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Via email to: [consultation@hcpc-uk.org](mailto:consultation@hcpc-uk.org)

Date: 13 December 2022

Dear Andrew,

**Re: Consultation on fees Policy and Standards Department**

Firstly, I would like to thank you for the in-person engagement of your team regarding the proposed increase in fees for dietitians. I recognise the challenges you are facing as an organisation in these incredibly difficult economic times, and I am sure you are reflecting on the impact of the economy on your partner organisations and individual registrants.

As a result of member feedback, we do not support an increase of this magnitude and suggest HCPC consider the perceived value for fees and cap any increase to between zero and three percent. We encourage HCPC to appropriately apportion fees to specific professions and to be forward thinking in any changes to legislation and open up options for raising income aside from charging individuals.

Please find attached in Appendix 1 a snapshot of actual comments made by our members in response to our draft consultation feedback document.

Appendix 2 provides the BDA's final response to the consultation. In drafting this response, we have consulted with members in two ways: (i) we ran a poll of members; and, (ii) we have shared this document with members for feedback. Feedback has been incorporated into this document.

We had close to 766 responses to our poll regarding the proposed increase. It is unlikely to come as a surprise, the feedback we received from members is that they are unsupportive of the proposed increase. Specifically:

- 98% stated they would not be happy with an increase in HCPC fee from £98.12 to £117.74 per year, a further 6 responders stated they were unsure and just 5 people said they would be happy with the increase.
- 70% feel they do not receive value for the current fee
- When asked what percentage increase they would be happy with – 52% said zero. 32% of responders said a 0-5% increase would be acceptable.

You will be aware that I have also signed the feedback letter co-ordinated by Sarb Bajwa, CEO, British Psychological Society and the strength of feeling in this letter is shared by our members.

Please do not hesitate to get in touch should you wish to have a further discussion on any of the matters raised in our feedback.

With kind regards,



Liz Stockley  
Chief Executive Officer  
British Dietetic Association

## Appendix 1 – a snapshot of some of the BDA member comments:

That they are increasing this at a time when households are struggling to pay for food and heating is absolutely disgusting

[This] makes me think about becoming a nutritionist and limiting my patient load.

HCPC needs an independent board overseeing it to approve any proposed rate rises like this. So disgusting.

Its getting to the point of I'm better off not working as there is no disposable income to enjoy my life.

It's making me think twice about my career

We need to know what, other than registration, the HCPC are providing for our money - it is not enough to know that it pays wages and accommodation and FtP hearings - none of these benefit the wider Dietetic population.

HCPC have misread the room in terms of what they feel they provide to registrants and as health care professionals have no option but to register to practice their 'trade'

Compared to other organisations this is extortionate.

...another tax on health care staff to be able to do their job without any increase in benefit

...the lack of a pay rise that meets the level of inflation means that all HCPs are struggling with basic requirements.

% increase in HCPC fees is unacceptable, with the current cost of living crisis.

for many newly qualified B5 it is money they just don't have especially in the current economical climate.

I will now be paying for the privilege to work.

...they need to act in a more timely manner to support their registrants and the public. This is part of their service and what we pay for and is not currently fit for purpose.

It is far too high. Higher than inflation. With the cost of living everyone is striving to do their best... Just be reasonable.

I do not feel such an increase is warranted I don't feel I get value for my money as it is.

The percentage rise seems disproportionate when the work force HCPC supports, are living in time of economic pressure and unlikely to get a wage rise which will be in line with inflation.

[I find the %] increase is offensive and out of touch. Given the current situation with the cost-of-living crisis, there should be a freeze. HCPC should be doing more with less like the NHS.

...any interaction I have with HCPC highlights an inefficient service which is difficult to use.

We cannot work unless we pay up. It is the equivalent of the local criminal gang demanding money from shop keepers so they can go about running their businesses without any trouble from the gang.

Why do we, who earn so little, have to PAY so much for this bureaucracy?

