addition, we will be running refresher

training on case planning over the summer for all teams as part of implementing our new operating model.

Figure 3 – quality of case planning: performance against target



3 Timeliness of case investigation

3.1 In this section we provide an overview of our performance in relation to the timeliness of our investigation and the age profile of our cases. We have broken this down by:

- Age profile of cases at the point of case conclusion
- Case volumes at each stage of the process
- Age profile of the live caseload

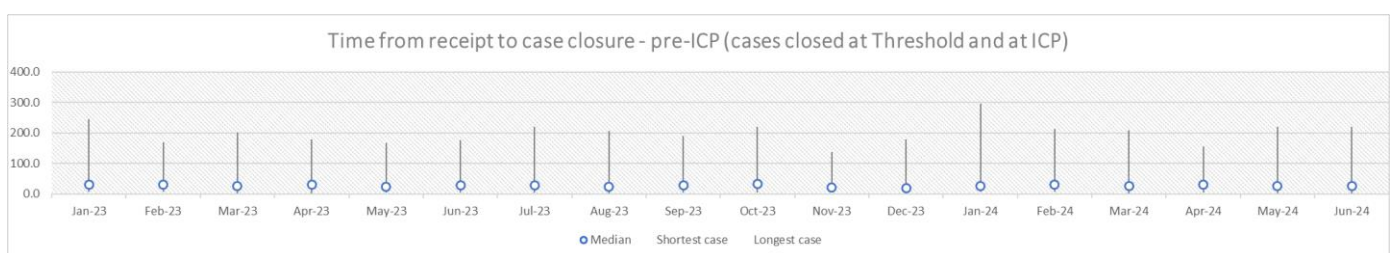
Age profile of cases at the point of case conclusion

3.2 To reduce the overall number of cases over our KPI it is important to make sure we do not progress older cases at the expense of younger cases. The median age of cases at the point they are closed provides a useful measure of how well we are balancing the progression of cases across the caseload.

3.3 Figure 4 shows the median age of cases closed at the Threshold and Investigating Committee Panel (ICP) stage (i.e., all pre-ICP case closures) month on month.

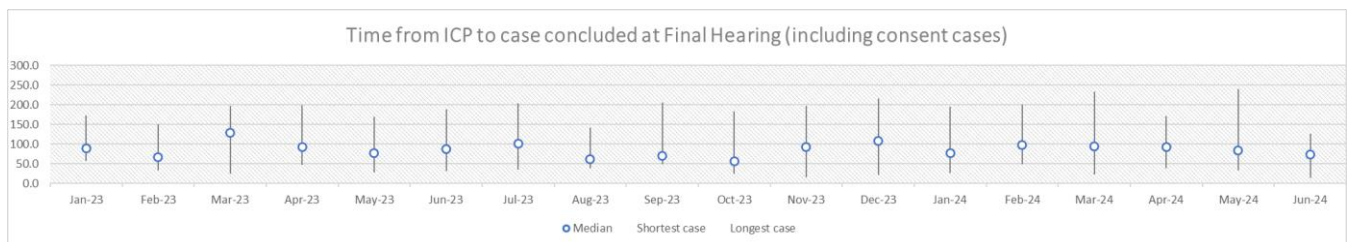
3.4 In June 2024, the oldest case closed was at 220 weeks, and the youngest was 2 weeks. The median age of cases closed in April 2024 was 25 weeks, which falls within the KPI of 33 weeks. This shows we continue to progress our oldest cases, alongside those more recently received.

Figure 4 – receipt to closure at Threshold or ICP decision median



- 3.5 Figure 5 shows the median age of cases that were closed at a final hearing (including cases resolved by consent). We expect the median age at this point of case conclusion to be above our KPI of 39 weeks as our older cases move through the process.
- 3.6 The median age of cases concluded at a final hearing in June 2023 was 73 weeks, with the oldest case at 126 weeks and the youngest case at 15 weeks, which is well within our 39 week KPI for this stage of the process. The shortest age to conclusion continues to reflect the positive impact of frontloading, and the benefits we are realising in progressing frontloaded cases to a final hearing more quickly.

