

Accreditation renewal report

Standards 2-8

Alliance of Private Sector Practitioners

July 2024

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About accreditation

The Professional Standards Authority (the Authority) accredits registers of people working in a variety of health and social care occupations that are not regulated by law. To become an Accredited Register, organisations holding registers of unregulated health and social care roles must prove that they meet our *Standards for Accredited Registers* (the Standards).

Initial accreditation decisions are made by an Accreditation Panel following an assessment of the organisation against the Standards by the Accreditation team. The Panel decides whether to accredit an organisation or not. The Panel can also decide to accredit with Conditions and provide Recommendations to the organisation.

- **Condition** – Issued when a Panel has determined that a Standard has not been met. A Condition sets out the requirements needed for the Accredited Register to meet the Standards, within a set timeframe. It may also reduce the period of accreditation subject to a review or the Condition being met.
- **Recommendation** – Actions that would improve practice and benefit the operation of the Register, but which is not a current requirement for accreditation to be maintained.

This assessment was carried out against our Standards for Accredited Registers¹ (“the Standards”) and our minimum requirements for the Standards as set out in our Evidence framework². More about how we assess against Standard One can be found in our Supplementary Guidance for Standard One³.

We used the following in our assessment of the Alliance:

- Documentary review of evidence of benefits and risk supplied by the Alliance and gathered through desk research
- Documentary review of evidence supplied by the Alliance and gathered from public sources such as its website
- Due diligence checks
- Share your experience responses
- Assessment of Alliance’s complaints procedures.

¹ https://www.professionalstandards.org.uk/docs/default-source/publications/standards/standards-for-accredited-registers.pdf?sfvrsn=e2577e20_8

² https://www.professionalstandards.org.uk/docs/default-source/accredited-registers/standards-for-accredited-registers/accredited-registers-evidence-framework-for-standards.pdf?sfvrsn=55f4920_9

³ https://www.professionalstandards.org.uk/docs/default-source/accredited-registers/standards-for-accredited-registers/accredited-registers-supplementary-guidance-for-standard-one.pdf?sfvrsn=3e5f4920_6

The Outcome

The Alliance of Private Sector Practitioners ('the Alliance') withdrew from the Accredited Registers programme on 31 March 2024⁴. In line with our Publications Policy⁵, we are publishing the report of the Accreditation Panel which met on 25 March 2024 to consider the Alliance's renewal assessment. The Panel was satisfied that the Alliance could meet with Conditions all the Standards for Accredited Registers. Since the Alliance is no longer accredited, we have not issued timeframes for the Conditions. If the Alliance was to reapply for accreditation in future, we would assess whether the Conditions had been met.

We therefore decided to accredit the Alliance with Conditions

We noted the following **positive findings**:

- The Alliance's standards for competence, ethical behaviour, and business practice are contained within the Alliance Rulebook, for the benefit of registrants and others wishing to learn about its requirements.
- The Alliance's register and main website emphasises its focus on public protection, promoting best practices and continuous practitioner development to ensure the safety and protection of service users.

We issued the following Conditions:

Conditions	
Standard 2	<ol style="list-style-type: none">1. The Alliance must develop and publish 'clear, published processes for all routes to registration' for the benefit of applicants and anyone wishing to understand the register's entry and renewal requirements.2. The Alliance must develop and publish mechanisms to ensure that applicants meet its registration requirements (including those set for education and training) and registrants continue to do so.3. The Alliance must develop and publish a clear appeal process so that those applying to a register can appeal registration decisions.4. The Alliance must develop and publish processes for recognising decisions regarding professional conduct made by regulatory bodies, and other registers, when deciding whether a person should be admitted to the register.

