

# General Medical Council

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Rob Behrens, CBE  
Parliamentary and Health Service Ombudsman  
and Chair of the PHSO  
Millbank Tower  
30 Millbank  
Westminster  
London SW1P 4QP

Dear Rob,

## **The GMC's response to the PHSO's strategy consultation**

The GMC welcomes the PHSO's invitation to review its strategy objectives. We are pleased to have the opportunity to provide feedback and are keen to promote greater alignment in order to better support the UK healthcare landscape.

We are in the process of finalising our own strategy and aim to publish it this November. As promised in your conversation yesterday with Clare Marx, I am attaching the current draft that we will be discussing with our Council later this month. I think there is particular read across between your draft strategic objectives, and what we have set out in terms of two of our themes: 'Enabling professionals to provide safe care' and 'Making every interaction matter'.

In addition, throughout our strategy, we have put a strong emphasis on promoting equality, diversity and inclusion, partnership working and making evidence-based decisions – I think this chimes with the discussion at the August's Health and Social Care Regulators Forum sub-group on learning from the Covid-19 crisis, and PHSO's ambitions. We believe strongly in the importance of regulatory collaboration to ensure

that complaints are dealt with in the most appropriate and effective manner across the healthcare system.

We would be very happy to meet and discuss any of the above, or equally to share our experience of strategy development with your team if helpful.

### **Our role**

- 1.** The General Medical Council (GMC) is an independent organisation, accountable to Parliament with a mission to protect patients and improve medical education and practice across the UK. Specifically, we are mandated under the Medical Act (1983) to:
  - Decide which doctors are qualified to work in the UK and oversee UK medical education and training.
  - Set the standards that doctors need to follow, and ensure that they continue to meet these standards throughout their careers
  - Take action to prevent a doctor from putting the safety of patients, or the public's confidence in doctors, at risk.

### **Our Strategy**

- 2.** Our new corporate strategy runs from 2021-2025 and is due to be launched in January of next year. There are four key themes:
  - Enabling professionals to provide safe care
  - Developing a sustainable medical workforce
  - Making every interaction matter
  - Investing in our people to deliver our strategy

### **Specific comments on the PHSO's strategic objectives**

- 3.** In the following sections we set out our comments on each of the PHSO's strategic objectives and outline our own strategic thinking and activity where relevant. This may serve to highlight opportunities for mutual exchange and collaboration.
- 4.** We advocate the adoption of an evidence- and risk-based approach to ensure that regulation is right-touch and that the regulatory burden is proportionate to the potential for harm. We would be happy to discuss with you how this approach has informed our development in recent years.
- 5.** We would highlight the following areas as being particularly relevant given the current challenges presented by the COVID-19 pandemic:

- New ways of working: flexibility in how we work to better support systems and reduce bureaucracy. Ensure we safely enable new ways of delivering care (eg remote consultation).
- Workforce and wellbeing: mental health and wellbeing are a growing issue for public/patients, staff and the profession, and has a significant impact on retention of healthcare professionals.
- Patient involvement: needing to involve public in recovery plans and what systems will look like in the future.
- Inequalities: needing to take tangible action on inequalities highlighted by the pandemic (as employers and regulators).
- National/regional divergence: tailoring what we do to meet differences across nations and growing regional autonomy where appropriate.
- Collaboration: the need for closer collaboration between regulatory partners and other bodies to reduce bureaucracy and improve support to patients and healthcare professions.

**6.** Specifically in relation to the three PHSO objectives:

*Strategic Objective 1: Improving awareness of our service and access to justice*

- 7.** We support PHSO's commitment to accessibility and agree with the importance of a proactive and properly resourced outreach approach.
- 8.** Noteworthy here is the work on signposting that the GMC has been doing with PHSO and partners from the Nursing and Midwifery Council and the General Dental Council. Our Better Signposting project aims to support patients in navigating the complaints landscape and understanding our role, what we can and cannot investigate and the complaints process itself.

*Strategic objective 2: Delivering a transparent and rights-based service that is continuously improving to meet people's needs*

- 9.** We support PHSO's commitment to continuous improvement and ensuring that staff are representative of the communities they serve. The use of technology and online services to provide a better user experience and improve operations is also welcome, although we would stress the need to ensure that services are accessible and do not increase inequalities.
- 10.** This objective aligns closely with our strategic theme Making every Interaction Matter, which says that every person who interacts with us – through our processes or our communications – should be met with empathy and efficiency. This will include making sure that all our interactions are inclusive and tailored to individual needs.

- 11.** The GMC believes equality, diversity and inclusion (EDI) are critical to being an effective regulator and employer, and for this reason we have made it central to our new strategy. Under our [Supporting a Profession under Pressure](#) (SAPUP) programme we have commissioned research concerning fairness and initiated training such as human factors to ensure that unconscious bias is mitigated in decision-making and complaints handling.
- 12.** Our independent report on gross negligence manslaughter and culpable homicide, published in 2019, found that improvements in patient safety are most likely to come through local investigations into patient safety incidents which are focused on learning not blame. Organisations must take responsibility for ensuring that those who are involved in the investigation of local complaints make fair and unbiased decisions and are representative of the local system and that patterns of decision making are monitored and scrutinised.

*Strategic objective 3: Embed a culture of learning from mistakes to improve public services*

- 13.** Fostering a culture of learning from mistakes is critical to improving public services. Complaints about healthcare services are an incredibly valuable source of insight and feedback for the system which can contribute to important discussions about how to improve patient safety and reduce health inequalities. This is a core element in our new corporate strategy. It is vital that complaints handling is professionalised and that it contributes to continuous learning and improvement across the system. Complaints need to be handled consistently, fairly, at the right time, in the right place and at the appropriate level.
- 14.** The GMC has embedded learning from mistakes into all our guidance for medical education and medical practice, including leadership and professionalism, raising and acting on concerns and reflective practice. This concern is also reflected in our involvement with the Emerging Concerns Protocol.
- 15.** Critical to success will be ensuring adequate provision of training and support to the organisations and complaints handlers tasked with investigating and responding to complaints at a time when both are under considerable pressure. This should include training on equality, diversity and inclusion, unconscious bias, auditing and monitoring and the provision of meaningful, timely and fair feedback for all staff, to enable their ongoing learning and development and to mitigate concerns early on.
- 16.** Perhaps most importantly, the system needs to inspire confidence in those who both work within and use it. They need assurance that: their voices are heard and acted upon, to ensure lessons are learned from complaints, patient harms are identified, shared and resolved and improvements to the service are made and shared as a result.

**In summary**

It is essential for patient safety and service improvement that complaints are handled in a manner which is consistent and integrated across the UK healthcare system and welcome the PHSO's ambitions. We look forward to working collaboratively with you in the future. If there is anything in the above that you would like to explore further, please do not hesitate to let us know.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Tim Aldrich', is centered on the page. The signature is written in a cursive, flowing style.

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Attached: draft GMC Corporate Strategy 2021-25