

An agile model of regulation

**9th Annual Regulatory
Conference**

31 October 2016

**Maree Allison – Director of Fitness to Practise
Lindsay Thomson – Head of Corporate
Governance and Hearings**

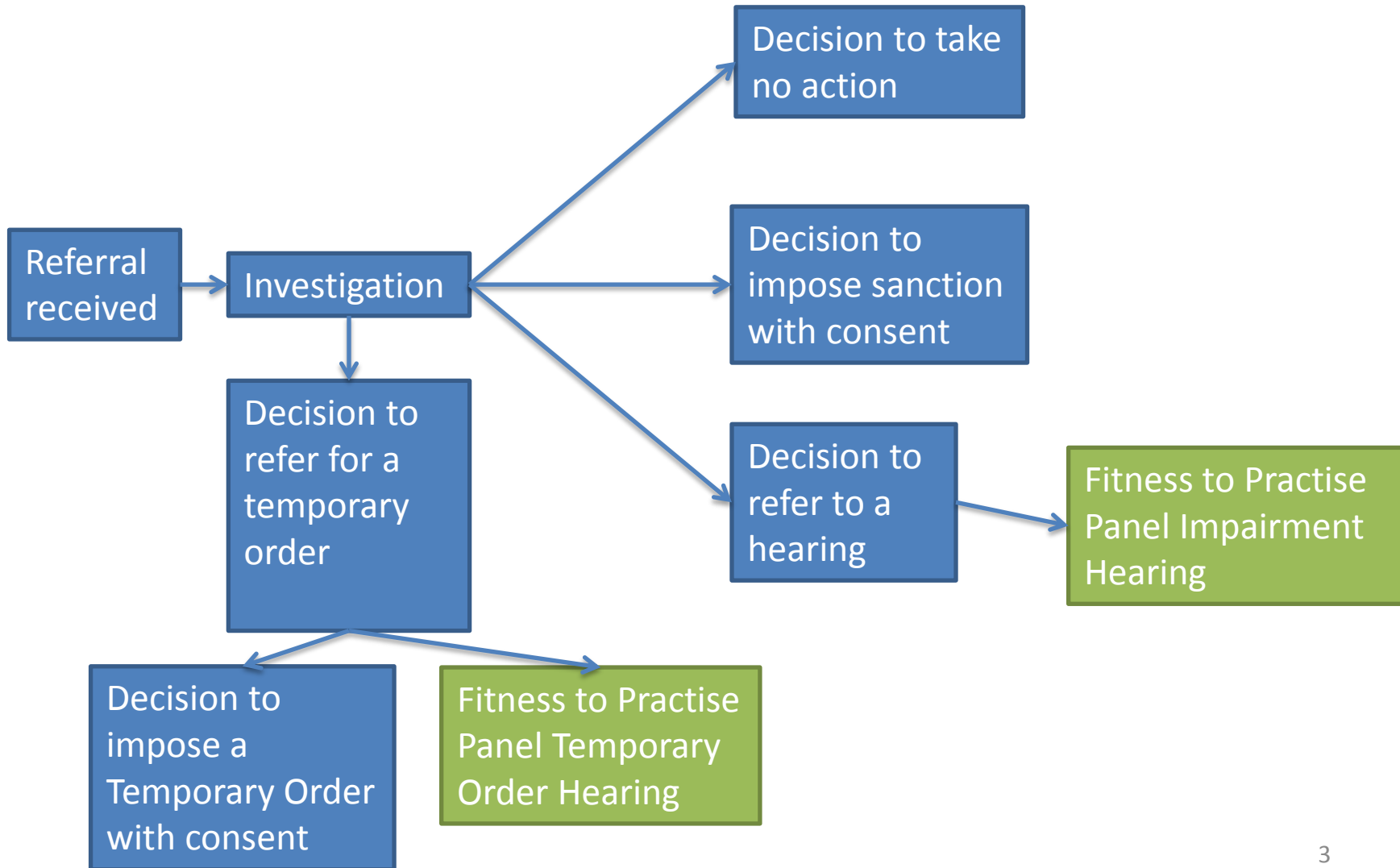


SCOTTISH SOCIAL SERVICES COUNCIL

- Established in 2001 under Regulation of Care (Scotland) Act 2001
- 100,000 registrants
- Growing to approx 160,000 by 2020
- Social workers
- Residential childcare workers
- Day care of children workers
- Adult care workers

- NDPB accountable to Scottish Government

Fitness to Practise Department Corporate Governance and Hearings Department



2016 Department of Health Consultation

- The Law Commissions of England and Wales, Northern Ireland and Scotland reviewed the regulation of health and (in England) social care professional regulation. The Law Commissions also considered the challenges posed by the report of the Public Inquiry into Mid Staffordshire NHS Foundation Trust. The Law Commissions reported on 4 April 2014 making recommendations for reform.
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- The four countries remain committed to the reform of UK health professional regulation and for this reason the Department of Health published a Written Ministerial Statement on 15 December 2015. This announced the UK Government's intention to launch a public consultation on the reform of healthcare professional regulation in Autumn 2016.
- **The consultation will take account of the Law Commissions' recommendations to simplify healthcare professional regulation and introduce greater consistency, but seeks to go beyond this. It will further identify policies aligned to the UK Government's priorities of better regulation, cost effectiveness and greater autonomy for the regulatory bodies, while maintaining and improving our focus on public protection.**

MODELS OF PROFESSIONAL REGULATION

Model 1	Model 2
Detailed primary legislation	Brief primary legislation
A formal order/regulation to change fitness to practise process	An amendment of/new Rules required to change fitness to practise process



MODEL 1 - DESIRE FOR REFORM

'At present the GMC and other regulators are dependent on the UK Government and Parliament to introduce new legislation every time they need to make changes to their structures and processes.

