

Friday 13<sup>th</sup> December 2019, 10.00 am – 12.30 pm



Social Work 00 England

#### **Social Work England Board Meeting**

# Friday 13<sup>th</sup> December 2019, 10.00 am – 12.30 pm

#### The Don, Social Work England, 1 North Bank, Blonk Street, Sheffield, S3 8JY

**Board Members:** Lord Patel of Bradford Chair

Colum Conway Chief Executive, Social Work England

Andrew McCulloch Non-Executive Director

Ann Harris Non-Executive Director

Adnan Bashir Executive Director Finance, Commercial and

Governance, Social Work England

Baroness Tyler of Enfield Non-Executive Director

Dr Helen Phillips Non-Executive Director

Jonathan Gorvin Non-Executive Director

Mark Lam Non-Executive Director

Social Work England staff in attendance (for items):

Alexandra Hayward

MI Analyst (item 2.4)

Alison Edbury

Governance Manager

Claudia Thompson

Administrative Assistant to Executive Directors

(Minute-taker)

Greg Lawton

Head of Data Protection and Information

Governance (item 3.5)

Jonathan Dillon

Executive Director, Fitness to Practise

Neil Smith-McOnie

Insight and Analytics Manager (item 2.4)

Rachel McAssey

Head of Registration (item 3.2)

Sarah Blackmore

Executive Director, Strategy, Policy and

Engagement

**Tracy Watterson** 

Assistant Director, People



**Apologies:** Greg Ross-Sampson Assistant Director, Corporate

Philip Hallam Executive Director, Registration and Quality

Assurance

**Observers (Guests):** Claire Armstrong Department for Health and Social Care

Tom Sutton Department for Education

Holly Lindley Department for Education

Alexandra Taylor Professional Standards Authority

Charlotte Carter Community Care

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# **Social Work England Board Meeting**

# Friday 13<sup>th</sup> December 2019, 10.00 am – 12.30 pm

# The Don, Social Work England, 1 North Bank, Blonk Street, Sheffield, S3 8JY AGENDA

Item	Time	Topic	Paper	Board Action	Presented By
1.	10.00 am	1.1 Welcome	Verbal	To note	Lord Patel
		1.2 Declaration of interests	Paper	To note	Lord Patel
		1.3 Minutes of the previous meeting	Paper	For approval	Lord Patel
		1.4 Action log	Paper	To note	Lord Patel
2.	10.10 am	Decisions and Discussions			
		2.1 Audit and Risk Assurance Committee Meeting update	Verbal	To note	Ann Harris
		2.2 Risk Strategy Meeting update	Verbal	To discuss	Adnan Bashir
		2.3 People Engagement Survey update	Presentation	To discuss	Tracy Watterson/Neil Smith-McOnie and Alexandra Hayward
3.	10.30 am	Programme Implementation			
		3.1 Go-live update	Verbal	To discuss	Colum Conway
		3.2 Registration and Quality Assurance, Education Quality Assurance	Presentation	To discuss	Rachel McAssey
		3.3 Fitness to Practise	Verbal	To discuss	Jonathan Dillon
		3.4 Communications	Verbal	To discuss	Sarah Blackmore
		3.5 Reporting arrangements for the Data Protection Officer	Presentation	To note	Greg Lawton



		3.6 Corporate Strategy Update	Verbal	To note	Lord Patel
4.	11.40 am	Management Reports  4.1 Annual budget 2020/21 (draft)	Paper	To discuss	Adnan Bashir
5.	12.00 noon	Board Governance 5.1 Framework Document (latest draft version)	Paper	To agree	Adnan Bashir
		5.2 Corporate Feedback and Complaints policy	Paper	To note	Adnan Bashir
		5.3 Board meeting dates 2019/20 and 2020/21	Paper	To note	Alison Edbury
6.	12.25 pm	Any Other Business			Lord Patel



Meeting date	Friday 13 <sup>th</sup> December 2019
Agenda item	1.2 Declaration of Interests
Executive Director/Lead	Adnan Bashir, Executive Director, Finance
Author	Alison Edbury, Governance Manager

Author	Alison Edbury, Governance Manager		
Questions this pape	er addresses		
Are all non-executive line with good praction	ves and executive's business and pecuniary interests fully disclosed in tice governance?		
Summary			
Board members int	erests are declared in the document.		
Supporting papers			
Board engagement	/ input		
☑ Information [	☐ Discussion ☐ Decision		
Explanation of requ	uirement		
Key implications or	risks for any of the following (provide a brief explanation):		
Perspective	Summary		
Financial	X		
Innovation and			
learning			
Stakeholders			
Stakeholders  Business processes	X		



# **Social Work England Board – Register of Interests**

Name of Member: Professor Lord Patel of Bradford OBE

Appointment and length of term: 19 March 2018 – 19 March 2021

Organisation in which interest exists	Nature of interest
England & Wales Cricket Board (the ECB)	Senior Independent Board Director
British Board of Film Classification	Vice President
Royal Society for Public Health	President
Indian Business Group	Chairman
Breaking Barriers Innovations	Chairman
The Global Policy Institute at Queen Mary London University	Senior Advisor

Name of Member: Ann Harris OBE

Appointment and length of term: 22 July 2019 - 22 July 2020

Organisation in which interest exists	Nature of interest
Money and Pensions Service	Non-executive Director
Citizens Advice, Dunstable	Chair of Trustee board
St Pauls Management Lets	Chair of Management company board

Name of Member: Dr Helen Phillips

Appointment and length of term: 10 August 2018 – 10 August 2021

Organisation in which interest exists	Nature of interest
Chesterfield Royal Hospital NHS Foundation Trust	Board Chair
Legal Services	Board Chair
Mount St Mary's College, Spinkhill	Chair of Governors
Sheffield Business School	Advisory Board Member



