

## **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 standards review project; (2) the business plan and fees consultation 2025/26; (3) promoting and supporting legislative reform for the regulators; and (4) closely monitoring the performance of the Nursing and Midwifery Council (NMC), including its response to the recommendations in the Independent Culture Review (ICR) report.

### **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 November 2024 and January 2025 Board meetings, the Chief Executive attended a number of stakeholder engagement events, including the following:
- Meeting the Parliamentary and Health Service Ombudsman.
  - Attending an online conference organised by The Healthcare Improvement Studies Institute and a Centre for Science and Policy event, both focused on preventative healthcare.
  - Chairing a meeting of the NMC Independent Oversight Group.
  - Attending the quarterly information-sharing meeting with the Department of Health and Social Care (DHSC) and officials from the devolved administrations.
  - Making a presentation to the CORU Council on right-touch regulation.
  - Together with the Chair, a meeting with the Chair and CEO of the General Medical Council (GMC).
  - Attending a meeting of the Chief Executives of the ten regulators overseen by the PSA (Chief Executives Steering Group).
  - Giving evidence on behalf of the PSA to the Thirlwall Inquiry.
- 3.2 Looking forward, the Chief Executive will attend further stakeholder engagement events before the next Board meeting, including the following.
- Attending a joint Patient and Client Council (NI)-PSA event in Belfast.

- Together with the Chair, a meeting with the Chair and CEO of the Health and Care Professions Council (HCPC).
- Chairing a regulator round table event organised by the Institute of Regulation.
- Together with the Chair, a meeting with the Chair and CEO of the Legal Services Board.
- Speaking at the Public Policy Project's Patient Safety Forum.

#### 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 implications of the independent reviews of the NMC and the impact on regulatory effectiveness and public protection.

#### 5. Regulation and Accreditation

##### *Performance review*

##### *Reporting*

- 5.1 We published the monitoring report for the General Dental Council (GDC) on 18 December 2024. We found it had met 16 out of 18 Standards. It did not meet Standard 3 because we did not have sufficient assurance that it was meeting three of the four outcomes that we require under our new approach to this Standard. It did not meet Standard 15 as we concluded that fitness to practise investigations were taking too long. The report can be found [here](#).
- 5.2 We published the monitoring report for GMC on 20 December 2024. We found it had met 18 out of 18 Standards. The report can be found [here](#).
- 5.3 An update on our plans to publish the NMC's 2023/24 periodic review performance report is set out in detail in paper 4.

##### *Standards Review*

- 5.4 We are reviewing our Standards of Good Regulation that underpin our statutory regulator performance review process alongside the Standards for Accredited Registers.
- 5.5 Our objectives are to:
- establish whether the current Standards are fit for purpose and adequately assist us to review and assess regulator and register performance and in doing so, protect the public
  - improve the Standards' effectiveness in assessing regulators' performance in meeting the regulatory objectives
  - consider whether there are any gaps in our regulatory oversight
  - consider the extent to which the two sets of Standards should be aligned.

We plan to launch the public consultation in February 2025.

*Standard 3 (Equality, Diversity and Inclusion) evaluation*

- 5.6 We are nearing the end of the 2023/24 performance review cycle, which was the first year of our new approach to assessing performance against Standard 3 of our Standards of Good Regulation, which focuses on Equality, Diversity and Inclusion (EDI). When we introduced our new approach in May 2023, we wanted to improve the transparency and consistency of our assessments, and to support regulators in their work to improve performance. We introduced a new set of indicators and outcome statements to support the Standard and collected and analysed relevant information in a new evidence matrix. We have provided more detail about our assessments in our published reports and used those reports to highlight areas of good practice.
- 5.7 We are now conducting a review of the first year of our new approach and have sought feedback from regulators. We will also be sending a short survey to stakeholders in January. We will report on our findings in Spring 2025.

## Section 29

5.8 The table below sets out the key statistics so far for this financial year, compared to the same period in the previous financial year. We lodged 17<sup>1</sup> appeals up to the end of November 2024.