⁴ <https://www.professionalstandards.org.uk/news-and-blog/latest-news/detail/2024/03/27/alliance-of-private-sector-practitioners-to-leave-the-accredited-registers-programme>

⁵ https://www.professionalstandards.org.uk/docs/default-source/accredited-registers/guidance-documents/accredited-registers-publications-policy.pdf?sfvrsn=30427220_12

Standard 3	<p>5. The Alliance Rulebook must explicitly include registrants' Duty of Candour to their clients.</p> <p>6. The Alliance must develop and publish its policy for handling safeguarding concerns, including signposting to appropriate resources and authorities.</p> <p>7. The Alliance must set requirements for registrants to have procedures for considering complaints and escalating to the Alliance where necessary.</p> <p>8. The Alliance must develop and publish mechanisms to check that registrants hold indemnity cover.</p>
Standard 4	<p>9. The Alliance must develop and publish mechanisms to ensure that registrants are equipped to care for a diverse population through their education and training requirements.</p>
Standard 5	<p>10. The Alliance must ensure that adjudication of complaints is separate from its governance. This must include separation from its Ethics Committee members.</p> <p>11. The Alliance must ensure that decision makers in complaints processes are not involved in multiple stages of the same complaint.</p> <p>12. The Alliance should document processes for recruitment, training, including relevant EDI training, and ongoing monitoring of those key decision makers in disciplinary processes.</p> <p>13. The Alliance must develop and document 'Indicative Sanctions Guidance' or other mechanisms to ensure that complaints outcomes are fair, proportionate and consistent.</p> <p>14. The Alliance must document its process for Quality Assurance of decisions, including use of the Ethics Committee.</p> <p>15. The Alliance must document its Interim Orders process to make clear that those orders may be issued at earlier stages, and make clear what these involve, such as periodic review or appeal.</p> <p>16. The Alliance should develop and publish mechanisms for triaging whether concerns require escalation from informal or mediated outcomes to formal disciplinary procedures.</p> <p>17. The Alliance must develop and publish its Publications Policy for outcomes, clearly setting out where and for how long complaints outcomes will be displayed.</p>

Standard 6	<p>18. The Alliance must clearly separate the management of register functions, education and training provision, and professional body activities. It using its Ethics Committee to achieve this, the Alliance must document and publish mechanisms to manage real or perceived conflicts of interest effectively.</p> <p>19. The Alliance must develop contingency plans for the continued operations and leadership of the register should the current Directors and Registrar leave their roles. These should include how the Alliance will ensure that persons named in the succession plan are equipped for each role.</p> <p>20. The Alliance must seek to achieve diversity in the composition of its senior leadership, Board and Committee members.</p> <p>21. The Alliance must develop a clear and documented mechanism to assist management of organisational risks.</p>
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We issued the following Recommendations to be considered by the next review:

Recommendations	
Standard 2	<ol style="list-style-type: none"> 1. The Alliance should consider removing its restrictions on access to the register. 2. The Alliance should create a dedicated page on its website highlighting current or recent disciplinary outcomes.
Standard 4	<ol style="list-style-type: none"> 3. The Alliance should provide further information about its Test of Competence and wider equivalence-requirements for admission to the register.
Standard 5	<ol style="list-style-type: none"> 4. The Alliance should review its complaints procedures to ensure they emphasise their public protection aims. 5. The Alliance should consider what further support it can provide to all parties throughout the complaints process, and document this accordingly. 6. The Alliance should clarify its appeals process to advise who may appeal a decision, at what stages, and the grounds for which appeals will be allowed.
Standard 6	<ol style="list-style-type: none"> 7. The Alliance should consider what further information it can publish about itself and its work to promote transparency and increase confidence in the register.
Standard 7	<ol style="list-style-type: none"> 8. The Alliance should review and revise the information it provides about treatments to ensure it is clear, accessible, and

	written in 'plain English' for the benefit of the public and those accessing the register.
Standard 8	9. The Alliance should review the clarity and accessibility of its websites.

About the Register

This section provides an overview of the Alliance and its register.

