

Fitness to Practise Committee, 14 February 2013

Assurance and Development update

Executive summary and recommendations

Introduction

In April 2012, the Assurance and Development team was established as part of the restructuring of Fitness to Practise. This paper describes the range of activities undertaken by the team to review, develop and monitor systems that support fitness to practise activities.

The paper also outlines the activities and processes that are built in to operational team working.

Decision

This paper is for note. No decision is required

Resource implications

None

Financial implications

None

Appendices

Assurance and Development Update

Date of paper

01 February 2013

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Assurance and Development update

1 Introduction

- 1.1 This document is intended to provide the Committee with an update into the activity and work of the Assurance and Development

2 Introduction of Assurance and Development (A+D) team:

- 2.1 In April 2012, a new team was created in the Fitness to Practise Directorate to ensure that there were dedicated resources directed to quality assurance and ongoing development of systems.

- 2.2 The team is responsible for:

- Working with other teams to analyse and develop core processes;
- Overseeing support and develop of the Case Management System;
- Supporting new and existing team members in the use of core business systems;
- Co-ordinating responses to service complaints about the work of the Fitness to Practise Directorate
- Undertaking a programme of compliance audit activities
- Working with Secretariat to respond to requests made under the freedom of information and data protection act
- Assessing cases for referral to the relevant barring organisations

2.3 The A+D team consists of:-

- Head of Assurance and Development, who is responsible for developing the strategy for this workstream,
- two Assurance and Development Officers who perform process analysis and core system development, and manage the process of responding to and analysing complaints about FtP,
- two Quality Compliance Officers who conduct audits of cases to ensure compliance with policy and process, reviewing information for disclosure and providing freedom of information and data protection act information as it relates to the fitness to practise function.

3. Department-wide programme of assurance activities

3.1 There are a range of quality assurance activities that are carried out routinely. Some of these are conducted by the A+D team, with others being built into the work of operational team members.

3.2 A brief description of the main areas of assurance work are outlined below:

3.3 Case Management System support:

3.3.1 The new Case Management System (CMS) went live in April 2012.

3.3.2 Any changes that are required to the CMS system are logged and managed through the A+D team. This ensures an audit trail of changes, and also a consistent specification of the change before it is made. Any systems changes are developed, tested and released in a controlled manner.

3.3.3 A programme of induction and refresher training is delivered by the A+D team. This includes both basic and advanced modules in using the CMS. Team members sign themselves off as confident in using the system. The team also deliver tailored training to those users who require it

3.3.4 As FtP team members change, access and security settings on the CMS need to be maintained. The A+D team co-ordinate a two-weekly deployment process of changes to the CMS to ensure the system integrity is maintained.

4 Complaints

4.1 The A+D team receive, log and allocate complaints for response. Details of this process are included in another paper for this committee elsewhere on this agenda.

4.2 Analysis of themes of complaints are used to inform developments of the CMS, or of induction or refresher training for staff.

5 Compliance audits

5.1 The Quality Compliance Officers perform a range of audits on cases that are closed at different stages of the system. These include those that are: closed by HCPC when they do not meet the standard of acceptance and closed at the Investigating Committee.

5.2 The A+D team compile a standard report, and there is a monthly meeting with Investigation Managers to discuss the findings and any implications for the outcome of the case, our processes, or supporting systems. .

5.3 When cases at final hearings have a sanction of Not Well Found, we review the investigation to determine whether alternative approaches to closure, such as discontinuance, could have been used instead of a final hearing.

6 Operational assurance

- 6.1 A range of risk assessment and approval processes exist for use by Case Managers during their handling of a case. Requests for legal advice, application for an interim order, consent or discontinuance of part or all of the allegations are signed off by a Case Team Manager or Investigation Manager. There are a range of standard forms that are included in the workflow of CMS to do this. This approach ensures consistency of approach and provides an audit trail of the assessments made during a case's lifetime.
- 6.2 A similar approach applies at the adjudication part of the process. There exist a range of checklists and risk assessments that cover the preparation for, management of, and follow up of hearings. This includes assessing any vulnerable parties' needs (such as physical support, video conference evidence given, or requirement for someone to support their attendance). There are a range of checks of data that is publicised on the website relating to hearings.
- 6.3 A range of operational meetings on a weekly or monthly basis review key case types to ensure that a consistent approach is taken, and to escalate activities if necessary. These meetings include: Interim Order case reviews; case progression conferences; vetting and barring scheme cases reviews.
- 6.4 Each month, data from CMS is used to produce a range of statistics that support managers and team members to perform their roles. These reports operate at a range of levels, and include: monthly performance statistics that are reviewed at Executive Team level; management commentary that supports business and operational planning; forecasting data for case investigations and hearings that allows resource planning; service standards that indicate if FtP is deviating from its processes.
- 6.5 There are a number of feedback mechanisms that inform the performance of FtP, and lead to process or information improvements. These include a range of customer care and witness questionnaires. The purpose is to gain information about these individuals' experience of the process. A follow up telephone call to witnesses is also offered and well received.

7 Learning and training

- 7.1 A review of any published reports on other similar organisations or regulators is conducted, in order to establish good practice that could be applied at HCPC. The review also ensures that any poor outcomes or practice that has been highlighted can be assessed and a prevention plan put in place.

- 7.2 HCPC receives learning points from the Professional Standards Authority (PSA) on completed hearings. The A+D team log and analyse these points. They are also shared, along with HCPC's response to PSA in terms of any activities we have put in place as a result of the learning point, with the Panel Members who sat on the case. This assists with their learning, and aids us to identify if any support is required to perform their role.
- 7.3 The learning points are also fed into the induction and refresher training for panels. We use the learning points as case studies for the group practical exercises.
- 7.4 We have had approval in both external audit and ISO audit processes in the last 3 months.

8 Future activities

- There will be an ongoing and continuous process of monthly review of cases that were closed at each stage of the process. Feedback will be incorporated into team training and the support of individual team members.
- The A+D team will continue to support, develop and administer the changes to the CMS to ensure it remains fit for purpose as processes evolve.
- Feedback from complaints about service will be shared across the team and the HCPC, with analysis of themes.
- Feedback from Professional Standards Authority learning points will be analysed and included in the training given to panel members.
- Operational team members will continue to meet to discuss cases that require additional input, or require more intensive investigation.