	1 April 2024 – 30 November 2024	Same period 2023
Decisions received by the PSA	1477	1645
Detailed Case Reviews (DCRs) completed	49	62
Statutory deadline decisions		
<ul style="list-style-type: none"> <li>• No appeal</li> </ul>	7	8
<ul style="list-style-type: none"> <li>• Appeal</li> </ul>	9	12
Case meetings held:		
<ul style="list-style-type: none"> <li>• Sufficient</li> </ul>	3	5
<ul style="list-style-type: none"> <li>• Insufficient but no appeal</li> </ul>	5 <sup>2</sup>	0
<ul style="list-style-type: none"> <li>• Appeal</li> </ul>	9 <sup>3</sup>	12 <sup>4</sup>
Appeals lodged	17 <sup>5</sup>	21
Learning points sent	120	97

5.9 We have reviewed expected appeal numbers to the end of the financial year, based on current and recent average case numbers per month. From April to the end of November 2024, we appealed on average 2.125 cases per month. For the four final months of the year, this would equate to an addition 8.5 cases. In 2022/23, we appealed 12 cases in December-March (average appeals per month to the end of November 2022: 0.75), whereas in 2023/24 we appealed 9 cases in the same period (average appeals per month to the end of November 2023: 2.625). In 2022/23, the number of appeals rose sharply from December onwards (0.75 to 3), whereas in 2023/24 the average number of appeals per month from December onwards was slightly lower than the preceding eight

<sup>1</sup> We have also lodged one appeal in December 2024

<sup>2</sup> This includes one decision not to join as a party to a GMC appeal

<sup>3</sup> This includes one decision to confirm a statutory deadline appeal and one decision to join as a party to a GMC appeal

<sup>4</sup> This includes one decision to join as a party to a GMC appeal

<sup>5</sup> This includes one decision to join as a party to a GMC appeal.

months (2.625 to 2.25). Given that we do not have a clear pattern in recent years, it is difficult to use this as a basis for predicting appeal numbers from December-March. We instead consider it reasonable to estimate case numbers based on the average monthly appeal numbers to date in 2024/25, which would indicate that we will appeal approximately 9 further cases, taking the total to 26 for 2024/25. However, this is very much an estimate, and a few concerning cases could easily skew this.

- 5.10 Three appeals have been lodged since the previous Board meeting (SWE/Nicholson, NMC/Metcalf, HCPC/Saunar<sup>6</sup>). Hearings for two appeals took place in PSA v (1) GPhC (2) Ahmed<sup>7</sup> and PSA v (1) GPhC (2) R2<sup>8</sup>, and we were successful in both of these appeals. We settled one appeal by agreement (GMC/Ray) and there are a number of other cases where we are waiting for the court to seal the agreed consent orders.
- 5.11 We were unsuccessful in our recruitment for two permanent lawyers, and we will go back out for advertisement in January 2025. One temporary lawyer's contract, which was due to end in December 2024, has been extended to September 2025. We are currently the subject of an internal EDI audit, and they are due to report on S29 process and cases in January 2025.

### *Appointments*

- 5.12 Since the last update to the Board, we have provided the Privy Council with advice concerning four Council member appointments processes for the regulators. These include three run by the GMC considering the reappointment of its Chair of Council, the reappointment of three other Council members and the selection of four candidates to recommend for appointment following a competitive process. We also considered the General Optical Council (GOC)'s recommendation for the reappointment of a single council member. We were able to advise the Privy Council that it could have confidence in all four processes.
- 5.13 We are also in the process of scrutinising notices of recommendation from the General Osteopathic Council (GOsC), which has recommended a candidate for its vacancy for a member who lives or works in Wales and the NMC which has recommended the reappointment of a registrant member. We also expect to receive a notice of recommendation from the HCPC early in January.
- 5.14 The PSA has also considered an advance notice of recommendation from the GDC which shared its plans to recruit two new council members. Following the recent announcement that its Chair, Lord Harris, will not be seeking reappointment, we have discussed with the GDC how intends to progress its appointment campaigns next year.

