

Performance Review: evaluation of year one of the new approach

1. Introduction

- 1.1. This report sets out the findings of our evaluation of the new performance review approach, following the completion of the first year of the new cycle. It summarises the evidence reviewed and identifies areas for further work.
- 1.2. Within this evaluation, we sought to answer two key questions:
 - How well does the new approach work?
 - Does it work better than the previous version?
- 1.3. To answer these questions we sought:
 - To understand how far the introduction of the new approach has achieved the intended benefits.
 - To understand whether relevant risks have been adequately mitigated.
 - To identify where further work may be required to address issues or achieve benefits.
- 1.4. We aimed to deliver a rapid evaluation within available resources. We have used a mix of qualitative and quantitative evidence already available to us. Key evidence sources were:
 - The feedback survey we ask regulators to complete at the end of each review. The current version of the survey includes questions specifically about the comparison between old and new processes.
 - Feedback from the team.
 - Data we hold about reviews and reports.

2. Have the intended benefits been realised?

- 2.1. Table 1 summarises progress towards the key planned benefits of the new approach.¹ The rest of this section describes how we evaluated each planned benefit. Where we describe benefits as having been achieved, this does not mean that we will no longer work towards or prioritise those outcomes; rather, it means that we have evidence that the action we have taken has been successful in delivering what we wanted during the first year of the new process. Even where benefits have been achieved at the end of year one, we may identify further work to make further improvements or ensure that we continue to achieve the intended benefit.

¹ As set out in the following: [August 2021 consultation report](#); [January 2022 Board paper](#); [February 2022 consultation report](#)

Benefit	Achieved?
Produce reports faster	Achieved
Make the process more transparent	Achieved
Make the process more proportionate, and reduce the overall burden on regulators across a cycle	Too early to tell
Enhance engagement with the regulators	Achieved
Obtain greater stakeholder input	Achieved
Drive improvement and share good practice	Partly achieved
Produce clearer reports	Partly achieved
Free up capacity within the team for other project work and wider PSA work	Too early to tell
Use the opportunity to introduce process improvements	Partly achieved

Table 1: outline of key benefits

Producing reports faster

- 2.2. We introduced a KPI to publish our report within three months of the end of the review period. We met this KPI for all ten reports in the first year. Figure 1 summarises how long it took to publish reports from the end of the relevant review period, for the first year of the new process and the last two years of the old process.

