

Performance Report Q4 2021-22

Item 9

Paper 07

Paper for the

Social Work England Board

Sponsor

Colum Conway, Chief Executive

Author

Andy Leverton, Head of Business Planning and Improvement

Date

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Reviewed by

Executive Leadership Team

This paper is for

Discussion and Advising

Associated Strategic Objective

SO9: We will establish robust infrastructure, systems and processes that promote trust and confidence.

Impact: Risk Type and Appetite

Operational delivery - Open

1. Summary

This report presents our performance for Q4 of 2021-22. We publish our performance and data on a quarterly basis. Publishing quarterly means we show trends within the year and against previous years as we progress and develop a performance picture. This also aligns with the data periods the Professional Standards Authority use as part of their performance review.

2. Overall assessment

Performance in the fourth quarter of 2021-22 is broadly in line with expectations, with a small number of exceptions.

- As expected, there was an increase in the number of applications for restoration to the register. The time taken to approve these applications remained well within target.
- We achieved all of our targets for 21-22 in registration, enquiries and advice.
- We achieved five out of six of our targets for 21-22 in fitness to practise.
- We reduced the number of cases open at the triage stage to 417, short of the target of 300, but much improved from the caseload of 723 at the start of the year.
- We significantly reduced our overall fitness to practise caseload, and exceeded our target for the caseload at the investigation stage
- We initiated 16 course reapprovals as scheduled.
- We met all of the KPIs in Q4 under the 'our organisation' pillar of our business plan.

3. Performance 1 January to 31 March 2022

3.1 Our regulatory approach

Registration, enquiries and advice

Table 1: registration, enquiries and advice key performance indicators

				Act	uals			
KPI ID	KPI Description	Target	Q1 21-22	Q2 21-22	Q3 21-22	Q4 21-22	YTD	DoT*
REG1	Time taken to approve registration applications ¹	≤ 10 working days (median)	1	1	2	1	1	1
REG2	Time taken to approve restoration applications ¹	≤ 20 working days (median)	8	9	4	9	5	1
REG3	Time taken to answer emails	≤ 5 working days (median)	0	0	1 ²	1	1	\rightarrow
REG4	Time taken to answer phone calls	≤ 8 mins waiting time (median)	0	2	10	1	4	1

RAG rating of actuals: green – achieving target; amber - within 5% of achieving target; red – more than 5% from achieving target.

In Q4, we continued to see an increase in applications from applicants who qualified overseas. 387 applications were received compared to 202 received in Q4 20-21.

There was an expected increase in restoration cases in Q4, which related to individuals restoring to the register after failing to renew, and also related to applications from individuals restoring because they were practicing using emergency registration granted under the Coronavirus Act 2020. A higher than expected number of these applications had to be paused so that we could investigate periods of unregistered practice and this led to an increase in the processing time for restoration applications. This also led to an increase in misuse of title cases during this period, with 57 cases compared to 25 cases in Q4 20-21.

The number of calls received in Q4 also increased from Q4 the previous year: 5073 calls compared to 3849. This is linked to higher caseloads in registration service, alongside the team supporting fitness to practise queries. The number of emails received in the quarter remained stable. Performance in this quarter and across the year was in line with KPIs.

Temporary registration has been extended and will continue into the autumn.

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^{*}Direction of travel: direction of arrow indicates numerical change compared to previous quarter; colour of arrow indicates performance against target (green = trending towards target; red = trending away from target

¹ Excludes applications where an investigation is required

² Reported as 0 in Q3- figure since updated

Fitness to practise

Table 2: Fitness to practise key performance indicators

KPI ID	KPI description	Target		Q1 21-22	Q2 21-22	Q3 21-22	Q4 21-22	YTD	DoT*
FTP1	Number of open cases	300 by March	Actual	643	567	580	417	417	
	in triage stage	2022	Forecast	710	517	394	279	279	•
FTP2	Number of open cases	1,230 by March	Actual	1185	1040	917	773	773	1
	under investigation	2022	Forecast	1241	1229	1227	1230	1230	•
FTP3	Legacy cases progressed beyond	80% by March	Actual	51.2%	58.9%	71.1%	84.2%	84.2%	↑
5	investigation	2022	Forecast	47.3%	58.2%	69.1%	80.%	80.%	-
FTP4	Time taken to conclude cases received since our inception following an investigation	Monitor (median weeks)	Actual	52 ³	58 ⁴	67 ⁵	68	61	1
FTP5	Time taken to approve interim orders once need identified	≤ 20 working days (median)	Actual	17 ⁶	20	23	27	20	1
FTP6	FTP internal quality score ⁷	≥ 90% of cases meet internal standards	Actual	90.9%	95.0%	93.2%	98.7%	93%	1

