Dear Sir/Madam

Consultation on proposals for a ‘No-Blame’ Redress Scheme in Scotland for harm resulting from clinical treatment

The General Pharmaceutical Council (GPhC) is the regulator for pharmacists, pharmacy technicians and registered pharmacy premises in Great Britain. Our role is to protect, promote and maintain the health, safety and wellbeing of patients and the public who use pharmaceutical services in England, Scotland and Wales.

We have a statutory role in relation to ‘system’ regulation (as we regulate registered pharmacies) as well as ‘professional’ regulation of individual pharmacists and pharmacy technicians. Our main work includes:

- setting standards for the education and training of pharmacists, pharmacy technicians and pharmacy support staff, and approving and accrediting their qualifications and training
- maintaining a register of pharmacists, pharmacy technicians and pharmacies
- setting the standards of conduct, ethics and performance that pharmacy professionals have to meet throughout their careers
- setting the standards of continuing professional development that pharmacy professionals have to achieve throughout their careers
- investigating concerns that pharmacy professionals are not meeting our standards, and taking action to restrict their ability to practise when this is necessary to protect patients and the public
- setting standards for registered pharmacies which require them to provide a safe and effective service to patients
- inspecting registered pharmacies to check if they are meeting our standards

We welcome the opportunity to respond to the consultation on a ‘No-blame’ redress scheme in Scotland for harm resulting from clinical treatment. Whilst the consultation document as a whole is of interest to us we have limited our response to areas where we feel our work is directly relevant to the proposals.

We support the Scottish Government’s aim of improving openness and transparency across NHS Scotland and its work to promote a culture of constant learning and improvement. We believe that health professionals and health provider organisations being open, honest and learning from mistakes when things go wrong is fundamental to improving quality and safety, and to upholding public confidence. It is also important that when an individual is harmed as a result of poor clinical treatment that they have access to appropriate redress.

Any scheme that is introduced needs to be fair and transparent and contribute to a culture of openness and learning. The scope of the scheme also needs to be clearly communicated so that patients, health professionals
and care providers are clear on when the scheme may and may not apply, particularly with regard to the proposal that the scheme be restricted to clinical treatment provided by individuals directly employed NHS Scotland in the first instance.

Careful consideration also needs to be given to the interplay between the proposed scheme and other potential outcomes or actions such as regulatory sanctions which are imposed to protect patients. This is something that we believe is not clear from the current proposals. It will be important that decisions about whether to compensate an individual under the scheme don’t negatively impact on, or unduly influence any fitness to practise proceedings that a statutory independent regulator such as the GPhC may be progressing in respect of one or more of its registrants. These processes must be independent of one another. This is an area that we would be keen to explore further with the Scottish Government in terms of both our regulation of pharmacy professionals, as well as registered pharmacies, to help ensure that the scheme effectively operates alongside the functions of all relevant organisations in Scotland.

Notwithstanding the fact that the intention is to replicate the Swedish ‘No Blame’ model, we feel careful consideration should be given to the reviewing the terminology used. We have learnt that consistent use of appropriate terminology is a factor in ensuring the appropriate culture exists and believe that where possible terminology should replicate that used in other related policies such as duty of candour. A culture of openness is critical to improving safety and learning from mistakes and will thrive if there is less emphasis on blame and more focus on transparency, speaking up and learning from mistakes when things go wrong. We have worked hard, alongside governments across Great Britain to change the focus from ‘blame’, or legal liability, towards accountability, responsibility, openness and transparency.

It also will be important to give consideration to how the proposed scheme takes account of and links to other relevant policy work around ‘apologies legislation’ and duty of candour that are also part of the drive for cultural change in healthcare.

We would be happy to discuss the points raised in this response, or any other aspects of the GPhC’s work. If this would be of help to you, please do not hesitate to contact me on the details below.

Yours sincerely

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