



5 December 2018

Consultation on HCPC registration fees

Response from the Institute of Biomedical Science, the professional body that represents biomedical scientists

Consultation questions

Q1 Do you agree that the HCPC should invest in preventing fitness to practise issues arising?

The IBMS supports the proposal for the HCPC to invest in preventing fitness to practice issues, however it is felt that this would best be achieved through a mechanism of partnership working with employers and professional bodies. With the exception of criminal activity most “mistakes” are multi-factorial and a reflection of the system in which registrants operate or where an employer has failed to implement human resources policies. Should such an investment be made it is essential that there is some form of audit to monitor if there is a consequential decrease in fitness to practice hearings. It is a better strategy for a regulator to use remediation as the first approach to address issues with recourse to the hearing process seen as the last resort when intervention and remediation has failed.

Q2 Do you agree that the HCPC should invest in improved services?

Investment in new and improved I.T for the purpose of improving processes and services is an appropriate use of financial resources but this should also identify savings that can be made through greater efficiencies and reduction in some costs, particularly those associated with printing and postage costs. Proposals for new I.T should be accompanied with planned efficiency targets.

Q3 Do you agree that the HCPC should invest in the necessary resources to improve the capacity, quality and timeliness of our FtP performance?

It would be helpful to know what additional resources are envisaged. It is presumed that these are human/professional resources rather than (primarily) technological. The monthly FtP hearings list shows that a significant proportion of those cases concern social workers.

When the social workers are transferred to the new SWE regulator the overall number, and therefore cost, of FtP hearings should reduce and, as a direct consequence, there should be an improvement in timeliness. On the basis of the information contained in the consultation document it is not possible to comment further or to either support or reject this proposal as greater detail on the investment necessary to improve performance is required.

Q4 Do you agree that the renewal fee should increase from £90 to £106 to support the proposals outlined in this consultation document?

Whilst fees have not increased since 2015, this proposal is for a 18% increase, which is significantly greater than inflation (by any of the current measures) and appears to use the reduction of income from the departure of the social workers as its justification.

The comparison with other regulators' fees is not a helpful or relevant indicator as they are not like-for-like models. The HCPC is one of the largest regulators, which regulates the largest number of professions. Furthermore, this is not a competitive market as registrants cannot choose or change regulator based on cost. The medical profession has significantly greater risk to the public and the registrants have greater earning potential. Most of the HCPC registrants are in significantly lower paid posts than the medical profession and the proposed increase would have a disproportionate impact on lower banded staffs that form the greatest proportion of the workforce. It is felt that there needs to be more emphasis on cost reduction rather than income generation.

It is accepted that fees cannot be maintained at the same level indefinitely as there comes a time when an increase is necessary and that increase is likely to be larger than if there had been small but regular increases. In view of this an increase is supported but not at the proposed level.

Q5 Do you agree that the scrutiny fee for applicants from approved programmes should increase in line with the renewal fee from £63 to £74?

It is felt that this is a significant increase although as it is a 'one off' payment it is an increase that can be supported.

Q6 Do you agree that graduate applicants should no longer receive a 50 per cent discount on the cost of registration?

This proposal is not supported by the IBMS. Most new applicants are new graduates, many of whom will have student loans and will be employed on the lowest salary bands. From the biomedical scientist perspective a significant number of these graduates will not have had the practical training required to complete their Registration Portfolio, requiring them to work in a trainee position for up to 2 years before being eligible to apply for registration. Removal of the 50% discount places an additional burden on them in the early years of their career.

Q7 Do you agree that the restoration and readmission fees should also increase in line with the increase in our registration renewal fee?

Again, this represents a substantial increase although as it is a 'one off' payment it is an increase that can be supported. However, the IBMS recommend that the readmission fee is waived for 3 months as 1 month is very short for genuine oversight.

Q8 Do you agree that the international and grandparenting scrutiny fees should increase in line with the increase in our registration renewal fee?

It is felt that this is a significant increase although as it is a 'one off' payment it is an increase that can be supported.

Q9 Do you agree that we should regularly review our fees to avoid infrequent but larger increases in the future?

This proposal is supported.

Q10 Do you agree that we should investigate additional charging models for services including charging for the approval of education programmes?

While supporting the investigation of additional charging models, this does not automatically indicate our support for the introduction of, or increase to, service charges. Subsequent to the outcome of an investigation the resulting conclusions and proposals should be put to consultation.

Degree approval is a highly intensive and resource dependent process, the cost of which is significant and currently met through the subscription income (the only primary source of income). If registrant fees are to be kept at an 'acceptable' level it is reasonable to look at activities associated with regulation and to consider the associated costs. Course approval is not solely restricted to the approval visit, there is also the issue of ongoing process of annual monitoring. However, it should be noted that it is beneficial to future registrants to have as many approved course options available as possible to ensure a choice of course provider for any given regulated profession. While it is possible that the introduction of a charge may detract universities from offering HCPC approved courses, this is unlikely as approval and accreditation are seen as strong attractants for future students.

Q11 Do you agree that a higher fee should be charged for those who request paper renewal forms?

No, currently some registrants still prefer paper and for this decreasing number it is simply another administrative burden and unlikely to be worth the limited financial return. It may be better if registrants are required to 'opt in' for a paper copy with electronic as the

automatic default. This option could be time-limited with paper renewals phased out in a set period of time.

Q12 Do you consider there are any aspects of our proposals that could result in equality and diversity implications for groups or individuals based on one or more of the following protected characteristics, as defined by the Equality Act 2010 and equivalent Northern Irish legislation?

None of which we are aware.

Q13 Do you have any further comments on our proposals?

The IBMS commends the HCPC's intention to reduce and prevent FtP cases as ultimately earlier intervention and action through some form of remediation will be of greater benefit to patient care than acting once behaviour or actions have become a reportable issue with risk attached. It should also help to give the public greater reassurance and a better impression of the registered professions.

Regarding the increase in fees, it is recognised that a regular review of income takes place and increases in fees applied, when necessary, to meet increasing demands upon services. This is justified given that registrant fees are the only source of HCPC income, although the proposed model appears to be a direct consequence of the loss of the social workers as HCPC registrants but does not appear to have factored in the significant reduction of costs associated with FtP investigations and hearing, a significant proportion of which involve social workers.

Notwithstanding this the IBMS has a significant level of discomfort that the unintended, or unforeseen, consequences of the proposed fee increases do not appear to have been modelled and would like to better understand the 'prevention strategy' to justify the proposed level of increase. In view of this the IBMS would favour a risk based approach to any resulting increase in fees rather than the application of an across the board increase. It is the view of the IBMS that this consultation should have provided an options appraisal and justification for the preferred model.

A final, but significant, point the IBMS wishes to make is to question the fairness that registrants in Scotland, Wales and Northern Ireland have to potentially pay the price for the changes in regulation within Social Work England.