Name of Member: Baroness Tyler of Enfield

Appointment and length of term: 10 August 2018 – 10 August 2021

Organisation in which interest exists	Nature of interest
Making Every Adult Matter (MEAM)	Chair
British Board of Film Classification	Member, Advisory Panel of Child's Viewing
National Children's Bureau (NCB)	President
Relate	Vice President
Step up to Serve Campaign	Member of Advisory Council
Centrepoint	Ambassador
All Party Parliamentary Group on Social Mobility	Co-Chair
All Party Parliamentary Group on Mental Health	Vice Chair
All Party Parliamentary Group on Children	Vice Chair
All Party Parliamentary Group on Wellbeing Economics	Vice Chair
London Borough of Enfield and the Smith Institute	Chair of Enfield Poverty and Inequality Commission

Name of Member: Jonathan Gorvin

Appointment and length of term: 10 August 2018 - 10 August 2021

Organisation in which interest exists	Nature of interest
Royal Institution of Chartered Surveyors	Head of Regulatory Policy and Development
Science Council	Trustee

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Name of Member: Dr Andrew McCulloch

Appointment and length of term: 10 August 2018 - 10 August 2021

Organisation in which interest exists	Nature of interest
GMC Services International	Chair
Healthwatch England	Board Member
McCulloch and Muijen Associates	Principal
Family Action	Vice Patron
Healthy Minds: Calderdale Wellbeing	Patron

Name of Member: Mark Lam

Appointment and length of term: 11 January 2019 – 11 January 2022

Organisation in which interest exists	Nature of interest
Barnet, Enfield and Haringey Mental Health NHS Trust	Chair
Openreach Limited, owned by BT Group plc	Former Chief Technology and Information Officer
Private business consultant	

Name of Member: Colum Conway, CEO

Date of Appointment: 1st September 2018

Organisation in which interest exists	Nature of interest
Nil Return	

Name of Member: Adnan Bashir, ED Finance, Commercial and Governance

Date of Appointment: 1st April 2019

Organisation in which interest exists	Nature of interest
Bramhope Associates Limited	Company Director

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## **Social Work England Board Meeting**

Meeting date	Friday 13 <sup>th</sup> December 2019
Agenda item	1.3 Minutes of the previous meeting
Executive Director/Lead	Lord Patel of Bradford
Author	Alison Edbury, Governance Manager

#### **Questions this paper addresses**

Do the minutes present a fair and accurate record of the Board meeting held on 25<sup>th</sup> October?

#### **Summary**

The minutes from the previous meeting held on Friday 25<sup>th</sup> October 2019

#### **Supporting papers**

#### **Board engagement / input**

☑ Information ☑ Discussion ☑ Decision

#### **Explanation of requirement**

The Board is asked to review and approve the minutes as a fair an accurate record of the meeting.

Key implications or risks for any of the following (provide a brief explanation):	
Summary	
X	



#### **Social Work England Board Meeting Minutes**

#### Friday 25<sup>th</sup> October 10:00 – 11:00

Board Attendees: Lord Kamlesh Patel Colum Conway (CC) Dr Andrew

(Chair LP)

nathan Gorvin (JG) Mark Lam (ML)

(DfE)

McCulloch (AMc)

Baroness Claire Tyler Jonathan Gorvin (JG)

of Enfield (CT)

Adnan Bashir (AB)

**Board Apologies:** Ann Harris Dr Helen Phillips

In Attendance: Jonathan Dillon (JD) Nadine Pemberton Philip Hallam (PH)

(NP)

Sarah Blackmore (SB) Tracy Watterson

(TW)

**Observers**: Alan Clamp (PSA) Claire Armstrong, Jonathan Bacon

(DHSC)

Michelle Mann (DfE) Jodie Moore (Supply

Care Solutions)

Minutes: Alison Edbury (AE)

#### 1. Welcome

1.1 The Chair, Lord Patel (LP) welcomed board members and guests to the meeting. Apologies were received from Ann Harris and Helen Phillips.

#### 2. Declaration of Interests

- 2.1 The register of interests of the Board was presented. Claire Tyler (CT) and Andrew McCulloch (AMc) declared a new interest to be added to the register.
- 2.2 There were no conflicts of interest recorded.

**Action: Alison Edbury** 

#### 3. Minutes of previous meeting 25th October 2019

3.1 Minutes of the previous meeting were reviewed and approved as an accurate record of the meeting.



#### 4. Matters Arising

- 4.1 The status and progress of items on the Action Log was discussed and developments noted as follows.
- 4.2 Jonathan Dillon (JD) stated he can supply board members with a Flow Chart on the FtP system at the next meeting.

#### **Action: Jonathan Dillon**

4.3 It was noted that a previous conversation regarding the board shadowing education teams and Regional Engagement Leads needed to be actioned.

#### Action: Sarah Blackmore and Matthew Byng Policy Manager (Education and Training)

4.4 Mark Lam (ML) referred to Business Plan Quarter 2 Update item on the Agenda and recommended that it would be beneficial for Board members to see a demo of the digital capability of the CRM system. He suggested that this should not interfere with all the ongoing preparations for go live, but a date should be scheduled in January 2020 for the Board to see the demo.

#### Action: Greg Ross-Sampson and David Bates

#### 5. Framework Document

- 5.1 Adnan Bashir (AB) noted he had received useful comments from board members following his email circulation of the draft Framework Document on 17th October 2019. The board's comments will be fed back to the DfE for the Sponsor Team and it is expected the final draft will be available for approval by the Board by 6<sup>th</sup> January 2020.
- 5.2 The board's discussion about the Framework Document raised these further points:
  - clarification needed regarding what the term 'consultation with the Secretary of State' meant in the context of the board seeking to appoint a new Chief Executive;
  - in general, Framework Documents should be developed to reflect the two-way relationship between the Sponsor and Non-departmental public body;
  - the 'Ways of working' section has been deleted and this is unfortunate since the working culture and communications with the Sponsor team is very important;
  - using different descriptors for social workers that reference children's or adult's is
    not helpful in the context of Social Work England being established as the regulator
    for the whole social work profession and regulation will be applied regardless of
    specialism and or nature of their work environment.
- 5.3 AB stated that he will add these further comments into the feedback to the Department on the Framework Document.