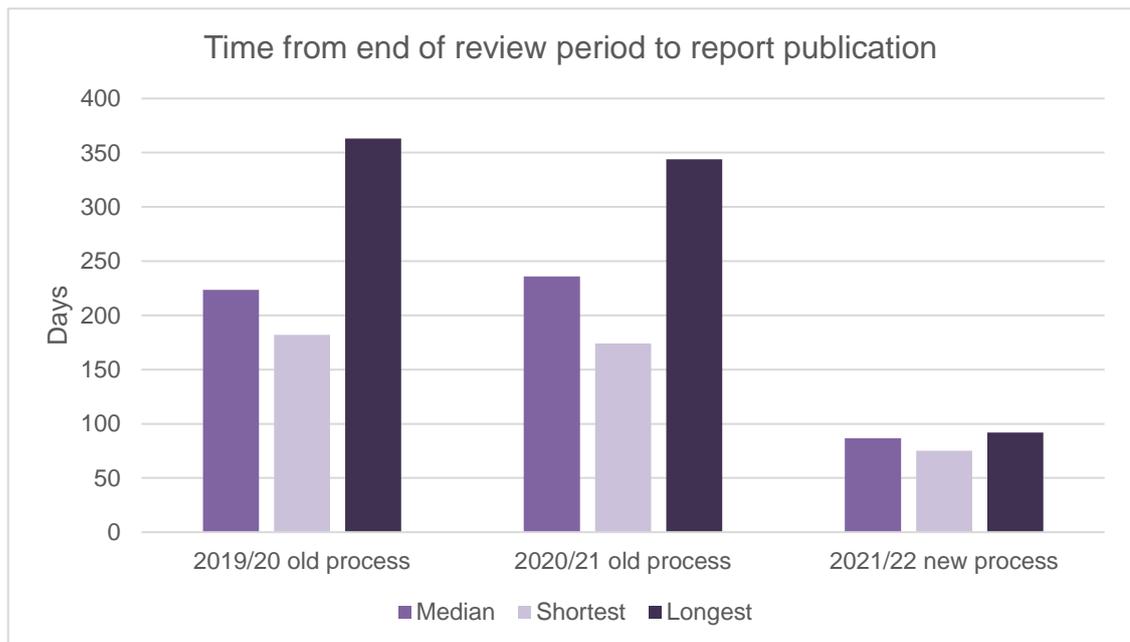


Figure 1: time to publish reports

2.3. Figure 1 shows that we have published reports significantly faster under the new process. We have also been much more consistent in the timing of publication, which helps with planning communications and stakeholder engagement activity. Regulators gave positive feedback about the timeliness of report publication and about their opportunity to comment on the report before publication.²

2.4. This benefit has been **achieved**.

Making the process more transparent

2.5. We increased the information provided to the regulators about our analysis of their performance and the decisions made by panels. We share our recommendation to the panel and an indicative plan for the following year's review.

2.6. Regulators have given positive feedback about the transparency of the new process. Survey scores about this part of the process were high³ and comments were positive:

- *'Sharing of analysis docs – helpful, were able to provide additional evidence'*
- *'we find having sight of any analysis ahead of panel discussions really useful as it gives us the opportunity to clarify inaccuracies where appropriate.'*
- *'We welcome the note of the decision making panel's decision and reasons. We do think that there is scope for the panel to provide more detailed reasons for their assessments especially where they have determined that a standard is not met'*

2.7. The team reflected on the introduction of a plan for the next year's review. Sharing these plans has helped show panels and regulators what we expect to look at. This has informed discussions with them about work planning.

2.8. This benefit has been **achieved**. The process is more transparent for regulators.

Making the process more proportionate and reducing the burden on regulators

2.9. Under the old process, our reviews required significant input from regulators at certain points, which could cause resourcing difficulties for them and delays for us. We moved to a three-year cycle, with lighter-touch monitoring in between more detailed periodic review years. We have collected feedback from our team and the regulators. Because this review is taking place at the end of the first year, no regulator has yet been through a full three-year cycle: eight of the regulators had monitoring reviews in the first year and two had periodic reviews. We have also begun work on reviews in the 2022/23 round.

² Feedback survey: Timeliness of report production and publication, mean score 4.75/5 (n=8); Time allowed to provide factual comments on the report, mean score 4.25/5 (n=8).

³ Feedback survey: Sharing of analysis documents prior to panel meeting, mean score 4.63/5 (n=8); Transparency of process vs old process, mean score 4.25/5 (n=8).

- 2.10. Regulators gave positive feedback about the proportionality of the process,⁴ though they did not feel it had significantly reduced the burden on them: the overall feedback scores were marginally positive;⁵ comments gave a range of views, with an overall impression that the burden is similar:
- *'The new approach is welcomed, particularly the increased level of dialogue, but the increased level of interaction, while having benefits, it does require more resource from our end.'*
 - *'This was a monitoring year for [regulator] and there was a noticeable difference. The whole process felt lighter touch and more proportionate and in accordance with what PSA had set out when consulting.'*
 - *'The experience wasn't too dissimilar from what we normally do for a Performance Review.'*
 - *'Although a monitoring year we did not notice any particular reduction in the resource requirements for the regulator. The requests for information and evidence have been spread throughout the year but we did not consider that across the year this had reduced.'*
- 2.11. Some regulators said there were times we did not give them long enough to respond to some information requests, though they also recognised that we gave extensions where required.
- 2.12. The team considered that there has been relatively little change in their own workload and the proportionality of our approach. They are still gathering evidence relevant to all the Standards. They felt there was limited difference between a monitoring year and a periodic review, other than carrying out an audit and the format of the report. The team noted above the advantages of sharing the plan for the next year's review, but we have made less use of them to consider where we might reasonably do less monitoring of an area of a regulator's performance on the grounds of proportionality. The team would welcome guidance on how to properly apply a risk-based approach and identify what issues we choose not to focus on.
- 2.13. It is **too early to evaluate** whether the process is more proportionate across the three-year cycle. There is some evidence that we have been successful in spreading the load on regulators more evenly. Where there have been delays in obtaining information from regulators, we have been able to manage this and deliver reports in time to meet our KPI. Feedback from the team and regulators indicates that there is scope to differentiate more clearly between monitoring and periodic review years on the basis of risk, and to reduce further the burden of work undertaken in monitoring years. However, consideration of any such measures will need to balance benefits of reducing burden against the increased risk of missing important information (as noted in paragraph 3.3).