Name of Organisation	Alliance of Private Sector Practitioners
Website	http://foothealthpractitionerregister.co.uk/ / https://www.thealliancepsp.com/
Type of Organisation	Limited company (company number 04379814)
Role(s) covered	Foot Health Practitioners HCPC-registered Podiatrists
Number of registrants	860 registrants as of 1 January 2024
Overview of Governance	The Alliance's leadership includes the Managing Director & Registrar, and Director of Education. The Alliance also involves lay persons and members of the public in disciplinary matters. In cases where conflicts of interest may arise, an Ethics Committee composed of lay persons convenes to assess and provide recommendations to the Directors. The Directors will then take appropriate action to mitigate or prevent future occurrences of such conflicts.
Overview of the aims of the register	The Alliance's Register of Foot Health Practitioners includes both Foot Health Practitioners and HCPC-registered Podiatrists. The Register lists both Alliance professional body members and qualified non-members, allowing the public to verify practitioners and view any pending or current disciplinary issues, thus enabling informed choices when selecting a practitioner.

Assessment against the Standards

Standard 2: Management of the register

Summary

The Accreditation Panel found that Standard Two was met. It issued the following Conditions and Recommendation:

Conditions:

- The Alliance must develop and publish 'clear, published processes for all routes to registration' for the benefit of applicants and anyone wishing to understand the register's entry and renewal requirements.
- The Alliance must develop and publish mechanisms to ensure that applicants meet its registration requirements (including those set for education and training) and registrants continue to do so.
- The Alliance must develop and publish a clear appeal process so that those applying to a register can appeal registration decisions.
- The Alliance must develop and publish processes for recognising decisions regarding professional conduct made by regulatory bodies, and other registers, when deciding whether a person should be admitted to the register.

Recommendations:

- The Alliance should consider removing its restrictions on access to the register.
- The Alliance should create a dedicated page on its website highlighting current or recent disciplinary outcomes.

Accreditation Panel findings

- 2.1 The Alliance maintains a general website, and separate register website. People may access the register by looking up registrants by name, registration number or location. The register displays those details, any sanctions, and a "valid to" date.
- 2.2 During our assessment, we noted that the Alliance limits the number of register checks to five per day. The Alliance had explained that this restriction is intended to protect its data. We were concerned that this limitation may hinder accessibility for those seeking to check the Alliance's practitioners. The Accreditation Panel issued the following Recommendation:
 - The Alliance should consider removing its restrictions on access to the register.
- 2.3 When reviewing the process for practitioners to join the register, we found that information about the registration requirements was difficult to follow, with different details presented across various websites and in the Alliance

Rulebook. We noted that while most registrants might receive information about the register upon graduating from the Alliance's affiliate training provider, it would be challenging for others to find this information. There was no clear guidance on the Alliance's equivalency assessment, the required evidence, necessary declarations, or related information. To address these issues the Accreditation Panel issued the following Condition:

- The Alliance must develop and publish clear, published processes for all routes to registration for the benefit of applicants and anyone wishing to understand the register's entry and renewal requirements.

2.4 We were uncertain about the Alliance's processes for verifying that applicants or existing registrants met its registration requirements beyond checking their qualifications. To ensure compliance with this Standard, the Accreditation Panel issued the following Condition:

- The Alliance must develop and publish mechanisms to ensure that applicants meet its registration requirements (including those set for education and training) and registrants continue to do so.

2.5 We noted that the Alliance provides clear CPD requirements for registrants to maintain and develop their competence. Registrants must undertake CPD through courses provided by the Alliance, reflective work, or other means. The Alliance conducts an annual check of 2.5% of registrants to ensure compliance with these requirements.

2.6 If an applicant is not admitted to the register, they may raise concerns with the Alliance or escalate them to its Ethics Committee. However, we identified barriers to this process, such as the lack of acceptable grounds for appeals. Clear appeals processes are required under our Standards. To address this, the Accreditation Panel issued the following Condition:

- The Alliance must develop and publish a clear appeal process so that those applying to a register can appeal registration decisions.

2.7 We were not sure of the Alliance's process for recognising decisions regarding professional conduct made by regulatory bodies and other Accredited Registers when deciding whether a person should be admitted to the register. These processes would allow it to recognise if someone had been removed from another register, such as the Health and Care Professions Council's register of podiatrists. The Accreditation Panel issued the following Condition to address this:

- The Alliance must develop and publish processes for recognising decisions regarding professional conduct made by regulatory bodies, and other registers, when deciding whether a person should be admitted to the register.

