
Council, 30 June 2015

HCPC response to the Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry – Second update on commitments

Executive summary and recommendations

Introduction

In February 2013, the Mid Staffordshire NHS Foundation Trust Public Inquiry reported to the Secretary of State for Health. At its meeting in March 2013, the Council considered a paper from the Executive which highlighted and discussed the recommendations made by the Inquiry which were relevant to the HCPC.

The Council considered a further paper in May 2013 containing a policy statement and an action plan aimed at meeting those recommendations in the short to medium term. It was agreed that the action plan would be kept under regular review, with a progress update published at least once a year.

An update on the work undertaken in relation to the agreed commitments of the action plan was provided to the Council in July 2014. The attached paper provides a further update on activities, as of June 2015.

Decision

The Council is invited to discuss and approve the attached paper; and to agree that future reporting to Council against the action plan will be done via routine departmental reports.

Background information

- Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry
<http://www.midstaffpublicinquiry.com/report>
- Council, 27 March 2013. Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry.
<http://www.hpc-uk.org/assets/documents/10003F71enc06-ReportoftheMidStaffpublicinquiry.pdf>
- HCPC response to the Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry (post May 2013 Council meeting).
<http://www.hpc-uk.org/assets/documents/10004097HCPCresponsetotheReportoftheMidStaffordshireNHSFoundationTrustPublicInquiry.pdf>

- Council, 2 July 2014. HCPC response to the Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry – Update on commitments.
<http://www.hcpc-uk.org/assets/documents/10004703enc05-HCPCresponsetotheReportoftheMidStaffordshireNHSFoundationTrustPublicInquiryUpdateoncommitments.pdf>

Other background information: see paper.

Resource implications

There are no additional resource implications as a result of this paper.

Financial implications

There are no additional financial implications as a result of this paper.

Appendices

None

Date of paper

17 June 2015

HCPC response to the Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry – Second update on commitments

1. Introduction

- 1.1 In February 2013, the report of the Mid Staffordshire NHS Foundation Trust Public Inquiry ('the Report') was published¹. The terms of reference of the Public Inquiry were to examine the 'operation of commissioning, supervisory and regulatory organisations and other agencies...in relation to their monitoring role of Mid Staffordshire NHS Foundation Trust' (Executive Summary, p. 10).
- 1.2 In its introduction, the Report urges organisations to do the following in implementing its recommendations:
- 'It is recommended that:
- All commissioning, service provision, regulatory and ancillary organisations in healthcare should consider the findings and recommendations of this report and decide how to apply them to their own work;
 - Each such organisation should announce at the earliest practicable time its decision on the extent to which it accepts the recommendations and what it intends to do to implement those accepted, and thereafter, on a regular basis, but not less than once a year, publish in a report information regarding its progress in relation to its planned actions' (pp. 24-25).
- 1.3 This paper provides a brief summary of the HCPC's response to the Report, as well as a progress update on our agreed action plan to implement the recommendations.

2. Our response to the Report

- 2.1 In March 2013, the Council considered a paper from the Executive which summarised key areas addressed in the Report; grouped and analysed recommendations which were relevant to the HCPC; and proposed specific responses and actions to be taken².
- 2.2 Subsequently in May 2013, the Council considered a policy statement acknowledging the important role that HCPC as a professional regulator has to play in helping to ensure quality and safety in health and social care services. An action plan was also presented to the Council, including specific actions identified for the short to medium term, which would enable HCPC to meet, or contribute towards meeting, the Report's recommendations³.

¹ The full report is available here: <http://www.midstaffspublicinquiry.com/report>

² Our detailed analysis of the Report is available here: <http://www.hpc-uk.org/assets/documents/10003F71enc06-ReportoftheMidStaffspublicinquiry.pdf>

³ The policy statement and action plan can be found here: <http://www.hpc-uk.org/assets/documents/10004097HCPCresponsetotheReportoftheMidStaffordshireNHSFoundationTrustPublicInquiry.pdf>

3. Agreed action plan

3.1 The action plan covers the following areas:

- Fitness to practise – improving the process and sharing of information
- Education and training – improving the quality assurance process, in particular ensuring the safety of service users in the practice learning environment
- Standards of conduct, performance and ethics – clarifying expectations for professionals to raise and escalate concerns
- Professionalism – promoting professionalism among registrants
- Complaints about the HCPC – improving transparency and the availability of information about complaints

3.2 The plan includes timescales for implementation of each commitment, and it was agreed to keep it under regular review and to publish reports on our progress.