RAG rating of actuals: FTP1, FTP2 and FTP3: green – achieving target compared to projected YTD position; amber – within 5% of achieving projected YTD position; red – more than 5% from achieving projected YTD position. FTP4 – no target, not rated. FTP5 and FTP6: green – achieving target; amber – within 5% of achieving target; red more than 5% from achieving target.

*Direction of travel: direction of arrow indicates numerical change compared to previous quarter; colour of arrow indicates performance against target (green = trending towards target; red = trending away from target

FTP1 Number of open cases in triage stage

We reduced the triage caseload by 306 (42.3%) during the year, from 723 to 417 by the end of Q4, with a significant acceleration in Q4 following a further restructure within the service. We did not meet our target of 300 open cases, primarily due to incoming referral rates being sustained at a high level and challenges in internal resourcing, as reported to the Board previously.

³ Reported as 53 in Q1; calculation since updated.

⁴ Reported as 60 in Q2; calculation since updated.

⁵ Reported as 73 in Q3; calculation since updated.

⁶ Reported as 18 in Q1; calculation since updated.

⁷ Calculation updated since Q1. Figures now show final ratings, previously initial review rating.

Of the remaining 417 open triage cases, we used our powers⁸ to place 80 cases on hold, awaiting the resolution of local or criminal procedures are resolved, meaning that only 337 cases at triage are open and active. Our target of 300 open cases at triage reflected what we consider to be a manageable caseload. The additional 37 open and active cases at the end of Q4 have a minor impact on our ability to manage the triage caseload.

We will report the number of cases on hold within triage in future reports to provide a more accurate view of our caseloads.

In addition to reducing triage caseloads, we optimised our ability to resolve cases at the correct stage, resulting in a 32.4% reduction in referrals from triage to full investigation and case examination. We suspended application of the triage test in appropriate cases to allow decision makers to gather all relevant information and prevent unnecessary and unfair referrals into full investigation and case examination, and used targeted enquiry powers enable a better informed application of the test.

FTP2 Number of open cases under investigation

We exceeded our target for caseload reduction in the investigations service in 21-22 reducing the caseload to 773, 457 fewer than the target of 1230. Several factors contributed to this, including the implementation of an intelligent, risk-based streaming system, sustained levels of high-performance from individual investigators and service managers, and effective use of our triage and just disposal powers to prevent unnecessary referrals into investigation and case examination.

At the end of Q4, the overall caseload in fitness to practise was 1052, which is lower than the caseload would have been (1530) had we exactly achieved service targets in triage (300) and investigations (1230). The significantly reduced caseload allows us to focus on improving the timeliness of case progression at all stages of fitness to practise during 22-23.

FTP3 Legacy cases progressed beyond investigation

Resolution of the remaining legacy caseload is an organisational priority as these cases are now old and continue to impact all parties involved. Additional investment in the service, agreed with the Department for Education, allowed an acceleration of the legacy caseload in Q4. This enabled us to exceed the target set at the start of the year. At the rate of resolution currently being achieved, the legacy work within our investigations service will be completed during summer 2022.

The acceleration of this work has, as expected, produced a surge of referrals into the adjudications service, resulting in an increased caseload of matters requiring a full hearing. Additional funding has been agreed to address this in 22-23. The expansion of our hearings service and the performance this delivers during the year is being closely monitored by a dedicated project team. Progress is reported to the executive team each month.

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⁸ Within rule 3 of the fitness to practise rules

FTP4 Time taken to conclude cases received since our inception following an investigation

The overall time taken to conclude cases requiring an investigation in Q4 was 68 weeks, an increase of one week on Q3 and an increase of nine weeks since Q1.

We expected an increase during the year as we have prioritised the resolution of legacy cases, which are on average 12 months older than new cases at the point of conclusion. The balance in resolutions will shift during 2022/23 from legacy cases to new referrals and at that point the figure will begin to reduce.

