

March Board meeting
Wednesday, 20 March 2024



Executive report

1. Summary

- 1.1 In addition to our statutory duties, the key priorities for the organisation at this point in time are: (1) the website development project; (2) consultation on our guidance on implementing regulatory reform; (3) delivering the Equality, Diversity and Inclusion Action Plan for 2023/24, including the first assessments for regulators against the new Standard 3 requirements; (4) the PSA response to the Thirlwall Inquiry; and (5) actions to address the Professional Standards Authority commitments in *Safer care for all*.

2. Recommendations

- 2.1 The Board is asked to note the Executive report and to ask any questions of the Chief Executive and Directors.

3. CEO stakeholder engagement

- 3.1 Between the January 2024 and March 2024 Board meetings, the Chief Executive attended a number of stakeholder engagement events, including the following.
- The Institute for Government Annual Conference.
 - A meeting with the CEO of the Medical Council of New Zealand and the keynote presentation at the annual conference of the Canadian Network of Agencies of Regulation ('The Future of Right Touch Regulation').
 - Individual meetings with the CEOs of the NMC, HCPC and GMC.
 - A meeting (together with the PSA Chair) with Baroness Hayter to discuss the recording of sex/gender on regulator registers and the possible implications for informed consent.
 - The parliamentary launch of the Patient Safety Commissioner for England's report on redress.
 - Meetings (together with the PSA Chair) with the Chairs and CEOs of the GOC, GPhC, GCC and HCPC.
 - Meetings with NHSE to discuss the possible regulation of NHS managers and the use of regulatory strategies to support workforce plans.
 - Attending the Council meetings of the GOsC, PSNI, GMC and GPhC.
 - A meeting of the Health and Social Care Regulators' Forum.
 - The quarterly information-sharing meeting with the DHSC and officials from the devolved administrations.

- Meetings at a Cambridge Science and Policy event to discuss the impact of healthcare design on patient safety and on improving workplace cultures in health and social care.
 - Chairing a panel on how regulation needs to change at the Institute of Regulation Annual Conference.
- 3.2 Looking forward, the Chief Executive will attend further stakeholder engagement events before the next Board meeting, including the following.
- A meeting of the regulator Chief Executives Steering Group.
 - Attending council meetings of the NMC and GDC.
 - With the PSA Chair, joint CEO-Chair meetings with the NMC, PSNI, GDC and SWE.
 - Making a presentation at the Our Health Heroes Awards event at the QEII Conference Centre.

4. Summary of risks

- 4.1 We have assessed the top three known risks facing the Authority as: (1) the backlogs of fitness to practise cases in some regulators; (2) the lack of clarity about the use of Disclosure and Barring Service (DBS) and other criminal record checks by regulators and Registers; and (3) the challenges of implementing significant regulatory reform and the associated risks to regulatory effectiveness and public protection.

5. Projects

- 5.1 The high-level summary for project activity is attached in Annexe A.

6. Regulation and Accreditation

Performance review

Reporting

- 6.1 We have not published any reports since the last Board meeting. There are currently three reviews in progress in the 2023 cycle: the Pharmaceutical Society of Northern Ireland, Social Work England and the General Optical Council. We are planning to publish these reports by the end of March 2024.

Education and Training

- 6.2 On 20 February 2024, we held a workshop for the Board on Education and Training. It covered the landscape of the different organisations involved in education and training of health and care professionals, the roles of regulators, our oversight role, what we have seen recently, and potential further work. We noted that the Board has encouraged us to think about how we are adding value in this space, and we will use the upcoming review of the Standards to consider this further.

Section 29

- 6.3 The table below sets out the key statistics for the financial year so far, compared to last financial year. The number of decisions received from regulators continues to increase and is approaching pre-pandemic levels. The number of appeals lodged is double the number at this point last year. While the overall numbers are small in terms of enabling analysis, we will be reviewing these for themes.