⁴ Feedback survey: Proportionality of review, mean score 4.13/5 (n=8).

⁵ Feedback survey: Resource requirements on the regulator, mean score 3.38/5 (n=8); Resource requirements improved vs old process, mean score 3.25/5 (n=8).

Enhancing engagement with the regulators

- 2.14. We wanted to engage more frequently and effectively with regulators to share and discuss issues in a timelier manner, allowing regulators to address issues in-year. Through enhanced engagement, we also expected to ensure greater understanding of our approach and reasons for our decisions.
- 2.15. We have significantly increased the number of liaison meetings with regulators, from around 14 in 2020/21 to around 60 in 2021/22.⁶ The team have set up regular meetings with their regulators, with a mutually-agreed frequency.
- 2.16. Regulators gave positive feedback about our engagement and communication with them.⁷ This is consistent with the team's experience: regulators are happy to meet with us; we are getting more information in a more timely way; and this allows us to identify and resolve issues in good time ahead of panel decisions.
- 2.17. Feedback from regulators included some challenges, including that while they welcome increased engagement this requires more resource from them.
- 2.18. This benefit has been **achieved**. Engagement with regulators is a key responsibility for the team, and it will remain a priority.

Obtaining greater stakeholder input

- 2.19. A key aim for the new approach was to broaden our engagement with stakeholders and gain a better understanding of key risks relevant to each regulated profession.
- 2.20. Figure 2 compares the volume of stakeholder engagement for the last year of the old process and the first year of the new process. It shows that we have significantly increased our overall volume of stakeholder engagement and that we have engaged with stakeholders in different ways.

⁶ These figures only relate to regular liaison meetings; they do not include joint workshops or meetings about audits.

⁷ Feedback survey: Engagement with PSA improved vs old process, mean score 4.38/5 (n=8); General communications, mean score 4.5/5 (n=8); Communications during an audit, mean score 5/5 (n=2); Clarity of why areas were selected for detailed review, mean score 4.33/5 (n=6); Communication about report process, mean score 4.5/5 (n=8).

