

Cafodd yr ymateb hwn ei gyflwyno i ymgynghoriad y [Pwyllgor Iechyd a Gofal Cymdeithasol](#) ar [Flaenoriaethau'r Chweched Senedd](#)

This response was submitted to the [Health and Social Care Committee](#) consultation on [Sixth Senedd Priorities](#)

HSC PSS 50

Ymateb gan: | Response from: Yr Undeb Amddiffyn Meddygol | Medical Defence Union

Blaenoriaethau cychwynnol a nodwyd gan y Pwyllgor **Initial priorities identified by the Committee**

Mae'r Pwyllgor wedi nodi nifer o flaenoriaethau posibl ar gyfer ei waith yn ystod y Chweched Senedd, gan gynnwys: iechyd y cyhoedd a gwaith ataliol; y gweithlu iechyd a gofal cymdeithasol, gan gynnwys diwylliant sefydliadol a lles staff; mynediad at wasanaethau iechyd meddwl; arloesi ar sail tystiolaeth ym maes iechyd a gofal cymdeithasol; cymorth a gwasanaethau i ofalwyr di-dâl; mynediad at wasanaethau adsefydlu i'r rhai sydd wedi cael COVID ac i eraill; a mynediad at wasanaethau ar gyfer cyflyrau cronig tymor hir, gan gynnwys cyflyrau cyhyrsgerbydol.

The Committee has identified several potential priorities for work during the Sixth Senedd, including: public health and prevention; the health and social care workforce, including organisational culture and staff wellbeing; access to mental health services; evidence-based innovation in health and social care; support and services for unpaid carers; access to COVID and non-COVID rehabilitation services; and access to services for long-term chronic conditions, including musculoskeletal conditions.

C1. Pa rai o'r materion uchod ydych chi'n credu y dylai'r Pwyllgor roi blaenoriaeth iddynt, a pham?

Q1. Which of the issues listed above do you think should be a priority, and why?

The Medical Defence Union (MDU) is of the view, that of the issues listed above, the priority for the Committee during the Sixth Senedd should be the health and social care workforce – particularly organisational culture and staff wellbeing.

With healthcare services working under immense pressure during the pandemic, it is inevitable that a wave of clinical negligence claims will soon arrive for incidents that occurred when the NHS in Wales was essentially on a war-footing.

We are concerned that doctors and other healthcare staff - responding to Covid-19 - are likely to be judged after the public memory has faded, by standards unreflective of the conditions during pandemic, because the detail of the extraordinary circumstance will have been long forgotten.



From the ophthalmologist working in A&E for the first time in 20 years to help with a staffing crisis, to a dentist only able to provide a diagnosis for a patient over an online teleconference platform. We are already seeing complaints made about NHS staff (such as issues with remote consultations, delayed treatment etc – all Covid19 related) which could eventually turn into claims. Not only will Covid-19 related clinical negligence claims negatively impact healthcare workers, but they will also negatively impact NHS funds and, ultimately, the taxpayer.

The emotional turmoil on NHS staff, of being subjected to lengthy clinical negligence proceedings long after the event and with their then team all in different roles, can be a deeply traumatic experience. It is not uncommon for NHS staff subject to a claim to suffer from mental health problems as a result. From being cross examined in court, to lengthy legal exchanges; all can take their toll. This cannot be a legacy of the pandemic – after all their sacrifices.

**What impact or outcomes could be achieved through any work by the Committee?
When any Committee work should take place?**

As soon as practically possible. NHS staff will need supporting if clinical negligence claims are made against them related to the pandemic. The Welsh Government must start giving active thought to how this can be done, now. With the Committee focusing on this issue, it would raise its prominence and put it on the agenda. The UK Government will shortly be consulting on potential steps to address the rising cost of clinical negligence and ways to reform the system, so the wider issue of staff wellbeing in such cases fits with those discussions.

Whether there are any specific groups, communities or stakeholders that the Committee should involve or hear from in any work?

The Medical Defence Union would be delighted to be part of that work. The Committee would also benefit from hearing from the Academy of Medical Royal Colleges, the Hospital Consultants and Specialists Association the British Medical Association (BMA). The Committee would also likely wish to hear from patient representatives.

Unrhyw faterion eraill

Any other issues

C3. A oes unrhyw faterion eraill yr hoffech dynnu sylw'r Pwyllgor atynt?

Q3. Are there any other issues you wish to draw to the Committee's attention?

Through the Department for Health and Social Care, the four governments of the UK are proposing wide ranging reform to healthcare professional regulators in the UK.

In our response to the consultation - *Regulating healthcare professionals, protecting the public* - we have urged the government to now deliver the promised reforms without delay. The GMC have been placed at the front of the queue, which is welcome. However, in our response, we have also urged the government to ensure that the GDC is not far behind.

Doctors and dental professionals deserve a regulatory regime that is fair, proportionate, and managed in a timely manner. Healthcare professionals across the UK have waited a long time to see their regulators reformed and these proposals are a hugely significant step forward. Amongst the proposals is a new three-tier fitness to practise procedure, which if introduced correctly, could speed up the process - something which healthcare professionals would welcome. However, we also have concerns with some aspects of the proposals, such as plans to remove the health of a registrant as a ground for fitness to practise proceedings. We fear this could have unintended consequences.

We would welcome the Committee focusing on how a new regulatory regime for healthcare professionals can be best implemented, ensuring that healthcare workers across Wales have are regulated in a fair, proportionate and robust way – with reforms introduced as quickly as possible.