

Copy of Social Work England Board Meeting

MEETING
25 July 2025 10:30 BST

PUBLISHED
24 July 2025

Social Work England Board Meeting

Friday 25 July 2025, 10.30am – 1.00pm

at The Don, Social Work England and by videoconference

AGENDA

Item	Time	Topic	Paper / Ref.	Board Action	Lead
		Welcome Introductions for new board members			Chair
1.	10.30	Apologies for absence and declarations of interest Board members' register of interests link	Verbal	To note/declare	Chair
2.	10.30	Minutes of the meeting held on 16 May 2025	Paper 01	To approve	Chair
3.	10.35	Matters arising and action log	Paper 02	To discuss and note	Chair
4.	10.40	Chair's report	Verbal	To note	Chair
5.	10.50	Chief executive's report	Paper 03	To discuss and note	Chief Executive
6.	11.00	Audit and risk assurance committee chair's report - Annual report and accounts 2024/25 - Final audit completion report - Legal services contract extension business case	Paper 04* Paper 04a* Verbal	To discuss and note For approval	Executive Director, People and Business Support
7.	11.20	Policy committee chair's report	Paper 05*	To note	Policy Committee Chair
8.	11.25	Remuneration committee chair's report	Verbal	To note	Remuneration Committee Chair

Item	Time	Topic	Paper / Ref.	Board Action	Lead
9.	11.30	Finance and commercial report Management accounts to 30 June 2025	Paper 06	To discuss and note	Executive Director, People and Business Support; Head of Finance and Commercial
10.	11.45	Quarter 1 performance report 2025/26 Fitness to Practise performance Q1 2025/26	Paper 07 Paper 07a	To discuss and note	Head of Business Planning and Improvement; Executive Directors
11.	12:05	Asset management strategy	Paper 08	To discuss, and approve	Head of Finance and Commercial
12.	12:25	Board appointments to committee	Verbal	To discuss and approve	Chair
13.	12:35	Any other business	Verbal	To note and advise	Chair
	12.45	Meeting ends Date of next meeting: Friday 26 September 2025 9.30 - 15.00 (Board Strategy Away Day)			
	13.30 – 14.30	Board/National Advisory Forum joint strategy session			Chair
	14.30 – 15.30	Board carbon literacy training			Rachel Grognet, Department for Education

* Papers marked with an asterisk are ‘private’ to protect confidentiality according to our guidance for publishing board papers.

LIST OF ATTENDANCE

Board members:	Dr Andrew McCulloch	Chair, Non-executive Director
	Amrat Khorana	Non-executive Director
	Cheryl Hobson	Non-executive Director
	Chris Nicholson	Non-executive Director
	Dr Adi Cooper	Non-executive Director
	Dr Sue Ross	Non-executive Director
	Colum Conway	Chief Executive
Board Apprentice	Bhavna Chandra	
Staff in attendance:	Ellis Christie	Head of Internal Quality Assurance and Governance
	Linda Dale	Executive Director, People and Business Support
	Natalie Day	Assistant Director, Policy and Strategy
	Neil Smith-McOnie	Head of Business Planning and Improvement
	Philip Hallam	Executive Director, Regulation
	Rachel McAssey	Assistant Director, Regulation (Registration, Advice and Adjudications)
	Richard Simpson	Head of Finance and Commercial
	Stephen Barnett	Assistant Director, Regulation (Investigations)
Sponsor team:	Andrew Wise	Department for Education
	Kate Phillips	Department for Education

	Sonia Mosley	Department for Education
Public observers:	Alan Clamp	Professional Standards Authority
	Ben Jones	Unison
	Richard West	Professional Standards Authority
Staff observers:	Laura Gordon	Senior Education Quality Assurance Officer
	Mickey Hollman	Triage Lead
Minute taker:	Cathy Glynn	Executive Office Team
Apologies:	Simon Lewis	Non-executive Director
	Sarah Blackmore	Executive Director, Professional Practice and External Engagement

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Minutes of the Social Work England board meeting for approval
16 May 2025, 10.00 – 12.30
at The Don, Social Work England and by videoconference

Board Members:	Dr Andrew McCulloch	Chair
	Dr Adi Cooper	Non-executive Director
	Ann Harris	Non-executive Director
	Simon Lewis	Non-executive Director
	Dr Sue Ross	Non-executive Director
	Colum Conway	Chief Executive, Executive Director
Social Work England staff in attendance:	Clarissa Allford	Risk Manager
	Joseph Stockwell	Assistant Director, Assurance and Improvement
	Linda Dale	Executive Director, People and Business Support
	Neil Smith-McOnie	Head of Business Planning and Improvement
	Natalie Day	Assistant Director, Policy and Strategy
	Philip Hallam	Executive Director, Regulation
	Richard Simpson	Head of Finance and Commercial
	Sarah Blackmore	Executive Director, Professional Practice and External Engagement
	Stephen Barnett	Assistant Director, Regulation (Investigations)
	Grace Barnes	Executive Assistant
Sponsor Team:	Sonia Mosley	Department for Education
	Kate Phillips	Department for Education
Public Observers:	Ben Jones	Unison
	Gill Archer	Unison
	Colette Higham	Professional Standards Authority
	Abdul-Rahman Lawal	Professional Standards Authority
Staff Observers:	James Tynemouth	Business Improvement Officer
Minute taker:	Chloe Corbett	Corporate Governance Manager

Apologies:

Bhavna Chandra

Boardroom Apprentice

1. Welcome, apologies for absence and declarations of interest

- 1.1 The chair welcomed board members, colleagues and public observers to the meeting.
- 1.2 Apologies from the boardroom apprentice were noted.
- 1.3 There were no declarations of interest reported.

2. Minutes of the last meeting

Paper 01

- 2.1 The minutes of the meeting on 14 March 2025 were **approved** as a correct record.

3. Matters arising and action log

Paper 02

- 3.1 There were no matters arising.
- 3.2 Closed actions following the last board meeting were noted:
 - **Action 114:** The corporate governance manager to coordinate an additional informal board meeting in December, to be utilised if information sharing on key developments is required. *The corporate governance manager consulted board members to identify a suitable date for an additional board meeting in December. A board update meeting has been scheduled for the 2 December 2025. Action closed.*
 - **Action 119:** Risk management framework to be included in the induction pack for new non-executive directors. *A list of key materials for the induction pack for new non-executive directors has been compiled by the corporate governance manager, which includes the risk management framework. Action to close.*
 - **Action 121:** Assistant director, assurance and improvement and head of equality, diversity and inclusion to further evidence and articulate the equality, diversity and inclusion and co-production principles in the annual business plan. *In response to the board's feedback, an updated version of the business plan was shared with the board on 11 April 2025 inviting further feedback. This feedback was considered and a final version of the plan was published on 30 April 2025 - [Business plan 2025 to 2026 - Social Work England](#). Action closed.*
 - **Action 122:** Board members to review the business plan supporting document and provide any further feedback. *A revised draft of the business plan supporting document was circulated to the board on 11 April 2025 for feedback. Action closed.*
 - **Action 123:** Executive director, people and business support and assistant director, assurance and improvement, to further refine the draft business plan in light of the board's feedback and circulate for final approval once the budget outcome is known. *A revised business plan for final approval was shared with the board on 11 April and published on 30 April 2025. Action closed.*
- 3.3 Actions from board meetings pending sign off at the 16 May 2025 meeting:

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- **Action 117:** Further information in relation to the approach to the activity taking place on CPD to be shared at the next board meeting. *An update on CPD is included in the chief executive's report.* **Action to close.**
- **Action 118:** Chief executive's report to include a list of upcoming meetings going forward. *The chief executive's report now features a standing list of upcoming meetings.* **Action to close.**

3.4 The chair requested that the action 120, to schedule two joint meetings between board members and members of the National Advisory Forum (NAF), be expedited.

3.5 Progress on the open action was **noted** by the board.

4. Chair's report

Verbal

4.1 The chair updated attendees on a private meeting held with the data protection officer (DPO). It had been emphasised to the DPO that he was able to contact the chair directly at any point, if needed. Both agreed that good progress had been made on data protection within the organisation. Errors in staff communication remained a risk, in relation to the personal data that the organisation held, and this would continue to be monitored by the audit and risk assurance committee (ARAC).

4.2 The minister was meeting with potential candidates for the non-executive director positions in the week beginning 19 May 2025. Recruitment was expected to complete within the next one to two months.

4.3 The chair also informed the board of a meeting they had attended with other health professional regulators at the Professional Standards Agency (PSA).

5. Chief executive's report

Paper 03

5.1 The chief executive noted that a focus in this period was capturing the end year position for 2024/25. On the agenda for this meeting was the quarter 4 performance report, and work was underway to prepare the annual report and accounts. Most business plan objectives and key performance indicators had been met.

5.2 In early April, the Cabinet Office had commissioned a review of all Arm's Length Bodies. Further information would be shared with the board when available. Social Work England was also preparing for an independent review that was required under its founding legislation. The department were assembling a review team and working to secure a lead reviewer. The board would be updated on progress.

5.3 The PSA had published its annual performance review of Social Work England for 2023/24. 17 of the 18 standards were met, a positive achievement. The board was aware that standard 15, in respect of timeliness, had not been achieved for the third consecutive year, resulting in the publication of an escalation letter.

5.4 The development of Social Work England's future approach to continuing professional development (CPD) remained a key area of focus, following previous board discussions. Further evidence gathering and engagement workshops were planned to inform future proposals for consultation. The board would continue to be involved in

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discussions relating to CPD and a deep dive on CPD was on the agenda for the next policy committee meeting.

5.5 The 2025/26 business plan had been finalised and published, and discussions would take place with the board later that day in a strategy session to reflect on the business planning process and opportunities to strengthen this further.

5.6 The consultation on fees had closed on Tuesday 13 May 2025. The level of engagement across the sector had been extensive, which included just short of 7,900 individual and organisational responses to the consultation survey, 140 individual responses via email and 8 organisational responses separate to the survey. The policy team had been reading and analysing all responses on an ongoing basis over 12 weeks of the consultation.

5.7 The board was aware of the process for making decisions, following analysis of the consultation feedback, the board decision on the fee increase would be referred to the Secretary of State for approval, with advice from HM Treasury. This process would take place over the next few months. An update would be given in the board meeting taking place on 25 July 2025.

6. Audit and risk assurance committee chair's report

Paper 04*

Audit and risk assurance committee chair's annual report 2024/25

6.1 The ARAC chair presented her annual report which summarised ARAC's 2024/25 activities. This was good practice and provided an audit trail.

6.2 The board noted the ARAC chair's annual report.

6.3 The ARAC chair also presented her report of the last meeting, highlighting the following, which were more forward-looking and therefore not explicitly covered in the annual report:

- Commercial plan – ARAC had reviewed the commercial plan and priorities for 2025/26. The next large procurement was for a second legal advocacy provider, to address fitness to practise (FtP) resourcing issues
- 2024/25 Annual report and accounts – work with the National Audit Office had begun. The external audit was underway, with a tight timetable. Intangibles were considered to be the largest area of risk. An ARAC meeting was scheduled for 25 June 2025 to sign off the accounts, with a draft to be shared with the board beforehand
- The 2025/26 risk appetite statement had been discussed and the committee agreed to recommend it to the board; this would be covered under a later agenda item. Digital, data and technology strategy and cyber security had also been discussed and the committee requested that further information was shared with the board as a whole; this would also be discussed later in the meeting.

6.4 The chair informed the board that this was Ann Harris's last board meeting. She was thanked for her contributions and leadership as the ARAC chair. The chief executive also expressed thanks on behalf of the executive leadership team.

7. Remuneration committee chair's report

Verbal

7.1 The remuneration committee chair informed the board that the committee had met in the previous week to discuss the chief executive's performance in 2024/25, and objectives for 2025/26, with advice from the chair of the board. The chief executive's report on the executive directors' performance was also discussed. The committee recommended to the board that the 2% non-consolidated pay award be awarded to the chief executive. The committee had supported the chief executive's decision to award 2% non-consolidated pay to the executive directors.

7.2 The committee had also received and discussed a detailed progress update on the people strategy, and was satisfied with the work taking place in this area.

7.3 The board **noted** the update from the remuneration committee chair and **approved** the award of non-consolidated pay to the chief executive.

8. Finance and commercial report

Paper 05

Management accounts to 31 March 2025

8.1 The head of finance and commercial informed the board that the final year-end underspend against budget was lower than previously forecast; the year-end outturn was a variance of 2.8%. This was due to additional FtP hearings taking place in the final quarter, and an increase in IT revenue spending.

8.2 Confirmation had been received from the Department for Education (DfE) regarding grant-in-aid funding in 2025 to 2026, although Social Work England had not yet received its formal grant-in-aid letter. The budget allocation for 2025 to 2026 aligned to the budget plan approved by the board at its March meeting. This level of funding would enable the organisation to progress all of its intended business plan priorities, including action to improve timeliness within the FtP process.

8.3 Changes were being implemented to strengthen budget monitoring and forecasting throughout the year. Previously an end-year budget forecast and review had been carried out at mid-year stage, this would now begin in the second month and budget allocations would be adjusted, where necessary, to maximise progress towards priority objectives.

8.4 In relation to commercial activity, planning had begun for the procurement of a second legal advocacy provider. A business case would be presented to the board when this was ready to be progressed.

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9. Quarter 4 performance report 2024/25

Paper 06

- 9.1 The head of business planning and improvement was introduced, having recently joined Social Work England. The head of business planning and improvement briefly introduced the report on quarter four performance against the business plan objectives and key performance indicators (KPIs).
- 9.2 By the end of quarter four, all business plan objectives had been achieved, alongside 14 of the KPIs. 2 KPIs had not been met and the reasons for this had been discussed with the board previously.

Strategic theme: prevention and impact

- 9.3 The executive director, professional practice and external engagement spoke to the achievements and progress under this strategy theme. She outlined activity in the broader policy landscape in which the organisation operated. Significant engagement activity had taken place in Q4, including liaison with the media on current consultations, work by the regional engagement leads to continue dialogue with the sector through the single point of contact network, social work week, and an artificial intelligence (AI) summit which involved DfE colleagues.
- 9.4 Planning was underway for the year ahead, including further work to explore the use of AI in social work practice and the implications for regulation.
- 9.5 Simon Lewis, non-executive director, noted the usefulness of including links to media articles in the report, and requested that links to negative coverage be collated and shared with him, to ensure an awareness of the relevant themes.

Action: Assistant director, communications, engagement and insight to share links to negative media articles referenced in the performance report to be collated and shared with Simon Lewis, non-executive director.

- 9.6 Phase 2 of the change the script campaign was due to launch in the following week. It would include a video and reframing guide to influence societal norms and language used to describe social work, building on the success of phase 1.
- 9.7 Three policy research projects and a related survey were progressing well. Recommendations would be shared with the board when available.
- 9.8 The Open University was working with the organisation to conduct research into the opportunities and challenges that AI presents to social workers and their employers. A literature review was being carried out. This was focused on the use of AI in health and social care settings.
- 9.9 The research on seriousness in FtP was progressing well.
- 9.10 Collaboration with the government on plans for social care reform, including the social work induction programme, had also continued.
- 9.11 The approach to inspecting courses for approved mental health professionals and best interests assessors had been developed. Induction training for new inspectors

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had taken place, and stakeholder engagement and workshops were being planned. The first inspection was expected in September 2025.

- 9.12 The first inspection cycle to reapprove initial social work courses in England had been completed. Learning would be compiled into a report. Preparations were underway to consult on revised education and training standards, regional roadshows would take place in October 2025. Board involvement in this area of work would be welcome.
- 9.13 The board congratulated the team on completing the first education inspection cycle and praised the collaborative model that made it easy for providers to engage with. The board also welcomed the production of a learning report and looked forward to reading this when available.
- 9.14 The board queried whether the upcoming Higher Education strategy review would impact social work education courses. No direct impact was expected, and regular discussions were taking place with DfE.
- 9.15 The executive director, professional practice and external engagement updated the board on other areas of progress in the Q4 performance report. Equality, diversity and inclusion (EDI) remained a priority. Work was concluding on the 2025/26 EDI action plan. The National Advisory Forum (NAF) would play a key part of this work, and the recruitment process for new NAF members would conclude in the following week. Two joint board and NAF strategy sessions were being scheduled.
- 9.16 Development of the 2026-2029 strategy was underway.
- 9.17 Corporate risks were reported to be stable.

Strategic theme: regulation and protection

- 9.18 The executive director, regulation, reported that the registration and advice service continued to meet its KPIs. The timescales for processing restoration applications had increased, and allocation of capacity across the teams would be reviewed to ensure that resources were balanced.
- 9.19 The number of misuse of title cases had increased in Q4, this related to individuals practising as social workers after removal from the register.
- 9.20 The objective to review the annual registration renewals process had been completed. Overall, this had indicated that the current process was proportionate and effective. No significant changes were required, although some good practice improvements had been identified and these would be progressed.
- 9.21 The registration and advice team was preparing for an increase in UK applications as current graduates completed their courses, and also for the next registration renewal process in September 2025, with the recruitment of additional staff to support this.
- 9.22 The board noted performance in registration and advice and had no questions.
- 9.23 In relation to FtP, the executive director, regulation highlighted the ongoing triage and investigation performance challenges. Plans to address these had been discussed in the 14 March 2025 board meeting. Recruitment to additional triage roles was

underway, this would boost capacity and support case progression alongside work in 2025 to 2026 to review processes.