2.8 The Alliance will publish disciplinary information on the register. However, it was unclear whether there are other areas, outside of register entries, where people can easily check if someone is under interim or final suspension, other active sanction, or has been removed from the register. To improve transparency, the Accreditation Panel issued the following Recommendation:

- The Alliance should create a dedicated page on its website highlighting current or recent disciplinary outcomes.

Standard 3: Standards for registrants

Summary

The Accreditation Panel found that Standard Three was met. It issued the following Conditions:

Conditions:

- The Alliance Rulebook must explicitly include registrants' Duty of Candour to their clients.
- The Alliance must develop and publish its policy for handling safeguarding concerns, including signposting to appropriate resources and authorities.
- The Alliance must set requirements for registrants to have procedures for considering complaints and escalating to the Alliance where necessary.
- The Alliance must develop and publish mechanisms to check that registrants hold indemnity cover.

Accreditation Panel findings

- 3.1 The Alliance sets standards for competence, ethical behaviour, and business practice, detailed in the Alliance Rulebook, available on its website⁶. These standards require practitioners to act in the best interests of their patients, clients, and users, and to inform the Alliance of any issues regarding their conduct, competence, and health. The Rulebook also specifies that practitioners must work within their scope of practice, adhere to their professional limits, and know when and where to make referrals. This ensures that practitioners maintain high standards and provide safe and effective care.
- 3.2 The Alliance aligned its standards with Health Education England's (HEE) Standards for the Foot Health Workforce⁷. The HEE Standards specify that Foot Health Practitioners (FHPs) are trained for less complex and less invasive procedures compared to podiatrists. FHPs can perform a range of foot health treatments and must observe general foot health, but they are not employed by the NHS and typically work independently. The document emphasises that FHPs must adhere to professional standards and ethics, and their scope of practice may expand with experience and additional

⁶ <https://www.thealliancepsp.com/wp-content/uploads/2024/04/Alliance-Rulebook-2024.pdf>

⁷ https://www.hee.nhs.uk/sites/default/files/HEE_Foot_Health_Standards_2021.pdf

- qualifications. The HEE standards are informed by the National Occupational Standards for Podiatry.
- 3.3 We noted the framework set out within the Rulebook contains essential elements such as acting in the best interests of patients, respecting confidentiality, maintaining high standards of conduct, declaring issues related to conduct or health, and upholding professional integrity. It also emphasises that practitioners must stay within their scope of practice, and ensure effective communication with their clients.
- 3.4 We require Accredited Registers' standards for registrants to make explicit reference to the Duty of Candour: that registrants are open and honest about errors or harm in practice. We noted that while the Rulebook set out requirements for registrants' full cooperation in disciplinary matters, there was no reference to the duty in registrants' practice. The Accreditation Panel therefore issued the following Condition:
- The Alliance Rulebook must explicitly include registrants' Duty of Candour to their clients.
- 3.5 We checked whether the Alliance has a process for handling safeguarding concerns, with appropriate signposting. The Alliance's Safeguarding Policy indicates that the organisation has a responsibility, in collaboration with other health professionals, to promote the safeguarding of young, adult, and vulnerable patients treated by its registered practitioners. Additionally, the Alliance's Rulebook states that it will share and exchange information with other regulators and safeguarding authorities on matters of public safety.
- 3.6 While we acknowledged these commitments, we did not find evidence of a clear process for handling or advising on safeguarding concerns when they are raised, particularly when a vulnerable individual is identified as being at risk of harm. This is crucial as clients in this sector are often vulnerable, such as elderly individuals living in care settings. The Accreditation Panel therefore issued the following Condition:
- The Alliance must develop and publish its policy for handling safeguarding concerns, including signposting to appropriate resources and authorities.
- 3.7 We checked whether the Alliance has set requirements for registrants to manage complaints themselves, or to escalate them to the register where this is necessary. We did not see evidence of this within the Rulebook or in other policies. The Accreditation Panel issued the following Condition:
- The Alliance must set requirements for registrants to have procedures for considering complaints and escalating to the Alliance where necessary.
- 3.8 We noted that the Alliance's Rulebook requires registrants to hold appropriate indemnity insurance. We did not see evidence however of how the Alliance

checks for this at appropriate points such as initial registration or annual renewal. The Accreditation Panel therefore issued the following Condition:

- The Alliance must develop and publish mechanisms to check that registrants hold indemnity cover.