Action: Adnan Bashir



5.4 LP thanked AB for the work that has been completed on re-drafting the Framework Document.

#### 6. Our approach to setting risk appetite

6.1 AB introduced the item, noting that risk is a fundamental consideration for Social Work England. The organisation has a Risk Framework and a Risk Strategy in place, work on the Risk Appetite is to be completed. The paper explains our scenario-based approach to risk that enables collective risk areas to be grouped together across a multitude of scenarios.

6.2 AB noted that there is a risk strategy workshop planned to follow the ARC meeting on 5 November 2019 involving members of ARC, the Chairperson and staff members. This session will be used to score the appetite for risk for a variety of scenarios and will use the Good Governance Institute risk appetite matrix. The outcomes of the workshop will be brought back to the Board.

#### Action: Adnan Bashir

- 6.3 The board welcomed the focus on risk at this stage, noting:
  - that the work on the risk framework looks good and now the 3-year strategy is developing, the approach to risk needs to take account of perpetual risks concerning staff, IT, reputation and the regulatory environment;
  - the board also needs to look at its own risk area, risks that might manifest in delivering the strategy;
  - the board should focus on around five strategic risks that it should own and regularly review;
  - that we have more control over managing the organisational lifecycle than the report diagram illustrates.
- 6.4 AB commented that establishing the risk appetite provides us with a starting point from which we can move on to strategy and delivery with constant review.
- 6.5 The Chair commented that although Ann Harris (AH), Chairperson of Audit and Risk Committee was not present at the meeting, he has discussed risk appetite with her and noted the considerable contribution Ann has already made to this area of work in the organisation.

#### 7. Corporate risk report

7.1 AB stated that he has worked with AH in developing the corporate risk report, looking at financial sustainability, deliverability of FtP and regulatory systems. He introduced the board to the targeted ratings to be achieved, noting that key areas of risk had been captured at a high level in the report, but may require splitting out, depending on the outcomes from the risk strategy session.



- 7.2 Board members fed back on points as follows:
  - they would have some concerns if GDPR ended up as the highest risk;
  - the need for assurance that there has been a read across all the related documents concerning risks associated with poor data and IT;
  - the different needs concerning risk before go-live and beyond go live requires the board to have key assurances regarding information governance and compliance;
  - following 2 December, everything should be future proofed in terms of how data is structured, captured and managed and the board should be able to see this.
- 7.3 In response, AB commented the recent innovations concerning data and IT, systems configuration and how we manage data going forward; this is also linked to GDPR.
- 7.4 CC commented that a good deal of progress had been made in the area of information governance and a presentation will be prepared for the Board post go live which will address any future proofing going forward.
- 7.5 The board observed that there has been an extra focus on IT delivery and data transfer, and they could see how this has stepped up a pace. They went on to discuss risks concerning go-live and asked about how the organisation would cope with a data failure or system failure on go-live date.
- 7.6 CC noted that the mitigation process involves data being in our production environment a week before go-live. System testing continues to be a key part of the work of the teams in registration and FtP as we work towards go live. PH affirmed that we are trying to be ahead of the issue so that we are in ownership of all data before go-live.
- 7.7 The board noted that the team have done as much as can be done before go-live but that we need to have a team focused offline on sorting issues before go-live. The board requested an update before go-live.

**Action: Colum Conway** 

#### 8. IPA Review Report

- 8.1 The Chair thanked Andrew McCulloch for contributing to the recent IPA review.
- 8.2 CC fed back that the headline outcome on our Gateway 4 review, the final review before go-live is that the IPA have awarded us an Amber Green rating.
- 8.3 CC highlighted what came through in the review findings:
  - Quality of staff, particularly the Project Management team, and, as was previously noted, their work on the CRM system, the work delivered by the data management team, and the 'Journey2July' project plan.
  - The positive culture of the organisation. The review team were impressed how all staff were working together and they put forward recommendations about how to sustain this positive culture beyond go live, into business as usual.

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- Ten recommendations overall, but just two to address immediately with the other eight recommendations relating to beyond go live, during Jan- Mar 2020, for example, embedding in practices, working on the Business Plan for next year.
- 8.4 CC observed that the recommendations are useful for planning.
- 8.5 The Chair suggested that a session spent on understanding what have we learnt in last 15 months would be valuable.
- 8.6 CC agreed and thought that it would be useful to have this process facilitated for the staff and board.
- 8.7 The board thanked all Executive Directors and all staff members since the IPA Review outcome is a huge achievement for the organisation and it is critically important that we have had constructive feedback.
- 8.8 LP added that the Regional Engagement Leads had been mentioned a lot in the review and we need to recognise the huge amount of work they are delivering. He noted that the Regional Engagement Leads resource needs to be protected.

#### 9. Staff Engagement Survey

- 9.1 LP referred to the staff survey item as a point of information, noting that the findings are key to helping the board understand staff resources and impacts.
- 9.2 The board acknowledged that the staff survey provides a key piece of organisational data and requested the opportunity to engage with its findings and impact at the next board meeting.

#### **Action: Tracy Watterson**

#### 10. Business Plan Quarter 2 update

- 10.1 CC reported that all objectives are on target and that he is confident with progress against the Business Plan.
- 10.2 LP acknowledged the very good work in progress.

#### 11. Management Accounts Quarter 2 2019/20

- 11.1 AB presented the Quarter 2 Management Accounts. He noted that although there is a positive variance against budget, he expects there to be a peak in expenditure Nov/ Dec relating to Corporate Services since this is where main amount of surplus is generated.
- 11.2 AB highlighted points to note regarding staffing and recruitment, communicating that all the identified savings are in line with the forecast and have been reported to the Department.