Key targets for timeliness of case progression have been established in our business plan for 22-23.

FTP5 Time taken to approve interim orders once the need is identified

By the end of Q4, we achieved our target of concluding consideration of interim orders within 20 working days.

It was reported to the Board in November 2021 and March 2022 that the service was facing challenges in relation to this target during the winter months. In three months across this period, the number of new cases referred to the interim orders process was more than double the average for the year. This surge in new cases placed pressure on the hearings service, when there was already a high volume of final hearing and review hearing activity, and in December when available hearing time was limited due to the holiday season.

We ran a successful pilot in Q3 to introduce two-person panels and optimise the use of meetings rather than hearings for certain types of cases. This process has now been established within the service and has helped to expand capacity to hear interim orders with existing resource. As a result, the service was able to reduce the time taken to list and hear interim orders from March 22 onwards and meet the 21-22 target.

The ongoing consultation led by the Department for Education to amend our Regulations includes operational changes to both the application and review process for interim orders. If implemented, these changes will streamline the process further in late 2022 and result in better performance against this target.

FTP6 FTP Internal quality score

During 21-22 we achieved our internal quality assurance target for decision making, with particularly strong performance in Q4. Monthly training workshops for case examiners and annual refresher training for adjudicators was supplemented in 21-22 with a new appraisal and feedback process. This helped to sustain quality and ensure any trends or changes in law/process were communicated to decision makers effectively.

Our Decision Review Group provides internal quality assurance of our decision-making. A detailed paper setting out the work of the group during the year is planned for the next Board meeting in July 2022.

During the business year, the Professional Standards Authority used its powers under Section 29 of the National Health Service Reform and Health Care Professions Act 2002 to appeal three decisions made by our adjudicators. This amounts to 2% of all reviewable decisions made. One was resolved by a consent agreement; another was successful at the High Court and a third is ongoing at the time of writing. Learning has been drawn from each of these challenges and is being delivered to our adjudicators by independent trainers at targeted refresher sessions in June 2022.

3.2 The social work profession

Continuous professional development (CPD)

Q4 saw the launch of our new CPD requirements and the updated online recording form. Social workers are now required to submit a minimum of 2 pieces of CPD, including at least one piece of CPD with a peer reflection, to renew their registration for 2022 to 2023.

We published updated CPD guidance and sent a message to all social workers about the changes. Supported by our regional engagement leads and the communications team, we developed a communications and engagement plan, and refreshed key messages for national and regional events. Our communication activities included targeted messaging, podcasts, information on the website about peer reflection and an updated video guide on how to record CPD.

In January 2022, we randomly selected 2.5% (2,354) of social workers CPD review. The review process was completed within the agreed timescales by the team of 10 independent assessors. 2,225 social workers had their CPD accepted and 129 given advice. Those given advice have been informed that they will be included in next year's CPD review.

Policy and strategy

In January we published 'Social Work in England: Emerging Themes' our second interim report ahead of the state-of-the-nation report in 2023. This began to reflect insight around the makeup of the social work profession and compared our registration data with public data from the Office for National Statistics to draw build a picture of social work in England. We subsequently began planning for the final 'Social Work in England' report and agreed a programme of activity for 22-23 with the leadership team.

There was significant work on the changes to our rules alongside the Department for Education. We managed and closed the consultation on remote hearings, issued our response, and also launched the first consultation focused on improvements and amendments to our rules. This work will continue into 22-23 with responses and further areas of consultation in order to improve the clarity and accuracy of the legislative framework we work under.

We have continued to lead a cross-directorate project looking closely at fitness to practise upstreaming, improving the accuracy of the support we offer to people intending to raise a concern.

We have continued to develop the work to engage employers around fitness to practise, embedding our workshops into business as usual and continuing to expand and embed the single point of contact network with local authorities. We have worked closely with the fitness to practise teams and our legal services provider, Capsticks, to navigate local authority systems and extract information needed to progress cases.

This is a significant piece of work which should help us better understand how and when people refer fitness to practise matters to us, and how best to work with employers and others in the future.

In February, we evaluated the second phase of this project, considered progress against objectives, and set the ambition for the third phase of activity.

We advertised for expressions of interest and undertook early engagement events to gather professional, expert and public views on preparing social work graduates effectively for their first years of practice. This led to first proposals for guidance that will support our education and training standards titled 'readiness for practice'.