Standard 4: Education and training

The Accreditation Panel found that Standard Four was met. It issued the following Condition and Recommendation:

Condition:

- The Alliance must develop and publish mechanisms to ensure that registrants are equipped to care for a diverse population through their education and training requirements.

Recommendation:

- The Alliance should provide further information about its Test of Competence and wider equivalence-requirements for admission to the register.

Accreditation Panel findings

- 4.1 The Alliance requires registrants to hold a Level 4 Diploma in Foot Health Practice, including 10 days of Alliance-approved practical training. The majority of registrants achieve this qualification by graduating from the College of Foot Health Practitioners' Level 4 Diploma Course. This course is accredited under the NCFE IIQ Licence, and its measurable learning outcomes are benchmarked at Level 4 using OFQUAL's Qualification and Credit Framework (QCF) descriptors, ensuring appropriate depth of study and level of achievement.
- 4.2 Applicants who have not graduated from the College must demonstrate equivalent competence to be included on the register and may be required to complete further training before admittance. We considered that further information about the Test of Competence, and the application process, for non-College graduates would assist those wishing to join the register or learn more about its requirements, and issued the following Recommendation:
 - The Alliance should provide further information about its Test of Competence and wider equivalence-requirements for admission to the register.
- 4.3 We checked how the Alliance ensures that registrants' training ensures they are equipped to care for a diverse population. The Alliance referred to its Rulebook, which requires registrants' commitment to providing the best treatment irrespective of race, creed, orientation, or personal beliefs. This emphasises fair treatment and compliance with the Equality Act 2010. However, there was no evidence that the training provided by the College, or assessments for equivalence, ensure that registrants are equipped to care for

a diverse population. This could potentially affect treatment outcomes, patient trust and comfort, and professional development. The Accreditation Panel issued the following Condition:

- The Alliance must develop and publish mechanisms to ensure that registrants are equipped to care for a diverse population through their education and training requirements.

Standard 5: Complaints and concerns about registrations

The Accreditation Panel found that Standard Five was met. It issued the following Conditions and Recommendations:

Conditions:

- The Alliance must ensure that adjudication of complaints is separate from its governance. This must include separation from its Ethics Committee members.
- The Alliance must ensure that decision makers in complaints processes are not involved in multiple stages of the same complaint.
- The Alliance should document processes for recruitment, training, including relevant EDI training, and ongoing monitoring of those key decision makers in disciplinary processes.
- The Alliance must develop and document 'Indicative Sanctions Guidance' or other mechanisms to ensure that complaints outcomes are fair, proportionate and consistent.
- The Alliance must document its process for Quality Assurance of decisions, including use of the Ethics Committee.
- The Alliance must document its Interim Orders process to make clear that those orders may be issued at earlier stages, and make clear what these involve, such as periodic review or appeal.
- The Alliance should develop and publish mechanisms for triaging whether concerns require escalation from informal or mediated outcomes to formal disciplinary procedures.
- The Alliance must develop and publish its Publications Policy for outcomes, clearly setting out where and for how long complaints outcomes will be displayed.

Recommendations:

- The Alliance should review its complaints procedures to ensure they emphasise their public protection aims.
- The Alliance should consider what further support it can provide to all parties throughout the complaints process, and document this accordingly.

- The Alliance should clarify its appeals process to advise who may appeal a decision, at what stages, and the grounds for which appeals will be allowed.

