

Annex A

Accredited Registers Business Plan 2025/26

DRAFT v0.3

1. Introduction

The Accredited Registers programme provides oversight for health and care roles that are not required to be registered by law.

Our mission is to help keep people safe when they are getting help from health and care practitioners that are not regulated by law. We do this by only awarding our Quality Mark [\[insert below\]](#) to registers that meet our standards, so that anyone can choose a practitioner with confidence.

The Accredited Registers programme is run by the Professional Standards Authority. The legislation underpinning our powers to accredit registers is set out within the National Health Service Reform and Health Care Professions Act 2002¹. The PSA publishes an annual Business Plan [\[hyperlink\]](#) setting out its overarching plans, which includes work to oversee the performance of the statutory regulators and undertaking research into best practice in health and care regulation.

The Authority's overarching strategic objectives for 2023-26 are:

- **Strategic aim 1:** To protect the public by delivering highly effective oversight of regulation and registration.
- **Strategic aim 2:** To make regulation and registration better and fairer.
- **Strategic aim 3:** To promote and support safer care for all.

This document sets out the key aims for the Accredited Registers programme in 2025/26, and how we will use our resources.

Our plans for 2025/26

2025/26 will be the fourth year of implementing the revised assessment approach and fees model which we introduced in July 2021, following a strategic review² of the programme.

¹ <https://www.legislation.gov.uk/ukpga/2002/17/contents>

² Report of the public consultation undertaken as part of the strategic review:
<https://www.professionalstandards.org.uk/publications/detail/the-future-shape-of-the-accredited-registers-programme---consultation-report>

Strategic priorities

Our high level strategic objectives for Accredited Registers are set out in the PSA's [2023-26 Strategic Plan](#).

For 2025/26, these include:

Strategic aim 1: To protect the public by delivering highly effective oversight of regulation and registration.

We will focus in 2025/26 in further improving our performance by building on the action taken in 2023/24 and 2024/25. Following the introduction of an internal Quality Assurance Framework, customer satisfaction surveys, new Key Performance Indicators, a new stakeholder records management system and in anticipation of the completion of work on the PSA's brand and website, our efforts will be directed to continuous improvement using these insights and opportunities. While we will be making improvements across all areas of our performance these will be our key priorities for delivery:

- Improved website accessibility for information about the Accredited Registers supporting engagement by members of the public and employers, efficient assessment processes and promotion of the Accredited Registers and programme as a whole.
- Revised outcome reports that are more accessible to members of the public, easier to use for Accredited Registers, and that support faster production and publication.
- Consistent operational performance within all KPIs to provide assurance to the public, and good service standards to Accredited Registers and applicants.

In 2025/26, we will also complete our review of the *Standards for Accredited Registers*, conducted in parallel with the review of the *Standards of Good Regulation*. Without prejudicing the outcome of the review, included in this work will be an implementation plan and timetable that supports Accredited Registers to prepare for implementation in 2026/27.

2024/25 saw two targeted campaigns to promote use of the quality mark by registrants on Accredited Registers and members of the public and will be progressing work to evaluate the effectiveness of these and future campaigns. In 2025/26 we have increased the proportion of our budget allocated to communications and engagement to 10% of our income. This will further support our efforts to collaboratively promote the Accredited Registers programme alongside the UK government and Devolved Administrations, health and care services, and Accredited Registers. As a result of our efforts to improve engagement with patient/public representative or safety organisations we will also make the best use opportunities to raise the profile of the programme as we engage on specific issues that affect patients and service users.

Strategic Aim 2: To make regulation and registration better and fairer

In July 2023, we introduced a new Standard on Equality, Diversity and Inclusion (Standard 9) for Accredited Registers. 2024/25 saw our first round of assessments

against this Standard and publication of good practice guidance. In 2025/26 we will continue to assess Accredited Registers and gather aggregated insights to identify further action under our EDI action plan and learn from best practice support our own efforts to improve our own performance in meeting standards related to EDI. Subject to the outcomes of our work in 2024/25 and organisational priorities for insight and intelligence, we may also be participants and beneficiaries of further research identified for 2025/26 in the *2023-26 Strategic Plan*.