Figure 5 – ICP to final hearing decision median



Case volumes at each stage of the process

- 3.7 Figures 6 to 8 show the number of open cases in our Threshold, Investigations and Post-ICP teams respectively.
- 3.8 As we have previously updated the Council, since June 2023 we have seen an increase in the number of new FTP concerns we are receiving each month. Between April 2023 and March 2024 we received an average of 174 new FTP concerns per month, which is a 16% increase on the same period in the previous year. The trend continues and in the first three months of this financial year we have seen an average of 190 new FTP concerns per month.
- 3.9 This increase in new concerns is reflected in the volume of cases at the Threshold stage, which has been above 700 cases since January 2024. There are currently 750 active investigations in the team. We have increased case manager resource in this area and once new team members are onboarded we expect to see the caseload begin to decrease.
- 3.10 At the end of June 2024 the Investigations caseload was at 958. 154 of these cases are currently listed for a future Investigating Committee Panel, which is the highest number since we started reporting as part of our improvement work in January 2021. This means the number of cases under active investigation in the Investigations team is 804. Although the active caseload has decreased since last month, the caseload is still higher than we would like and we have commenced targeted work with this team to streamline processes and improve productivity.

3.11 The number of cases at the post-ICP stage remains below 500 cases, as it has done since February 2022. In June 2024 the caseload was 466. 53 of these cases are listed for a future final hearing.

Figure 6 – number of open Threshold cases

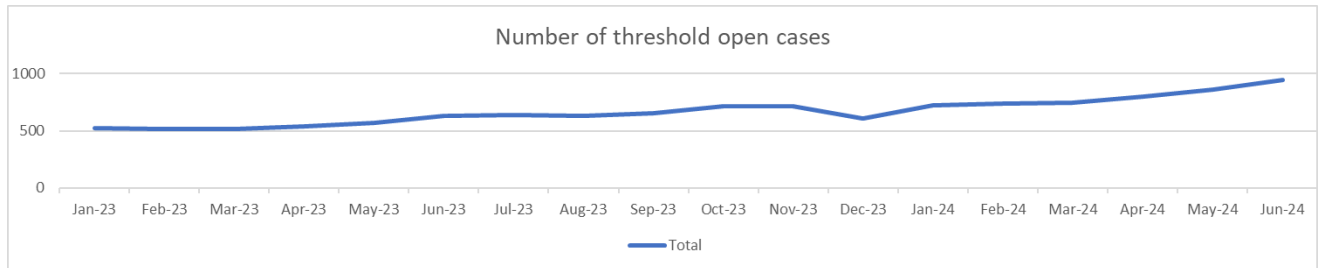


Figure 7 – number of open Investigations cases

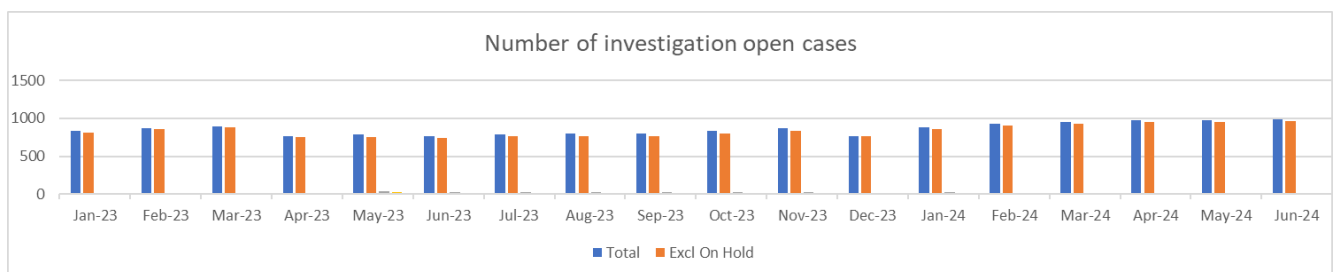
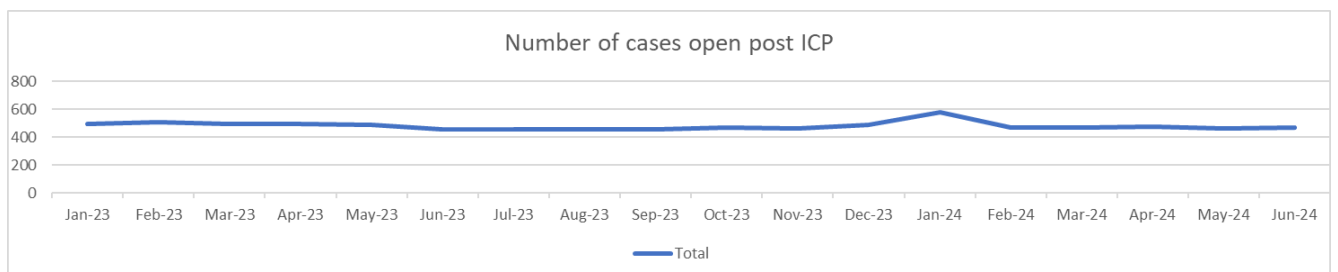