Accreditation Panel findings

- 5.1 The Alliance's Rulebook sets out its Disciplinary Procedures for managing concerns about registrants. Initial attempts at informal resolution are made by the Compliance Director (the Registrar), who may offer mediation. If the concern or complaint is serious or cannot be informally resolved, the process moves to a formal disciplinary stage, involving investigation and adjudication by separate panels. The procedures state that any criminal conviction will result in immediate removal and notification to other bodies.
- 5.2 During our review of the Alliance's complaints process, we considered feedback from an individual who had submitted a complaint against one of the Alliance's registrants. Themes raised were taken into account when assessing the Alliance's procedures.
- 5.3 We found that the published process appeared reasonably informative and accessible, setting out timelines and points at which parties will be notified. However, the Accreditation Panel noted that the complaints procedures did not clearly emphasise the protection of the public. It emphasised that ensuring public protection was a central theme could improve confidence in the register and its functions. And issued the following Recommendation:
 - The Alliance should review its complaints procedures to ensure they emphasise their public protection aims.
- 5.4 The complaints procedures clearly state that the Adjudication Panel may take actions to support or protect the complainant and other witnesses throughout the complaints process. While the Alliance acknowledges that the complaints procedures can be stressful for all parties involved, it should further explore how to provide comprehensive support throughout the process. The Accreditation Panel issued the following Recommendation:
 - The Alliance should consider what further support it can provide to all parties throughout the complaints process, and document this accordingly.
- 5.5 Complaints panels include an Alliance Executive Officer, a Healthcare Practitioner with no connection to the Alliance or the foot care professions, and a Lay Person with a particular interest in the wellbeing of the public. The Alliance's Rulebook notes it will exclude any person with direct involvement or personal interest in the complaint.
- 5.6 We require that the adjudication of complaints be separate from the governance of Accredited Registers, and for decision makers to not be involved in multiple stages of the complaints process. We considered that the Alliance's repeated use of Panel members, and close relationships of its existing Panel members compromised the Alliance's ability to meet this

requirement. To address the requirement, the Accreditation Panel issued the following Conditions:

- The Alliance must ensure that adjudication of complaints is separate from its governance. This must include separation from its Ethics Committee members.
- The Alliance must ensure that decision makers in complaints processes are not involved in multiple stages of the same complaints.

5.7 We found that there was insufficient information available regarding the Alliance's processes for recruitment and training of people involved in complaints panels. It is important that Alliance Directors and other members are appropriately aware of their roles and powers to ensure appropriate decisions are made in the public interest. The Accreditation Panel issued the following Condition:

- The Alliance should document processes for recruitment, training, including relevant EDI training, and ongoing monitoring of those key decision makers in disciplinary processes.

5.8 The Alliance's 'Our policies' page states that 'every effort will be expended to ensure that any sanction imposed is appropriate to the transgression and is in line with sanctions imposed by other regulators'. However, we did not see clear guidance on how this consistency is ensured. The Accreditation Panel issued the following Condition:

- The Alliance must develop and document 'Indicative Sanctions Guidance' or other mechanisms to ensure that complaints outcomes are fair, proportionate and consistent.

5.9 There was insufficient information on how decisions will be quality ensured to ensure appropriate complaints handling, and to learn from outcomes to prevent similar future occurrences by the Alliance's registrants. The Accreditation Panel considered that the Alliance's Ethics Committee (once no longer involved in complaints decisions) should be directly engaged to review outcomes and make recommendations as necessary for the improvement of its processes, and issued the following Condition:

- The Alliance must document its process for Quality Assurance of decisions, including use of the Ethics Committee.

5.10 The Alliance's Adjudication Panel may issue an 'an interim order - a period of suspension on a registrant while investigations are ongoing, an appeal is being heard, or otherwise, to protect the public'. We considered it was appropriate for the Alliance's Registrar or Investigation Panel to also issue such suspensions when necessary for immediate protection of the public. We considered that the Alliance should published information about Interim

suspension policies' scope, including review periods and appeals processes. The Accreditation Panel issued the following Condition:

- The Alliance must document its Interim Orders process to make clear that those orders may be issued at earlier stages, and make clear what these involve, such as periodic review or appeal.

5.11 We were concerned that decisions to escalate a concern would be made following discussion by the Alliance's Directors, which may result in real or perceived conflicts of interest between its professional interests and public protection functions. The Accreditation Panel found that the Alliance should clearly define its triaging mechanisms to assist its decision-making and for the benefit of people using those procedures. It issued the following Condition:

- The Alliance should develop and publish mechanisms for triaging whether concerns require escalation from informal or mediated outcomes to formal disciplinary procedures.

