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Parliamentary Bulletin



PSA responds to Lord Mann Review and proposed new powers for the General Medical Council

The recent Government consultation on new legislation for the General Medical Council has been informed by recommendations coming out of the Lord Mann Review into racism and antisemitism in healthcare. This included new powers proposed for the PSA to strengthen its oversight of the regulators.

Lord Mann Review

The PSA has welcomed the publication of the Lord Mann Review into antisemitism and other forms of racism in healthcare. In [our public statement](#), we recognised the Review as an important contribution to strengthening how the regulatory system addresses these issues, both within fitness to practise processes and more widely across the system.

We are now considering the Review's recommendations in detail and are working closely with regulators, the Government and other stakeholders to take forward those actions relevant to the PSA and to professional regulation more broadly. This will include using our convening role to support shared learning and coordinated action, as well as considering how our standards and oversight activities can continue to promote improvement in this area.

Consultation on new legislation for the General Medical Council

The PSA has also recently submitted its response to the Government's [consultation](#) on the draft General Medical Council (GMC) Order. This represents a major step in modernising the legislative framework for professional regulation. The GMC Order is intended to act as a blueprint for future reform across the health and care regulators, with a commitment to bring forward new legislation for the Nursing and Midwifery Council and Health and Care Professions Council within this Parliament.

In our response, the PSA is strongly supportive of the overall direction of travel. We welcome the move to update and streamline regulator legislation, giving regulators greater autonomy to allow them to undertake their regulatory duties more effectively and efficiently.



We also support proposals, aligned with recommendations from the Lord Mann Review, to enhance the PSA's role through new powers – such as the ability to require information from regulators to support our oversight and to challenge interim order decisions – where this will help close gaps in the current system. These changes have the potential to improve the effectiveness of our oversight and strengthen public confidence.

Our comments within our response are intended to ensure the new model achieves the appropriate balance between flexibility and public safety, and in particular that there should be appropriate public protection safeguards at every stage of the process. Our full response to the GMC Order consultation is available on our [website](#).

Monitoring the Nursing and Midwifery Council

Parliamentarians may have seen recent media coverage highlighting a serious failing in the Nursing and Midwifery Council's (NMC) registration and revalidation process. As the body responsible for reporting annually on the performance of the healthcare regulators, we will continue to assess the actions the NMC undertakes in response and monitor the risks this issue raises for public protection.

In February 2026, the NMC told us that, over a 12-year period, a substantial number of health and criminal conviction declarations had not been consistently referred to an Assistant Registrar, as required by its guidance. We were deeply concerned by the scale and nature of this failing, which has implications for public protection and clearly calls into question the integrity of the register.

The NMC has set out measures to address the issue, but it is essential to understand how it happened and to ensure urgent, effective action is taken to prevent a recurrence. We will monitor this work closely through our review of the NMC's performance from January to December 2026.

On 28 May, we published our annual

performance review of the NMC for 1 January to 31 December 2025, taking this registration issue into account alongside other matters. This included our usual assessment and an audit of cases closed at the screening stage of the NMC's fitness to practise process. Overall, the NMC met nine of the 18 Standards against which we assess regulators; two fewer than the previous year.

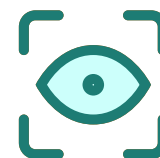
We recognise that 2025 was a challenging year for the NMC as it worked to address well-documented operational pressures. However, progress has been mixed. In some areas, there has been limited action to address issues identified in our previous review, and we have not yet seen evidence of substantial and sustained improvement. The full [report](#) is available on our website.



In line with our Escalation Policy, we have written to the Secretary of State for Health and Social Care, health Ministers in the Devolved Administrations, and the Chairs of the Health and Social Care Committees across the four UK parliaments, outlining our key concerns and recommendations. We will continue to consider what further scrutiny is needed as we monitor the NMC's performance.

Monitoring other regulators

The PSA has responsibility for the oversight of all ten health and social care regulators in the UK. Later this month we will be publishing our most recent performance reviews for the General Osteopathic Council and the Health and Care Professions Council.



Scottish Government asks the PSA for recommendations to strengthen healthcare science safeguards

In May 2026, the Scottish Government commissioned the PSA to conduct a Right-touch assurance assessment of healthcare science roles

A Right-touch assurance assessment is a structured way of deciding whether the safeguards around a profession or group of professions are strong enough to protect patients and the public from any patient safety risks, and if not, what would be the most proportionate way to improve them.