Communications

During Q4, we continued to generate media coverage, with 32 articles helping to land key messages with the sector. This included the changes to CPD requirements, Social Work Week 2022 promotion, the launch of our equality, diversity and action plan and outputs of the anti-racism survey.

We continue embed our stakeholder management system into the organisation. Throughout the quarter we used Tractivity to expand the number of single points of contact for the organisation and promote major consultations to our priority stakeholders

Compared to Q4 21-22, the website saw a 2% increase in visitors. Our social media followers increased by 8% on Twitter to 16,679 and by 9% on LinkedIn to 21,726. Our most engaged social post in February was the announcement of the main programme for Social Work Week 2022 which received 21.8k impressions.

We issued two Social Work Now newsletters to the sector, both reaching around 88,000 people. We also contacted 3,600 people who had expressed an interest in Social Work Week 2022, firstly calling for contributions and secondly to promote the programme.

3.3 The people we work with and for

Engagement

We delivered Social Work Week in March 2022 and achieved our objectives of engaging in new strategic partnerships, enhancing our reputation and promoting the professional identity of social work.

We promoted Social Work Week through an extensive communications plan and developed our website to include a dedicated Social Work Week programme, ensuring users were able to easily access and register for the core programme and independent events. The core programme was much smaller than in 2021, but still attracted over 3,200 logins.

Most importantly for our aims this year, the sector took real ownership of the week and a programme of over 30 independent events advertised on our website and many more promoted on social media and in the regions. Each regional engagement lead delivered a local session with people with lived experience and achieved our aim of putting the voice of lived experience at the centre of the week. We also ensured a focus on equality, diversity and inclusion throughout the programme.

The National Advisory Forum continues to go from strength to strength, including refining how they engage with the Board and key strategic governance groups across our work. They have also delivered the first co-production training to the Executive Leadership Team and planned a programme of training sessions across the next year.

Equality, diversity and inclusion

We continue to ask social workers to record their diversity data in their online accounts. Around 4.5% of social workers have provided this to date. In the EDI action plan, we had committed to doing this in 2023 due to competing asks for system developments but feel we need to prioritise this now as the response rate is lower than we had hoped. This data is vital as it means that we can analyse, understand and address any trends or differences in outcomes for people with protected characteristics.

We published the <u>findings</u> from the anti-racism survey we ran alongside partners and leaders in social work to understand the prevalence, impact, and general awareness of racism in social work, with nearly 2,000 social workers surveyed. We're committed to working alongside others from across the profession to build on the recommendations in the report.

We continue to engage with a range of external representative groups, such as the principal social worker networks, UKSWA - the Professional Association for Black and ethnic minority social workers and groups supported by the British Association of Social Workers which include the Equality, Diversity and Inclusion Advisory Group and Neurodiversity Special Interest Group to share learning and promote diverse engagement with us. We continue to be active members of the joint healthcare regulators' equality, diversity and inclusion forum

and UK social work and care regulators equality, diversity and inclusion forum, which we established last year.

Within the organisation, we have strengthened our equality, diversity and inclusion considerations in our recruitment and selection processes, including updating recruitment briefing information to ensure there is more information around bias and how to minimise it. We also used targeted recruitment methods aiming to increase the diversity of our fitness to practise partner pool, including a workshop specifically for people from ethnic minority backgrounds. Early analysis shows an increase in the number of applicants from diverse backgrounds in comparison to 2019.

We continued work on developing our new mandatory equality, diversity and inclusion elearning offer and plan to launch this in May. This has been coproduced with the National Advisory Forum, the EDI Steering Group and several colleagues across the organisation.

3.4 Education and training

Table 4: Education and training key performance indicators

KPI ID	KPI description	Target		Q1 21-22	Q2 21-22	Q3 21-22	Q4 21-22	YTD	DoT*
5044	Number of course	On track for 30	Actual	0	0	10	16	26	→
-	reapproval processes initiated	by March 2022	Forecast	0	0	10	16	26	ı

RAG rating of actual: green – achieving target; amber – within 5% of achieving target; red - more than 5% from achieving target.

Course changes

In Q4, we considered requests for two course changes. One request for a course change has been considered as an administrative change, and the other will be considered as a documentary review by inspectors and requires a regulatory decision.