- 9.24 The number of cases in triage had increased this quarter, due to a decision to move a significant number of concerns into the 'pre-triage' stage of the FtP process.
- 9.25 A higher volume of new concerns had also been received this quarter than had been forecast. Most were referrals from members of the public. A balance needed to be sought, to ensure that members of the public could easily raise concerns, but to also help them to understand the remit of the regulator, and what might be a concern that would need to be addressed through other means, for example, with an employer.
- 9.26 Timeliness in triage was expected to improve over the coming months. The revised KPIs in 2025 to 2026 would separate the triage and investigation stages more clearly, to show the time taken at each stage. Most concerns were closed at triage.
- 9.27 The board enquired about the reason for the increase in concerns. This was not clear, however in discussion it was suggested that service pressures affecting social work employers may be contributing to increased referrals, and that it would be useful to understand whether that was the case. Research taking place on seriousness might also help in understanding patterns within referrals, including concern types and early closures.
- 9.28 The time taken to complete the case examination process was close to target, with two thirds of cases closed without the need for referral to a hearing. An additional 47 cases had been scheduled for a final hearing in Q3-Q4. Over the year as a whole, 70 cases had been concluded at final hearing, and 7 that were referred for a hearing had been concluded by other means. Work continued to take place with the external legal advocacy provider to progress as many cases as possible in 2025/26.
- 9.29 The KPI for time taken to approve interim orders, where needed, had been met.
- 9.30 Recruitment was underway to the new in-house legal advocacy team, and the board would continue to be updated on this work.
- 9.31 The board **noted** the progress made.

Strategic theme: delivery and improvement

- 9.32 The executive director, people and business support reported strong KPI performance for delivery and improvement, for the most part, although the budget variance had exceeded KPI tolerance, for the reasons previously discussed.
- 9.33 Sickness absence remained within the KPI target but had increased over the last few months, which might impact the rolling 12-month KPI in the early part of 2025 to 2026. The organisation understood the current sickness position and had reviewed its the wellbeing offer. A number of good practice improvements had been identified and would be implemented over the coming year.
- 9.34 The board raised the 'Keep Britain Working' review as a potential resource. The executive director, people and business support would consider this.

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9.35 The first cohort of management training had concluded with good engagement. Evaluation would take place to inform the future training offer.

9.36 Extensive staff engagement to explore and understand the current organisational culture and co-develop a new behaviours framework had been completed. The behaviours framework had been approved by the executive leadership team and preparations were underway for its launch and integration into policies and activities.

9.37 Other key activities in Q4 had included the completion of 2024/25 performance reporting, preparations for the external audit, and finalising plans for the 2025/26 financial year. Internal audits were providing a good level of assurance, and digital development activity was progressing as expected.

9.38 The board **noted** the progress made under this strategy theme.

10. Risk appetite statement

Paper 07

10.1 The risk manager was introduced to the board, and explained the purpose of the risk appetite statement, which was reviewed and updated each year. The proposed changes for 2025 to 2026 had been discussed and endorsed at the 2 May 2025 ARAC meeting.

10.2 The covering report outlined the key changes, including some updated risk appetite definitions. Annex A highlighted the proposed changes to risk appetite categories, names and appetites, and Annex B used track changes to show detailed wording amendments.

10.3 The board discussed the proposed change of risk appetite for statutory regulatory functions from “cautious” to “open.” It was noted that the difference in definitions between the two risk appetites was minimal, but the wording had been adjusted slightly to create a clearer distinction. The chief executive explained that this risk category included the organisation’s responsibilities in relation to education and training, as well as registration and FtP. In view of the breadth of functions covered, and the innovative approaches to delivery of statutory responsibilities that the organisation was exploring and testing carefully, an “open” rating was considered appropriate, though this would remain under review. The chief executive noted that there had been extensive discussion about this within the executive team before settling on “open”.

10.4 The ARAC chair noted that this change reflected the organisation’s maturity in risk management.

10.5 The executive directors confirmed their agreement with the proposed changes to the risk register, which the board **approved**. It was noted that the risk register was a live document, reviewed annually by the board.

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11. Corporate risk register

Paper 08*

- 11.1 The risk manager introduced the report and reminded the board that the corporate risk register would now be shared with the board twice a year, in addition to more frequent review and deep dives at ARAC. The report included details of the 2025 to 2026 deep dive schedule, outlining when specific risks would be reviewed by ARAC.
- 11.2 The board discussed corporate risk CRR10 (timeliness and quality in triage and investigations), and questioned whether the expected risk score should be “moderate” rather than “slight”. The executive director, regulation, clarified that the score reflected the position after all mitigations were in place.
- 11.3 The ARAC chair noted that many risks had remained in the same position over time, which could suggest that mitigations were not working. The risk manager would be reviewing the risk register following feedback at the 2 May 2025 ARAC meeting and would consider this.
- 11.4 The board **noted** the risk register.

12. Digital, Data and Technology review: update on key findings

Verbal

- 12.1 The executive director, people and business support reminded the board that an external partner had been commissioned to review the organisation’s digital, data and technology architecture, resourcing and governance. The partner had delivered a report, roadmap and a draft digital data and technology strategy in late March 2025.
- 12.2 The review had identified a number of strengths, including a committed, highly skilled and motivated team, and stronger performance in this function compared to similar organisations that had been reviewed.
- 12.3 There were no major surprises in relation to the key findings, which provided a helpful direction of travel for the future. Establishing data governance and platforms would be an important step. The review suggested an “evergreen” approach to the case management system, i.e. to continually develop it, with periodic reviews of alternative products to evaluate the case for changing platforms in the future.
- 12.4 Recommendations had also been made to review the overall resourcing model and structure, including the balance between external and internal resources, to help address resilience and single points of failure. This would be progressed in the next 12 months.
- 12.5 The report would inform the development of a more detailed action plan in response to the review, that would be presented to ARAC and the board over the summer period.
- 12.6 The chief executive commented that this had been a positive piece of work, which had validated the organisation’s understanding of current strengths and challenges in these areas. The review would provide clarity and confidence in the future direction of travel.

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13. Sustainability plan – progress in 2024/25 and priorities for 2025/26

Paper 09

- 13.1 The executive director, people and business support presented the report, which outlined achievements against the 2024/25 sustainability priorities and set out the proposed priorities for 2025/26.
- 13.2 Good progress had been made in 2024/25, including a successful internal communications campaign to promote positive action by employees, progress on the development of internal training, the launch of a volunteering offer, and improvements in recycling, particularly food waste.
- 13.3 The 2025/26 priorities would build on current progress and address some of the commitments in the 2023 to 2026 sustainability plan that had not yet been actioned.
- 13.4 It was noted that new Greening Government Commitments (GGCs) would be launched shortly. The organisation was in contact with DfE, as part of the DfE group of Arm's Length Bodies contributing to the DfE targets. The 2025/26 priorities would be reviewed and revised if necessary to align with the GGCs.
- 13.5 The board **noted** the progress which had been made in 2024/25 and **approved** the priorities for 2025/26.

14. Corporate governance: policy update

Paper 10

- 14.1 The executive director, people and business support informed the board that these policy updates had been reviewed by ARAC on 2 May 2025, and were being recommended to the board for approval as part of the annual review cycle.
- 14.2 The three policies (internal whistleblowing; anti-fraud, bribery and corruption and the financial control handbook) had been updated with minor revisions. The most significant change had been to incorporate an additional level of delegated authority into the financial control handbook, to reflect the assistant director role.
- 14.3 The board **approved** the policy revisions.

15. Schedule of regulatory delegation

Paper 11

- 15.1 The executive director, regulation reported that minor changes had been made to the schedule, to update responsibilities in light of organisational changes. These had been reviewed by ARAC on 2 May 2025 and were being recommended to the board.
- 15.2 The board **approved** the revised schedule of regulatory delegation.

16. Any other business

- 16.1 Simon Lewis, non-executive director, acknowledged the positive contribution of the boardroom apprentice, who had made a significant contribution during their time in the role so far.

Date and Time of Next Meeting: Friday 25 July 10.30 – 1.30.

The meeting ended at 11.24am.

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Summary of Actions

- **Action: Assistant director, communications, engagement and insight to share links to negative media articles referenced in the performance report to be collated and shared with Simon Lewis, non-executive director.**

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Summary of actions from board meetings up to 25 July 2025

Agenda Item 3 Paper Ref 02

Paper for the

Social Work England Board

Sponsor

The Chair

Author

Ellis Christie, Head of Internal Quality Assurance and Governance

Date

25 July 2025

Reviewed by

Linda Dale, Executive Director, People and Business Support

This paper is for

Assurance and Noting

Associated Strategic Objective

SO10: Continually develop and improve how we work, ensuring we are a well-run organisation that delivers the right outcomes and provides value for money.

Impact: Risk Type and Appetite

Governance and compliance – Cautious

Equality Impact Assessment (EIA)

N/A

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1. Summary

The actions below provide an audit trail of items closed at or since the last meeting on 16 May 2025.

Closed actions following the last meeting:

- **Action 117:** Further information in relation to the approach to the activity taking place on continuing professional development (CPD) to be shared at the next board meeting. *An update on CPD was included in the chief executive's report to the 16 May meeting.* **Action closed.**
- **Action 118:** Chief executive's report to include a list of upcoming meetings going forward. *The chief executive's report now features a standing list of upcoming meetings.* **Action closed.**

Actions pending sign off at the 25 July 2025 meeting:

- **Action 120:** Executive director, professional practice and external engagement and head of equality, diversity and inclusion to arrange at least 2 informal meetings between board members and members of the NAF per year. *Informal meetings between the board and the National Advisory Forum have been scheduled for 25 July 2025 and 26 September 2025. This requirement will be incorporated into the board programme for subsequent years.* **Action to close.**
- **Action 121:** Assistant director, communications, engagement and insight to share links to negative media articles referenced in the performance report with Simon Lewis, non-executive director. *The head of communications provided details and links to both positive and negative media coverage to Simon Lewis on 16 July 2025.* **Action to close.**

There are no open actions.

2. Action required

The board is asked to note the progress against the actions.

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Chief executive's report

Agenda Item 5 Paper Ref 03

Paper for the

Social Work England Board

Sponsor

Colum Conway, Chief Executive

Author

Colum Conway

Date

25 July 2025

Reviewed by

Executive Leadership Team

This paper is for

Assurance and Noting

Associated Strategic Objective

SO10: Continually develop and improve how we work, ensuring we are a well-run organisation that delivers the right outcomes and provides value for money.

Impact: Risk Type and Appetite

Strategic approach - Open

Equality Impact Assessment (EIA)

N/A

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1. Introduction

I would like to begin by adding my welcome to Chris, Cheryl and Amrat to the board meeting today, we are looking forward to working with you in the years ahead. The focus for our meeting today is the first quarter report on our business year 2025/26. The business planning team have been working on changes to the structure of our reporting in line with the overall review of business planning and performance reporting. This is a first iteration, there may be a need to continue to refine it more, we welcome feedback from the board and our key stakeholders.

Overall, the outturn for Q1 is positive, we are on track with our business objectives and KPIs. The reporting pack includes a more detailed breakdown of our activity and performance in the stages of our fitness to practise (FtP) process. Given the focus on timeliness in case progression and the additional resources applied to FtP, we are reporting on how case progression forecasts are being tracked. It is a detailed paper, and we would also welcome feedback on this approach to reporting on FtP. Of note is the sustained month on month increase on the number of concerns received in FtP and the potential impact on forecasts. We are indicating an underspend at this point in the year, however we expect this to unwind as the year progresses, although budget variables are likely to fluctuate depending on timing and spend.

Since our last meeting we have completed our [Annual Report and Accounts for 24/25](#). These have now been laid before Parliament and published. A word of thanks to the Audit and Risk Assurance Committee and the board for reviewing drafts and providing feedback, and to our internal team and external stakeholders for their work and collaboration on this process.

We are preparing for our annual renewals cycle which runs from 1 September to 30 November. Social workers are encouraged to complete the 3 requirements (apply to renew, record 2 pieces of continuing professional development (CPD) and pay the registration fee) as early as possible. In our experience some people still tend to leave this to the last minute.

2. Best Interests Assessors (BIA) and Approved Mental Health Professionals (AMHPs) course inspections

We are continuing to prepare for our AMHP and BIA inspections. The first BIA inspection will take place in early October 2025 with AMHP inspections starting early next year.

We have held drop-in sessions with course providers of BIA courses to provide clarity on particular standards where we have received questions or queries and give an opportunity for course providers to ask questions. From the sessions we are developing an FAQ to share with course providers. We are also holding individual meetings in preparation for upcoming inspections to go through our approach and to help us and course providers to prepare for the inspection.

We are developing a video to share with people with lived experience about our approach and the ways in which people can provide feedback to us and drop in sessions will take place this summer with course providers of AMHP courses.

We are developing a feedback form for students to ensure we provide opportunities, noting that students may not actually be on the course at the point in which we inspect.

Work is progressing well, and we are on track for commencing as planned our inspection schedule later this year.

3. Shaping our next organisational strategy (2026-2029)

Work is well underway to develop our next organisational strategy which will see us through to our 10th year of operations. This has included extensive staff consultation, early input from our board, as well as working with members of our National Advisory Forum to understand what has worked well in our current strategy, and to define what our collective ambitions might be for our next three years. The strategic plan will need to take account of the outcome and recommendations of the planned independent review which may have an impact on the timeframe.

4. Digital, Data and Technology

We devoted time in Q1 to really understand the recommendations arising from our external review of digital, data and technology, and to develop a 'roadmap' to deliver the immediate priorities. This will include work to establish and embed data governance, and to ensure data is held and structured in a way that enables future automation of processes and reporting. This will be key to our ability to achieve efficiency improvements. A cross-functional team is in place, and we recently appointed a programme manager, at assistant director level, to lead this complex change programme. They are due to start at the end of August.

5. Shaping Success Together / 2025 Engagement Survey

We launched our programme of cultural and behavioural change, which we are calling "Shaping Success Together", at our all team meeting in June. We have committed to investing in and understanding our current culture, so we can acknowledge what needs to change to allow us to continually improve for our future. Our new behaviours framework aims to build on what works already, so we can continue to strive for excellence in the years to come. It will also make sure that Social Work England continues to be a place people want to work and where they know they can make a contribution that is valued and recognised.

In early July, we shared feedback from our 2025 people engagement survey with the organisation. The outcomes in 2025 are similar to previous years. Our overall 'engagement score' (proportion of positive to total responses to the engagement questions) is 75%, compared to 70% in 2024. Our 'organisational fitness' score (proportion of positive to total

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responses to other question sets) is 69%, compared to 68% in 2024. While the overall picture is positive, we see some consistently low scoring areas notably leadership (47%), tools (42%) and meeting customer needs (47%). The survey feedback will be discussed in teams over the summer, alongside the new behaviours framework, to identify opportunities for improvement.

Our organisational leadership team will be key to the success of Shaping Success Together, and in shifting the low scoring areas in our survey. We have plans in place to deliver an 18-month leadership development programme, with the first session taking place on 23 July.

6. Roadshows

We look forward to engaging more widely on the development of our next strategy through our upcoming roadshow events in October. These events will also spotlight a suite of priority areas that will help shape the future of social work regulation, including the future of CPD, fitness to practise, as well as education and training. All free tickets for the five roadshow events, launched on 2 July, have now been fully booked. A waiting list is in place for tickets that become available. Events will take place in London, Sheffield, Birmingham, Bristol and Newcastle.

7. Education and training standards review

We recently completed a significant programme of external pre-consultation engagement with key stakeholders, to test our proposals for the review of education and training standards ahead of consultation. The events have been well attended and provided helpful feedback to ensure that the standards are in a strong position when we launch the consultation. The consultation, which we expect to launch in September, will encompass proposed changes to our education and training standards and guidance, the new readiness for professional practice guidance, and changes to the relevant rules.

8. Partner Status

Our [partners](#) are independent decision makers or advisers, who are essential to our regulatory processes and decision-making. In Q1, we communicated with our partners about changes we need to make to their terms and conditions, to reflect our understanding of current employment law. We issued new contracts to all partners in May, which will take effect from 1 September. At the time of writing, 77% had signed and returned their new contracts. We continue to monitor take up, and alongside this we are undertaking targeted recruitment to ensure that we maintain sufficient capacity to deliver our regulatory functions.

9. Conclusion

The performance report reflects a good range of activity planned and underway across the organisation and hopefully its new look is close to capturing and presenting information that meets the requirements of the board. We are pleased to have published recently our EDI action plan 25/26 and appointed new students and people with lived experience to our

National Advisory Forum. We are looking forward to roadshows as an opportunity for focused discussion with registrants and stakeholders of key strategic areas relating to the ongoing developments in social work regulation.

