

## **General Social Care Council**

# Annual Report and Accounts 2011-12



Designed and produced by Karen Welsh

# **General Social Care Council** Annual Report and Accounts 2011-12

Annual Report and Accounts presented to Parliament pursuant to paragraph 18(4) of Schedule 1 of the Care Standards Act 2000.

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# Chair's welcome and a review of the last 10 years



This is to be our last full Annual Report. On 27 March 2012 the Health and Social Care Bill received Royal Assent; consequently, on 1 August 2012 the regulation of social workers is to pass to the Health

Professions Council (HPC), and the General Social Care Council (GSCC) will then close.

In these circumstances it is important and appropriate that I look back beyond the period 1 April 2011 to 31 March 2012 covered in this document, and reflect on the work of the GSCC since it was set up in 2001, a milestone for social work, establishing it for the first time as one of the regulated professions, with the use of the title social worker reserved by statute to those on the GSCC register.

Readers of this report will be struck by how positive and productive the year has been, despite the prospect of closure. Following the Government's decision in July 2010 to transfer the regulation of social workers to the HPC, a multi-professional regulator, everyone at the GSCC has focused on the complex and demanding challenge of delivering a smooth and effective handover. Because of this single minded and determined effort I am very optimistic that we will achieve the objective we set ourselves, and, as I write, I can confirm

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that we are on target to do so.

We closely monitored the Health and Social Care Bill as it has progressed through parliament. This highly significant piece of legislation contains the clauses laying down the detail of the new regulatory framework for social work. We contributed to discussions within the Department of Health and then to the debates in the Houses of Commons and Lords, so as to ensure that the new arrangements are informed by the understanding of social workers and expertise in social work practice that the GSCC has built up over the last decade.

Readers of this report will be struck by how positive and productive the year has been, despite the prospect of closure

The creation of the Health and Care Professions Council (as the HPC is to be renamed) is intended to be a step towards creating an integrated and cohesive framework across the different disciplines that work in the sector, and an opportunity to maximise the efficiency, effectiveness, and transparency of regulation. The challenge for the new Health and Care Professions Council (HCPC) will be to combine a consistent multi-professional approach with processes that are sensitive to social work, and reflects the very different environment in which social workers practice. We continue to engage in discussions so as to ensure that the new framework maximises public protection, is understood by service users and by social workers, and reflects the reality of modern social work practice.

The GSCC was established in 2001 following Lord Laming's enquiry into the tragic death of Victoria Climbie. The Government's ambitious intention was to create a body that would both promote high standards in social work and protect the public. Regulation was to be a crucial safeguard that would allow the public to have confidence in social workers as professionals. In 2003 the Social Care Register opened, and this now has over 100,000 social workers and students on it. Statutory registration put social work on a par with other regulated professions such as medicine, law and nursing. Social workers became accountable for their conduct and practice through adherence to a prescribed set of standards. The GSCC's code of practice provided clarity to registrants about the standards required of them, and it made it possible for the GSCC to take action against those who did not adhere to it.

Over the last 10 years there have been enormous changes in both the social work and the wider regulatory landscapes. Initially it was envisaged that the GSCC would both champion and regulate social work, a model that was common amongst professional bodies at the time but has since been recognised as flawed. In February this year the new College of Social Work was launched, thereby separating the crucial role of promoting the profession from the potentially conflicting regulatory responsibility for public protection. The College will champion standards, promote excellence, and oversee post registration specialist training. It will be an authoritative voice for the profession, and disseminate up-to-date evidence based knowledge to its members.

In 2003, the same year in which we opened the register, the three-year social work degree was established, making social work a graduate entry profession. This has raised the academic level of those entering the profession and has been an additional important safeguard. The GSCC has been responsible for accrediting university courses and now passes this function to the HPC.

Regulation was to be a crucial safeguard that would allow the public to have confidence in social workers as professionals

In 2007 another tragedy, the death of Peter Connelly, again put the spotlight on social workers, and highlighted the need to improve their education, training, supervision and support, so as to better equip them for the highly demanding and complex situations in which they work.

In 2009 serious shortcomings in the GSCC's own performance became apparent, underlining the case for it to reform its powers and procedures and to focus on its primary public protection role. The GSCC responded positively to these challenges. We have been keen and active players both in the Social Work Reform Board and in the drive amongst the professional regulators, led by the Council for Healthcare Regulatory Excellence, to modernise and improve their effectiveness, whilst at the same time significantly reducing its costs. I can now say with confidence that the GSCC is a high performing organisation, which has demonstrated an ability to improve and change. It is an organisation that has been influential in bringing about recent fundamental reforms in the social work sector, and one that I have been proud to be part of for the last three and a half years.

I can now say with confidence that the GSCC is a high performing organisation, which has demonstrated an ability to improve and change

It is abundantly clear to me that the reform of social work demands leadership at every level. The GSCC welcomes the emphasis on leadership in the new architecture: national leadership from a Chief Social Worker providing a strong voice within Government; local leadership from principal social workers; and sector leadership from The College.

The GSCC is absolutely convinced as to the importance of professional regulation, both its role in the past in bringing about accountability for social workers, and in the future as the drive to professionalise social work gains pace. Right up until we close we

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will work with the Social Work Reform Board, The College of Social Work, and the Health Professions Council, to secure a future in which the public have trust in the social work profession and in regulation, and in which social workers can practise safely and confidently.

As I exhort professionalism amongst social workers, I point to the example that has been set by all those working for the GSCC. This report documents a year of exceptional activity and improvement in an organisation facing closure by people whose personal futures are uncertain. This is a remarkable achievement and a demonstration of selfless commitment to public service. I pay tribute to my all colleagues at the GSCC – those who work in Rugby and London, our panellists, service users who have helped us in our work, my fellow Council members, and our Chief Executive Penny Thompson. I know they join with me in wishing the HPC and the social work profession well in the future.

Rosie Varle

Rosie Varley OBE GSCC Chair



# Certificate of registration

The General Social Care Council certifies that

Mr Guy Jackson

Registration number \$363774

was admitted to the Council's register of social care workers on 01/04/2005 for a period of three years.

Signed on behalf of the General Social Care Council

Lyres berry Chief Executive

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The General Social Care Council: A decade of progress

In this section of the Annual Report we will look back at the work of the General Social Care Council (GSCC) since its inception over 10 years' ago. It will explore our key achievements, which includes the development of the social work degree and codes of practice; registering over 100,000 social workers and social work students; and introducing a new level of accountability for our registrants.

#### The GSCC is established

The GSCC was established on 1 October 2001. However, much work was done to create the organisation before its launch. Ministers set up an advisory group in November 2000 to advise them on establishing a new regulator and to do preliminary development on some important areas of our work. This included initial work to produce draft codes of practice and preliminary work on registration. The advisory group was chaired by Baroness Pitkeathley and included sub-groups on setting up the GSCC, registration, regulating education and training, and communications. The body also produced a draft organisational structure.

Born out of the Care Standards Act 2000, it took 25 years of campaigning for the GSCC to come into being. We were the first social care regulator in England and sister care councils in Northern Ireland, Scotland and Wales were also established. Our initial aims were to protect the public, act as the guardian

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of standards for social care workforce, and improve the standing and status of the profession. This would be achieved by introducing regulation to a workforce of one million social care professionals working for 25,000 employers throughout England.

One of our original mission statements was that we were to be the champion of social care workers. However, this caused confusion among the sector and the media as to our role in both holding the workforce to account and a body that represented its interests. This confusion arose because, unlike other professions, social workers did not have an effective professional body to act as the voice of the profession. However, in time, we learnt that we needed to be clear about our essential function. So only more recently, with the emergence of The College of Social Work, has a clear distinction between regulator and professional body been helpfully drawn.

The emergence of the GSCC came at a time when the country coming to terms with the death of Victoria Climbie, a child who suffered horrific abuse at the hands of her carers, despite intervention from health and social care professionals. The failure to prevent Victoria's death, coupled with a desire to professionalise social work, meant the GSCC's creation was a welcome addition to the social care landscape and the most significant investment in social care for over 30 years.

Over 10 years we created England's first comprehensive register of social workers; upgraded the social work qualifying standard from a two-year diploma to an accredited three-year degree; established a set of standards that all social workers agree to adhere to; set up a conduct process to ensure social workers are held to account if they breach those standards; and ensured that continual training and development was a key part of continuous registration. The main driver for this work was to raise standards in social work and increase public protection.

...the GSCC's creation was a welcome addition to the social care landscape and the most significant investment in social care for over 30 years

#### The codes of practice

One of the first jobs on the GSCC's 'to do' list was to consult on a code of practice, a set of guiding principles and expectations of the workforce and its employers. These would be an agreed list of statements that describe the standards of professional conduct and practice required of social care workers as they go about their daily work, which eventually set the benchmark for hearings in to allegations of misconduct. There was a strong appetite for the development of the codes. Before they were launched, the then Director of the British Association of Social Workers, Ian Johnston said:

"Having campaigned for more than 20 years for the independent regulation of social care the British Association of Social Workers warmly welcomes the GSCC and its counterparts across the UK.

"The Codes of Conduct and Practice will clearly lay down the standards of conduct expected from all staff and their employers. I am sure they will boost the confidence of those receiving services and those whose job it is to provide them."

In early 2002 we produced a draft version of the codes of practice after a public consultation and events with stakeholders across the sector. The consultation was run simultaneously in England, Scotland, Northern Ireland and Wales. Over 1,700 people in England responded to the consultation. A total of 365 written submissions were received, many from organisations representing larger groups, and six consultation events were attended by 1,300 people, whose feedback was recorded.

People attending the consultation events came from across the social care spectrum, representing the public, private and voluntary sectors and including service users and carers. The website set up for the consultation was visited by 15,000 people and a total of 3,000 consultation packs were sent out. Ten special focus groups with service users throughout the country were also held, including with children and young people, people with learning disabilities and one-toone sessions with people in their own homes. These extra focus groups were held in an effort to overcome the barriers preventing service users from attending events and they were very successful. We and our sister councils in

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the devolved countries considered the results of the consultations and worked together to ensure the codes were aligned throughout the UK.

The first ever codes of practice for social care workers and employers were formally launched in September 2003 and since then we have disseminated over three million copies to social workers, social care workers and employers. We have produced them in a variety of formats, including easy read, Braille and sign language DVD, and translated them into 29 different languages, in order to make them as accessible as possible for our wide ranging audiences. In 2004, 47,000 social care workers and employers were asked what they knew and thought about the codes. The results showed that 96 per cent of respondents rated them from good to excellent and 86 per cent thought they would raise standards of care within the social care sector.

After the launch of the codes, the late Michael Leadbetter, then President of the Association of Directors of Social Services, said:

"It is absolutely crucial that employers know what is expected of them when employing social care staff and that staff know, without a shadow of a doubt, what is expected of them when they take on their tasks.

"These codes are welcome in making that all the more likely. We need to celebrate their launch. They will enhance the standing of social care, further protect the public and, crucially, improve the status and morale of social care staff."

When developing the Code of Practice for Social Care Workers, our brief was to create a set of standards fit for social workers and social care workers. While the code has served the sector well and many elements covered the values and principles that are fundamental to social work, on reflection more specific standards for social workers may have been beneficial. Social workers are trained to degree level and they have significant legal responsibilities that are not expected of social care workers. The introduction of registration for social workers created a profession distinct



from social care workers. Had we remained the regulator, we would have developed a set of standards, values and ethics specifically for social workers.

#### The Social Care Register opens

After the development of the codes, the next tranche of work came with the development of the Social Care Register.

Research compiled in 2003 suggested there was overwhelming support for regulation of the social care workforce. An overwhelming majority of the 1,018 people surveyed in a National Opinion Poll (93 per cent) said they were in favour of social work regulation. Ninety per cent of the public surveyed also said they had confidence that regulation would deliver higher standards and improved public protection. Then Health Minister Jacqui Smith said at the time:

"...we need to continue to improve the public's confidence in social workers and the Social Care Register will be a key part of that work. Regulation is an important step in increasing protection for some of our most vulnerable people and ensuring that a high standard of care is delivered across the country."

Much time and effort went into developing a system of registration that was robust and effective. We consulted widely on the registration fee for social workers, which was set at £30, and has never increased. This fee however is subsidised by the Department of Health (DH). We held a big recruitment drive to find registration committee members, who would take the key decisions on who was eligible to join the Social Care Register. The register was opened in April 2003 to the 60,000 social workers practicing in England. Barnardo's, the NSPCC and Hampshire County Council were the first organisations invited to register their qualified social workers when register first opened.

Research compiled in 2003 suggested there was overwhelming support for regulation of the social care workforce

At first, practitioners could register on a voluntary basis and several thousand social workers joined the register during the voluntary phase. But the GSCC's objective was always compulsory registration of the workforce. Therefore, we soon turned our attention to the huge task of planning for the registration of rest of the social workers in England, which totalled almost 40,000. Leading the drive for registration was a fictional character called Reg, whose job was to process applications. The 'Reg' campaign, which was an innovative advertising blitz to persuade social workers to sign up for registration, was launched in early 2004. Reg urged social workers to get their application forms in, to keep him busy, and help them reap the benefits of higher professional status. Conceived for his flexibility, Reg spread positive messages about registration.

By 1 December 2004, which was the deadline for social workers to submit their application



#### for guaranteed registration by the following April, we had received 44,435 registration application forms and thousands more were being delivered daily. On 1 April 2005 the title 'social worker' became protected by law, meaning only those who were registered with us could call themselves social workers. Our Registration Team worked tirelessly to ensure all applications were processed and by November 2005 we had managed to register over 70,000 social workers. Since then our registration figures have grown and by 31 March 2012 we had 105,778 social workers and social work students on our register.

A key facet of our registration process is ensuring the applicant has the appropriate qualifications and is of good character and conduct. From when we opened the register until 30 September 2011, 408 applicants were referred to the Registration Committee with a recommendation either to refuse registration or to register the applicant with conditions. The committee decided in 255 cases to refuse registration and to register 92 applicants on the basis that they complied with certain conditions. In 922 cases it was decided that the qualification held by the applicant did not meet the required standard and the majority of these qualifications were obtained outside the UK.

#### Students join the register

After all the work that took place to register social workers, next came the turn of social work students. They began registering in the autumn 2005 to coincide with the beginning of the academic year. By the end of October that year 700 students had joined the register and over 3,500 had applied to join. This was a big success for us and it demonstrated students' commitment to high standards of conduct and practice from the very start of their social work career. As with social workers, we only register students with the right credentials, and as such up until 30 September 2011 we refused 19 students entry to the register and registered 10 students with conditions.

### Social work becomes a degree-level profession

Much work had gone on before this time to develop the three-year social work degree and two-year Masters, which replaced the two-year Diploma in Social Work. The degree became the minimum standard and therefore social work became a graduate profession. We worked closely with the DH to introduce the new qualifications and in the summer of 2002 we began to accredit universities in England to deliver degree programmes. That year 66 universities were accredited to offer the new qualifications. Working on the principle that good quality services starts with good quality training, we worked with universities to ensure that future social workers were clear about the standards they were expected to meet, would inspire public confidence in social care and were able to work successfully with colleagues from other professions.

The autumn of 2003 saw the first intake of social work degree students and almost 2,500 students began their social work training. The degree aimed at building on the best of social work education and training and improving the status, image and position of social workers. The intention was to better equip social workers to provide high quality services to the public, drive up standards, ensure a high level of expertise and skill, thus putting social work on a par with other degree-level professions such as nursing and teaching. The sector had high hopes for the new degree. Middlesex University's then Curriculum Leader and Principal Lecturer, Helen Cosis Brown, said at the time:

"The new degree is all about professional practice and the academic element has been structured to support effective practice learning. Students will qualify with more hands-on experience than newly-qualified social workers before them.

"Employers and service users can be confident that newly-qualified social workers will be appropriately skilled for social work practice."

A requirement of the degree was that all students had to complete a minimum of 200 days practice placement in at least two practice settings, gain experience of legal intervention and provide services to at least two different users groups. In 2003, a student at Middlesex University, who has been working in the social care sector for 12 years, said he was looking forward to his studies:

"I'm confident the degree will complement and refine the experience I already have and give me with the credibility to further my work with young people. I'm looking forward to completing my practice placement so that I

can learn and benefit from the techniques and skills used in other social care settings."

For more information on practice placements, please refer to our report: *The Supply of Social Work Practice Placements: Employers' Views*. Between autumn 2003 and the end of August 2011, 20,401 students successfully completed the social work degree, many of whom have gone on to practise social work.

### Supporting students and higher education institutions

In order to support students through their studies, in 2003 we began administering bursaries for the social work degree. Students received on average £3,000 per year, as well as having their tuition fees paid. The bursary, funded by the DH, was not means-tested and was designed to encourage people of all ages and walks of life into social work by helping with their finances while they studied. At the time, the bursary was just one of a range of initiatives aimed at attracting people into social work, including a three-year recruitment campaign as well as the introduction of the new degree in social work which focused on practical work experience. Between 2000 and 2003 applications to social work courses plummeted; after the introduction of the social work degree applications trebled. By making social work a degree-level profession and supporting students financially, it became valued as a profession.

On 31 March 2007, the administration of the social work bursary was handed over to the NHS Business Services Authority. The change followed a review undertaken by the DH in 2004, which concluded that all health and social care student bursaries should be administered by one single body.

Since our inception, we have also distributed over £215.7 million in Education Support Grants, which is money the DH makes available for helping employers and universities meet the costs of arranging and managing placements for students and helping to pay for the involvement of service users and carers in the design, delivery and assessment of social work courses. This function will transfer to the NHS Business Services Authority at the end of July 2012.

#### Accrediting and monitoring courses

Another area of responsibility we were granted was to approve, inspect and monitor degree and post-qualifying courses. Accreditation of institutions and course approvals began in 2002 and their function was to ensure that social work courses were fit for purpose and would develop the required knowledge, skills and competence students would need for a career in social work.

To win accreditation, universities had to make a range of commitments designed to promote the highest possible educational standards, including keeping up-to-date with modern best practice; checking candidates' criminal records; providing enough teaching resources; monitoring the quality of teaching; making sure all graduates were fit for social work practice; and involving service users and carers in course design, student recruitment, course delivery and assessment.

#### Service user involvement

Involving people who use services in all areas of our work has been extremely important to us. As the regulator for social care workers, we sought to put service users at the heart of our work since our inception in 2001. Over the last 10 years we achieved significant involvement of people who use services and their carers in a number of ways.

Service users played a big part in developing the Code of Practice for Social Care Workers. We held a number of citizen's juries with service users to determine which parts of the social care workforce should be registered. We established a champion of service user involvement on our Council Board and put in place a dedicated Service User Involvement Advisor to ensure that people who use services were brought into the day-to-day running of the organisation.

A team of 15 people who use services was created to assist with the inspection of universities who were providing the social work degree, which marked a significant innovation in professional regulation. Service users were heavily involved in the development of post-qualifying awards for social workers. We worked with other similar national organisations to share experiences of involvement and to overcome challenges, and with national organisations to bring about a change in the law to allow service users who were involved in our work to be paid for their time. Service users have been invited



to a number of our staff events to talk about their experiences of using care services and to discuss why they thought regulation was important.