3 year Reapproval Cycle

We have started the process of reapproving all currently approved social work courses. This will be completed by September 2024. In the first year of the reapproval cycle, we have booked inspections at course providers which will result in 82 course reapprovals.

In Q4, 10 courses received a reapproval decision. This related to activity from 4 inspections with 3 course providers. We initiated 16 course reapproval processes, for which 10 inspections have been undertaken. We continue to work closely with course providers to schedule approval activity so that inspectors have the most up-to-date version of the course to be inspected.

Courses reapproved

Course provider: Anglia Ruskin

BA Hons Social Work (3 campus locations)

BA Hons Degree Apprenticeship

MA Social Work (2 campus locations)

Course provider: Brunel University London

MA Social Work

PG Dip Social Work (Masters exit route)

Course provider: Teesside

MA Social Work

^{*}Direction of travel: direction of arrow indicates numerical change compared to previous quarter; colour of arrow indicates performance against target green = trending towards target; red = trending away from target

PG Dip Social Work (Exit Route)

All courses during Q4 were approved with conditions. When we approve courses with conditions, we require the course provider to provide to the inspector, within a timescale set by us, further evidence of how they meet the education and training standards.

New courses approved

In Q4, during a planned reapproval inspection, we also approved 8 new courses at the same provider.

Course provider: Brunel

MSc. Social Work (Full time)	Descripted in Sen 2024
PG Dip Social Work (Masters exit route)(Full time)	Recruited in Sep 2021
MSc. Social Work (Part time)	Recruiting from Sep 2022
MSc. Social Work (Part time)	Postuited in Son 2021
PG Dip Social Work (Masters exit route) (Part time)	Recruited in Sep 2021
PG Dip Social Work (Masters exit route) (Part time)	
MSc. Social Work (Full time)	Recruiting from Sep 2022
PG Dip Social Work (Masters exit route)Full time)	

The new courses were approved with conditions.

Enquiries

The number of new enquiries received in Q4 (82) was lower than in the same quarter last year (97). New enquiries are received relating to all parts of education with course providers liaising with officers as a single point of contact for course providers within regions. This is in addition to this figure above.

We continue to deliver our monthly programme of webinars that we started in August 2021, to inform course providers of the requirements of the reapproval process and introduce evidence requirements. 311 colleagues from course providers had been invited to the training by the end of Q4.

3.5 Our organisation

Table 5: our organisation key performance indicators

KPI				Act	uals			
ID	KPI description	Target	Q1 21-22	Q2 21-22	Q3 21-22	Q4 21-22	YTD	DoT*
P1	Average number of sick days per employee ⁹	≤ public sector average of 5.4 days	3.7	3.8	3.9	4.1	3.9	\rightarrow
P2	Recruitment against plan	≥ 90%	94%	93%	90%	88%	90%	→
Р3	Retention rate ¹⁰	≥ 90%	94%	93%	89%	89%	90%	\rightarrow
FIN 1	Forecast variance to budget ¹¹	+/- 2%	0.02%	0.01%	0.05%	1%	n/a	\rightarrow
IT1	System availability excluding planned outages	≥ 99%	100%	99.7%	99.8%	99.9%	99.8%	1
IG1	Time taken to complete Freedom of Information Requests	100% within statutory deadline	100%	100%	97.2%	100%	99.3%	↑
IG2	Time taken to complete Subject Access Requests	100% within statutory deadline	100%	100%	100%	100%	100%	→
IQ1	Corporate complaints response time	100% within communicated timeframes	100%	100%	100%	100%	100%	\rightarrow

RAG rating of actuals: green – achieving target; amber – within 5% of achieving target; red - more than 5% from achieving target.

People

We have continued to embed hybrid working and there has been a significant increase in office attendance as restrictions have lifted.

Sickness absence has risen by 0.2 days per person. This is mainly driven by a small number of long term absences. The people team provide additional support to individuals as well as support though our employee assistance programme, occupational health and phased return to work plans.

^{*}Direction of travel: direction of arrow indicates numerical change compared to previous quarter; colour of arrow indicates performance against target green = trending towards target; red = trending away from target

⁹ Figure represents 12 months to end-of-quarter to allow comparison with public sector average, a 12-month figure.

