

## Response ID ANON-8U9V-Z3HV-7

Submitted to **Consultation on a Patient Safety Commissioner Role for Scotland**

Submitted on **2021-05-28 10:16:29**

### Questions

**1 Do you agree that the Patient Safety Commissioner role should first focus on medicines and medical devices, as set out in the Cumberlege Review?**

Yes

**Please give reasons for your response in the box below. Please be as specific as you can, and include any resources or references to evidence on this topic that we should consider.:**

Given the scope of the report and the issues that were identified within it regarding the three main areas looked at, it would make sense for the PSC to start their work there, using the lessons already learned, to make improvements to patient safety and minimise the risk of harm. The scale of the role is potentially very large, therefore setting initial priorities is useful to help public understanding of what the PSC is able to do. However, it should then be up to the PSC to work flexibly and set their own priorities as they see fit to ensure it can be directed to areas where patient safety is at risk and respond to issues the public raise.

**2 If the role were to expand in the future, which specific aspects of patient safety do you feel the Patient Safety Commissioner should focus on?**

**Please give reasons for your response in the box below. Please be as specific as you can, and include any resources or references to evidence on this topic that we should consider.:**

Expansion to the PSC role should be guided by the information received by them from stakeholder groups i.e. patients, families, professional bodies, research, etc. raising concerns over patient safety issues, where a trend has been identified or where an individual incident may give rise to the suspicion of a broader issue.

**3 Do you believe that the Patient Safety Commissioner should be independent of the Scottish Government?**

Yes

**Please give reasons for your response in the box below. Please be as specific as you can, and include any resources or references to evidence on this topic that we should consider.:**

It is important that this new role is entirely independent to ensure that investigations can be carried out without undue influence.

**4 Do you believe that the Patient Safety Commissioner should be independent of the NHS?**

Yes

**Please give reasons for your response in the box below. Please be as specific as you can, and include any resources or references to evidence on this topic that we should consider.:**

It is important that this new role is entirely independent to ensure that investigations can be carried out without undue influence.

**5 Who should the Patient Safety Commissioner be accountable to?**

**Please give your answer, and reasons for your response, in the box below. Please be as specific as you can, and include any resources or references to evidence on this topic that we should consider.:**

As per the Cumberlege Report, we agree the PSC should report to the Parliamentary health and social care committee to ensure independence. This would allow the PSC to keep the committee updated on their work and for referrals to be made from the committee to the PSC for investigation.

**6 How much do you know about existing policies and organisations already in place (listed in table 1 on page 11 of the consultation document) to support patients' voices to be heard within the healthcare system?**

**Please select the answer which best describes your level of awareness:**

Very aware (I have heard of all of them)

**Please give reasons for your response in the box below. Please be as specific as you can, and include any resources or references to evidence on this topic that we should consider.:**

We at the RPS are advocates of person-centred care and shared decision making. We work with a number of charities and organisations across the UK to strengthen the voice of patients.

**7 In your view, despite the existing ways patients can make their voices heard (listed in table 1 on page 11 of the consultation document), why do you think people still feel that this is not happening?**

**Please give your response in the box below. Please be as specific as you can, and include any resources or references to evidence on this topic that we should consider.:**

Despite there being multiple ways patients can make their voices heard, we don't feel the majority of people will use them for a number of reasons including –

Lack of awareness about how to make their voice heard  
Not empowered to make their voice heard  
Systems are too complex to navigate  
Do not feel they are qualified to question or challenge situations  
Lack of awareness of an issue or that they have not been heard until too late  
Reluctance to speak badly of a clinician they have an existing relationship with or like as a person  
Fear of impact on their care or the care of a family member  
Do not understand or do not want to take on bureaucracy  
Do not want to make a fuss  
'Them' and 'us' situation in some organisations

As pharmacists, the first two principles of our profession are to 'provide person-centred care' and to 'work in partnership with others' including patients. This means we are passionate about ensuring patients have a voice and empowering them to use it. The role of PSC would give patients a point of contact to direct their voice and concerns and the reassurance that if they do, someone will listen.

### **8 In your view, what should the main functions of the Patient Safety Commissioner be?**

**Please give your response in the box below. Please be as specific as you can, and include any resources or references to evidence on this topic that we should consider.:**

It will have to clear from that start how the role will work with and integrate into the existing SPSP.

The main functions of the PSC as we see them would be –

- A listener and patient advocate
- A straightforward patient contact
- To investigate concerns and hold systems to account where necessary
- To promote patient safety
- To develop 'Principles of Core Patient Safety' as a benchmark for patient safety
- To encourage organisational reflection, evaluation and change where necessary in line with the Principles
- To highlight concerns about delays or failures to act to improve patient safety

It will be vital to ensure that the use of outcome measures is in place to evidence the value and impact of the PSC and the work they are doing.

### **9 What skills and expertise do you think the Patient Safety Commissioner needs to carry out their role?**

**Please give your response in the box below. Please be as specific as you can, and include any resources or references to evidence on this topic that we should consider.:**

- Be patient
- Human Factors
- Leadership
- Systems thinking / Systems focussed
- Just culture
- Communication skills
- Accountability
- Collaborative
- Care

### **10 What support do you think the Patient Safety Commissioner would need?**

**Please give your response in the box below. Please be as specific as you can, and include any resources or references to evidence on this topic that we should consider.:**

To ensure they have full access to the information required to carry out their functions the PSC would need the support, and co-operation, of multiple organisations including –

- Professional bodies
- Regulatory bodies
- Medical manufacturers
- Government
- NHS
- Organisations handling relevant data – demographics, databases, prescribing information, etc.