- 11.3 AB noted the costs relating to go-live for FtP and Registration concerning additional, premises related expenditure to support extra reception/office space and improvements required for the hearing suites. He concluded that, overall, he was happy that we have capacity in the budget, staff and resource capacity for us to achieve go-live.
- 11.4 The board were satisfied with the report and asked for some points of clarification.
- 11.5 AB responded to board queries regarding the Apprenticeship Levy that is expected to be applied in November.
- 11.6 AB noted that the conversation with the Department about the general principles concerning reserves is ongoing and that there will not be any detailed conversation on reserves while the Department is providing funding to Social Work England.

#### 12. Proposed meeting dates

12.1 AE noted that the meeting dates for future board meetings were in place subject to one or two adjustments that she would make in advance of the next meeting.

**Action: Alison Edbury** 

#### 13. Gifts and Hospitality Policy

13. The Gifts and Hospitality Policy was noted and approved by the board.

#### 14. AOB

- 14.1 LP noted that he and CC had recently had a recently met with the President of the Association of Directors of Social Services. (ADSS) and that SB, CC and LP had facilitated a positive workshop at the Community Care live event earlier in the month.
- 14.2 LP also noted that he and CC will be meeting with the PSA, HCPC, DfE and DHSC for a final review of progress to go live in the first week of November.
- 14.3 SB reminded board members of the Regional Engagement meetings taking place on 5<sup>th</sup> 12<sup>th</sup> and 19<sup>th</sup> November that they are invited to participate in.

The board meeting concluded at 11.20am



Meeting date	Friday 13 <sup>th</sup> December 2019
Agenda item	1.4 Action log
Executive Director/Lead	Lord Patel of Bradford
Author	Alison Edbury

#### **Questions this paper addresses**

What are the outstanding items of business from previous meetings?

#### **Summary**

Outstanding actions updated from previous meeting 25th October 2019.

#### **Supporting papers**

#### **Board engagement / input**

☑ Information ☑ Discussion ☑ Decision

#### **Explanation of requirement**

The Board is asked to review the progress status of the Action Log, acknowledge the updates, discuss and approve any proposed actions.

Key implications or risks for any of the following (provide a brief explanation):	
Perspective	Summary
Financial	
Innovation and	
learning	
Stakeholders	
<b>Business processes</b>	
Explanation	



# Social Work England Action Log – from Board Meeting 25 October 2019

	Date of Board Meeting:	Actions:	Owner:	Status/Due Date:
a.	25/10/19	Draft strategic plan to be presented to the Board	Colum Conway	Presented and discussed at strategy meeting 25/10/19.
				Ongoing
b.	25/10/19	The register of interests to be updated.	Alison Edbury	Completed
c.	14/07/19	Fitness to Practise (FtP) system is under development and will be shared with the Board when it is complete.	Jonathan Dillon	JD stated that he and the team felt quite comfortable with the FtP development programme being on target to hit the key milestone of go-live. JD will update the board on the system at 13/12/19 meeting Ongoing
d.	25/10/19	Board members will undertake shadowing of education teams and Regional Engagement Leads over the next six months.  Board to view a demo of the digital	Sarah Blackmore (Matthew Byng, Policy Manager, Education and Training) Greg Ross-	Outstanding
e.	25/10/19	capability of the CRM system.	Sampson and David Bates	Outstanding
f.	25/10/19	Board feedback on Framework Document.	Adnan Bashir	Final Framework Document to be available for approval by 06/01/20



				Ongoing
g.	25/10/19	Outcomes of the ARC Risk Strategy Workshop to be brought back to the Board.	Ann Harris / Adnan Bashir	To report at the next Board meeting 13/12/19 Ongoing
h.	25/10/19	Board members to receive a programme implementation status update pre golive	Colum Conway	Paper circulated 28/11/19 Completed
i.	25/10/19	The board requested the opportunity to engage with the findings of the Staff Engagement Survey	Tracy Watterson	To report at the next Board meeting 13/12/19 Ongoing



Meeting date	Friday 13 <sup>th</sup> December 2019
Agenda item	2.1 Audit and Risk Assurance Committee Meeting Update
Executive Director/Lead	Adnan Bashir, Executive Director, Finance, Commercial and Governance
Author	Ann Harris

Questions this	paper addresses
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Update on the arrangements for Internal and External Audit 2019-20

- a. Indicative Timeline External Audit
- b. NAO Third Part Service Provider
- c. Internal Audit Plan 2019-20
- d. Progress update Internal Audit Recommendation 2018-19

Summary
Ann Harris, Chairperson, Audit and Risk Assurance Committee will provide a verbal report to
the Board.
Supporting papers
Board engagement / input
☐ Information ☐ Decision
Explanation of requirement

Key implications or risks for any of the following (provide a brief explanation):	
Perspective	Summary
Financial	х
Innovation and	
learning	
Stakeholders	
<b>Business processes</b>	
Explanation	



Meeting date	Friday 13 <sup>th</sup> December 2019
Agenda item	2.2 Risk Strategy Meeting Update
Executive Director/Lead	Adnan Bashir, Executive Director, Finance, Commercial and Governance
Author	

Questions this paper addresses
The update will provide an overview of the process undertaken to identify and articulate our risk profile and appetite.
Summary
Overview of the risk appetite joint workshop/session undertaken on the 25 October 2019
Supporting papers
None
Board engagement / input
☑ Information ☐ Discussion ☐ Decision
Explanation of requirement
To discuss the process used and to challenge the identified outcome.

Key implications	or risks for any of the following (provide a brief explanation):
Perspective	Summary
Financial	Risk has a direct and indirect impact on all areas of operations and is a key consideration when developing strategy. All decision making is influence by the organisational risk profile and appetite.



