

# Healthcare Regulation - deciding when statutory regulation is appropriate

# About us

FODO – The Association for Eye Care Providers is the leading national association for eye care providers working in primary and community care settings. Each year our members provide over 18 million eye examinations and offer a wide range of other eye care services across the UK.

We welcome the opportunity to submit our views on the Department of Health and Social Care (DHSC) Provider Selection Regime (PSR) consultation.

## **Response to consultation questions**

Is it OK for the Department of Health and Social Care to contact you about your response? \*

⊠Yes

□No

Would you like to receive information about other DHSC consultations? \*

⊠Yes

□No

What is your email address

healthpolicy@fodo.com

Are you responding as an individual or an organisation?

 $\Box$ An individual

⊠An organisation

Are you responding as a healthcare professional?

□Yes

⊠No

Which of these best describes you/your profession?

□NHS or health service delivery

□Government or civil service

□Other public sector

□Social care

□Private sector

□Charity or third sector

□Student

□Retired

Other

The professional association for eye care providers in the UK

Which area of the UK do you live in?

England

□Scotland

□Northern Ireland

□Wales

□I live outside the UK

The Equality Act 2010 defines a person as disabled if they have a physical or mental impairment, that has a substantial and long-term (that has lasted or is expected to last at least 12 months) and adverse effect on the person's ability to carry out normal day-to-day activities.

Do you consider yourself to be disabled?

□Yes

⊠No

A long-term health condition is a health problem that requires ongoing management over a period of years or decades. This includes conditions such as arthritis, depression or anxiety, diabetes, asthma, or sight or hearing loss

Do you have a long term-condition?

□Yes

⊠No

# The criteria for deciding whether to regulate a profession

Do you agree or disagree that a qualitative and quantitative analysis of the risk of harm to patients is the most important factor to consider when deciding whether to regulate a health or care profession?

⊠Agree

Disagree

□I don't know

Please provide reasons for your answer

It is logical for risk of harm to be the basis for any form of regulation, and nature, causality, severity and likelihood, seem to be appropriate tests to apply when assessing risk in health and social care.

Thus, we agree with the PSA in 'Right Touch Regulation', as cited, that risk assessment should involve both a qualitative and quantitative element:

- risk quantification seeks to gauge the likelihood of harm occurring and its severity (for example, the level of impact the harm would have on an individual)
- while risk qualification considers the nature of the harm (for example physical, emotional, psychological) and understanding how and why it occurs.

Our assumptions would be that these broad parameters embrace population risk as well as risk to individuals and that assessment of these aspects of risk would be evidence-based as far as is possible.

Do you agree or disagree that proportionality, targeted regulation and consistency should also be considered in deciding whether to regulate a health or care profession?

⊠Agree

Disagree

□I don't know

Please provide reasons for your answer

These are three of the five Better Regulation principles which it makes sense also to apply to health and care regulation. The other two principles are transparency and accountability which we would also wish to see followed by government in deciding whether or not to regulate or deregulate a health or care profession (or in future to merge or abolish an existing regulator) where the evidence base for change should solid and incontrovertible. Removing a profession from statutory regulation

Do you agree or disagree that the currently regulated professions continue to satisfy the criteria for regulation and should remain subject to statutory regulation?

⊠Agree

□Disagree

□I don't know

Please provide reasons for your answer

We agree with the four UK governments that

• "the current make-up of regulated and unregulated professions strikes the right balance in addressing the risks posed by health and care professionals without imposing unwarranted burdens."

We also therefore agree with, and welcome the clarity, that the four governments do not

• "intend to remove any professions that are currently subject to statutory Regulation".

This will help ensure all health care workers can focus on meeting challenges of the Covid backlog and continue to contribute to meeting growing need for health and care across the UK.

In our view, the current regulatory landscape is the correct one and that the mix of regulated and unregulated professions should not be changed (except for the introduction of statutory regulation for physician associates and anaesthesia associates as noted).

The current regulatory landscape, professions which are regulated and the number of regulators have been decided over the years through full debates in Parliament which have explored the risks and balances and reached, in our view, the right conclusions especially in respect of eye care clinicians. There are of course details that need to be tidied up such as all health and care regulators having the same ranges of powers, sanctions and terminology which the public can understand as the Law Commissions have long recommended, but this does not require radical overhaul.

The benefits of regulation of clinicians for the public is that regulation is 'provider model agnostic' and so whether health care is NHS or self-funded all patients can expect to be treated to the same professional standards.

## **Unregulated Professions**

Do you agree or disagree that currently unregulated professions should remain unregulated and not subject to statutory regulation?

□Agree

□Disagree

⊠I don't know

#### Please provide reasons for your answer

We are not sufficiently aware of the detail of all unregulated professions to be able to make a judgement. However, for eye care we are confident that the current regulatory levels are appropriate to risk and employment models and have operated well in ensuring the public is protected from harm, visual impairment and blindness.

### Before you submit your response

We have a few questions we would like to ask to help us improve future consultations.

## How satisfied are you with the consultation process?

⊠Very satisfied

□Satisfied

□Somewhat satisfied

□Disappointed

#### How did you hear about the consultation?

Received an email from Department of Health and Social Care