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10. Annexes

Annex 1: Chief Executive’s meetings

- CEO Think Ahead
- Secretary General Social Workers Union
- President and VP of the Association of Directors of Children’s Services
- CEOs of the Professional Regulators Body
- CEOs UK and Ireland Social Work and Social Care Regulators
- National Practice Group at DfE
- International Social Work Regulators Network
- Senior Officials at Unison
- Regulated Professionals Advisory Group at DBT
- CEO Skills for Care
- Ministerial Reception at DfE
- Summer Reception for the Centre for Young Lives and Foundations
- Social Worker of the Year judging panels
- Chief Social Worker Adults



Finance and Commercial Update

Agenda Item 9 Paper Ref 06

Paper for the

Social Work England Board

Sponsor

Linda Dale, Executive Director, People and Business Support

Author

Richard Simpson, Head of Finance and Commercial

Date

25 July 2025

Reviewed by

Linda Dale, Executive Director, People and Business Support

This paper is for

Assurance and Noting

Associated Strategic Objective

SO10: Continually develop and improve how we work, ensuring we are a well-run organisation that delivers the right outcomes and provides value for money.

Impact: Risk Type and Appetite

Financial governance - Cautious

Equality Impact Assessment (EIA)

N/A

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1. Summary

This paper provides an update on the following:

- Management accounts for the period ending 30 June 2025
- Recent commercial activity

2. Action required

For discussion and noting.

3. Commentary

Management accounts

A summary set of the management accounts for the year to 30 June 2025 can be found in Annex A. The annual budget and forecast have been updated to reflect the funding included in the recently received grant in aid funding letter from the Department for Education (DfE). This includes additional amounts for practice education and our “change the script” campaign.

Key highlights are set out below.

Year to date revenue expenditure, net of fee income, is £3,445k compared to the budgeted amount of £3,654k, an underspend of £208k. This represents a variance from budget of 5.7%.

This underspend is predominantly due to a shortfall in payroll expenditure as a result of a higher vacancy rate than originally budgeted. With the budget outcome being communicated in early April, and the settlement providing an uplift in our expenditure budget of £5.2m compared with 2024/25, a number of new roles have been created to support delivery of our key priorities for 2025/26. It was always going to be a challenge to mobilise and upscale recruitment quickly.

The management accounts include a forecast for the full year and our current estimate is for an underspend compared to budget of £560k, a variance of 3.3%. As with our year to date position the main area of underspend is expected to be payroll expenditure. We are working over the summer to ensure that we can target the forecast underspend towards our strategic priorities and goals. To support effective in-year budget planning and management, the forecast includes an assumption of an average annual pay award for our employees of 3.25% payable from 1 September, which is line with civil service guidelines, and is subject to approval by the DfE. It also includes an assumption regarding additional income that would be raised by an increase in the fees paid by social workers and applicants to join our register. A decision on fees is expected soon, following the recent consultation.

Year to date capital expenditure is close to budget, with a small underspend compared to budget of £18k. The forecast for the full year is for an underspend of £51k, and as with revenue expenditure, we will explore opportunities to increase expenditure in this area.

Commercial update

Since the last board meeting we have recruited 2 commercial officers, 1 on a permanent contract and the second on a fixed term contract for a period of 18 months. We have one remaining vacancy for a part time business support officer and expect to commence recruitment for this vacancy shortly.

As reported previously to the board we have been planning a procurement of a second legal advocacy provider. Approval to increase the value of expenditure under our existing legal services contract, while this procurement process is underway, forms part of the agenda for this meeting.

4. Conclusions and/or Recommendations

N/A

5. Annexes

Annex A – management accounts

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5. Annexes

Annex A – Management accounts at 30 June 2025

Income and Expenditure Statement

Directorates	Year to date amount	Year to date budget	Year to date £ variance	Year to date % variance	Full year forecast	Full year budget	Full year £ variance	Full year % variance
Fee income	(2,547,496)	(2,550,431)	(2,935)	0.1%	(11,241,726)	(11,241,726)	(0)	0.0%
Executive Leadership Team								
Wages & Salaries	147,904	139,339	(8,565)	(6.1%)	577,361	571,431	(5,929)	(1.0%)
Support	8,109	10,000	1,891	18.9%	40,000	40,000	(0)	(0.0%)
Total	156,013	149,339	(6,674)	(4.5%)	617,361	611,431	(5,929)	(1.0%)
People & Business Support								
Wages & Salaries	753,950	852,491	98,541	11.6%	3,727,740	3,817,597	89,857	2.4%
Support	1,292,648	1,161,779	(130,869)	(11.3%)	3,326,549	3,464,470	137,921	4.0%
Total	2,046,598	2,014,270	(32,329)	(1.6%)	7,054,289	7,282,067	227,778	3.1%
Regulation								
Wages & Salaries	1,667,582	1,880,972	213,391	11.3%	7,275,582	7,713,633	438,051	5.7%
Support	1,428,919	1,445,469	16,551	1.1%	9,473,983	9,433,691	(40,292)	(0.4%)
Total	3,096,500	3,326,441	229,941	6.9%	16,749,565	17,147,325	397,759	2.3%
Professional practice and external eng.								
Wages & Salaries	604,591	610,806	6,214	1.0%	2,669,008	2,624,835	(44,174)	(1.7%)
Support	89,618	103,630	14,012	13.5%	675,079	660,054	(15,025)	(2.3%)
Total	694,209	714,436	20,226	2.8%	3,344,087	3,284,889	(59,199)	(1.8%)
Total Expenditure	5,993,321	6,204,486	211,165	3.4%	27,765,302	28,325,712	560,409	2.0%
Net Expenditure	3,445,824	3,654,054	208,230	5.7%	16,523,577	17,083,986	560,409	3.3%

Balance Sheet

	Cost £	Depreciation £	N.B.V £
Fixed Assets			
Buildings	1,264,299	(1,010,084)	254,215
Right of Use Asset	1,126,455	(562,026)	564,429
IT Equipment	1,212,921	(965,173)	247,748
Fixtures & Fittings	336,397	(320,752)	15,644
Intangible Assets	11,389,358	(4,076,180)	7,313,178
Assets under development	1,398,448	0	1,398,448
	16,727,878	(6,934,215)	9,793,662
Current Assets			
Prepayments			350,915
Bank			2,914,544
Debtors			27,927
			3,293,386
Current Liabilities			
Accruals			(2,794,913)
Deferred Income			(3,926,552)
Payables			(929,170)
			(7,650,636)
Working Capital (Current Assets less Current Liabilities)			(4,357,250)
Non-Current Liabilities			
Lease liabilities			(635,537)
Lease interest			(77,223)
Provisions			(1,037,964)
			(1,750,724)
Total Assets & Liabilities			3,685,688
Taxpayers equity			3,685,688

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Quarter 1 Performance 2025/26

Agenda Item 10 Paper Ref 07

Paper for the

Social Work England Board

Sponsor

Colum Conway, Chief Executive

Author

Neil Smith-McOnie, Head of Business Planning and Improvement

Date

25 July 2025

Reviewed by

Executive Leadership Team

This paper is for

Discussion and Advising

Associated Strategic Objective

SO10: Continually develop and improve how we work, ensuring we are a well-run organisation that delivers the right outcomes and provides value for money.

Impact: Risk Type and Appetite

Strategic approach - Open

Equality Impact Assessment (EIA)

N/A

1. Summary

This report presents our performance for Q1 of 2025/26 with regards to our business plan objectives and our key performance indicators (KPIs). We report on this quarterly.

This is the first time we have reported on our 2025/26 business plan objectives and KPIs. Some of our KPIs are new this year, or have been revised.

We have significantly changed the format of our performance report in order to remove elements of repetition and make performance, impact, concerns and risks clearer and easier to scrutinise. We would welcome feedback from the board on this new approach, which we will continue to refine and develop in the coming months.

We also include – at paper 07a – a detailed fitness to practise performance report. Given the complexity and breadth of fitness to practise reporting, and the additional investment being made in this area to address backlogs and improve performance, we intend to provide a more detailed description of fitness to practise performance alongside our quarterly performance reports throughout 2025/26.

From Q2 2025/26, we will also include a supporting document describing how each of our KPIs is calculated to provide the board with transparency on measurement.

Quarter 1 Performance report 2025/26



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Executive summary



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Executive summary

Business plan progress

We are on track to deliver all our business plan objectives.

We launched phase 2 of the 'Change the Script' campaign as we continue to look to positively reframe the narrative that surrounds social work as a highly trained, skilled and regulated profession. This included publication of a new short documentary film, a guide on how to talk and write about social work and a stakeholder toolkit.

We launched our new behaviours framework at our all-team meeting at the end of June.

We completed the fees consultation and presented outcomes to the board.

We submitted amended registration rules to the Secretary of State in June.

Performance update

We are experiencing a significant and sustained increase in triage referrals. This is absorbing extra resources brought in to address the backlog and cancelling out performance improvements we made in Q1. This will impact triage performance during 2025/26.

We achieved 16 of our 18 KPIs.

FIN1 Forecast year-end variance to budget: Current financial forecasts indicate an end-year underspend of 3.3%. This is due predominantly to projected underspends within the payroll budget. Over the summer we will rebalance our budget plan to ensure that the available resources can be fully utilised in support of our strategic priorities and goals.

We did not achieve KPI *P2 Sickness absence over last 12 months*. This is a result of individual circumstances that we are managing on a 1:1 basis.

Business plan progress



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Business plan progress overview

Business plan progress

ID	Business plan objective description	RAG
1.1	Build trust and confidence in social work and in regulation by engaging with the profession, stakeholders, people with lived experience and the public.	Green
1.2	Embed our research function to enhance and inform our understanding of the profession, and to positively impact public policy through evidence-based advice and insight.	Green
1.3	Reflect on the learning from our recent review of continuing professional development (CPD) to advance a more comprehensive and valued approach to our CPD requirements, with staged implementation.	Green
1.4	Refine and develop our approach to social work education and training, working in partnership with providers and the social work sector to improve the consistency and quality of courses, and the readiness of graduates for professional practice.	Green
1.5	Build a more in-depth knowledge of the practice education landscape to inform and support the critical role of practice educators, including exploring potential regulatory levers.	Green
2.1	Take action to improve timeliness in our triage, investigations and case examiner functions whilst maintaining decision making quality and fairness.	Green
2.2	Use the additional funding to take action to address the hearings backlog.	Green

Business plan progress overview

Business plan progress

ID	Business plan objective description	RAG
2.3	Identify and realise further efficiency and effectiveness opportunities in our hearings and case review functions.	Green
3.1	Develop and publish a new strategy for 2026 to 2029, supported by an aligned and strengthened approach to annual business planning and performance management.	Green
3.2	Finalise and start to implement our new digital, data and technology strategy.	Green
3.3	Adopt and embed our new behaviours framework.	Green

Strategic theme: Prevention and impact

Communications, engagement and insight

Business plan progress

1.1: Build trust and confidence in social work and in regulation by engaging with the profession, stakeholders, people with lived experience and the public.

Quarter	Q1	Q2	Q3	Q4
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RAG



Activity and assurance

Change the Script

- We completed Phase 2 of the Change the Script campaign. This included:
 - the publication of a new short documentary film
 - a guide on how to talk and write about social work
 - a stakeholder toolkit

Public consultations

- We completed the fees consultation and analysis and presented outcomes to the board. We submitted our proposals to the Treasury and DfE in June, as required.
- We completed the registration rules consultation analysis and submitted our proposed amended rules to the Secretary of State in June.
- All other consultation preparation is on track.

Roadshow events

- Planning for 5 roadshow events in Q3 is on track. We will hold these in London, Bristol, Birmingham, Newcastle and Sheffield.

Outcome and impact

- We received over 70 pieces of media coverage for Change the Script phase 2, as well as positive feedback from several stakeholders, including the NSPCC and Care Knowledge.

Changes to risk, any further concerns

- No change.

Key planned activity next quarter

- We will evaluate Change the Script Phase 2 to measure short-term impact and inform potential future activity.
- Tickets for roadshow events will be available for free in July.
- We are preparing for future consultations on communicating online, revisions to our fitness to practise guidance.

Strategic theme: Prevention and impact

Policy and strategy

Business plan progress

1.2: Embed our research function to enhance and inform our understanding of the profession, and to positively impact public policy through evidence-based advice and insight.

Quarter	Q1	Q2	Q3	Q4
RAG				

Activity and assurance

- We received the draft reports from both pieces of AI research and the practice education research, as well as early findings from our seriousness research.
- We have been working with the researchers to refine the reports and are confident that these reports are in line with our desired objectives on each topic.
- We have commenced work to help define our approach to determining the impact of our published research, drawing on a combination of case studies, Google Analytics and stakeholder engagement (both internal and external).

Outcome and impact

- We shared high level findings from the practice education research with our Practice Education Development Group, which was well received.

Changes to risk, any further concerns

- No change.

Key planned activity next quarter

- We will finalise all four research reports and prepare accompanying plans for external release and associated outreach and engagement.
- We will begin to draft our research strategy, and advance plans to monitor the impact of our published research.

Strategic theme: Prevention and impact

Policy and strategy

Business plan progress

1.3: Reflect on the learning from our recent review of continuing professional development (CPD) to advance a more comprehensive and valued approach to our CPD requirements, with staged implementation.

Quarter	Q1	Q2	Q3	Q4
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RAG



Activity and assurance

- We have agreed our plan for the year ahead for our CPD work which will build on the findings from phase 1 and help us prepare proposals in Q4.
- We presented our plan to the policy committee and explored in more depth what their vision for the future of CPD looks like. We received positive feedback from the policy committee on our plan.
- We have set up a working group of relevant colleagues from across the organisation to deliver the activities.

Outcome and impact

- Policy committee input has helped inform our approach.

Changes to risk, any further concerns

- No change.

Key planned activity next quarter

- Work outlined in the plan will commence in Q2, beginning with preparing for the roadshow events (see Business Plan progress 1.1) alongside a broader engagement plan.

Strategic theme: Prevention and impact

Policy and strategy

Business plan progress

1.4: Refine and develop our approach to social work education and training, working in partnership with providers and the social work sector to improve the consistency and quality of courses, and the readiness of graduates for professional practice.

Quarter	Q1	Q2	Q3	Q4
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RAG



Activity and assurance

Education landscape report

- We completed engagement and analysis, including detailed review of emerging trends from our first full cycle of inspections of social work courses.
- We are now drafting the report. We have adjusted timelines due to staff absence and are on track to publish in September.

Education and training standards

- We completed a significant programme of external pre-consultation engagement, including testing with our Education and Training Advisory Forum (ETAF).

Approved Mental Health Professionals (AMHP) and Best Interests Assessors (BIA)

- We are preparing for AMHP and BIA inspections, focussing on engagement with course providers and ensuring processes are in place to support this work.
- We remain on track to commence inspections, as planned:
 - BIA inspections commence in Q3; AMHP in Q4

Readiness for professional practice

- We further developed our draft guidance. We tested this internally with colleagues and received positive feedback.

Outcome and impact

- Input from key advisory groups, such as the ETAF has helped refine and strengthen our approach to key pieces of work, including readiness for professional practice and the education and training standards.

Changes to risk, any further concerns

- No change.

Key planned activity next quarter

- We will present our education and training standards proposal for sign-off in September, before launching consultation.
- We will publish the education landscape report.

Strategic theme: Prevention and impact

Policy and strategy

Business plan progress

1.5: Build a more in-depth knowledge of the practice education landscape to inform and support the critical role of practice educators, including exploring potential regulatory levers.

Quarter	Q1	Q2	Q3	Q4
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RAG



Activity and assurance

- Following confirmation of additional resource from DfE, we have moved ahead with our project plan to advance our understanding of the practice education landscape and consider potential regulatory levers to support this role in the social work profession.
- We progressed the recruitment of the necessary resource to help deliver the work.
- We progressed the delivery of research related to the size and shape of practice education across England and explored our options for data collection with Registration and IT.
- We shared high-level findings from our research with the practice education development group.

Outcome and impact

- We gained support from the practice education development group for a renewed focus on the critical role of practice educators as part of this work.

Changes to risk, any further concerns

- No change.

Key planned activity next quarter

- We'll finalise our research on practice education and prepare for publication.
- We will also engage with regulators in devolved nations to learn from their approach, alongside engagement activities to understand shape of practice education workforce.

Strategic theme: Regulation and protection

Fitness to practise (FtP)

Business plan progress

2.1: Take action to improve timeliness in our triage, investigations and case examiner functions whilst maintaining decision making quality.

Quarter	Q1	Q2	Q3	Q4
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RAG



Activity and assurance

- In triage and investigations we introduced:
 - a service delivery plan
 - a balanced scorecard
 - improved approaches to performance management
 - a new focus on employee engagement
- We recruited additional temporary resources to support the triage function.
- The process review project (to improve timeliness through reengineering processes in triage and investigations) is progressing well.
- We have drafted new guidance to streamline requests for information at different stages of both triage and investigations.
- We have had some challenges with throughput in the case examination team due to vacancies, but we have stayed on track with timeliness and thresholds for progression.