To carry out their functions to a high enough level to affect valuable and significant change, the PSC would need the support of a team behind them. They would require investigations to be carried out, data to be analysed, interviews to take place and they would need to build relationships with multiple large organisations at various levels. This is not a task one person could undertake. The PSC should oversee the group of people and have in depth knowledge of the work being undertaken and a personal input.

**11 Do you think that the Patient Safety Commissioner role should be established in law?**

Yes

**Please give reasons for your response in the box below. Please be as specific as you can, and include any resources or references to evidence on this topic that we should consider.:**

To have a significant impact and affect change the role would need the statutory powers to ensure timely investigation, access to information and compulsion of co-operation that can only be conferred by law.

**12 What are your views on how creating a Patient Safety Commissioner might affect the protected characteristics of age, disability, sexual orientation, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sex?**

**Please give your response in the box below. Please be as specific as you can, and include any resources or references to evidence on this topic that we should consider.:**

As an organisation who are committed to inclusion and diversity, we feel this new role should and could improve the access patients with protected characteristics have to an individual or team responsible for championing the value of listening to patients. Individuals who may identify as having one or more protected characteristics as well as different socioeconomic backgrounds have a means of communicating their experience of using medicines and medicinal products. Different experiences should also be sought out proactively too by the individual to ensure they are hearing from different groups. There is an opportunity to enhance person centred care through this role as by hearing individuals experiences common themes and experiences of particular medicines or medicinal products for particular protected characteristics. And their experiences taken seriously and validated rather than being dismissed. They will be able to feedback into the different groups that represent patients voices that already exist.

There is a risk of introducing unconscious bias with the Patient Safety Commissioner or their team, as they would be an independent public leader, they need to champion the value of listening to patients fairly across all protected characteristics. Providing a voice for all groups and considering the more vulnerable users perspectives they should be promoting to ensure they are being considered and are not being unfairly discriminated against and having a poorer experience with their medicines. They would need to make sure they are not introducing their own prejudices and biases into people's experiences and putting their own judgement on that individuals experience resulting in dismissing the groups experience.

As the Patient Reference Group are responsible for appointing the Patient Safety Commissioner there would need to be some assurances that this is a diverse group of people and the diversity and intersectionality of the communities being served are considered and taken into account by the appointment panel.

**13 The Fairer Scotland Duty places a legal responsibility on certain public bodies in Scotland to actively consider how they can reduce inequalities caused mainly by people's financial situation. What are your views on how having a Patient Safety Commissioner might affect this inequality?**

**Please give your response in the box below. Please be as specific as you can, and include any resources or references to evidence on this topic that we should consider.:**

To ensure the PSC works to reduce inequalities caused by personal financial situations they must, from the outset, endeavour to be accessible to all and for there to be no financial impediment to accessing its services or co-operating with an investigation.

**14 If you live in an island community, what are your views on how having a Patient Safety Commissioner might affect access to safe, high quality public services where you live?**

**Please give your response in the box below. Please be as specific as you can, and include any resources or references to evidence on this topic that we should consider.:**

Although the RPS does not live in an island community, we have members who do. Residents of island communities have an equal right to safe, high quality public services as people who live on the mainland, although it is recognised that services may have to be delivered in a different way. Residents of island communities can sometimes feel their voice is not heard by decision makers on the mainland, therefore the PSC could be an advocate for them to ensure their voice is heard and to ensure that modifications made to services are done so in a way that maintains safety and quality. The development and publishing of PSC's principles of patient safety will allow public services in island and rural communities to be measured against a set of standards and for action to be taken if they fall short.

**15 What are your views on how having a Patient Safety Commissioner might affect respecting, protecting and fulfilling the rights of children and young people as set out in the UN Convention on the Rights of the Child?**

**Please give your response in the box below. Please be as specific as you can, and include any resources or references to evidence on this topic that we should consider.:**

Please give your response in the box below. Please be as specific as you can, and include any resources or references to evidence on this topic that we should consider.

A patient safety commissioner could help ensure that children have the right to the best possible health as set out in the UN convention, much as they would aim to do for adults within the scope of its work, if children's health is one of the areas the commissioner decides to expand their role into.

As for other patients they represent, the commissioner would be able to work to give a voice to children and young people in conjunction with their parents and carers taking into account a child's capacity to make their own choices in line with the convention.

**16 Do you have any further comments on the Patient Safety Commissioner role that you haven't covered in your responses to the previous questions?**

**Please give your response in the box below. Please be as specific as you can, and include any resources or references to evidence on this topic that we should consider.:**

It is essential that this role is created as a unique position which does not duplicate that in other organisations. It is also imperative that clear structures are in place which explain how this role will work with and integrate into the other organisations mentioned above plus Healthcare improvement Scotland and the SPSP.

## **About you**

### **17 What is your name?**

**Name:**

Laura Wilson

### **18 What is your email address?**

**Email:**

laura.wilson@rpharms.com

### **19 Are you responding as an individual or an organisation?**

Organisation

### **20 What is your organisation?**

**Organisation:**

Royal Pharmaceutical Society

### **21 The Scottish Government would like your permission to publish your consultation response. Please indicate your publishing preference:**

Publish response with name

### **22 We will share your response internally with other Scottish Government policy teams who may be addressing the issues you discuss. They may wish to contact you again in the future, but we require your permission to do so. Are you content for Scottish Government to contact you again in relation to this consultation exercise?**

Yes

### **23 I confirm that I have read the privacy policy and consent to the data I provide being used as set out in the policy.**

I consent

## **Evaluation**

### **24 Please help us improve our consultations by answering the questions below. (Responses to the evaluation will not be published.)**

**Matrix 1 - How satisfied were you with this consultation?:**

Very satisfied

**Please enter comments here.:**

**Matrix 1 - How would you rate your satisfaction with using this platform (Citizen Space) to respond to this consultation?:**

Very satisfied

**Please enter comments here.:**