

## CONFIDENTIAL

Minutes of the meeting of the UKPHR Board held on Wednesday 23<sup>rd</sup> November 2022 via Teams and 16a McLaren Building, 46 Priory Queensway, Birmingham, B4 7LR at 14.00 hours

<b>Present:</b>	<p>Andrew Jones (AJ) (Chair)  Viv Speller (VS) (Vice Chair)  Jessica Lichtenstein (Chief Executive)  Gill Jones (GJ) (Registrar)  Duncan Vernon (DV)  James Sandy (JS)  Linda Smith (LS)  Marianne Coward (MC)  David Evans (DE)</p> <p>Pavenpreet Johal (PJ) (Secretariat)</p>	<b>Apologies:</b>	<p>Joanna Dowd  Helen King  Ranjit Khutan  Jenny Douglas</p>
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**1. Welcome, apologies for absence and new declarations of interest**

AJ welcomed everyone to the meeting. AJ, DV and LS declared their interest as registrants with regard to item 5. GJ declared her interest as Registrar, for item 5 and JL and PJ declared interest as staff members for item 6.

**2. Minutes of Board meeting held on 22 September 2022**

The minutes of the meeting held on 22 September 2022 were agreed as a true and accurate record.

ACTION	WHO	WHAT	BY WHEN
	JL	Publish 22 September 2022 Board minutes on website	ASAP

**3. Actions and matters arising**

The Board reported that all but two actions were marked as green and actioned. Those that were amber had their dates extended to the new year. The Board was happy to approve that progress has been made.

**4. Governance forward planner**

JL reported that the office has begun operational business planning process for 2023-2024 and the Board has started to plan for their strategic planning conversation. The governance forward planner provided an indicative idea of when items will be presented to the Board and its Committee's. The Board will be able to review this in further detail in the new year when the business plan, which is operational and not strategic is provided.

**5. Value of registration and fees review**

The Board received a final draft report on registrant value, that was drafted by management consultant Keith Burnett and a presentation on possible fee options by JL. The Chair reported that the ARRC has had a good discussion in relation to fees but has not made any decisions. The Committee has made some recommendations in relation to principles r.e. difference in fees increase across categories.

JL presented the report from the consultant which sets the foundations for the subsequent discussion regarding fees. The report was very valuable. JL thanked DE for his support and advice throughout the process and iterations of drafts. The consultant conducted many interviews across the summer including registrants, scheme coordinators and others who have fundamental roles in our registration processes. The final report is about perceptions around the value of registration, which will aid in focusing minds on what registrants expect and how much we can charge them. The contents of the report are not surprising, and it confirms many issues the Board have identified previously.

The report will also assist in strategic planning. It laid out three potential strategic directions for the organisation; (1) keep going as we are, which is recognised as being risky in terms of the organisation's future and ability to continue to discharge our responsibilities; (2) some sort of growth investment and planning and raising fees or (3) ambitious approach to expand registration categories. The consultant recommended and both JL and the ARRC agreed with exploring option 2. The modelling provided to the Board on possible fee options were based on this approach, linking into what we want to develop and expansion of programmes and what we need to fund them.

JL reported that there is interest in the report as some interviewees have contacted the consultant seeking an update on the work. JL also reported the highlight findings at the practitioner conference, and it was well received. UKPHR have committed to publishing the report and JL sought advice on how the Board wish to package and publish the report. JL suggested that the report is published as part of a communications package with information around fees and a consultation. It will be useful in contextualising why we are doing what we are doing, acknowledging that responses to a consultation will result in negative responses.

VS commented that it was a very detailed report and agreed with the view that if the organisation wanted to prioritise exploring and expanding into other categories of registration, this will require investment and resources. DE added that he and JL discussed in detail the section of the report that referred to entry level registration as it was felt that this was the slightly weaker aspect of the report in comparing entry level qualification to professions like nursing and allied health professionals where there is a strong practice element in preparation for initial registration. The report suggests an MPH as criteria for entry level registration, but this would not be equivalent and would need considerable careful thought and exploration that the consultant was able to do in this report. DV reported the ARRC's view of how helpful the report was in framing the strategic choice.

JL presented her slides on possible fee options and modelling, which was conducted with the consultant's support. It was a challenging exercise as there are an infinite number of iterations that could be laid out. The ARRC was helpful in focusing on what our registrants could accept, the reputational risks and most importantly what we could afford. The slides set out potential expenses over the next couple of years to what we might be charging. It was noted that the budget for next year has not been agreed, so they are estimates according to the business planning the team is undertaking. Importantly, the books need to be relatively balanced by the end and from the modelling they do appear to do so.

