

Strategic Plan 2010/11 – 2012/13

1. Introduction

1.1 CHRE operates with a set of legal powers and roles which derive from The National Health Service Reform and Health Professions Act 2002 (as amended), the Health & Social Care Act 2008 and the White Paper *Trust, Assurance and Safety: the regulation of health professionals in the 21st century* (2007).

1.2 CHRE has powers to:

- Audit the initial stages of fitness to practise cases and report on our findings in relation to each regulator
- Review the outcome of final fitness to practise cases and to refer them to the Court if we consider that the outcome is unduly lenient and fails to protect the public
- Investigate, compare and report on the performance of each regulatory body. We are specifically required to report to Parliament on how far each regulatory body has complied with any duty imposed on it to promote the health, safety and well-being of patients and members of the public.
- Give directions requiring a regulatory body to make rules under any power the body has to do so
- Provide advice to the Secretary of State, the National Assembly for Wales, Scottish Ministers or the Department of Health, Social Services and Public Safety in Northern Ireland on any matter connected with a health profession.

2. Our aim

2.1 CHRE aims to promote the health, safety and well-being of patients and other members of the public and to be a strong, independent voice for patients in the regulation of health professionals throughout the UK.

3. Our values and principles

3.1 Our values act as a framework for our decision making. They are at the heart of who we are and how we would like to be seen by our stakeholders. Our values are:

- patient and public centred
- independent
- fair
- transparent
- proportionate
- outcome focussed

- 3.2 Our values will be explicit in the way that we work; how we approach our oversight of health professional regulation, how we develop policy advice, how we engage with all our stakeholders and how we behave.
- 3.3 We have adopted the following six principles of good regulation. We aim to apply these to our own work as well as using them in our oversight and policy work.
- Proportionality
 - Accountability
 - Consistency
 - Targeting
 - Transparency
 - Agility
- 3.4 We aim to promote and support 'right touch' regulation. This is regulation that is based on a careful assessment of risk, which is targeted and proportionate, which provides a framework in which professionalism can flourish and organisational excellence can be achieved, that is the consistent performance of good practice combined with continuous improvement.

4. Our strategic objectives

4.1 Reporting clearly and openly on the effectiveness of regulatory bodies in the regulation of health professionals in the interests of patients and the public

We will do this by:

- Working with the health professional regulators to deliver reliable assessment and robust oversight of their performance
- Using our statutory powers to audit and review of fitness to practise cases appropriately, including the statutory right of appeal
- Being proportionate and focussed on outcomes
- Enabling good practice and learning to be shared
- Transparent, robust and fair public reporting.

We will know we have succeeded because

- There is a continuing reduction in concerns identified in our performance review and audits
- We refer fewer cases to court
- We see more good practice and improvement in the regulators
- We will have identified innovative opportunities for sharing learning and good practice.

4.2 Building evidence and promoting debate in order to identify excellence in health professional regulation and to contribute to the wider field of regulatory policy

We will do this by:

- Research and analysis of policy in regulation and healthcare
- Responding to commissions for advice from the Secretary of State for Health and the Ministers in devolved administrations
- Identifying problems from our performance reviews and suggesting solutions
- Publishing advice, guidance and research

- Promoting discussion, debate and learning through seminars and conferences
- Understanding the wider context of regulation including internationally.

We will know we have succeeded because:

- There is continuing and sustained demand for our policy advice
- We will have played an active role in delivering the reforms arising from the 2007 White Paper, including revalidation
- An evidence base will be established around excellence in professionalism and regulation, including work completed by the regulation observatory
- Other organisations, including the Department of Health and regulators, take action to deliver our recommendations
- Our insight and experience is sought by the wider regulatory sector.

4.3 Building confident relationships to create right touch regulation

Right-touch regulation is based on a careful assessment of risk, which is targeted and proportionate, which provides a framework in which professionalism can flourish and organisational excellence can be achieved, that is the consistent performance of good practice combined with continuous improvement.

We will do this through:

- Consistent application of our values and principles
- Dialogue with patients, the public and their representative organisations
- Our commitment to inclusion, equality and diversity
- Promoting regulation's role in patient safety
- Being clear and positive in our relationships with regulatory bodies
- By active engagement across regulation both within and outside the health sector
- Independent and constructive relationships with sponsor Departments.

We will know we have succeeded because:

- There is greater public awareness about role of professional regulation
- The views, expectations and experiences of patients and the public run throughout our work
- There is greater consistency in the outcomes of activities of the nine health professional regulators
- We are invited to contribute to seminars, conferences and other events.

5. Our strategic and business planning process

- 5.1 We approved the final Strategic Plan at our Council meeting on 24 November 2009.
- 5.2 The Strategic Plan creates a framework for the business planning cycle as agreed with the Department of Health and devolved administrations and for the creation of our Business Plan and Budget for 2010-11.

Annex A

Respondents to the draft strategic plan

We put our draft strategic plan on our website, we also specifically invited the regulatory bodies, four governments and members of our stakeholder network to comment. Through our patient involvement partner National Voices we invited its membership to comment if they wished.

We received seven responses within the time, two were from individuals and five from organisations. We received six further responses following the Council meeting which were not discussed there but have been taken account of in this final draft.

Those responding

Two public members of the CHRE Network

British Chiropractic Association
British Osteopathic Association
Chiropractic Patients Association
General Medical Council
Institute of Pharmacy Management
Local Better Regulation Office
NHS Education for Scotland
NHS Employers
Nuffield Health
Parliamentary and Health Ombudsman
Royal College of Anaesthetists
Royal College of General Practitioners
Royal College of General Practitioners Beds & Herts Faculty Board
Royal College of Radiologists