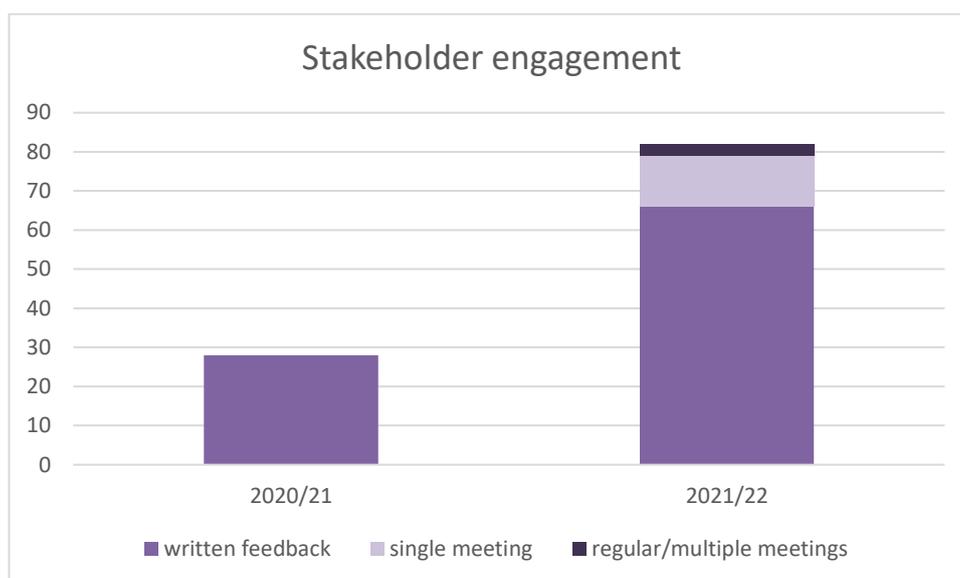


Figure 2: stakeholder engagement

- 2.21. Team members have identified key stakeholders for their regulators and sought to agree appropriate methods and frequency for feedback. We have set up regular themed meetings with organisations who are stakeholders for multiple regulators, such as UNISON and MPS/Dental Protection. We share stakeholder feedback with regulators so that they can respond to it. The team noted that taking a more personalised approach to our requests for feedback has helped increase response rates.
- 2.22. Engagement still varies according to factors outside our control: stakeholders are more likely to engage with us if they have concerns about a regulator’s performance. We are identifying stakeholders relevant to live issues and risks, but it is not always clear when and how we can reduce engagement in line with a risk-based approach. However, ongoing engagement is still helpful in building and maintaining relationships so that stakeholders are more likely to tell us about live issues. The team also identified potential benefits in working more closely with our communications team.
- 2.23. Regulators’ feedback about the contribution of stakeholder feedback to our reviews was modestly positive in terms of survey scores.⁸ Comments received raised challenges: one regulator expressed disappointment at the level of feedback we had received from stakeholders;⁹ another felt that we had taken a stakeholder’s feedback at face value.
- 2.24. In developing the new process, we outlined a revised [stakeholder engagement process](#). We have increased the contribution of feedback to our reviews by increasing the amount of engagement with individual stakeholder organisations. The stakeholder engagement process also included surveys and roundtables or focus groups as options to gather information. We considered using these techniques in our review of Standard 3: we conducted a survey and made

⁸ Feedback survey: Involvement of stakeholders in the process, mean score 3.57/5 (n=7).

⁹ We had contacted 53 stakeholders to request feedback; 3 provided responses.

enquiries about establishing a focus group, though in the event this proved impractical.

- 2.25. We designed our report templates to highlight the contribution of stakeholder feedback. We can also identify numerous examples of where stakeholders' feedback has informed the direction of our review, including:
- We were tagged on Twitter by registrants who had been removed from a register for failing to renew their registration on time. They said they had not received a reminder. We contacted their professional body and held a meeting to obtain further information. We raised the issue with the regulator and used it to inform our assessment of performance.
 - Several education organisations contacted us to raise concerns about a regulator's process for assessing applications for specialist registration. We sought further information from the regulator and established that it was developing a new, in-house process. We will be continuing to monitor its work to implement the new process.
- 2.26. This benefit has been **achieved**. We have increased the quantity and quality of stakeholder contributions to our reviews. There is still further work for us to do in this area: levels of engagement vary between regulators, and we have principally been successful in engaging with professional organisations rather than patient and public groups. We have arranged some stakeholder management training for the team to support their work in this area. We will continue to consider using alternative methods of stakeholder engagement where this may be appropriate to the stakeholder, regulator, or subject matter.