Meeting date	Friday 13 <sup>th</sup> December 2019
Agenda item	2.3 People Engagement Survey Update
Executive Director/Lead	Tracy Watterson, Assistant Director, People
Author	Neil Smith-McOnie, Insight and Analytics Manager, Alexandra Hayward, MI Analyst

Alexandra Hayward, Mir Anaryst
Questions this paper addresses
What kind of an employer is Social Work England and how do we support staff engagement?
Summary
A powerpoint presentation and verbal report will highlight the findings and impacts from the first Staff Engagement Survey conducted in September 2019.
Supporting papers
Board engagement / input
☑ Information ☑ Discussion ☐ Decision
Explanation of requirement

Key implications or	risks for any of the following (provide a brief explanation):
Perspective	Summary
Financial	
Innovation and learning	х
Stakeholders	х
<b>Business processes</b>	х
Explanation	



Meeting date	Friday 13 <sup>th</sup> December 2019
Agenda item	3.1 Go Live Update
Executive Director/Lead	Colum Conway, Chief Executive
Author	Colum Conway, Chief Executive

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Author	Colum Conway, Chief Executive
Questions this pape	er addresses
What is the state of	play for Social Work England since 'go live' Monday 2 <sup>nd</sup> December?
Summary	
Colum Conway, Chi	ef Executive will provide a verbal update at the meeting.
Supporting papers	
Board engagement	/ input
☑ Information □	☑ Discussion ☐ Decision
Explanation of requ	irement
Key implications or	risks for any of the following (provide a brief explanation):
Perspective	Summary
Financial	
Innovation and	
learning	
Stakeholders	
<b>Business processes</b>	X
Explanation	



Meeting date	Friday 13 <sup>th</sup> December 2019
Agenda item	3.2 Registration and Education Quality Assurance
Executive Director/Lead	Philip Hallam, Executive Director, Registration & Quality Assurance
Author	Rachel McAssey, Head of Registration

Questions this paper addresses		

#### **Summary**

In Philip Hallam's absence, a powerpoint presentation and verbal update will be provided to the board by Rachel McAssey, Head of Registration.

This presentation will consider the operation of Social Work England's Registration function, and in particular:

- The transfer of social workers from the Health and Care Professions Council (HCPC) to the Social Work England Register.
- The performance of the Registration function from 2 December to date, including initial statistics relating to processes and call handling.

#### **Supporting papers**

A summary of the readiness of the Registration & Education Quality Assurance functions has been provided in the general update paper for the Board at go-live.

Board engageme	nt / input	
<b>☑</b> Information	□ Discussion	☐ Decision
Explanation of re	quirement	

Key implications or I	risks for any of the following (provide a brief explanation):
Perspective	Summary

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Financial	
Innovation and	
learning	
Stakeholders	
Business processes	X
Explanation	



Meeting date	Friday 13 <sup>th</sup> December 2019
Agenda item	3.3 Fitness to Practise
Executive Director/Lead	Jonathan Dillon, Executive Director, Fitness to Practise
Author	Jonathan Dillon, Executive Director, Fitness to Practise

#### **Questions this paper addresses**

- The state of readiness in the fitness to practise directorate at the point of go-live
- The profile of fitness to practise casework handed over from the HCPC on 2 December 2019
- The management strategy for the casework received
- The progress made to date on progressing the casework received.

#### **Summary**

An oral presentation will be provided to the board covering the readiness of fitness to practise to regulate, the transitional arrangements overseen with the HCPC's fitness to practise department, the profile of casework received and the progress made on the casework today.

#### **Supporting papers**

A summary of the readiness of the fitness to practise operation has been provided in the general update paper for the Board at go-live.

Additional material is not provided to the board in relation to the profile and status of fitness to practise casework as the data presented to the board will be based on fresh management data, drawn on the morning of the board meeting.

Board engagement / input		
<b>☑</b> Information	<b>⊠</b> Discussion	☐ Decision
Explanation of requirement		
Information is provided for the Board to note and discuss.		



Key implications or risks for any of the following (provide a brief explanation):		
Perspective	Summary	
_		
Financial	Legacy caseloads are higher than predicted at the beginning of the financial year and will have an impact on operational expenditure in	
	the final quarter of 2019-20 and into 2020-21.	
Innovation and	Initial learning gained from an analysis of legacy casework will	
learning	influence our progression strategies.	
Stakeholders	Key stakeholders in the opening three months of operation are participants directly involved in ongoing fitness to practice activity and representative bodies. The strategy is designed to establish dialogue with these parties within 14 days of go-live.	
Business processes	N/A	
Explanation	N/A	

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# **Social Work England Board Meeting**

Meeting date	Friday 13 <sup>th</sup> December 2019
Agenda item	3.4 Communications
Executive Director/Lead	Sarah Blackmore, Executive Director, Strategy, Policy and Engagement
Author	Sarah Blackmore, Executive Director, Strategy, Policy and Engagement



Meeting date	Friday 13 <sup>th</sup> December 2019
Agenda item	3.5 Reporting arrangements for the Data Protection Officer
Executive Director/Lead	Philip Hallam, Executive Director, Registration & Quality Assurance
Author	Greg Lawton, Head of Data Protection and Information

#### **Questions this paper addresses**

An introduction to the recommended reporting arrangements for the Data Protection Officer (DPO) at Social Work England, and the accountabilities of the board and DPO.

#### **Summary**

In Philip Hallam's absence, a powerpoint presentation by Greg Lawton will explain at a high level, the considerations in relation to the reporting arrangements for the DPO, noting the high-level accountabilities of the board and the DPO.

#### **Supporting papers**

A paper will be prepared as a follow up with a fuller discussion with the Board at the next meeting.