Outcome and impact

- The number of triage decisions we made in Q1 significantly increased compared to performance across 24/25.

Changes to risk, any further concerns

- The number of triage referrals we received has increased significantly for 7 consecutive months (averaging 23% per month more than modelled). This is:
 - absorbing extra resources brought in to address the backlog, and
 - cancelling out Q1 performance improvements.
- It will impact on triage performance for the year.

Key planned activity next quarter

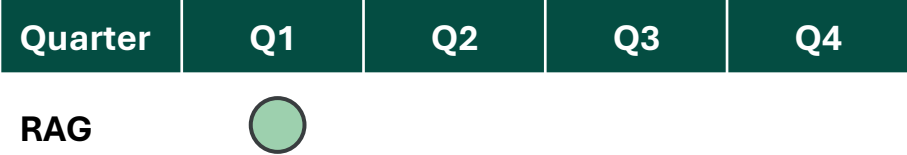
- We will recalculate our performance forecasts and review use of resources within triage.
- As part of the process review project we will:
 - visit other regulators to review good practice.
 - bring in management consultancy to assist with re-engineering processes.

Strategic theme: Regulation and protection

Fitness to practise

Business plan progress

2.2: Use the additional funding to take action to address the hearings backlog.



Activity and assurance

- We have agreed the listing schedule for Q1-Q3.
- We are accelerating the number of cases being progressed by our external legal provider.
- We are finalising plans with our external legal provider to review the post-case examination caseload to help increase case progression over the next 2 years. Recruitment to assist with this is underway.
- We are reviewing the requirements for additional resource in hearings as we start to scale up activity from Q4.
- More information on this objective, along with a detailed picture of fitness to practise performance is in the accompanying report: Fitness to practise performance Q1 2025/26

Outcome and impact

- Our external legal provider is now undertaking increased activity.

Changes to risk, any further concerns

- There are some risks with the capacity of our external legal provider to upscale and deliver significantly more activity in Q2-4. We are actively managing this with them.

Key planned activity next quarter

- We will commence post-case examination work – reviewing and prioritising cases for progression.
- See attached: Fitness to practise performance Q1 2025/26.

Strategic theme: Regulation and protection

Fitness to practise

Business plan progress

2.3: Identify and realise further efficiency and effectiveness opportunities in our hearings and case review functions.

Quarter	Q1	Q2	Q3	Q4
RAG				

Activity and assurance

- Our external legal provider has drafted guidance for consensual panel disposal. We will carry out a public consultation on this in Q3.
- We have evaluated the 2-person panel pilot and, based on this, we will use 2-person panels in final hearings when we identify suitable cases.
- We continue to progress our work to develop an in-house advocacy service, with recruitment for the team now underway.
- More information on this objective, along with a detailed picture of fitness to practise performance is in the accompanying report: Fitness to practise performance Q1 2025/26.

Outcome and impact

- Delivery of the activities related to this objective will provide savings which will allow us to redistribute budget to enable FtP case progression.

Changes to risk, any further concerns

- No change to risk of delivering this objective.

Key planned activity next quarter

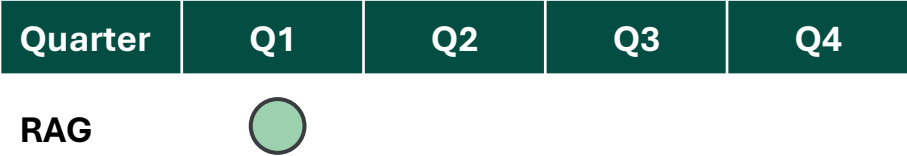
- We will continue to prepare for consultation on consensual panel disposal.
- We are on track to recruit case presenters and a business support officer for the new internal advocacy team.

Strategic theme: Delivery and Improvement

Policy and strategy

Business plan progress

3.1: Develop and publish a new strategy for 2026 to 2029, supported by an aligned and strengthened approach to annual business planning and performance management.



Activity and assurance

New strategy

- We carried out a significant programme of internal engagement on the vision for our next strategy, including sessions with each individual directorate and at the All Team Day in June.
- We continue to draft the next strategy alongside internal consultation on emerging themes.

Business plan review

- We procured a supplier partner to support the review of our business planning and performance management processes.
- Throughout June our partner engaged with numerous key stakeholders to inform the review.
- This work is on track to conclude in September as planned, informing the Green RAG status.

Outcome and impact

- Internal engagement has been instrumental in informing the structure and emerging priorities of the next strategy.

Changes to risk, any further concerns

- No change

Key planned activity next quarter

- Further drafting of the next strategy along with consultation with the board and the National Advisory Forum in July.
- Consolidating the learning and intelligence we have gathered in our business plan review and commencing the design elements of our new approach.

Strategic theme: Delivery and Improvement

Digital, data and technology (DDaT)

Business plan progress

3.2: Finalise and start to implement our new digital, data and technology strategy

Quarter	Q1	Q2	Q3	Q4
RAG				

Activity and assurance

- We have reviewed the recommendations arising from our external DDaT review and agreed our year 1 ‘roadmap’ to deliver the immediate priorities.
- These key priorities for year 1 include:
 - establishing data governance
 - implementing a new approach to user research, so users needs can be fully understood and embedded into all future digital development
 - improving data security
 - foundational work to ensure data is held and structured in the best way within our case management system, to support process automation and improve the quality of reporting data
 - reviewing the way we resource our DDaT functions
- We have established a programme team.
- We have advertised some additional roles that we need to deliver the initial priorities in our roadmap.

Outcome and impact

- It is too early to report impact. In Q2 we will be developing progress and outcome measures for our year 1 priorities.

Changes to risk, any further concerns

- No emerging risks, or changes to corporate risk, identified at this stage.

Key planned activity next quarter

- Appoint a programme manager and other advertised roles.
- Undertake more detailed planning to ensure we are clear about outcomes, resourcing and interdependencies within this complex programme of work.
- Progress delivery of year 1 actions and draft our DDaT strategy.

3.3: Adopt and embed our new behaviours framework

Quarter	Q1	Q2	Q3	Q4
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RAG



Activity and assurance

- We developed and initiated our plan to launch and embed the new behaviours framework during 2025/26 and future years. We are calling this programme ‘Shaping Success Together’.
- We launched the framework at our all-team meeting at the end of June. We conducted group work at the all-team meeting. Feedback from this now informs the implementation plan.
- We agreed the content and timing of our leadership development programme and appointed an external provider to deliver the first sessions in Q2.
- We planned procurement of external provider(s) to deliver the longer-term elements of our leadership programme, including 360 feedback, coaching support and structured learning.

Outcome and impact

- We will develop a clear set of measures to track progress and impact in Q2.

Changes to risk, any further concerns

- No emerging risks, or changes to corporate risk, identified at this stage.

Key planned activity next quarter

- We will conduct our first two leadership development programme sessions.
- We will share feedback from our 2025 people engagement survey.
- We will discuss the behaviours framework and engagement survey results within teams and identify areas for learning.

Quarterly performance report for April – June 2025



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KPI performance overview

Performance update

ID	KPI	Target	RAG
EQA1	Time taken from end of course inspection to regulator decision	≤ 60 working days (median)	46
REG1	Time taken to approve UK registration applications	≤ 10 working days (median)	4
REG2	Time taken to approve restoration applications	≤ 20 working days (median)	17
REG3	Time taken to answer emails	≤ 5 working days (median)	4
REG4	Time taken to answer phone calls	≤ 8 minutes (median)	3
FTP1	Time taken to complete triage	≤ 26 weeks (median) by March 2026 Q1: ≤ 38 weeks (median)	29
FTP2	Time taken to conclude investigation	≤ 54 weeks (median) by March 2026 Q1: ≤ 66 weeks (median)	63
FTP3	Time taken to complete case examination process	≤ 12 weeks (median)	12
FTP4	Time from receipt of concern to final fitness to practise outcome at case examination	≤ 92 weeks (median) by March 2026 Q1: ≤ 104 weeks (median)	104
FTP5	Time from receipt of concern to final fitness to practise outcome at hearing	No target. Weeks (median)	231

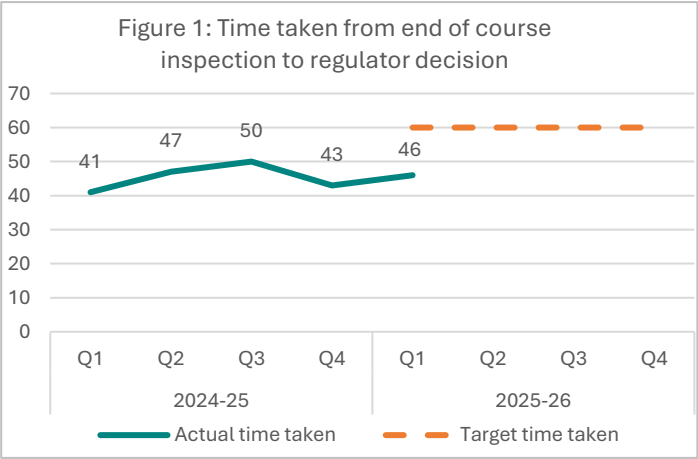
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KPI performance overview

Performance update

ID	KPI description	Target	RAG
FTP6	Time taken to approve interim orders	≤ 20 working days (median)	18
IG1	Time taken to complete FOI requests	≥ 90% within statutory deadline	100%
IG2	Time taken to complete subject access requests	≥ 90% within statutory deadline	100%
C1	Corporate complaints response time	≥ 80% within 20 working days	92%
P1	Retention rate	≥ 80%	89%
P2	Sickness absence over last 12 months	≤ 7.8 days per person	8
FIN1	Forecast year-end variance to budget	+/- 1.5%	3.3%
IT1	System availability excluding planned outages	≥ 99%	100%

EQA1: Time taken from end of course inspection to regulator decision
Target: ≤ 60 working days (median)



Commentary

- We achieved this KPI.
- We made decisions on 12 courses from 7 course providers.

Changes to risk, any further concerns

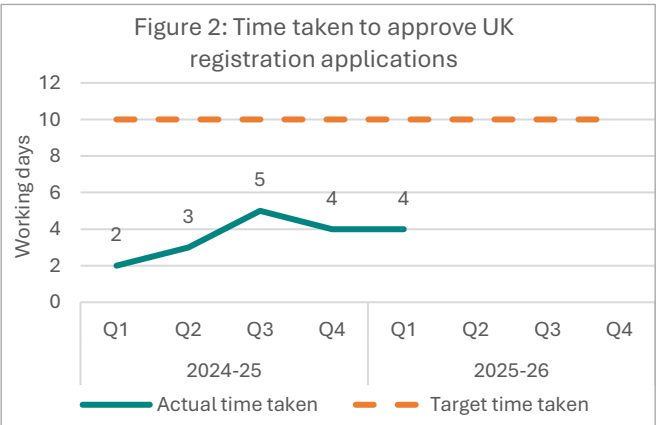
- No change

Strategic theme: Regulation and protection

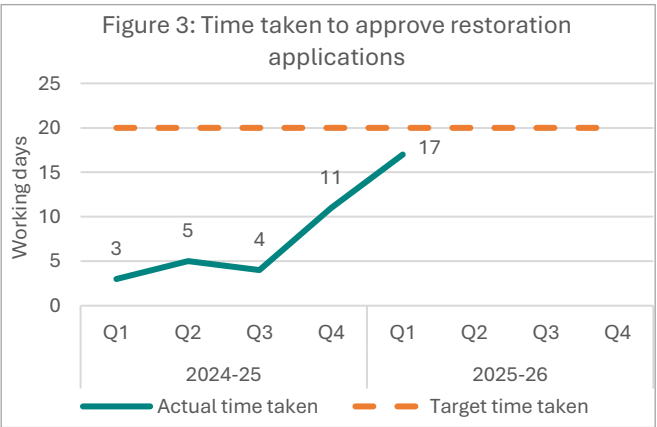
Applications to join the register

Performance update

REG1: Time taken to approve UK registration applications
Target: ≤ 10 working days (median)



REG2: Time taken to approve restoration applications
Target: ≤ 20 working days (median)



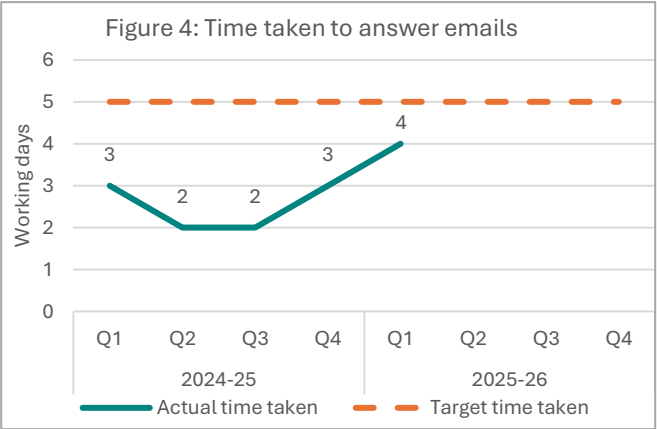
Commentary

- We achieved both KPIs in this quarter.
- We received 986 UK applications this quarter compared to 712 in Q1 2024/25.
- We received 151 restoration applications compared to 192 in Q1 2024/25.
- Although REG2 was within target, 17 days constitutes a significant increase on the time taken to approve applications by comparison to all four quarters of last year.
 - Timeliness was affected by staff absence and an increase in misuse of title cases.
 - We have reviewed the restoration process and will implement improvements in Q2. Specifically, we will simplify the updating skills and knowledge form.

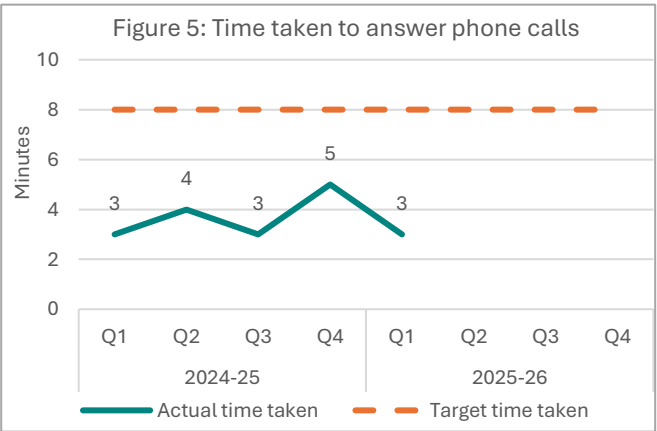
Changes to risk, any further concerns

- Q2 is a peak time for UK applications, volumes of applications and staffing capacity are the main risk factors.
- Annual renewal will commence on 1 September.

REG3: Time taken to answer emails
Target: ≤ 5 working days (median)



REG4: Time taken to answer phone calls
Target: ≤ 8 minutes (median)



Commentary

- We achieved both KPIs.
- We received 3,982 calls this quarter compared to 4,328 in Q1 last year.
- We received 7,222 emails this quarter compared to 8,653 in Q1 last year.

Changes to risk, any further concerns

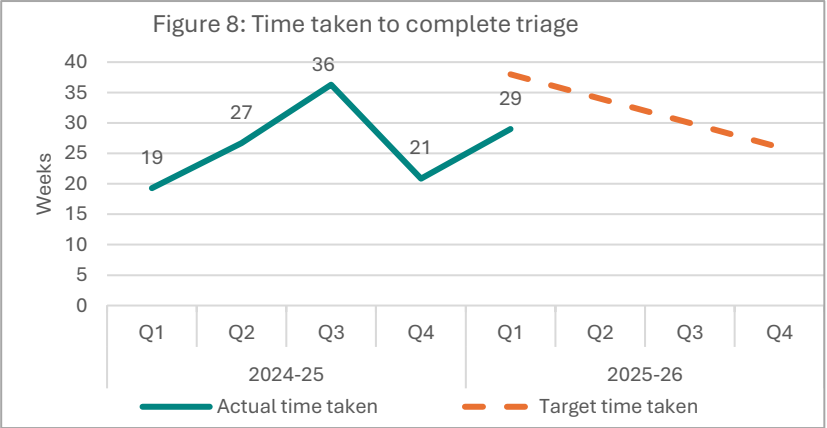
- Annual registration renewals opens on 1 September 2025. This will lead to an increase in calls and emails to the contact centre. As in previous years, we are in the process of recruiting additional staff to assist during the renewal period.

