Business plan





SG/2025/111

Professional Standards Authority for Health and Social Care Business Plan 2025/26

Presented to Parliament pursuant to Schedule 7, Paragraph 16 (2) of the National Health Service Reform and Health Care Professions Act 2002, as amended by the Health and Social Care Act 2008 and the Health and Social Care Act 2012.

Laid before the Scottish Parliament by the Scottish ministers under the National Health Service Reform and Health Care Professions Act 2002, as amended by the Health and Social Care Act 2008 and the Health and Social Care Act 2012.

Laid before the Northern Ireland Assembly in accordance with the National Health Service Reform and Health Care Professions Act 2002, as amended by the Health and Social Care Act 2008 and the Health and Social Care Act 2012.

Laid before the Welsh Parliament in accordance with the National Health Service Reform and Health Care Professions Act 2002, as amended by the Health and Social Care Act 2008 and the Health and Social Care Act 2012.

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ISBN 978-1-5286-5761-7

E03370222 07/25

Printed on paper containing 40% recycled fibre content minimum Printed in the UK by the HH Global on behalf of the Controller of His Majesty's Stationery Office



What we do

The Professional Standards Authority for Health and Social Care (PSA) is the UK's oversight body for the regulation of people working in health and social care. Our statutory remit, independence and expertise underpin our commitment to the safety of patients and service-users, and to the protection of the public.

There are 10 organisations that regulate health professionals in the UK and social workers in England by law. We audit their performance and review their decisions on practitioners' fitness to practise. We also accredit and set standards for organisations holding registers of health and care practitioners not regulated by law.

We collaborate with all of these organisations to improve standards. We share good practice, knowledge and our right-touch regulation expertise. We also conduct and promote research on regulation. We monitor policy developments in the UK and internationally, providing guidance to governments and stakeholders. Through our UK and international consultancy, we share our expertise and broaden our regulatory insights.

Our core values of integrity, transparency, respect, fairness, and teamwork, guide our work. We are accountable to the UK Parliament. More information about our activities and approach is available at **www.professionalstandards.org.uk**.

Summary of 2023-26 Strategic Plan

Vision

Safer care for all through high standards of conduct and competence in health and social care professionals.

Mission

To protect patients, service users and the public by improving the regulation and registration of health and social care professionals.

Strategic aim 1

To protect the public by delivering highly effective oversight of regulation and registration.

- To deliver our statutory duties, targeting our resources where there is greatest risk to the public.
- To support high standards in health and social care regulation and registration through our performance review, section 29 reviews, accredited registers, policy and communications functions.
- To review and improve our processes (including legislative changes where necessary) to ensure they are effective and efficient.

Strategic aim 2

To make regulation and registration better and fairer

- To lead the development of more effective regulation through reviewing our standards, and undertaking other activities including research, policy advice and quality improvement initiatives, such as sharing good practice.
- To promote, influence and support regulatory reform.
- To promote and monitor equality, diversity and inclusion in our work and in those we oversee.

Strategic aim 3

To promote and support safer care for all

- To work with others to establish the full range of functions recommended in *Safer care for all* for Health and Social Care Safety Commissioners in each of the four countries of the UK.
- To work with UK governments to develop regulatory strategies to support the workforce strategies.
- To work with regulators, Accredited Registers and other stakeholders to: promote positive workplace cultures; resolve any conflicts between business priorities and patient safety, and between safe spaces, accountability and the duty of candour.

1. Business Plan 2025/26

Policy and Communications

Policy

- 1.1. We will provide advice to the UK Governments in relation to regulatory reform. In 2025/26 we expect to work on the legislation relating to the regulators and the role of the PSA. Due to the increased volume of work relating to reform we will add one member of staff to our Policy Team to work on reform. We will continue to seek opportunities to use reform to further improve regulation and registration.
- 1.2. We will continue to progress recommendations set out in our 2022 report Safer Care for All (SCFA), which underpins our current Strategic Aim 3, in the final year of its delivery. This will include working with others to develop regulatory strategies to support workforce planning. We will evaluate progress against the wider set of actions we identified within SCFA, many of which are delivered through Strategic Aims 1 and 2. This will help inform our planning for our next strategic plan for 2026-29, which we will start to develop in the latter part of 2025/26.
- **1.3.** We will undertake further research into the issues in regulation and registration that can affect proportionality and fairness.
- 1.4. We will develop regulatory policy as required to support the UK Government's priorities for health and to respond to new risks and issues that impact on professional regulation, such as the increasing use of artificial intelligence. We will continue to monitor and respond to inquiries and consultations. We will seek to work in an agile way, to enable us to be responsive within the constraints of a small team.
- 1.5. We will continue to review safeguarding arrangements for the regulators and Accredited Registers and to promote robust regulation for those having non-surgical cosmetic interventions.
- 1.6. We will support work to publish a revised version of Right Touch Regulation in 2025, as set out below in the 'Insight and Intelligence' section. Our policy work will also support the development of the evidence base for changes we make to our Standards for the regulators and Accredited Registers in 2026.

