QE 21 Ymchwiliad i Fil lechyd a Gofal Cymdeithasol (Ansawdd ac Ymgysylltu) (Cymru) Inquiry into the Health and Social Care (Quality and Engagement) (Wales) Bill Ymateb gan Cyngor Meddygol Cyffredinol Response from General Medical Council



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## General Medical Council response to the consultation on the Health and Social Care (Quality and Engagement) (Wales) Bill

- **1** Thank you for the opportunity to respond to the general principles of the Health and Social Care (Quality and Engagement) (Wales) Bill.
- 2 The GMC is a UK wide healthcare regulator with a dedicated office in Wales since 2005. We are an independent organisation that helps to protect patients and improve medical education and practice in the UK by setting standards for students and doctors. We support doctors in achieving (and exceeding) those standards and act when they are not met.

## **Quality Improvement**

- **3** We welcome the ambition to achieve a systematic approach towards quality improvement across the health service. We are committed to ensuring that opportunities to improve service quality are valued and built upon.
- Quality improvement is part of a doctor's responsibilities expressed in our core guidance 'Good Medical Practice' which states doctors "must take steps to monitor and improve the quality of [their] work". Regular engagement in quality improvement activities is also a requirement for revalidation as expressed in our guidance for doctors 'Supporting Information for Appraisal and Revalidation'. As such, we welcome the specific proposal for a Duty of Quality, which will reinforce existing commitments to delivering high-quality care across the health service.

## **Duty of Candour**

- We welcome the intention to introduce an organisational duty of candour, which would align Wales with legal requirements in England and Scotland. Our core guidance is clear that doctors must be open and honest with patients when things go wrong and that doctors have a responsibility to raise concerns where patient care may be compromised. The principles outlined in this Bill are in line with the professional duty of candour and the joint guidance we issued with the Nursing and Midwifery Council. This guidance reinforces that healthcare professionals must be open and honest with patients when things go wrong, alongside being open and honest with colleagues, employers and relevant organisations, and take part in reviews and investigations when requested.
- We believe the professional and legal duties of candour are mutually reinforcing and should not be viewed in isolation. Fostering a working culture in which all staff and patients value the opportunity to put things right and learn from mistakes if things go wrong, in a non-punitive manner, will help support health professionals to be open and honest when such events arise. Conversely, the act of individuals supporting and encouraging each other to raise concerns will help to support and nurture an open and honest culture across all levels of the organisation.
- **7** For this reason, we believe that introducing an organisational duty of candour would support existing guidance to strengthen both patient safety and transparency within the health service, which could lead towards a culture of quality improvement.

## **Citizens Voice Body**

- We welcome the aim to strengthen the voice of citizens across health and social care, in line with delivering person-centred care. We recognise the benefits a national Citizens Voice Body would bring; simplifying the complaints process for patients, while improving the ability of health and social care organisations to learn lessons when things go wrong with an individual's care, can only lead to greater patient safety.
- 9 We understand one of the policy aims supporting the creation of a new Citizens Voice Body is to ensure members of the public are supported with advice and assistance when making a complaint about their care. We've recently published <u>independent research</u> to help us understand why patients may make a complaint about a doctor to us, as opposed to other organisations within the complaints landscape. This research supports a programme of work we're introducing to help patients and the public get quicker and more effective resolutions to their concerns about doctors. We receive a large

number of complaints from the general public every year, but only a small number meet our threshold for investigation, which means the majority are often closed immediately. Following findings from the independent research, we will be working with external organisations to share advice on when the public should raise a concern with us, and we would be keen to work with any new citizen body if established, around this area.

10	I hope this submission is helpful to you and your colleagues. If you require
	any further information please contact, Policy & External Affairs
	Manager,

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