## Appendix 2 – Consultation on HCPC registration fees - BDA Response

| HCPC Consultation Question   | BDA Response  |
|--|---|
| <p>1. To what extent do you agree or disagree that the rationale for our proposed fee increase is clear?</p> | <p>The BDA urges HCPC to review its fee programme in a more holistic way incorporating a range of factors such as profession specific pay, workforce percentage, and extraneous pressures on individual finances such as inflation.</p> <p>The rationale you have set out is clear. However, the context within which our members are operating is not clearly reflected.</p> <p>HCPC needs to be seen to be mindful of increasing professional costs and also the economic reality of practicing.</p> <p>The BDA is keen to have a better understanding of what costs are associated with activities pertaining to the dietetic profession and what the trends are here. We are keen that fees represent these costs.</p> <p>Any adjustments to fees need to reflect the overall economic situation, the rising costs for HCPs and the fact that many of our members are on the brink of choosing to leave the dietetic workforce due to costs associated with practicing.</p> <p>This would have a negative impact on the profession and on public services at a time when we need to be increasing numbers of dietitians.</p> <p>We encourage HCPC to be forward thinking in any changes to legislation and open up options for raising income aside from charging individuals more.</p> |
| <p>2. Given the rationale set out, to what extent do you support the fee increase proposals?</p>             | <p>The BDA does not support the proposed fee increase to any extent.</p> <p>The BDA consulted members on the proposed fee increase. 84% of the 766 respondents to the poll indicated that either no increase (52%) or zero-5% increase would be acceptable (32%).</p> <p>The BDA asked members if they felt that they receive value from current HCPC fees. 25% said they receive some value. 70% felt they receive no value for what they currently pay. Just 5% said they received value for their current fee. There is therefore a key disconnect between HCPC and the dietetic workforce in either delivery of value for money or understanding of value for money.</p> <p>It is not appropriate to compare HCPC rates with other professional healthcare regulators that cover professions with far greater levels of earnings than dietitians and other Allied Health professionals. A more meaningful comparison would be by percentage of earnings.</p> <p>The cost is disproportionate for those who work part time. We have received feedback from members who work on a part time basis who would benefit from a reduced fee. This would reduce discrimination against the female workforce.</p>  |
| <p>3. To what extent do you agree or disagree that we should retain the</p>                                  | <p>It is essential to the growth of the workforce that graduates continue to receive a significant discount of 50% or greater.</p>  |

| HCPC Consultation Question   | BDA Response  |
|--|---|
| <p>50% UK graduate discount for the first two years of registration?</p>   | <p>Failure to maintain this discount could see significant attrition within the dietetic workforce.</p> <p>Costs such as HCPC fees present a barrier to entering the profession which is more acutely felt in traditional under-represented areas of the population. This affects decision making for potential students, students and graduates. This also exacerbates the lack of diversity in our workforce and contributes to inequitable outcomes for population health.</p>   |
| <p>4. In the consultation we set out two areas we would like to explore to mitigate the impact of the proposed fee rise. Please let us know the extent to which you support these. Please also tell us about any other mitigations you think we should explore.</p>  | <p>The two areas set out (spreading payments and claiming back tax allowance) are both services the HCPC should be delivering as standard anyway.</p> <p>These do nothing to support growth in the workforce or improve the individual financial position of our members.</p> <p>The BDA is not supportive of increasing fees that create either additional costs to members during a difficult economic environment, or that present a barrier to entry to the profession.</p>   |
| <p>5. In the consultation we set out how the proposed fee rise will enable us to improve our core regulatory activities, including customer service and fitness to practise, developing our data analytics and improving our efficiency through legislative reform. We also set out additional areas that we would like to prioritise, based on stakeholder feedback. Please let us know the extent to which you agree with these.</p> | <p>The BDA argues that now is the time for HCPC to be focused on getting core business right as efficiently as possible. This is what our members are already paying for.</p> <p>We agree that the HCPC could support this conversation though the provision of better data and trend information regarding cases associated specifically with the profession. This would be one step towards delivering a better value for money service.</p> <p>The BDA expects that HCPC should be engaged in a continuous improvement programme as part of normal core business. However, it rejects the notion that this can only be achieved through a HCPC fee increase.</p> <p>If HCPC is unable to deliver core services to a high standard as expected by the public, a conversation needs to be had about how these services might be provided differently, possibly through a different body.</p> <p>The BDA is not supportive of increasing fees that create either additional costs of members during a difficult economic environment, or that present a barrier to entry to the profession.</p> |
| <p>6. In addition to those equality impacts set out in the consultation document, do you think there are any other positive or negative impacts on individuals or groups who share any of the protected characteristics? Protected characteristics are: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation.</p>                          | <p>The cost of higher education and professional registration are key barriers to entry to the profession, particularly for those from vulnerable and under-represented backgrounds.</p> <p>It is difficult to attract people from disadvantaged backgrounds to the dietetic profession, in part because of these costs.</p> <p>The impact of this is that we have a profession that does not look like the population who most need the services of a dietitian. This is something we need to address collectively.</p> <p>We would support HCPC in positive actions to encourage specifically those with protected characteristics into health and care professions. Again, this must be core business.</p>   |