Communications and engagement

1.7. We will implement our revised stakeholder engagement strategy and plans, which have a focus on listening to a greater diversity of voices. We will carry out any communications and engagement arising from regulatory reform and associated work. We will implement any actions identified through our 2024/25 stakeholder perceptions survey. We will seek to develop our networks in the Devolved Administrations and create channels for greater public and patient involvement in our work. We will hold our annual events, both online and in-person, including seminars in Scotland, Wales and Northern Ireland.

- 1.8. Having launched a new website in 2024/25, in 2025/26 we will use this to provide clear and informative communications about our work, and to seek feedback from our stakeholders.
- 1.9. We will continue to provide communication and engagement support for regulation and registration improvement activities. This will include raising awareness of the Accredited Registers programme.

Regulation and Accreditation

1.10. The work of the Regulation and Accreditation directorate covers four of the PSA's statutory functions: reporting to Parliament on the work of the regulators (performance review); reviewing regulators' final fitness to practise decisions (section 29); advising the Privy Council about regulators' appointments to their Councils; and managing the Accredited Registers Programme. In addition, it deals with concerns raised about regulators and Accredited Registers.

Performance review

- 1.11. The performance review team will continue to review all 10 regulators and report to Parliament on their performance. In 2025/26, we will enter the third year of our assessments of regulators against increased expectations to meet Standard 3, our EDI Standard.
- 1.12. We will continue to monitor backlogs of fitness to practise cases in the regulators and take action as appropriate.
- 1.13. We will complete the review of the Standards of Good Regulation, publishing updated Standards and guidance during 2025/26, ahead of implementation of the Standards in 2026/27. We will also continue to support the implementation of regulatory reform and make changes to our processes as required following the implementation of reforms.
- 1.14. Following the publication of independent reviews into the NMC, we will be undertaking enhanced monitoring of the NMC and considering any changes we need to make to our processes more widely. We expect to undertake enhanced monitoring until the NMC has addressed the recommendations from these reviews and we are satisfied with its performance against the Standards. In addition to focusing our resources more closely on the NMC, the enhanced monitoring will include managing an oversight group to monitor the NMC's response to the recommendations. This additional monitoring will require additional resource and we have included provision for an additional Scrutiny Officer within the Performance Review team. This additional resource is also necessary to enable the performance review team to be able to effectively contribute to other critical and important areas of work, including regulatory reform.

Section 29

- 1.15. The section 29 team reviews the decisions of the regulators' fitness to practise panels to consider whether these are sufficient to protect the public. If we consider that an outcome is insufficient, then we can refer the case to the relevant court.
- 1.16. We receive all decisions that fall within our jurisdiction. We have a risk-based and proportionate approach to looking at decisions. We do not review cases where the registrant has been removed from the register or some others (including further suspension) where in our view the decision is unlikely to be insufficient to protect the public. In 2023/24 this equated to 944, or 40%, of cases that we closed without review.
- 1.17. We have a three-stage process for cases that we do review. In brief, these stages are:
 - an initial review of the decision to identify any concerns about the outcome
 - if concerns are identified at initial review, a detailed review of the case papers to assess whether concerns mean that the decision may be insufficient to protect the public
 - a case meeting to decide whether the outcome is insufficient and should be referred to the relevant court.
- 1.18. We also share learning points from our reviews with the regulators to support improvements in fitness to practise processes.
- 1.19. In 2023/24, the PSA received 2,385 cases. Numbers have been increasing year on year since a significant drop during the first year of the pandemic, although this increase slowed in 2023/24. Our initial expectation is that the number of cases in 2025/26 will be in the region of 2,500. We expect to undertake in the region of 80-90 detailed case reviews and to appeal in the region of 30 cases. Our existing resources will be able to accommodate the expected number of cases.

