Audit Committee 23 June 2011

BSI Audit report April 2011

Executive summary and recommendations

Introduction

BSI are now supplying a new ISO9001 auditor.

Decision

Audit committee are asked to discuss the attached report.

Background information

HPC are audited twice yearly by BSI as our external audit partner for
ISO9001:2008

Resource implications

None.

Financial implications

None.

Appendices
BSI report

Date of paper

18th May 2011.

Assessment Report

Health Professions Council

Report Author
John Doyle
Visit Start Date
05/04/2011

Introduction

This report has been compiled by John Doyle and relates to the assessment activity detailed below:

Visit ref/Type/Date/Duration	Certificate/Standard	Site address
7500636 Continuing Assessment (Surveillance) 05/04/2011 1 day(s) No. Employees: 130	FS 83074 ISO 9001:2008	Health Professions Council Park House 184 Kennington Park Road London SE11 4BU United Kingdom

The objective of the assessment to verify conformity to ISO9001:2008 and the organisations own management system.

Management Summary

The areas assessed during the course of the visit were generally found to be effective.

There were no outstanding nonconformities to review from previous assessments.

No new nonconformities were identified during the assessment. Enhanced detail relating to the overall assessment findings is contained within subsequent sections of the report.

Areas Assessed & Findings

Overview of QMS

Changes to the QMS since last BSI assessment.
there have been no significant changes to the QMS, roles or responsibilities since last BSI assessment.
From discussions with senior management it was evident that there is well established commitment to the application , maintenance and improvement in accordance with ISO9001:2008 requirements.

Quality Manual Issue 005 - Last amended 01/06/10 4.2.2

All requirements of 4.2.2 have been addressed.

observation 1
Management may wish to consider a review of the Quality Manual, in particular the sequence and interfaces of processes within the QMS to ensure all processes are captured.
7.3 Design and Development should be considered as a justifiable exclusion to the QMS as it is not evident that the organisation actually engage in design activities.

Quality objectives 5.4.1
Quality objectives have been identified within the Quality Manual and these have been cascaded to relevant functions and expressed in PDRs for individuals.

Quality Policy 5.3
The Quality Policy is contained within the Quality manual and is appropriate to the needs of the organisation.

Management Review -Procedure 26.05/10 rev 4 5.6
Management Review activity id undertaken via the Monthly executive Team Meeting
reviewed minutes of ETM 29/03/11
Good inputs and action outputs identification of responsibility and timescale set.
All requirements of 5.6 have been met. Preventive Actions are subject to management review and in accordance with Preventive
Action Procedure 002/07 rev 2 3/2/09

Internal Audit 8.2.2
Internal audit schedule 2011 provided
sampled: audit reports
Internal Audit -Registrations 30/03/11
Supplier Audit - Europa Quality Print -19/01/11
Audits carried out in accordance with audit schedule.

Observation 2
Management may wish to enhance the audit schedule with provision and cross reference to ISO9001:2008 clauses.

Customer Feedback 8.2.1
Customer feedback is subject to monitoring and analysis.
Verified customer feedback reporting via EMT monthly report for February 2011.
Reported results =8 complaints and 7 compliments received for the period.
Complaints managed in accordance with Complaints process -04/67 rev1 04/06/10
Corrective actions in relation to complaints is carried out in accordance with Corrective Action Procedure 002/05 rev 3 3/2/09

Document Control Procedure 4.2.3

Observation 3
The current Control of Documents procedure lacks clarity with regard to the methodology for review and approval of documents prior
to issue and where some elements of document control are addressed elsewhere within the QMS, management may wish to ensure
these are adequately cross referenced within the control of documents procedure.

Records Control 4.2.4
Observation 4
While control of records is addressed within the document control procedure, management may wish to review the current control of
records procedural arrangements to ensure all requirements of 4.2.4 are adequately addressed or where necessary cross referenced.

6.3
Facilities Management -Steve Hall -Facilities Manager
Verified Fire Test Records-Call Points Logged in accordance with process requirements.
Fire alarm tests weekly with notification.
Log Book records maintained at reception
Process in place for the operating of office equipment
PAT Testing -Currently developing schedule of PAT testing 2011.
Facilities provide Induction for new starters.
Verified induction for   02/03/11 -induction signed by employee.
Records scanned onto system and then subject to destruction via confidential waste.