Board engagement / input		
<b>☑</b> Information	☐ Discussion	☐ Decision
Explanation of re	equirement	

Key implications or risks for any of the following (provide a brief explanation):		
Perspective	Summary	
Financial		
Innovation and		
learning		
Stakeholders		
Business processes	X	

Social Work 00 England	
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Explanation



Meeting date	Friday 13 <sup>th</sup> December 2019	
Agenda item	3.6 Corporate Strategy Update	
Executive Director/Lead	Lord Patel of Bradford	
Author	Lord Patel of Bradford	

Author	Lord Patel of Bradford
Questions this pa	per addresses
How the Corporat	e Strategy has developed since the strategy workshop with the Board.
Summary	
	coard will provide a verbal update to bring Board members up to date see Strategy at the meeting.
Supporting paper	S
Board engagemen	nt / input
<b>☑</b> Information	□ Decision     □ Decision
Explanation of re	quirement
Key implications	or risks for any of the following (provide a brief explanation):
Perspective	Summary
Financial	
Innovation and	

Perspective Summary

Financial

Innovation and learning

Stakeholders

Business processes X

Explanation



Friday 13<sup>th</sup> December 2019
Corporate Feedback and Complaints Policy





Meeting date	Friday 13 <sup>th</sup> December 2019
Agenda item	5.2 Corporate Feedback and Complaints Policy
Executive Director/Lead	Adnan Bashir, Executive Director, Finance
Author	Adnan Bashir, Executive Director, Finance

Questions this paper	addresses
Ensuring that Social V	Vork England has a policy for corporate feedback and complaints.
Summary	
	ne approach Social Work England will take in response to feedback wed from those who use our services.
Supporting papers	
Board engagement /	input
<b>図</b> Information □	Discussion
Explanation of requir	ement
The Board is asked to and Complaints Police	note and acknowledge they have read the new Corporate Feedback y.
Key implications or ri	isks for any of the following (provide a brief explanation):

Key implications or risks for any of the following (provide a brief explanation):			
Perspective	Summary		
Financial			
Innovation and learning			
Stakeholders			
Business processes	X		



Explanation	

	This policy will outline the approach Social Work England will take in response to feedback and complaints received from those who use our services.		
Summary	Social Work England may be referred to in the first person throughout this policy (us/we/our).		
Target audience	All Social Work England Board members, employees and partners		
Effective Date	2 December 2019	Last reviewed	November 2019
Date authored	18/11/2019	Next review	November 2020

Policy Owner	Greg Ross-Sampson, Assistant Director Corporate	
Policy Contact	Ellis Christie, Internal Quality and Improvement Manager Ellis.christie@socialworkengland.org.uk	
Approvals	Executive Leadership Team, 19/11/2019	

# Purpose of this policy

This policy sets out our approach to the feedback and complaints we receive about our services. It will be supported by procedural guidance to assist staff in identifying, recording and responding to complaints.

# Policy statement

We are committed to providing the best service we can in all the interactions we have with all those who use our services.

However, we recognise that sometimes mistakes happen, we might not do something we said we would do (for example respond to a query within a set timescale) or we might not be able to help individuals in the way they would like. We want those who use our services to tell us when things have gone wrong, or where we could have done better. If people have had positive experiences with us, we want to hear about those too.

We take all complaints seriously and will try to resolve these at the earliest opportunity. Most complaints will be made directly to the individual/team providing the service and resolved at this point. This policy applies where:

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- an individual makes a complaint directly to the internal quality and improvement team which is within the scope of the policy.
- a complaint is received by an individual/team and the nature, complexity, or circumstances of the complaint indicate it would be better managed through the corporate complaints process.

#### **Definitions**

Term	Definition
Complaint	An expression of dissatisfaction with a service we have provided or failed to provide where a response or resolution is required. This can be made either verbally or in writing and the need for a response or resolution does not need to be made explicitly. People do not need to say they are making a complaint for us to treat it as such.

## Scope

This policy applies to all Social Work England staff and partners but will be especially useful for those whose role requires contact with people outside the organisation.

We would encourage people to contact the person or team they have been dealing with to discuss any issues or complaints in the first instance. In most cases they will be in the best position to resolve the issue promptly. However, if the matter cannot be resolved at this point, individuals may submit a corporate complaint through our corporate feedback and complaints process.

#### The corporate feedback and complaints process covers:

- The actions of our staff, partners, and suppliers acting on our behalf.
- A service we have provided which was unsatisfactory, or where we have not followed our own procedures.
- The way we have communicated with those outside Social Work England.

#### The corporate feedback and complaints process does not cover:

- Requests for information under the Data Protection Act 2018 or Freedom of Information Act 2000.
- Complaints about social workers (these are managed through the fitness to practise processes)
- Complaints about an approved course of study (this is managed through our education quality assurance process or may be directed to the relevant institution).
- Our published standards, rules or guidance.



- Any issues which have previously been fully investigated through the corporate complaints process.
- We will not normally consider corporate complaints that are received more than 12 months after the events of concern.

#### Complaints about regulatory decisions

Our fitness to practise, registration and education quality assurance processes involve us, or independent decision makers, making decisions which affect social workers, members of the public and education providers (regulatory decisions). Sometimes, the individuals affected may not be happy with these decisions. Any concerns should be raised with the team responsible who will be able to explain any alternative mechanisms in place to address your concerns.

We are unable to consider complaints about our regulatory decisions through the corporate feedback and complaints process.

