

Response ID ANON-XRUJ-QK84-H

Submitted to **Promoting professionalism, reforming regulation**

Submitted on **2018-01-23 21:41:10**

Introduction

What is your name?

First name:

John

Surname:

Pitchers

Are you responding as an individual or as part of an organisation?

Organisation

What is your email address?

Email:

john.pitchers@bristol.gov.uk

Are you happy for the Department of Health to use your email address to contact you to clarify points in your response if necessary?

Yes

Organisation

What is your organisation?

Organisation:

Association of Anatomical Pathology Technology (AAPT)

Tell us more about your organisation

Individual or organisation:

Association of Anatomical Pathology Technology (AAPT)

What is the role of your organisation:

The AAPT is the professional body for Anatomical Pathology Technologists employed in both NHS and local authority public mortuaries

England

where are you or your organisation based.:

Which section of the consultation would you like to answer first?

Options for sections of consultation to complete:

Protecting the public

Protecting the public

1 Do you agree that the PSA should take on the role of advising the UK governments on which groups of healthcare professionals should be regulated?

Agree

2 What are your views on the criteria suggested by the PSA to assess the appropriate level of regulatory oversight required of various professional groups?

Please provide below:

We feel that the criteria are a workable start, enabling a strategic view of the entire sector. It should be emphasised, however, that professional colleagues, in addition to patients, should be considered vulnerable if working alongside an incompetent practitioner.

As we believe very strongly in the principle of statutory regulation, we are pleased to note that the criteria incorporates all professions, whether or not they are currently regulated; however, it is our view that APTs should be considered separately from purely laboratory-based professions. Whilst, historically, we have fallen under their remit, our role is significantly different, involving extreme physical and mental effort and should be regarded along the lines of those who work

with mental health and the emergency services, as well as the clinical setting. We feel that occupation-specific standards should apply.

3 Do you agree that the current statutorily regulated professions should be subject to a reassessment to determine the most appropriate level of statutory oversight? Which groups should be reassessed as a priority? Why?

Agree

Which groups should be reassessed as a priority? :

We feel that professions that are more directly patient-facing/frontline should be prioritised, such as GMC, GPhC, NMC, HCPC, etc.

We do believe, however, that all professions should be eventually reassessed.

Further comments:

Job roles and responsibilities change over time, and a reassessment would be a positive move ensuring fresh information is considered and a 'culture of acceptance' is avoided.

4 What are your views on the use of prohibition orders as an alternative to statutory regulation for some groups of professionals?

Disagree

Further comments:

We disagree very strongly with prohibition orders being used as an alternative to statutory regulation. If prohibition orders are to be introduced, they should be used as a complementary tool to the rest of the statutory governance framework.

Prohibition orders do not ensure on-going competence in the way that the wider fitness to practise process does, they merely provide a sanction once an issue has arisen - without an element of prevention and supervision, it's somewhat 'shutting the door once the horse has bolted'.

AAPT has always pursued, and will continue to pursue, statutory regulation for the profession of Anatomical Pathology Technology, believing it to be by far the safest and most effective option to keep the public, and the medico-legal sector, safe.

5 Do you agree that there should be fewer regulatory bodies?

Agree

6 What do you think would be the advantages and disadvantages of having fewer professional regulators?

Advantages:

- Greater clarity and transparency for patients
- Greater consistency with 'core' standards

Disadvantages:

- Potential to lose specialist knowledge within regulatory bodies
- Specialised professions may not get the regulation that is most appropriate

Further comments:

We feel that there are more positives than negatives; consistency for all bodies is paramount, and the governance of four regulatory bodies would be easier to manage and assess.

7 Do you have views on how the regulators could be configured if they are reduced in number?

Please provide below:

Medical, Nursing, Scientific, Support Services.

Which section of the consultation would you like to go to next?

Options for sections of consultation to move to next:

Efficient regulation

Efficient regulation

13 Do you agree that the regulators should work more closely together? Why?

Agree

Further comments:

Closer links can aid communication, which will help with policy decisions, working practices and standardising regulatory practices.

AAPT strongly support the idea of a shared on-line register and the provision of both generic and profession specific standards. The model operated by the HCPC is likely a gold standard for registration.

There is always a fear amongst professionals that decision-makers may have no real experience when investigating concerns. Working in conjunction with others

may help highlight the independence and fairness of the regulators.

14 Do you think the areas suggested below are the right ones to encourage joint working? How would those contribute to improve patient protection? Are there any other areas where joint working would be beneficial?

Agree

How would those contribute to improve patient protection?:

Patient protection will be improved if all the regulators are adhering to shared standards and practices.

Are there any other areas where joint working would be beneficial?:

We are concerned that this could turn into a 'one size fits all' system, which wouldn't work in some circumstances (depending on the profession/professional under scrutiny).