Driving improvement and sharing good practice

- 2.27. Regulators have said for a long time that they want us to focus more on driving improvement and sharing good practice. While we are confident that our oversight has the effect of driving improvement, we wanted the new process to do this more explicitly.
- 2.28. The review of Standard 3 has been the main focus of our work to drive improvement in the period since we introduced the new process. In consultation with the regulators and other stakeholders, we have developed a new evidence matrix and supporting guidance to make clear what we expect regulators to do to meet this Standard. We deliberately increased the threshold to meet the Standard from its current level, to drive improvement in the regulators' work in relation to equality, diversity and inclusion. We will continue to engage closely with the regulators over the first year of implementing the new evidence matrix, including to identify and share good practice.
- 2.29. Besides this significant programme of work, we have made less progress so far in increasing the emphasis on good practice and driving improvement. We can identify some relevant activity:
- We have sought to be clear in our reports about where regulators are performing well – for example, our reports on the NMC and Social Work England highlighted their good work in stakeholder engagement, and the recent HCPC report for 22/23 explained the improvements it has made to regain two Standards in fitness to practise.

- We have given feedback to regulators about good practice where we have found it in audits, though these findings have been at a more granular level than we would include in a published report.
- We have held workshops with the regulators about timeliness in fitness to practise, and as part of our work to revise our expectations for Standard 3. Sharing current practice and challenges and thoughts about solutions was part of these discussions. We plan to hold a further workshop about timeliness later in 2023/24.

2.30. This benefit has been **partly achieved**. We have completed significant work to develop revised expectations which will drive improvement in relation to Standard 3. We have made less progress so far in increasing the emphasis on good practice, particularly in terms of our published reporting. Our reports must give an accurate overall account of regulators' performance, and it is right that we report on significant concerns and risks. Nevertheless there is scope to do more to highlight and share good practice. We are planning to convene a further workshop with regulators to share insights about fitness to practise timeliness, and could consider whether there may be other topics that would lend themselves to such discussions.

Producing clearer reports

2.31. We developed a new reporting process, producing shorter, focused reports for monitoring reviews and more detailed reports for periodic reviews. We wanted our reports to be more accessible.

Cycle	Readability statistics ¹⁰		
	Word count	Reading ease	Grade level
2019/20 old process	14,030	35.4	14.1
2020/21 old process	9,105	37.9	13.2
2021/22 monitoring review	2,768	42.3	12.3
2021/22 periodic review	7,220		

Table 2: report readability

2.32. Table 3 demonstrates that our reports under the new process are shorter. Monitoring reports are much shorter, as enabled by the new report format. But it is worth noting that we have also significantly reduced the length of our periodic review reports relative to reports under the old process. We treat the other readability statistics with caution: they are based on word and sentence length, which are imperfect proxies for clarity. Nevertheless the modest but sustained improvement in these scores indicates that our reports are easier to read.

2.33. Regulators gave very positive feedback about our reports: survey scores were high¹¹ and comments were largely positive:

- *'We were generally very happy with the finalised 2021/22 performance review report. The new shorter format of monitoring report is a welcome*

¹⁰ Word count = median of reports in each category. Reading ease = Flesch reading ease: **higher** scores are more readable; score is the median of reports that year. Grade level = Flesch-Kincaid grade level: **lower** scores are more readable; score is the median of reports that year.

¹¹ Feedback survey: Updated report format vs old process, mean score 4.38/5 (n=8); Clarity of the report, mean score 4.5/5 (n=8); Factual accuracy of report, mean score 4.5/5 (n=8).

change. This emphasises the points that are made in the report and it makes the report more accessible to readers'

- *'Relatively pleased with the report – content and format'*
- *'As this was our first 'monitoring' year we satisfied that the report balanced our strengths alongside the areas where the Authority feels more work is needed. There were a few minor inaccuracies and areas where we felt that relevant context had been omitted, but we were pleased that the scrutiny team were receptive to this feedback'*

- 2.34. We do not have any way of measuring who else reads our reports or how clear readers find them. We have identified further work to do to ensure that the new report formats are accessible to all readers, particularly those who use assistive technology such as screen-readers. During this year, we explored the possibility of producing video animations to accompany reports but identified that this would require significant further resources and expertise to develop.
- 2.35. This benefit has been **partly achieved**. Our reports are more concise than they used to be. Regulators agree that the new monitoring reports, particularly, are shorter and more focused. As we have limited information about the experience of other readers, and have identified further work to ensure our reports are accessible, we are not able to say yet that the benefit has been fully achieved.