	1 April 2023 – 29 February 2024	Same period 2022/23
Decisions received by the PSA	2207	2106
Detailed Case Reviews (DCRs) completed	83	73
Statutory deadline decisions	31	4
Case meetings held: <ul style="list-style-type: none"> • Sufficient • Insufficient but no appeal • Insufficient and appeal 	<p>5</p> <p>0</p> <p>12¹</p>	<p>4</p> <p>0</p> <p>13</p>
Appeals lodged	30 ²	15 ³
Learning points sent	115	139

- 6.4 Six appeals have been lodged since the previous Board meeting (NMC/Obodai-Sodjah, NMC/Appleton, NMC/Adams, HCPC/Boyle, GMC/Garrard and GMC/Grewal). Five appeals have been settled by agreement (GPhC/Nagdi, GPhC/Mr Hinglotawala, GPhC/Mrs Hinglotwala, SWE/Hoyte-Bradshaw and NMC/Odigie), and settlements are being explored in several other cases. All other Section 29 litigation is progressing. One decision has been handed down by the courts since the last Board meeting and the appeal was upheld (GDC/Patel).
- 6.5 Workload continues to be very high for the Section 29 team, which is impacting the team’s ability to progress work outside of business as usual. This includes

¹ Including one decision to join a GMC appeal and three case meetings confirming statutory decision decisions to refer.

² Including 21 statutory deadline decisions to refer where no case meetings were held and including the decision to join a GMC appeal.

³ Including two statutory deadline decisions to refer where no case meetings were held.

the implementation of the new quality assurance process, which was scheduled for Q4 of 2023/24. We now plan to run this in Q1 of 2024/25.

Appointments

- 6.6 Since the last update to the Board, we have provided the Privy Council with advice concerning five appointments processes. There were three that concerned recommendations for new appointments to the regulators' councils; The GPhC's recommendation of five candidates, the GOsC's process to find three candidates and the GOC's process to find a single candidate. There were also two reappointment processes, run by the GMC and GDC respectively, with both recommending two members for reappointment. We were able to advise the Privy Council that it could have confidence in all five of these processes.
- 6.7 The PSA held its annual appointments seminar in January, which was well-attended by all of the regulators subject to our Section 25c scrutiny. The Privy Council attended once more and Ceri King expressed the Council's satisfaction with the approach regulators have been taking. The longest session was devoted to a discussion of best practice in equality action planning, led by the PSA's Joella Hazel. We were pleased with the regulators' willingness to share their expertise and the sophisticated approaches to EDI action planning that were described.

Accredited Registers

Operational delivery

- 6.8 As at the end of January 2024, we had missed our target that '95% of Conditions are reviewed within two months of when they were due', for which we achieved 86%. As reported at the last meeting, there has been a significant increase in the number of open Conditions over the past twelve months, driven by Accredited Registers having their first full renewal assessments against the minimum requirements introduced in July 2021. This combined with delays in submissions from some Registers have caused us to miss the target. However, performance against this KPI is slightly improved from 84% as at November 2023.
- 6.9 We also missed our target for '95% of targeted reviews are completed within three months of the date initiated', for which we achieved 75%. This was caused by delay to our targeted review of the British Association of Counselling and Psychotherapy (BACP), due to the need to gather additional information from the BACP and other stakeholders. We expect to publish the final outcome by the end of March.

Accreditation decisions

- 6.10 Since the last meeting, we have completed full renewal assessments for the UK Council for Psychotherapy (UKCP), Save Face, and the British Association of Play Therapists (BAPT)⁴. Standard One 'public interest test' assessments have been completed for, and met by the BAPT, Save Face and the UKCP.

⁴ All reports relating to accreditation decisions will be published on this page once available: <https://www.professionalstandards.org.uk/what-we-do/accredited-registers/read-ourassessments/panel-decisions>.

- 6.11 On 25 January, we announced accreditation of Athena Herd Foundation (Athena). Athena is a provider of equine facilitated interactions and a leading training provider for equine practitioners in the UK. It is the first Register accredited by the PSA that involves the direct use of animals to deliver therapeutic and wellbeing services.
- 6.12 In February, we received a new 'Standard One' application from the Association of Traditional Chinese Medicine (ATCM). Registers can apply for assessment against Standard One to check eligibility before a full application. We are gathering views from stakeholders with experience of the ATCM until the 4 April, which will help inform the assessment⁵.