Summarising potential additional expenses for 23/24, JL reported that it is advised to provide the Registrar a stipend and a contract as currently the role is a key decision maker and is working without a contract on a volunteer basis. This is a significant risk, and many other regulators have similar roles in house done by paid staff. Considering succession planning, reputational risk, and equivalence of the Registrar role in statutory regulators, a stipend of £6k was recommended by the consultant. This is inline with the fee associated with similar roles within the university system. The expenses also covered potential salaries increase, in line with the rest of the public sector and the modelling included generous percentage increases to cover all basis, although a decision has not yet been made on this. Expenses also factored in the costs associated with potentially extending the two fixed term contracts. Potential additional expenses for 24/25 also extended to a Registrar stipend, salary increases and potentially making the part-time practitioner registration coordinator role permanent. The Board also acknowledged unknown increase in expenses

relating to the cost-of-living crisis, such as energy costs. The Board were comfortable with potential additional expenses laid out and acknowledged that this was not in any means a commitment to the expenditure.

The Board was also presented some assumptions around possible income, taking into past trends and anticipated growth of the Register. The Board also reviewed UKPHR current fees in comparison to other healthcare regulators such as GMC, GDC, NMC and HCPC. It was noted that for specialist registration, we charge less than GMC and GDC and it was agreed that we would want to maintain this. The Board acknowledged that the GMC and GDC are currently strategising about their own fees. With regard to specialist portfolio assessment fees, we are charging considerably lower (three times less) than the GMC's CESR route, which is the closest comparison. Our specialist portfolio fees do not currently cover the costs for administering the assessment process. With an approximate 50% success rate, it was also considered whether the pre-application fee for the specialist portfolio is too low and therefore people are submitting without due thought. Whilst appeals are not frequent, previous appeals have not covered costs. The cost were nearly four times the cost of the current appeal fee. Similarly, the GMC charges considerably higher, (three to four times) than us for appeals. In comparing practitioner fees, UKPHR seem to be set about right, with our fees still lower than the NMC. It was noted that a fee increase which set us substantially above the NMC would not be well received. The Board acknowledged this disparity in fees across categories of registration.

It was agreed to increase the Specialist Registration by Portfolio pre-application fee from £105 to £200 and the portfolio assessment fee from £525 to £690. The entire process for application would be £910, which is still lower than GMC's fee of £1727. No fees are charged if a portfolio is deemed un-assessable (the portfolio and fee is returned to the applicant to submit again), however there is a considerable amount of work taken in order to reach this decision, including possible moderation and therefore it was recommended to charge £150 (and refund the remaining fee) if an un-assessable decision is reached at the portfolio stage. The same amount is recommended to be charged if an applicant voluntarily withdraws their portfolio during assessment. It was noted that the GMC charges for returned applications, and this would be approximately 10% of what they charge. No changes to restoration fees were recommended. Appeal fees were recommended to be raised from £525 to £900, which would be refunded if UKPHR were to lose the appeal.

GJ suggested that the work UKPHR is undertaking to support applicants should be communicated in conjunction with recommending a rise in SRbPA fees. JL added that there has been work on launching new podcasts which have been well received and JL and specialist moderators have been presenting at webinars. VS declared an interest in supporting applicants and added that UKPHR should be clear in positioning itself as a regulator and quality assuring external support provided but not necessarily feeling that it is our duty to provide that support. In discussing the rationale behind the increase, it was noted that the pre-application assessment fee does not cover the costs, taking into consider the quality of applications and moderator involvement, which is chargeable. The increased portfolio fee does not cover costs for assessment, which currently include chargeable moderator involvement. It was suggested that the portfolio assessment fee could be reviewed again last year after assessment more portfolios to ensure we are covering costs for 24/25. DE commented that if UKPHR is confident that there is good guidance on the website, the onus is on applicants to refer and abide by it. Current costs are not being covered and increases of this size are justifiable. In regard to applying the fee increases for the SRbPA pre-application and portfolio assessment, the Board agreed to honour the current portfolio fees for all those who have received permission to submit a portfolio before the fee increase is implemented for the 23/24 year on 1<sup>st</sup> April 2023.