Freeing up team capacity

- 2.36. One of the intentions of developing the new approach was to free up time for the team to be involved in other work. We did not expect that this would be possible in the first year, given the transition from the old to the new approach. Moreover, the team has been at full capacity for only a very limited period since the introduction of the new process.
- 2.37. As noted at paragraph 2.12, the team felt there had been little change in workload so far. That may be unsurprising in the context of the transition and the limited time the team has been at full capacity. However, we managed to complete the programme of work to review expectations around Standard 3, which required significant resource.
- 2.38. It is **too early to evaluate** the extent to which the new process has released capacity within the team for other work. Not all team members have yet led a periodic review, and other factors have affected the capacity available. Discussions with the team highlighted the scope for us to develop further our risk-based approach to monitoring.

Introducing process improvements

- 2.39. Alongside introducing the new approach, we identified a number of process improvements to be implemented. Some of these are covered elsewhere in the evaluation (stakeholder engagement, reporting). We also updated the dataset as of April 2023, but it is too early to evaluate this. For this reason, this section focuses on the changes made to audits.
- 2.40. Our previous approach focused on reviewing relatively large samples (generally 60-100) of closed fitness to practise cases. This was a very resource intensive

activity, requiring input from most if not all team members. Following audit training from the Institute of Internal Auditors, we identified this as an area that could be scaled back without compromising quality.

- 2.41. We subsequently developed and introduced a new, more rounded audit process that looked at additional ways of gaining assurance, including speaking with staff and evaluating and testing the controls put in place by a regulator. Through this, we have reduced the sample sizes and increased the engagement with regulators’ FtP teams. The number of cases reviewed in our audit work has fallen under the new approach:

Regulator	Number of cases reviewed	
	Old approach	New approach
GOC	100 (2016/17)	37 (2021/22)
GDC	60 (2017/18)	20 (2021/22)
GCC	23 (2018/19)	15 (2022/23)
HPCP	71 (2019/20)	25 (2022/23)
GPhC	69 (2020/21)	35 (2022/23)

Table 3: comparison of audit sample sizes

- 2.42. For each file review we are also asking more targeted audit questions. We are therefore able to carry out this element of the audit work more quickly and efficiently, although because we did not always record time spent on audits, we have relatively little data in terms of resources used. To give an indication of the likely reduction in resource needed, the file review element (including QA) of the GPhC audits took 103 person days in 2020/21 and approximately 50 person days in 2022/23.
- 2.43. The new process also means the team spends less time liaising with the regulator on detailed feedback relating to individual cases; this also reduces the burden on the regulator side. Audit feedback now focuses on a smaller number of material issues which are more likely to impact our assessment against one or more of our Standards.
- 2.44. Comparing recent audits for two regulators gives us some indication of how these changes have affected the elapsed time taken for these elements of our audit work under the old and new process.¹²

¹² Audit analysis begins before the last case has been quality assured, but is not consistently recorded and this overlap of work is therefore not shown in this chart. Underlying data is [here](#).

