

# Parliamentary Bulletin



Regulators will receive new powers giving them much-needed flexibility both in how they regulate and in how they resolve concerns about professionals. The regulators are mindful that alongside these new powers sits a continued responsibility to focus on public protection. We've produced guidance to help make these reforms a success. Our guidance will support good practice in how regulators use these new powers.



**Alan Clamp, PSA CEO**

## A new era for healthcare professional regulation - making the most of the opportunity for reform

The Government has announced that it will proceed with much needed reforms to modernise the powers of the health and care professional regulators. This will include the General Medical Council (GMC), the Nursing and Midwifery Council and the Health and Care Professions Council, all organisations we oversee.

Reform has been in the pipeline for many years. However, following steps to introduce blueprint legislation to the GMC for physician associates and anaesthesia associates in 2024, this will now be rolled out for doctors, nurses and allied health professionals in the next phase of the reforms.

Key changes will include:

- allowing regulators greater flexibility and agility in developing their operational processes through rules
- introducing a new less adversarial and quicker process for dealing with concerns about healthcare professionals ('accepted outcomes').

There is much to welcome in these proposals and the PSA has been a strong supporter of a more proportionate, targeted system in line with our own Right-touch regulation approach. However, there is still work to be done to make sure the changes strike the right



balance between efficiency and autonomy on one hand, and public protection and accountability on the other. The recent high profile challenges facing the Nursing and Midwifery Council demonstrate that the need for robust accountability and oversight is more important than ever. There is huge potential for these reforms to pave the way for a new era in health and care professional regulation. We hope they will create a system which works better for patients and professionals.

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## Sharing advice to support use of new powers

We have recently published guidance to support regulators to use their new powers in ways that best protect the public.

We sometimes hear from Parliamentarians about constituents' dissatisfaction with how complaints have been handled by the regulators so this guidance may be of particular interest.

When reformed, the regulators will have new powers to resolve complaints more easily through a new 'accepted outcomes' process. Our accepted outcomes guidance provides pointers to help regulators decide when a case can be resolved without a public hearing and when a hearing might be needed to maintain public confidence and ensure robust review of the evidence. It also helps regulators make decisions about the number and composition of decision-makers and when to publish case examiner decisions.

The regulators will also have new powers to make and amend the rules outlining the way they regulate. Our rulemaking guidance lays out principles to guide regulators to use their powers transparently, with appropriate consultation with key stakeholders and in a way which prioritises public protection. Our guidance also encourages appropriate alignment between regulators on how they use these powers.

We will be asking regulators how they have used the guidance in shaping their approach when we carry out our annual review of their performance.



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## Promoting public safety: protecting the title of 'nurse'

The Government has stated that it plans to protect the title of 'nurse' as part of the next phase of reform. Only the title 'registered nurse' is currently protected in law. New legislation will mean that anyone misleading

the public and describing themselves as a "nurse" without the relevant qualifications and registration with the Nursing and Midwifery Council will be committing a crime.



Titles are meaningless if they are not protected. Protecting titles can reduce the risk of harm to the public by deterring unqualified people from passing themselves off as registered professionals. However, this only works if backed up by action, including prosecution in serious cases.

More broadly, it's important there is clarity for the public and employers about which health and care titles are protected. We urge the UK Government to review whether the current protected titles are the right ones when each regulator's legislation is reviewed.

**Caroline Corby, PSA Chair**



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## Using our powers to bring appeals

One of our key oversight roles is reviewing decisions made by the fitness to practise panels of the 10 regulators we oversee. This is where concerns or complaints about health and care professionals are reported to regulators, investigated and can result in fitness to practise hearings.

The regulators send us final fitness to practise (FtP) panel decisions. We check all relevant decisions and can appeal those decisions we believe do not protect the public adequately.



Between April 2024–March 2025, we appealed 21 cases to Court. Of the 28 appeals resolved in the courts in the same period (including appeals initiated in the previous year), we were successful in 26.

One of the cases we successfully appealed:

### **PSA v NMC & Haward [2024] NIKB 33**

A registered nurse was convicted of attempting to pervert the course of justice by asking a colleague to lie about performing cardiopulmonary resuscitation (CPR) on a patient when he had not. He also failed to provide CPR when required. Initially, a panel imposed a nine-month suspension with review. The appeal was upheld and the High Court ordered that the registrant be struck off the Nursing and Midwifery Council's register meaning he can no longer practise as a registered nurse.

This case involved serious public protection concerns due to dishonesty related to a patient, which is hard to repair. The High Court ruled that a suspension order was inadequate to protect the public, maintain confidence in the profession, and uphold standards. It also found that the order did not reflect the severity of the misconduct and that the panel failed to properly consider relevant guidance.

The full judgement can be found [here](#).

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## Sharing learning to improve public protection

By highlighting key lessons from our FtP reviews, we aim to raise standards, support better outcomes and promote public protection.

As well as bringing appeals, we share learning points to help regulators improve how their fitness to practise decisions are made. These learning points highlight concerns or share insights from panel decisions. They also provide useful, actionable information for regulators and showcase examples of good practice.