Strategic theme: Regulation and protection

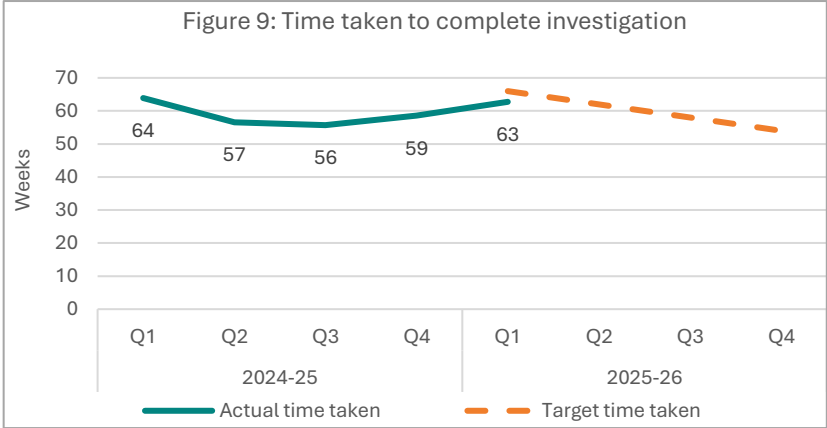
Fitness to practise KPI overview

Performance update

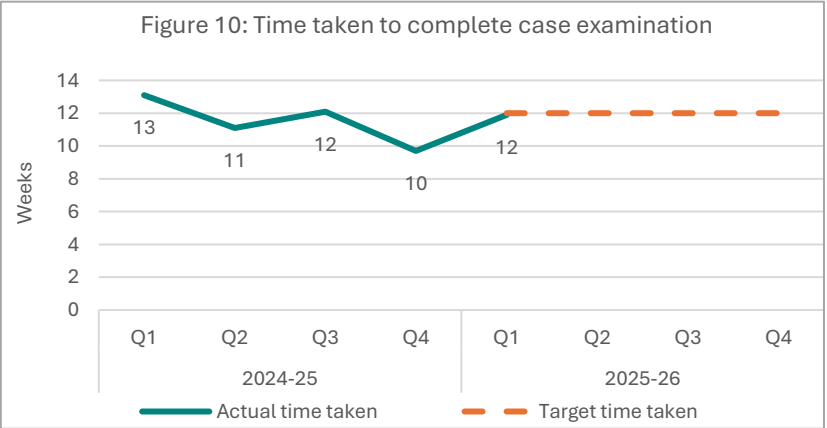
FTP1: Time taken to complete triage
Target: ≤ 26 weeks (median) by March 2026.
Q1 target: ≤ 38 weeks (median)



FTP2: Time taken to complete investigation
Target: ≤ 54 weeks (median) by March 2026.
Q1 target: ≤ 66 weeks (median)



FTP3: Time taken to complete case examination
Target: ≤ 12 weeks (median)



Commentary

- Time taken to complete triage and investigations is tracking better than Q1 target in both services.
- There will be volatility in FTP1 during 2025/26 as the triage backlog is worked through, and due to the significant increase in referrals now being received.
- There is a recruitment and induction plan to fill existing vacancies in case examinations.
- In case examinations there is a focus on quality and consistency, and we will continue to embed the new decision-making framework.

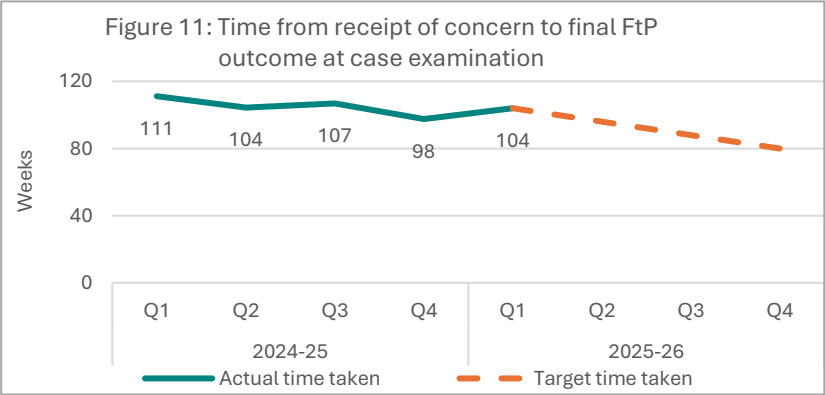
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Strategic theme: Regulation and protection

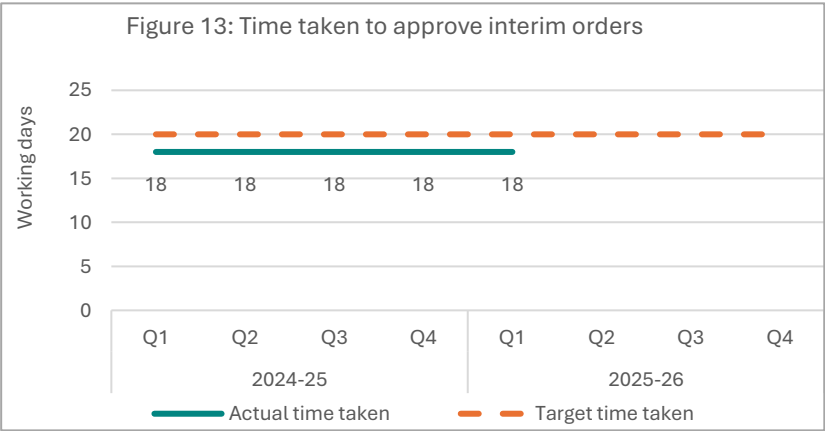
Fitness to practise KPI overview

Performance update

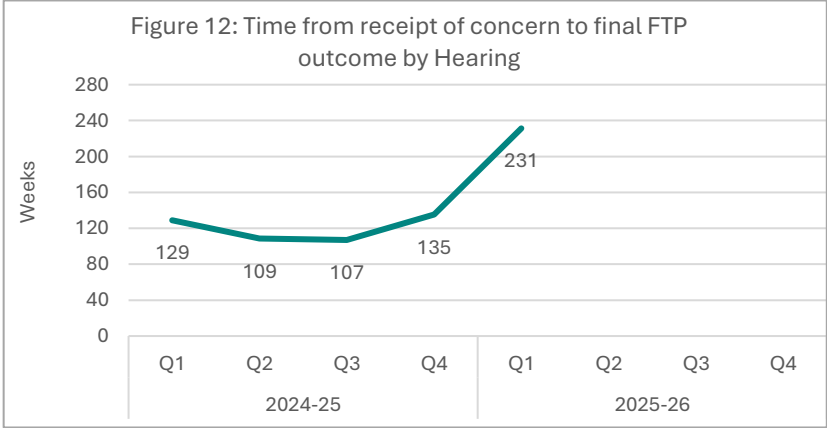
FTP4: Time from receipt of concern to final fitness to practise outcome at case examination
Target: ≤ 92 weeks (median) by March 2026.
Q1 target: ≤ 104 weeks (median)



FTP6: Time taken to approve interim orders
Target: ≤ 20 working days (median)



FTP5: Time from receipt of referral to final fitness to practise outcome at hearing

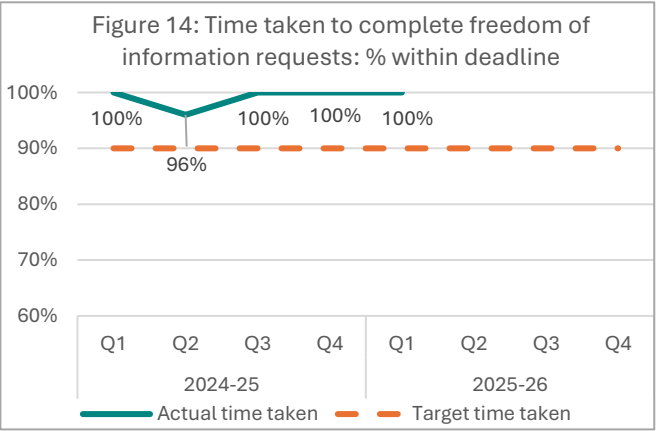


Commentary

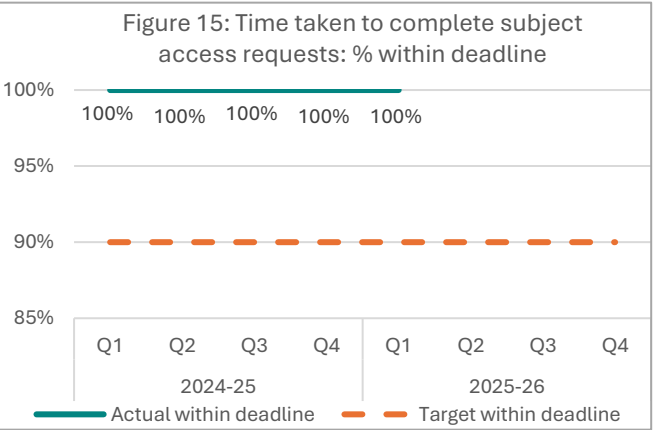
- We continue to work closely with our external legal provider to use available financial resources to progress as many cases for hearing as possible.
- Time taken from receipt of concern to final outcome at case examination will be affected by the variable age of the case load throughout 2025/26. As older cases are concluded at triage and investigations, then this impacts on FTP4. Timeliness is also affected by the limited capacity in the hearings schedule to conclude cases.
- Interim order performance remains stable against the KPI.

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IG1: Time taken to complete FOI requests
Target: ≥ 90% within deadline



IG2: Time taken to complete subject access requests
Target : ≥ 90% within deadline



Commentary

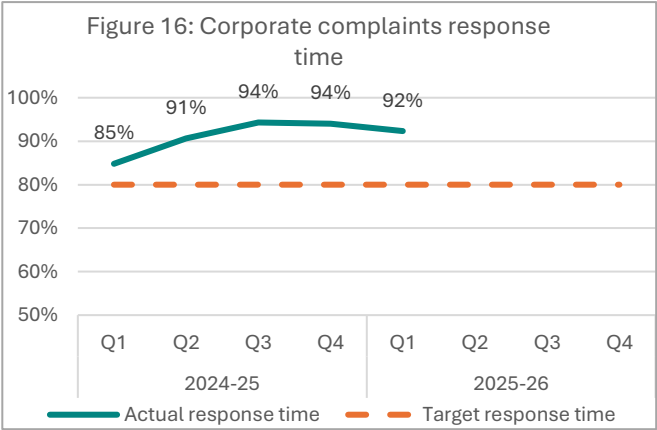
- We met all deadlines for both Subject Access Requests and Freedom of Information requests. Nothing further to note.

Changes to risk, any further concerns

- No change

C1: Corporate complaints response time

Target: $\geq 80\%$ within 20 working days



Commentary

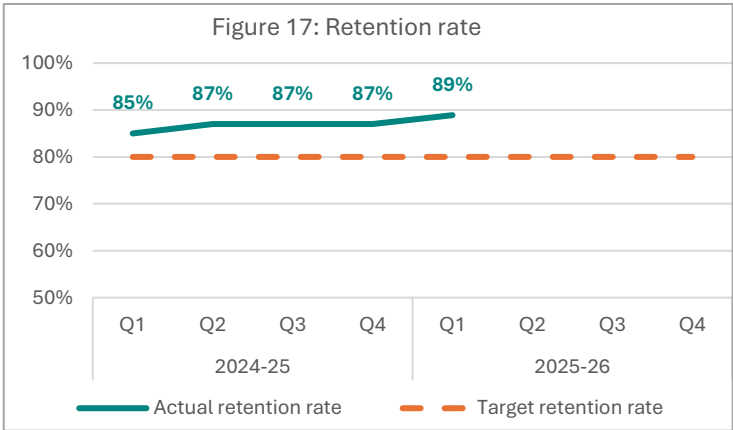
- We achieved this KPI, nothing further to note.

Changes to risk, any further concerns

- No change

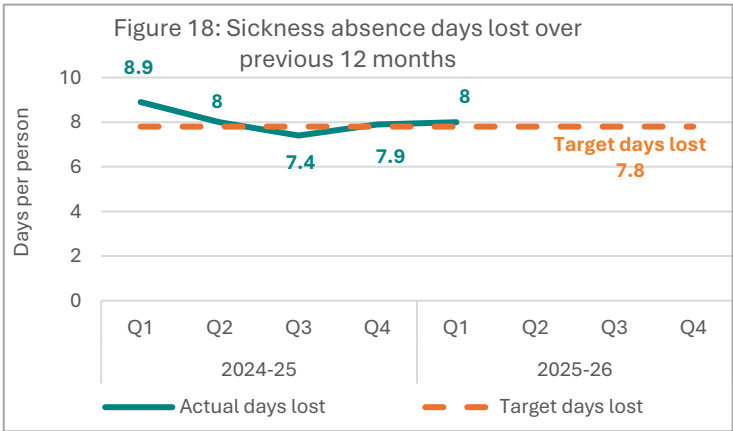
P1: Retention rate

Target: $\geq 80\%$



P2: Sickness absence over last 12 months

Target : 7.8 days



Commentary

Staff retention

- We achieved our KPI for staff retention.

Sickness absence

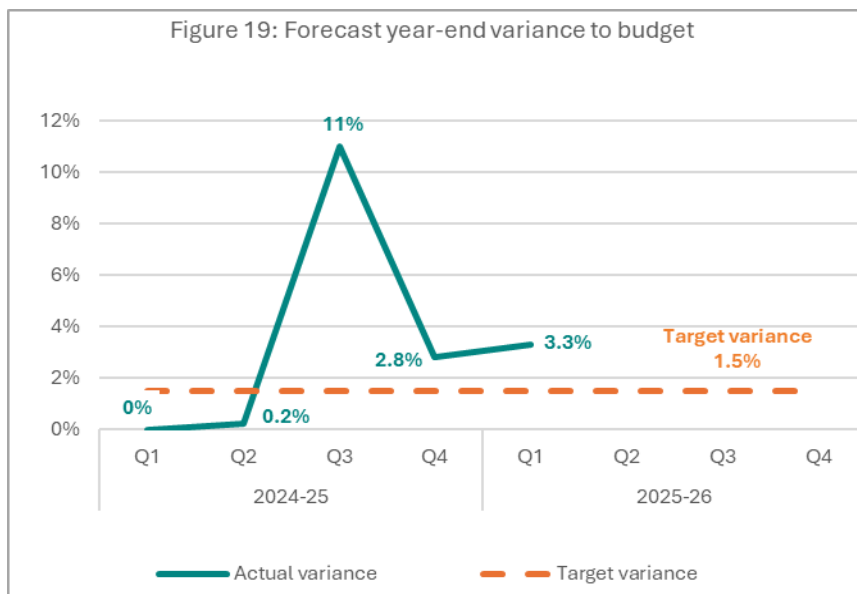
- During Q1, we lost 407 days due to sickness absence, down from 617 in the previous quarter.
- The rolling 12-month sickness absence KPI gives a longer-term perspective on sickness absence. After climbing in Q4, it has begun to stabilise in Q1 and is currently close to the target level.
- The detailed reasons for the absences are understood and we are working closely with individuals and their managers.

Changes to risk, any further concerns

- Our assessment is that our corporate risk in relation to people capacity and capability remains stable.

FIN1: Forecast year-end variance to budget

Target: +/- 1.5%



Commentary

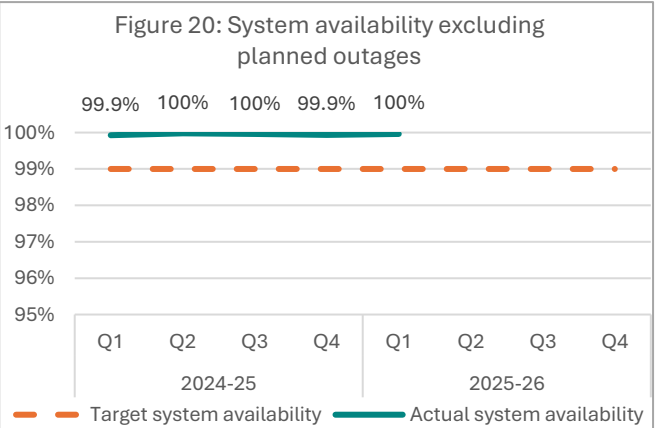
- Our **full year-to-date expenditure**, net of fee income, is £208k lower than budget, a variance of 5.7%. This variance is predominantly due to an underspend in our payroll budget as we recruit to a number of new roles. With the budget outcome being communicated in early April, and the settlement providing a £5.2m uplift compared with 2024/25, it was always going to be a challenge to mobilise and upscale recruitment quickly.
- Our **current full year forecast** suggests, without intervention, an underspend of £560k (a variance of 3.3%). As with the year-to-date position this is predominantly due to underspends within the payroll budget. Over the summer we will be re-balancing our budget plan to ensure that the available resources can be fully utilised in support of our strategic priorities and goals.

Changes to risk, any further concerns

- The key areas of risk to our current forecast are:
 - If our external legal provider is unable to recruit additional resource, there may be inadequate capacity to support our planned level of activity for the rest of the year. Currently, the provider is confident.
 - Any material delay in the recruitment of staff vacancies would reduce payroll expenditure.
 - If a smaller number of partners than expected transfer to the new terms and conditions ('worker' status), this may affect our ability to deliver our operational plans.
- We will review the assumptions underlying our forecast each month and adjust where appropriate.
- Separate to this, we also intend in Q2 to review our corporate risk in relation to financial resourcing.