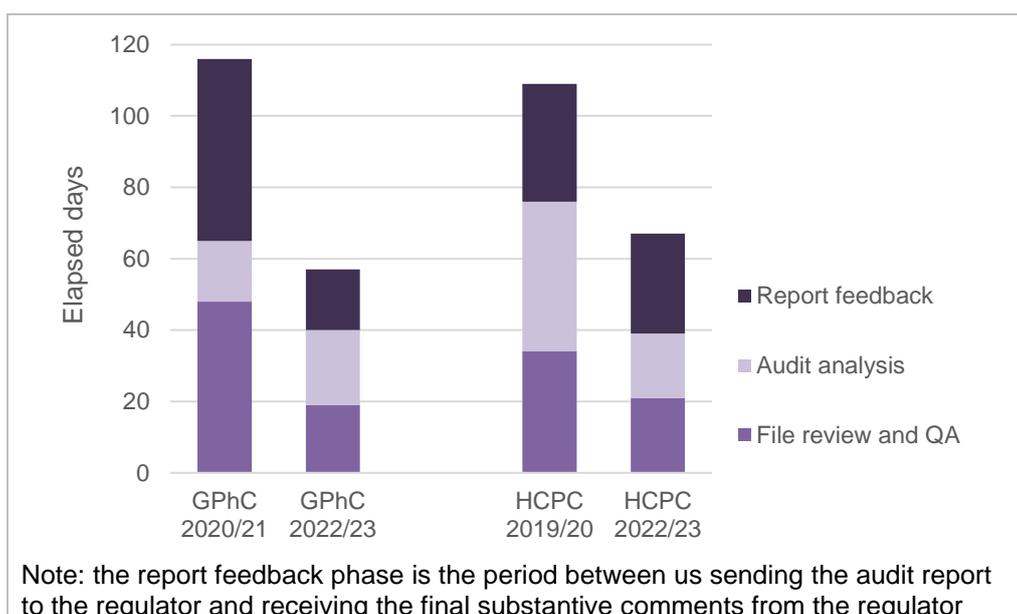


Figure 3: comparison of time to complete audits

2.45. At this stage we have relatively little evidence to suggest there has been any change in the quality or robustness of our audit findings under the new approach. We have had no significant pushback from regulators on our audit findings, and panel discussions have not indicated any dissatisfaction with the audit findings or how they have been used in our assessments against the Standards.

3. Have concerns we expected materialised?

3.1. When we were developing the new approach, we identified some areas of risk that could affect its success. This section considers the extent to which those risks materialised and any relevant mitigation.

Our resources could be overwhelmed by the amount of work involved in moving from one process to another, running two parallel processes for a short period

3.2. This risk **did not materialise** in terms of not being able to meet KPIs. However, there were significant pressures on the team in the transition period which would not have been sustainable. We recognise the work pressures at the time, though reviewing the delivery of the project, rather than effectiveness of the new approach, is outside the scope of this evaluation.

We could miss issues through the 'lighter touch' monitoring process and our assessments may not be as robust, or perceived to be as robust by stakeholders

3.3. We **have not seen evidence that this risk materialised**, though we recognise that this could be because we are still unaware of a missed issue. We have not seen evidence that stakeholders perceive our assessments to be less robust, and the work we have done to engage with stakeholders gives us some assurance that we have mitigated both elements of this risk. Furthermore,

feedback from the team indicates that our approach to monitoring has not made it a much lighter-touch process, as we are still gathering and considering evidence about all the Standards. If we seek to develop our risk-based approach further to more fully realise the benefits of lighter-touch monitoring, we will need to be appropriately assured about how we are mitigating the risk of missing important information. We made clear in our consultations on the new process that our performance reviews seek sufficient, not total, assurance about regulators' performance.

We may have to do work out of cycle if significant risks were identified, which could cause resourcing issues

- 3.4. This risk **did not materialise** in the first year of the new approach. Panels considered the plan for the following year as part of their final decision about each regulator's performance. We did not identify issues that needed intervention out of cycle, though it is worth noting that our original plans did not take account of the Standard 3 work, which was not fully scoped at that time and resulted in significant work for the team. The risk remains live because our monitoring may identify a need for work out of cycle at any point. However, now we have made the transition to the new process, we should have more flexibility to deal with such demands if they arise.