1.20. Our appeal activity increased significantly in 2023/24 compared to previous years. In 2021/22 and 2022/23 we appealed 19 and 18 cases respectively. 30 appeals in 2023/24 represents a 67% increase on the previous year. The increased number of appeals resulted in increased costs, which are being reflected in the 2025/26 budget. While appeal numbers vary from month to month, we have seen a sustained increase in the number of appeals since December 2022, which has continued to be reflected in 2024/25. Figure 1 shows the number of appeals lodged each quarter since Q1 2022, together with a trendline showing the increase.



Accredited Registers

- 1.21. The accreditation team manages the Accredited Registers programme, through which we accredit registers of unregulated health and care practitioners.
- 1.22. During the year we will continue to assess new applications and applications for renewal, including carrying out in-year monitoring and any targeted reviews.
- 1.23. We will continue to work with the NHS and the Government to raise awareness of the Accredited Registers programme and align to areas of workforce need. We will also continue to undertake our own communications work to raise awareness.
- 1.24. We will respond to UK Government policy or inquiries that affect the operations of the Accredited Registers, such as our safeguarding project, the Bailey Review or regulation of NHS Managers.
- 1.25. We will complete the review of the Standards for Accredited Registers, publishing updated Standards and guidance during 2025/26, ahead of implementation of the Standards in 2026/27. The review of the Standards is being undertaken jointly with the review of the Standards of Good Regulation.
- 1.26. The Accredited Registers work is not funded by fees from the regulators. It is funded in full by the registers.

Appointments to the regulators' governing bodies

- 1.27. We provide advice to the Privy Council on whether we have confidence in the processes applied by eight of the 10 regulators to appoint and reappoint Council members. Our work applies solely to the process; we do not take a view on the suitability of individual candidates and have no say in who is appointed.
- 1.28. We reviewed 13 appointments processes in 2023/24. We expect that number to be similar in 2025/26.

Concerns

1.29. We continue to receive concerns about the regulators, which are a useful source of evidence for our oversight work. In 2023/24 we received 358, which represented a similar number to the previous year. There is no obvious trend in the number we receive, but we have no reason to believe that there needs to be any change to the resources devoted to this work.

Intelligence and Insight

- 1.30. We will publish a new version of our core policy statement, Right Touch Regulation, reflecting how the role of regulation has evolved since our last in edition in 2015.
- 1.31. We will organise a symposium with stakeholders in Q1 of 2025/26, on a discussion subject to be determined by current policy priorities and issues.
- 1.32. We will organise a research conference in Q3 of 2025/26, based around current research activity, with a focus on impact and improvement.
- 1.33. We will disseminate learning from our commissioned report on the General Teaching Council (Scotland) Fitness to Teach (conduct) process in 2024/25 and will implement any learning for our own processes for delivering commissioned work.
- 1.34. We will consider requests for commissions when approached, taking these forward where they are within our expertise and where other demands on our capacity allow.
- 1.35. We will complete our project on sexual misconduct, including a report to be produced by the end of Q3 of 2025/26.

Corporate Services

- 1.36. The team provides the following services: finance, human resources (HR), information and communications technology (ICT), information security, governance, risk management, audit, facilities, health and safety, business continuity, procurement and office administration.
- 1.37. The team works to ensure that the PSA is an independent, effective, value for money organisation. It supports the Board and executive in delivering the

functionality and smooth operation of the organisation.

Priorities for 2025/26

- 1.38. In the coming year, the team will continue to support the general operation of the PSA while embedding the improvements and efficiencies introduced in previous years.
- 1.39. HR and Governance will continue to provide day-to-day support, overseeing all recruitment and responding to all staffing issues and HR matters.
- 1.40. In 2025/26 the HR team will also be involved in the induction of three new Board members. In addition, they will implement the final year of the 2023-26 People Strategy and develop a new three-year People Strategy for 2026-29.
- 1.41. Finance will continue to provide effective day-to-day running of the finance function, overseeing all financial transactions, procurement, and payroll. They will embed improvements to financial reporting and budget management delivered in recent years, including developing the Finance Business Partner role. They also continue their proactive oversight of all procurement.
- 1.42. ICT will continue to provide effective day-to-day helpdesk support, contract management, patch management, purchasing, cyber security and business continuity.