IT1: System availability excluding planned outages

Target: $\geq 99\%$



Commentary

- We achieved this KPI, nothing further to note.

Changes to risk, any further concerns

- No change

Annex A

Q1 2025-26 performance data



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Education and training

Performance data

Education and training		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Median time taken from end of course inspection to regulator decision (working days)	2025-26	N/A	38	54									
	2024-25	41	30	42	47	38	47	50	56	61	43	37	42
Time taken for report to be written and agreed after inspection end date	2025-26	N/A	25	30									
	2024-25	27	25	28	28	29	29	36	32	30	30	22	29
Time taken for the regulator decision after final report sent to regulator	2025-26	N/A	3	14									
	2024-25	5	3	5	10	6	8	8	8	5	2	8	4
Number of course inspections decisions made	2025-26	0	7	5									
	2024-25	10	8	9	13	4	12	15	5	9	6	7	3
Number of BIA reapprovals decisions made	2025-26	0	0	0									
	2024-25	0	0	0	0	0	0	0	0	0	0	0	0
Number of AMHP reapprovals decisions made	2025-26	0	0	0									
	2024-25	0	0	0	0	0	0	0	0	0	0	0	0
Number of approvals decisions made (including AMHP & BIA approvals)	2025-26	0	7	5									
	2024-25	4	3	3	6	2	3	4	2	4	3	0	1

Registration

Performance data

Registration			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Number of registered social workers	2025-26	105,007	105,337	105,454										
	2024-25	103,000	103,133	103,353	104,270	105,025	105,814	106,395	105,625	103,893	104,351	104,594	104,857	
Number of social workers joining the register	2025-26	275	380	280										
	2024-25	245	198	332	966	812	946	843	378	515	479	267	319	
Number of social workers leaving the register	2025-26	123	49	161										
	2024-25	103	65	109	48	56	157	263	1,186	2,216	16	23	55	
Number of new registration applications received	All applications	2025-26	349	457	521									
		2024-25	298	255	580	1,356	976	1,569	677	542	285	411	283	525
	UK graduates	2025-26	235	338	413									
		2024-25	139	122	451	1,221	858	1,442	535	431	190	312	172	392
	Overseas graduates	2025-26	114	119	108									
		2024-25	159	133	129	135	118	127	142	111	95	99	111	133
Median time taken to approve registration applications (working days)	All applications	2025-26	5	4	4									
		2024-25	8	12	2	3	3	4	7	3	4	5	8	3
	UK graduates	2025-26	5	4	4									
		2024-25	2	2	1	2	2	4	6	2	3	5	6	2
	Overseas graduates	2025-26	12	20	17									
		2024-25	65	48	35	26	21	23	19	15	21	19	17	19
Number of restoration applications received	2025-26	57	42	52										
	2024-25	59	61	72	60	49	71	62	85	526	101	72	67	

Registration

Performance data

Registration		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Median time taken to approve restoration applications (working days)	2025-26	15	18	15									
	2024-25	3	3	2	3	7	5	5	6	4	9	12	17
Number of misuse of title cases opened	2025-26	17	11	7									
	2024-25	9	4	10	4	3	6	11	7	25	18	22	19
Number of misuse of title cases closed	2025-26	24	22	19									
	2024-25	14	7	5	12	8	8	1	9	18	4	5	11
Median time taken to conclude misuse of title cases (working days)	2025-26	22	14	12									
	2024-25	88	32	54	53	62	64	5	24	0	9	0	16
Number of phone calls received	2025-26	1,314	1,309	1,359									
	2024-25	1,455	1,400	1,473	1,782	1,793	2,670	3,381	5,107	4,208	1,912	1,377	1,613
Median time taken to answer phone calls (minutes)	2025-26	4	2	3									
	2024-25	3	3	3	3	3	6	3	2	8	5	4	5
Number of emails received	2025-26	2,438	2,404	2,380									
	2024-25	3,387	2,793	2,473	2,973	3,022	4,074	4,058	4,402	3,462	2,595	2,513	2,759
Median time taken to answer emails (working days)	2025-26	3	2	7									
	2024-25	4	1	5	3	4	2	1	2	2	3	3	3

Continued professional development

Performance data

Continued professional development		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Percentage of social workers that have submitted at least one piece of CPD	2025-26	3%	4%	5%									
	2024-25	4%	5%	6%	7%	10%	17%	33%	96%	0%	1%	2%	3%
Percentage of social workers meeting all CPD requirements	2025-26	1%	1%	2%									
	2024-25	1%	2%	2%	3%	5%	11%	26%	96%	0%	0%	0%	1%

Fitness to practise - triage

Performance data

Fitness to practise – triage ¹		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Number of concerns received	2025-26	193	184	210									
	2024-25	128	158	151	158	140	156	155	150	193	180	191	175
Median time taken to complete triage (weeks)	2025-26	25	31	30									
	2024-25	22	21	11	28	26	27	38	33	36	28	18	17
Number of open triage cases	2025-26	1,907	1,926	1,993									
	2024-25	1,298	1,344	1,399	1,436	1,458	1,505	1,527	1,573	1,696	1,769	1,843	1,887
Median time open cases have spent in triage (weeks)	2025-26	25	26	25									
	2024-25	22	23	25	27	28	29	26	27	27	28	27	27
Number of concluded triage cases	2025-26	187	179	149									
	2024-25	157	123	112	128	122	105	136	107	78	126	135	138
Percentage of cases closed at triage	2025-26	87%	80%	79%									
	2024-25	80%	82%	83%	78%	80%	74%	89%	81%	76%	79%	85%	80%
Percentage of cases progressed to investigation	2025-26	13%	20%	21%									
	2024-25	20%	18%	17%	22%	20%	26%	11%	19%	24%	21%	15%	20%

¹ These figures differ from last year's submissions. We have grouped three stages (concern, pre-triage and triage) into one triage stage, and recalculated these metrics accordingly.

Fitness to practise - investigation

Performance data

Fitness to practise - investigation		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Median time taken to complete investigation (weeks)	2025-26	64	57	64									
	2024-25	66	73	33	63	65	32	56	45	63	54	56	80
Number of cases into investigation (including adjournments)	2025-26	29	40	34									
	2024-25	42	34	30	44	57	39	25	26	23	37	31	43
Number of open investigation cases	2025-26	464	460	441									
	2024-25	567	555	547	552	535	537	522	506	493	487	465	471
Median time open cases have spent in investigation (weeks)	2025-26	55	53	47									
	2024-25	44	45	49	50	50	44	63	55	55	44	55	28
Number of concluded investigation cases	2025-26	35	42	53									
	2024-25	46	45	38	38	74	37	40	42	37	41	53	37

Fitness to practise – case examiner

Performance data

Fitness to practise – case examiner		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Median time taken to complete case examination (weeks)	2025-26	12	11	13									
	2024-25	14	12	13	11	11	12	13	12	10	12	12	8
Number of cases into case examination (including adjournments)	2025-26	39	43	53									
	2024-25	54	43	41	40	74	39	42	45	36	44	53	40
Number of open case examination cases	2025-26	80	101	120									
	2024-25	133	142	140	122	123	111	82	89	87	91	101	80
Median time open cases have spent in case examination (weeks)	2025-26	7	7	7									
	2024-25	9	10	11	12	8	8	8	6	7	8	5	7
Number of concluded case examination cases	2025-26	32	18	31									
	2024-25	32	22	30	40	39	39	56	29	34	27	31	44
% of cases closed at case examination	2025-26	47%	67%	61%									
	2024-25	45%	91%	80%	78%	69%	72%	79%	83%	74%	67%	70%	78%

Fitness to practise – case examiner

Performance data

Fitness to practise – case examiner		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
% of cases progressed to hearings	2025-26	53%	33%	39%									
	2024-25	53%	9%	20%	20%	31%	28%	20%	17%	26%	33%	26%	20%
Median time from receipt of concern to final FTP outcome at case examination (weeks)	2025-26	122	130	84									
	2024-25	104	107	133	100	91	109	113	99	98	106	103	85
Number of cases closed with 'No Impairment'	2025-26	6	7	9									
	2024-25	8	11	15	22	13	18	32	17	14	13	17	22
Number of cases closed with 'Impairment'	2025-26	9	5	10									
	2024-25	7	9	9	10	14	10	13	7	11	5	6	13
Number of Accepted Disposals offered	2025-26	4	11	10									
	2024-25	14	7	11	21	20	11	10	14	7	10	15	14

Fitness to practise – hearing

Performance data

Fitness to practise – hearing		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Median time from receipt of concern to final FTP outcome at Hearing (weeks)	2025-26	231	217	260									
	2024-25	198	229	193	226	166	185	181	230	133	174	221	228
Number of cases into hearings	2025-26	27	7	13									
	2024-25	19	5	12	14	12	11	13	6	11	12	11	16
Number of open cases in hearings	2025-26	428	431	440									
	2024-25	392	391	386	386	393	399	410	414	421	426	426	412
Median time open cases awaiting a hearing (weeks)	2025-26	140	103	106									
	2024-25	79	82	84	108	113	118	114	116	125	129	133	140
Number of concluded hearings	2025-26	1	3	2									
	2024-25	5	6	2	6	4	3	3	1	1	4	13	22
Median time concluded cases spent in pre-hearing (weeks)	2025-26	162	132	140									
	2024-25	105	115	172	140	115	100	91	166	86	92	117	117

Fitness to practise – interim order and quality

Performance data

Fitness to practise – hearing		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Median time take to approve interim orders (working days)	2025-26	14	18	18									
	2024-25	17	18	26	N/A	18	18	18	18	21	18	17	17
Number of interim order application hearings	2025-26	2	6	4									
	2024-25	1	3	1	0	3	3	1	2	4	3	2	2
Number of interim orders imposed	2025-26	2	6	4									
	2024-25	1	3	1	0	3	3	1	2	4	3	2	1

Fitness to practise – internal quality		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
FTP internal quality score	2025-26	100%	89%	100%									
	2024-25	97%	88%	94%	87%	90%	88%	97%	97%	97%	100%	87%	94%

People		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Retention rate	2025-26	89%	88%	89%									
	2024-25	85%	85%	85%	85%	85%	87%	86%	87%	87%	86%	86%	87%
Headcount of staff	2025-26	276	271	276									
	2024-25	233	232	234	237	241	247	250	255	258	263	264	275
Days lost to sickness per employee over previous 12 months	2025-26	8.2	8.1	8									
	2024-25	8.9	8.8	8.9	8.9	8.5	8	7.7	7.5	7.4	7.1	7.4	7.9

Corporate complaints

Performance data

Corporate complaints		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Corporate complaints responded to within timescales	2025-26	91%	90%	100%									
	2024-25	74%	94%	91%	83%	100%	92%	96%	100%	88%	94%	100%	89%
Number of corporate complaints received (stage 1 only)	2025-26	5	7	9									
	2024-25	18	12	6	9	8	16	15	10	12	11	5	11
Number of corporate complaints that missed 20-day timescale	2025-26	1	1	0									
	2024-25	5	1	1	2	0	1	1	0	2	1	0	1
Median response time over previous 12 months (working days)	2025-26	16	16	15									
	2024-25	15	15	15	15	16	16	16	15	16	16	16	16

Annex B

Q1 2025-26 course reapproval decisions



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Course reapproval decisions

Provider	Course	Region	Inspection dates		Link to inspection report	Decision
			From	to		
University of Winchester	Social Work Degree Apprenticeship	South East	14 Jan 2025	16 Jan 2025	https://www.socialworkengland.org.uk/media/i2uitwx2/approval-report-final-uwicpp469.pdf	Approved with conditions
Manchester Metropolitan University	MA Social Work	North West	18 Mar 2025	20 Mar 2025	https://www.socialworkengland.org.uk/media/zqmh2gv0/20250527_mmucpp487_inspection_report.pdf	Approved
Manchester Metropolitan University	Pg Dip Social Work Step Up to Social Work	North West	18 Mar 2025	20 Mar 2025	https://www.socialworkengland.org.uk/media/1rndgvky/20250513_mmu_stepup_cpp489_approval_report_final.pdf	Approved
University of Plymouth	MA Social Work	South East	28 Jan 2025	11 Feb 2025	https://www.socialworkengland.org.uk/media/ziwdnwl060625_up_cpp477_inspection-report_ma_rd.pdf	Approved with conditions
Anglia Ruskin University	BA (Hons) Social Work	East	3 Sep 2024	6 Sep 2024	https://www.socialworkengland.org.uk/media/ydwmq0ts/final_20240910_approval_report_arupet.pdf	Approved with conditions
Anglia Ruskin University	BA (Hons) Social Work Degree Apprenticeship	East	3 Sep 2024	6 Sep 2024	https://www.socialworkengland.org.uk/media/ydwmq0ts/final_20240910_approval_report_arupet.pdf	Approved with conditions
Anglia Ruskin University	MA Social Work	East	3 Sep 2024	6 Sep 2024	https://www.socialworkengland.org.uk/media/ydwmq0ts/final_20240910_approval_report_arupet.pdf	Approved with conditions
Anglia Ruskin University	PGDip Social Work	East	3 Sep 2024	6 Sep 2024	https://www.socialworkengland.org.uk/media/ydwmq0ts/final_20240910_approval_report_arupet.pdf	Approved with conditions

Course reapproval decisions

Provider	Course	Region	Inspection dates		Link to inspection report	Decision
			From	to		
Northumbria University Newcastle	BSc (Hons) Social Work Degree Apprenticeship	North East	4 Feb 2025	6 Feb 2025	https://www.socialworkengland.org.uk/media/y1yv5vn/20250331_approval_report_nun_cpp478_final.pdf	Approved with conditions
University of Hull	BA (Hons) Social Work	Yorkshire and Humberside	11 Feb 2025	14 Feb 2025	https://www.socialworkengland.org.uk/media/fwujxe2m/uhul_cpp483_cpp484_final_report.pdf	Approved with conditions
University of Hull	BA (Hons) Social Work Degree Apprenticeship	Yorkshire and Humberside	11 Feb 2025	14 Feb 2025	https://www.socialworkengland.org.uk/media/fwujxe2m/uhul_cpp483_cpp484_final_report.pdf	Approved with conditions
Liverpool Hope University	BA (Hons) Social Work Degree Apprenticeship	North West	8 Apr 2025	10 Apr 2025	https://www.socialworkengland.org.uk/media/2x1junlu/020725_lhu_cpp496-inspection-report_ba-swda_rd.pdf	Approved with conditions



Fitness to practise performance Q1 2025/26

Agenda Item 10 Paper Ref 07a

Paper for the

Social Work England Board

Sponsor

Philip Hallam, Executive Director, Regulation

Author

Philip Hallam, Stephen Barnett, Rachel McAssey, Alexandra Hayward

Date

25 July 2025

Reviewed by

Colum Conway, Chief Executive

This paper is for

Assurance and Noting

Associated Strategic Objective

SO6: Review our fitness to practise case resolution approach, to improve service quality and fairness, and ensure value for money.

Impact: Risk Type and Appetite

Statutory regulatory functions - Open

Equality Impact Assessment (EIA)

N/A

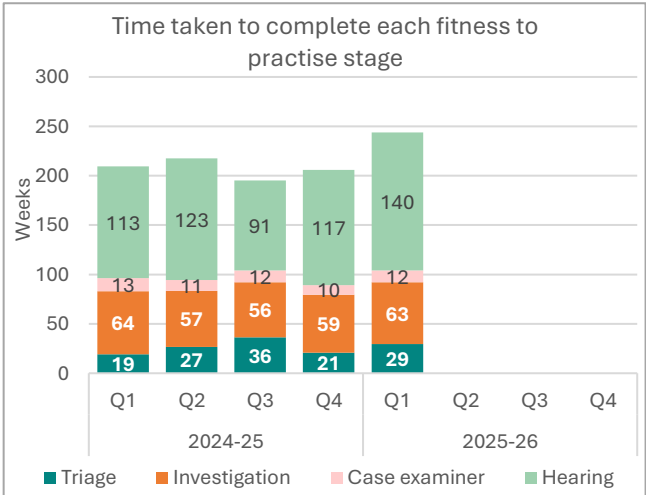
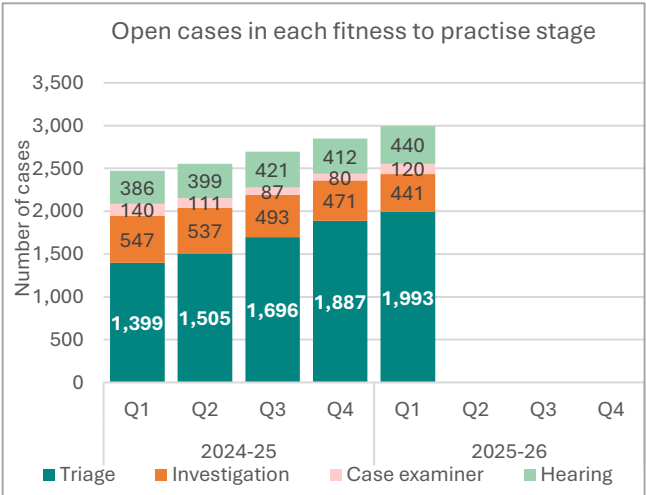
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1. Summary

This report sets out performance across the fitness to practise service for the first quarter of 2025-26. In line with the discussion with the board in March 2025, and the paper provided at that time, this paper focuses on the throughput of cases at each stage of fitness to practise and sets out our projections for caseloads across fitness to practise at the end of the financial year. The paper also considers closure rates and decision making outcomes, and references performance against timeliness indicators. It sets out activities that have taken place over the quarter and looks ahead to activities planned for the next quarter.