5.12 The Alliance's appeals process allows its Appeals Panels to re-examine a complaint, consider new evidence, or conduct further investigation where appropriate. The Accreditation Panel noted that the grounds for appeals should be clearly set out and issued the following Recommendation:

- The Alliance should clarify its appeals process to advise who may appeal a decision, at what stages, and the grounds for which appeals will be allowed.

5.13 The Alliance will publish outcomes of complaints that result in sanctions, for example removal from the register. The Registrar is responsible for monitoring compliance with sanctions such as further training requirements, or suspension, and for notifying other regulators and safeguarding agencies as necessary. However, we did not see information detailing for how long complaints will be published on the register and where this information will be displayed. The Accreditation Panel considered this should be developed for the benefit of people accessing the register and to comply with data protection regulations. It issued the following Condition:

- The Alliance must develop and publish its Publications Policy for outcomes, clearly setting out where and for how long complaints outcomes will be displayed.

Standard 6: Governance

The Accreditation Panel found that Standard Six was met. It issued the following Conditions and Recommendation:

Conditions:

- The Alliance must clearly separate the management of register functions, education and training provision, and professional body activities. If using its

Ethics Committee to achieve this, the Alliance must document and publish mechanisms to manage real or perceived conflicts of interest effectively.

- The Alliance must develop contingency plans for the continued operations and leadership of the register should the current Directors and Registrar leave their roles. These should include how the Alliance will ensure that persons named in the succession plan are equipped for each role.
- The Alliance must seek to achieve diversity in the composition of its senior leadership, Board and Committee members.
- The Alliance must develop a clear and documented mechanism to assist management of organisational risks.

Recommendation:

- The Alliance should consider what further information it can publish about itself and its work to promote transparency and increase confidence in the register.

Accreditation Panel findings

- 6.1 The Alliance is a limited company, led by its Managing Director and Registrar, and its Director of Education. It is supported by its lay Ethics Committee, which addresses potential conflicts of interest between the Alliance's professional and public protection functions, as well as organisational complaints received.
- 6.2 We considered it critical that the Alliance address the potential for perceived conflicts of interest within its governance, as its Clinical Director is also the owner and principal of the College of Foot Health Practitioners, whose graduates may be admitted to the register. This is chiefly mitigated by its Ethics Committee, however committee members are involved in complaints hearings and had close relationships with the Directors. This limited their ability to provide independent oversight and created perceived or real conflicts of interest. The Accreditation Panel determined that the Alliance's Ethics Committee must be revised to ensure proper separation of functions, and to ensure that the register is seen to be run in the public interest. It issued the following Conditions:
- The Alliance must clearly separate the management of register functions, education and training provision, and professional body activities. If using its Ethics Committee to achieve this, the Alliance must document and publish mechanisms to manage real or perceived conflicts of interest effectively.
- 6.3 We noted that the Alliance has a recruitment protocol for recruiting members to its Ethics Committee but were not sure whether the Alliance's Directors had contingency plans in place should the current Directors or Registrar leave

their roles. The Accreditation Panel issued the following Condition to address this:

- The Alliance must develop contingency plans for the continued operations and leadership of the register should the current Directors and Registrar leave their roles. These should include how the Alliance will ensure that persons named in the succession plan are equipped for each role.

6.4 The Accreditation Panel considered that the Alliance should aim for greater diversity in its leadership when recruiting, by perspective, experience and demographic. It issued the following Condition:

- The Alliance must seek to achieve diversity in the composition of its senior leadership, Board and Committee members.

6.5 The Alliance publishes information about itself, its governance, and its policies on its website. The Accreditation Panel suggested that the Alliance consider additional actions to demonstrate transparency and its work to protect the public, such as by publishing the minutes of its meetings or excerpts that highlight these functions. The Panel issued this Recommendation:

- The Alliance should consider what further information it can publish about itself and its work to promote transparency and increase confidence in the register.