¹⁰ Figure represents 12 months to end-of-quarter to allow comparison with annual target

¹¹ KPI revised after mid-year review of KPIs. Q1 actual updated since Q1 report to reflect revised KPI. We now report the forecast year-end variance instead of the actual variance from budget.

We had 7 new starters in this quarter as planned. However, we are aware of recruitment market volatility. Our discussions with recruitment agencies have confirmed a widespread scarcity of candidates. Recruitment agencies are struggling to fill their own vacancies.

We have still not been successful in recruiting an IT developer trained in C# .NET Core. We are in a very competitive market with shortages of this type of skillset. We are discussing other options including increasing our junior developer roles to develop people internally.

We launched the recruitment for a new Executive Director for People and Business Support following the decision of the current executive director to step away from full time employment and this role later in the year.

We developed our new assistant director roles, that have been designed to strengthen leadership resilience.

There have been 7 internal moves. 2 of which were promotions, and 5 were lateral moves.

We have had 7 voluntary leavers this quarter. Three people cited career progression as a reason for leaving, 1 for reasons relating to their role, 1 for personal reasons and 2 chose not to share their reasons.

We had a significant number of fixed term contracts due to end in quarter 4 and as planned, we have managed to convert the majority into permanent contracts. We achieved our overall year target of 90% retention.

The consultation on increasing our pensions contributions concluded in Q4 and we prepared to implement changes from 1 April 2022 alongside the introduction of life assurance cover. Both changes are aimed to enhance our overall employer offer.

We commissioned a provider for our people engagement survey. This has given us an opportunity to streamline and refine our approach. The benefits of using a specialist provider include the ability to produce dynamic and user friendly reports and to drill down into specific areas of interest based on survey results.

Finance, Commercial and Partners

For the year ending 31 March, our revenue expenditure, net of fee income, was 1% higher than budget.

In March 2022 the Department for Education confirmed £5.5m of additional funding to accelerate the progression of legacy fitness to practise cases.

At its meeting on 19 November 2021, the Board approved a business case for the procurement of external legal services. The procurement process was completed during Q4 and the contract was awarded to the successful bidder in March 2022.

We moved quickly to realise our plan to recruit an additional 65 partners for hearings and additional staff to increase capacity.

IT and Infrastructure

In the final quarter, the most significant development in Forge case management system will improve the way documents are stored, managed and linked to cases resulting in administration efficiencies

In parallel to Forge development work, we initiated a significant piece of work to migrate the infrastructure that underpins Forge from its current Microsoft Azure tenant hosted by a third party to our own managed tenant. This is a significant piece of work that will deliver financial, operational and security benefits.

Governance and Assurance

We published our business plan for 22-23 in April.

The Framework Document 2022 to 2025 was laid in House Libraries on 15 February 2022.

New terms of reference have been drafted for the board and its committees to align with the new Framework Document.

The new Policy Committee held its inaugural meeting on 10 February 2022.

The remaining internal audits have been completed as scheduled. Three of the audits achieved a substantial assurance: Internal Audit Follow Up; Registrant Fees; Payroll and Benefits. Procurement including contract management achieved an adequate assurance. Over the year, five of our seven audits received substantial assurance.

We met our KPIs in Q4 for the processing of subject access requests and freedom of information requests. We narrowly missed the freedom of information target due to one request in Q3 being completed outside of the statutory time frame.

We continued to see the reduction in corporate complaints in Q4 which reflects the overall 40% reduction in corporate complaints received in the first 3 quarters compared with 2020-21. The trend of corporate complaints being more complex has continued. Often this complexity comes from the fact that the issues raised are related to regulatory decisions which themselves cannot be considered as a corporate complaint, or where the complainant has additional or complex support needs

The Professional Standards Authority (the 'Authority') reviewed our performance against the Standards of good regulation for the period 1 December 2020 – 30 November 2021. We met with the Authority to discuss their initial findings and provide clarification. The final report is due to be shared with us shortly before this is published by the Authority later in May 2022.

We meet with the Authority on a monthly basis to discuss our work and any particular areas of our work which are relevant to their Review of our performance for 2021/22.