### The development of a new post-qualifying framework

The framework of training for qualified social workers in England came under review in 2003. Under the old framework, which was established in 1990, more than 15,000 social workers in England gained qualifications, building on their initial training, developing their skills and giving them specialist skills in areas such as mental health or child care. A consultation was held which looked at the effectiveness and relevance of the framework to make sure it was able to adapt to the fast-changing social care sector, such as the introduction of the new degree, the opening of the Social Care Register, and the development of new roles for social care workers.

It was agreed that a new, up-to-date framework for professional development was necessary to encourage ongoing learning and excellence in practice and in 2004 a new framework was agreed following an extensive consultation with the sector.

The new post-qualifying (PQ) framework was made up of three awards to build up social workers' qualifications throughout their careers. The three new awards were the Post-Qualifying Award in Specialist Social Work; the Post-Qualifying Award in Higher Specialist Social Work; and the Post-Qualifying Award in Advanced Social Work. At the time, David Behan, then Chief Inspector of the Commission for Social Care Inspection said:

"One of the keys to ensuring people have access to high quality social care services is the development of a fully trained workforce. The knowledge and skills gained while pursuing a post-qualifying award will ensure that all people who use social care services are better protected."

"One of the keys to ensuring people have access to high quality social care services is the development of a fully trained workforce"

### Renewals peaks and post-registration training and learning

The new PQ framework was formally launched in 2007 and completion of a PQ award was one of the many ways a social worker could demonstrate they were furthering their professional development. Post-registration training and learning (PRTL), is one of the conditions of continuous registration and forms a fundamental part of our registration renewal process.

Our registration renewal cycle occurs every three years and due to the large number of people who joined the register in late 2004 and early 2005, we have seen two renewal peaks since our inception. During these peaks we have processed over 35,000 renewal forms in the matter of a few months. When social workers renew their registration they have to declare they were still fit to practise, had suitable endorsement and demonstrate completion of sufficient PRTL on each three-year anniversary of their entry onto the register. Failure to complete at least 15 days (or 90 hours) of PRTL could be considered misconduct.

During the 2011 calendar year, we sampled 1,186 PRTL records. Initially, 336 social workers failed to provide a PRTL record and 100 were asked to provide more information. In the end, the majority of social workers in the sample provided satisfactory evidence of training and learning. Only four social workers have been removed from the register for failure to complete the required amount of PRTL and six social workers have had conditions applied to their registration to make up the PRTL in their next registration period. In April 2012 a social worker was removed from the register for false endorsement of his renewal form.

#### Conduct

After establishing the Social Care Register our next task was to develop a robust system of accountability for those social workers and students who failed to adhere to the expected standards by breaching the codes of practice. In spring 2006 we held our first hearing; this was an important milestone in our history and public protection as it was the first time a social worker could be removed from the register and be prevented from practising social work.

Between April 2006 and 30 September 2011 we received 4,670 referrals about social workers (88 per cent) and social work students (12 per cent). Not all of the referrals received were treated as complaints as we can only do so if there are specific allegations of misconduct. Therefore, of all the referrals received, 53 per cent were closed as they were not classed as complaints; 20 per cent were treated as complaints and investigated but closed due to little chance of a panel finding misconduct; in 12 per cent of cases the referral was closed as the complainant was unwilling or unable to proceed with the complaint. Overall, eight per cent of referrals progressed to a hearing.

Once at hearing stage there are five possible outcomes: removal from the register prevents registrants from practicing social work; suspension from the register is temporary removal for a period of up to two years; and an admonishment is a caution on the registrant's record for a period of up to five years. The two other possible outcomes are the facts of the case are not found and no misconduct is found against the registrant.

Also during the period April 2006 to 30 September 2011, we held a total of 339 conduct hearings, with a further 30 cases referred to a hearing; however these had not been heard when this analysis was undertaken. Of the 339 conduct hearings which were held, a finding of misconduct was made in 278 cases; out of these the registrant was removed in 117 cases; suspended in 51 cases; admonished in 105 cases and there was no sanction in five cases. In the remainder of the cases either no misconduct was found or the facts were not proven. In all cases the registrant has the right to appeal the outcome which is decided by the First Tier Tribunal (Care Standards). In the period April 2006 to 30 September 2011, 39 decisions of the conduct committee were appealed.

It is important to remember that the majority of social workers on the register behave professionally and practice to the highest standards. Out of a registrant base of over 100,000 social workers and social work students, only 1.1 per cent of social workers were complained about over the last year and during the last eight years, only 0.3 per cent have had a finding of misconduct against them.

One of the conditions of registration is maintaining good professional conduct both in and out of work

#### Professional boundaries and other reports

One of the conditions of registration is maintaining good professional conduct both in and out of work. One of the ways in which registrants have consistently breached this requirement is by crossing professional boundaries, including the forming of inappropriate relationships. In light of the number of conduct cases involving this issue, coupled with our commitment to continuously delivering to the sector, at the end of 2011 we launched a new guidance tool for registrants. Social workers breaching professional boundaries can cause significant harm and distress to service users, so the purpose of this guidance was to increase public protection by helping to ensure that all social workers practice ethically. Furthermore, professional boundaries are a subject that causes confusion and concern for some social workers, and there is an absence of resources for them to draw upon.

Over our tenure as regulator we have contributed widely to the sector by responding to numerous public consultations and producing guidance documents and regulation reports. These have included, but not limited to, the Roles and Tasks of Social Work, a report on what makes social work distinct from other professions; Raising Standards, various reports on our social work education and conduct regulatory work; Grow Your *Own*, a toolkit for employers to support their employees to qualify as social workers; and we are currently in the process of finalising a series of learning reports, covering service user involvement, practice placements, Approved Mental Health Professional course inspections, regulating social workers, and regulating social work education, which will serve as our legacy to the social work sector.

#### Contributing to sector developments

Our engagement with the sector was not limited to producing policy documents and reports. Over the last 10 years we have been involved in a range of initiatives and development work. We have been involved in a range of events, speaking to social workers, care workers, employers, opinion formers and service users, to name just a few. The purpose of the events was to raise awareness of regulation and understanding of the work we were doing.

We have been actively involved in the work of the Social Work Reform Board. Our Chief Executive is a member of the Board; we seconded a staff member to the Joint Social Work Unit to assist in the development and delivery of the Reform Board's recommendations; and our officers have served on the three main working groups.

Naturally, our engagement work has had a particular focus on our registrants. Over time we have developed new and innovative ways of communicating with social workers and students, including the launch of an e-newsletter in 2008, which is sent to over 70,000 people each quarter and the use of social media tools to engage in two-way dialogue with the people we regulate as well as the general public. This strategy has proved extremely successful.

We launched a social worker engagement strategy in late 2010, using events, publications, digital and social media channels to facilitate two-way communication with our registrants. The implementation of this engagement strategy is proving highly successful; we have over 1,000 'followers' and 'likes' on Twitter and Facebook, and a steadily growing community on our website. We regularly publish blogs from social workers,



which receive high volumes of comments from other practitioners, offering guidance and sharing their experiences with us and each other. We have met with around 1,500 social workers through our workplace events, which received a positive response and have been good opportunities to keep registrants engaged and well-informed regarding the transfer of our functions to the Health Professions Council (HPC).

Our engagement work has not been limited to our registrants. We also send regular e-bulletins to HEIs and social work employers to keep them up-to-date with GSCC news and sector developments.

### Extending registration to other groups of social care workers

One area of work that we extensively prepared for but never implemented was registering groups of social care workers. Initially there were plans to register home care workers, followed by residential care workers and eventually the entire social care workforce. In 2009 the Government took the decision to hold off on this stream of work and therefore we refocused our priorities back to regulating social workers.

From this experience we learnt about the importance of developing expertise in regulating one professional group before extending regulation to other sections of the workforce. Even though our plans were not taken forward we hope the work we did in this area will be built upon by other organisations as we believe service users deserve a properly trained, trusted and regulated workforce.

Skills for Care and Skills for Health are in the process of developing new standards of training and practice for social care workers and we hope that this will lead to increased accountability for these workers and improved standards within the sector. It is important that the development of any regulation of social care workers fits with the overall regulatory framework for health and social care, including the role played by the Care Quality Commission and OFSTED.

#### The future for social work regulation

On 1 August 2012 the responsibility for our regulatory functions will pass to the HPC; the accreditation of PQ programmes will pass to The College of Social Work; and our social work education statistical information will go to King's College London.

Looking forward, as we pass the baton to the HPC we wish them the very best in their new role in regulating social work professionals. With a strong College to champion best practice and act as the voice of social work, we are confident that the professionalism of social work will continue and we are proud to have played such a big part in beginning the process.



### **Chief Executive's review**



In last year's review I outlined the General Social Care Council's (GSCC's) three priorities since the announcement back in 2010 of the Government's intention to

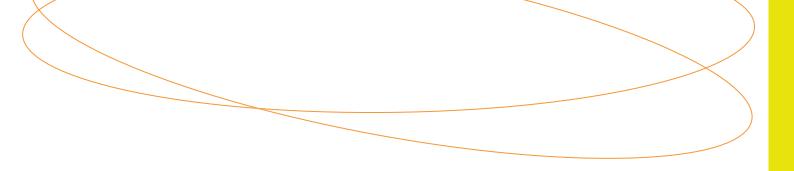
transfer our functions to the Health Professions Council (HPC) at the end of July 2012. Those priorities are delivering and improving; staff care and respect; and the effective transfer of our functions, including our closure and leaving a positive legacy to the sector. This year we made good progress on all three of our priorities and are on target for a clean hand-over to the Health Professions Council (HPC) in July, and organisational closure throughout August and September.

With the closure of the GSCC approaching, staff care and respect has been a priority over the past 12 months. In January we launched a collective consultation, which set out proposals for staff redundancies and information relating to the Cabinet Office Statement of Practice transfer consultation as a result of our abolition. In anticipation of this, managers at all levels have undergone a development programme of facilitated coaching to enable them to support staff through their final months at the GSCC.

In addition to the Employee Assistance Programme, which was initiated in 2011, we have launched a programme of outplacement provision to support staff make their next move, ideally after the closure of the GSCC, be it on to a new job, career change, re-training or retirement. Provision has included workshops and one-to-ones to help equip staff with the skills needed for the changes ahead, and there has been considerable take-up of these services. In addition, a significant number of staff members have also been given internal development opportunities to help with career progression and to enhance their knowledge and skills.

The outplacement programme has been hugely welcomed, highly regarded and well used. The working group commissioning it, drawn from our staff, have done an excellent job of ensuring that it meets the varied requirements of our staff and the Appointments Commission, as main provider, have been fantastic. This has resulted in very positive feedback from individual staff and contributed to surprisingly high morale at a time of change, loss and anxiety.

With the closure of the GSCC approaching, staff care and respect has been a priority over the past 12 months



With the dedication and hard work of our staff, we have achieved our key milestones in the work we are doing to transfer our functions to the HPC in July, following Royal Assent to the Health and Social Care Act. We have re-shaped our leadership and management to best equip ourselves for the challenges we face as a closing organisation, and have proved ourselves resilient and purposeful.

We remain resolutely committed to our regulatory responsibilities until the day we are no longer the regulator of social workers in England. As a member of the Social Work Regulatory Oversight Group, I have worked closely with the HPC, the Council for Regulatory Excellence and the Department of Health as to prepare for the task ahead. We are already sharing our data with the HPC in order to ensure the transfer process is as seamless as possible. Our internal audits have provided assurance that the approaches we have in place support an effective transfer.

Over the past six months we have worked hard to ensure the sector is kept informed of the transfer by travelling to local authorities around the country speaking to social workers about the changes and answering their questions. We have also engaged with sector via other events, as well as social media channels and e-newsletters to social workers, employers and social work education providers.

We have strived to continue delivering our priorities, improve our processes and contribute to sector developments. I am proud to say we have exceeded our own targets, whilst at the same time reducing costs through efficiency and process improvements. We have made efficiency savings, most notably in our recruitment and procurement processes, and we have also managed an increase in referrals and student registration, a reduction of open investigation cases and have remained focused on hearing open cases before the transfer. This has resulted in an increase in the number of hearings held this year.

We remain resolutely committed to our regulatory responsibilities until the day we are no longer the regulator of social workers in England

Last May we saw the end of the renewals spike, whereby 35,000 social workers renewed their registration within a six-month period. Thanks to improved processes and a lot of hard work we managed to renew applications within three weeks of receipt, which was a tremendous achievement.

This year all Approved Mental Health Professional courses have been inspected. A new risk assessment framework has been implemented for the assessment of higher education institutions (HEIs), including the development of an electronic portal tool to store intelligence about HEIs.

In the autumn we produced new guidance for social workers on the issue of professional

boundaries, as analysis of our conduct cases showed that boundary breaches were a recurring trend. We hope that this guidance will help increase public protection by supporting social workers to practise ethically and safely by encouraging reflection on professional boundary issues.

This year we have been working on a number of learning reports, which cover various areas of our work and documents best practice from what we have learnt over our 10-year tenure. These reports will serve as part of the GSCC's legacy after closure.

We have developed a Safe Haven Policy to accompany and enhance our corporate data protection polices, for the benefit and protection of all. The Safe Haven Policy incorporates existing measures already being carried out to lower the risk of any security breaches. We also reviewed and revised our Records Retention Policy and Schedule. This ensures that records are retained only for as long as is required and no longer, and that the disposal methods are appropriate and secure.

I would like to take this opportunity to formally thank colleagues across the GSCC for their tremendous commitment and unfaltering hard work over what has been a decidedly challenging and unsettling time. Despite staff members' own personal uncertainties about the future they have continued to work with determination and stoicism to get the job done and to do it well. I am confident that they will continue to deliver the GSCC's objectives in the months we have remaining, and I wish each and every one of them all the very best for the future.

As social work as a profession loses its dedicated regulator, it gains a dedicated independent professional College to give it a strong, authoritative voice; to champion excellence in practice and management; to provide a home for knowledge and best practice; to endorse and support continuing professional development; and develop communities of interest and other member benefits. We hope that the new professional landscape draws on the learning from the last decade and builds on the institutions that have played their part in the past, to the benefit of social workers and those who need and use social work services.

Finally, as closure of the GSCC gets ever nearer, we as an organisation wish the HPC well in its new role as the social work regulator from August. We hope they will build upon the foundations we have created and continue to maintain the crucial role of protecting the public.

Penny Thompson CBE GSCC Chief Executive



# **About the General Social Care Council**

The General Social Care Council (GSCC) is the regulator for social workers in England. Our job is to protect the public by requiring high standards of professional education, conduct and practise of all social workers in England.

Social workers work with some of the most vulnerable people in society, so it is vital that they are trained, and committed to high professional standards and are accountable for their practice.

We maintain a compulsory register of social workers and issue and enforce a code of practice. This code sets out the standards of conduct and practice required of social workers as they go about their daily work. They help to ensure that employers, colleagues, people who use social work services, carers, and members of the public know what standards they can expect from a social worker.

The GSCC works with social work employers and educators on the development of the standards they must meet. We promote high standards in social work education and training by inspecting the quality of social work courses and qualifications. All of the higher education institutions offering social work courses have undergone rigorous checks by the GSCC to make sure that they meet the required standards. We can refuse to accredit courses which do not meet the required standards. In addition to the social work degree, social workers must maintain and extend their knowledge and skills in order to remain on the social work register, and we review their progress every three years.

We administer a conduct function for the protection of the public. Our conduct panels hear evidence against social workers who it is alleged have committed misconduct. If someone is found to have breached the codes of practice, we can take action, with the severest penalty being removal from the register, meaning the individual can no longer practice as a social worker.

Conduct panel members adjudicate independently of the GSCC and focus on the need for public protection whilst preserving the social worker's right to a fair hearing. We aim to gain the confidence of the public and Parliament through our openness and by the taking of fair evidence-based judgments that are made in the interests of public protection.

We strive to provide the public and people who use social work services with confidence in our work and in the social work profession. We endeavour to promote a better understanding of our role and the benefits of professionalism amongst social workers.

#### Setting and maintaining standards

As well as fulfilling our statutory obligations, we work to gather and evaluate intelligence, and research developments in regulation, social work and social policy. We produce thematic evidence based reports on knowledge gained through registration, conduct, social work education and international issues of interest to care councils, harmonising policy areas to promoting and sustain high standards in delivery.

#### Our ambition

Our ambition is to **protect the public** through the regulation of social workers and their professional education and training; and through the **delivery of excellent services** and a **professional transition to the Health Professions Council (HPC)**, provide a **lasting legacy which enhances the social work profession and the reputation of the GSCC**.

#### How we work

The GSCC is a non-departmental public body funded by the Department of Health (DH). We also work closely with the Department for Education and our sister organisations in Wales, Scotland and Northern Ireland. We have supportive relationships with fellow regulators and frequently exchange good practice.

#### Our values

In working towards our ambition we have adopted the following values:

- **Fairness** Treating ourselves and others in an equitable manner and with consistency through our policies, procedures and practices as a professional regulator.
- **Openness** Openness in the way we evaluate and communicate with ourselves and our stakeholders, its being honest

about ourselves and our services, recognising where we have to change the way we work in order to improve our services as a professional regulator.

- Integrity Delivering our services in a professional manner with honesty, propriety and authenticity at all times.
- Quality Delivering excellence as a professional regulator, ensuring our services are fit for purpose in meeting the needs of our registrants, public protection and social work education and reform.
- Efficiency Delivering our services and everything we do in a way which delivers value for money and an approach that strives to look at more innovative ways of doing business.
- Respect Recognising the diversity and contribution of everyone in the organisation and treating ourselves and our stakeholders with dignity at all times.

These values shape how we interact with each other, our business partners, stakeholders and customers. They underpin our performance appraisal processes and guide our behaviour.

#### How we are organised

With the departure of our Director of Corporate Resources in July 2011, coupled with the changing requirements of the organisation in its closing year, it was decided that reshaping the leadership and management arrangements would optimise the capabilities and commitment of the GSCC's senior managers. Following consultation with staff, an Executive Leadership Team was established where all substantive Heads of Service meet fortnightly. The posts of Director of Corporate Resources; Strategy and Education; and Regulatory Operations were deleted, and a new Deputy Chief Executive post was created to support the Chief Executive. A number of Heads of Service expanded their remit to take on the roles of report to the Chief Executive and Deputy Chief Executive.

The new structure has put in place arrangements that are resilient and most able to minimise the risks associated with a closing organisation that needs to deliver its regulatory functions until the last.

#### **The Executive Leadership Team**

The GSCC's Executive Leadership Team comprises our Chief Executive, Deputy Chief Executive and seven Heads of Service who are responsible for leading the organisation and setting its strategic direction.

#### **Penny Thompson CBE – Chief Executive**



Penny joined the GSCC as Chief Executive on 31 March 2010. She has over 30 years' experience as a senior public services manager and social worker. Before joining the

GSCC she was Director of the public sector consultancy PeysnerThompson, undertaking a range of important roles and assignments including interim Deputy Chief Executive of NHS Haringey and a Consultant and Coach to OFSTED. From 2005 to 2007 Penny was Chief Executive of Hackney Borough Council, following a long career in the management of social work services, including eight years as Executive Director of Social Services at Sheffield City Council and three years as an Assistant Director of Children and Families and Children and Adults' services at Nottinghamshire County Council. Between 1987 and 1995 she was District Officer for Child Protection at Cleveland City Council. Penny graduated with a BA (Hons) in History and gained an MA in Social Work in 1979. She has over ten years' front line social work experience in challenging environments including two years as a social worker at the London Borough of Tower Hamlets and six years as a social worker for Sheffield City Council.