Bereaved people can be significantly distressed by actions that are actually appropriate and effective, due to their anger manifesting in a simple thing being completely misrepresented. This could possibly put an individual under scrutiny for simply carrying out their duties. Equally, someone could be consistently under performing but not being reported due to their position, a lack of public concern only that of colleagues, etc. Joint working does have benefits in that there is more likelihood these issues will be understood with reference to a wider pool of experience, but the exact framework for joint working needs to be agreed by the with professional bodies.

15 Do you agree that data sharing between healthcare regulators including systems regulators could help identify potential harm earlier?

Agree

Further comments:

Yes. Sharing issues, lessons learned, near misses, etc. is essential across the board. Allows other organisations to see gaps in their own service and take corrective action before anything happens there.

16 Do you agree that the regulatory bodies should be given greater flexibility to set their own operating procedures?

Agree

Further comments:

All operating procedures need to be clear and fair. If joint working is to be introduced, there needs to be some operating procedures that will form an equal position and solid foundation for all professional bodies and regulators to build on. This will require careful monitoring.

17 Do you agree that the regulatory bodies should be more accountable to the Scottish Parliament, the National Assembly for Wales and the Northern Irish Assembly, in addition to the UK Parliament?

Agree

Further comments:

Countries in/around the UK work in different ways, so this would be reflected in practices. As long as common standards are applied to all - practice should be standardised and accountable regardless of where the practitioner is working and which parliament they fall under.

18 Do you agree that the councils of the regulatory bodies should be changed so that they comprise of both non-executive and executive members?

Agree

Further comments:

Yes. All the regulatory bodies need to have non-exec and exec members who have a diversity of skills amongst them, but hold a common goal to support the regulatory body.

19 Do you think that the views of employers should be better reflected on the councils of the regulatory bodies, and how might this be achieved?

Disagree

Further comments:

Not necessarily the employers but certainly views from professional bodies. Sadly, due to the vast amount of professions sitting under an employer such as an NHS Trust, there is often little understanding of individual professionals' roles. There is also a lack of equality between NHS Trusts, as can be seen in areas such as flexible working and gaining funding for professional training and conferences. This is also the case for council-based employees. We're not convinced an employer, unless it is someone specific to the profession, will add much value and/or be impartial. A professional body's view is more realistic and current.

20 Should each regulatory body be asked to set out proposals about how they will ensure they produce and sustain fit to practise and fit for purpose professionals?

Agree

Further comments:

Potentially - but for a gold-standard regulator like the HCPC, these are regularly reviewed and with the bold vision of this consultation it is vital to not reinvent the wheel.

21 Should potential savings generated through the reforms be passed back as fee reductions, be invested upstream to support professionalism, or both? Are there other areas where potential savings should be reinvested?

Both

Are there other areas where potential savings should be reinvested?:

Further comments:

There is a need to keep fees as low as possible for all registrants, but any reinvestment of fees that does take place should be communicated to the members to aid their understanding of what the regulatory body is doing on their behalf.

Which section of the consultation would you like to go to next?

Options for sections of consultation to move to next:

Impact assessment and Equality analysis

Impact assessment and Equality analysis

22 How will the proposed changes affect the costs or benefits for your organisation or those you represent?- an increase- a decrease- stay the same.Please explain your answer and provide an estimate of impact if possible.

Increase

Please explain your answer and provide an estimate of impact if possible. :

I can imagine we will see an increase, but we feel this is expected if we are to gain statutory regulation, which is what we are trying to achieve. If the cost was more but the entire profession was accountable, and the public protected, this would be money well spent.

23 How will the proposed changes contribute to improved public protection and patient safety (health benefits) and how could this be measured?

Please provide below:

Audits demonstrate effectiveness and these are easy to undertake. Public protection is important and so is that of the employee, especially as there is now something of a compensation and blame culture. It must be recognised that most people do not go to work each day to deliberately cause harm however sometimes circumstances bring complications. There will be more professions regulated, which on a whole will reassure patients and the public, as they have more confidence in professionals who are regulated, and standards will rise across the professions which will provide a better service for all.

24 Do you think that any of the proposals would help achieve any of the following aims:- Eliminating discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010 and Section 75(1) and (2) of the Northern Ireland Act 1998?- Advancing equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it?- Fostering good relations between persons who share a relevant protected characteristic and persons who do not share it?If yes, could the proposals be changed so that they are more effective?If not, please explain what effect you think the proposals will have and whether you think the proposals should be changed so that they would help achieve those aims?

No

If you agree, could the proposals be changed so that they are more effective?:

N/A

If you disagree, please explain what effect you think the proposals will have and whether you think the proposals should be changed so that they would help achieve those aims? :

We fail to see how these proposals specifically will achieve these aims. These aims should be the cornerstone of professional practice and Government policy in all areas, not just this sector.

Which section of the consultation would you like to go to next?

Options for sections of consultation to move to next:

End of consultation

Closing permissions

How we will use your response

Yes

Yes

Your response, Your name (individual name), Your organisation's name

How was the consultation

Help us improve how the department runs consultations by answering the following questions:

Very satisfied

Further comments::

Very satisfied

Further comments::

Would you like to receive information about other DH consultations?

Yes