3.3 A progress report relating to the action plan was previously presented to the Council in July 2014⁴. The following section provides an update on progress made since then against the agreed commitments. This includes an indication of which actions have been completed and which are ongoing.

3.4 We propose that this is the last formal update to the Council. Due to the ongoing nature of some actions, they may be best monitored via approval of directorate workplans each year and scrutiny of operational reports at future Council meetings.

⁴ The July 2014 progress update is available here: <http://www.hcpc-uk.org/assets/documents/10004703enc05-HCPCresponsetotheReportoftheMidStaffordshireNHSFoundationTrustPublicInquiryUpdateoncommitments.pdf>

4. Update on the action plan

Area	Commitment	Agreed timescale	Updates
Fitness to practise			
Sharing of fitness to practise information	We will monitor and review the effectiveness of the existing Memorandum of Understanding (MOU) with the Care Quality Commission.	2013-2014 and ongoing	<p>Completed.</p> <p>The Executive reviewed and re-signed the MOU with the Care Quality Commission (CQC) in September 2014 and has also agreed:</p> <ul style="list-style-type: none"> • a joint operating protocol, setting out how the MOU will be operationalised; and • an information sharing agreement, setting out what, how, when and with whom information will be shared, along with any necessary security arrangements. <p>In addition to responding to the CQC's routine information requests, the HCPC has since made one referral to the CQC. This was in relation to a final hearing whereby the registrant raised concerns about a NHS Trust.</p>
	We will explore the scope to develop similar MOUs with other UK health and social care service regulators and other relevant organisations and to share information and trends analysis.	2013-2014 and ongoing	<p>Ongoing.</p> <p>We signed a MOU with the Disclosure and Barring Service (DBS) in August 2014.</p> <p>We are in continuing dialogue with the NHS Trust Development Authority, Health Inspectorate Wales and the Regulation and Improvement Authority in Northern Ireland with a view to establishing MOUs with these organisations.</p> <p>We have also recently attended a meeting of the Sharing Intelligence for Health and Care Group convened by Health Improvement Scotland and intend to speak with them further about establishing an MOU.</p>

<p>Improving the fitness to practise experience</p>	<p>We will continue to review and improve the experience of complainants and witnesses during the fitness to practise process.</p>	<p>2013-2014</p>	<p>Complete.</p> <p>Following the publication of the 'Review of the NHS Hospitals Complaint System Putting Patients Back in the Picture' final report by Rt. Hon. Ann Clwyd MP and Professor Tricia Hart in October 2013, the Executive reviewed the report and the recommendations relevant to HCPC. A paper was presented to Council in March 2014 outlining our response to the report; the actions to be taken as a result of the recommendations; timescales for implementation; and arrangements for reporting progress⁵.</p> <p>In order to improve the experience of complainants and witnesses, we have updated our fitness to practise service standards and reminded staff of our service standard commitments. We have also made amendments to the fitness to practise web pages to improve accessibility to the Standard of Acceptance policy document; our brochures with information for complainants and witnesses; and our feedback email addresses (for witnesses).</p> <p>We have developed internal operational guidance on 'Managing complaints about FTP' to ensure we are effectively using the complaints we receive to review, amend and revise our current processes where necessary.</p> <p>We have reviewed our Standard of Acceptance policy document and will be developing an 'easy read' factsheet for complainants which explains the standard of acceptance policy.</p> <p>Furthermore we are currently piloting the use of a questionnaire to collect feedback from complainants who have been through the fitness to practise process. The pilot will be evaluated shortly,</p>
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⁵ The paper is available here: <http://www.hcpc-uk.org/assets/documents/100045AEEnc02-AReviewoftheNHSHospitalComplaintSystemHCPCResponse.pdf>