7. Standards and Policy

Policy and research

Safer care for all

- 7.1 Work continues to progress actions in the 2023/24 Safer care for all action plan. Since the last meeting we have held a successful seminar with the Parliamentary and Health Service Ombudsman on 23rd January on tackling barriers to complaints, and a stakeholder roundtable on accountability, fear and public safety on 5th March.
- 7.2 The consumer research we have commissioned into perceptions of a common code for healthcare professionals is progressing (further details below).
- 7.3 We have had further constructive engagement with NHS England on their work relating to professional development for managers. We also discussed with them the potential for our regulatory strategy recommendation from Safer Care for All, to support implementation of the NHS Long Term Workforce Plan.
- 7.4 We facilitated a cross-regulator discussion on the implications of AI on their work including a presentation from the Department of Science, Innovation and Technology, and ran a workshop with Board members on AI.
- 7.5 We have also given our support to an academic from the Centre for Ethics in Medicine at the University of Bristol's Medical School for an application to the Wellcome Trust for funding to research investigate how cross-disciplinary professional ethical guidance could be constructed regarding the use of AI in healthcare in the UK.
- 7.6 A full evaluation of progress against the 23/24 action plan and a draft plan for 24/25 will be brought to the May Board meeting for review.

Safer care for all – consumer research

- 7.7 Further to a full tendering exercise, we contracted a research organisation, Solutions Research, to carry out qualitative consumer research for us by the end of this quarter. The fieldwork was completed in February and the report of the findings is due to be submitted by the end of March.
- 7.8 This research has been exploring the perspective of a broad range of participants (the public, users of health and social care services and health and

⁵ <https://www.professionalstandards.org.uk/what-we-do/accredited-registers/see-who-is-applying>.

care professionals) on the potential benefits of the development of a common code of conduct for health and care professionals.

- 7.9 The next step would be to take forward a scoping review on the benefits of a common code of practice for health and care professionals to support retention and multi-disciplinary working, and improve workplace culture. This would fall under several of the *Safer care for all* themes including workforce, and inequalities.

Regulatory reform consultations

- 7.10 A public consultation on our two regulatory reform related guidance documents launched on 22 January and will run for 12 weeks until 15 April. The guidance, on the use of accepted outcomes in fitness to practise, and rulemaking, seeks to support regulators to make best use of their prospective new powers. Details of the consultation have been circulated widely to our stakeholders.
- 7.11 In addition to seeking views through the formal consultation process we have also held two roundtable events for stakeholders to allow us to explain the reforms in more detail, outline why we are consulting, and seek views on our draft guidance. The first stakeholder roundtable, for patient and service user groups, will take place on 11 March. The second, for professional and representative groups, will be held on 14 March.
- 7.12 We have been issuing social media reminders for people to respond to the consultation and some responses have already been received. One of our messages about the reforms is that there should be more service-user engagement in the development process, so it is important that we also take steps to achieve this in our work in this area.
- 7.13 These activities are designed primarily to encourage responses from patient bodies, healthcare professionals and individual service-users. To facilitate this, we have developed additional communications materials which provide a short, simple explanation of the issues most pertinent to these audiences and signposts them to the consultation questions related to those issues. These additional materials will be distributed in March via patient and professional bodies as well as directly on our own channels. This will complement the roundtables being scheduled with these bodies in mid-March.

Legislative reform

- 7.14 At the time of writing, the Anaesthesia Associates and Physician Associates Order had completed its process through the Scottish Parliament, and successfully passed through the active scrutiny stages in Westminster. We expect it to have passed into law by the time of the PSA Board Meeting – implementation by the GMC would follow by the end of the year.
- 7.15 Ahead of the scrutiny stages, we provided briefings to interested MSPs, MPs, and Peers, highlighting our support for the new model of regulation enshrined in this piece of legislation, along with some aspects that we believe need further work, before it is rolled out to larger numbers of registrants. We also suggested the need for the new accountability arrangements to be kept under review to ensure they are an effective counterweight to increased regulator autonomy. Our briefings were quoted in several of the debates. In the House of Lords debate, the Minister referred to our oversight role as a mitigation for concerns

that these reforms represented a significant reduction of Parliamentary oversight.

