

GMB

U N I O N

**GMB response to consultation on HCPC
registration fees**

Written response from GMB

1. Introduction

- 1.1. GMB Union is responding, on behalf of its paramedic members, to the Health and Care Professions Council's consultation on proposed increases to its registration and renewal fees.
- 1.2. GMB is one of the country's largest trade unions, representing workers in both the public and the private sectors. GMB is the largest union in ambulance services.
- 1.3. We wish to protest against the removal of important documents, including the consultation document, from the HCPC's website prior to the submission deadline. This can only have had a limiting effect on the quality of scrutiny that relevant parties can offer on this important decision.

2. Do you agree that the renewal fee should increase from £90 to £106? (Q4)

- 2.1. We do not support the proposed increase to ambulance workers' renewal fees.
- 2.2. The HCPC is proposing to increase renewal fees from £90 per annum to £106 (an increase of 18%). If approved, fee levels will have risen by 39% since 2009, when the fee was £70.
- 2.3. We appreciate that the creation of Social Work England poses a significant challenge for the HCPC. However, we do not believe that the proposed increase is proportionate to that challenge. Nor do we believe that the impact of the change on our members has been fully considered, for the reasons we set out below.
- 2.4. The HCPC's consultation states that the proposed increase is, at least in part, linked to the need to keep 'pace with the cost of inflation.' The consultation does not however demonstrate a clear relationship between inflation and the rates of increases proposed and previously adopted by the HCPC. We note that that, on the HCPC's preferred measure of CPI, inflation is projected to have increased by 30.1% between 2009 and 2021 – significantly below the proposed increase of 39.5% over the same period.ⁱ
- 2.5. The HCPC has not conducted an assessment of our members' ability to afford the proposed increase. The Council's stated aim is for fee levels to keep pace with inflation, but our members have endured years of imposed below-inflation pay increases which has significantly eroded their incomes in real terms.
- 2.6. Ambulance workers' average earnings have increased by just 1.5% in cash terms since 2010, reflecting – to a large extent – loss of access to non-basic payments, such as those relating to overtime working. This means that ambulance workers' earnings have been devalued by between 19.1% (if measured by RPI) and 13.9% (if measured by CPI) between 2010 and 2018.ⁱⁱ In the words of one of our members, the proposed increase to HCPC fees will be 'unmanageable and unethical in the current financial climate.'



- 2.7. We note that the OBR recently (October 2018) revised its projections of future inflation rates upwards, and also that these projections contain a high degree of uncertainty due to the difficulty of accounting for potentially inflationary consequences of Brexit.
- 2.8. Ambulance workers who change job roles, and as a consequence are compelled to move from Annex 5 to Section 2 terms for unsocial hours payments, may experience a further erosion of total earnings from this year.
- 2.9. Our members have experienced a severe reduction in the value of their earnings. This has, in many cases, had a serious impact on their personal finances and quality of life. The HCPC's proposed increase will be difficult to accommodate within already stretched household budgets and it will hardship for workers who are already finding it increasingly difficult to balance their income with expenditure on essential items.

3. Do you agree that the HCPC should invest in preventing fitness to practice issues arising (Q1), do you agree that the HCPC should invest in improved services (Q2), and do you agree that the HCPC should invest in the necessary resources to improve the capacity, quality and timeliness of our FtP performance (Q3)

- 3.1. We are not opposed to the principle of 'spend to save.' We believe that improvements to certain aspects of the HCPC's service – particularly the length of time it takes to conduct hearings – would both lead to cost savings and a greater sense of value for money on the part of registered professionals.
- 3.2. We are concerned, however, about the continued increase in the HCPC's costs (even after accounting for inflation). We note that the Council's fees income has increased by 155% since 2008/09 and that operating expenditure has increased by 169% over the same period.
- 3.3. This divide between income and expenditure is reflected in the growing cost of administering services per registrant. Real terms expenditure per head appears to have grown by 18% since 2013/14. We believe that this rise in costs, rather than the need to keep pace with inflation, is the primary reason for the proposed increase to fees.

HCPC registrants and costsⁱⁱⁱ

	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19 (projected)
Operating expenditure (£000s)	£23,876	£26,137	£28,287	£31,302	£34,112	£34,735
Number of registrants	322,021	330,887	341,745	350,330	-	366,208
Expenditure per registrant	£74.14	£78.99	£82.77	£89.35	-	£94.85
Expenditure per registrant (in 2016/17 prices)	£77.38	£81.39	£84.61	£89.35	-	£91.42



- 3.4. We recognise that the HCPC has argued that the nature of its casework has become more complex over recent years. GMB believes, however, that more could be done to realise economies of scale within the organisation in order to hold down increases to fee levels.
- 3.5. We also wish to reflect the fact that our members do not feel that the HCPC's services represent value for money. The comment that 'most paramedics don't even know what the purpose of the HCPC is other than to punitively discipline us and take our money' was typical. Members were also sceptical about the HCPC's CPD offering.

4. Do you agree that the scrutiny fee for applicants from approved programmes should increase in line with the renewal fee from £63 to £74 (Q5) and do you agree that graduate applicants should no longer receive a 50 per cent discount on the cost of registration (Q6)?

- 4.1. Our response to Q5 is the same as that to the HCPC's proposed increase to the renewal fee.
- 4.2. On Q6, the HCPC is proposing to more than double the scrutiny fee for new graduate joiners who would otherwise be required to pay the fee, at a time when there significant recruitment shortfalls in the NHS. The proposals equate to an increase of 135%. We believe that rather than viewing the discount as an anomaly, the HCPC should be seeking to level-up this provision for other groups that are likely to face exceptional costs.

5. Do you agree that we should regularly review our fees to avoid infrequent but larger increases in the future (Q9)?

- 5.1. We recognise that there could be value in such a proposal. Smaller, more regular increases may be less difficult to meet than larger, and often unexpected, rises. However, we would seek to understand how often such increases would be applied and the nature of the associated consultation mechanisms before commenting further.

6. Do you have any further comments on our proposals?

- 6.1. GMB recognises that the HCPC performs an important and, at times, difficult role within the health and care sector. We welcome the opportunity to respond to this consultation.
- 6.2. As set out here, we believe that the proposed increase is too high to ask our members to pay. It is both above inflation and far above the changes to our members' earnings in cash terms. We urge the HCPC to take further action to curb cost increases and urgently revisit their proposals for fee changes.

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References

ⁱ GMB calculation based on the Consumer Price Inflation all-items index for the years 2009 to 2017 and Table 3.10 of the OBR's Fiscal and Economic Outlook (October 2018) for the years 2018 to 2021.

ⁱⁱ NHS Digital, NHS Staff Earnings estimates to June 2018; ONS, Consumer Price Inflation tables.

ⁱⁱⁱ Consultation on HCPC registration fees (2018) and supporting documents; HMT GDP deflator. We note that the HCPC uses CPI as its preferred measure of inflation. Our view is that CPI is reported by the ONS to be a measure of consumer costs, and that organisational costs tend to behave differently. We have therefore indexed these figures against GDP as a measure of the amount of money in the economy.

