

**P**rofound changes are taking place across the healthcare workforce to enable the affordable delivery of high standard of care to meet the growing and complex needs of our population. However, the expansion of roles and the devolution of responsibility cannot expand unchecked without consideration of the bodies that exist to protect the patients that these professions serve, hence the latest Department of Health and Social Care consultation “Regulating professionals, protecting the public”.

The basis for the review is the recognition of the rigidity and inflexibility of the current regulatory systems and the need for a faster, fairer, more flexible and affordable system. At the heart of this remains the core regulator role, which is to protect the patient, not to represent the professions.

I am pleased that the current costly and time-consuming fitness-to-practice hearings are set for reform. I am also pleased that there will be a standardisation of grounds for action across all regulators, of lack of competence and misconduct. Variation between regulators is counter to the common core principle of patient protection.

I have always felt that in many instances referral to the regulator should be the last resort when all other local actions or interventions have failed. In the new proposals there is also the option for cases to be concluded earlier

# REGULATION



**Sarah May, Deputy Chief Executive of the IBMS, on a new consultation and the future of regulation.**

if a registrant accepts both the findings and the proposal, which will reduce both cost and time. Importantly, there will be the option for an outcome to be challenged if it is felt to be insufficient to protect the public.

In essence, this consultation presents reform proposals that will see the approach to regulation more standardised across professions, more flexible in its application and more able to adapt to changes in workforce.

Of particular note is the proposal for regulators to annotate their registers with information on specific skills and experience – something that will be of importance as scientists increase the clinical elements of their roles.

I want to conclude with a suggestion for a solution to a very immediate problem regarding the registration of our own trainees. For our trainees to become registered, their registration training portfolios must first be verified by an

external verifier, and herein lies a problem. Despite endless training sessions we do not have enough people willing to be verifiers and this shortage also extends to our Specialist Portfolio assessors, hence the delays.

My proposal is that all laboratories approved for registration and specialist training should have at least one individual who is an Institute registration verifier, or Specialist Portfolio assessor willing to do two verifications or assessments a year. In that way everyone who benefits from the system also contributes to it, enabling us to deliver a faster, better service for our trainers and trainees. An acceptable and fair solution?

**Sarah May**  
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