

## **Approved Public Board meeting minutes**

18 March 2026

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### **Present**

Caroline Corby (CC - Chair)  
Alan Clamp (AC - Chief Executive)  
Candace Imison (CI)  
Juliet Oliver (JO)  
Nick Simkins (NS)  
Ali Jarvis (AJ)  
Geraldine Campbell (GC)  
Ruth Ajayi (RA)  
Eleanor Marks

### **In Attendance**

Jane Carey (JC)  
Amanda Partington-Todd (APT)  
Melanie Venables (MV)  
Douglas Bilton (DB)  
Daisy Blench  
Osama Ammar  
Marija Hume  
Oyinkan Onile-Ere  
Rachael Culverhouse-Wilson  
Suzanne Dodds

Melanie Hueser (Secretariat)

### **Observers**

See below

## **1. Welcome and Declarations of Interest**

- 1.1. The Chair opened the meeting and welcomed everyone to the Board meeting. Observers included members of staff and external observers: Anisah Chowdhury (GMC), Silvia Dominici (NMC), Aleksandr Smirnovs (HCPC) and Janet Collins (GPhC).
- 1.2. This was the last Board meeting for Ruth Ajayi, Associate Board member. The Chair thanked her for her contribution to the Board during her two years with the PSA.
- 1.3. This was the last Board meeting for Amanda Partington-Todd, Interim Director of Regulation and Accreditation. The Chair thanked her for all the work she had done for the PSA.

## **2. Apologies**

- 2.1. There were no apologies.

## **3. Minutes of meeting held on 14 January 2026**

- 3.1. The minutes of the meeting held on 14 January 2026 were approved as an accurate record.

## **4. Actions and matters arising from the meeting on 14 January 2026**

- 4.1. The Board reviewed the action log.
- 4.2. The website report was confirmed as delayed due to website accessibility issues.
- 4.3. It was agreed that the action should be rescheduled to May 2026, by which time the accessibility issues are expected to be resolved.

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- 4.4. The action relating to the deeper review of the Fitness to Practise system (Action 6.17) was confirmed as moved, due to agenda pressures, and is now expected to be considered by the Scrutiny Committee later in the year.

## 5. Chair's report

- 5.1. The Chair introduced the item, confirming there were no updates to add since the report had been circulated.
- 5.2. The Board **noted** the report and raised no questions.

## 6. Executive report and project dashboard

- 6.1. The Chief Executive introduced the item. The Board took the Executive report largely as read, with executives highlighting selected issues and Board members asking questions on specific points.
- 6.2. A continued increase in Section 29 workload was reported, driven by higher volumes of decisions coming through from regulators and greater case complexity, meaning fewer cases can be closed administratively at early stages.
- 6.3. Although initial volumes are rising, the proportion of cases progressing from initial review to detailed case review, and from there to case meetings, was said to be proportionally lower, reflecting earlier resolution where possible.
- 6.4. An increase in appeals was noted, including appeals relating to dishonesty, discrimination and sexual misconduct.
- 6.5. It was flagged that Article 10 and discrimination-related cases are beginning to emerge, linked to wider societal and media issues, and are expected to increase over the next 6–12 months.
- 6.6. The Board asked whether the increased workload was manageable and whether it would impact the budget. It was explained that significant process improvements and delegation have already been implemented, capacity pressures are being closely monitored by ELT and outsourcing is used flexibly to manage peaks or particularly complex cases, with cost implications kept under review.
- 6.7. Longer-term resourcing needs may be considered if trends persist.
- 6.8. It was highlighted ongoing and planned work to share learning across the system, including twice-yearly Learning Points Bulletins, targeted engagement with regulators and planning for a Section 29 conference in May, with a particular focus on sexual misconduct.
- 6.9. Board members stressed the importance of ensuring this learning contributes to system-wide improvement, not just individual case correction.
- 6.10. Progress with the social media influencer campaign was reported (launch planned for May).
- 6.11. The AI workshop report will be completed by the end of March and published soon after.  
**Action:** MV to prepare and circulate a short AI briefing for the Board, drawing on the AI workshop report and focusing on implications for healthcare professionals and regulation.
- 6.12. The Board discussed an independent accessibility audit of the PSA website, which identified issues affecting users of assistive technologies. Remedial work is underway by the developers and expected to complete by end April at no additional cost to PSA.
- 6.13. Falling website traffic was discussed and attributed primarily to wider shifts in information access via AI tools, rather than accessibility barriers.