Consultation responses

- 7.16 Since the last board meeting, we have responded to:
- The Department of Business and Industrial Strategy's consultation on 'Market Regulation and the regulatory landscape'
 - The GOC's consultation on removing gender from the register.
 - The HCPC's consultation on English language proficiency
 - The GDC's consultation on the format of hearings
 - The Action Against Medical Accidents consultation on its strategic review

Stakeholder engagement

- 7.17 Implementation of our new Stakeholder Relationship Management system is underway. We held a kick-off workshop with the supplier in January. We have since confirmed our requirements for how the system should be customised for our needs and we have started cleaning up our existing contact spreadsheet ahead of migration to the new system. Stakeholders have been contacted to request the data protection permissions we need and also to ascertain their interest in receiving updates on particular areas of our operations. We are working towards the new system being live by the end of March with training taking place in April.
- 7.18 By the time of the Board meeting, we will have finalised our manifesto outlining our policy priorities for the next UK government. The document will be used to engage parliamentarians as we move towards the general election. It will be distributed widely among parliamentarians, regulators/registers/professional bodies, other health and care contacts and the general public; as well as used more strategically as part of direct engagement opportunities with key political stakeholders.

Conferences and events

- 7.19 On 28 February, we held our annual seminar for Accredited Registers – an invitation-only event for our Registers. The event was held at the National Audit Office.
- 7.20 The theme of the event was 'Dealing with complaints and concerns'; we welcomed a range of speakers who presented on a variety of topics.
- 7.21 These included Professor Kevin Bampton from the British Occupational Hygiene Society (an AR) who presented a session on restorative justice; Professor Louise Wallace from the Open University who presented a session on the Witness to Harm research project, Dr Adrian Whittington, NHS England lead for the psychological professions who led a session on suicide prevention, and Sian Hughes and Arvinder Dhaliwal from the Solicitors Regulation Authority with a presentation on the overrepresentation of Black, Asian and minority ethnic solicitors in the FtP process.

- 7.22 We then separated delegates into three breakout sessions; two of these were led by our own Registers. The sessions covered a) suicide prevention, b) a new process for dealing with cautions and convictions and c) working with the ASA to deal with exaggerated, illegal and dishonest social media advertising.
- 7.23 The presentations were all well-received, there was a great deal of engagement and enthusiasm during the Q&A sessions after each presentation. We are yet to analyse our survey responses but we are confident that delegates regarded the day as valuable and beneficial to them as members of the AR programme.
- 7.24 The annual Welsh Regulatory Seminar, hosted jointly with the Welsh Government, is due to take place on 19 March. The theme for this year's event is 'the role of professional regulation in retaining and building the health and care workforce.'
- 7.25 Key issues that will be considered on the day include:
- How can we ensure new and international registrants get the right support and what more can regulators do?
 - How can we build on work to develop compassionate leadership to develop more compassionate regulation?
 - How can regulation better support innovation and new ways of working?
- 7.26 We have secured a range of high profile speakers from across the health and care sector in Wales, including representatives from the Welsh Government, professional regulators, BAPIO Wales, Health Education and Improvement Wales, Social Care Wales, and a range of senior healthcare professionals. Eluned Morgan MS, Minister for Health and Social Services, will deliver the keynote address. More than 100 people from across Wales and beyond have registered to attend the seminar.

Communications

Website

- 7.27 There has been a delay to the kick-off of the website redevelopment project due to commercial and legal discussions involved in the contractual negotiations. These have now been resolved and the path has been cleared for the project to begin fully from March. The first phase of the project will be scoping the requirements. Gathering insights from staff, stakeholders and the public will form part of that.