#### **Sherry Malik – Deputy Chief Executive**



Sherry is a qualified social worker and has worked in the public sector for over 25 years. She has previously worked as the Corporate Director of Strategy and Performance

at the Children and Family Court Advisory Support Service (Cafcass); Deputy Area Performance Lead for and Senior Performance Specialist for the Audit Commission; a senior manager of children's services in several local authorities; and a national childcare voluntary organisation (Action for Children, formerly NCH). She has also worked as Non-Executive Director of CWDC, Vice Chair of a large NHS Trust and is Chair of Essex Cares, a Local Authority Trading Company.

The rest of the Executive Leadership Team comprises:

- Claire Cooper Head of Committee Services and Investigations
- Val Cross Head of ICT and Internal Controls
- Gail Gibson Head of Registration
- Graham Ixer Head of Social Work

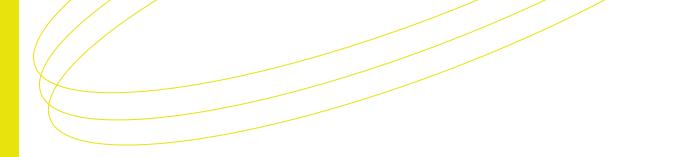
Education

- Alison Lowton Head of Governance and Legal Services
- Nelam Madahar Head of Finance and Facilities
- Debbie Moore Head of Human Resources
- Vaughan Willmore (left the GSCC in February 2012) – Head of Performance and Planning
- Michael Andrews (seconded to the Nursing and Midwifery Council in April 2012) – Head of Investigations

#### **The Board**

We are governed by a Board currently comprising nine members, which, since November 2008, has been chaired by Rosie Varley OBE. Board members determine the organisation's strategic direction, scrutinise performance and hold the Chief Executive to account. The Board meets publicly nine times a year on average.

The Board is selected by the Appointments Commission on behalf of the Secretary of State for Health. Board members have experience across the spectrum of social work, either as people who use services, carers, or service providers from the public, private or voluntary sectors. The majority of the Council Board members, including the Chair, must be lay members, which means they are not, and have not within 12 months of their appointment, been social workers, or involved in the training, education, appointment, employment, supply, supervision, monitoring or representation of social workers.



All business is transacted at the Board rather than through Committees, enhancing levels of accountability, scrutiny and risk management. The GSCC has two advisory committees, which are made up of Board members. The committees work closely with the Executive Leadership Team and advise other members of the Board on key areas of business. The two advisory committees are the Audit and Risk Committee, and the Remuneration Committee.

#### Lay members

#### **Rosie Varley OBE - Chair**



Rosie took up the role of GSCC Chair in November 2008. She is also Chair of the Public Guardian Board, a Public Appointments Assessor, a nonexecutive director of the West Suffolk

Hospital NHS Foundation Trust and a member of the Mental Health and Disability Living Allowance Tribunals.

Rosie's career spans health, regulation, social care and justice. She has been an NHS Trust and Regional Chair, and an NHS Appointments Commissioner. Rosie was Chair of the General Optical Council from 1997 to 2008, and from 2006-2008 was Acting Chair of the Council for Healthcare Regulatory Excellence, which oversees all health regulatory bodies. During 2008-09 Rosie chaired a Department of Health (DH) working group on the governance arrangements for the new General Pharmaceutical Council.

Rosie is also a governor of two schools in Bury St Edmunds, the Priory School for children with special needs and St Benedict's RC Upper School.

#### Jill Crawford OBE



Jill Crawford is Service Development Director of Neighbourhood Midwives, a social enterprise dedicated to providing innovative caseload midwifery and home birth services.

She has extensive experience in professional regulation, as a Council member on Nursing and Midwifery Council (2001 to 2008) and as a current Fitness to Practise panellist and Education Associate for the General Medical Council.

#### David Plank



David currently holds several positions including Chair of the General Osteopathic Council's Professional Conduct Committee. He is also a Council Member of the General Chiropractic Council and Trustee and Chair, Clinical Governance Committee, Peace Hospice, Watford.

He was formerly the Independent Chair of Connexions North London, and a Member of the Learning and Skills Council London North, and Panel Chair, GSCC Registration and Conduct Committees. Since retirement he has held the following interim management positions: Chief Executive, Workers' Educational Association and Deputy Chief Executive at the Museums, Libraries and Archives Council.

Prior to retirement he was Chief Executive of Enfield and Watford Councils and Director of Social Services in Hammersmith and Fulham and in Hounslow.

#### **David Prince CBE**



David is a member of the Committee on Standards in Public Life. He holds nonexecutive independent appointments as a member of the Leicestershire Police Authority,

the governance, risk and audit committee of the Bar Standards Board, audit and risk committee of the General Osteopathic Council, and remuneration committee of the General Pharmaceutical Council.

After a career in local Government, where he was Chief Executive of Leicestershire

County Council and director of finance and administration of Cambridgeshire Council, he held senior positions at the Audit Commission, as managing director for strategy and resources and Chief Executive of district audit, before finally becoming Chief Executive of the Standards Board for England until 2008.

#### John Tate



John is a Barrister. In addition to his current role, John was formerly a non-executive director at the NHS Kingston Primary Care Trust. He is currently chair of a healthcare company that supplies

services to the National Health Service and to local authorities. He is also chair of three of the specialty schools of medicine at the NHS London Deanery.

He has been a senior civil servant for more than 20 years. His previous roles include Solicitor to the Bloody Sunday Inquiry, Deputy Parliamentary Ombudsman, Legal Adviser to the Health Service Ombudsman and Assistant Director at the Serious Fraud Office.

#### Non-lay members

#### **Terry Butler CBE**



Terry is an independent advisor in public services and social care. He is a Registered Social Worker and was Hampshire County Council's Director of Social Services from

1988 to 2005. He was previously Deputy Director of Social Services at East Sussex County Council, having worked for several social services departments in London and the Midlands. Nationally, he has acted as a Government advisor and was seconded to the Department of Health to help implement the community care reforms in the early 1990s. He was an advisor on social care to the National Patient Safety Agency until 2007 and a member of the Home Office Advisory Board for Restricted Patients.

He is currently a non-executive director of the South of England Strategic Health Authority of the NHS.

#### **Robin Currie**



Robin is a Senior Research Fellow at Liverpool Hope University and an independent consultant in social care and the voluntary sector. He has worked as a practitioner

and senior manager in social care in local authorities and the voluntary sector for over forty years.

He was previously a GSCC external assessor of social work training programmes and a member of GSCC's conduct committee. He was formerly a University Lecturer in Social Work and was an external examiner on University social work courses for twenty years. He served for fifteen years as an independent advisor to a local authority social services committee and as a non-executive director of Merseyside Training and Enterprise Council. He has been a trustee of national and local charities and is currently on the Board of the Institute of Health and Social Care Research, Bishop Heber College, Tiruchirappalli, India. He is a registered social worker.

#### **Gordon Ratcliffe**



Gordon is currently a senior manager in the NSPCC. He is a registered social worker with 35 years experience of delivering and managing childcare and child protection

services. He was a practitioner and manager in Bradford before moving in 1989 to more senior roles in the NSPCC.

Gordon has a particular interest in service user participation and in 2000 played a lead role in the NPSCC's strategy for involving children and young people in the development and management of services. Gordon has been a Trustee of the nationwide Children's Research Centre and for a number of years he was also an Associate Consultant with Greater Manchester Council of Voluntary Organisations providing management consultancy to voluntary organisations in the North West.

### having been involved in social work education and research for over 20 years.

She is Co-Chair of the Social Work Reform Board Education Group and of the College of Social Work Education Advisory and Implementation Group. She is also a member of a number of national working groups on workforce development and social work education.

She is a registered social worker and, in a professional career spanning 14 years, worked as a practitioner and manager in children's services, mental health and a renal unit and with older people. Her research interests are in inter-professional practice and decision making.

#### Hilary Tompsett - Vice Chair



Hilary is currently Professor of Social Work at Kingston University and St. George's, University of London, and Chair of the Joint University Council Social Work Education Committee,

# **Our objectives and priorities**

In July 2010, Government announced their intention to transfer our regulatory functions to the Health Professions Council in 2012. We responded by re-focussing our priorities into the following three key areas for the remainder of our tenure: deliver and improve until the day that we are not the professional regulator for social work; undertake an effective transfer of our functions providing for a positive legacy from the years that we have been in operation; and support and treat our staff with care and respect. We are reporting against these three key priorities in this report.

#### **Delivering and improving**

This year we have continued to deliver our regulatory responsibilities whilst continuously striving to improve our own systems and contribute to sector developments. This has resulted in increased organisational output, including improved registration processing times, a review of conduct cases and continued engagement with the sector.

#### **Performance reporting**

In order to support the Board and Executive Leadership Team in the run up to the transfer, this year our monthly performance reports have been produced more quickly to provide even more timely data to the organisation's decision makers.

#### Work programmes

Last year we reported on the three improvement programmes we were working on: Delivering Regulatory Excellence; Improving Social Work; and the Transition Programme.

The Delivering Regulatory Excellence Programme, which was established in May 2010, closed last year. Its aims were to provide efficient and effective services as a model for regulatory excellence, with focus on public protection and the principles of good regulation. A number of key deliverables were achieved, including the successful management of the significant number registrants renewing their registration in the first five months of 2011; the development of the investigations process to improve decision making, case handling and communication between teams, such as the implementation of a new risk assessment framework and revised investigations manual; and enhanced registration arrangements for internationally qualified social workers.

The Improving Social Work Programme's work this year has focussed largely on the production of a number of learning and research reports. As part of our continued commitment to the sector, we are working to ensure that the knowledge of regulating the social work profession, which we have built up over the past decade, is not lost and is captured in a series of reports. These cover regulating social workers; regulating social work education; service user involvement; employers' views with regard to the supply of practice placements for students; and our targeted inspections of Approved Mental Health Professional courses in England. These reports are due to be launched in summer 2012. The Improving Social Work Programme is due to close in April 2012 following the delivery of learning reports to our Council Board.

The Transfer Programme is discussed later in this report.

#### Social work education

Professionalism in social work begins with high quality education and training. As part of our statutory functions we are responsible for monitoring standards for the regulation of social work education; approving higher education institutions (HEIs) to offer social work degree courses; and inspecting existing courses to make sure standards are being maintained. If standards fall below the required level we can withdraw our approval of a social work course.

#### **Course inspections and approvals**

This year we inspected three degree courses and all 22 Approved Mental Health Profession (AMHP) courses. Five new degree courses were approved, 24 existing social work degree courses were re-approved and 19 courses received approval extensions.

#### Embedding the risk management framework

Last year we made minor revisions to our risk management framework to bring the regulation of post-qualifying education and training in line with initial social work education. This year we embedded the framework, which had two critical effects. Firstly, we have been able to reduce the regulatory burden upon HEIs by allowing them to self-assess their risk status following completion of their own quality assurance and monitoring processes. This has resulted in being able to make more effective use of our resources by targeting courses in danger of failing to meet the requirements. Secondly, we have been able to identify themes across, between and within courses that warrant further investigation and where necessary regulatory intervention. This year we identified risks to the future of AMHP training courses, resulting in a full inspection programme.

#### **Targeted inspection of AMHP courses**

As well as our duties under the Care Standards Act 2000 to approve, monitor and inspect provision for social work education and training, Section 19 of the Mental Health Act 2007 extends these duties to include the approval of AMHPs training.

In addition to our own approvals we also approve AMHP training on behalf of the Nursing and Midwifery Council (NMC) for nurses, and the Health Professions Council (HPC) for occupational therapists and psychologists. From March 2011 to February 2012, we inspected all 22 courses in England that are approved to train AMHPs.

To ensure we did not increase the regulatory burden upon universities, wherever possible, our visits coincided with when the course was being delivered. During the inspection visit we met with a variety of people including current students, course graduates, academic staff; practice educators; employers; and people who use services.

As a result of the inspection, 19 courses were given a green rating, which means they are performing well. Three institutions were given an amber rating, which means that course improvements are needed. None of the HEIs approved to provide AMHP training were at serious risk of failing to meet our requirements. A detailed report for of each inspection is available on our website, which will be available via the National Archives after 31 July 2012.

Following our closure, responsibility for the regulation of AMHP training will pass to the HPC. In preparation for this the inspection process sought to confirm that each approved university offered AMHP training as a coherent and self contained course that could be separated from our current post-qualifying (PQ) framework for social work education and training.

#### Distribution of practice learning funding

During the last year we distributed £30m to 83 HEIs to pay for social work students' practice placements. This money funded a total of 1,145,181 days in 14,826 placements. Fiftyfour per cent was paid at the statutory rate and 46 per cent at the higher, non-statutory rate. First instalment payments for the 2011-12 academic year were made one month ahead of schedule after improvements were made to our processes. Checks were made to ensure that HEIs spent the previous year's money and reimbursed where necessary. These checks are now targeted according to risk. After our closure the distribution of practice learning funding will transfer to the NHS Business Services Authority, the organisation that administers social work bursaries.

#### Registration

Registration is an important safeguard in making sure that only those who are trained, vetted, and are accountable for their conduct and practice can work with some of the most vulnerable people in our society. Registration for those practising social work in England became a compulsory requirement in 2005 when the title 'social worker' became a legally protected title. A large proportion of social workers on the register joined at this point.

#### New applications to join the register

This year the number of registrants on our register increased. By 31 March 2012 the number totalled 105,778, up 1,309 on last year's figure of 104,469, and comprises 87,246 social workers and 18,532 social work students.

#### **Registration renewal**

A condition of registration is the requirement that social workers must renew their registration every three years. Registration renewal demonstrates that a social worker has continued to develop their social work skills and knowledge, and remain safe and competent to practise. In early 2011 we began the second period of mass renewals, which saw 40,000 social workers renew their registration.

This marked the sixth anniversary of compulsory registration and in May 2011 we reached the end of this mass renewal cycle. From 1 April 2011 to 31 March 2012 we processed 26,102 renewal applications. Due to the improvements in our processes, which included refining the application form and employing additional temporary staff, the average time it took to process renewal applications was three weeks. This was a marked improvement on the first cycle of mass renewals in 2008, when the average processing time was between 12 and 16 weeks.

When social workers renew their registration they must demonstrate that they have completed at least 15 days (or 90 hours) of post-registration training and learning (PRTL). During 2011 we introduced more rigorous checking of social workers' PRTL through sample checking of two and a half per cent of those who renewed. As a result 99 per cent of the social workers in the sample had completed and provided evidence of the required PRTL.

#### **Process improvements**

We are always striving for continuous improvements to our processes. In light of the transfer to the HPC, this year we introduced a combined process of initial assessment and data entry for applications to the student section of the Social Care Register and for renewal applications. This led to a reduced handling time per application and contributed to us exceeding our targets for processing these applications. Data for renewals applications using the combined process shows that 80 per cent of renewals applications were fully processed within three weeks of receipt. This year we introduced revised criteria for assessing applications from social workers who trained and qualified outside the UK. This has meant that all applications are assessed on a case-by-case basis, taking account of an applicant's post qualifying social work experience towards the standard required to practise in the UK. As a result, we now provide more detailed and customised assessment reports on applications that do not meet the standard required, which in turn helps applicants to target the work required to make up for the shortfall. This involves completing a knowledge assessment, previously known as an aptitude test or a period of additional training, whereby an applicant undertakes an interview or written paper and assessment interview with the applicant, conducted by two external panel assessors, to allow the applicant the opportunity to demonstrate sufficient knowledge, skills and experience to enable a positive transfer of their learning for safe and effective practice.

This year we administered 26 knowledge assessments of which 23 passed and three failed. We agreed 16 adaptation periods – where applicants carry out agreed activities to activities to make up for any shortfall identified in the original assessment of their application – and we registered 10 applicants who had adaptation periods agreed in a previous year.

#### Conduct – investigations and hearings

An important element of our work is holding social workers to account when serious breaches of the Code of Practice for Social Care Workers occur. Social workers practise alongside some of the most vulnerable members of our society so it is imperative that they are honest and trustworthy. The majority of the social workers on our register are committed to the highest standards of conduct and practice both in and out of work. However, when we receive a complaint against a social worker we have a responsibility to investigate it. Where the allegations are serious and there is sufficient evidence we take cases to a formal hearing for an independent panel to decide whether the social worker is suitable to be registered and remain on the register.

Following a backlog of conduct cases, which built up in 2009, we have continuously strived to improve our processes to order to ensure the issue was not repeated. We streamlined our processes and reporting to include an analysis of the age profile of all open cases; a breakdown of the oldest cases, especially those that will be approaching two years old; a breakdown of case volume to manage capacity; weekly volume breakdown to show how cases are progressing; and a forecast of future conduct volumes. We have been actively working to ensure all cases are appropriately progressed and managed up to transfer.

#### **Cases this year**

Between 1 April 2011 and 31 March 2012 we

received 2,302 registration declarations and 1,223 conduct referrals (a total of 3,525) about social workers and social work students in England. Of this number, 258 were transferred to the Investigations Team for further scrutiny.

This figure is down on last year when we received 4,723 registration declarations and conduct referrals, and 788 were transferred to the investigations team for further scrutiny. This year we held 62 conduct hearings; this number is down on last year's total of 160, which is due to a backlog of investigation cases in 2009, which were heard in 2010-11.

Of the 62 hearings held over the past 12 months, 15 registrants were admonished for a period of up to five years; 17 were suspended from the register for up to two years; and 24 were removed from the register completely. In two cases the committee did not find the facts of the case and in four cases no misconduct was found against the registrant.

#### Investigations

Our focus this year has been on ensuring that we continue to deal with all cases efficiently and continue to protect the public until the day we transfer our functions to the HPC. In particular, we have focused on delivery, whilst not compromising on quality. For example, this year we undertook a review of all of our active investigation cases. Between May and July 2011 we examined over 600 cases, with the purpose of assuring ourselves that these cases met our threshold.

Following the case review we revised and

improved our Risk Assessment Framework for staff to use when assessing cases and made improvements to our investigations manual. We also established a mechanism for closely managing our cases up to transfer to ensure as many as possible can be heard before closure. This involved greater cross-team working and scrutiny of cases. Where necessary we allocated additional staff resources to cases in order to expedite the completion of the investigation.

We have been working hard to ensure that the transfer happens as smoothly as possible by working together with the HPC to minimise any possible delays to cases as a result of the transfer.

#### Managing conduct work in-house

This year, our in-house legal team has become more involved with the management of conduct cases, providing legal advice on complaints from the outset and in particular advising on evidence and allegations. In addition, we have taken on a wide range of advocacy, now handling most of the Interim Suspension Orders in-house and beginning to take on conduct hearings as well as continuing to reduce the cost of the legal service despite taking on an increased workload. The projected outturn for this year is about half of the actual outturn last year (down to £1,189,840), which itself was half the budget in 2010/2011. There has been no staff increase to manage the increased workload.