## 7. Finance report

- 7.1. The Director of Corporate Services introduced the item. The Board was advised that the forecast position had changed significantly since the previous report.
- 7.2. The PSA is now forecasting an end-of-year surplus of over £200k, compared with an earlier forecast deficit.

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- 7.3. The change is largely driven by a one-off favourable accounting adjustment of £136k, relating to Section 29 legal costs.
  - 7.4. This adjustment arose following a detailed, case-by-case review of historic accruals, which identified costs that will no longer be incurred because cases had closed earlier than expected, or original cost estimates exceeded final requirements.
  - 7.5. It was emphasised that this is an accounting adjustment, not a sudden change in activity. The approach has been scrutinised internally and will be reviewed by the NAO as part of the year-end audit.
  - 7.6. Board members expressed concern about the scale and timing of the adjustment, particularly given ongoing increases in Section 29 workload and the financial exposure associated with appeals, including the rare but costly possibility of losing a case.
  - 7.7. Questions were raised about whether such adjustments should have been identified earlier, and whether the organisation had been operating under an unduly “deficit mindset” during the year.
  - 7.8. It was explained that month 9 is the first point at which full financial statements are prepared for interim audit, which triggered the detailed review. Going forward, more regular reconciliation of Section 29 accruals will be undertaken to avoid large single adjustments.  
**Action:** NS/JC to discuss S29 cost adjustment outside of the Board meeting.
  - 7.9. A variance of £86k on pension costs was explained by strong uptake of the Group Personal Pension Scheme, with many staff contributing at higher matched rates.
  - 7.10. The Board noted that planned capital expenditure (c. £50k), including IT refresh, is expected to be fully spent by year end.

## 8. Committee updates

- 8.1. **Scrutiny Committee:** The Scrutiny Committee Chair gave the update. The Committee spent significant time discussing the internal NMC lessons learned review. An action plan to address recommendations in the review will be developed by the executive.
- 8.2. The Committee highlighted several areas of planned focus for its June meeting, including implementation of the new Standards, assessing operational readiness ahead of go-live, and the intended outcomes of the Standards and how impact will be evaluated over time.
- 8.3. The Committee also discussed developing a clearer picture of how S29 data analysis can support learning and improvement across the system.
- 8.4. The Committee’s considered its terms of reference and identified that these will need updating in 2026 to reflect the Committee’s evolution.
- 8.5. **Audit and Risk Committee:** The Chair of the Audit and Risk Committee reported that it had been a busy year, with a substantial volume of work considered.
- 8.6. The Committee received strong assurance from both internal and external audit, with no significant areas of concern identified.
- 8.7. Ongoing work on risk oversight was highlighted as a core and continuing focus of the Committee.
- 8.8. The Committee considered the internal audit review of workforce planning, which was reported as providing a positive outcome. The External Audit Plan for the year was reviewed and discussed.
- 8.9. It was noted that the Committee had again challenged the auditors on fees.
- 8.10. The Committee brought forward the Whistleblowing policy, the Anti-fraud and bribery policy and the treasury management policy for Board approval. All were described as largely unchanged from the previous year and subject to annual approval a small update had been made to reflect a change in how surplus funds are invested.
- 8.11. It was agreed that the wording in the Treasury Management Policy would be amended to use more general wording (e.g. “competitive rate”) rather than specific interest rates.

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- 8.12. The Committee recommended **approval of all three policies**, subject to the agreed minor amendment to the Treasury Management Policy. **Action:** JC/MH to update Treasury Management Policy wording

## 9. Committee annual effectiveness reports

- 9.1. **Nominations Committee:** The Board received the Nominations Committee annual report and confirmed that it was satisfied the Committee had operated effectively during the year.
- 9.2. **Scrutiny Committee:** The Board received the Scrutiny Committee annual report confirmed that it was content that the Scrutiny Committee was operating effectively.
- 9.3. **Audit and Risk Committee:** The Board received the Audit and Risk Committee annual report and confirmed that it was satisfied the Committee had operated effectively during the year.