Moving onto proposals for renewal fees for 23/24 and 24/25, JL modelled potential income generation from assumptions and projections of "active" registrants in 23/24 and 24/25. Four options were presented, (1) 6% increase each year for all categories of registration; (2) 8% increase each year for all categories of registration; (3) 7% increase for practitioners and specialty registrars and 9% increase specialists in 23/24 and then 5% increase for practitioners and specialty registrars and 7% for specialists in 24/25 and (4) 8% increase in practitioners and

specialty registrars and 11% for specialists in both years. JL had sought advice that increasing fees in phases is recommended and with the absence of a confirmed long-term strategic plan and unpredictable inflation rises, a 2-year phased increase was reasonable. JL recommended exploring option 3 further as it was also assumed that specialists may be able to absorb rises greater than practitioners. Particularly as most specialists have to be registered and practitioner registration remains largely voluntary. It was also recommended to keep the total rises below the rate of inflation, which is helpful in communicating rises. The Chair also noted that it was important for specialist fee to be below GMC and GDC and £400 was viewed as a symbolic figure which ought not to be breached. With option three, the books appear to balance after the end of the two years taking into consideration potential additional expenditure. There would be an approximate £14k loss in 23/24 and then a gain of £14k in 24/25. Projected reserves by the end of the current financial year are expected at approximately £250k which is approximately 7 months operating costs. If option 3 was adopted, the reserves would reduce in 23/24 to over 6 months operating costs and return to 7 months in 24/25.

DV reported that the ARRC also felt comfortable with the principle of graded increases across registration with specialists increase greater. Specialists have greater job security and practitioners is where UKPHR wants to increase the market rather than the price of the product so a different strategy is required.

DE reiterated the need to benchmark practitioner renewal fee below that of the NMC as registration is statutory for Nurses. He also noted that specialist fees are considerably lower than those at other regulators however, specialists from any background can apply for the same jobs but in practice there is a difference in that LA jobs are largely held by those from a non-medical background and those working at UKHSA are from medical backgrounds, resulting in income differences between the organisations. These are factors that need to be considered and the Board felt were recognised in the increase of specialist fees by keeping them lower than those of the GMC. JS appreciated the need to keep aware of potential fee increases at other healthcare regulators and explore learning in their previous fee consultations. VS added that communications should be clear to stipulate that an increase in practitioner fees is helping to support the post of practitioner registration coordinator which enables the organisation to do things that are beneficial for registrants such as the conference and streamlining the process for registration. It is also important to listen to what registrants say they are lacking from us and communicate what the additional income will fund to plug these gaps. For example, a new benefit for specialists which is not directly related to fees, but many will see as an asset is the move to calling everyone public health specialists. Additionally, VS raised the potential of expanding the scope of registration to retired registrants which would require funding but can be perceived as a benefit to registrants. It was also important that communications continued to highlight that registration fees could have tax relief. The Board agreed to consult on option 3.

JL commented that the consultant is continued to be engaged and will be tasked to draft communications. JL would appreciate continued support from DE in reviewing these and may require Chair's action to approve the content.

The Chair thanked JL for her proposals and clear explanation in the figures presented.

ACTION	WHO	WHAT	BY WHEN
	JL	Draft consultation and communications package for fee increase	Next Board meeting on 9 Feb 2023

[PJ left the meeting for the following item]

**6. Staff remuneration during cost of living crisis:**

JL reported that the ARRC have explored whether UKPHR can provide staff with additional support either financially or via other means. A flexible working policy has already been implemented which has been received well. There has been suggestion to consider financial support as the previously agreed salary rises (3.5%, which was what the NHS pay rise was expected, plus 0.5% goodwill gesture), is now below the actual NHS pay rise which was finalised

at 4%. The ARRC will take this into consideration for 23/24 pay rise discussions which will commence in February. However, in the meantime, JL costed potential options of bonuses or trivial benefits to say thank you for the staff being supportive and maintain high quality of work throughout the instability of the last couple of years; pandemic and three chief executives. It was acknowledged that staff have not asked for this and nor have there been any reports of financial hardship, however it would not necessarily be something they would have raised. The options presented to the Board were (1) trivial benefit of £200 non-taxable vouchers in time for Christmas, total £1200 cost; (2) if the Board wanted to be generous, provide bonuses which would be taxable at the normal rates which would cost a total of £7400 if we offered a £1000 bonus each or (3) do nothing. It was reported that these were not budgeted costs, but option 2 of trivial benefits would be the most easily absorbed. The Board agreed to adopt option 2 and also support staff by directing them to additional support if they are in financial difficulty. Board directors agreed to send any information they may have received from their own employers to JL to package and send to staff.