			after which a decision will be made as to whether to issue feedback questionnaires on a continual basis.
	We will review the Patients Association's peer review into complaints at Mid Staffordshire and identify any learning for our handling of fitness to practise complaints.	May 2013	<p>Complete.</p> <p>The Executive undertook a review of the fitness to practise process in light of the Patients Association's 12 standards of effective complaint handling, in order to identify good practice or areas of improvement.</p> <p>Following the review, we identified five areas of work. To date, we have reviewed our operational guidance to ensure that complainants and registrants are notified if there is a change in the case manager managing their case, in order to maintain a single point of contact. A new 'consent to release health records' form has been developed. The new form has been specifically designed to be easier to follow and complete. We have also introduced a form for persons acting in a representative capacity.</p> <p>We continue to review our standard letters as part of the tone of voice review. To date we have completed the review of the standard letters used in relation to protection of title concerns and have developed an 'easy read' factsheet.</p>
	We will explore the potential for work with the Patients Association to peer review how the HCPC has handled fitness to practise complaints.	2013-2014	<p>Complete.</p> <p>The Patients Association was contracted to conduct a peer review of our fitness to practise process using the model they designed for Mid Staffordshire NHS Foundation Trust. HCPC is the first health and social care regulator to work with the Patients Association in this way.</p> <p>The Patients Association final report and the HCPC's response to the recommendations was presented to Council in September</p>

			2014 ⁶ . Commitments made in response to the report have been incorporated into the Fitness to Practise departmental workplan for 2015/16.
Guidance for employers	We will develop guidance for employers on making fitness to practise referrals	2013-2014 into 2014-2015	<p>Complete</p> <p>A paper which summarised the work we have completed to enhance our engagement with employers and, in particular, the information sources we have available to them was presented to the Council in March 2015⁷.</p> <p>Outputs of this work include the following:</p> <ul style="list-style-type: none"> • a revised brochure which focuses on providing information which is directly relevant to employers rather than the fitness to practise process in general; • a revised FTP complaint referral form; • updated webpages; • refreshed FTP sessions at HCPC employer events including new case studies; and • establishment of single points of contact at large employers.

⁶ See: Council meeting, 25 September 2015. The Patients Association's Peer Review of the HCPC's fitness to practise process – the final report and the HCPC's response. <http://www.hcpc-uk.org/assets/documents/100048A2Enc05-ThePatientsAssociationReview.pdf>

⁷ See: Council meeting, 26 March 2015. Fitness to practise – Employer engagement. <http://www.hcpc-uk.org/assets/documents/10004B1DEnc08-FitnesstoPractiseEmployerEngagement.pdf>

Education and training			
Sharing information – education and training	We will consider how we might routinely identify trends in practice learning environments, including the potential development of formal information sharing arrangements with other professional and systems-based regulators.	2013-2014 and ongoing	Ongoing. The Executive continues to develop and maintain partnerships with other organisations across the education sector to support the timely sharing of information. We will continue to work collaboratively with professional bodies, education and commissioning bodies (including the Quality Assurance Agency, Health Education England, NHS Education for Scotland and NHS Wales Shared Services Partnership) and other health and care regulators and share information where appropriate to do so.
Involvement of service users and carers in education and training	We will amend the standards of education and training to require the involvement of service users and carers in approved programmes.	Introduced on a phased basis from 2014-15 academic year	Complete (phased introduction ongoing). In July 2013 the Council agreed to add a standard requiring the involvement of service users and carers in the design and delivery of approved programmes ⁸ . It is being phased in over a number of years. In the 2014-15 academic year, the following programmes have been assessed against this new standard: <ul style="list-style-type: none"> • new programmes being visited for the first time (excluding prescribing programmes); • transitionally approved social work programmes; and • programmes requiring a visit as a result of a major change or an annual monitoring submission. From the 2015-16 academic year onwards, all new and existing programmes being visited will be assessed against the new standard. In the 2015-16 and 2016-17 academic years, all existing approved programmes will be assessed against this new standard as part of the annual monitoring audit.

⁸ See Council meeting, 4 July 2013. Service user and carer involvement in education and training programmes – consultation responses and our decisions. <http://www.hcpc-uk.org/assets/documents/100040C1Enc08-Serviceuserandcarerinvovementineducation.pdf>

			<p>The criteria for approving Approved Mental Health Professional (AMHP) programmes also includes a requirement in the same terms as the new standard, which has applied to AMHP programmes since the 2013-2014 academic year.</p> <p>In addition, the new standards for podiatric surgery, published in June 2015, include a similar standard requiring the involvement of service users and carers in the design and delivery of approved programmes.</p>
	We will pilot the inclusion of service users and carers as part of visit panels.	Inclusion from 2014-15 academic year and ongoing	<p>Complete.</p> <p>Following a series of papers on this topic in June 2013 and September 2013, the Education and Training Committee agreed to the involvement of individuals with service user and carer experience on visit panels⁹. Prior experience of using or engaging with services was captured in a revised lay visitor role brief.</p> <p>In summer 2014, 17 lay visitors were recruited and trained. In the 2014-15 academic year, all visits have been assigned a third, lay visitor to work alongside the two registrant visitors. A meeting with service users and carers involved in the programmes has also become a mandatory part of all visits.</p> <p>The Executive intends to review the inclusion of lay visitors at the end of the 2014-15 academic year.</p>
Standards of education and training	We will begin to review and consider the scope for amendments to the SETs and SETs guidance which	Paper to the Education and Training	Ongoing.