Our ability to protect patients and drive up standards of practice is being hampered by outdated legislation that is no longer fit for purpose – it needs to be swept away because it is cumbersome, inflexible and far too difficult to reform.'

NMC chief executive and registrar Jackie Smith said: "We are continually constrained by a legal framework which ties us to inefficient practices.

In order to become a modern, effective and efficient regulator, we need a legislative framework which is less prescriptive to allow us to be flexible and responsive in a constantly changing regulatory and healthcare environment.'

We are spending more than £44m – which is nearly 80% of our budget – on fitness to practise hearings. We are holding 22 hearings a day, which is equal to Birmingham and Southwark crown courts put together. This is unsustainable within our current framework.

MODEL 2 – IN PRACTICE

Regulation of Care (Scotland) Act 2001

- Power to have a register
- Power to grant registration
- Power to suspend and remove from the register
- Power to amend an entry

How we do those things is set out in Rules

- “The Council shall, **by rules** made with the consent of the Scottish Ministers, determine circumstances in which, and the means by which-
- (a) an entry relating to a person in the register maintained by the Council may be removed from the part in which it appears...”

Subordinate Legislation

- Risks and benefits

SSSC PLANNED RULE CHANGES

6 month cycle





SSSC CONDUCT RULES

- 2003
- 2004
- 2004A
- 2005
- 2006
- 2006A
- 2009
- 2009A
- 2009B
- 2010
- 2011
- 2012
- 2013

Fitness to Practise Rules 2016



SSSC Rules – Purpose of Key Changes

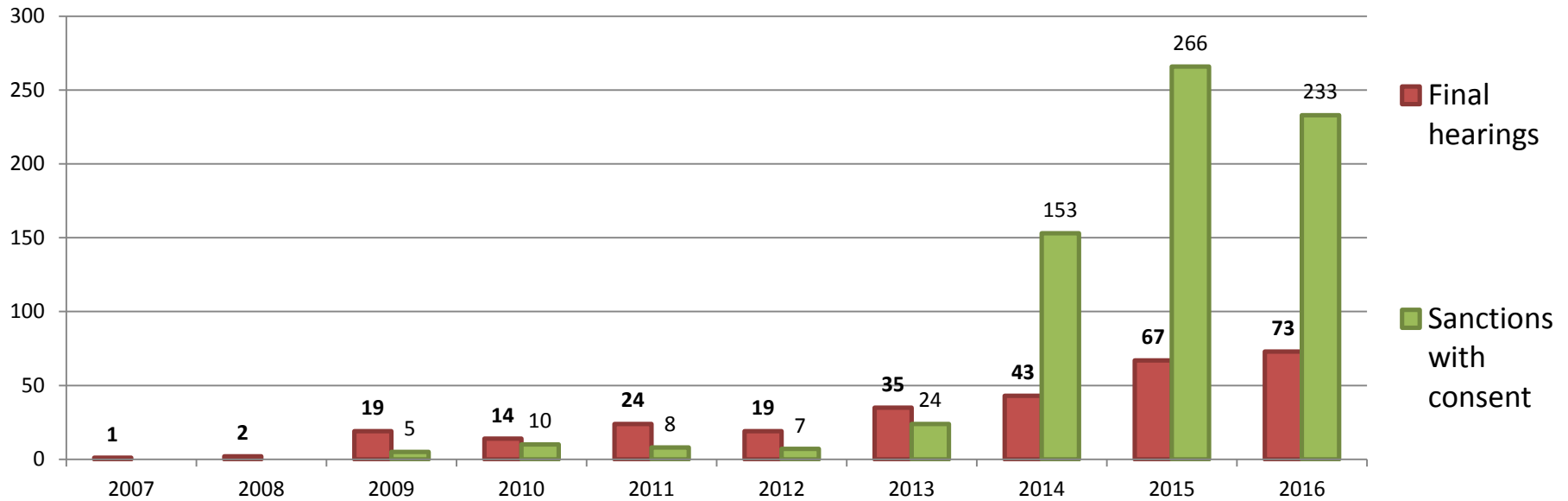
Re-balancing control between committee and regulator

Reflecting Regulatory Best Practice

Managing Risk

Assisting worker

HEARINGS/CONSENTS





CONCLUSION

AGILITY

**continuously moving towards
improvement, or mitigating risk**