Accredited Registers

- 7.28 We are continuing to work with our appointed supplier on the AR Quality Mark (QM) campaign. We launched our first research project two weeks ago – a survey targeting AR practitioners. Our second research project which is a consumer survey targeting patients and the public will be rolled out in the coming weeks.
- 7.29 Both surveys will provide us with insights to help develop the QM campaign approach.

- 7.30 Ultimately this campaign will target a) practitioners on registers and encourage them to use the QM and b) patients/service users and encourage them to look out for the QM and to choose practitioners who are on an AR. This work supports our Strategic Plan aim to increase awareness of the AR programme as we seek to grow and strengthen it.
- 7.31 A delay in the delivery of Quality Mark campaign means that some of the work will now be completed in 2024-25, rather than 2023-24. As set out in Item 7, this means there will be an underspend of £14,297 in the AR communications budget for 2023-24. We are requesting to withdraw the same amount from the unrestricted reserves to use for the campaign in 2024-25. The funds would be drawn from the section of the unrestricted reserves that has been built up from previous surpluses of the AR budget. The most recent Month Nine accounts show that this amount is currently £116,000, and that there is a forecast underspend for 2023-24 of £15,000. This means that in effect, the level of unrestricted reserves will remain the same.

Accredited Registers Check a Practitioner campaign – results summary

- 7.32 As we continue to work towards delivery of the QM campaign on the AR programme, we have assessed the results of the previous Check a Practitioner campaign, looking at lessons we can feed into future planning.
- 7.33 The campaign launched on 15 June 2023 and was live for three months. Two ads were created – one for counselling/psychotherapy and one for cosmetic practice. These two occupations were chosen based on an evaluation of occupations covered by the programme matched to audiences most likely to engage on Facebook and Instagram. The aim was to place ads to drive traffic to our Check a Practitioner (CAP) search tool for those seeking the services of a healthcare practitioner working within the selected occupations.
- 7.34 The ads were live continuously throughout the campaign period and the target audience was selected using data on audience interests/hobbies/lifestyles. We were also able to tweak the audience selections and budget allocation throughout the campaign as data started to come in, in order to optimise results.

Campaign metrics

- 7.35 Total number of impressions: 1.38 million, reaching 739k individuals
- 7.36 Click through rate (clicks on links in the ads and clicks on the video contained in the ad, represented as a % of total impressions): 0.83% = 11,450 clicks. The click-through rate benchmark for healthcare sector on Facebook ads is 0.8% so our campaign performed in line with that.
- 7.37 Cost per click (how much these clicks cost us): £0.40 (significantly outperforming the healthcare industry benchmark which is £1.32)
- 7.38 Engagement (with PSA website and Check a Practitioner search tool): over the course of the campaign, we recorded 841 website sessions with 357 CAP searches resulting in 289 clicks through to register websites (across both occupations). It is reasonable also to assume that additional organic website visits and CAP searches occurred during and after the campaign period. Furthermore, we noted a 100% increase in traffic to the PSA website homepage during the campaign period and a 19% increase to the CAP landing page.

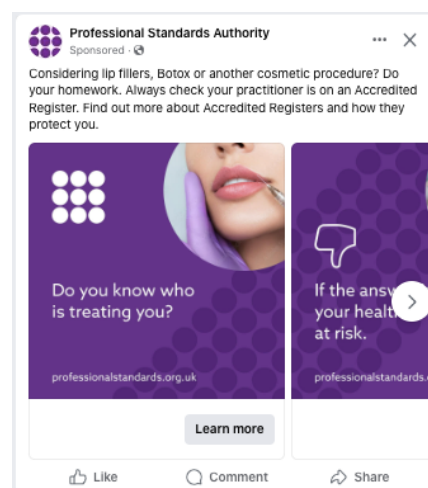
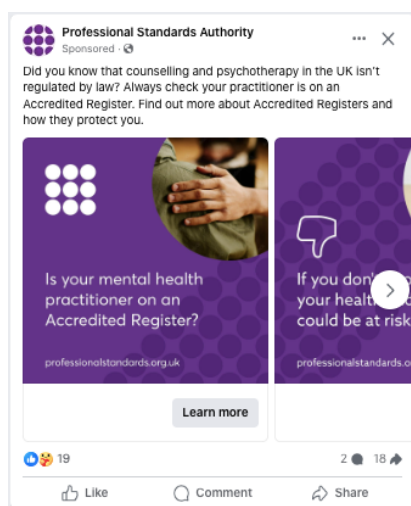
- 7.39 Audience comments indicated a positive reaction to the campaign including messages such as “This message needs to be everywhere, on the side of a bus, everywhere...”
- 7.40 We noticed that comments tended to be focused more on mental health than cosmetics.
- 7.41 Total spend: £4,700 (no VAT payable)