## Improving communication with conduct panellists

This year we have continued to improve our communications with those who sit on our registration and conduct panels. To ensure there is effective two-way communications between us and our panellists, this year we held two training events, regular legal advisor briefings, two reference group meetings and updates on the transfer to the HPC, including recruitment campaigns.

## Communicating with social workers and the sector

In order to deliver an effective transfer of our regulatory functions to the HPC, it is important that social workers and others in the sector are aware of the transfer and the consequences that it might have on registration.

Following the launch of our new, interactive website and online community in November 2010, we now have 828 social workers and students signed-up to use our online web forum, which is exclusively for registrants. The forum is used to discuss issues that are pertinent to the profession and sector, offering information and peer support. We receive an average of 55,000 unique visitors to the site per month and users are communicating with us and each other through posting comments on our blogs and articles; with one blog from a newly qualified social worker receiving 61 comments.

A pivotal part of our engagement with registrants is the social media campaign launched at the same time as the new website. We are now actively communicating with social workers and students through social media channels, with 967 Facebook 'likes' and 1,061 Twitter followers to 31 March 2012.

Continuing to keep our registrants informed about the transfer and what it means for them, is a key part of the programme of work to deliver our social worker engagement strategy. Our registrant e-newsletter Social Work Connections, is sent to over 70,000 social workers and students every quarter, with about 25 per cent of these emails opened. Our e-bulletins, which contain news and regulatory information, is sent to 500 people at HEIs and 497 people working for social work employers every three months to keep them abreast of the changes in the sector.

This year, the GSCC wrote to social work employers offering to run workplace visits to explain the transfer and any changes for social workers and social work managers. These events were free for us to hold (apart from the cost of train tickets and staff members' time), as they are being hosted by employers themselves. The events were also free for social workers to attend. Where possible the aim was to run workshops across authorities/ employers to reduce the resources laid out by the GSCC and reach the widest possible audience.

This programme of events ran from September 2011 to March 2012 and has proved very popular. We received requests from across England and ran over 50 sessions across 35



different employers and spoken to over 1,300 social workers.

New guidance document for social workers In November 2011, we issued new guidance to social workers on the issue of professional boundaries. Of the small number of social workers who have been taken through conduct proceedings, a considerable proportion of cases have arisen due to breaches of professional boundaries. Social workers breaching professional boundaries can cause significant harm and distress to service users, so the purpose of this guidance was to increase public protection by helping to ensure that all social workers practice ethically. Furthermore, professional boundaries are a subject that causes confusion and concern for some social workers, and there is an absence of resources for them to draw upon. The guidance received very positive feedback and was featured in national and sector press. The guidance can be found on our website until 31 July 2012. After that date it will be available via The National Archives.

#### **Responding to our customers**

Ensuring our customers receive a professional and timely response to their emails and calls is a high priority for us. Be it social workers, students, service users, HEIs, employers or members of the public, we are committed to providing an excellent service. This year, we received a total of 98,492 phone and email queries. The average time it took to answer a call was 20 seconds and on average it took three minutes and five seconds to answer a call in full. The Customer Services Team answered 86 per cent of queries in-house and 97 per cent of customers who took part in a satisfaction survey said they were satisfied or very satisfied with the response they received.

This year we received 116 complaints, which is a reduction of 19 per cent from last year. As a result of complaints and feedback received, we have made improvements in the way we communicate with our customers, our handling of Data Protection Act and Freedom of Information requests and to our handling of applications and conduct referrals.

#### Information governance

The strategy and associated policies for ensuring compliance throughout the GSCC with the Data Protection Act and with Freedom of Information requests have been reviewed and significantly enhanced. In particular, progress has been made with the introduction and full implementation of a Safe Haven Policy. This policy consolidates and expands upon the existing processes to ensure that information is appropriately protected and can be traced from sending to receipt in any movement process.

#### **Business Continuity Planning**

We recognise the importance of a robust business continuity capability. During the year, in conjunction with a specialist firm, Sungard, we reviewed our arrangements and designed and implemented a new, comprehensive, plan. The Business Continuity Plan was fully implemented in January. Communications aspects have been tested

#### successfully.

#### Financial savings

Operating costs (excluding non cash items) have reduced by £3.1m from 2010-11, to £16.0m. This is mainly due to efficiency gains as the GSCC has continued to maintain its focus on delivering and improving whilst at the same time focusing on the transfer and closure programme.

Approximately £1.4 is attributable to the development of the investgation process including a new risk assessment framework. This raised the threshold for what was considered to be potential misconduct and ensured that the more serious cases progressed to a hearing.

Other areas where efficiencies have been realised include:

- restructuring of the executive leadership team, investigations and conduct teams and communications team;
- improvements in procurement, in particular in relation to recruitment, legal services and sourcing hearing facilities; and
- streamlining of the student and renewals application process to reduce handling time per application.

These financial savings have been achieved in the context of a closing organisation. Only those changes that would realise a benefit in the short period before closure of the GSCC have been implemented with a focus on only committing financial resources to activities that contributed towards public protection.

#### Contributing to sector developments

This year our engagement with the sector continued. Our Chief Executive is a member of the Social Work Reform Board and we continued to contribute to its work by sitting on the Employer Standards Working Group; developing the principles around the Assessed and Supported Year in Employment for newly qualified social workers; developing education and partnerships policy; developing policies around social workers' continuous professional development and subsequently the Professional Capabilities Framework.

Many areas that the Reform Board developed were handed over to The College of Social Work. This year we supported the development of The College and seconded a member of our staff to help with its work.

As part of passing on our learning to the HPC we have contributed to their consultations on the registration of students as well as on the new standards of proficiency for social workers which the HPC has developed.

We have also been involved in discussions with the Law Commission and other regulators of health and social care professionals on the proposed review of professional regulation and we will be submitting a response to this major consultation before we close.

This year we responded to the European Commission's consultation on changes to the professional qualifications Directive and have worked with other professional regulators and the Department of Health to ensure the revised Directive allows regulators to register European qualified social workers efficiently and effectively whilst adequately protecting the public. We have also continued to work with the Independent Safeguarding Authority to build on the good working relationship that we have established with them.

#### Staff care and respect

In looking back over the past year it is important to set this in the context of what happened following the announcement in July 2010 of transfer our functions and closure, when the need for skilled and experienced staff was promptly identified in order to deliver our responsibilities and manage any risk to public protection.

A human resources (HR) strategy was developed, setting out the most effective measures for retaining and motivating staff whilst delivering effective regulation, transferring our functions to the Health Professions Council (HPC), managing the uncertainty the announcement brought, and supporting staff in their next steps after our abolition. This is reflected in staff care being one of our three priorities.

#### Staff retention

Ensuring our staff members are supported as they face an uncertain future, coupled with filling the gaps left by people leaving the organisation in order to fulfil our statutory responsibilities, has been a priority over the past year. We have put a programme of support in place to assist staff with their next steps after closure, ensured two-way communication between our staff and management, and given opportunities for development. We considered options for staff retention and motivation in the context of our Chief Executive remaining accountable for all spending decisions, the current economic climate, and retaining responsibility for delivering our core responsibilities and protecting the public up until the point of transfer and closure.

The measures introduced as part of the HR strategy included a learning and development strategy fit for a closing organisation; a programme of interventions to support staff and managers in dealing with uncertainty; an Employee Assistance Programme; and comprehensive outplacement support. This programme has been put together through staff engagement and involvement to ensure it meets their needs.

We have managed our duty to inform and consult with Unite the Union and staff, which began in January 2012. There is a legal requirement to put in place a minimum 90 day collective consultation for redundancy and, whilst Transfer of Undertakings (Protection of Employment) Regulations (TUPE) does not apply, the Cabinet Office Statement of Practice (COSOP) does, although there is no legal requirement to consult on COSOP. However, given the transfer and redundancies are inextricably linked, we took the view that it was sound practice to enter into a COSOP consultation.

The collective/COSOP consultation ended in April, and staff and Unite engaged in the process and through a range of mechanisms including staff meetings and an interactive question and answer process through our intranet.

The strategic approach put in place in 2010 demonstrates our commitment to our legal obligations and to achieving a balance between retaining and motivating staff for business continuity and supporting staff to leave, ideally at the point of closure, through the offer of outplacement to provide staff facing redundancy with a career/next steps support service.

### Employee Assistance and Outplacement Programmes

In 2011 a comprehensive Employee Assistance Programme (EAP) was established to support staff through the transition. This year the EAP continued to provide a confidential telephone support service that can be accessed 24 hours a day, where advice can be provided on a range of subjects, both work and non-work related. All telephone calls are answered by qualified counsellors who direct the call to a specialist advisor.

As part of the EAP, LifeTrack, an online career coaching service, which includes articles to read and wellness tools, has been available to staff, offering support on preparing for career transition following our closure. This year, 32 staff members have registered to use this service with 389 activities accessed. To ensure that staff continue to have support the EAP contract will continue to run for a short period after the transfer. Over the past 12 months in order to support staff we have developed and rolled out a programme of outplacement provision, led by an employee working group and provided largely by the Appointments Commission. This has been a significant example of staff engagement across the GSCC with a programme owned by staff for staff and has proved to be hugely successful.

Outplacement is typically a career support service for those facing redundancy and it has been established to help staff plan for when they leave the GSCC. It includes a range of activities including career clinics; assistance with finding alternative employment, such as CV writing and interview practice; advice for dealing with uncertainty; retirement planning; and effective financial management. Outplacement provision is provided in the form of one-to-ones, skills exchange, mentoring, peer learning and workshops.

In addition, we have created a Job Shop whereby designated areas in the London and Rugby offices have been supplied with computers to aid job searching. From the launch of the Outplacement Programme on 16 January 2012 to 31 March 2012 over 1,800 requests or queries had been made by staff to typically to attend a workshop or one-to-one session.

Towards the end of the year, outplacement support was extended further and an online outplacement tool, which is maintained by the providers of the EAP, was rolled out to all staff. This online facility gives our staff access to interactive career direction tools, including career planning, CV and letter examples, jobsite links and 'how to' written and audio guides, which can be accessed both in and out of work. This has proved very popular, with staff logging on and sharing their CVs and application forms for colleagues to proof read.

## Learning and development opportunities for staff

Managers at all levels have undergone a development programme of facilitated coaching to enable them to support staff through the final months at the GSCC. In addition, seven staff members enrolled on the NHS's Hubbub Leadership Programmes to further develop their management skills.

Between 1 April 2011 and 31 March 2012, 12 staff were supported on to various secondments (two of which were external to the GSCC) to support the relevant organisations and aid their personal development. Seven staff members were offered 'acting up' opportunities in higher graded roles and 12 were offered opportunities to take on additional duties. Fourteen staff members were promoted or changed role on a substantive basis and 23 per cent of staff benefited from a promotion, secondment, acting up, additional duties or development opportunity within the year.

#### Two-way communication with staff

During times of significant organisational change it is imperative that staff are kept informed and that they have the opportunity to engage in a two-way discussion with management. To this end, over the past 12 months we have held two rounds of staff events. At these events, which all staff were required to attend, a presentation was given by the Chief Executive on the current situation and staff were then encouraged to talk about the changes and ask questions. Satisfaction with the events was high, with the majority of staff rating the sessions as a seven or eight out of 10.

Another way in which we have encouraged dialogue with staff is through the corporate intranet. An online form has been available for staff to ask the Human Resources (HR) Team any questions they have about the closure of the GSCC and the implications that will have for individuals. Up until 31 March 2012, 129 questions have been answered by the HR Team.

Over the last year the London office has relocated on two occasions. Affected staff were provided with financial assistance to cover any additional costs incurred by the office move.

#### Marking the closure of the GSCC

The transfer of the GSCC's functions to the HPC will have a big impact on staff who have worked together for many years. This year, in order to mark our closure, we began planning two staff events. The organisation is being led by social committees in London and Rugby and a number of fundraising activities have taken place to fund these events, including cake bakes and quiz nights. An art exhibition, curated by a former GSCC employee, is in the process of being put together to commemorate the legacy of the first social work regulator. Planning for a stakeholder event, at which our learning reports will be launched, also got under way this year and the exhibition will be an important feature at that event.

#### Ensuring an effective transfer of our functions and providing a positive legacy

One of the ways in which we have continued to deliver our priorities over the past year is with regard to the transfer of our functions to the Health Professions Council. With the closure date fast approaching, our work this year has focussed largely on ensuring an effective transfer, which has included work on data migration and the closure of our systems.

#### Transferring data to other bodies

In addition to our regulatory functions transferring to the Health Professions Council (HPC) in July 2012, we have also being preparing to transfer the post-qualifying (PQ) framework to The College of Social Work; Education Support Grants to the NHS Business Services Authority; and social work education statistics to King's College London.

#### **Transfer and Closure Programmes**

A Transfer and Closure Programme has been developed and is managed through seven integrated projects and has a Programme Office for control purposes. The seven projects are: Transfer of our regulatory responsibility; transfer of our education responsibility; staffing implications; assets and liabilities; internal and external communications; data management and transfer; and governance and organisational closure.

Due to the transfer, information management work this year has focussed on planning and preparing for effective data migration to the HPC and other bodies, and the eventual closure of our systems. This has been achieved while maintaining support to our current operations and continuing to implement incremental improvements to our processes, such as the automation of the production of performance reports.

During the course of the programme, London based staff have also moved offices twice. We have maximised the benefits of such moves as being transitional stepping stones towards closure, thereby minimising the final effort to close down the London site.

The project work performed by our registration and education teams has been a pre-requisite in analysing the impact on both workflow and information. This, together with the joint working with HR and the various external successor organisations, has enabled us to prepare our staff, proactively manage our capacity and operational performance, and prepare our records for future transfer or destruction.

#### Information baseline

Our Information Asset Register is a comprehensive listing of our information. Information that is needed to support the functions that we are to pass to our successor organisations is being documented in Agreements of Requirement with the recipients. The remainder of our information is being or will be destroyed.

#### **Records Retention Policy**

With the prospect of the major data migrations that are to occur, the Records Retention Policy and associated Schedule was reviewed. This resulted in a revision that incorporated amended retention periods and a Scan and Scrap Policy. In consequence all archived paper files have been recovered from off-site storage and reviewed against the Schedule. Most files with continuing relevance have been scanned to form electronic files; the original paper files and other outdated paper files were then confidentially destroyed. This has reduced our paper holdings by 95 per cent. The current phase, now underway, is to undertake a similar review of our electronic files.

#### Data preparation

Using differing processes, depending upon the types of information held, our business units have been analysing and separating information to be transferred from information that will be destroyed. Where possible these processes have been automated using specialist software.

Internal audits have provided assurance that the processes we are following support an effective transfer.

#### Data migration

We host the OSCAR database which held regulatory information about social workers for the Scottish, Welsh and Northern Irish social care councils as well as our own registrants in England. The information in the OSCAR database belonged to the council with whom each social worker was registered. In anticipation of the closure of OSCAR, we have managed a process in which each council's information has been separated, extracted, passed to the owning Council and uploaded onto their separate database systems.

Having reached initial agreement with the Health Professions Council on the data they require to support the regulation of social workers, we have begun testing the transfer of that data, so that public protection and statutory responsibility can be maintained without break though the process of transfer. Preliminary test data was successfully transferred in November and a first test bulk transfer was made in March.

Similar agreements of requirement for the transfer of information have been, or will be, reached with other organisations: social work course qualification records are to transfer to The College of Social Work; social work education support grant information will pass to the NHS Business Services Authority and our corporate management information, including our Information Management records, will be held by the Department of Health.

# **Management Commentary**

#### **Financial position**

For ease of cross referencing to the primary Financial Statements and the Notes to the Accounts presented later in the Annual Accounts section of the report, references have been included where appropriate and are shown in []. The cross references relating to the Financial Statements are:

- [SFP] for Statement of Financial Position as at 31 March 2012;
- [SCF] for Statement of Cash Flows for the year ended 31 March 2012;
- [SCNE] for Statement of Comprehensive Net Expenditure Account for the year ended 31 March 2012.

The cross references used in relation to information shown in the Notes to the Accounts are identified by reference to the Note number, for example [N<sub>3</sub>] for the information on Education Support Grants.

#### Financing and income

#### **Government grants**

General Social Care Council (GSCC) is funded predominantly by its sponsoring department, the Department of Health (DH) with various Grants in Aid. In 2011-12 the GSCC had confirmation of Cash Grants as detailed below:

Table 1 Allocated Grants		2011-12		2010-11
	fooos		£ooos	
Education support grants (ESG)		27,966		27,966
Core grant		7,428		8,253
Specific grants <sup>1</sup>		8,234		N/A
Transfer grant		315		N/A
Capital grants		N/A		1,120

<sup>&</sup>lt;sup>1</sup>There was no formal confirmation in 2010-11. Access to this grant was through a formal process of submitting quarterly financial business cases to the DH

Actual ESG draw down was £29.500m to fund all placement activity.

The core and specific grants support management and administration costs.

Draw down against the core grant was £5.685m (2010-11 £8.253m).

The GSCC drew down a further  $\pm 6.397m$  (2011-12  $\pm 7.797m$ ) of specific grants, including  $\pm 315k$  for data migration transfer activity. All other transfer activity during the year was funded by the core grant.

Since the Government's announcement in July 2010 to transfer GSCC activities to Health Professions Council (HPC) in the main, the GSCC has had no access to capital grants.

Making the total value of grants drawn down £41.582m [SCF] (2010-11 £44.016m).

#### Non-grant Income

In addition to Government grants, the DH allows the GSCC to retain registration fee income from qualified social workers and students, and income from recharges and fees. For 2011-12 the projection from this was  $\pounds 2.949m$ . The actual non-grant income receivable [N6] totalled  $\pounds 3.221m$  (2010-11  $\pounds 3.803m$ ) and was made up of:

Table 2         Fees and Recharges Income	2011-12	2010-11
	£ooos	£ooos
Social Worker registration fees	2,669	2,975
Rentals from operating leases	239	570
Recharges to devolved social care authorities	296	242
Other operating income	17	16

In the last quarter of 2010-11 30,855 registrants were due to renew their 3 year registration with the General Social Care Council. The difference in income between the two financial years in the main reflects 3,505 registrants who chose not to renew their registration and a 38% (359) reduction in new applications from internationally qualified social workers.

#### Expenditure

Table 3 Activity Costs	2011-12 Outturn	2010-11 Outturn
	fooos	fooos
Operating activity	15,250	19,146
Transfer activity	750	-
Capital activity	-	111
Distribution of ESG	29,799	28,148
Total Cash Expenditure	45,799	47,405

Table 3 above shows how the GSCC utilised the DH grants and non grant income on operational activity, transfer activity, capital activity and distribution of ESG to higher education institutions.

GSCC's gross operating cost [SCNE] in 2011-12 was  $\pm$ 57.769m (2010-11  $\pm$ 48.729m) and included the following items not shown in Table 3.

Table 4 Non cash items	Operating activity	Transfer & Closure activity	2011-12 Outturn	2010-11 Outturn
	fooos	£ooos	£ooos	£ooos
Depreciation & amortisation	1,708	1,142	2,850	2,216
Loss on disposal	36	-	36	-
Loss on revaluation of assets	-	-	-	73
Provisions (note 11)	68	1,798	1,866	109
Pensions current and past service costs	(60)		(60)	(1,284)
Curtailments and settlements (note 4)		7,202	7,202	-
Return on Pension Scheme Assets	76		76	321
Total ESG Grant distribution	1,828	10,142	11,970	1,435

Management and staff have focused on both maintaining and improving day to day operations whilst at the same time developing and implementing the transfer and closure plans. In reality a significant proportion of the staff costs reported as operating activity are attributable to transfer and closure activity.