Sampled Risk Assessment carried out for ▮▮▮▮▮▮▮▮▮ -04/04/11 following desk move
,desk 113
Process in place for 'How to deal with someone trapped in lift' 004-0125 rev 002 25/03/11
Procedure in place for Franking Machine Process 004-0125 rev 001 -27/05/11
Last reactive Maintenance required- Contract ref 960014 p-Service Report 950245 24/02/11 verified.
Verified SMART objectives have been set for the Facilities Manager via PDR January 2011

Observation 5
The work environment is well maintained being clean and tidy and is conducive to the needs of the organisation 6.4

Infrastructure IT -Guy Gaskins-Director of IT   6.3
Incident Management Process 1.0 approved by IT Director 18/08/10
IT operate a CAB for the management of changes. Livetime System used for the logging and tracking of incidents, requests and problems.

Rick Welsby-IT Service Support Manager
Sampled Livetime system:
Open Incidents
Ref 100891 raised 05/04/11 12.26pm -assigned to ▮▮▮▮▮▮▮▮▮ -Incomplete information received to describe the problem -
current status - in progress.
Ref10089 raised 05/04/11 09.53am -responded to via email 11.30am-current status 'On hold'.

Closed Incident
Refr 100812-raised 22/03/11 16.28pm -inability to copy spreadsheet-assigned ▮▮▮▮▮▮▮ -Issue reviewed -resolved and closed
out 16.48 22/03/11.
Currently 30 incidents open on system.
Nationality of Registrant -Indian

8.2.3
SLAs are subject to monthly EMT reporting. Verified EMT monitoring report 30/01/11

Registrations Process
Registrations Process-Anna Lumasinska-Acting Customer Services Manager
International registrations sampled on Net Regulate system which is used to support all applicable Registrant details and their
Registration status.-Physiotherapist.
sampled Registrants details including DOD, address details, Certified documents, Registered Body-Nationality Indian-Licence No
▮▮▮▮▮

Ref ▮▮▮▮▮ -USA-Speech and Language Therapist --status accepted subject to verification -13/01/11
Ref(▮▮▮▮ - Australian -Psychologist -accepted -Status-Registered
Activities carried out in accordance with documented pre planned management arrangements

Assessment Participants

On behalf of the organisation:

Name	Position
Greg Ross-Sampson	Director of Operations
Roy Dunn	Head of Business Process Improvement (Quality Manager)
Tom Berrie	Information Services Manager

The assessment was conducted on behalf of BSI by:

Name	Position
John Doyle	Team leader

Continuing Assessment

The programme of continuing assessment is detailed below.

Site Address	Certificate Reference/Visit Cycle	
Health Professions Council	FS 83074	
Park House	Visit interval:	6 months
184 Kennington Park Road		
London	Visit duration:	7 hours
SE11 4BU	Next re-certification:	01/04/2013
United Kingdom		

Re-certification by Strategic Review will be conducted on completion of the cycle, or sooner as required. The review will focus on the strengths and weaknesses of your Management System.

Certification Assessment Plan

Business area/Location		Visit 1	Visit 2	Visit 3	Visit 4	Visit 5	Visit 6
	Date (mm/yy):	10/10	04/11	10/11	04/12	10/12	04/13
	Duration (days):	1	1	1	1	1	1
Registrations UK		✓					
Registrations International			✓				
Registrations Grand parenting					✓		
Communications						✓	
Approvals & Monitoring				✓			
Fitness to Practice					✓		
HR/Partner Validation		✓					
Purchasing & supplier evaluation				✓			
Secretariat				✓			
Customer Services						✓	
Finance						✓	
Management System Organisation and Review			✓		✓		✓
Senior Management Interview							✓
Preparation for Strategic Review						✓	
Strategic Review							✓
Staff development and Training		✓		✓			
Policy		✓					
Work Environment and Infrastructure			✓				

Next Visit Plan

Visit objectives:

The objective of the assessment to verify conformity to ISO9001:2008 and the organisations own management system.

Visit scope:

As per plan

Date	Assessor	Time	Area/Process	Clause
04/10/2011		09.00	Opening Meeting	
		09.15	Changes to the QMS. Quality policy and Objectives	
		09.45	QMS Documentation/Records Control, Management review/Internal Audits Corrective/Preventive Actions	
		10.30	Approvals & Monitoring	
		11.45	Purchasing & supplier evaluation	
		12.30	Lunch	
		13.00	Secretariat	
		14.00	Staff development and Training	
		15.00	Report writing	
		16.00	Closing Meeting	

Please note that BSI reserves the right to apply a charge equivalent to the full daily rate for cancellation of the visit by the organisation within 30 days of an agreed visit date. It is a condition of Registration that a deputy management representative be nominated. It is expected that the deputy would stand in should the management representative find themselves unavailable to attend an agreed visit within 30 days of its conduct.

Notes

The assessment was based on sampling and therefore nonconformities may exist which have not been identified.

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Appendices

The auditor would like to thank all those involved in this audit for their cooperation and assistance