### *Accredited Registers*

#### *Operational delivery*





- 5.15 At the end of November 2024, our performance against KPIs is as follows:

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<sup>6</sup> This appeal was lodged in December 2024

<sup>7</sup> This hearing took place in December 2024

<sup>8</sup> An anonymity order is in place preventing publication.

KPI	Met / Not Met	Performance	Direction of change since Nov Board
90% of full reassessments within three years	Met	96% (27 out of 28)	
90% of annual checks within one year	Met	100% (28 out of 28)	
95% of conditions are reviewed within two months of due date:	Not Met	82% (87 out of 106)	
100% of targeted reviews completed within four months:	No active targeted reviews since KPI introduced	N/A	Amended in April 2024 – not reported previously
90% of decisions on new Standard One applications made within four months	Not met	50% (2 out of 4)	
90% of decisions on full accreditation (standards 2-9) made in eight months of receipt	No active full applications since KPI introduced	N/A	Introduced in April 2024 – not reported previously

- 5.16 Performance continues to improve for the currently unmet key performance indicator (KPI) for conditions to be reviewed within two months of the due date. Since the Board's last report in November performance has improved by 11%. 17 of the 19 conditions that are out of KPI were caused by late submission by the Accredited Register, followed by decisions that some conditions were not met. In all of those cases the conditions have been reissued with shorter deadlines. Two of the conditions out of KPI were caused by administrative error that batched the deadlines with other conditions due for assessment at the annual check.
- 5.17 To address the risk of any further conditions being missed because of administrative error, a complete audit of outstanding conditions has been performed to ensure appropriate tracking by the team.
- 5.18 There continues to be no movement on the KPI to review Standard One applications within four months because no new applications have been received and two complex cases exceeded the time-limit. However, we

anticipate receiving at least one new application in Q4, and are in discussion with a number of other prospective registers who anticipate making applications next financial year.

### *Accreditation Decisions*

- 5.19 No new applications have reached conclusion over this period. In January we anticipate continuing the applications for the National Association of Care and Support Workers (NACAS) following an adjournment and the International Foundation for Therapeutic and Counselling Choice (IFTCC) following an appeal.

## **6. Standards and Policy**

### **Policy and research**

#### *Consultation responses*

- 6.1 Since the last Board meeting, we have responded to the following consultations and calls for views:
- Department of Health and Social Care, *NHS Change Consultation*
  - Welsh Government, *Agreeing the parameters of practice for the registered nursing associate role in Wales*
- 6.2 The DHSC has launched a consultation on the regulation of NHS managers. As set out in our web statement<sup>9</sup>, we will continue to work closely with the DHSC and NHS England on these issues as well as providing a formal response to the consultation. We were pleased to see that the consultation document references our *Right-touch regulation* approach and the need to balance risk against regulatory force by ‘understanding the problem before jumping to the solution’.
- 6.3 We will also respond to the Scottish Government’s consultation on the further regulation of non-surgical cosmetic procedures<sup>10</sup>. We will also continue to engage with DHSC on this issue, to urge consideration of a consistent UK-wide approach. At this time, there have been no updates on whether the new Government intends to take forward proposals initiated by the previous Government to introduce licensing for non-surgical cosmetic procedures in England.

#### *Commissioned research*

- 6.4 We have commissioned qualitative research exploring barriers to making a complaint to a regulator or register. Following a competitive tendering process, the agency Thinks Insight & Strategy have been appointed to undertake this research, and work has commenced.
- 6.5 The research will explore the barriers and enablers to making a complaint about a health or care professional, with the aim of supporting regulators and registers to make tangible improvements to their processes. It will explore the views and experiences of people who both have, and have not, raised a concern. The

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<sup>9</sup> [PSA welcomes consultation on regulation of NHS managers](#)

<sup>10</sup> [Regulation of non-surgical cosmetic procedures - Scottish Government consultations - Citizen Space](#)

sample will include members of the public and health and care professionals and will include a diverse range of people including from all four nations of the UK.