#### **Education Support Grants**

Payments made on education support grants [N<sub>3</sub>] increased to £29.799m in 2011-12 from £28.148m in 2010-11. The actual spend was more than the original forecast of £27.966m because more HEIs underestimated their placement need for academic year 2011-12 than in previous years, resulting in higher payments to higher education institutions. Also, those HEIs that overestimated their placement need did so by a smaller margin than in all previous years. This is a demand led activity that is fully funded by DH grant.

Table 5 Distribution of ESG	2011-12 Outturn	2011-12 Outturn
	£ooos	£ooos
To higher education institutions to support practice learning opportunities for social work degree courses	29,018	27,245
To higher education institutions to support the involvement of people who use services and carers in the design and delivery of the social work degree	605	658
Payments to voluntary organisations supporting members of staff to undertake the social work degree	176	245
Total Operating Expenditure	29,799	28,148

#### Risk and uncertainty

A comprehensive statement on the GSCC's internal control forms part of these Accounts. The governance statement covers the scope of responsibility of the Accounting Officer, the purpose of the system of internal control, the capacity to handle risk, the risk and control framework, a review of the effectiveness of internal control in the year, and any significant internal control problems that have occurred.

#### Managing Risk in Financial Instruments

The GSCC has no borrowings and relies primarily on departmental grants for its cash requirements. Neither does it have material deposits. All material assets and liabilities are denominated in sterling. The GSCC therefore manages a continuing liquidity risk but is not exposed to any interest rate or currency risks.

The GSCC does have trade debtors. As the majority of these debtors are prepayments and social worker registration income, they are considered to have minimal risk to the GSCC.

#### **Critical Accounting Judgements - Pensions**

Essex County Council manage the assumptions applied to the valuations of the local Government Pension Scheme and management have ultimate responsibility for these assumptions. The accounting policy applied by the GSCC is as detailed in note 1.7 to the accounts. Provisions for known deficits are included within current liabilities on the balance sheet. Any significant movement in financial markets may adversely/favourably impact the actuarial valuations of the scheme.

#### Sustainability Review

The GSCC as a Non-Departmental Public Body falls within the scope of the new 'Greening' guidance to Government bodies to produce a sustainability report, covering performance against sustainability targets for greenhouse gas emissions, waste minimisation and management and the use of finite resources and their related expenditure. This is a new requirement to be complied with in the 2011-12 financial accounts and includes the minimum requirements for each of the main reporting areas (including nil returns).

#### Overall strategy for sustainability

The purpose of the GSCC has been to protect the public by requiring high standards of professional education, conduct and practice of all social workers in England. This has remained unchanged during the 2011-12 financial year, while also being committed to ensuring a professional transfer of regulatory responsibilities to the HPC.

Due to the transfer of regulatory responsibilities and subsequent closure of the GSCC sustainability reporting is focussed on reporting where appropriate management information is available and where there are links to the business plan.

The GSCC through implementation of it's business plan has developed various strategies to address environmental concerns, these are dealt with under each mandatory category.

#### **GHC Emissions**

The GSCC is a dual site organisation, with one office located in London and the second in Rugby. Both are situated close to main rail links making easy use of public transport. Both sites are leased and have multi employer occupancy.

The London offices moved during the course of 2011-12, but both London sites were landlord managed and GHC emissions form part of service charges, therefore no detailed information is available.

#### Waste

The Record Retention Policy and Schedule has been reviewed and revised to ensure that records are retained only for as long as required, and that the disposal methods are appropriate and secure.

#### **Use of Resources**

The GSCC has sought to reduce resource consumption where feasible. For example, reduced paper usage has been achieved through

- use of social media such as Twitter, LinkedIn and Facebook to get across important messages
- reduced printing of key documents, such as the annual accounts and the annual plan
- significant sign up to the GSCC's HEI and employer e-bulletins, with continuous high readership of the Social Work Connections registrant e-newsletter, which is sent to c.70,000 registrants.

#### Going Concern

With the passing of the legislation to transfer the responsibility for the regulatory functions to Health Professions Council on the 1 August 2012 and abolish the General social Care Council on the 30 September 2012, it is appropriate for the accounts, for the year ended 31 March 2012, to be prepared on a basis other than a going concern. The impact of this on the accounts is additional costs of £10,142k as detailed on page 51 of the annual report.

#### Auditors

The General Social Care Council is audited by the Comptroller and Auditor General. The Chief Executive, as Accounting Officer, has responsibility to ensure that there is no relevant audit information of which the auditors are unaware and has taken all necessary steps to make herself aware of any relevant audit information and to establish that the auditors are aware of this information. The GSCC contracts Moore Stephens LLP to provide internal audit services.

#### Payment of creditors

The GSCC complies with the Confederation of British Industry's (CBI's) Better Payment Practice Code. Unless the amounts charged are considered to be wrong, the GSCC's policy is to settle invoices within contractual periods, and in the absence of contractual provisions, within 30 days of the date of receipt of goods and services or receipt of a valid invoice, whichever is later.

For invoices received between 1 April 2010 and 31 March 2012, 99.9% (2010-11 - 91%) of invoices by number were paid in accordance with these terms. No claims were received from suppliers for statutory interest under the Late Payment of Commercial Debts (Interest) Act 1998.

#### Employees

The GSCC has adopted principles of openness and participation in its organisation and places a high level of importance on both informing and consulting staff. It does so by providing access to Council papers and management minutes, through oral and written briefings and by staff meetings. Information is only withheld where this can be shown to be justified or where a duty of confidence is owed to a third party, in accordance with the Data Protection Act 1998.

The GSCC has a formal recognition agreement with the Unite trade union, through which staff are informed and consulted about all aspects of their employment.

As at 31 March 2012, an average of 11 working days, (2010-11 9 working days) were lost due to sickness per full time equivalent staff member in the previous 12 months. This represents 4% of working days.

Penny Thompson Chief Executive

25 June 2012

## **Remuneration report**

The Companies Act section 234B and schedule 7A include requirements for the disclosure of information about directors' remuneration. These requirements are interpreted in HM Treasury's Financial Reporting Manual (FReM) (paras 7.2.21 – 29) and are covered in the paragraphs below.

#### Delegation from the Department of Health

The Department of Health (DH) and the General Social Care Council (GSCC) have an agreed management statement and its associated financial memorandum. These documents set out the broad framework within which the GSCC will operate, in particular the rules and guidelines relevant to the exercise of its functions, duties and powers; the conditions under which any public funds are paid to the GSCC; how the GSCC is to be held to account for its performance.

#### **Remuneration Committee**

In accordance with its Standing Orders, the Council has established a Remuneration Committee. The Council has set terms of reference for this committee 'to advise the Chair on matters relating to the performance and review of remuneration of the Chief Executive and to advise the Council on matters relating to the recruitment of any new Chief Executive'.

The Committee shall consist of three members including the Chair of the Council, the Vice-chair of the Council and one other. Membership will be agreed by the Council annually. The Chair of the Council will act as Chair of the Committee.

#### Chief Executive's remuneration

The Chief Executive is not covered by the GSCC pay policy. Following discussions with DH nor is she covered by the Very Senior Managers Framework, rather a discreet and independent framework, specific to the Chief Executive and in line with other Arms Length Bodies. The Chief Executive's remuneration requires agreement from the GSCC Remuneration Committee and the Department of Health. The Chief Executive is an ordinary member of the Local Government Superannuation Scheme, to which GSCC is an admitted body. The Chief Executive has a notice period of 12 weeks and there is no provision made in the accounts for early retirement of the Chief Executive. Details of Chief Executive remuneration during 2011 -12 are contained in the table 6.

#### Staff's remuneration

The management statement and financial memorandum states that 'terms and conditions for staff [including senior managers] are decided by the GSCC. Any increases will be subject to a performance related pay scheme.' The Council has delegated this responsibility to the Chief Executive in the appendix to the Standing Orders where in paragraph 4 (e), the Chief Executive may 'make arrangements necessary relating to the employment of staff, their terms, conditions and pay.'

Standing Financial Instruction 16.7 reaffirms this delegation. In this context therefore decisions about the remuneration of GSCC staff (excluding the Chief Executive) are taken on the authority of the Chief Executive, who may take advice as necessary.

With consideration for this and the contractual nature of GSCC's performance pay structure, the Department of Health agreed the 2011-12 pay award. The 2011-12 pay award had been negotiated between GSCC and the Unite Trade Union, based on progression through pay points as a result of annual performance assessment.

The general contract of employment for GSCC staff is not time limited. The notice periods on appointment for staff are four weeks, eight weeks or 12 weeks depending on their grade. Notice periods for staff increase on the anniversary of their appointment up to a maximum of 12 weeks.

The majority of the GSCC's employees are eligible for membership of the Local Government Pension Scheme (LGPS) via an admission agreement with Essex County Council Pension Fund. The scheme is a multi-employer defined benefit scheme. The GSCC has implemented International Accounting Standard 19, retirement benefits in full. Note 19 to the Annual Accounts provides full details. Information on the remuneration of staff is covered in Note 5 to the Annual Accounts.

#### Senior managers' remuneration

As required by the FReM, GSCC has provided in the two tables below information on the salary and pension rights of named individuals who are the "most senior managers" of the GSCC, and the Council members.

Senior managers at the GSCC who are permanently employed have the standard terms and conditions of employment as for other staff. All permanently employed senior managers have open-ended contracts. All permanently employed senior managers have notice periods of 12 weeks. There is no provision made in the accounts for early retirement of senior managers.

#### Pension entitlements of senior managers

The table below shows the cash equivalent transfer value (CETV) accrued at the beginning and end of the reporting period. Also shown is the increase in CETV effectively funded by the employer. It takes account of the increase in accrued pension due to inflation, contributions paid by the employee (including the value of any benefits transferred from another pension scheme or arrangement). A CETV is the actuarially assessed capitalised value of the pension scheme benefits accrued by a member at a particular point in time.

Table 6						
Permanently em	ployed Senior M	anagers				
Staff name and date of appointment	Remuneration year ended 31/03/12	Real increase/ (decrease) in accrued pension and lump sum over year	Total accrued pension at 31/3/12 and related lump sum	CETV* at 31/3/11	CETV* at 31/3/12	
	£'000	£'000	£'000	£'000	£'000	£'000
Penny Thompson (started 22/03/10)	145-150	40	73	33	73	N/A
Sherry Malik (started 14/04/10)	100-105	21	39	18	39	N/A

The information in the table below has been subject to an external audit.

CETV - cash equivalent transfer values

Table 7	2012	2011
Band of highest paid permanently employed director's total remuneration (£000s) Chief Executive	145-150	145-150
Median total (£s)	31,738	31,738
Ratio	4.7	4.7

Total remuneration includes salary and non-consolidated performance related pay. It does not include employer pension contributions and the cash equivalent transfer value of pensions.

The median total is the middle of the GSCC pay scale excluding the highest paid director.

#### **Interim Senior Managers**

As required by FReM 7.2.21 (l) details of amounts payable to third parties for services of interim senior managers are disclosed in the table below.

Table 8 Third Party	Senior Manager	Dates to/from	Cost £ooos
Ogders Berndtson	Chris Savory*	01/04/11 - 21/07/11	57.6

\* Director of Corporate Resources

#### **Remuneration of GSCC Council Members**

The remuneration for members of the Council is determined by the Secretary of State. The Chair of Council is appointed for a three year term and Council Members for up to four year terms. Both the Chair and Council Members can be re-appointed for an additional term. There is no notice period for the Chair or Council Members. Members of the Council are paid by the GSCC. Members of the Council do not receive a pension. The table below shows details of remuneration of members of Council during 2011-12 and 2010-11.

Table 9 Chair of Council and Council Members	Appointment Start / End date	Remuneration 2011/12	Remuneration 2010/11
		fooo	fooo
Varley, R (chair)	Started 01/11/08	45 - 50	45 - 50
Butler, T	Started 13/10/05	5 - 10	10 – 15
Crawford, J	Started 01/09/09	5 - 10	5 – 10
Currie, R	Started 01/09/09	5 - 10	5 – 10
Plank, D	Started 01/05/10	5 - 10	5 – 10
Prince, D	Started 03/09/07	5 - 10	5 – 10
Ratcliffe, G	Started 01/09/09	5 - 10	5 – 10
Tate, J	Started 01/09/09	5 - 10	5 - 10
Tompsett, H	Started 01/09/08	5 - 10	10 – 15

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Penny Thompson Chief Executive

25 June 2012

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# **General Social Care Council**

# **Accounts 2011-12**

# Statement of the GSCC's and Chief Executive's Responsibilities

Under Section 18 of Schedule 1 to the Care Standards Act 2000, the General Social Care Council is required to prepare a statement of accounts for each financial year in the form and on the basis directed by the Secretary of State for Health, with the consent of the Treasury. The accounts are prepared on an accruals basis and must give a true and fair view of the General Social Care Council's (GSCC) state of affairs at the year end and of its surplus/deficit, changes in taxpayers' equity and cash flows for the financial year.

In preparing the accounts, the GSCC is required to:

- observe the accounts direction issued by the Secretary of State with the consent of the Treasury, including the relevant accounting and disclosure requirements, and apply suitable accounting policies on a consistent basis;
- make judgements and estimates on a reasonable basis;
- state whether applicable accounting standards as set out in the *Government Financial Reporting Manual* have been followed, and disclose and explain any material departures in the accounts; and
- prepare the accounts on a going concern basis.

The Accounting Officer for the Department of Health has appointed the Chief Executive as the Accounting Officer for the GSCC. The Chief Executive's relevant responsibilities as Accounting Officer, including responsibility for the propriety and regularity of the public finances for which they are answerable and for the keeping of proper records, are set out in the non-departmental public bodies' Accounting Officer Memorandum issued by the Treasury and published in *Managing Public Money*.

## **Governance Statement 2011-12**

I was appointed as the Chief Executive (Accounting Officer) on 31 March 2010 and I am fully responsible for the day-to-day management of the General Social Care Council (GSCC) and for having in place effective systems of governance, risk management and internal control. I am accountable to Parliament and to the Principal Accounting Officer of the Department of Health (DH) for the efficient management and overall performance of the GSCC.

The GSCC Management Statement and Financial Memorandum, which was agreed in September 2002 by the Minister of State for Community Care, sets out the broad framework within which the GSCC is expected to operate, including how the GSCC is to be held to account for its performance. The document covers responsibilities and accountability; planning, budgeting and control; and external accountability.

As I reported in the GSCC's 2010-11 Annual Report and Accounts, on 26 July 2010 the Government announced the transfer of regulatory functions from the GSCC to the Health Professions Council (HPC) and other receiving bodies by no earlier than April 2012, subject to the satisfactory progression of the legislation through Parliament and Royal Assent being granted. Since the announcement the DH embarked on a listening exercise with key stakeholders in the health and social care sectors to develop the Health and Social Care Bill and this exercise necessitated a change of transfer date which is now the 31 July 2012.

The transfer announcement required modifications to the ambitious programme of change that had been set out and commenced by refocusing the number of improvement programmes from six to three. These are geared to deliver on our three well established priorities:

- to **deliver and improve**;
- to undertake an **effective transfer** of our functions;
- to support and treat our staff with respect and care.

The GSCC is committed to bringing about a professional transfer to the HPC and, for some functions, other bodies. Significant planning work has identified key activities, timelines and personnel in a comprehensive programme with its own risk management and governance arrangements. This is on track to deliver successfully, well within deadline and budget, in a manner which reflects the importance of social work regulation whilst remaining dedicated to service delivery and public protection.

#### **Governance Framework**

The Management Statement and Financial Memorandum sets out the arrangements for sponsorship by the DH. As Chief Executive I have fortnightly telephone meetings with our main sponsor, and formal accountability meetings, involving members of the Executive Leadership Team (ELT), take place in alternate months.

In addition, I have frequent contact with officials from both the DH and other Departments, particularly the Department for Education, with whom the GSCC works closely to ensure that our operations reflect the Government's priorities and objectives. Officials from the DH and Department for Education have an open invitation to attend the meetings of the GSCC's Council Board (the Board) and are provided with the papers for the Board.

The DH receives the papers of the Audit and Risk Committee of the Board and DH are invited to attend such meetings. An official did attend the March and May 2012 meeting and is expected to attend subsequent meetings up to closure. The Board sets the Committee's work plan through its terms of reference and Board members have access to all papers. The minutes are circulated to the Board following each meeting to detail the business undertaken and the Chair of the Committee presents the views and advice from the Committee on any issues they consider the Board or the Accounting Officer should be taking action on. In accordance with its terms of reference the Chair of the Audit and Risk Committee also provides the Board with an Annual Report timed to support the finalisation of the accounts; the report is drawn from the contents of, discussions on, and conclusions drawn from the reports considered and the work carried out during the year and provides an additional level of assurance to the Board, its Chair and to me as Accounting Officer.

In accordance with the agreed Management Statement, Ministers are involved in the management of risk through the approval process of the GSCC's Annual Business Plan and the three-year Corporate Plan. In terms of their content and structure the Business Plan and Corporate Plan comply with DH guidance and in the last two years have been commended for their clarity and effectiveness. The Corporate and Business Plans include sections on accountability and governance, management of strategic risks and sensitivity analysis together with a copy of the GSCC's strategic risk register. The section on management of risks details the arrangements the GSCC has in place to deliver a risk management and assurance framework that allows early identification of risks and appropriate risk control measures to be put in place.

The Audit and Risk Committee reviews, on behalf of the Board, the establishment and maintenance of an effective system of governance, internal control and risk management. The

Committee reviews the adequacy of all risk and control related disclosure statements, together with any accompanying internal audit reports, prior to endorsement by the full Board. Risk management within the GSCC is taken very seriously and is considered regularly at management meetings where risk registers are seen as an important management tool and a guide to action. Officers and Council Members were gratified and reassured by receiving a 'green' rating (the highest possible) for an internal audit of the risk management framework in November 2011, one in which the internal auditors reported that risk management processes were working well, were well understood, and are part of the culture of managing the GSCC.

The internal audit strategy and annual audit plan are submitted each year to the Head of Internal Audit at the DH.

The Board is collectively responsible for decision making and sets the strategic direction of the organisation. All business is transacted at the Board rather than through Committees, enhancing levels of accountability, scrutiny and risk management. There are two advisory committees (Audit and Risk Committee and Remuneration Committee) to support the Board with their scrutiny of the work of the Executive. Attendance records are maintained for Board meetings which show a 92 per cent attendance rate. Meetings have always been quorate.

The Board receives a regular Transfer and Closure programme report at every meeting, regular quality assurance reports (relating to the work of the conduct function), risk management reports, the Annual Report and Accounts, monthly performance reports that highlight performance exceptions, budget reports and also approves the budget. An extranet facility for Board members has been introduced to allow member's access to all Board and Committee reports/minutes online for more detailed scrutiny and transparency. My Chief Executive's Report prepared for each Board meeting provides an accessible, timely and honest description of key activity and outcomes during the preceding month, and is valued by the Board and also DH as an important source of information and assurance.