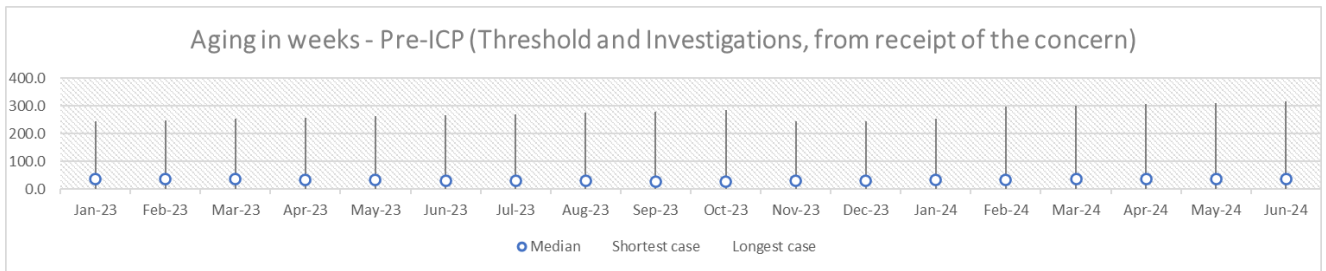
Figure 8 – number of open post-ICP cases



Age profile of the live caseload

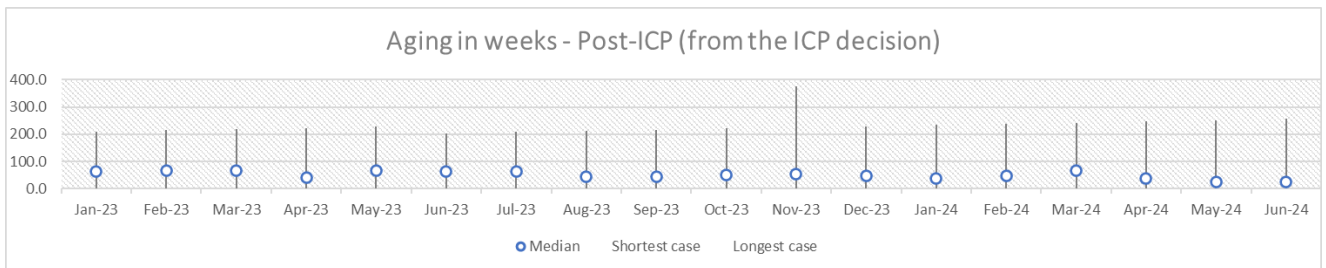
3.12 Figure 9 shows the median age of our live pre-ICP caseload. At the end of June 2024, the median age of our open pre-ICP caseload was 36 weeks, which is slightly higher than our KPI of 33 weeks for this stage of the process. We have maintained our median age at 35-36 weeks since February 2024, despite the increase in FTP referrals. The youngest case was under one week and the oldest was 315 weeks. The median age of our live caseload includes cases that are or have been on hold due to a third party investigation.

Figure 9 – median age of live pre-ICP caseload



3.13 As our older cases progress through to the post-ICP stage, the median age of cases at this stage of the process increases. At the end of June 2024, the median age of cases at this stage was 26 weeks, which is within our KPI of 39 weeks from the ICP decision. The youngest case at this stage was under one week and the oldest was 255 weeks. The oldest case is listed for a final hearing later this year.