Annex A
Statistical Data 2021-22

	Registratio	on		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Number of	registered social v	vorkers	2021/22	96573	96901	97090	97877	98444	99279	99775	99191	97458	97912	98148	98447
			2020/21	98738	98780	97991	98493	99210	100117	100942	99701	95251	95665	95950	96315
Number of	Number of temporarily registered social workers		orkers	13517	13441	13380	13299	13269	13219	13187	6518	6450	6393	6354	6322
Number of socia	Number of social workers joining the register 2021/22		420	375	380	830	620	950	820	353	1034	470	273	362	
			2020/21	183	147	223	591	843	1151	924	431	840	432	303	420
Number of socia	al workers leaving	the register	2021/22	162	47	191	43	53	115	324	937	2767	16	37	63
	2020/21			85	105	1012	89	126	244	99	1672	5290	18	18	55
		All	2021/22	392	533	431	1167	829	1452	928	724	388	413	305	427
	Number	graduates	2020/21	205	234	398	1174	775	1435	785	787	338	331	245	480
	received	UK graduate	S	321	449	338	1074	748	1363	839	598	289	295	183	280
New registration		Overseas gra	duates	71	84	93	93	81	89	89	126	99	118	122	147
applications	Median time	All graduates	S	1	1	1	1	2	1	3	2	3	2	2	3
	taken to UK graduates		S	1	1	1	1	2	1	2	2	2	2	1	2
	progress (working	EU/EEA grad	uates	20 ¹³	n/a	n/a	n/a	n/a	139 ¹⁴	132 ¹⁵	n/a	n/a	n/a	n/a	n/a
	days) ¹²	Non-EU/EEA	graduates	11	7	8	9	7	6	4	5	7	9	8	6

¹² Includes applications where an investigation is required therefore figures may differ from the KPI, REG1. Excludes time awaiting further information from applicants.

¹³ Relates to a case received in December 2020.

¹⁴ Relates to a case received in December 2020, awaiting outcome of test of competence, case held open to preserve pre-EU exit rights.

¹⁵ Relates to a case received in November 2020, awaiting outcome of test of competence, case held open to preserve pre-EU exit rights.

		2021/22	86	64	75	82	63	52	108	153	627	158	128	105
Restoration applications	Number received	2020/21	37	25	67	98	<i>7</i> 5	72	76	215	700	138	111	91
received	Time taken to process (median working days) 16		13	14	10	11	18	16	14	15	5	13	13	13
	Number received	2021/22	3	1	1	4	1	2	1	0	0	0	2	0
	Number received	2020/21	10	2	2	0	0	1	0	2	0	0	0	1
Da sistantia a	Number concluded		1	0	1	1	1	4	0	3	2	0	0	0
Registration appeals	Upheld		1	0	0	1	0	0	0	0	0	0	0	0
аррошо	Rejected		0	0	0	0	1	4	0	2	2	0	0	0
	Withdrawn		0	0	1	0	0	0	0	1	0	0	0	0
	Time taken to complete (med	ian weeks)	20	0	10	18	18	15	0	16	10	n/a	n/a	n/a
	Ni walan wanai wad	2021/22	2	2	2	1	4	2	2	16	25	18	20	19
Misuse of title	Number received	2020/21	10	3	10	13	8	7	6	7	16	13	6	6
cases	Time taken to complete (median working days)		97	147	25	n/a ¹⁷	93 ¹⁸	40 ¹⁸¹⁸	37	33	13	18	15	25
Number of phon	o calle received	2021/22	1527	1286	1443	1605	1577	3588	4219	8088	3435	1825	1448	1800
Number of phone	e cans received	2020/21	1630	2683	2510	4340	4188	6747	6988	11014	5023	1475	1416	2234
Median call queu	ue time (minutes)		2	0	0	0	0	3	6	14	9	1	0	2
Percentage of ca	lls answered (of all calls received	1)	66%	75%	74%	71%	70%	63%	58%	47%	51%	66%	69%	64%
Number of a !!	a wa a a iva d	2021/22	1183	829	800	959	960	1884	1611	2435	1398 ¹⁹	968	848	1178
Number of email	s received	2020/21	2352	1788	1075	1986	1305	2468	2147	2173	901	783	824	1143
Median re	sponse time to emails (working o	days)	0	0	0	0	0	0	1 ²⁰	1 ²⁰	2 ²⁰	0	0	1

 ¹⁶ Includes applications where an investigation is required therefore figures may differ from the KPI, REG2
 ¹⁷ Figure updated since Q2 report. No misuse of title cases were completed in July 2021.
 ¹⁸ Figure updated since Q2 report.