Headline performance for this quarter is as follows:

- We are on target for the number of decisions made at the triage stage and have continued to close a significant number of concerns received at this stage of the fitness to practise process.
- The number of open cases remains high, and we have seen an ongoing 23% higher number of referrals than modelled over last the last 7 months. This has affected our ability to reduce the caseload at the triage stage, notwithstanding the higher number of triage decisions made.
- Investigations and case examination performance is broadly in line with our forecast expectations, though we have seen an increased number of cases referred by case examiners for consideration by adjudicators than in the last 4 quarters.
- Additional resources at the post-case examinations stage has allowed for more cases to be progressed and readied for hearing than originally forecast, and we therefore anticipate fewer cases will be awaiting a hearing at the end of the financial year than modelled.
- Timeliness across fitness to practise, though currently in line with KPI targets this quarter, will be subject to variability over the course of the financial year as older cases are moved through the service.



2. Triage

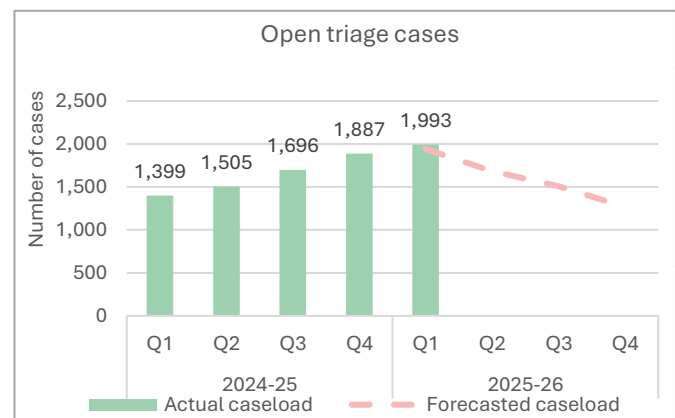
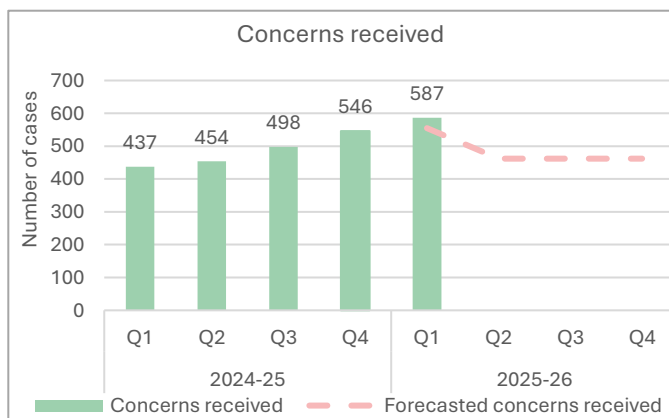
Triage performance is positive for Q1. However, performance continues to be affected by the significant backlog of cases, and a large increase in referrals received since December 2024.

The key performance indicator, time taken to complete triage, is tracking at better than our Q1 target. However, there will be volatility in this indicator as the backlog is worked through and older cases are closed alongside newer ones.

The last seven consecutive months have seen significant increases in referrals received (averaging 23% per month more than modelled) - suggesting that this is an ongoing trend. The average number of concerns received over the two years of 23/24 and 24/25 was 154 per month. In January 2025 we used this previous referral rate to forecast an average of 154 concerns to be received each month during 25/26. However, since December 2024 we have seen significantly more referrals than forecast, and this is now a consistent trend. In March 2025 we re-modelled the incoming referral rate, raising the forecast monthly volume from 154 to 185. As can be seen from the table below, incoming referral rates are currently exceeding even that re-forecast.

Since the beginning of 2024/25 the overall number of cases in the triage service has been increasing steadily each quarter. In Q1 of 25/26 we made significantly more triage decisions than in any of the 24/25 quarters. However, this has had limited impact on the overall number of cases in triage, due to the concurrent rise in referrals received. The increase in referrals being received means that assumptions and targets for Q2 – Q4 previously shared with the board will need revising to reflect this change, and that progress to clear the triage backlog will be slower.

Concerns received	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	YTD
Actual	193	180	191	175	193	184	210	1,326
Forecast	154	154	154	154	185	185	185	1,171
Variance	+39	+26	+37	+21	+8	-1	+25	+155



As cases pass through the triage process, we identify the type of referrer. Initial analysis of the additional referrals where a referrer has been identified indicates whilst employer referrals remain stable, we have seen above average referrals from members of the public since September 2024.

For Q2, we will review the current forecast and amend as necessary, taking into account the average number of referrals in Q1 of 25/26.

The sustained increase in referrals will affect our July re-forecast for triage decisions made for the remainder of 25/26. The end of year triage caseload as forecast in April is shown below. We are still calculating the impact of increased referrals on the July forecast, and the open caseload at the end of March 2026 will increase from the current forecast.

Triage throughput					
FY 2025/26	Q	Forecast Jan 25 ¹	Forecast April 25	Actual	Variance
No. of decisions made	Q1	474	501	515	+14
	Q2	637	720		
	Q3	651	638		
	Q4	723	702		
Open caseload	Q1	1,761	1,941	1,993	+52
	Q2	1,586	1,683		
	Q3	1,397	1,507		
	Q4	1,136	1,267		

For this quarter, total number of triage decisions made was 515 against a forecast of 501. At the end of Q1, open caseload at the triage stage was 1993 against a forecast of 1941.

In Q1, closure rates at the triage stage were as follows:

FY	Q	Closed		Progressed	
2025-26	Q1	423	82%	92	18%
2024-25	Q4	326	82%	73	18%
	Q3	267	83%	54	17%
	Q2	275	77%	80	23%
	Q1	319	81%	73	19%

¹ These forecast figures were shared with the board at the March 2025 meeting, as part of the paper 'Fitness to practise 2025/26 - case throughput and actions'

The closure rate of 82% continues to be higher than our assumptions that 65%-75% of cases will close once the triage test is applied. We will continue to monitor the closure rate over the course of the financial year.

The KPI for time taken to complete the triage stage of the fitness to practise process will fluctuate over the course of the financial year as older cases are concluded or progressed. For Q1 the time taken was 29 weeks against the quarterly target of 38 weeks. The end of year KPI target is 26 weeks.

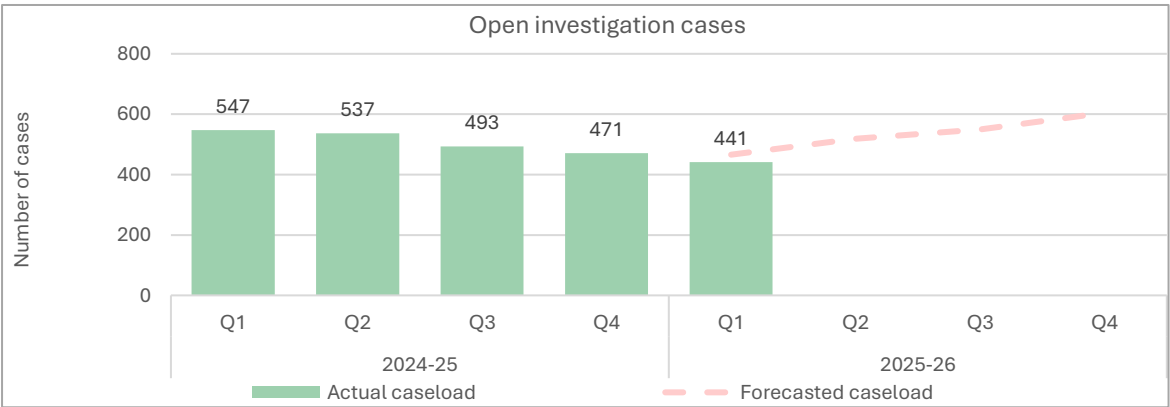
Actions we have taken this quarter to continue to address the high volume of cases in triage, and develop and improve our approach, have included:

- Recruitment of temporary additional resources:
 - A new team of one triage lead and four triage case officers on 18 month fixed term contracts (FTCs).
 - Two temporary triage leads to give more capacity for decision making (12 month FTCs).
 - A paralegal and a triage and investigations officer (12 month FTCs) to assist our triage teams.
 - Secondment of 3 investigators to assist triage teams (ending in Sept 25).
 - Extension of a temporary agency worker to support the triage function.
- Drafting of new guidance to streamline requests for information at different stages.
- The start of the process review project to streamline processes across triage and investigations.
- The introduction of a service delivery plan, balanced scorecard, improved approaches to performance management and a new focus on employee engagement.

3. Investigations

Performance in the investigations service is generally tracking in line with expectations:

- Time taken to conclude investigations is better than the Q1 target.
- The overall caseload is lower than planned; the number of concluded investigations is correspondingly also a little lower than planned, as is the number of decisions.



Our targets, and results, in the investigations service for Q1 are as follows:

Investigation throughput					
FY	Q	Forecast Jan 25	Forecast April 25	Actual	Variance
No. of decisions	Q1	147	147	130	-17
	Q2	161	161		
	Q3	176	176		
	Q4	176	176		
Caseload	Q1	473	466	441	-25
	Q2	512	519		
	Q3	541	550		
	Q4	596	605		

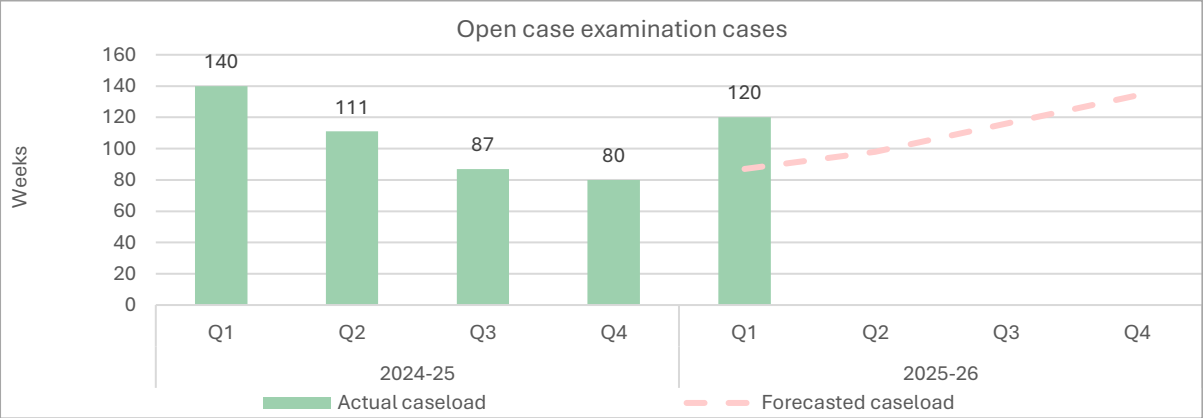
We are close to target for the number of investigations completed (i.e. cases referred for a case examination decision) in the quarter. The open caseload is affected by the continuing issue of cases being held up at the triage stage, and consequently there are fewer cases in the investigations service than modelled.

As with the triage KPI, the KPI for time taken to complete the investigation stage of the fitness to practise process will fluctuate over the course of the financial year as older cases are concluded or progressed. For Q1 the time taken was 64 weeks against the quarterly target of 66 weeks. The end of year KPI target is 54 weeks.

We continue to improve our approach to the investigation of cases, and activities we have taken in the investigations service this quarter have included:

- Commencing a significant process review and re-engineering project (alongside the triage process review).
- The introduction of new guidance on escalation and reducing time taken waiting for responses from stakeholders.
- Strengthening our joint approach to working with local authorities through both the Engagement Project and closer working with the Regional Engagement Team.
- Introduced a service delivery plan, balanced scorecard, improved approaches to performance management and a new focus on employee engagement.

4. Case examination



Performance at the case examination stage this quarter has been impacted by 2 vacancies within the team. Case examiners make decisions in pairs (1 lay and 1 professional case examiner), and therefore a vacancy has an immediate impact on the number of cases we are able to conclude. Consequently, volumes at the end of the quarter are as follows:

Case examiner throughput					
FY	Q	Forecast Jan 25	Forecast April 25	Actual	Variance
No. of decisions	Q1	114	114	81	-33
	Q2	124	124		
	Q3	132	132		
	Q4	132	132		
Caseload	Q1	97	87	120	+33
	Q2	106	98		
	Q3	123	116		
	Q4	141	134		

Of those cases concluded at the case examination stage, outcomes have been as follows:

Case examiner decisions							
FY	Q	Closed no further action		Accepted disposal		Referred to hearing	
2025-26	Q1	22	27%	24	30%	35	43%
2024-25	Q4	52	51%	24	24%	26	25%
	Q3	63	53%	31	26%	25	21%
	Q2	53	45%	34	29%	31	26%
	Q1	34	40%	25	30%	25	30%

The referral rate to hearing exceeded our expectation, with 43% of cases referred. This is mainly due to lack of engagement from social workers where an accepted disposal was offered (in May) but not responded to within the 28 day timeframe. We continue to improve our approach to engagement with social workers, and project work in this area will continue over 25/26.

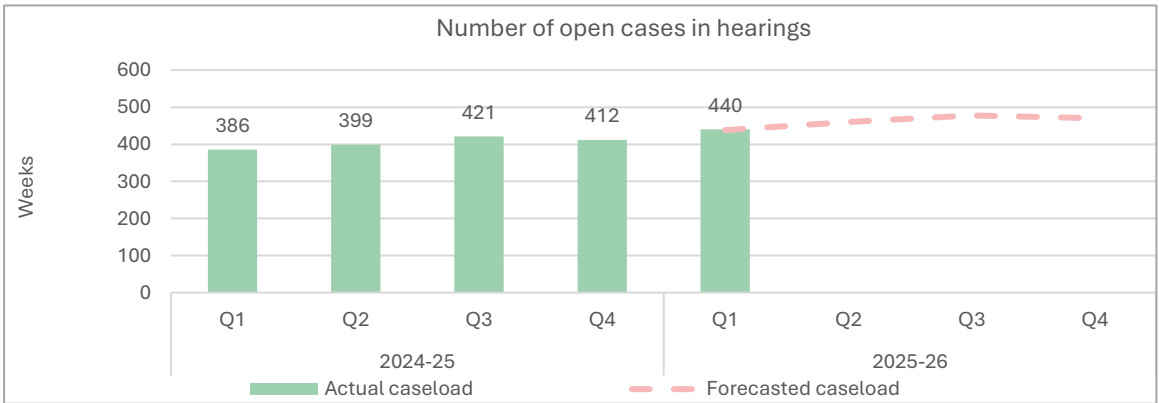
Case examination timeliness is also affected by the variable age of the caseload. For Q1, the median time taken to complete the case examination stage of the fitness to practise process is 12 weeks.

During this quarter we have started to embed the new decision making framework for case examiners, and have reviewed and made improvements to our public guidance which will go out for consultation in the autumn

For 25/26, we have also set out a target for the median time taken from receipt of a concern to the closure at the case examination stage. By the end of the year, we have set out that this time taken should be 92 weeks. For this quarter, the time taken is 104 weeks.

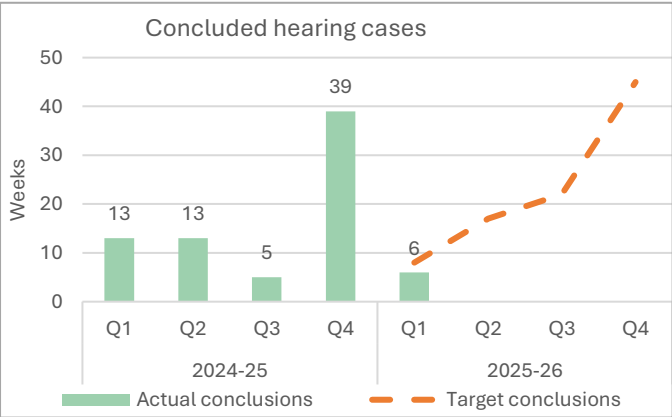
5. Hearings

There are currently 440 cases at the hearings stage of the fitness to practise process. Over the course of the quarter, 35 cases have been referred by case examiners, against a forecast of 34.



We continue to work closely with our external legal provider to use our available financial resources to progress as many cases for hearing as possible. Additional resources available this year are enabling more cases to be progressed than previously anticipated. At the end of Q1 we forecast that 92 cases will be concluded at the hearings stage by the end of the financial year. This would mean that the end of year

number of cases awaiting conclusion at this stage would be 470, a reduction from the 538 cases forecast earlier in the year.