Figure 10 – median age of the live post-ICP caseload



4. Update on improvement activity

4.1. Our current our improvement work is targeted on timeliness and preparing for the future, as well as continuing to monitor, embed and develop the changes we have delivered in the earlier phases of the improvement programme. A progress update on the improvement activity in progress is provided below:

- **Implementing and embedding changes to our operating model to support frontloaded investigations:**

In June 2024 we commenced in-house frontloaded investigations with four cases. We are starting on a small scale and building up slowly to ensure our new processes are operating as intended and that we are meeting our quality expectations. We are delivering a significant programme of training to our new Frontloading Case Managers to support them in this new way of working. This training is being delivered in partnership between our external legal providers, our FTP Training Partners and our Senior FTP Lawyer.

In June we successfully recruited three new lawyers who will form our new in-house legal team, working with our Senior FTP Lawyer. One of those lawyers will be responsible for our frontloaded investigations, supporting case managers undertaking these cases and leading more complex cases

themselves. We were unable to recruit a second frontloading lawyer from our recent campaign and are working with HR colleagues on further recruitment to fill this vacancy. Our two other lawyers will take up post as Case Progression Lawyers, working alongside our external legal providers to ensure that outsourced cases are completed to timeliness and quality service standards.

We are currently developing training materials and finalising implementation plans to introduce the streaming of non-frontloaded cases, to ensure efficient and proportionate case investigations. We are on track to train the teams on these new ways of working over the summer and commence streaming in September 2024.

- **Implementing changes to our case management system to align with our new operating model:**

Phase 1 of this project, which delivers changes to our pre-ICP workflows, is complete and we are now developing the changes required to our post-ICP workflows. We are on track for the changes to be deployed in September as we move fully into our new operating model.

- **Optimising our scheduling processes to reduce the time taken to list a matter for a final hearing:**

The scoping work for this project has started. We are currently benchmarking our existing processes and seeking feedback from stakeholders on their experience of the scheduling process.

5. Key risks and mitigation

5.1. As we have shared with the Council, the current trend of gradual, incremental improvements are vulnerable to a number of risk factors, both internal and external:

- Time – it takes time for improvement work once delivered to be seen as a sustained and noticeable impact on performance measures. We have seen the impact of phase 1 of our improvement plan, which focused on the quality and consistency of our investigations, decision-making and management of risk in cases, in the Professional Standards Authority's Performance Review report for 2022-23. Phase 2 of our improvement programme had a strong emphasis on the support we provide to those in the FTP process, and we are seeing the tangible impacts of that work as reported to Council in November 2023. The monitoring of this improvement work is embedded into our business as usual activity to ensure this work is sustained, and our next suite of improvement activity builds on the changes and positive outcomes made to date.
- Increase in FTP concerns – in the last 12 months we have seen a significant increase in the number of new FTP concerns we receive,

which makes it even more challenging to progress cases at pace. There are no discernible themes behind the increase in referrals and the trend in increased volumes of new referrals is also being experienced by other regulators. We have taken action to plan our resource and adapt our ways of working to respond to it and continue to monitor the number of referrals on a monthly basis.

- Transition to frontloading – we have begun implementing the changes needed to enable us to undertake frontloaded investigations in-house and make wider changes to our operating model. This requires changes to our processes, training of a significant proportion of the teams and recruitment in all areas. We are carefully phasing in the changes needed to ensure minimal impact on the timeliness and quality of our case management work.
- Resource – whilst turnover has improved, we continue to work on ensuring stability across the FTP teams and reducing our dependence on temporary and fixed term contracts. Recruitment in key roles, such as our triage and case management teams, remains a challenge. We have recruited to three of our four lawyer roles and are working with HR colleagues to fill the remaining vacancy. Recruitment for paralegals to support the lawyers will go live before the end of July 2024.
- Need for regulatory reform – the changes we are making are helping progress older cases and improve the quality of our decision-making and investigations. However, to be able to accelerate the improvement of the timeliness of our FTP process, we need legislative change to enable us to conclude cases earlier on in the process. At the moment, all cases where there is a case to answer (which is a low bar) must go to a final hearing. We continue to work closely with the Department of Health and Social Care on the plans for regulatory reform.

6. Next steps

- 6.1. We will continue to update the Council on our progress against our improvement plan at each meeting, or until the Council has sufficient assurance of our progress to reduce the frequency of reporting.