<b>ACTION</b>	<b>WHO</b>	<b>WHAT</b>	<b>BY WHEN</b>
	JL	Arrange for trivial benefits to be delivered to all staff	Before office closes for Christmas and New Year break

<b>ACTION</b>	<b>WHO</b>	<b>WHAT</b>	<b>BY WHEN</b>
	Board directors	Send JL any financial support information they have received from their employer	ASAP

#### 7. Corporate strategy – timeline and planning

JL reported that the organisation did have a strategy in place that expired in 2021, but was side-lined when the pandemic hit. The Board received a report on formulating a new corporate strategy and what this might include. A strategic planning exercise would be conducted to create a strategic plan. This would be distinct to the business plan that the team are drafting, which is operational and will be brought to the Board at their next meeting. The report outlined that the next steps involve the Board strategy day in March, which is proposed to be in-person, alongside the in-person AGM each year.

<b>ACTION</b>	<b>WHO</b>	<b>WHAT</b>	<b>BY WHEN</b>
	JL	Add operational business plan to next Board agenda	Next Board meeting on 9 Feb 2023

JL also reported that the improvement plan initiated by the previous chief executive is now coming to a close and a final report will be on the agenda for the next Board meeting. The strategic plan will then replace the improvement plan and the operational business plan will sit below this.

It was noted that the FPH and RSPH are working on new strategic plans and there is likely to be clear alignment. Ahead of the strategy day, a package of information on partner organisations' strategies, key issues, and guidance on strategic planning would be useful. JL suggested convening a strategy working party to support JL and the team in developing the strategic plan. JS and LS volunteered to be part of the group.

The Board agreed the timeline for developing a new strategic plan and agreed to volunteer themselves to the strategy working party if interested.

<b>ACTION</b>	<b>WHO</b>	<b>WHAT</b>	<b>BY WHEN</b>
	Board directors	Express interest in joining a strategy working party	7 Dec 2022

**8. Committee recommendations for Board decision:**

**a. Extension of temporary contracts (from ARRC)**

JL reported that there are two temporary staff members on 12 month fixed term contracts which are coming to their expiry dates. A decision needs to be made on the future of these positions. The original intention for the Registration Services Officer was that a significant proportion of their job would be automated by the new IT system. Whilst that might be the case in some respects, we won't know until there is experience and evaluation of the new system, which will go live in the same month and the contract ends. It was also acknowledged that a good proportion of that job is tasks that are not associated with registration online and therefore an evaluation needs to be carried out on the role itself. There would be significant risk to allow the contract to expire whilst the new IT system is implemented. Her additional admin support is also essential for the chief executive and the new initiatives and changes coming through. It may result in considering a permanent role but in a different capacity.

The Practitioner Registration Coordinator role was created as there was a clear need for capacity and resources if the organisation wanted to grow practitioner registration. With apprentice registrants coming soon, this area will continue to expand, and it would risk progress made to date if the contract is expired in February. There is a clear need for this role and it has been included in financial modelling for the future. The value has been significant.

Whilst a detailed proposal is intended to be considered by the Board at a later date, the ARRC recommended extending both contracts by 12 months in order to conduct these evaluations with the experience of the IT changes and changes in finances.

The Board acknowledged that the roles were positively recruited to with individuals who wish to continue in their roles on a part-time basis. The Board agreed to extend both fixed term contracts for a further 12 months.

ACTION	WHO	WHAT	BY WHEN
	JL	Extend fixed term contracts for Registration Support Officer and Practitioner Registration Coordinator for 12 months	ASAP

**b. Parental leave support policy (from RPG)**

JL reported that this has been on the policy to-do list for some time. The final draft policy had been considered by RPG who are recommending that the Board adopt for all registrants. JL thanked PJ for her research and drafting the policy and to GJ for her support. The introduction of such policy was a recommendation from the EDI group from 2021. The Board agreed to adopt the policy.

ACTION	WHO	WHAT	BY WHEN
	JL & PJ	Publish and implement parental leave support policy	ASAP

**c. Practitioner Verifier changes (from RPG)**

JL reported that the Board had previously discussed reconsidering practitioner verifier changes and the Board was generally supportive of expanding the verifier pool to include those who were not specialists. Since then there have been numerous discussions including disparate opinions which resulted in further work to ensure that the views of everyone concerned were recognised. It has taken a great deal of time and work to reach a consensus.

