

Professional Standards Authority consultation on their Draft Strategic Plan 2023-26

Introduction: About Us

Action against Medical Accidents (AvMA) is the national charity for patient safety and justice. We provide free independent specialist advice and support to patients and families affected by avoidable harm in any kind of healthcare setting. This provides us with a unique and extensive insight into the experience of patients and families following such patient safety incidents. We use this experience, and our knowledge of the healthcare system, to work with others to develop policies, systems and practices to improve patient safety and the way that patients and families are treated following avoidable harm.

AvMA welcomes the opportunity to respond to this consultation and welcomes the underpinning report, *Safer Care for All*, which has shaped the strategic aims that the Authority has outlined. We recognise that some of the issues raised in that report go beyond the limits of professional regulators, but we think you are right to do so as we agree that issues of patient and service user safety, and how they can be resolved, extends to the whole health and social care system.

Our response may be made public.

The context for the strategy

We recognise that the unprecedented challenges facing the health and social care sector will impact on the Authority's ability to drive improvements in the short-term at least. AvMA, like many other patient bodies, is concerned that in such a crisis, there is a real risk that the gains made over several years in patient safety, are lost. In terms of the Authority's strategic priorities and themes in *Safer Care for All* and which are the most important, we would strongly advocate that, given the current context, an immediate priority must be to make sure that patient safety is not undermined any further. Healthcare professionals need to ensure the patient safety basics are fit for purpose – and patient safety is not a “nice to have” but fundamental to good healthcare. Only when this is properly secured can the Authority then start focusing on the other priorities.

The Authority's vision and mission

Above all, effective healthcare systems need to place patients and safety (and, by extension, learning from errors) front and centre of what they do. To the extent that the proposed Authority's visions and mission statements appear to draw out and prioritise patient and service user safety, then AvMA is satisfied. However, you may wish to consider whether you are also best placed to *co-ordinate and share best practices* given that, for the foreseeable future at least, we will have a myriad of regulators across healthcare and better co-ordination of their work and fostering the sharing of best practice between them all can only be in the patient's interest. This would be a welcome addition to your mission.

The strategic aims

The three strategic aims that the Authority have set out seem to be appropriate and sit well with the overall purpose of the organisation.

In respect of Strategic aim 3: *To promote and support safer care for all*, we would make the following observations:

- Patient safety, and the need for learning and continuous improvement, should be woven into the fabric of our health and social care system when instead it is fragmented, piecemeal and handled in different ways by a myriad of health care agencies without any systems oversight.
- Given the workforce challenges, systemic inequalities and discrimination found in healthcare services, the lack of a coherent patient voice in these systems, and a culture which claims to be a “just one” but still too often leads to “blame”, there is a real danger that patient safety gets worse, before it gets better, in the four nations of the UK.
- We share the Authority’s concerns about the application of safe space arrangements and think it would be very helpful if the Authority were to convene policy discussions to review whether safe spaces, individual accountability and the Duty of Candour can work together in the interests of the patient and service user safety, especially as safe space gets used by the successor to HSIB in 2023/24.
- We also share the Authority’s concerns that as and when inquiries are called for into health and social care issues, it would be helpful if there was a consistent approach and terms of reference for them rather than have each one with its own bespoke terms dictated by the particular views of the responsible Minister at the time.
- In terms of the overhaul of professional regulation, without, at this stage, knowing any precise detail, we would caution that in any updating of them, the patient voice needs to be at the heart of regulation and investigations if confidence in the regulators is to be maintained, and hopefully strengthened.
- We will be interested in the case the Authority seeks to make for a Health and Social Care Safety Commissioner with a broadened and all-encompassing remit. The current Patient Safety Commissioner for England has a restrictive remit covering medicines and medical devices only, which we think is less than helpful. To make a real impact in a holistic approach to patient safety, any overarching role for a Commissioner, cannot be limited in the way the role is today. On the face of what is proposed in *Safer Care for All*, we can see a good case for such Commissioners, but we would be keen to understand the detail lest we add yet more complexity to a system already more complicated than is ideal for patients to navigate. And, of course, such a role would need to be adequately resourced.

Turning to Strategic aim 1: *To protect the public by delivering highly effective oversight of regulation and registration*, we would observe that the oversight work that comes from your current section 29 appeals process could be disrupted if the Government legislates changes to the nature of fitness to practice requirements that lead to many fewer hearings (replaced by an ‘Accepted outcomes’ process). AvMA has concerns about how such arrangements would work and how patients can, in reality, challenge such arrangements and have confidence in a system that could look like a form of ‘plea bargaining’. We would therefore expect the Authority to maximise its ability to influence any proposed changes to ensure that the patient voice – and ultimately their confidence in any fitness to practice regime – is strengthened. Without such confidence, regulation cannot be fit for purpose.

The Authority's future role

We think the Authority's role in "overseeing" the work of the 10 statutory bodies that regulate health and social care professionals in the UK could be made more expansive in that the Authority is in a unique position to see the totality of the effectiveness of professional regulation and where each could learn from each other and improve, as well as try and ensure that the totality of regulation is as joined-up as possible in what is a fragmented system. Working to support collaboration and information sharing between the regulators, for example, is something that can only aid regulatory effectiveness – and public confidence and trust – overall.

Impact

Safer Care for All makes the case in stark terms for the considerable health inequalities that exist within the UK today. It is incumbent upon all the relevant bodies involved in healthcare provision to tackle these inequalities and discrimination as well as promote diversity and inclusion. At AvMA, we see too many examples of where the patient's voice has been lost or ignored – and that can be from someone who might not be considered from a minority or marginalised group where the challenges are likely to be even greater. So, if these issues are to be systemically tackled, it will need to be acknowledged that more needs to be done to ensure that patients have available to them the necessary impartial, independent support and resources to help them with overcoming the barriers they face in healthcare. This is why we continue to champion the need for an independent, fully funded and supported advocacy support service for people who are harmed in the course of their medical treatment. This is especially necessary for those whose voices can be too easily marginalised in the system. And it recognises that there is a clear inequity between a patient with limited resources and the resources of the healthcare system. The Authority should also give consideration to the impact this has and why many people may feel disempowered from complaining when they are avoidably medically harmed.