As previously discussed with the board, we have now begun the process of procurement for a second legal provider to provide extra capacity to address the hearings backlog. This process will conclude at the end of 25/26, and we anticipate that a second provider would be able to add extra capacity from Q1 2026/27.

We continue to monitor the time taken from receipt of concern to the final outcome at the hearings stage. Timeliness here will continue to be affected by the backlog of cases awaiting conclusion at this stage. For Q1, this KPI is 231 weeks.

This quarter, 6 cases were disposed of via a final hearing, with the following outcomes:

Hearing outcomes	2025/26	20424/25			
	Q1	Q4	Q3	Q2	Q1
No impairment, no further action	2	6	1	1	4
No impairment, advice	0	0	0	0	0
No impairment, warning	0	2	0	0	2
Impaired, no further action	0	0	0	0	0
Impaired, advice	0	0	0	0	0
Impaired, warning order	0	8	0	0	0
Impaired, conditions of practice order	0	1	0	1	2
Impaired, suspension order	3	8	0	3	3
Impaired, removal order	1	14	4	8	2

We have completed our review of the 2-person panel pilot for final hearings. We will use the criteria we have developed for, and will continue to use the criteria for determining whether a case is suitable for a 2-person panel for open cases. We have also started to

write out to social workers and witnesses whose case will not be heard in this financial year.

6. Interim orders and case review

We continue to meet our KPI target for the time taken to approve interim orders.

In Q1, 12 interim order applications were considered by adjudicators, and 12 orders granted (10 suspension orders and 2 conditions of practice orders).

Our case review team considered to support social workers subject to interim or final orders, and in Q1 53 interim order review and 23 final order review hearings events were held.

7. Other fitness to practise activities

During Q1 we received one new High Court appeal by a former registrant relating to a final order review meeting. We have one ongoing County Court claim in relation to a case closed at triage. We received two new judicial reviews relating to triage decisions during the quarter.

In Q1 two statutory appeals concluded, we were successful in defending both appeals and they were dismissed by the court on all grounds.

Alongside this, we continue to receive learning points from the Professional Standards Authority relating to cases they have considered through their section 29 process. This process allows for the Professional Standards Authority to review final fitness to practise panel decisions and disseminate any learning identified. We review these learning points and share internally and with our partners.

Our Decision Review Group continues to review decisions from across the different stages of the fitness to practise process. Our internal quality score for Q4 is 96%.

In Q1, our legal team received 3 new applications to review a case examiner decision, and we had 4 applications ongoing. Of these applications:

- 1 was determined ineligible for review.
- 4 were considered at stage 1 of the process, 3 of which were closed and 1 progressed (but not considered at stage 2 of the process due to the social worker having been removed from the register for failure to renew their registration).
- 0 cases were referred back to the case examiners for a fresh decision.
- 2 applications remained ongoing at the end of the quarter and are awaiting a stage 1 decision.

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For the first time, we used our powers under Regulation 26 of The Social Workers Regulations (2018) (as amended) to automatically remove a social worker from the register who was convicted of a listed offence.

8. Looking ahead to Q2 and beyond

We will make further adjustments to our referral assumptions and our decision making targets for Q2, 3 and 4. On the assumption that referral rates remain high, our progress at reducing the **triage** backlog will slow down. At the same time the new resources in triage will be inducted, trained and able to start taking cases during Q2. This should help to improve triage performance later in the year.

Our process review in **triage and investigations** will move into the next phase of work – collating and refining improvement suggestions, gathering insight from other regulators and starting to map out new processes.

In **investigations** we will continue to work closely with our external legal provider - referring a higher volume of cases for investigations work prior to a hearing, and working together to ensure that a pipeline of ongoing work at all stages is maintained. At the same time, we will start delivering on our plans to move 200 cases currently awaiting a hearing back into the investigations team. This will ensure better ownership of these cases, and we will also undertake a review of all cases to assist with prioritisation and allocation to our external legal provider.

In **case examinations** we will recruit to vacancies and have a clear induction plan in place to support new starters to gain confidence in our ways of working, which will support case progression. We will continue to embed the revised decision making framework and further develop the quality assurance framework which is due for roll-out in Q4. We will consult on improved guidance for case examiners in the autumn.

In **hearings and case review** we will consult on revised impairment and sanctions guidance and a new piece of guidance on consensual panel disposals in the autumn. By Q4 we will conclude our project on additional support and implement the improvements. We continue to work with all parties where a case is ready for listing to identify appropriate listing dates in the 25/26 and 26/27 hearings schedule.

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Approach to developing an asset management strategy for Social Work England

Agenda Item 11 Paper Ref 08

Paper for the

Social Work England Board

Sponsor

Linda Dale, Executive Director, People and Business Support

Author

Richard Simpson, Head of Finance and Commercial

Date

25 July 2025

Reviewed by

Linda Dale, Executive Director, People and Business Support

This paper is for

Decision

Associated Strategic Objective

SO10: Continually develop and improve how we work, ensuring we are a well-run organisation that delivers the right outcomes and provides value for money.

Impact: Risk Type and Appetite

Financial governance - Cautious

Equality Impact Assessment (EIA)

N/A

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1. Summary

This paper invites the board to discuss and approve the asset management strategy for Social Work England.

The strategy was approved by the Audit and Risk Assurance Committee (ARAC) at its meeting on 25 June 2025, subject to the addition of a formal review point and the consideration of bringing forward the timing of the review of IT equipment. We have added a formal review point of September 2026 and will continue to explore the timing of the review of IT equipment.

2. Action required

For discussion and approval.

3. Commentary

Developing an asset management strategy will allow Social Work England to define its approach to reviewing its investment in assets and better inform future financial and operational planning decisions.

[Managing Public Money](#) states that:

“Each public sector organisation is expected to develop and operate an asset management strategy underpinned by a reliable and up to date asset register. The board should review the strategy annually as part of the corporate or business plan”

The strategic aims and business model of the organisation are important factors that need to inform the development of its asset management strategy. The key purpose of having an asset management strategy is to ensure that the organisation has a clear grasp of its current asset base, what assets it needs to deliver its objectives, what this means for asset use, acquisition and disposal and how use of assets fits within the corporate plan.

In the context of Social Work England, intangible assets are by far the most significant assets that we hold. We do not own any land or estates but will need to consider our current office lease and the extent to which this meets our strategic requirements and delivers value for money. We hold data and information, but do not currently consider that we have any intellectual property assets.

The draft asset management strategy we have prepared is at Annex A. We have sought to keep this high level, proportionate to the size and scale of the assets we hold, and to establish realistic goals and timescales for us to review and make decisions about each of type of asset.

The asset management strategy will be reviewed annually by the finance and commercial team, and progress will be reported to ARAC and the board as part of the business and budget planning cycle for the following year.

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The head of finance and commercial will be the Senior Responsible Owner for knowledge assets, with advice and input from the head of IT and Data.

It is worth noting that, while the strategy proposes that we will undertake a strategic review of internally developed software by 30 September 2027, alongside this we will continue to carry out an annual review to consider the ‘useful economic life’ (UEL) of each intangible asset and asset component, whether any changes are required, and whether any assets are ‘impaired’. This annual review process is managed by the finance and commercial team. Decisions are made by the digital development programme board.

4. Conclusions and/or Recommendations

The board is asked to consider and approve this strategy.

5. Annexes

Annex A – draft asset management strategy.

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Annex A



Introduction

This Asset Management Strategy outlines the principles and framework that will underpin our decisions to make the best use of the assets we hold.

The purpose of this strategy is to:

- set out the approach we will take to review the strategic purpose of our assets and ensure we are allocating available resources best help support our Business Plan and the wider vision and ambition for Social Work England
- ensure that our investment in assets delivers value for money and supports environmental sustainability
- establish a framework to monitor the continuous performance of our assets against our priorities, and test whether are assets remain fit for purpose and better plan for a future that looks through a broader sustainable lens; and
- outline the governance arrangements on which asset rationalisation, development, investment and construction decisions can be consistently based

The asset management strategy supports the implementation of Social Work England’s vision and strategy.

Strategic context - Our vision for 2023 to 2026

Our strategy for 2023 to 2026 is based around three strategic themes:

- Prevention and impact: building trust and confidence within a safer practice environment.
- Regulation and protection: being transparent, efficient, responsive and fair in how we regulate.
- Delivery and improvement: putting our people at the heart of the positive change we want to drive.

Our strategy for 2026 to 2029 will be developed during the 2025/26 business cycle.

The following objective from our 2025/26 business plan provides an important context for our asset management strategy:

Delivery and improvement

3.1 Finalise and start to implement our new digital, data and technology strategy.

Our digital, data and technology strategy will set out our future vision for our services, and how we will ensure they remain fit for purpose now and into the future. It will detail how we will continue to explore opportunities to increase efficiency and effectiveness, including through the safe and appropriate adoption of new technologies. This will include an initial adoption plan for artificial intelligence (AI).

In addition to the objective above, Social Work England continues to focus on value for money, environmental sustainability and efficiency as a core focus for its asset management strategy.

The work undertaken as part of this strategy will underpin our developing DDAT strategy and inform our longer term financial planning.

Our assets

We are a small to medium sized organisation, with a single office base in Sheffield. We lease our office premises and do not own other property or estates. We conduct the vast majority of our business through remote or hybrid working, and therefore our digital (intangible) assets are the most important to us.

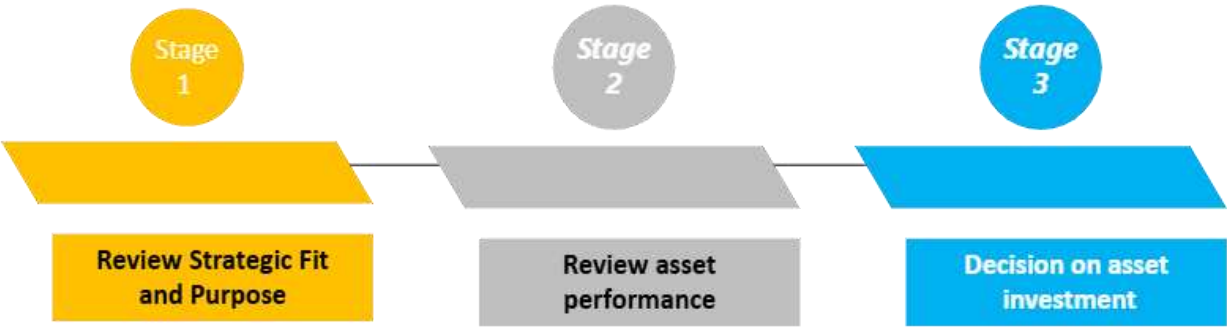
Our tangible and intangible fixed assets were valued at £10m in the 2023/24 financial accounts. Assets are valued at cost less depreciation over the useful life of the asset. The assets held in our portfolio can be segmented into the following categories:

	Valuation £000s
Building (right of use asset via a lease)	763
Land and buildings	345
Furniture and fittings	8
IT equipment	302
Internally developed software	8,606

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The asset review process

It is appropriate for us to regularly review the assets within each category to ensure they remain fit for purpose and aligned to our corporate priorities and objectives. In order to do this we have developed an asset review process which is set out in Appendix 1. The asset review process is divided into three stages:



The implementation of this process will enable Social Work England to review the future organisational need for strategic assets and any changes needed in assets (disposals, maintenance or additions), which will inform future financial and operational planning. The process can be applied to all relevant assets using the guidance set out over the next few pages. **Appendix 1 sets out some notes to provide guidance on each stage of the review.**

Stage 1: Strategic Fit and Purpose

In order to assist asset holders in this analysis, the expectations of how each category of asset should contribute and support our corporate priorities outlines in the corporate plan is outlined below.

In making the assessment, the following should be considered when assessing the alignment of the asset purpose against our corporate priorities. Whether the asset:

- Facilitates effective and efficient delivery of our services e.g. digital delivery of services
- helps to meet our staff and stakeholder needs e.g. from a buildings and facilities perspective, they support efficient working practices and arrangements
- contributes towards value for money objectives of the organisation
- improves and drives quality and innovation of our services
- delivers on our climate and environmental commitments

Stage 2: Performance of the Asset

How the financial and non-financial performance of an asset is measured will vary, depending on the category and strategic purpose of the asset. When considering an asset assessment, the key performance areas outlined below should be considered as a minimum.

Asset category	Contribution to strategic objectives	Financial performance considerations	Non-financial performance considerations
Buildings	Resource that supports all activities in the business plan	- The annual revenue cost of operating the building - The cost of the planned maintenance programme for the building - Performance against benchmarks – cost per employee/cost per m2	- The compliance of the asset with health and safety requirements - The utilisation of the asset by visitors and staff - The operational or strategic value of the asset to our partner organisations - The carbon footprint of the asset - Space per employee (M²)
Other Property Plant and Equipment (e.g. office fixtures and fittings)	Resource that supports all activities in the business plan	- The annual revenue cost of operating or holding the asset - The cost of the planned maintenance programme for the asset	Extent to which asset supports the needs of staff and other stakeholders
IT equipment	Resource that supports all activities in the business plan Links to developing DDAT strategy	- The annual revenue cost of operating or holding the asset - The cost of the planned maintenance programme for the asset - Comparison to benchmarks	- User experience - Effectiveness and efficiency of the asset
Internally developed software	Development of bespoke systems to meet needs of the organisation and its stakeholders	The annual revenue cost of operating or holding the asset	The effectiveness and efficiency of the asset in supporting statutory functions and services

Asset category	Contribution to strategic objectives	Financial performance considerations	Non-financial performance considerations
	Links to developing DDAT strategy	- The cost of the planned maintenance programme for the asset - Development/capital costs vs benchmarks	- User experience - The operational or strategic value of the asset to our partner organisations (where relevant) - Ability of organisation to support and continue to develop the asset to meet future needs, using available resources - Consideration of any IT or data governance / security risks or business continuity risks - Availability, suitability and cost of alternative systems
Intellectual property	n/a	n/a	Social Work England will assess whether any of its intangible assets or intellectual property can generate additional revenue, other than registration fees

No threshold criteria has been set for whether an asset is performing strongly or otherwise. The parameters for a strongly performing asset will differ depending on its category, use and condition. Stage one and two should be used to determine whether there is scope in an asset category to identify opportunities for improvement and/or to do something different.

Stage 3: Decision on asset investment

Stage one and two of the asset review process should be undertaken in line with the agreed timetable set out below. The purpose of assessing the strategic fit and performance of an asset is to determine whether there is an opportunity to change how the asset is used or if there were alternatives that would offer benefits to Social Work England e.g. enhanced service support, cost reduction, service improvement. This may lead to a decision being put to the accounting officer or, where appropriate, the board.

Stage three is the process that should be undertaken when, following assessment of strategic purpose and performance of the asset, a decision is required to agree a strategic approach for that asset category. This could be a decision to maintain the existing asset, partially dispose or to consider alternative assets to support the organisational strategy and objectives.

In order to produce a full and comprehensive business case for change, officers should consider the risks and opportunities of the options to ensure all possible options are presented in a fair and transparent manner.

Implementation of the asset review process

Asset category	Review period	Notes
Buildings	To start by Q3, 2025 and conclude by Q3, 2027/28.	Review of our current office lease will be undertaken by the Government Property Agency, based on our current and future business needs. The precise timeline will depend on their availability and scheduling.
Property Plant and Equipment	By 30 September 2026	
Internally developed software	By 30 September 2027	Timescales to be reviewed to ensure alignment to DDAT strategy ‘roadmap’, once agreed.
IT equipment	By 30 September 2027	

Governance, monitoring and review

The Social Work England board will receive annual reports on progress and provide oversight of the strategic review of each asset category.

The strategy as a whole, including the asset review timeline, will be reviewed in September 2026. Any proposed amendments or updates will be shared with ARAC and the board for discussion and approval.

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Appendix 1: Asset review stages guidance

Stage 1: Strategic fit and purpose

- How does the asset contribute to and/or detract from our corporate priorities?
- Does this asset meet our expectations for this category?

Stage 2: Performance of the asset

- What financial and non-financial outcomes does the asset deliver?
- What financial and non-financial benefits are associated with the asset?

Stage 3: Asset decision process

This includes documenting the following:

Opportunities and risks

- Does this asset present opportunities beyond its current use?
- Is there anything stopping these opportunities being realised, and if so can any barriers be removed?
- What risks would the opportunity present and how can these be managed?
- Are there any risks associated with the asset in its current form? Are these being /can these be effectively managed?

Option analysis

- Review of performance, opportunities and risks against our Corporate Priorities
- What options are available for the future of this asset?
- What are the costs and benefits of the options?
- How would risks arising through pursuing alternative options be managed?

Stakeholder engagement

- Internal Stakeholders
- Relevant decision making committee (if necessary)

Asset challenge outcome

- Retain Asset
- Redevelop Asset
- Dispose of Asset
- Acquire Asset