- 6.6 As well as exploring the barriers faced in raising a concern, the final research report will include recommendations for improvements to the process and accessibility of raising a concern with a regulator or register. The findings will be used to inform the review of our Standards for the regulators and Accredited Registers, particularly those standards relating to raising a concern or complaint about a registrant. The final report is due to be delivered by the end of the current financial year.

### **Engagement**

- 6.7 On 24 January 2025, we will host a joint event with the Patient Client Council NI in Belfast on 'Professionals and the Public: In Partnership for Patient Safety'. Speakers include senior leaders from Action Against Medical Accidents (AvMA), Patient Safety Learning, and the Regulation Quality Improvement Authority. The aim of the event is to facilitate discussion on issues affecting both patient safety and regulation. We will use the outputs to inform our regulatory development work on areas such as the Standards Review, and to strengthen our relationships with key stakeholders in NI.
- 6.8 In December, Policy and Communications team members and the Head of Accreditation met with the Parliamentary Health, Social Care and Wellbeing Hub. The Hub helps co-ordinate and support research and analysis across health, social care and wellbeing policy in Parliament. We gave an overview of the work of the PSA, with a particular focus on the regulation of counsellors and psychotherapists, since there have been recent calls for statutory regulation of this group. The meeting had been sought by the Hub team after receiving our second Parliamentary Bulletin.
- 6.9 On 4 February, Policy and Communications team members and the CEO will meet with Dr Zubir Ahmed MP's (PPS to the DHSC) office. This meeting will include a Co-Chair of the new All Party Parliamentary Group (APPG) on Patient Safety.
- 6.10 The Director of Policy and Communications will attend the Health and Social Care Regulators Forum on 27 February. She will also meet with the Director of Workforce at the DHSC, who is also Co-Chair of the 'People' NHS 10 Year Health Plan working group, on 8 January.
- 6.11 We intend to establish a new forum for the regulators on use of Artificial Intelligence (AI) and data, following support for this proposal at our most recent Policy Forum. The aim will be to facilitate the sharing of best practice, regulatory risks, and identify potential areas of collaboration across the regulators.

### **Communications**

#### *Website and branding*

- 6.12 There has been a surge in efforts during the final stages of the website redevelopment project, to get ready for launch in early January. This has involved deploying additional resources to work closely with the developers to resolve the last technical and design bugs at the backend of the website.



- 6.13 By the time of the Board meeting, the new website should be launched. The nature of websites means they remain dynamic and the work to enhance the website will be ongoing for the coming period. We intend to conduct user assessment in February – asking those who initially gave input to help shape the new website to give their views on whether the new site brings the improvements identified. We will use any feedback received this way to guide us as we continue our enhancement work for the rest of the financial year.

## 7. Intelligence and Insight

### Research

- 7.1 A summary of the feedback from the research conference on 17 October is given below. Other, more informal feedback has been similarly largely positive about the event.

How did you hear about it?	Email from the PSA 11/30 From a colleague 18/30 Social media 0/30 Other 1/30 (“by invitation, some years ago”)
Valuable	Breadth, depth and quality of content Keynote address from Professor Stone Networking, learning and sharing ideas Learning more about the Witness to Harm project
Least valuable	Few clear themes but critical comments made on content of some individual sessions and presentations
Organisation and structure	Mixed comments on timings; some felt sessions slightly too long; some too short/speakers rushed Networking time valued Comments that attendees would have liked to attend more of the sessions
Venue	Mostly positive including re: use of a community venue, with a few domestic remarks A few comments suggesting holding it outside London
Things to improve	No clear themes but included: Support/encouragement needed for speakers to work within their allotted time Fewer speakers, and/or less choices, a longer event or another event in the year Making more information about background papers/presentations etc accessible Various comments about bring together findings to support insight