## 10. DA Board member reports

- 10.1. **Scotland:** The Board noted the Scotland Board Member's report, which reflected on learning to date in the role and highlighted opportunities to clarify and strengthen the strategic contribution of devolved administration Board Members, particularly in the context of the PSA governance review.
- 10.2. **Wales:** The Board noted the Wales Board Member's report, which provided a high-level overview of the Welsh context, including forthcoming elections, engagement with the Welsh Government, and continued support from the PSA team.
- 10.3. **Northern Ireland:** The Board noted the Northern Ireland Board Member's report, which highlighted Northern Ireland-specific developments and identified increasing PSA visibility and engagement as a key priority.

## 11. Risk register

- 11.1. The Chief Executive introduced the item, noting that the Board reviews the Risk register twice a year, the Audit and Risk Committee reviews it at every meeting and SMT reviews it monthly.
- 11.2. The Board considered the Risk register and discussed feedback from the governance review, agreeing that a more sophisticated and dynamic approach was required. Particular concern was raised about fitness to practise backlogs, the scale of mitigating actions, and the need to reflect ongoing learning, horizon scanning and system-wide improvement activity. A revised Risk register will be brought back to the Board in July.
- Action:** AC to update the risk register and bring the new version to the July Board meeting, after it has been to the June ARC meeting.

## 12. Standards for regulators and Accredited Registers

- 12.1. The Board officially **approved** the new Standards for publication.

## 13. Next steps for Right Touch Regulation

- 13.1. The Assistant Director of Intelligence and Insight introduced the item.
- 13.2. The Board **noted** the update on next steps for Right-Touch Regulation, welcoming the continued promotion of the approach, development of practical case studies, and strong international interest. Periodic updates will be provided as the work progresses.

## 14. Board workplan 2025/26

- 14.1. The Director of Corporate Services introduced the item.
- 14.2. The Board **noted** the workplan.

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## **15. Board and Committee dates for 2027**

- 15.1. The Board agreed that 17 March should be avoided as it is a public holiday in Northern Ireland. The March 2027 Board meeting will take place on Tuesday 16 March 2027.
- 15.2. All other Board and Committee dates were approved.

## **16. Any other business**

- 16.1. There was no other business discussed.

## **17. Questions from Members of the Public**

- 17.1. There were no questions.
- 17.2. The Chair thanked the observers for their interest in the PSA.



**Signed by Chair**

**Date 20 May 2026**

**Action Log**

On track (including not started) Delayed (or medium risk of delay for projects) Overdue (or high risk of delay for projects) Complete

Mtg. Date	Item No.	Action point	Owner	Date required	Action progress	Status
19 November 2025	6.14	Bring a post-implementation website report to the Board meeting in March 2026.	OOE/MV	March 2026	Delayed to July 2026 due to the need to address accessibility issues as set out in the Executive Report	Overdue
14 January 2026	6.17	Schedule deeper review of the Fitness to Practise system for the Scrutiny Committee and report back to the Board.	JO/GM	November 2026	Previously identified for June, however moved to the Scrutiny Committee meeting in November 2026 to allow full exploration of the issue	On track
14 January 2026	7.13	Schedule budget carry forward approval for the Board after the end of year position has been confirmed.	JC	July 2026		On track
18 March 2026	6.11	Prepare and circulate a short AI briefing for the Board, drawing on the AI workshop report and focusing on implications for healthcare professionals and regulation	MV	April 2026	Completed	Complete

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18 March 2026	7.8	Discuss S29 cost adjustment outside of the Board meeting.	NS/JC	May 2026	Completed	
18 March 2026	8.12	Update Wording of Treasury Management Policy	JC	March 2026	Completed	
18 March 2026	11.2	Update the risk register and bring the new version to the July Board meeting, after it has been to the June ARC meeting.	AC	June 2026		