In anticipation of a UK Government response to the Bailey Review's recommendations³, we plan in 2025/26 to continue our work to ensure appropriate protection for patients and service users through safeguarding checks. Subject to the UK Government's plans and the outcomes of our work in 2024/25, we anticipate making a decision on whether our expectations for Accredited Registers to undertake safeguarding checks should change as a component of the review of the *Standards for Accredited Registers*.

Sequential implementation of the UK Government's proposals for reform of regulation, creates continued opportunity to influence the legislation underpinning the Accredited Registers programme. As a result, we will continue to identify changes that could strengthen the use of the Accredited Registers programme.

Strategic Aim 3: To promote and support safer care for all

As we approach the final year of our *2023-26 Strategic Plan*, which incorporates our goals from *Safer care for all*, we will continue to support the wider organisational efforts to work with governments and other stakeholders to publish regulatory strategies that support workforce strategies

As a result of new applications, ongoing policy development relevant to health and social care, and responding to emergent risks, we anticipate continuing our collaboration across the following areas that will support safer care for all:

- care workers in England,
- non-paramedic ambulance staff,
- complementary therapies,
- leadership and management in health and care,
- licencing for non-surgical cosmetic practitioners in England,
- personalised care roles, and
- mental health, with a focus on prevention of suicide and self-harm.

We will also continue to explore how we can use the findings of our Standard One 'public interest test' assessments to inform our understanding of the relative risks of unregulated roles. In some cases, we expect these assessments to inform recommendations to the Government about when Accredited Registers do not appear to be sufficient to manage the risk of a role.

³ [Independent Review of the Disclosure and Barring Regime - GOV.UK \(www.gov.uk\)](https://www.gov.uk)

How we will use our resources in 2025/26

Maintaining financial sustainability of the Accredited Registers programme remains a core objective. This will be achieved through continuing to attract new Registers to apply, and by identifying ways to add value for those accredited and their registrants.

The growth in the number of Accredited Registers, number of registrants and new applications has warranted an increase in headcount (an additional Accreditation Officer) to effectively manage the continuous assessment processes and initial assessments. In 2025/26, as the effects of continuous improvement are embedded and it becomes clearer whether there will be step change in the size of the programme from new applicants, we may need to consider a longer-term resourcing strategy for the team so that growth is sustainable within the financial envelope of fees paid by Accredited Registers and new applicants.

The fees model for 2025/26, following the review in 2024/25, will continue to consist of two components: a minimum base fee, and a per-registrant fee. For 2025/26, we will be increasing the base fee by 1.5% to £11,527 and the per-registrant fee also by 1.5% to £6.26). We will also be increasing the cap on the per registrant fee by 7% to better reflect the burden of work from larger registers in the continuous assessment processes without disadvantaging the smaller registers. The new cap on the per registrant fee will be £69,438.72.

Any surplus at the end of the financial year from additional income, such as from new applications, is set aside in the PSA’s unrestricted reserves. Any additional reserves may be reinvested back into the programme, for example through additional resource or by investment in specific areas such as communications or research.

Income and expenditure

The Accredited Registers programme is financially separate from the rest of the PSA’s regulatory functions. The overriding principle is that all costs incurred by the programme must be met by the fees. The table below sets out our budget from 2021/22 to 2024/25 and, and a forecast for 2025/26. The assumptions underpinning future operating income are based on the numbers of current Accredited Registers. Costs of new applications are recovered prior to any assessment process commencing and do not fall upon the existing Accredited Registers.

	2021/22	2022/23	2023/24	2024/25	2025/26
	£'000	£'000	£'000	£'000	£'000
Operating costs	(462)	(519)	(664)	(609)	(730)
Operating income	519	578	671	691	759
Net operating (costs)/income	57	59	7	82	29

How we will measure our performance

We will monitor performance against the key performance indicators (KPIs) below. Some KPIs were revised or added in April 2024 and are marked below with an asterisk (*). KPIs will be reported to the Scrutiny Committee and the PSA's Board at its regular meetings through the Executive Report.

- 90% of Registers have a full assessment within three years of the previous assessment.
- 90% of decisions about the annual check within one year of the previous assessment.
- 95% of Conditions are reviewed within two months of when they were due.
- *100% of targeted reviews are completed within four months of the date initiated.
- *90% of decisions about new Standard 1 applications are made within two months of receipt of all information.
- *90% of decisions about full accreditation (Standards 2-9) are made within eight months of receipt.