# Roles and responsibilities

Role	Responsibility
All Social Work England staff and partners	<ul> <li>Read and comply with the 'Corporate Feedback and Complaints Policy and Procedure'.</li> <li>Send feedback and complaints to the Internal Quality and Improvement team as soon as they are received.</li> <li>Cooperate with any investigation undertaken under the Corporate Feedback and Complaints Policy.</li> <li>Ensuring that those who have raised complaints are not treated adversely on the basis that they have made a complaint.</li> <li>Ensure that the confidentiality of those who have made or are the subject of a complaint is appropriately protected, and that personal data relevant to the complaint is not shared beyond those who need to know the information</li> </ul>
Role	Responsibility

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All managers	<ul> <li>Ensure that they and those they manage are familiar with the 'Corporate Feedback and Complaints Policy and Procedure'.</li> <li>Provide advice and guidance on the 'Corporate Feedback and Complaints Policy and Procedure' to those they manage when approached.</li> <li>Create an organisational culture where staff and partners value feedback, including complaints, and use it to drive improvements.</li> </ul>
Senior leadership team	<ul> <li>Ensure that investigations are completed promptly and in line with the principles set out in the Corporate Feedback and Complaints Policy.</li> <li>Ensure that responses to complaints are tailored to the needs of the individual, and that clear reasons are provided for decisions made.</li> </ul>
Internal Quality and Improvement Manager / Officer	<ul> <li>Ensure that feedback and complaints are logged, acknowledged, and responded to within timescales and in accordance with the 'Corporate Feedback and Complaints Policy and Procedure'.</li> <li>Ensure that complaints are escalated to the executive leadership team where appropriate.</li> <li>Monitor and report on performance in relation to feedback and complaints to the executive leadership team.</li> <li>Monitor the implementation of learning identified through the corporate feedback and complaints process.</li> <li>Support the organisation in delivering an effective corporate feedback and complaints process by providing guidance and facilitating learning and development activities.</li> </ul>
Executive leadership team	<ul> <li>Support the implementation of the 'Corporate Feedback and Complaints Policy', ensuring resources to do this are made available.</li> <li>Ensure that complaints escalated to the executive leadership team are reviewed, and where necessary direct further investigation.</li> <li>Create an organisational culture where staff and partners value feedback, including complaints, and use it to drive improvements.</li> </ul>



# Arrangements to deliver the policy

Our two-stage management of corporate complaints is based on learning from other organisations and the Parliamentary and Health Service Ombudsman (PHSO) <u>Principles of Good Complaints Handling</u>. We will apply these principles by:

#### Getting it right

 Developing a positive culture regarding feedback, including complaints, across the organisation, supported by clear processes which are focused on outcomes and the experience of those who use our services.

#### Being customer focused

- Making sure that our complaints process is simple, accessible, and responsive to the needs of the individual.
- Dealing with complaints promptly and signposting people to other organisations which may be able to help if we are unable to resolve their complaint.

#### Being open and accountable

- Publishing clear and complete information on how to make a complaint and how to progress it through our procedures.
- Providing clear timescales for responding to complaints and keeping people updated if there are delays.
- Acknowledging when we have made mistakes and trying to correct this as soon as possible.
- Providing clear evidence-based explanations and reasons for decisions we make.
- Maintaining electronic records of complaints retaining these for a minimum period depending on the type of record and its importance to our business functions.
- Processing information in accordance with data protection legislation.

#### Being fair and proportionate

- Respecting diversity and ensuring fair access to our services.
- Undertaking independent, thorough and fair investigations, making objective evidencebased decisions.
- Being consistent but not rigid in our approach, adapting to the specific circumstances of a complaint or the needs of the individual.
- Being fair to our staff and partners by letting them know when they have been complained about.

#### Putting things right

Apologising and accepting responsibility when we have got things wrong.



• Taking action to remedy failings such as reviewing or changing a decision, revising our publications, revising policies or procedures to help prevent the issue reoccurring.

#### Seeking continuous improvement

• Recording, analysing and regularly reporting on the feedback and complaints we receive, and using this information to help us improve the services we provide.

The procedural documents which sits alongside this policy outline how colleagues will identify, record, investigate, and respond to complaints and feedback. They will also set out how learning from complaints and feedback will be monitored and reported, and how learning will be identified and used to improve our services.

# Compliance

#### Monitoring

As a minimum, the following will be monitored to ensure compliance with this policy:

Element to be monitored	Lead	Tool	Frequency	Reporting arrangements
Complaint response timeliness	Internal Quality and Improvement Manager	Data monitoring	Monthly	Reports will be made available to the executive leadership team.
Quality of complaint investigations and responses	Internal Quality and Improvement Manager	A selection of complaint investigations and responses will be audited to ensure compliance with this policy.	Quarterly	An anonymised reports setting out the findings of quarterly audits will be reported to the executive leadership team.

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for the organization.  Manager Ongoing monitoring to ensure agreed timescales for implementation are being met improvements have been embedded.
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#### **Escalation process**

In the event this policy and the associated procedure are not followed, an informal discussion with the colleague(s) in question will be undertaken by their direct manager. If the colleague(s) continues to fail to follow the policy and procedure, this issue will be escalated to the relevant senior manager / executive director and the Assistant Director of Corporate to discuss the best way forward.

#### Consequences of non-compliance

A failure to comply with this policy and additional procedural guidance could impact significantly on us and damage our reputation with the people outside the organisation. The above escalation process will be followed in the event of non-compliance.

# Training requirements

Training will be provided to all colleagues whose role requires interaction with people outside of the organisation.

# Resource requirements

There are no additional resources required to deliver this policy, however managers are expected to allocate the necessary time to ensure that a thorough investigation is carried out and response provided.

# Policy review and version control

The first version of this policy will be reviewed 12 months after the date of implementation; after which it will be reviewed every two years unless otherwise directed by the executive leadership team or if there is a change in relevant legislation.

Where policies are not reviewed in a timely manner, the Head of Business Planning and Improvement will refer the issue to the executive leadership team.



The executive leadership team will also act as the final arbiter for all policy ownership discussions.