Lessons learned

- 7.42 This campaign demonstrates (as previous campaigns delivered from 2017-2019 also demonstrated) that, even with a modest budget, when we use digital advertising channels to engage with the public on Accredited Registers, engagement tends to be in line with or higher than industry benchmarks and leads to higher levels of engagement with our website home page, our Check a Practitioner tool and specific Accredited Registers (usually linked to occupations highlighted in the campaign).
- 7.43 This increased engagement drops off after the end of the campaign period. This demonstrates an interest in the benefits the programme offers once awareness is raised.

In advance of planning for our upcoming Quality Mark awareness campaign, this indicates that using a proportion of our budget on digital advertising is advised. We are also conducting practitioner and patient surveys to gather campaign insights into a) the benefits that practitioners understand they receive by being part of the programme and b) the decisions patients/public make when accessing healthcare services and what influences their decision.

Campaign creative (displayed as stills taken from an animated GIF)



8. Corporate Services

IT

- 8.1 We achieved Cyber Essentials and Cyber Essentials Plus in February. A huge thank you to all staff for being cyber aware and also for the volunteers who allowed the security specialists to check their laptops.

- 8.2 Windows 11 has been rolled out on all new laptops and we will be upgrading the remaining laptops throughout the year. Staff will be notified in advance.
- 8.3 Email security policies were reviewed and features such as impersonation detection was enabled. Users will be receiving fewer junk and phishing emails but there are a small number of genuine emails going into quarantine such as those sent from personal email addresses so users should always check the quarantine alerts or get in touch with the ICT team if urgent.
- 8.4 We issued a survey to staff on how they use available Applications. This has been insightful as we can now see for the first time how staff are utilising the applications that are included in our subscriptions.

Finance

- 8.5 The Finance Report is on the main agenda.

People

- 8.6 Louise Appleby left her role as Accreditation Officer on 2 February 2024.
- 8.7 Remi Gberbo left her role as Lawyer on 22 February 2024.
- 8.8 Amrit Clark joined us in the role of Scrutiny Officer (maternity cover) on 8 January 2024.
- 8.9 Sylvia Nartey-Tokoli joined us in the role of Finance Officer on 30 January 2024.
- 8.10 Dinah Godfree has been appointed to the role of Head of Policy from 1 April 2024.
- 8.11 Joella Hazel's contract as EDI manager has been extended to 31 March 2025.
- 8.12 Archie Herrick's contract as Policy Adviser has been extended to 31 May 2024.
- 8.13 Melanie Spencer's contract as a Lawyer (maternity leave) has been extended to 18 July 2024.
- 8.14 Interviews for two permanent and one fixed term Accreditation Officers were held on 16 February 2024 and all roles were appointed to subject to pre employment checks.
- 8.15 Interviews were held on 1 March 2024 for the Chair of the Audit and Risk Committee role and we will be making a recommendation to the Privy Council.
- 8.16 Interviews for the role of Parliamentary Engagement Officer will be held on 18 March 2024.
- 8.17 Interviews for the role of Director of Policy and Communications will be held on 21 March 2024.
- 8.18 Interviews for the role of Associate Board Member will be held on 25 March 2024.
- 8.19 We were unable to appoint following the first round of Policy Officer interviews and will be holding a second round in the near future.

Governance

- 8.20 All internal audits for 2023/24 have now concluded except for the audit of Business Principles which will be carried out in April 2024 due to staff absence.