| HCPC Consultation Question  | BDA Response  |
|---|---|
| <p>7. Do you have any suggestions about how any negative equality impacts you have identified could be mitigated?</p> | <p>HCPC should consider reducing or eliminating costs for students from disadvantaged backgrounds to support them to enter the profession.</p> <p>The cost is disproportionate for those who work part time. We have received feedback from members who work on a part time basis who would benefit from a reduced fee. This would reduce discrimination against the female workforce.</p>  |
| <p>8. Do you have any further comments to make about the proposals and information in the consultation?</p>           | <p><b>Income from other sources</b></p> <p>The BDA believes that HCPC should investigate options for raising income from avenues outside of fees for individuals. It would make sense for HCPC to charge individual institutions for the approval of education programmes as long as these charges are appropriate to the amount of work involved, apportioned appropriately and do not have a negative impact on enrolment.</p> <p>It would be positive if this resulted in a subsequent reduction in the fees charged to individuals.</p> <p><b>Efficiency</b></p> <p>HCPC should be looking at efficiency of process as part of core business.</p> <p>We recognise that £1m has been reduced from the budget through office footprint savings in central London, perhaps you might consider further efficiency by being based in a location that more appropriately reflects your source of income?</p> <p>There has been significant waste in the organisation over a number of years, such as unnecessarily raised FtP cases in other professions, which has resulted in a lack of resource to deliver effectively. It should not be the responsibility of individual registrants to pay additionally for the services they have already funded.</p> <p>The majority of the dietetic workforce does not see the HCPC as value for money on current fee levels. Many of the points made for the HCPC fee increase should have already been undertaken under existing fee structures.</p> <p>Increasing fees to invest in programmes that members feel they should already be receiving and they do not at present see as value for money is not an effective way forward for the HCPC or the workforce.</p> <p><b>Specific trend analysis</b></p> <p>It is unclear to the BDA how much of the current HCPC workload is caused by the Dietetic profession. Equally it is not shared what percentage of FtP cases are raised unnecessarily by employers and cause wastage in the system. We are not confident that the HCPC is analysing data specifically to identify these matters and challenging this wastage in a continuous improvement process.</p> <p><b>Final Words</b></p> <p>HCPC needs to recognise that Dietitians chose to be registered there are options to practice privately in other areas of food and</p> |

| HCPC Consultation Question | BDA Response  |
|----------------------------|---|
|                            | <p>nutrition without registration. A significant increase in fees may change our workforce substantially at a time when individuals are facing significant cost without accompanying salary increases.</p> <p>HCPC and Government should therefore look to reform HCPC structures and funding programmes beyond increased fees to better understand how it can reduce wastage and deliver better value for money for both the workforce and the UK tax payer.</p> |