The Board keeps its governance arrangements, terms of reference and scheme of delegation up to date with regular consideration. The current unitary structure was adopted in September 2010 with revised Standing Orders and Terms of Reference agreed in November 2010. This was reviewed after six months and the Board and the senior management team felt that the arrangements were working well. The Standing Orders and Terms of Reference were further reviewed and agreed in November 2011. Part of the change in the governance structure included the identification of Lead Members who focus on particular areas of the GSCC. This increases understanding and accountability; it also helps in clarifying the different roles of Board and executive members. The effectiveness of this was reviewed by the Board in July 2011. These appointments and the membership of committees were formally confirmed in September 2011 until the final closure of the GSCC. At the November 2011 Board meeting the scheme of delegation was reviewed again in the light of changes to the senior management team referred to below.

I attend Audit and Risk Committee and Board meetings, and have ultimate responsibility for the reports submitted to them. The Director of Corporate Resources (DCR) was the designated lead for risk management for the GSCC until his departure in July 2011, following which I temporarily absorbed his responsibilities whilst considering how best to reshape management and leadership arrangements to fit the GSCC's requirements in its closing year. On 26 September 2011 the Board endorsed my Reshaping GSCC's Management and Leadership proposal and revised roles and responsibilities have been in place since 3 October 2011. The revised arrangements have ensured resilient arrangements are in place to minimise the risks associated with a closing organisation, to make the most of its senior management expertise, and to help deliver a successful transfer of regulatory responsibility. The role of the Senior Information Risk Owner (SIRO) has been taken by the Head of Governance and Legal Services, and is separated from the lead responsibility for risk management, held by the Head of IT and Performance, which provides additional resilience and strength. The new structure has already been tested with the departure of a senior colleague early in 2012, and seen the reallocation of his duties within ELT with no loss of grip or focus.

The Board has undertaken an assessment of its effectiveness using a survey with independent evaluation of the results. The conclusions of that evaluation were highly positive with most commenting on the effectiveness of relationships at Board and Executive level, the quality of leadership and the positive response of the organisation to the news of the transfer and managing this process. The Board also maintains a consistent focus on its governance arrangements and is content that it has applied the principles in the Corporate Governance Good Practice Code. Board members are appraised annually by the Chair and the outcomes reported to the Appointments Commission.

#### The Risk Management and Assurance Framework

The GSCC's Risk Management Strategy sets out the key features of the risk management and assurance framework and provides guidance for staff on their role in the process. The GSCC has a two-tier risk management structure comprising a strategic risk register, which identifies risks to the organisation as a whole, and a corporate risk register informed by the active risk management of our programmes and team risk registers, which identifies risks to delivering key aims and objectives set out in the Business Plan.

The GSCC's risk management and assurance framework aligns risk closely to business planning and provides for a tighter focus on the most critical strategic risks to the effective delivery of the Council's public protection objectives, and a strong and clear line of accountability through the ELT for the management of these risks. To strengthen the link between risk management and business planning the post of Internal Controls Advisor is within the Performance and Planning team and is therefore closely involved in the business planning and improvement programmes, including the transfer. The programmes and projects undertaken by the GSCC include both an assessment of initial risk and continuous risk management.

The key principles underpinning the framework are that risk management should be proportionate to the needs, size and complexity of the GSCC and to the public impact of our work; and that risk management and assurance should together provide a coherent framework for management and accountability.

The Audit and Risk Committee systematically review the strategic risk register at each meeting and as part of the discussion identify a risk area to be the subject of an in depth review at the following meeting should it be deemed necessary. The subject of the risk review is confirmed with Committee members nearer the time of the meeting by the Audit and Risk Committee Chair. During the year an in-depth risk review was carried out for the Registration, Conduct Investigations and Committee Services operational areas with respective Heads of Service in attendance at the meeting. The Board receives three reports during the year on the management of the strategic risks, including the consideration of one of these reports in a workshop forum.

Both the strategic and the corporate risk registers are available to staff on GSCC's intranet. The registers identify risk owners and control actions along with progress and next steps. Version control records revisions and updates to the register, allowing risk owners to identify and respond to developments easily and in a timely fashion.

In addition, the Executive team are required to provide me with an assurance statement twice a year that assesses the status of risk management in his / her management group and details any exceptions that have occurred over the period. Following the departure of the DCR a gap in reporting was identified from the signed April 2011 statement to his departure in July 2011. As an interim measure, until the management structure was agreed, Heads of Service from the then Corporate Resources directorate provided me with individual statements of assurance for their area of responsibility.

We have embedded a culture where risk is not just a process but is integral to everything we do. Risks are identified in a variety of ways, including by general and continuous review of

operations, evaluation of new opportunities and developments and by assessment of complaints and incidents. All the reports to ELT and to the Board and its committees include a section, within the standard report template, on risk implications and performance reports include risks to the achievement of targets.

Other regular reports, such as performance indicators, summaries of customer complaints, and budget monitoring are produced for ELT meetings, Board meetings, and for discussion at accountability meetings with our sponsor department. At each meeting the Board receives integrated performance reporting and budget information. As noted above, I also report to members on the critical matters facing the GSCC in my detailed Chief Executive's Report; the report highlights successes and issues for Board discussion and enables the Board to scrutinise more effectively the work of the organisation.

During 2011-12 the GSCC's business continuity arrangements were independently reviewed by consultants specialising in disaster recovery solutions and a number of proportionate recommendations were accepted and actioned. A new Business Continuity Plan (BCP) Strategy was developed and launched, outlining the business and ICT plans for each site and enabling the GSCC to contingency plan for continuing to function in the face of adversity, minimising the impact on the public and staff. The telephone information cascade system has been tested twice, once with managers and more recently with every member of staff, and our two offices have each experienced actual incidents which have led to safe evacuations, demonstrating the effectiveness of those plans.

#### Information Assurance

Progress against the DH guidelines to its Arm's Length Bodies (ALBs) on the standards required for information security were reported to the Audit and Risk Committee in June and October 2011 and January and March 2012. The DH ALBs are set objectives against a variety of information assurance measures and the GSCC is making good progress towards its agreed targets.

We have continued to develop and implement corporate data protection policies and mandatory training to strengthen, improve and support effective information assurance, which is audited through the Department of Health Security Policy Framework. Detailed information is set out below and demonstrates how seriously we have taken the potential issues arising out of a number of personal data incidents in early 2011.

#### Personal data related incidents

Over the last twelve months, we have continued to implement a programme of mandatory annual data protection training for all staff. As at 20 February 2012, 99 per cent of staff have attended data protection training courses and 92 per cent have attended and passed the National School of Government Protecting Information Level 1 Training. In addition to data protection training a "safe haven" approach has been adopted that has increased awareness among staff of the importance of safe data handling. The increased awareness has resulted in a significant increase in the number of data protection incidents reported during the year. This increase was expected, as trained staff are better able to identify items of concern, resulting in strengthened procedures.

Over the last 12 months, 279 potential or actual data protection incidents were reported during the year; 257 of these were categorized as near miss or no breach and 22 were categorized as minor data protection incidents where additional training, changes to procedures and shared learning have reduced the likelihood of these occurring again and were reported to the Audit and Risk Committee. Internal Audit have provided further assurance on our strategy. The Board also receives information on security issues as part of the regular performance reports. There were no medium or significant data protection incidents. We were not required to report any data protection incidents to the Information Commissioner's Office.

Whilst all data protection incidents are regrettable the number of minor data protection incidents is small in relation to the number of transactions carried out by the GSCC throughout the year. In 2011-12 we assessed some 3,525 referrals, heard 62 conduct cases and processed approximately 26,000 registration renewals, applications and restorations.

#### Accounting Officer's Assurance

Throughout the year I gain assurance regarding the performance of the GSCC through a varied number of sources:

**Internal Audit:** The Head of Internal Audit has provided me with an opinion of reasonable assurance (highest level of assurance from internal audit) on the effectiveness of the GSCC's risk management, control and governance processes reviewed as part of the 2011-12 internal audit plan, the scope and results of which have been agreed with management.

The DH assess the effectiveness of the GSCC's internal audit arrangements by scrutiny of the audit plans and reports prepared by the internal audit contractor on future and past activity. Once the plans have been approved by myself they are forwarded to the Head of Internal Audit at DH.

The annual audit work programme is risk based; the 2011-12 audit plan was finalised by the then Executive Management Team and considered and endorsed by the Audit and Risk Committee at its meeting on 15 March 2011 and I approved the plan on 29 March 2011. The audit plan has been kept under close scrutiny during the year to ensure that the GSCC's changing risk profile is adequately reflected and that key risk areas are being focused upon. To address the needs of the GSCC in its closing year an audit assurance plan was developed for the seven month period from January 2012 to transfer, in developing the plan the existing audits scheduled were reviewed and additional areas incorporated to ensure the plan remains focused on key risk areas. Any amendments to the plan are presented to Audit and Risk Committee meetings for endorsement.

Final internal audit reports are considered at meetings of ELT to allow collective review to ensure corporate grip, support and where appropriate challenge of findings. All audit recommendations are logged and progress against implementation is monitored and reported to each Audit and Risk Committee meeting and also to the Board and ELT in performance reporting. Summarised audit reports are presented by our internal auditors to each Audit and Risk Committee meeting and full reports are available on request. The Internal Audit process is seen as a useful tool in approaching risk and viewed positively in its deployment. Reflecting on the number of outstanding recommendations to be implemented when I was appointed Chief Executive in early 2010, these have reduced from 46, a number of which were overdue, to the current 6 from completed 2012 audits, which demonstrates how effective the approach to systematic management of audit recommendations has been.

Twelve audits were conducted in the 2011-12 internal audit plan spanning the areas of governance and risk, business systems, financial systems and operating systems. Internal audit provide an assurance level within each audit report. Prior to 2011-12 one of three levels was awarded (either reasonable, limited or no assurance), in order to provide a greater level of distinction between the assurance levels, during 2011-12 a revised RAG assurance system was adopted providing one of five levels of assurance (green, amber-green, amber, amber-red or red). From the audits conducted three were a memorandum to management and did not include an assurance rating, four received 'green', five 'amber-green' and none received 'amber', 'amber-red' or 'red'.

**Working with the Board:** I meet on a weekly basis with the Chair of the Board and keep in close contact with her on any significant issues and developments, ensuring she is both up to speed and able to provide appropriate challenge and support. I encourage and expect members of ELT to keep Lead Members similarly briefed and to seek feedback from them arising from their contact with the GSCC or indeed any feedback they may receive from other sources. There is a very good understanding about the distinct roles of the Executive and Council Members, and also a respect that Members may well provide personal as well as external feedback or information that should

be shared with the Executive.

**Executive Leadership Team:** As mentioned earlier in the report, in September 2011 I undertook an exercise to reshape management and leadership arrangements to fit the GSCC's requirements in its closing year; this included restructuring first-tier posts to produce one Executive Director post (Deputy Chief Executive) and a number of substantive Heads of Service to support me. The revised leadership arrangements were in operation from 3 October 2011 and in line with the new arrangements the former Executive Management Team and the Leadership Team were replaced by ELT. The nature of the team membership promotes and encourages cross-organisational working and provides me with an additional level of assurance.

The Deputy Chief Executive and Heads of Service have responsibility for the development and maintenance of a system of internal control in their areas of work. They provide me with assurance through the bi-annual assurance statements and Heads of Service in the Resources group report directly to me, with those Heads in the Operations group reporting to the Deputy Chief Executive. The assurance framework itself provides me with evidence that the effectiveness of controls that manage the risks to the organisation achieving its principal objectives have been reviewed.

I chair the ELT meetings, which convene on alternate weeks, alternating with the Transfer and Closure Programme Board which I also chair. ELT consider all strategic and policy issues affecting the GSCC's delivery of its aims and objectives and has collective responsibility for the financial, performance and risk management of the organisation. ELT are presented with monthly performance reports that detail key aspects of performance and track progress against the outcomes we are intent upon achieving. With regard to risk management, ELT considers the risk implications of all proposals that are brought before it for consideration and decision. We have a regular programme of development sessions for ELT members alongside a co-coaching leadership programme. All of this is designed to attend to individual wellbeing as much as to the effectiveness of team working and a healthy organisation culture in order to deliver on our challenging programme of work and in the face of being a closing organisation.

The Board's Risk Management Policy includes the provision of an Annual Risk Statement. The statement is presented to the Annual Risk Meeting of ELT and the Annual Risk Meeting for 2011-12 took place on 14 February 2012.

Agendas and minutes of all ELT meetings, including the Annual Risk Meeting, are published on the GSCC's Intranet and are available to all staff.

In leading the organisation and ELT, we actively test ourselves against how effectively we are

behaving according to the specific values we adopted in 2010: fairness, openness, integrity, quality, efficiency and respect. This challenge, when combined with feedback from staff meetings and appraisals, and the outcomes we are achieving, suggests that the values are providing a valuable standard for our management behaviours.

**Audit and Risk Committee:** The Audit and Risk Committee meets at least four times per year. For 2011-12, the meetings were held on 14 June 2011, 18 October 2011, 17 January 2012 and 12 March 2012. The National Audit Office (NAO) and the internal audit provider may request that the Audit and Risk Committee meets additionally, if they consider that to be necessary. The internal audit providers (Moore Stephens LLP) and the external auditors (NAO together with their outsourced provider Deloitte) meet with the members of the Audit and Risk Committee separately (without GSCC officers present) immediately after each June Committee meeting.

Work plans for the year were constructed, and complied with, to ensure that all the responsibilities in the terms of reference on which the Committee was to provide advice were covered during the year.

The Audit and Risk Committee considered the Annual Report and Accounts 2010-11 at its meeting on 14 June 2011.

I have an open and respectful relationship with the Chair of the Audit and Risk Committee with whom I confer on all relevant issues and who I keep informed of developments.

**Transfer and Closure Programme:** The Transfer and Closure Board meet on a fortnightly basis (alternating with ELT) and provide me with assurance in relation to the transfer of functions on 31 July and the closure of the organisation. The Transfer and Closure Board is supported by seven work streams and has recently been strengthened by the creation of a Transfer and Closure Programme Steering Group which meets weekly. This will ensure that operational dependencies across the work streams are identified and resolved. The Transfer and Closure programme has its own risk register and highlight reports which feed into the Corporate Risk Register. This will also be supplemented by a risk profile for the closure team which will be in place for a short period after the transfer of functions. The Programme has adapted and responded its planning to external events as well as being strengthened with the introduction of a Programme Management Office, to support the final period leading to closure.

**Personal Assurance:** In addition to the formal arrangements detailed, during the year I have gained personal assurance through a "back to the floor" programme of visits. These visits provide opportunities for informal, direct communications with staff, and enable me to understand the

operational delivery across every part of the office, fostering a culture of openness which is one of our core values. The comprehensive programme of continuing sessions enable me to see and occasionally participate in the work of every area, such as attending an inspection at a higher education institution delivering the approved mental health professional (AMHP) programme. I am about to embark on a final round of visits within the organisation in May and June.

During the year I have also maintained the established programme of internal communications including the Chief Executive's weekly blog, monthly team briefings and regular all-staff meetings. Staff are able to add comments to or raise questions directly about my blog, and these always receive a published response. Staff events have been held throughout the year to develop the core values that underpin the work of the GSCC and to provide staff with additional support regarding the uncertainty faced by the transfer. These provide me with another source of assurance. The six-monthly meetings are mandatory and their nature is to engage directly with staff. Anonymised evaluations from staff have provided validation of the value of these meetings. I was pleased to learn through the January/ February 2012 round of meetings that staff were particularly positive with the quality of our communications around the transfer; the effectiveness of the Outplacement Programme, and the robust, and properly demanding operational plan that we are engaged in delivering. Staff meetings have shaped and informed our behaviour with integrity and openness particularly supporting the approach we are taking to risk management. Staff meetings have also provided the opportunity to honestly discuss the challenges and emotions resulting from working in a closing organisation. It is important to encourage staff to be open and for us to recognise how the circumstances in which we are all working could impact on our delivery and controls environment if we were not actively attending to the impact of the closure.

A third area is the significant work being undertaken with staff in relation to the collective and Cabinet Office Statement of Practice (COSOP) consultation, and the related outplacement. I gain assurance from the knowledge that we have organised outplacement through a very broadbased commissioning and reviewing Working Group, involving volunteer staff across the whole organisation. Staff are very actively engaging with the consultation and outplacement activities, with well over 1,000 enquiries on these being made to the HR team by early March 2012.

Finally, I have been engaging directly with staff on ideas, plans and fundraising for the events to mark the ending of the GSCC. Four strategy meetings have taken place with one more planned, involving individual staff which include representatives of the Social Committees in Rugby and, newly established, in London. Our collective fundraising efforts will mean that there will not be a need for any member of staff to pay for tickets for the events. There will also be an art exhibition commemorating the organisation and its people curated by our volunteer artist in-residence. This

is a differently-composed group of colleagues with whom I am now working, providing a further way of learning about the views and experiences of staff whilst working collaboratively on a joint enterprise.

The kitchens and water coolers also give good opportunities to hear staff comments, alongside my open door policy and regularly-promoted culture of openness. I am also committed to pursuing action, where required, in response to the airing of concerns and aspirations; a good example of this was the provision of internet kiosks for staff when bandwidth limitations led to an essential restriction of access to the internet from individual staff workstations.

## Significant Risks and Issues

The Government's announcement in July 2010 regarding the transfer of GSCC functions to the HPC and other receiving bodies has understandably presented a number of significant risks and issues to manage related to the delivery of a successful transfer of our regulatory responsibilities whilst maintaining operational delivery and public protection.

The organisation has become increasingly adept at identifying risks and we have continued to build on this sound foundation during 2011-12 with a particular focus on managing the risks and issues arising. The Audit and Risk Committee provide real value in ensuring that mitigating actions are robust and effective.

The 2011-12 Business Plan set out a vision for how the GSCC would manage a professional and successful transfer of functions in a manner which reflects the importance of social work regulation.

Prior to transferring our regulatory responsibilities, there remains important public protection work we have to do whilst we are the regulator. To this end, we remain committed to delivering and optimising our core business activity and thereby doing all that we can to ensure the protection of people who use social work services.

The purpose of the GSCC is to protect the public by requiring high standards of professional education, conduct and practice of all social workers in England. This remains unchanged and will continue to guide our work. Our priorities, set out earlier, support our ambition which remains:

To **protect the public** through the regulation of social workers and their professional education and training; and through the **delivery of excellent services** and a **professional transition to HPC**, provide a lasting legacy which enhances the social work profession and the reputation of the GSCC. The achievement of our priorities is now supported by two improvement programmes; the Transfer and Closure programme that I lead, and the Improving Social Work (ISW) programme led by the Deputy Chief Executive. These programmes continue to be the focus of our activity.