⁹ See: Education and Training Committee meeting, 6 June 2013. Service user and carer visitors as part of visit panels. <http://www.hcpc-uk.org/assets/documents/1000402Cenc06-serviceuserandcarervisitorsaspartofvisitpanels.pdf>

Education and Training Committee meeting, 12 September 2013. The use of lay visitors in the approval and monitoring of education and training programmes. <http://www.hcpc-uk.org/assets/documents/10004195enc04-Theuseoflayvisitorsonapprovalvisitpanels.pdf>

	might better set out our expectations for education providers in ensuring the safety for service users of the practice learning environment (e.g. managing feedback from students on placement).	Committee – September 2013. Review of the standards of education and training – 2014-2015.	In September 2014, the Education and Training Committee agreed the scope, content and process for the periodic review of the SETs ¹⁰ . The review is on track to be completed in 2017. As part of the first phase of the review, we are exploring stakeholders' views on key issues and themes, including the responsibilities of education providers in ensuring the safety of service users of the practice learning environment.
Standards of conduct, performance and ethics			
Raising and escalating concerns	We will consider amending the standards of conduct, performance and ethics to better set out our expectations around reporting and escalating concerns about the safety of service users.	2014-2015 (Professional Liaison Group convened as part of our review of the standards of conduct, performance and ethics.)	Ongoing. The Executive is continuing its periodic review of the standards of conduct, performance and ethics, which is on track to be completed in early 2016. During earlier phases of the review, research of registrant and service user views identified a need for strengthening requirements in the standards for professionals to raise and escalate concerns about the safety of service users. This was taken into account as new and amended standards were considered. A Professional Liaison Group was convened between June and December 2014. The group helped to put together a draft set of revised standards which included the addition of a new dedicated standard on reporting concerns. A public consultation on the draft standards, with a question specifically about the new standard on reporting concerns, ran

¹⁰ See: Education and Training Committee meeting, 11 September 2014. Review of the standards of education and training. <http://www.hcpc-uk.org/assets/documents/10004814Enc02-Reviewofthestandardsofeducationandtraining.pdf> .

			<p>between 1 April and 26 June 2015. Alongside the consultation a series of workshops with service users and carers were held in each of the four countries, to gather and discuss their views of the draft standards.</p> <p>An analysis of the responses to the consultation and final amendments to the draft standards will be presented to ETC and Council for consideration in September 2015.</p>
Professionalism			
Promoting professionalism	We will explore ways of continuing to engage with registrants about the importance of raising and escalating concerns as a part of our communications activities (e.g. continued engagement in the Department of Health's 'big conversation' initiative).	2013-2014	<p>Ongoing.</p> <p>As part of the review of the standards of conduct, performance and ethics, we have sought to strengthen requirements for professionals to raise and escalate concerns about the safety of service users (see above).</p> <p>We continue to engage with registrants on the subject of professionalism as part of our communication activities – for example, through presentations at HCPC events and other events.</p>

Complaints about the HCPC			
Improving the availability of information about complaints about the HCPC	We will include a section on complaints about the HCPC within the HCPC annual report.	2013-2014	<p>Complete.</p> <p>We have developed our approach to reporting the outcomes of complaints. The Executive Management Team (EMT) continues to receive a monthly report summarising each complaint; the response; and any corrective action where applicable. The Council will now receive a review of the themes of complaints on a six-monthly basis.</p> <p>The Executive has considered including a short section on complaints in the 2014-15 annual report, drawing on the reports considered by the Council in that period; however we have concluded that sufficient information is already available in the public domain.</p>
	We will explore ways to increase the accessibility of information about complaints about the HCPC already included in public Committee papers.	2013-2014	<p>Complete.</p> <p>The Executive has amended the customer service section of the website to provide more information about how complaints are handled and to provide links to reports considered by the Council. Although these are already available elsewhere on the website, this change has increased their accessibility.</p>