Introducing the process at pace risks a lack of preparedness and time to provide the team with the skills required for the new approach

- 3.5. This risk **did materialise to an extent**. We had to work at pace to introduce the new process at the same time as working through the last reviews of the previous cycle. This meant we did not always have capacity to develop guidance and processes sufficiently in advance. The team reported that the transitional year from the old to new process felt rushed, including having to cram in meetings with regulators near the panel meetings. Some felt less confident around the new approach to audit and stakeholder engagement.
- 3.6. We recognise that the staggered cycle means that some regulators and team members were the first to experience elements of the new process, and this affected the guidance and support that was available. We have been working to develop and update guidance and associated template documents. We have also sought feedback from the team, in addition to the individual appraisal cycle, to identify skills gaps and future training. So far this has led to training for several team members in stakeholder management and data presentation, in addition to training for the whole team on remote auditing and remote interviewing, delivered earlier in the transition.

4. Priorities for further work

- 4.1. Our evaluation has identified several areas where we could undertake further work to ensure that we achieve the key benefits of the new process and mitigate the key risks.
- 4.2. It bears reiterating that while we are assured that we have achieved the desired benefits in terms of increasing engagement with the regulators and other

stakeholders, and producing our reports more quickly, these remain integral to the new process. The fact that we have not identified specific further development work in these areas does not mean that we have deprioritised them, but rather that we consider they are embedded as business as usual. We remain committed to continuous improvement in our working practices.

4.3. We propose to prioritise the specific areas for further development work as follows:

Further work	Priority and rationale
Consider further developments to our risk-based approach to monitoring	High: increasing the extent to which our work is based on risk may enable us to increase our proportionality and agility, including reducing burden on our staff and regulators where it is safe to do so. To do so, we would be relying more on our ability to detect and assess risk accurately. We would therefore need to consider carefully how we can be assured of this as part of any further development work. This work could have significant benefits but carries significant risks, hence further consideration is a high priority.
Consider how we can increase our focus on sharing good practice	High: we already have plans to convene a workshop for regulators on fitness to practise timeliness. We may wish to consider whether there are other topics which would lend themselves to a similar approach: for example, these may emerge from our discussions with regulators around the new evidence matrix for Standard 3. Further consideration is high priority but further developments will depend on the emergence of suitable topics and evidence to justify further work.
Consider how we can increase our focus on reporting on good practice	Medium: we may wish to consider the risks and benefits of seeking more actively to highlight good practice in our reporting. This is medium priority because we are satisfied that our reports currently achieve their principal, statutory function of giving an accurate overall description of regulators' performance. We may also identify other ways of sharing good practice as above.
Review our reports for accessibility	Medium: we want our reports to be accessible to a wide range of readers, including those who use assistive software. While we have no direct evidence people are excluded from our reports at present, there may be work we can do to review our report formats to assure ourselves that they are not creating barriers to people being able to read them. However, significant changes to how we

	publish reports are likely to depend on changes to the PSA website, which are outside the team's direct control.
Continue to improve our approach to audit	Medium: guidance on our new approach to audit needs to be drafted and further training may be required. Audit is still being used almost exclusively to examine issues in fitness to practise and there may be scope to apply it to other regulatory functions.
Gather further information about who reads our reports	Low: our reports are published through our website and there is no functionality to record who is reading them. Hence there is little prospect that we could gather comprehensive data. We could seek specific feedback from stakeholders about our reports, and this could be valuable; however, stakeholders have their own priorities and resource limitations, and we want our engagement with them to focus on what they can tell us about the regulators' performance.
Continue to consider different methods of stakeholder engagement	Low: we have increased stakeholders' contribution to our reviews, and have developed effective working relationships with numerous key stakeholders across the regulators. We will continue to be mindful of opportunities to engage with different stakeholders and in different ways, and have arranged further training for the team to support this.

Table 4: priorities for further work

5. Conclusion

- 5.1. Overall we consider the first year of the new process to be successful. We have achieved or partly achieved nearly all the key benefits, though it is too early to tell how far we have succeeded in reducing the overall burden of the process. The key risks have not, as far as we can tell, materialised to an extent that we could not mitigate.
- 5.2. We have identified significant improvements over the old process, particularly in relation to how long it takes to publish our reports and the contribution of stakeholders to our reviews. Our increased engagement with regulators has facilitated these improvements and gives us a platform for our further development work.