During 2011-12 we have undertaken the following steps to mitigate risks that will be maintained, developed and adapted as required in the final months leading to closure:

## Risk to the transfer of regulatory functions:

- We will continue to develop a constructive working relationship with HPC to ensure an orderly transfer of functions and to ensure key risks are managed and understood at the point of transfer. We are working closely with HPC on mitigating delays in regulatory casework which is an inevitable consequence of the transfer. The approach has been agreed by the Social Work Regulation Oversight Group (SWROG) and DH and is specifically designed to mitigate the inherent risks in the transfer. A clear statement on this has been given to SWROG by both organisations. Contact has been established between the Chair of the GSCC's Audit and Risk Committee and the Chair of the HPC's Audit Committee to complement the process and, at our request, a joint meeting of the two Boards was held in early July 2011. The Chair and Chief Executive attend SWROG, with other parties to the transfer (DH, Department for Education, HPC, Social Work Reform Board); it is independently chaired by Harry Cayton, Chief Executive Officer of Council for Healthcare Regulatory Excellence.
- Our relationship with HPC has been strengthened as it becomes rooted within operational work. Our major areas for constructive teamwork centre on the transfer of data, the HR issues relevant to the staff in scope to transfer and the risks surrounding organisational change, and as noted above, the joint management of cases. Colleagues from both organisations have forged relationships and developed ways of working which have been successful, and are already productive.
- We have committed to continuing joint communications with HPC and, where appropriate, consistent and coordinated messages to staff in both organisations via a joint communications plan. In addition to staff, the plan details messages to external stakeholders: social workers, employers and higher education institutions to ensure people are kept informed of developments in the Transfer and Closure programme. We are also developing a detailed communications plan with specific reference to the operational functions so that all stakeholders at a collective and individual level are aware of detailed changes.
- I continue to lead fortnightly Transfer and Closure Board meetings. All issues that have

anything to do with the transfer from regulatory operations, education, policy and communications, as well as resources, will be overseen through that Board. In this way, we are ensuring joined-up planning and good internal and external communications throughout our final year.

- Risk logs are maintained for each of the programme boards and ensure that risks are closely reviewed and mitigating actions are owned, proportionate to the risk, and managed. The visibility of programme risks to the Board has been increased with monthly Transfer and Closure programme updates being provided that include reporting on risk. The strategic, operational and programme risk registers have been drawn upon to develop the highly focused and responsive internal audit strategy for 2011 until transfer in July 2012. The Internal Audit plan is designed to focus on three key areas core business activities as they continue up to closure; transfer programme activities, and specific control matters that affect bodies that are closing and will remain responsive to changes in assurance needs in this rapidly developing landscape.
- One of the inherent consequences of the decision to close is to lose experience and history, and we are working to capture as much as we can. The GSCC is supporting and advising the DH and other stakeholders during the transfer process and ensure that our experience in regulating social workers is put to good use. This is not limited to the HPC, nor to the learning reports, but extends to functions transferring to other agencies. For example, we have begun work to transfer the administration of the education support grant to the NHS Business Services Authority, and to develop criteria for the Department to enable approval by the Secretary of State for providers of training for Best Interest Assessors. We have arranged a meeting of the Board and ELT with the Law Commission who are consulting on the law relating to health and social care professional regulation. This will supplement a written submission and will seek to capture our experience and learning to inform the future.

## **Risk to staff capacity:**

- I gain particular assurance from communications as a way of mitigating risk, and am committed to sustaining the communication programme and my visibility and openness to staff. I fully recognise the critical importance of retaining and motivating staff through a challenging period. In addition, the feedback I receive on my blogs and "back to the floor" visits informs my assurance.
- A learning and development plan appropriate for a closing organisation has been introduced alongside an Employee Assistance Programme to offer support and guidance to staff. In addition the comprehensive outplacement service was launched in January 2012 and has had a good take-up rate from all grades of staff throughout the GSCC.

#### Risk of loss of knowledge to the social work sector:

• As the date for transferring functions draws closer the ISW programme has moved its focus to the production of four learning reports and additional legacy reports to share the knowledge, learning and experiences of the GSCC. These will capture the GSCC's learning from over 10 years of professional regulation and it is envisaged that these reports, primarily focused on our investigation, education and registration activity, will be of significant interest, not only to HPC but to other professional regulators, and will help raise standards in social work. We are taking care to ensure these are well researched yet readable, to maximise their positive benefit. We are drawing on our experience in launching in November 2011 the Professional Boundaries guidance. In many ways, this very well received paper stands as the first of our suite of learning reports.

It is of great importance to the GSCC that the transfer of functions should happen smoothly and we are determined to maintain public protection throughout the period of uncertainty as the transfer takes place. We will work to continue the close management of risk and ensure that the regulation of the social work workforce is in a strong position when the transfer to HPC is complete. Our overwhelming priority remains as the continued protection of the public together with the best possible positioning of our staff as we collectively face the future.

Penny Thompson Chief Executive

25 June 2012

# The Certificate and Report of the Comptroller and Auditor General to the Houses of Parliament

I certify that I have audited the financial statements of the General Social Care Council for the year ended 31 March 2012 under the Care Standards Act 2000. The financial statements comprise the Statement of Comprehensive Net Expenditure, Financial Position, Cash Flows, Changes in Taxpayers' Equity and the related notes. These financial statements have been prepared under the accounting policies set out within them. I have also audited the information in the Remuneration Report that is described in that report as having been audited.

## Respective responsibilities of the Council, Chief Executive and auditor

As explained more fully in the Statement of the General Social Care Council's and Chief Executive's responsibilities, the Council and the Chief Executive as Accounting Officer are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view. My responsibility is to audit, certify and report on the financial statements in accordance with the Care Standards Act 2000. I conducted my audit in accordance with International Standards on Auditing (UK and Ireland). Those standards require me and my staff to comply with the Auditing Practices Board's Ethical Standards for Auditors.

## Scope of the Audit of the Financial Statements

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of: whether the accounting policies are appropriate to the General Social Care Council's circumstances and have been consistently applied and adequately disclosed; the reasonableness of significant accounting estimates made by the General Social Care Council; and the overall presentation of the financial statements. In addition I read all the financial and non-financial information in the Annual Report to identify material inconsistencies with the audited financial statements. If I become aware of any apparent material misstatements or inconsistencies I consider the implications for my certificate.

I am required to obtain evidence sufficient to give reasonable assurance that the expenditure and income reported in the financial statements have been applied to the purposes intended by Parliament and the financial transactions recorded in the financial statements conform to the authorities which govern them.

#### **Opinion on Regularity**

In my opinion, in all material respects the expenditure and income recorded in the financial statements have been applied to the purposes intended by Parliament and the financial transactions recorded in the financial statements conform to the authorities which govern them.

#### **Opinion on financial statements**

In my opinion:

- the financial statements give a true and fair view of the state of the General Social Care Council's affairs as at 31 March 2012 and of its net expenditure for the year then ended; and
- the financial statements have been properly prepared in accordance with the Care Standards Act 2000 and Secretary of State directions issued thereunder.

#### Emphasis of matter – Going concern

Without qualifying my opinion, I draw attention to Note 1.1 of the financial statements. Following the enactment of the Health and Social Care Act 2012 on the 27 March 2012, the General Social Care Council will formally cease all activities on the 31st July 2012 and close on the 30th September 2012. As a consequence the accounts have been prepared on the basis other than a going concern.

## **Opinion on other matters**

In my opinion:

- the part of the Remuneration Report to be audited has been properly prepared in accordance with Secretary of State directions issued under the Care Standards Act 2000; and
- the information given in the Management Commentary for the financial year for which the financial statements are prepared is consistent with the financial statements.

#### Matters on which I report by exception

I have nothing to report in respect of the following matters which I report to you if, in my opinion:

 adequate accounting records have not been kept or returns adequate for my audit have not been received from branches not visited by my staff; or

- the financial statements and the part of the Remuneration Report to be audited are not in agreement with the accounting records or returns; or
- I have not received all of the information and explanations I require for my audit; or
- the Governance Statement does not reflect compliance with HM Treasury's guidance

## Report

I have no observations to make on these financial statements.

Amyas C E Morse

Date: 2 July 2012

Comptroller and Auditor General

National Audit Office 157-197 Buckingham Palace Road Victoria London SW1W 9SP

# Financial Statements 2011-12

## Statement of Comprehensive Net Expenditure for the year ended 31 March 2012

		20	12	20	011
	Note	£'000	£'000	£'000	£'000
Comprehensive Expenditure					
Programme					
Education support grants	3		29,799		28,148
Operating					
Staff costs (excluding past service cost and provision)		8,460		9,449	
Past service cost		(60)		(1,284)	
Settlements and curtailments		7,202		-	
Redundancy provision		1,707		-	
Total Staff costs	4	17,309		8,165	
Non pay costs	5	7,735		9,806	
Depreciation and amortisation	5	2,850		2,216	
Loss on revaluation of assets		-		73	
Net finance charge on pension scheme	5	76		321	
	-		27,970		20,581
Gross costs		-	57,769		48,729
Income					
Income from activities	6	(2,669)		(2,975)	
Other income	6	(552)		(828)	
			(3,221)		(3,803)
Net Comprehensive Expenditure			54,548		44,926
Other Comprehensive Expenditure					
Net loss on revaluation of Property Plant and Equipment			-		12
Net loss on revaluation of Intangibles			-		33
Actuarial loss/(gain) on pension scheme			2,177		(1,104)
Total comprehensive Expenditure for the year ended		-	-6 -0-		12 94-
31 March 2012		-	56,725		43,867

The GSCC's regulatory responsibilities will cease on 31 July 2012; the GSCC will formally be abolished on 30 September 2012.

The notes on pages 86 to 105 form part of these accounts.

## Statement of Financial Position- as at 31 March 2012

		20	012	20	11
	Note	£'000	£'000	£'000	£'000
Non-Current Assets					
Property, plant & equipment	7	64		422	
Intangible assets	7	843		3,371	
Total non-current assets			907		3,793
Current Assets					
Trade & other receivables	8	63		836	
Other current assets	8	172		697	
Cash at bank and in hand	9	1,432		2,043	
Total current assets			1,667		3,576
Total Assets			2,574		7,369
Current Liabilities					
Trade & Other payables	10	(133)		(7)	
Taxation creditors and accruals	10	(766)		(1,505)	
Provisions	11	(2,358)		-	
Pensions liability	18	(14,183)		-	
Total current liabilities			(17,440)		(1,512)
Non-current assets plus current assets less current					
liabilities			(14,866)		5,857
Non-Current Liabilities					
Provisions	11	-		(492)	
Pensions liability	18	-		(4,788)	
					(5,280)
Net (Liabilities/Assets)			(14,866)		577
Funds					
Revaluation reserve			-		-
General reserves			(14,866)		577
Total funds	17		(14,866)		577
	-/		(		511

The notes on pages 86 to 105 form part of these accounts.

The financial statements on pages 82 to 85 were approved and signed by the accounting officer on 25 June 2012.

2

Penny Thompson Chief Executive

## Statement of Cashflows for the year ended 31 March 2012

		203	12	20	11
	Note	f,o,	00	f,o	00
Net Cash outflow from operating activities	16		(42,193)		(43,534)
Cash flows from investing activities					
Purchase of property, plant and equipment	7	-		(22)	
Purchase of Intangibles assets	7	-		(89)	
Net cash outflow from investing activities	-		-		(111)
Cash flows from financing activities					
- Education support grants		29,500		27,966	
- Operating		12,082		16,050	
- Capital		-		-	
Net financing (decrease) / increase	-		41,582		44,016
Net in cash and cash equivalents in the					
period			(611)		371
Cash and cash equivalents at the beginning of the period	9		2,043		1,672
Cash and cash equivalents at the end of the period	9		1,432		2,043

The notes on pages 86 to 105 form part of these accounts.

## Statement of changes in Taxpayers Equity for the year ended 31 March 2012

	Note	Revaluation Reserve	l & E Reserve	Total Reserves
Balance as at 31 March 2010		45	83	128
Changes In taxpayers Equity 2009-10				
Net (loss) on revaluation of property, plant & equipment	7	(12)	-	(12)
Net (loss) on revaluation of intangible assets	7	(33)	-	(33)
Actuarial gain	18	-	1,104	1,104
Retained (Deficit)	2	-	(610)	(610)
Total recognised income and expense for 2010-11		(45)	494	449
Balance at 31 March 2011		0	577	577
Changes In taxpayers Equity 2011-12				
Actuarial loss	18	-	(2,177)	(2177)
Adjustments to general reserves	15	-	-	-
Retained (Deficit)	2	-	(13,266)	(13,266)
Total recognised income and expense for 2011-12		-	(15,443)	(15,443)
Balance at 31 March 2012			(14,866)	(14,866)

The notes on pages 86 to 105 form part of these accounts.

# Notes to financial statements for the year ending 31 March 2012

## NOTE 1 – Statement of accounting policies

These financial statements have been prepared in accordance with the 2011-12 Government Reporting Manual (FReM) issued by HM Treasury and any subsequent updates as advised by HM Treasury. The accounting policies contained in the FReM apply International Financial Reporting Standards (IFRS) as adapted or interpreted for the public sector context. Where the FReM permits a choice of accounting policy, the accounting policy which is judged to be most appropriate to the particular circumstances of the General Social Care Council (GSCC) for the purposes of giving a true and fair view has been selected. The particular policies adopted by the GSCC for the reportable activity are described below. They have been applied consistently in dealing with items that are considered material to the accounts.

## 1.1 Accounting convention

The financial statements have been prepared under the historical cost convention modified to account for the revaluation of property, plant and equipment, intangible assets and inventories.

## **Going Concern**

In July 2010 Government announced their intention to transfer the regulatory functions of GSCC to the Health Professions Council and for GSCC to be abolished.

The Department of Health (DH) has confirmed that it will continue to finance the GSCC through Grant in Aid until the legislation abolishing the GSCC takes full and final effect and all outgoing liabilities will be met in full.

With the passing of the legislation to transfer the responsibility for the regulatory functions to Health Professions Council on the 1 August 2012 and abolish the GSCC on the 30 September 2012, it is appropriate for the accounts, for the year ended 31 March 2012, to be prepared on a basis other than a going concern. The impact of this on the accounts is additional costs of  $\pm$ 10,142k as detailed.

	£ooos
Depreciation & amortisation	1,142
Provisions	1,798
Curtailments and settlements	7,202
Return on Pension Scheme Assets	
Total	10,142

#### 1.2 Format of accounts

The GSCC is required to draw up its accounts in a form determined by the Secretary of State for Health with the approval of the Treasury. The GSCC is required to prepare its accounts on an accruals basis and to present its published financial statements in a format as set out in the Accounts Direction.

## 1.3 Materiality

IAS 1 and IAS 8 state that accounting policies in IFRSs need not be applied when the effect of applying them is immaterial.

#### 1.4 Non-Current Assets

#### 1.4.1 Property, Plant & Equipment

Property, plant and equipment includes building improvements, office equipment and furniture, computer equipment and the costs of acquiring computer software systems (including cost of implementation). All assets falling into these categories with a value of £5,000 or more have been capitalised. Also assets of similar types have been capitalised where the value of individual assets is less than £5,000, provided that the total value of all assets of that type exceeds £5,000. Property Plant & Equipment are stated at current cost less depreciation.

The accounting treatment under IAS 16 Property, Plant & Equipment has been reviewed. The policy has been updated to reflect the passage of the Health and Social Care Bill on the 27th March 2012. Depreciation has been accelerated from 1st April 2011 at a rate such all property, plant and equipment will be fully depreciated at point of transfer of regulatory responsibilities on 31st July 2012.

#### 1.4.2 Intangible fixed assets

Intangible fixed assets comprise purchased licences to use third party software systems (including cost of implementation). All assets falling into this category with a value of £5,000 or more have been capitalised. Intangible assets are stated at current cost less amortisation. The accounting treatment under IAS 38 Intangible Assets has been reviewed and updated to reflect the passage of the Health and Social Care Bill on the 27th March 2012. Amortisation has been accelerated from 1st April 2011 at a rate such all intangible fixed assets are fully amortised at point of transfer of regulatory responsibilities on 31st July 2012.

#### 1.4.3 Development costs

Development expenditure is capitalised if it meets the criteria specified in Managing Public Money, which was originally adapted from SSAP13 to take account of the not-for-profit context. IAS 38 Intangible Assets has been reviewed under the heading 'Internally Generated Intangible Assets' and capitalised development costs held at GSCC deemed to meet the criteria laid down by the IAS for recognition.

## 1.4.4 Depreciation

Depreciation previously had been provided on all tangible fixed assets held at the year end on a straight line basis, at rates calculated to write off the cost over their estimated useful economic lives as follows:

Building improvements	shorter of lease term or UEL
Office equipment and furniture	10 years
Computer equipment	4 years
Computer software	3 - 10 years

The policy has been updated to reflect the passage of the Health and Social Care Bill on the 27th March 2012. Depreciation has been accelerated from 1st April 2011 at a rate such all assets will be fully depreciated at point of transfer of regulatory responsibilities on 31st July 2012.

## 1.4.5 Amortisation of intangible fixed assets

Amortisation was provided on software licences held at the year end on a straight line basis, at rates calculated to write off the cost over the shorter of the period of the licence or their estimated useful economic life with computer software licences 2 - 10 years.

The policy has been updated to reflect the passage of the Health and Social Care Bill on the 27th March 2012. Amortisation has been accelerated from 1st April 2011 at a rate such all assets will be fully amortised at point of transfer of regulatory responsibilities on 31st July 2012.

#### 1.4.6 Indexation

Fixed assets have previously been re-valued as at 31 March using indices taken from "Price index numbers for current cost accounting" issued by the Office for National Statistics. This convention has not been applied in the 2011-12 accounts due to the immateriality of the values concerned.

#### 1.4.7 Impairments

Impairment losses resulting from short-term changes in price that are considered to be recoverable in the longer term are taken in full to the revaluation reserve. These include

impairments resulting from the revaluation of fixed assets. An annual impairment review is conducted which assesses whether the recoverable value of an asset is below its carrying value. Impairments in advance of amounts recorded in the revaluation reserve or where no revaluation has previously occurred are recorded in the statement of comprehensive net expenditure.

## 1.5 Financing and income

The majority of the GSCC's funding is Grant in Aid provided by the Department of Health. The funds may be used to meet the general objectives of the GSCC at the discretion of the GSCC, subject to total cash payments in each year not exceeding several cash limits imposed by the Department. These cash limits cover payments in respect of operating costs, training support grants and capital. All other income is credited to income in the year in which it is earned.

## 1.6 Expenditure

## 1.6.1 Management and administration

Management and administration costs relate to expenditure incurred in the management of the GSCC's activities, including quality-assurance work to ensure training is delivered to the appropriate standard, organisational administration and compliance with statutory requirements.

## 1.6.2 Education support grants

Education support grants comprise expenditure on social work degree grants, grants and practice learning/practice teaching grants. Grants payable are recorded as expenditure in the period that the underlying activity giving entitlement to the grant occurs.

## 1.7 Retirement Benefit Costs

The majority of the GSCC's employees are eligible for membership of the Local Government Pension Scheme (LGPS) via an admission agreement with Essex County Council Pension Fund. The scheme is a multi-employer defined benefit scheme.

For defined benefit schemes, the liability recognised in the statement of financial position is the present value of the defined benefit obligation at the reporting date less the fair value of the scheme assets, together with any adjustments for the unrecognised past service costs, less any amounts recoverable from third parties. The defined benefit obligation is calculated annually by independent actuaries using the projected unit credit method.