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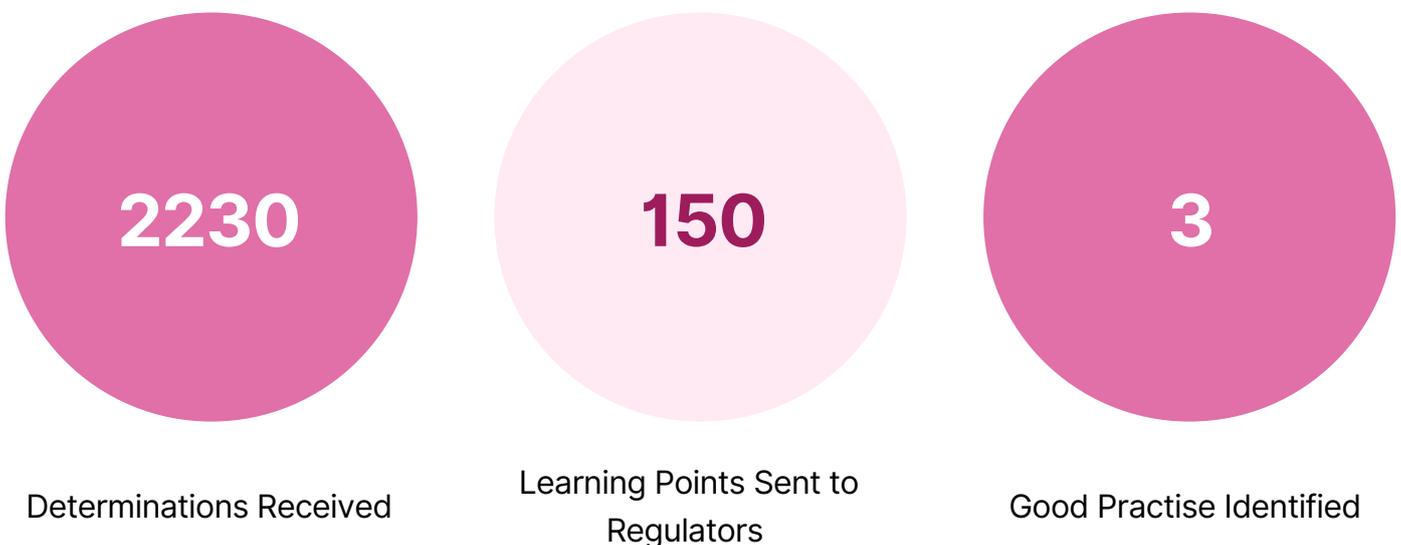
Some recurring themes we have identified include:

- An increase in sexual harassment and sexual misconduct cases.
- Motive not charged. For example cases where there is evidence of dishonesty or lack of integrity, but these not being charged.
- Failing to properly apply regulators' sanctions guidance. Not identifying all relevant aggravating factors and placing undue weight on mitigating factors.
- Failing to provide adequate reasons for departing from the guidance, particularly at the sanction stage.

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## Learning points in numbers

Between March 2024-April 2025



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We now publish a biannual Learning Points Bulletin. Each issue focuses on trends and statistics, including:

- Themes identified
- Case law references and successful appeals
- Links to wider PSA work

Regulators are encouraged to share the bulletin widely – especially with panel members – to support continuous improvement.

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## Spotlight: Sexual Misconduct Cases

### Between March 2024-April 2025

In the last two years we have seen a steady rise in the number of sexual misconduct cases we review and appeal.

The reasons for such an increase are not fully clear, but may be due to:

- Greater awareness of inappropriate conduct
- Increased confidence in reporting
- The NHS's zero-tolerance stance on sexual misconduct

Over time, we aim to see fewer repeated issues and greater impact from shared learning.

You can view the February 2025 bulletin [here](#). The next edition will be issued in July 2025.



Common issues in these cases include:

- Missing or misidentified aggravating/mitigating factors
- Charges that do not capture the seriousness of the misconduct
- Poor handling of witness testimony (e.g., downplaying complainant accounts)

Example: A panel justified a registrant's behaviour by claiming the complainant was "robust enough to stop the conversation." We found this unacceptable and flagged it as a learning point.

## Statistics



Total Decisions



Sexual Misconduct  
Charges



Appealed Cases

## Understanding the issue and finding solutions

Since autumn 2024, we have been running a series of webinars focused on tackling sexual misconduct by health and care professionals. The webinars have featured expert-led presentations and stakeholder discussions on different aspects of the issue. Through this discussion series, we aim to better understand the issue, develop effective solutions, and take meaningful steps forward.

These discussions continue through to autumn 2025, after which we will produce a report including recommendations for the future contribution of regulators in this area. Details of upcoming webinars can be found [here](#).



### About the PSA

The PSA was set up following the Inquiry into failings at Bristol Royal Infirmary to ensure that professional regulation remains focused on public protection and the public interest. We protect the public by promoting high standards of competence and conduct among health and social care professionals.

The PSA's quarterly bulletin highlights how we can work together to create a health and social care system that promotes safety for all. We hope you find the information useful.

### Contact information

If you have questions, comments, or would like to meet with a member of our team, please email [engagement@professionalstandards.org.uk](mailto:engagement@professionalstandards.org.uk).