¹⁹ Reported as 1395 in Q3 report, figure since updated. ²⁰ Figures updated since Q3 report.

CPD		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Number of social workers who have	2021/22	9599	11319	13118	16887	19960	28925	43685	94352	n/a ²¹	968	2504	3976
completed CPD (cumulative)	2020/21	10500	12451	14319	18570	24155	34855	49548	91989	2176	4054	5951	7953
Total number of valid CPD items recorded		21782	27332	33704	41911	48998	76987	114109	205432	n/a ²¹	302	651	937
Social workers who have completed valid CPD (%)		10%	12%	14%	17%	20%	29%	44%	95%	n/a ²¹	0.3%	0.7%	1.0%

1	Education and Training		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Го	Enquiries received 2021/22		18	23	36	25	24	27 ²²	28	46	18	31	24	26
EIIC	quiries received	2020/21	53	29	36	26	21	45	40	57	17	48	21	27
Co	nearns resolved	2021/22	0	1	0	0	0	0	0	0	0	0	0	0
Col	ncerns received	2020/21	3	3	2	2	2	1	0	1	0	8	30	0
	Inspections conducted ²³		0	0	1	0	0	1	6	4	0	3	3	12
		Approved	0	0	0	0	0	0	0	0	0	0	0	0
Outcome of	Approved wi	th conditions	0	0	0	0	0	0	1	0	0	0	8	8
inspections		Not approved	0	0	0	0	0	0	0	0	0	0	0	0
	Request for approv	al withdrawn	0	0	0	0	0	0	0	0	0	0	0	0

Corporate complaints		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Cornerate complaints received	2021/22	12	21	23	13	11	18	11	7	17 ²⁴	10	8	9
Corporate complaints received	2020/21	12	19	27	22	22	23	46	20	29	17	20	10
Corporate complaints closed		18	8	15	34	3	12	18	13	12	15	11	9
Mean working days to respond to corporate complaints		20.3	14.8	17.3	18.9	12.7	17.8	16.6	19.7	23.3	27	40	28

Online CPD recording for 2022 launched on 11th of January 2022, therefore no CPD items were recorded in December 2021.
 Reported as 24 in Q2 report, figure since updated.
 This includes both approval and reapproval inspections

²⁴ Reported as 15 in Q3 report - figure since updated

People	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Headcount	214	215	217	219	223	223	224	229	227	225	228	225

Fitness to Practise		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Concerns received	2021/22	138	150	159	137	136	129	133	163	154	134	138	135
Concerns received	2020/21	103	98	141	153	142	126	142	170	183	155	170	205
Defermed massived (CNA) identified)	2021/22	158	206	209	142	157	228	142	216	142	138	147	164
Referrals received (SW identified)	2020/21	131	136	189	144	156	145	232	156	183	192	222	273
Number of cases awaiting pre-triage at end	l of month	241	351	297	327	319	400	426	465	429	376	352	372
Time to complete pre-triage (mean calend	dar days)	35.4	45.9	75	63.7	71.3	53.4	56.2	65.4	73.9	103.9	121.3	92
FTP cases opened		53	69	243	81	136	92	34	133	151	168	112	112
Percentage of cases closed at triage	2021/22	57.2%	53.2%	65.8%	68.2%	74.6%	57.3%	57.1%	56.1%	50.7%	73.8%	74.9%	73.1%
rescentage of cases closed at triage	2020/21	51.9%	49.4%	45.9%	48.1%	28.2%	41.5%	43.9%	54.5%	51.6%	35.6%	51.4%	60.3%
Number of cases entering investigation from	om triage	67	59	50	49	30	33	62	54	47	48	51	58
Number of cases closed in/progressed from i	nvestigation	83	99	90	96	75	85	103	118	76	95	111	105
Substantive hearings concluded/final decis	ions made	8	11	4	10 ²⁵	6	12	9 ²⁶	13	4	10	11	11
Interim Order application hearings held/dec	isions made	11	13	13	8	8	12	7	15	7	8	22	10
Interim order reviews held/decisions	made	35	49	43	37	45	41	59	44	45	54	63	54
Substantive order reviews held/decision	s made	3	5	6	4	8	6	3	6	4	8	6	3

 $^{^{25}}$ Reported as 11 in Q2 report - figure since updated 26 Reported as 10 in Q3 report - figure since updated