Suggested follow up actions	Support involvement of more beyond those directly involved in research Updates on work presented Support for data sharing and intelligence across regulators Sharing of materials Specifically, sharing of impact of WtH project across regulators
Satisfaction: would you attend a future PSA event?	Definitely 27/30 Probably 3/30 Probably not 0/30 Definitely not 0/30
In future: in-person, online, or hybrid?	In person 27/30 Hybrid 3/30 Online 0/30
Suggested future themes	Fairness in FtP AI Behaviour outside the workplace and FtP/public confidence How can we measure the effectiveness of health and care professional regulation Upstream interventions Impact of educational interventions in longer term Disproportionate representation in FtP Regulation and workforce EDI Focus on completed research, impacts, and actions Workplace culture Research funding Socialisation into professional norms Learning from related sectors including criminal justice and regulation of other areas Innovation Lessons from Thirlwall Inquiry

7.2 The cost of the event was £2,521.86.

Venue hire Abbey Centre	£8,064
Expenses (agreed in advance, requested by two speakers)	£581.46
<b>Total outgoing</b>	<b>£8,645.46</b>
Income from ticket sales	£6,123.60
<b>Income less outgoing</b>	<b>£2,521.86</b>

- 7.3 The actual attendance was recorded at 143/158 who had registered, i.e. 91%. Those who attended were from a wide range of stakeholder organisations, including from: regulators, accredited registers, academics and other researchers, patient organisations, professional representative organisations, Government, regulators and regulatory organisations from outside the UK, management consultants, other NHS and health and care organisations.
- 7.4 We were able to provide support to six people to attend who did not have access to funds or who were attending from public representative organisations by waiving the registration fee.
- 7.5 We propose to work with colleagues in the Cross Regulatory Research Group, and through other engagement, to identify a theme and suitable research partnership for an event in October/November 2025, and to commence organisation of the event from Q1 25-26. We propose to hold the event again on one day in a venue supporting community activity through its conference income. We will again charge a modest registration fee in order to keep costs low.

### **Commissions and projects**

#### *General Teaching Council for Scotland (GTCS): review of Fitness to Teach (conduct) process*

- 7.6 We submitted a report of our provisional headline findings to the GTCS on 18 December as per agreement, towards our review of its Fitness to Teach (conduct) process. With the agreement of GTCS one element of the case file audit will take place in January. We will commence writing the full report in January and submit as a draft in the week commencing 10 February. We will submit the final report in the week commencing 10 March.

#### *Sexual misconduct*

- 7.7 We will issue further dates in our sexual misconduct series of discussions with stakeholders early in the New Year.

## **8. Corporate Services**

### **IT**

- 8.1 The annual network penetration testing was performed by a security specialist in October 2024. The areas of review were the office-based PSA internal network, external facing network infrastructure such as firewalls and routers, and also the third party hosted web portals such as the website and HR/Finance system.
- 8.2 The findings were broadly positive with 3 high and 3 low risks being identified throughout the testing. The high risks were limited to only the PSA internal network and have already been remediated by the ICT team. Recommendations to further harden our Microsoft 365 account settings and device security are being explored and actioned where possible.

### **Finance**

- 8.3 The Finance Report is on the agenda.

### People

- 8.4 Jennifer (Jen) Hurst started in the HR and Governance Administrator role on 23 December 2024.
- 8.5 Jemima Grimwade started in Communications Assistant role on 7 January 2024.
- 8.6 We will advertise in January for the two vacant substantive Scrutiny Officer roles and the two vacant substantive Lawyer roles.
- 8.7 Geraldine Campbell and Alison (Ali) Jarvis started in the role of Non-Executive Directors for Northern Ireland and Scotland respectively on 1 January 2024.
- 8.8 The advert for the Non-Executive Director for Wales is now live.

### Governance

- 8.9 The S29 (EDI focused) internal audit has now concluded, and the Stakeholder Engagement internal audit started on 13 January 2024.