Equality Diversity and Inclusion (EDI)

1.43. Key priorities will be to deliver the 2025/26 action plan and to develop new equality objectives for 2026-29.

2. Finance and Resources

- 2.1. The PSA operates as an independent body with statutory duties. We are accountable to Parliament.
- 2.2. The PSA is an entity classified to central government and part of the Department of Health and Social Care's accounting boundary. Therefore, our accounts are consolidated into DHSC's accounts.
- 2.3. The PSA is funded through:
 - Fees collected from the regulatory bodies that it oversees, which fund the costs of its regulatory and standards functions.
 - Income arising from the accreditation of voluntary registers.
 - Income for advice and investigations that are specifically commissioned by the Secretary of State and/or the Devolved Administrations.
 - Income from other activities, for example, fees from the provision of advice and advisory services to governments, regulatory bodies and other similar organisations in the UK and abroad.

2.4. We are required, by the Health and Social Care Act 2012, to consult with the regulatory bodies advising them of our proposed budget requirement.

Value for Money

- 2.5. We are committed to delivering value for money. We aim to do so in three ways: carefully reviewing expenditure and controlling costs; systematically evaluating core processes to identify improvements in effectiveness and efficiency; and maximising the benefits of our work in the interests of better regulation and registration. We continue to monitor benefits realisation across our work and to allocate resources to maximise value for money.
- 2.6. The Accredited Registers function has been self-funding since 2021/22. Throughout 2024/25, we are reviewing our section 29 function which may identify further effectiveness and efficiency improvements.
- 2.7. Our strategic plan for 2023-26 sets out our plans to maximise the benefits of our work, with a particular focus on contributing to improvements in regulation through research, policy advice, and the sharing of good practice.
- 2.8. We closed the NHS Pension Scheme to new starters from April 2023 and introduced a Defined Contribution scheme in its place. Savings from this change are materialising already.
- 2.9. We continue to have virtual meetings for our Board committees and workshops, which delivers savings in travel and subsistence costs for Board members.
- 2.10. We have changed from having a Board meeting in each Devolved Administration every 18 months to having one every two years, this has reduced expenses associated with room hire, travel and accommodation. We supplemented this with a bespoke seminar for each country in the year we do not visit, so providing enhanced services and support.
- 2.11. We have substantially reduced the cost of our annual research conference by reducing the duration from two days to one, by charging a modest registration fee to those attending and by holding the event at less costly venues.
- 2.12. We made considerable savings by not using recruitment agencies in the two most recent Board recruitment exercises.
- 2.13. We are conscious of the financial pressures faced by many registrants working in health and social care. The average cost per registrant of the PSA's regulation and standard-setting work in 2024/25 was £2.58. This compares with £2.59 in 2023/24 £2.65 in 2022/23, £2.72 in 2021/22, £2.68 in 2020/21 and £2.70 in 2019/20, as shown below. On the basis of registrant numbers, as at 31 March 2025, our fee per registrant in 2025/26 is £2.74.



Assumptions

- 2.14. The assumptions for business as usual in 2025/26 that we built our budget on are as follows:
 - A pay increase for all staff and Board members of 3.5% from April 2025.
 - That based on the recovery costs averaged over the last three years, we will recover 25% of total expenditure on legal advice related to section 29 cases.
 - That the total cost of legal action will be similar to 2023/24 (at a higher level than previous years) and that any changes made as a result of the s29 review do not result in increased costs.
 - That the number of fitness to practise cases will be approximately 2,500, the number of detailed case reviews approximately 85-90 and the number of appeals approximately 30.
 - That staffing numbers increase by two (due to the addition of a Policy Officer and a Scrutiny Officer).
 - That no legislative changes that amend the duties of the PSA to an extent that will impact on our costs, will be introduced during the year.
 - That DHSC will progress regulatory reform as planned.
 - That the Accredited Registers programme will cover its costs (including any changes to staffing numbers).
 - That there are no excess reserves to return to the regulators as a result of an unbudgeted significant increase in s29 costs on 2023/24 and 2024/25 (increased legal costs and a much higher number of appeals).
- 2.15. In comparison to the budget for 2024/25, costs have increased in relation to staffing and inflation on some non-staff costs (3%) and the s29 workload. More specifically, we require two additional officers to support our work on performance reviews and regulatory reform; and we need to increase the s29 budget due to higher legal costs and the significant increase in s29 appeals from 2022/23 onwards. The overall budget in 2025/26 will be 5.9% higher than in 2024/25.