The Board recognised the reputational risk of continuing with bottlenecks in the practitioner registration process if no change was made. Consultants who are currently verifiers are pressed for time and therefore verification panels cannot always be scheduled to consider practitioners for registration in a timely way.



The report outlined opening up the role to UKPHR registered practitioners who meet the verifier criteria. The criteria itself needs to be updated to be clear on the QA and other generic skills required and an evaluation of the change needs to be developed.

The Chair agreed to attend the next RPG meeting to deliver the Board's view on this matter and thank them for their work, which the Board unanimously appreciated.

The Board agreed to expand the verifier role to registered UKPHR practitioners who meet the criteria (which is still to be updated) and implement and evaluation. The Board also agreed to reduce the quoracy of 3 verifiers at a verification panel to 2.

ACTION	WHO	WHAT	BY WHEN
	PJ	Invite AJ to next RPG meeting	ASAP

ACTION	WHO	WHAT	BY WHEN
	JL	Implement changes to verifier quoracy and verifier criteria	ASAP

#### 9. Chief Executive's report (including Chair decisions and meetings)

The Board received the Chief Executive's report. In addition to the content of the report, JL added that the UK Public Health Network which is run by the ADPH is being disbanded as they have lost their funding. Each organisation on the group has agreed to take on a component of the network to continue with and UKPHR have offered to take on the public health mentoring programme.

JL also thanked DE for his support in providing guidance to JL and the practitioner registration coordinator who are beginning to gain further knowledge and understanding of the apprenticeship programme. UKPHR are now part of the End Point Assessment (EPO) Network and are working with external stakeholders on a training programme for EPO assessors to ensure that they are aligned as much as possible to assessors for the practitioner portfolio. There is also work on developing FAQs on the new route.

It was also noted that there have been changes in Northern Ireland with a new DPH and the Chair and JL are committed to continue engaging in four nation meetings and are continuing to build their networks in all four nations.

#### 10. Registration report

The Board received the registration statistics, minutes of the Registration Approvals Committee and Registration Policy Group.

#### 11. Audit, Risk and Remuneration Committee report

In addition to items discussed previously, DV added that the ARRC have continued to review the Risk Register in relation to future workforce challenges, including reduction in number of specialists and therefore what UKPHR's exposure to that would incur. Initial conversations on the understanding the age profile of our registrants and how that impacts us have been had. The nature of a voluntary Register and its role in the Risk Register has also been considered by the ARRC.

#### 12. Education and Training Standards Committee report

HK provided a written report in her absence. The Chair reported that the Committee was happy to approve the changes proposed in the report brought to the committee about updating the competencies for the Specialist Registration by Portfolio Assessment route in line with the Faculty of Public Health's curriculum review. The Committee agreed a transition period of 18 months for the changes to the portfolio competencies to take effect. The proposed wording for the two areas requiring adjustment - on safeguarding of children and adults and duty of candour was approved

and noted by the Committee. The new set of competencies would be referred to as the 2022 competencies.

It was also reported that a small task and finish group has been established with the aim of making significant progress with the ED&I action plan and develop a data strategy. Progress reports will be brought to future Board meetings. The task and finish group is holding its first meeting on the 5th December.

The Board acknowledged the report and work.

**13. Any other business**

There was no other business raised.

**14. Date, time and venue of next meeting**

Wednesday 9th February 2023 at 2pm

**Action points from this meeting**

ACTIONS	WHO	WHAT	BY WHEN
	JL	Publish 22 September 2022 Board minutes on website	ASAP
	JL	Draft consultation and communications package for fee increase	Next Board meeting on 9 Feb 2023
	JL	Arrange for trivial benefits to be delivered to all staff	Before office closes for Christmas and New Year break
	Board directors	Send JL any financial support information they have received from their employer	ASAP
	JL	Add operational business plan to next Board agenda	Next Board meeting on 9 Feb 2023
	Board directors	Volunteer to sit on strategy working party	7 Dec 2022
	JL	Extend fixed term contracts for Registration Support Officer and Practitioner Registration Coordinator for 12 months	ASAP
	JL & PJ	Publish and implement parental leave support policy	ASAP
	PJ	Invite AJ to next RPG meeting	ASAP
JL & DS	Implement changes to verifier quoracy and verifier criteria	ASAP	

The Chair closed the meeting at 16.00 hours.