
1 April 2012 to 31 March 2013

Fitness to practise – key information 2013

Executive summary

Welcome to this summary of key information about the Health and Care Professions Council's (HCPC's) work in considering allegations about the fitness to practise of our registrants. This summary includes key statistics relating to our cases and information about how our fitness to practise panels have dealt with the cases before them. This key information document covers the period 1 April 2012 to 31 March 2013.

Our fitness to practise process is designed to protect the public from those professionals on our Register who are not fit to practise. If a professional's fitness to practise is 'impaired', it means that there are concerns about their ability to practise safely and effectively. That may mean that they should not practice at all, or that they should be limited in what they are allowed to do. Our processes do not mean that we will pursue every isolated or minor mistake but if a professional is found to fall below our standards, we will take action to protect the public.

Since 2008–09, the number of registrants on our Register has increased by 67 per cent and the number of allegations we have received has increased by 240 per cent. It is important to note however, that during 2012–13 only 0.52 per cent of registrants had an allegation made against them, and only 0.07 per cent of registrants were subject to a sanction imposed at a final hearing.

Ensuring our processes are aligned with principles of restorative and rehabilitative justice remains core to the HCPC's fitness to practise proceedings. Along with ensuring openness, fairness and transparency in our fitness to practise proceedings, this will remain central to our approach and work in 2013–14.

We continuously look at ways that we can improve and develop our processes and in 2013–14 this will include looking at ways that we can improve the experience that individuals (be it complainant, registrant or witness) have

with the fitness to practise process. This is to ensure fairness and justice to all those that have cause to interact with it. We are also carefully considering the recommendations of the report of the Public Inquiry into failings in care at the Mid Staffordshire NHS Foundation Trust and the action we might take in relation to implementing those recommendations.

In 2013–14 we will also start a pilot to assess the use and value of mediation in our regulatory processes. This forms part of our commitment to look at alternative mechanisms for resolving cases whilst at the same time ensuring the rights of the registrant are balanced with our overriding objective of public protection.

We are also continuing to take stringent steps to improve cost efficiency within our processes given that the fitness to practise operating budget was approximately 45 per cent of the HCPC's total budget. However, cost savings should not and cannot be a bar to ensuring fairness and justice.

I hope you find this document of interest. Further information can be found in our Fitness to practise annual report 2013 which can be found on our website at www.hcpc-uk.org/publications/reports. If you have any feedback or comments please email me at ftpnoncaserelated@hcpc-uk.org

Kelly Johnson
Director of Fitness to Practise

Cases received in 2012–13

Total number of cases received in 2012–13

Year	Number of cases	Total number of registrants	% of registrants subject to complaints
2012–13	1,653	310,942	0.53

Who raised concerns in 2012–13?

Type of complainant	2012–13	% of cases
Article 22(6) / anon	58	3.5
Employer	435	26.3
Other	87	5.3
Other registrant / professional	99	5.9
Professional body	21	1.3
Police	27	1.6
Public	634	38.4
Self referral	292	17.7
Total	1,653	100

There was an increase of 44 per cent in the number of cases the HCPC dealt with in 2012–13 compared to 2011–12.

The number of registrants on the Register has increased by 67 per cent compared to last year. This includes the transfer of social workers in England from the General Social Care Council (GSCC) on Wednesday 1 August 2012.

There has been a slight increase in the total number of registrants who have had a fitness to practise concern raised about them, from 0.42 per cent of the Register in 2011–12 to 0.52 per cent in 2012–13.

In 2012–13, members of the public were the largest complainant group. This year, members of the public made up 38 per cent of the cases received which is an increase from 25 per cent compared to last year.

Where a case does not meet the standard of acceptance for allegations, the case is closed.

In 2012–13, 737 cases were closed without being considered by a panel of the HCPC's Investigating Committee. This is an increase of 46 per cent on 2011–12.

Decisions by Investigating Committee panels

In 2012–13, panels of the Investigating Committee made decisions in 563 cases. The case to answer rate for cases considered by panels of the Investigating Committee is 58 per cent, an increase of seven per cent from last year.

In 2012–13, 256 fitness to practise concerns received from employers were heard by an Investigating Committee Panel (ICP). Of those, 73 per cent received a ‘case to answer’ decision.

In 2012–13, 108 of the cases considered by an ICP were received from members of the public. However, only 18.5 per cent of fitness to practise concerns received from members of the public resulted in a ‘case to answer’ decision at ICP. This is a increase of 1.5 per cent compared to last year.

Case to answer by complainant

Type of complainant	Number of case to answer	Number of no case to answer	Total	% case to answer
Article 22(6) / anon	52	16	68	76.5
Employer	188	68	256	73.4
Other	14	6	20	70
Other registrant	6	16	22	27.3
Police	7	8	15	46.7
Professional body	1	1	2	50
Public	20	88	108	18.5
Self referral	13	19	32	40.6
Total	301	222	523	57.6

Final hearings

Two hundred and twenty eight cases were concluded in 2012–13, involving 226 registrants.

Hearings where allegations were well founded concerned only 0.07 per cent of registrants on the HCPC Register.

Decisions from all public hearings where fitness to practise is considered to be impaired are published on our website at www.hcpc-uk.org. Details of cases that are considered to be not well founded are not published on the HCPC website unless specifically requested by the registrant concerned.

Outcome by type of committee

Committee	<i>Amended</i>	<i>Caution</i>	<i>Conditions of practice</i>	<i>No further action</i>	<i>Not well founded</i>	<i>Removed (incorrect / fraudulent entry)</i>	<i>Struck off</i>	<i>Suspension</i>	<i>Voluntary removal</i>	<i>Total</i>
Conduct and Competence Committee	0	40	14	1	53	0	44	61	12	225
Health Committee	0	1	0	0	1	0	0	0	0	2
Investigating Committee	0	0	0	0	0	1	0	0	0	1
Total	0	41	14	1	54	1	44	61	12	228

This table does not include cases that were adjourned or part heard.

Cases that were referred to the HCPC from the GSCC are not included in this document. For information on these cases refer to Appendix three of the full Fitness to practise annual report 2013.

For further information and details regarding the work of the HCPC's Fitness to Practise Department, please see the full Fitness to practise annual report 2013.

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