2.16. The staffing establishment as budgeted for 2025/26 is:

Posts	2025/26	2024/25
Chief Executive	1	1
Directors	3	3
Assistant directors	1	1
Heads of functions	7	7
Managers	7	7
Technical specialists	3	3
Officers and advisers	21	19
Administrators	4	4
Total	47	45

- 2.17. These 47 posts in 2025/26 equate to 44.7 full-time equivalents.
- 2.18. The overall increase in the budget is 5.9%. In previous years we have been able to discount the fees required from the regulators by using excess reserves. However, due to unbudgeted significant increases in s29 costs in 2023/24 and 2024/25 there are no excess reserves for 2025/26. Therefore, in this exceptional year of cost increases (mostly significantly for our section 29 work due to the much greater number of appeals), compared to the discounted fee rate in 2024/25, the increase in fees for the regulators in 2025/26 will be 12.2% compared to 2024/25.
- 2.19. In order to provide regulators with additional information about how our budget is divided between our different functions, we have analysed our staff costs (by far our largest costs) by function, as shown in Figure 2.





2025/26	Staff costs £'000	Other net costs £'000	Total Costs £'000
Comms and Policy	1,074	274	1,348
Corporate Services (CS)	1,088	834	1,922
Section 29 (S29)	617	537	1,154
Performance Review (PR)	987	0	987
Totals	3,766	1,645	5,411

Indicative budgets

Regulation and standards	2025/26 £'000	2024/25 £'000
Net operating expenditure (excluding depreciation for assets purchased during the year and database amortisation)	5,411	5,109
Capital expenditure	50	50
Subtotal	5,461	5,159
Reserves refunded	0	(290)
Total funding requirement	5,461	4,869

Expenditure breakdown

	2025/26 £'000	2024/25 £'000
Expenditure		
Staff costs	3,766	3,615
Other administrative costs	1,834	1,621
Income		
Operating income	(189)	(127)
Net operating expenditure	5,411	5,109

Capital expenditure	2025/26 £'000	2024/25 £'000
Information technology	40	40
Fixtures and fittings	10	10
Capital expenditure	50	50

Administrative costs

	2025/26 £'000	2024/25 £'000
Board appointments	0	100
Recruitment	15	15
Training and conferences	75	73
Other HR	24	14
Staff travel	10	10
Other Admin	41	40
Occupancy	324	324
Audit	70	68
Corporate Legal	10	10
ICT	140	136
Board pay	116	113
Board expenses	33	32
Policy conferences	45	45
Commissioned policy advice and research	75	75
Communications	20	45
Engagement	134	109
S29 legal	657	369
Scrutiny and Quality(S&Q) general legal	21	20
Other S&Q	24	23
Depreciation		0
Total administrative costs	1,834	1,621

Operating income

	2025/26 £'000	2024/25 £'000
Section 29 cost recoveries	164	119
Other operating income	25	8
Total operating Income	189	127

Accredited Registers (indicative budget for information only)

	2025/26 Budget £'000	2024/25 Budget £'000
Income		
Fees	765	691
Total	765	691
Expenditure		
Pay costs	435	407
Non pay costs	267	202
Total	702	609
Total surplus/(deficit)	63	82

3. Key performance indicators

Area of work	Key performance indicators
Section 29 decisions	Number of cases received [compared with same period last year]
	Number of Cases considered at a case meeting or statutory deadline meeting [compared with same period last year]
	Appeals lodged [compared with same period last year]
	100% of relevant decisions considered within statutory deadline [compared with last year]
Performance Reviews	100% of 2025 performance reviews published within 3 months of end of review period
Public concerns about Regulatory bodies	100% of concerns acknowledged within five working days since 1 April 2025
Accredited Registers –	90% of Registers have a full assessment within three years of the previous assessment.
current processes	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 four months of receipt.
	90% of decisions about full accreditation (Standards 2-9) are made within eight months of receipt.
Finance	Budgeted income / expenditure variance less than 5%
ІСТ	85% of helpdesk calls to be closed within 1 day
	System unavailability below 10 hours
Information security	No incidents reported to the Information Commissioner's Office
Information requests (FOI /	All (100%) Subject Access Requests dealt with within statutory deadlines
SAR / EIR)	All (100%) Freedom of Information Act requests dealt with within statutory deadlines

Complaints	100% of complaints acknowledged in five days
	Response to all complaints to be completed within 28 days
Social media	Total number of followers across our social media channels (compared with same period last year in brackets)
	Number of new followers across our social media channels (compared with same period last year in brackets)
	Number of engagements with our social media posts (compared with same period last year in brackets).
Website usage	Year-to-date data on website usage from April 2025 to date with same period last year in brackets
	 Total page views across the website Check a Practitioner landing page and practitioner specific pages Accredited Registers home page and related Accredited Registers pages

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ISBN: 978-1-5286-5761-7 E03370222