# Change Record

Date	Author	Version	Page(s) changed	Reason for Change
22/10/19	Ellis Christie	v0.1	N/A	First draft
05/11/19	Ellis Christie	v0.2	2 to 11	Updated following feedback from key internal stakeholders
12/11/19	Ellis Christie	v0.3	2 to 11	Following feedback from executive leadership team and information governance team.
18/11/19	Ellis Christie	v0.4	3 to 4	Following feedback from Chief Executive Officer and Registrar

# Reviewers/contributors

Name	Position	Version Reviewed	Date
Hannah Brown	Head of Quality Assurance	0.1	22/10/2019
Berry Rose	Head of Triage and Case Progression	0.1	23/10/2019
Holly Bontoft	Senior Regulatory Lawyer	0.1	23/10/2019
Rachel McAssey	Head of Registration	0.1	23/10/2019
Morwenna Fodden	Head of Strategic Engagement	0.1	30/10/2019
Eleanor Poole	Head of Case Review	0.1	31/10/2019

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Nadine Pemberton	Executive Director, Legal	0.2	4/11/2019
Greg Lawton	Head of Information Governance	0.2	5/11/2019
Greg Ross Sampson	Assistant Director, Corporate	0.3	12/11/2019

# Related information

The following policies are related to the provide additional information relevant to this policy.

Related information	Location
Difficult Contacts	
Vexatious and Habitual Complaints	
Abusive Contacts	

# 12.Data Protection Impact Assessment (DPIA) and Equality Impact Assessment (EIA)

Has a DPIA (data protection impact assessment) screening questionnaire been completed and sent to the Data Protection and Information Governance team? Please delete as appropriate.	Yes
Has an equality impact assessment been completed and sent to the HR manager?	Yes



Meeting date	Friday 13 <sup>th</sup> December 2019
Agenda item	5.3 Proposed meeting dates for remainder of 2019/20 and 2020/21
Executive Director/Lead	Adnan Bashir, Executive Director, Finance, Commercial and Governance
Author	Alison Edbury, Governance Manager, Social Work England

7 (3 (1) (1)	mison Easary, Governance Manager, Social Work England
Questions this paper	addresses
The agreed meeting re	equirements for the Board.
Summary	
Diary dates for remainder of 2019	r Social Work England Board meetings and Committee meetings for the 9/2020.
Diary dates fo to 31st March 202	r Social Work England Board meetings and Committee meetings 1st April 2020 21.
Supporting papers	
D	•
Board engagement /  ☑ Information □	
Explanation of require	ement
Key implications or ri	sks for any of the following (provide a brief explanation):
Perspective	Summary
Financial	
Innovation and	
learning	
Stakeholders	
Business processes  Explanation	X
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# **Social Work England Board Meeting Schedule 2019/20**

MEETING	DATE and TIME	LOCATION
Full Board Meeting	Friday 13th December 2019	The Don
	Arrival 9.30am	Social Work England
	Business meeting runs	1 North Bank, Blonk Street,
	10.00am – 12.30pm	Sheffield
	(followed by xmas social with staff team)	S3 8JY
Provisional Closed Board	Friday 17 <sup>th</sup> January 2020	The Don
Meeting	Arrival 9.30am	Social Work England
	Business meeting runs	1 North Bank, Blonk Street,
	10.00am – 1.00pm	Sheffield
		S3 8JY
ARAC Committee Meeting	Tuesday 4th February 2020	The Don
	Arrival 9.30am	Social Work England
	Business meeting runs	1 North Bank, Blonk Street,
	10.00am – 1.00pm	Sheffield
		S3 8JY
Full Board Meeting	Friday 21st February 2020	London tbc
	Arrival 9.30am	
	Business meeting runs	
	10.00am – 1.00pm	



# **Social Work England Board Meeting Schedule 2020/21**

MEETING	DATE and TIME	LOCATION
Full Board Meeting	Friday 24th April 2020 Arrival 9.30am Business meeting runs 10.00am – 1.00pm	The Don Social Work England 1 North Bank, Blonk Street, Sheffield S3 8JY
REMCO Committee Meeting	Friday 15 <sup>th</sup> May 2020 Arrival 9.30am Business meeting runs 10.00am – 1.00pm	RICS Parliament Square, London SW1P 3AD
ARAC Committee Meeting	Friday 22nd May 2020 Arrival 9.30am Business meeting runs 10.00am – 1.00pm	The Don Social Work England 1 North Bank, Blonk Street, Sheffield S3 8JY
ARAC Committee Meeting	Friday 19th June 2020 Arrival 9.30am Business meeting runs 10.00am – 1.00pm	The Don Social Work England 1 North Bank, Blonk Street, Sheffield S3 8JY
Full Board Meeting	Friday 26 <sup>th</sup> June 2020 Arrival 9.30am Business meeting runs 10.00am – 1.00pm	Birmingham, VENUE TBC
Full Board Meeting	Friday 18th September 2020 Arrival 9.30am Business meeting runs 10.00am – 1.00pm	LONDON VENUE TBC
Full Board Meeting	Friday 23 <sup>rd</sup> October 2020 Arrival 9.30am Business meeting runs 10.00am – 1.00pm	MANCHESTER VENUE TBC
ARAC Committee Meeting	Tuesday 3 <sup>rd</sup> November 2020 Arrival 9.30am Business meeting runs 10.00am – 1.00pm	The Don Social Work England 1 North Bank, Blonk Street, Sheffield S3 8JY

Friday 18th December 2020 Arrival 9.30am Business meeting runs 10.00am – 1.00pm	The Don Social Work England 1 North Bank, Blonk Street, Sheffield S3 8JY
Tuesday 2 <sup>nd</sup> February 2021 Arrival 9.30am Business meeting runs 10.00am – 1.00pm	The Don Social Work England 1 North Bank, Blonk Street, Sheffield S3 8JY
Friday 26th February 2021 Arrival 9.30am Business meeting runs 10.00am – 1.00pm	LONDON VENUE TBC
	Arrival 9.30am Business meeting runs 10.00am – 1.00pm  Tuesday 2 <sup>nd</sup> February 2021 Arrival 9.30am Business meeting runs 10.00am – 1.00pm  Friday 26 <sup>th</sup> February 2021 Arrival 9.30am Business meeting runs