### EDI

- 8.10 Work has started on the PSA Culture Assessment. This is an internal project that will help the PSA understand:
  - The extent to which staff feel that EDI, our values and inclusive ways of working are embedded in what we do.
  - What inclusion looks and feels like at the PSA.
  - How EDI is reflected in our values and inclusive working.
  - The different experiences of staff based on the protected characteristics, socio-economic background and intersectionality.

## KPIs up to 30 November 2024

*Our performance against our KPIs is set out below:*

Area of work	Key performance indicators	Performance to date in 2024/25
<b>Section 29 decisions</b>	Number of cases received [compared with same period last year]	1477 [1645]
	Number of Cases considered at a case meeting or statutory deadline meeting [compared with same period last year]	33 [37]
	Appeals lodged [compared with same period last year]	17 [21]
	100% of relevant decisions considered within statutory	

	deadline [compared with last year]	99.9% <sup>11</sup> [100%]
<b>Performance Reviews</b>	100% of 2024 performance reviews published within three months of end of review period	71.42% [5/7] <sup>12</sup>
<b>Public concerns about Regulatory bodies</b>	100% of concerns acknowledged within five working days since 1 April 2024	99% (246/248) <sup>13</sup>
<b>Accredited Registers – current processes</b>	<p>90% of Registers have a full assessment within three years of the previous assessment.</p> <p>90% of decisions about the annual check within one year of the previous assessment.</p> <p>95% of Conditions are reviewed within two months of when they were due.</p> <p>100% of targeted reviews are completed within four months of the date initiated.</p> <p>90% of decisions about new Standard 1 applications are made within four months of receipt.</p> <p>90% of decisions about full accreditation (Standards 2-9) are made within eight months of receipt.</p>	<p>96% (27 out of 28)</p> <p>100% (28 out of 28)</p> <p>82% (87 out of 106)</p> <p>N/A – no targeted reviews initiated since KPI introduced</p> <p>50% (2 out of 4)</p> <p>N/A – no full applications initiated since KPI introduced</p>
<b>Finance</b>	Budgeted income / expenditure variance less than 5%	2.59% [3,349/3,438]
<b>ICT</b>	<p>85% of helpdesk calls to be closed within 1 day</p> <p>System unavailability below 10 hours</p>	<p>100% [241/241]</p> <p>0 hours</p>

<sup>11</sup> One case was sent to us outside of our statutory deadline

<sup>12</sup> The HCPC's KPI was missed by 2 months as further information came to light after the Panel had made its final decision. The decision was taken that the further information needed to be put before the Panel for consideration, which led to late publication of the report. The NMC's KPI was missed as the decision was taken to await the outcomes of the three independent reviews into the regulator's culture, handling of FtP cases and the whistleblowing concerns so that information can be incorporated into the report.

<sup>13</sup> As of 24/12/2024. None missed since the previous Board meeting.

<b>Information security</b>	No incidents reported to the Information Commissioner's Office	0
<b>Information requests (FOI / SAR / EIR)</b>	All (100%) Subject Access Requests dealt with within statutory deadlines  All (100%) Freedom of Information Act requests dealt with within statutory deadlines	100% [1/1]  100% [12/12]
<b>Complaints</b>	100% of complaints acknowledged in five days  Response to all complaints to be completed within 28 days	100% [5/5]  100% [5/5]
<b>Social media</b>	Total number of followers across our social media channels (compared with same period last year in brackets)  Number of new followers across our social media channels (compared with same period last year in brackets)  Number of engagements with our social media posts (compared with same period last year in brackets). <i>Engagements include likes, reactions, comments, replies and shares.</i>	7579 (6318)  879 (514)  2906 (2526)
<b>Website usage</b>	Year-to-date data on website usage from April 2024 to date with same period last year in brackets  <ul style="list-style-type: none"> <li>Total page views across the website</li> <li>Check a Practitioner landing page and practitioner specific pages</li> <li>Accredited Registers home page and related Accredited Registers pages</li> </ul>	   487,937 (434,080)  150,405 (144,332)  84,659 (75,397)