The present value of the defined benefit obligations is determined by discounting the estimated

future cash outflows using interest rates of high quality corporate bonds that have terms to maturity approximating to the terms of the related pension liability. Actuarial gains and losses arising from experience adjustments and changes in actuarial assumptions are charged or credited in other comprehensive income in the period in which they arise.

Past service costs are recognised immediately in statement of comprehensive net expenditure to the extent that the benefits are already vested, and otherwise amortised on a straight line basis over the average period until the benefit s become vested. The interest cost and the expected return on assets are shown as a net amount of finance costs.

The assets of the LGPS are held and managed by the constituent administering authorities and therefore entirely independent of the GSCC's finances.

The valuation of the pension liability has increased by £5.228m to reflect the passage of the Health and Social Care Bill on the 27th March 2012. The impact of this is that upon organisational closure the GSCC will exit the LGPS and the pension liability will crystallise. All active members become entitled to deferred benefits or early retirement benefits.

Under this scenario it is necessary to establish the funding position of the residual liabilities on a "minimum risk basis". This is similar to adopting a basis that would be used to secure the liabilities from an insurance company. In practice there is no scope for the liabilities to be brought out via such an arrangement but it represent one measure of the cost of funding the liabilities., which reduces the risk of further costs having to be met by other employers in the Fund in the future.

## 1.8 Leases

Operating lease rentals and related service charges are charged directly to the Expenditure Account in line with IAS 17 Leases requirements, on a straight line basis.

#### 1.9 Value Added Tax

The GSCC is not registered for Value Added Tax (VAT). All figures reported in these statements therefore include VAT.

#### 1.10 Adoption of new and revised standards

At the date of authorisation of these financial statements, the following Standards and

Interpretations which have not been applied in these financial statements were in issue but not yet effective (and in some cases had not yet been adopted by the EU):

IFRS 1 (amended) IFRS 7 (amended)	Sever hyperinflation and Removal of Fixed dates for First time adopters Disclosures – Transfers of Financial Assets
IFRS 9	Financial Instruments
IFRS 10	Consolidated Financial Statements
IFRS 11	Joint Arrangements
IFRS 12	Disclosure of Interests in Other Entities
IFRS 13	Fair Value Measurement
IAS 1(amended)	Presentation of Items of Other Comprehensive Income
IAS 12 (amended)	Deferred Tax: Recovery of Underlying Assets
IAS 19 (revised)	Employee Benefits
IAS 27 (revised)	Separate Financial Statements
IAS 28 (revised)	Investments in Associates and Joint Ventures

The GSCC does not expect that the adoption of the standards listed above will have a material impact on the financial statements in future periods.

## 2 Reconciliation of net operating expenditure and gross capital expenditure to Grant in Aid

		2012	2011
		£'000	£'000
Total Net Expenditure for the financial year	Net expenditure account	54,548	44,926
Operating Grant in Aid Receivable		41,282	44,316
Over spend against Financing receivable from the Department of Health		(13,266)	(610)
		2012	2011
		£'000	£'000
Gross capital costs	Cash flow statement	-	(111)
Net book value of assets disposed		-	-
Net capital resource outturn		-	(111)
Capital Grant in Aid	Cash flow statement	-	-
Over spend against Financing received from the Department of Health		_	(111)

## 3 Programme expenditure – Education support grants

	2012	2011
	£'000	£'000
Social Work Degree Grants	29,622	27,903
Other Grants to voluntary organisations	177	245
Total	29,799	28,148

## 4 Staff numbers and related costs

The total cost of employing staff was:

	2012	2011
	£'000	£'000
Pay		
Salaries and wages	5,904	5,871
National insurance employers' contributions	498	457
Occupational pension scheme, employers' contributions	423	489
Pensions: deficiency payments	304	221
Short term employee benefits *	-	30
Total permanently employed staff expenditure	7,129	7,066
Temporary staff+	1,390	2,418
Total pay costs	8,519	9,484
Less receivables in respect of outward secondment	(59)	(35)
Total net costs	8,460	9,449
Non-cash items		
<ul> <li>Current and past service costs *</li> </ul>	(60)	(1,284)
- Curtailments and settlements	7,202	-
- Redundancy provision	1,707	-
Total costs	17,309	8,165

The salary and employee benefits for the key management and personnel has been disclosed in the remuneration report on pages 52-55

\* IAS19 Employee Benefits disclosure

\* In the UK Budget Statement of 22 June 2010, the Chancellor of the Exchequer announced that, with effect from 1 April 2011, the Government would use the Consumer Prices Index (CPI) rather than the Retail Prices Index (RPI) for price indexation of benefits and tax credits; and that this would also apply to public service pensions through the statutory link to the indexation of the Second State Pension.

The change from RPI to CPI for the purposes of uprating index-linked features of post employment benefits has been recognised as a negative past service cost in accordance with IAS 19. This accounting treatment has been adopted by all central Government reporting entities where RPI has been used for inflation indexing for many years.

The question of whether, as regards the main public service pensions schemes, there is a legitimate expectation that RPI will be used for inflation indexing is currently before the courts in judicial review proceedings. The Government case is that no legitimate expectation exists and that, in any event, even if there was a legitimate expectation this was overridden by the clear public interest in making very substantial savings at a time when Government had adjudged that deficit reduction was a fundamental objective for the country. If the Government's case is proven, there would be no change to the accounting treatment adopted in these accounts.

The average number of whole-time equivalent employees, including the Chief Executive, during the period ended 31 March 2012 was:

	2012	2011
	No.	No.
Directly employed	218	209
Other	30	57
Total	248	266

## Exit Packages

	2012	2011
	Total number of exit packages	Total number of exit packages
Total number of exit packages	-	5
Total resource cost/£	-	98,569

## 5 Other Expenditure

	2012	2011
	£'000	£'000
Running costs		
Council	137	205
Staff travel and subsistence expenses	253	221
Staff development and training	261	239
Staff recruitment	94	225
Premises costs (excluding operating lease payments)	507	1,034
Rentals under operating leases:		
- Hire of plant and machinery	243	244
- Other	920	1,180
Communications	256	283
Other office services	1,575	1,416
Business Development	61	129
Publications and Promotions	144	188
Courses and Workshops	104	150
International Recognition Service	37	25
Conduct investigations including legal fees	2,539	3,953
Audit Fees	60	60
Other fees and charges	120	133
Non-cash items		
<ul> <li>Increase/(Decrease) in provision for doubtful debts &amp; write-off</li> </ul>	320	12
- Depreciation	322	704
- Amortisation	2,528	1,512
- Loss on revaluation	-	73
- Loss on disposal	36	-
- Provision provided in the year	68	109
- Net finance Charge on pension scheme	76	321
Total	10,661	12,416

During the year the GSCC did not purchase any non audit services from its external auditor the National Audit Office.

## 6 Income

	2012	2011
	£'000	£'000
Social care registration fees	2,669	2,975
Rentals from operating leases	239	570
Income from devolved social care authorities	296	242
Other operating income	17	16
Total	3,221	3,803

## 7 Property, plant and equipment

## Tangible assets

	Leasehold Improvements	Furniture and Fittings	Information Technology	Total
	£'000	£'000	£'000	£'000
Cost or revaluation				
At 1 April 2011	1,790	821	951	3,562
Disposals	(1,303)	(261)	(137)	(1,701)
At 31 March 2012	487	560	814	1,861
Depreciation				
At 1 April 2011	1,717	658	765	3,140
Provided during the year	73	104	145	322
Disposals	(1,303)	(226)	(136)	(1,665)
At 31 March 2012	487	536	774	1,797
Net book value				
At 31 March 2012	-	24	40	64
At 31 March 2011	73	163	186	422

## Intangible assets

	Software Licences	Development Expenditure	Total
	£'000	£'000	£'000
Cost or revaluation			
At 1 April 2011	426	9,907	10,333
Disposals	(59)	-	(59)
At 31 March 2012	367	9,907	10,274
Amortisation			
At 1 April 2011	376	6,586	6,962
Provided during the year	49	2,479	2,528
Disposals	(59)	-	(59)
At 31 March 2012	366	9,065	9,431
Net book value			
At 31 March 2012	1	842	843
At 31 March 2011	50	3,321	3,371

## 8 Trade receivables and other current assets

	2012	2011
	£'000	£'000
Trade receivables	49	95
Other receivables	14	741
Prepayments and accrued income	172	697
Total	235	1,533
Intra-Government Balances	2012	2011
	£'000	£'000
Balances with central government bodies	42	382
Balances with local government	-	-
Balances with bodies external to Government	193	1,151
Total	235	1,533

## 9 Cash and cash equivalents

	2012	2011
	£'000	£'000
Balance at start of year	2,043	1,672
Net change in cash and cash equivalents outflow/(inflow)	(611)	371
Balance at end of year	1,432	2,043

All balances were held with commercial banks and cash in hand.

## 10 Trade payables and other current liabilities

	2012	2011
	£'000	£'000
Trade payables	133	7
Other liabilities: Tax and social security	159	-
Other liabilities: Accrued expenditure and deferred income	607	1,505
Total	899	1,512
Intra-government balances	2012	2011
	£'000	£'000
Balances with bodies external to government	899	1,512
Total	899	1,512

## 11 Provisions for liabilities and charges

	£'000
Balance at 1 April 2011	492
Dilapidations provision provided in the year	68
Onerous leases provision provided for during the year	91
Redundancy provision provided for during the year	1,707
Balance at 31 March 2012	2,358

The balance of £492 as at April 2011 all relates to dilapidations. The dilapidations provision is in line with the leases for the premises occupied by the GSCC in Rugby and London. The provision was calculated with the input of specialist advice. The expenditure likely to be incurred in the calendar years 2012 and 2013.

## 12 Capital Commitments

Following the Governments decision to transfer GSCC activities in the main to Health Professions Council and the restrictions with no access to capital funding there have been no capital commitments since July 2010.

## 13 Commitments under leases

Total minimum future lease payments under operating leases are given in the table below for each of the following periods.

	2012	2011
	£'000	£'000
Buildings		
Leases which expire between 1 and 5 years	199	1,855
Leases which expire after 5 years	-	-
Sub-total	199	1,855
Other		
Leases which expire between 1 and 5 years	14	51
Leases which expire after 5 years	-	-
Sub-total	14	51
Total	213	1,906

The above figures exclude maintenance agreements for equipment and service charges for buildings.

## 14 Contingent liabilities disclosed under IAS 37

There is an outstanding claim at the Employment Tribunal by an external applicant for a panellist role which the GSCC is robustly defending.

## 15 Movement in reserves

	2012	2011
	£'000	£'000
At 1 April general reserve	577	128
Indexation of fixed assets	-	(45)
Actuarial (loss)/gain	(2,177)	1,104
Grant receivable in the period	41,282	44,316
Net expenditure	(54,548)	(44,926)
Balance at 31 March	14,866	577
Balance excluding pensions liability	(683)	5,365
Pension liability	(14,183)	(4,788)
Balance at 31 March	(14,866)	577

## 16 Reconciliation of net operating cost to operating cash flow

	2012	2011
	£'000	£'000
Net surplus after cost of capital and interest	(54,548)	(44,926)
Depreciation and amortisation charges	2,850	2,216
Loss on revaluation	-	73
Loss on disposal of non current assets	36	-
(increase)/decrease in trade and other receivables	998	69
Increase/(decrease) in trade payables & Provisions	1,253	(3)
Increase/(reduction) in pension liability	9,395	(2,067)
Adjustments to general reserves	(2,177)	1,104
Net Cash outflow from operating activities	(42,193)	(43,534)

## 17 Reconciliation of net movement in funds

	2012	2011
	£'000	£'000
Total reserves at 1 April	577	128
Movement in reserves	(13,266)	(655)
Actuarial (loss)/gain on pension scheme	(2,177)	1,104
Total reserves at 31 March	(14,866)	577

## 18 Pension Scheme

In Line with Accounting Standards Board requirements, the GSCC has implemented IAS 19 in full.

(i) Contribution rates

The majority of the GSCC's employees are eligible for membership of the Local Government Pension Scheme (LGPS) via an admission agreement with Essex County Council pension fund. The scheme is a multi-employer defined benefit scheme. Contributions for 2011-12 were paid by employees depending on salary as outlined in the table below.

Full time equivalent salary	Contribution rate
£0.00 - £12,600	5.50%
£12,600.01 - £14,700	5.80%
£14,700.01 - £18,900	5.90%
£18,900.01 - £31,500	6.50%
£31,500.01 - £42,000	6.80%
£42,000.01 - £78,700	7.20%
£78,700.01 or more	7.50%

Employer contributions for 2011-12 were paid at 10.0% of pensionable pay

The GSCC will make a deficit payment of £158,700 for the six month period to September 2012

- (ii) Actuarial information
- (a) Triennial valuations of the Essex Fund are carried out by Mercer Limited, a qualified

actuary. The latest valuation as at 31 March 2010 showed a deficit of £5.056m. For the year ending 31 March 2012, the GSCC contributed deficit payments to the Fund of £0.303m (2010-11 £0.221m).

Under accounting standard IAS 19, the principal financial assumptions made by the actuary are:

	As at 31/03/2012	As at 31/03/2011
Rate of increase in salaries	2.8%	4.4%
Rate of increase in pensions in payment	2.8%	2.5%
Discount rate	3.3%	5.5%
Rate of RPI inflation	3.3%	3.4%
Rate of CPI inflation	2.8%	2.9%

The expected rate of return on plan assets is based on market expectations, at the beginning of the period, for investment returns over the entire life of the related obligation. The assumption used is the average of the following assumptions appropriate to the individual asset classes weighted by the proportion of the assets in the particular class. The assumed investment return on government bonds is the yield on 20-year fixed interest gilts at the relevant date. The expected investment return on corporate bonds is based on market yields at the relevant date, restricted to 2% p.a. over and above that available on gilts, reflecting an increased risk of default in the corporate bond yield. The assumed investment return on equities is the yield on 20-year fixed interest gilts plus an allowance of about 3.5% p.a. for the "risk premium" associated with equity investment.

	Expected rate of return at	Value at	Expected rate of return at	Value at
	31/03/2012	31/03/2012	31/03/2011	31/03/2011
	%	£'000	%	£'000
Equities	6.4	10,787	7.5	10,341
Government Bonds	3.3	616	4.4	997
Other Bonds	4.6	1,541	5.1	1,413
Property	5.4	2,157	6.5	1,666
Cash/liquidity	0.5	308	0.5	461
Fair value of assets		15,409	-	14,878
Actuarial value of scheme liabilities		(29,592)	_	(19,666)
Deficit in the scheme		(14,183)	-	(4,788)
Actual return on plan assets		168		1,295

(b) The assets in the scheme and the expected rate of return were (IAS 19 disclosure):

## (c) Components of pension cost for the period to 31 March

	2012	2011
	£'000	£'000
Current service cost	6	71 860
Interest on Pension Liabilities	1,09	90 1,156
Expected return on assets	(1,01	4) (835)
Past service cost		- (1,389)
Effect of curtails or settlements	(89	6) 14
Total pension cost recognised in Net Expenditure Account	(14	.9) (194)

## (d) Change in Benefit Obligation during period to 31 March

	2012	2011
	£'000	£'000
Benefit obligation at beginning of period	19,666	19,834
Current Service Cost	671	860
Interest on Pension Liabilities	1,090	156
Member Contributions	286	319
Past Service Cost	-	1,389
Effect of curtailments or settlements	7,202	14
Actuarial(gains)/losses on liabilities	1,330	(838)
Benefits/transfers paid	653	(290)
Benefit obligation at end of period	29,592	19,666

## (e) Change in Plan Asset during period to 31 March

	2012	2011
	£'000	£'000
Fair value of plan assets at beginning of period	14,878	12,979
Expected return on plan assets	1,014	835
Actuarial gains/(losses) on assets	(847)	266
Employer contributions	731	769
Member contributions	286	319
Benefits/transfers paid	(653)	(290)
Fair value of plan assets at end of period	15,409	14,878

## (f) Statement of changes in taxpayers equity

	2012	2011
	£'000	£'000
Actuarial (gains)/losses	(10,275)	(1,104)
Total pension (gain)/cost recognised in SOCITE	(10,275)	(1,104)

(g) History of experience gains and losses (IAS 19 Disclosure)

	2012	2011	2010	2009	2008
	£'000	£'000	£'000	£'000	£'000
Actual Return on Plan Assets	168	1,295	3,307	(2,307)	(477)
Experience Gain/(losses) on assets	(847)	266	2,689	(3,038)	(1,227)
Experience Gain and losses on liabilities	(10,275)	346	-	-	(183)

## 19 Related Party Transactions

The GSCC is a Non-Departmental Public Body of the Department of Health. The Department of Health is regarded as a related party. During the period, the GSCC received £41,282,466 as grant in aid from DH and £17,248 as other operating income from other central government bodies. GSCC has had a number of material transactions with other departments and bodies for which the DH is considered to be the parent department via:

Scottish Social Services Council: GSCC earned income of £152,654 (2010-11: £119,181) through recharges for the UK Social Care Regulation programme and for costs of providing external assessment (of social work courses) service to the SSSC.

Care Council for Wales: GSCC earned income of £96,959 (2010-11: £79,454) through recharges for the UK Social Care Regulation Programme and for cost of providing the external assessment (of social work courses) service to the CCW.

Northern Ireland Social Care Council: GSCC earned income of £46,630 (2010-11 £43,000) through recharges for the UK Social Care Regulation Programme and for costs of providing external assessment (of social work courses) service to the NISCC.

None of the GSCC's board members, key managerial staff, or other related parties have undertaken any material transactions with the GSCC during the period.

## 20 IAS 32 Financial Instruments

International Accounting Standard 32, Financial Instruments: Disclosure and Presentation, requires disclosure of the role that financial instruments have had during the period in creating or changing the risks the GSCC faces in undertaking its activities. As permitted by FRS 13, debtors and creditors which mature or become payable within 12 months from the balance sheet date have been omitted from disclosures.

(i) Liquidity Risk

The GSCC operates within a funding envelope that is provided partly by the Department of Health and partly by income received as fees from social work registrants. The mix of funding allows the GSCC to ensure that its commitments are consistent with its income across the year.

- (ii) Currency Risk The GSCC is not exposed to currency risk.
- (iii) Credit Risk The GSCC is not exposed to significant credit risk.
- (iv) Market and Interest Rate Risk Market risk is defined under IFRS in accordance with the requirements of IFRS 7 as "the risk that the fair value or cash flows of a financial instrument will fluctuate due to changes in market prices. Market risk reflects interest rate risk, currency risk, and other price risks."
- (v) Financial Assets and Liabilities The GSCC's financial assets and liabilities carry nil rate of interest All financial liabilities are due within one year. Income received from registrants is based on standard rates below market average for the services received. Therefore the GSCC is not exposed to any significant market or interest rate risks.

## 21 Post Balance Sheet Events

In accordance with the requirements of IAS 10 events after the balance sheet date, post balance sheet events are considered up to the date on which the accounts are authorised for issue. This is interpreted as the date of the Certificate and Report of the Comptroller and Auditor General.

## 22 Losses and Special payments

Four complaints to the Parliamentary Ombudsman resulted in recommendations for one off consolatory payments of  $\pounds_{3,000}$  in total to be made to the complainants. These were agreed by HM Treasury and paid.

## 23 Declarations of Interest

There are no declarations of interest.

## Contact us

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