6.6 We require Accredited Registers to demonstrate business continuity procedures to ensure operation of the register in event of emergency or other disruption. We noted the Alliance's ISO 9001 accreditation however did not see evidence of its continuity plans within our assessment. The Accreditation Panel therefore issued the following Condition:

- The Alliance must document its business continuity arrangements for continued operation of the register in case of emergency or other issues.

6.7 We also require Accredited Registers to demonstrate that they have a clear and documented approach to organisational risk management. The Alliance told us that this occurred within Board meetings and in discussions between its Directors, however we did not see evidence of how organisational risks were documented and addressed. The Accreditation Panel issued a Condition to address this:

- The Alliance must develop a clear and documented mechanism to assist management of organisational risks.

Standard 7: Management of the risks arising from the activities of registrants

The Accreditation Panel found that Standard Seven was met. It issued the following Recommendation:

Recommendation:

- The Alliance should review and revise the information it provides about treatments to ensure it is clear, accessible, and written in 'plain English' for the benefit of the public and those accessing the register.

Accreditation Panel findings

- 7.1 The Alliance maintains a practitioner risk register, demonstrating awareness of potential risks associated with activities undertaken by its registrants and the actions it takes to mitigate against these.
- 7.2 We reviewed the Alliance's websites and materials to assess whether they provide clear and accessible information about the limitations and benefits of treatments offered by foot health practitioners. While the Alliance includes information about the available treatments and the importance of referrals to other health services when necessary, we found that the language used is not sufficiently 'plain English.' This may hinder the understanding of individuals seeking information about foot health care or the services of registrants. The Accreditation Panel issued the following Recommendation:
 - The Alliance should review and revise the information it provides about treatments to ensure it is clear, accessible, and written in 'plain English' for the benefit of the public and those accessing the register.

Standard 8: Communications and engagement

The Accreditation Panel found that Standard Eight was met. It issued the following Recommendations:

Recommendations:

- The Alliance should review the clarity and accessibility of its websites.

Accreditation Panel findings

- 8.1 The Alliance's Directors maintain three websites: the main professional body website, the register website, and the website of the College of Foot Health Practitioners.
- 8.2 The Alliance's grades of registration are set out within its Rulebook. All registrants who appear on the register must meet its universal requirements and no distinction is made for advanced training.
- 8.3 We had concerns about the accessibility of those websites, for example It was unclear whether to search the main or register websites for certain topics, such as the registration process. This could make it difficult for people who want to use the services of practitioners, join the register, or raise concerns

about registrants or the Alliance. The Accreditation Panel issued the following Recommendation for the Alliance to address:

- The Alliance should review the clarity and accessibility of its websites.
- 8.4 The Alliance was a member of the Accredited Registers Collaborative group, which provides a forum for exchanging views and sharing ideas between all Accredited Registers.
- 8.5 Our review found that the Alliance's key processes are available in their published rulebook and on various parts of the member and register websites. However, we identified areas where the information could be presented more clearly. For instance, we did not consider there was a clear pathway for people wishing to join the register. This was addressed by a Condition within Standard 2.
- 8.6 We noted that the Alliance will check practitioners' advertising to ensure they do not make false or misleading claims. The Accreditation Panel suggested that for avoidance of risk, the Alliance may wish to refer practitioners to the Advertising Standards Authority, and its checking services where appropriate.

Share your experience

- 9.1 We received one submission about the Alliance, concerning its handling of a complaint against a registrant. We considered the issues raised within our assessment of Standard 5.

Impact assessment (including Equalities impact)

- 10.1 We carried out an [Impact Assessment](#) as part of the decision to renew accreditation the Alliance with Conditions. This included an equalities impact assessment in accordance with our duty under the Equality Act 2010.
- 10.2 The Alliance however withdrew from the Accredited Registers programme as of 31 March 2024. The impact of the Alliance's withdrawal was considered by the Authority.
- 10.3 During the assessment, we considered issues that might disproportionately affect vulnerable groups or individuals with protected characteristics, ensuring that any potential impacts were identified and addressed appropriately.
- 10.4 We noted that the Alliance does not currently collect data on the characteristics of its registrants or their clients. However, the Alliance has made efforts to understand issues affecting clients, such as dementia.