

## CHRE-News

### Exciting challenges in 2011

We look forward to the challenge of preparing for our expanded role and changed status as set out in the Health and Social Care Bill, Subject to parliamentary approval these include:

- Overseeing the regulation of social work professionals in England
- Setting the standards and quality assuring voluntary registers of unregulated groups connected with health, care and well-being
- Quality assuring appointments to the health professional regulators' councils.

Our name is to change to the **Professional Standards Authority for Health and Social Care** and we are to be funded through a levy on the professional regulators and from chargeable fees.

We are presently working to [deliver advice to the health ministers](#) who asked us what modern and efficient adjudication (the end point of the fitness to practise process when evidence is heard by a panel), could look like. Associated with this is whether any sanction should be imposed in a case where the fitness to practise of a health professional has been impaired. We will be learning from the preparatory work done for OPHA.

In this issue of CHRE-news issue we feature a thought-provoking article on the role of ethics in health professional education. The article is by Carolyn Roberts of the [Ethox Foundation](#) and she welcomes your feedback on some key points made in her article. We are therefore providing a [short online questionnaire](#) for you to respond to five simple questions – it should take you no more than a few minutes to give your views.

This month we held a meeting in London with people from community and faith groups who represent those communities that are under-represented in our Public Stakeholder Network. In this CHRE-news we also share with you the approach to patient and public engagement that is used by the [Scottish Health Council](#).

We started 2011 in our new office at 157-197 Buckingham Palace Road, SW1. We are pleased with this positive move – although we are still waiting for our telephone lines to be reconnected and apologies to any of you who have had difficulty contacting us. Our alternative telephone number is 020 7045 4841.

We hope the new office and our new legislation mark a good year for CHRE.

**Harry Cayton**  
Chief Executive, CHRE

# The Scottish Health Council's patient and public engagement model

The [Scottish Health Council](#) was established in 2005 to ensure that the views of patients, carers and the public are properly taken into account by the NHS. Its role is to improve how the NHS in Scotland involves people in decisions about health services. The Scottish Health Council supports the NHS in Scotland to share good practice, exchange ideas and develop new approaches on how to involve people in shaping local health services and in decisions about their own treatment and care. This year has seen the Scottish Health Council introduce a revised approach with the establishment of functional teams with national responsibilities in the following areas:

- [Community Engagement and Improvement Support](#)
- The Participation Network
- Participation Review

Key features of this revised approach include a stronger focus on community engagement, more proactive and tailored support for NHS Boards, and the establishment of a national team to report on how NHS Boards consult on major service change.

The organisation also led on the development of the [Participation Standard](#), published in August 2010. The standard sets out what NHS Boards have to do to ensure that people can influence the care they receive and shape how services are designed. It means that, for the first time, comparable information on how NHS Boards in Scotland involve patients and the public can be collected and analysed. It produced a [Participation Toolkit](#) containing guidance for healthcare professionals on a range of approaches to involving patients and the public.

The Scottish Health Council is part of NHS Quality Improvement Scotland which will become part of a new scrutiny and improvement body, Healthcare Improvement Scotland, in April 2011.

**Rosemary Hill**  
**Participation Network Manager,**  
**Scottish Health Council**

## My vision: introducing ethics in healthcare education

I want to improve the quality of healthcare. Don't we all? My aspiration is to improve the quality of care by improving the quality of ethical decision making by all health professionals. My vision is one in which ethics is taught by ethicists in all undergraduate and postgraduate training courses; where ethics and values form part of continuing professional development and induction programmes; and, where healthcare managers have a code of ethics to which they subscribe.

The curriculum statement (2007) of the RCGP encompasses the learning outcomes I would like to see for each healthcare profession. I would like to see a core curriculum for clinical ethics implemented via multi-disciplinary education and training. Most importantly each health care practitioner needs to be aware they are making ethical and value based decisions in each healthcare encounter (RCGP,2007).

What the RCGP statement does not make explicit is the need for health professionals to stand up for the rights of patients and for professional standards. The NMC guidance (2010) 'Raising and escalating concerns' helps but, I believe that improving ethics education and training would better enable staff to raise and escalate concerns by helping them to articulate their concerns and to provide ethical justification for them.

Improving ethical decision making by health care professionals is one element in delivering ethical care. Most healthcare professionals are semi-autonomous employees. Ethical, value based care also requires ethical decision making by managers and a general awareness of the ethical dimensions of healthcare at all levels. Bloom et al (2010) found a relationship between quality of care in hospitals and the quality of management. Recently, the Advisory Group on assuring the quality of senior NHS managers (DH, 2010) recommended that there be a new statement of professional ethics and standards for NHS managers. Let's hope this comes into being.

**Carolyn Roberts**  
**Chairman, Ethox Foundation**

[We welcome your feedback to this article and invite you to complete this short questionnaire](#)

### Refs

- Bloom et al (2010) [Management practices in the NHS](#). Centrepiece. Winter 2009/10 cited by King's Fund 'Managers and the NHS' DH (2010) Report of the Advisory Group on assuring the quality of senior NHS managers'
- RCGP (2007) [Curriculum statement 3.3 Ethics and Values based Medicine](#)

## New project - modern and efficient adjudication

We have been asked by health ministers for our advice on what modern and efficient adjudication of fitness to practise would look like. Adjudication is the end point of the fitness to practise process – when evidence is heard by a panel, who decide if a health professional's fitness to practise is impaired and therefore whether any sanction should be imposed.

The Fifth Report of the Shipman Inquiry (2005) recommended that this stage of the process should be more independent of the health professional regulators. A new organisation, the Office of the Health Professions Adjudicator, was planned, but following a recent consultation, the Government concluded that OHPA would close and changes would be made to the regulators to strengthen the independence of this part of fitness to practise.

Our project will build on the work that OHPA has already done, and we have two aims. First, we will describe what a 'modern and efficient' adjudication process should look like, based on what we know from our work on final fitness to practise decisions, and learning from views, thoughts and experiences of the regulators, patients, the public, healthcare employers, and anyone else with an interest in this area of policy.

Alongside this, we will take forward what OHPA have produced so far to modernise the adjudication stage, and use this to identify specific recommendations for the health professional regulators.

Information about the project will be posted on the CHRE website. Please visit: <http://www.chre.org.uk/satellite/359/> for more details.

**Kate Webb**  
**Senior Policy Analyst**  
**CHRE**