



CHCC COLLEGE OF HEALTH CARE CHAPLAINS



SSHA SOCIETY OF SEXUAL HEALTH ADVISERS



Unite the Union Response to:

Health and Care Professions Council (HCPC) consultation on changes to fees.

This response is submitted by Unite in Health. Unite is one of the UK's largest trade union with over million members across the private and public sectors. The union's members work in a range of industries including manufacturing, financial services, print, media, construction, transport, local government, education, health and not for profit sectors.

Unite represents in excess of 100,000 health sector workers. This includes eight professional associations - British Veterinary Union (BVU), College of Health Care Chaplains (CHCC), Community Practitioners and Health Visitors' Association (CPHVA), Guild of Healthcare Pharmacists (GHP), Hospital Physicians Association (HPA), Doctors in Unite (formerly MPU), Mental Health Nurses Association (MNHA), Society of Sexual Health Advisors (SSHA).

Unite also represents members in occupations such as nursing, allied health professions, healthcare science, applied psychology, counselling and psychotherapy, dental professions, audiology, optometry, building trades, estates, craft and maintenance, administration, ICT, support services and ambulance services.

1. **Introduction**

- 1.1. Unite welcomes the opportunity to respond to the Health and Care Professions Council's *Consultation on HCPC fees*.
- 1.2. Unite has used its consultative provisions throughout the organisation to collate the views of members registered with the HCPC and these have informed our response.
- 1.3. Unite thanks the Chief Executive of the HCPC for the opportunity to meet to discuss the proposals.

2. **Consultation questions**

1. To what extent do you agree or disagree with the rationale we have set out for increasing our fees by the minimum necessary amount?

1.1. Strongly disagree

1.2. The proposed above inflation fee rise of 6% comes at a time when many Unite members continue to face uncertainty about pay. It is unlikely there will be an announcement on NHS pay for 2024/25 until after the general election. Unite members working in this setting, who account for a considerable number of HCPC registrants, therefore continue to experience real term pay cuts.

1.3. Members have experienced increases in pension contributions, student loan payments, cuts to mileage payments and previous above inflation increases in registration fees. For many there are also additional costs associated with work, such as car parking and fuel charges that have again, increased above inflation. Consequently, any increase in pay is negated.

1.4. If this fee increase comes into effect, it will mean that in ten years the amount HCPC registrants must pay to work will have risen by nearly 30%, whilst their wages have not.

1.5. The proposal is therefore opposed by our HCPC registered members.

2. Given the rationale, to what extent do you support the fee increase proposal?

2.1 Strongly disagree.

2.2 As stated in the consultation document, there were significant delays in the government signing off the previous fee increase. This meant that the HCPC were not able to benefit from the extra income as anticipated. Whilst Unite appreciates the financial position the HCPC finds itself in, and the risks associated with this not being addressed, it does not consider that registrant members should shoulder the burden of government complacency.

2.3 Unite continues to be of the view that it is unacceptable that the majority of the HCPC's budget is spent on fitness to practise¹. Unite recognises the improvements the HCPC have made to improve processes and appreciates that there is more to do. However, it remains

¹ <https://www.hcpc-uk.org/about-us/insights-and-data/ftp/fitness-to-practise-annual-report-2021-22/>

unacceptable that a substantial number of cases that continue in the process, are unfounded. Registrants should not have to pick up the cost of this.

2.3 Registrants involved in the fitness to practise process are experiencing significant delays, impacting on their physical and mental health. Being in the process, in some cases for many years, also affects their ability to earn. This is neither fair to registrants, nor does it effectively protect the public.

2.4 Regulatory reform could assist in moving cases through the process more efficiently but once again the government has failed to progress this agenda forward. Once again it appears registrants are being asked to compensate for government inaction.

3. In addition to the equality impacts set out in the Equality Impact Assessment, can you identify any further impacts relating to protected characteristics that we should consider?

3.1 Registrants with caring responsibilities and those with long-term conditions or disabilities may be more likely to work reduced hours. Indeed, women are also more likely to work part-time. Consequently, the fee increase is likely to have a greater impact on these groups since the registration fee is the same regardless of salary or hours worked. In addition, those registrants who have additional costs for childcare or other caring responsibilities are more likely to be adversely affected.

3.2 For those working in the NHS it needs to be remembered that as graduates they do not enter the pay scale at the full rate for the job. Therefore, Unite agrees that a reduction in registration fees supports them financially at a time when they are establishing themselves in their career.

3.3 With the move away from self-regulation, Unite argues that registrants should no longer have sole responsibility for the cost of assuring public protection. The fee has become another tax on HCPC registrants. Unite is of the view that employers could and should reimburse the cost of regulation fees.

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