EDI

- 8.21 An organisation wide EDI project to assess ourselves against Performance Review Standard 3 started in February. As part of the 2023-24 EDI action plan, we have an action to 'review our own processes for assessing and understanding EDI issues across our functions'. It requires us to 'carry out a self-assessment of ourselves against Performance Review Standard 3 and Accredited Registers Standard 9'. We are undertaking the self-assessment against Standard 3 as we have recently increased our expectations for regulators under Standard 3 and are committed to holding ourselves to the same high standards. Findings from the self-assessment will be reported to the Board.

KPIs up to 31 January 2024

Our performance against our KPIs is set out below:

Area of work	Key performance indicators	Performance to date in 2023/24
Finance	To pay undisputed invoices: <ul style="list-style-type: none"> 100% in 10 days 	97%
	Budgeted income / expenditure variance less than 5% (excluding Section 29 that is outside our control)	4.10% [3,283/3,423]*
	Payment error rate less than 3%	0%
	Late purchase order rate less than 10%	6% [20/305]
HR	Staff sickness no more than 2%	2.3% ⁶
	Staff turnover to be less than 15%	4.4%
	Average recruitment process less than 12 weeks	9.2 weeks
	Vacancy rate no more than 5%	4.5%
ICT	85% of helpdesk calls to be closed within 1 day	100% [280/280]
	System unavailability below 10 hours	0
Information security	No incidents reported to the Information Commissioner's Office	0
Information requests (FOI / SAR / EIR)	All (100%) Subject Access Requests dealt with within statutory deadlines	100% [2/2]
	All (100%) Freedom of Information Act requests dealt with within statutory deadlines	100% [22/22]

⁶ This is due to two long term absences. Without these it is 1.2%.

*As at the end of December

Complaints	100% of complaints acknowledged in five days Response to all complaints to be completed within 28 days	100% [3/3] 100% [3/3]
Health and safety	No reported incidents causing harm	0
Section 29 decisions	Number of cases received [compared with last year] Number of Case Meetings held [compared with last year] Appeals lodged [compared with last year] 100% of relevant decisions considered within statutory deadline [compared with last year]	2026 [1948] 17 [17] 28 [13] 99.9 ⁷ % (2025/2026) [100]
Performance Reviews	100% of 2023 performance reviews published <u>within 3 months</u> of end of review period	100% [7/7 to date]
Public concerns about Regulatory bodies	100% of concerns acknowledged within five working days since 1 April 2023	99% (354/358) ⁸
Accredited Registers – current processes	90% of Registers have a full assessment within three years of the previous assessment. 90% of decisions about the annual check within one year of the previous assessment. 95% of Conditions are reviewed within two months of when they were due. 95% of targeted reviews are completed within three months of the date initiated.	97% (28/29) 93% (27/29) 86% ⁹ (66/77) 75% ¹⁰ (3/4)

⁷ One case was a GMC appeal in which our statutory deadline becomes irrelevant.

⁸ One missed in January by 5 days. Missed in Inbox.

⁹ Due to increase in number of Conditions and issued and late submission by some Registers, more detail provided in main report.

¹⁰ Due to the need to gather more information from the BACP and other stakeholders, more detail provided in main report.

	90% of decisions are made on new applications for accreditation within two months of all information received.	100% (4/4)
Website usage	<p>Year-to-date data on website usage from April 2023-Jan 2024 with same period last year (April 2022-Jan 2023) in brackets¹¹</p> <ul style="list-style-type: none"> • Total page views across the website • Check a Practitioner landing page and practitioner specific pages • Accredited Registers home page and related Accredited Registers pages 	<p>503,462 (384,576)</p> <p>156,940 (119,471)</p> <p>85,770 (58,874)</p>

¹¹The higher than expected increase in views YoY between 2022/23 and 2023/24 is explained as follows:
a) Google introduced a new Analytics platform in Dec 2022 which measures data differently to before and b) in July 2023, we detected a bug in our cookie software which had been requesting consent from users who had previously provided consent leading to a negative impact on page views pre-July 2023. Once resolved, this has caused an additional increase in reported views.