It looks first at the risks linked to the work people do, the settings they work in, and how vulnerable service users may be. It then considers whether those risks are already being managed through existing arrangements such as employer oversight, clinical governance, education and training standards, professional registration, accredited registers, or other controls.

The aim is to identify any gaps and recommend the least burdensome action needed to address them. This could range from strengthening existing systems to

considering changes to regulatory arrangements, if that is justified.

We will be assessing the five healthcare science professional groupings identified by the Scottish Government in its Healthcare Science in Scotland: Redefining our Workforce report. These groupings are:

- Engineering Sciences
- Health Informatic Sciences
- Laboratory Sciences
- Physical and Imaging Sciences
- Physiological Sciences

We will gather and analyse evidence about the level and nature of risk across those groupings, including where current controls appear sufficient, and where there may be unmanaged risks. We will combine that analysis with targeted stakeholder

engagement so that our recommendations are practical, sensitive to the context in Scotland, and able to support future workforce development.

The end result will be an evidence-based set of recommendations for Scottish Government

to strengthen assurance where needed.

We will shortly be asking people to come forward to get involved in the work, including to provide evidence. If you would like to hear more about this work, please get in touch at HCSCCommission@professionalstandards.org.uk

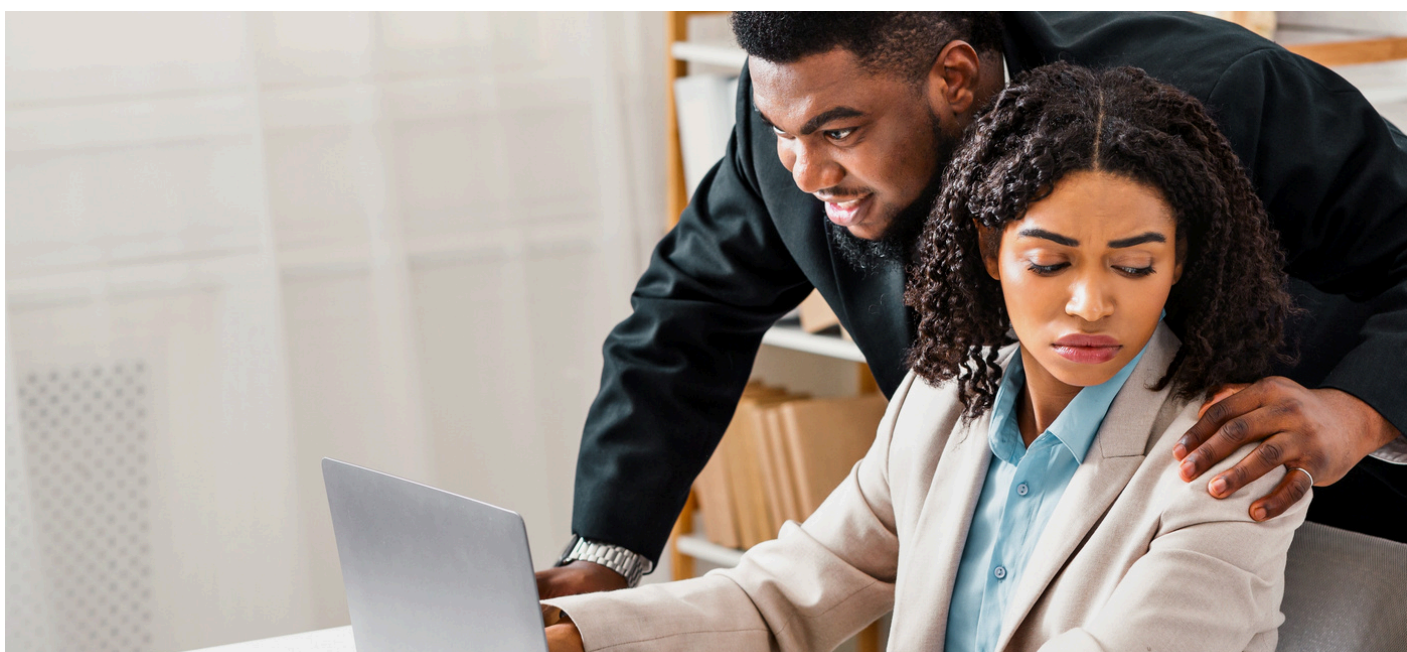
Support to prevent and address sexual misconduct

The webinar series we ran from September 2024 until December 2025 on understanding and addressing sexual misconduct within health and social care revealed the prevalence of the issue and the need for regulators, as well as others, to do more to tackle it. In recent months, we have taken two actions to support this area of our work.

On 21 May, we hosted a successful conference centred around vulnerable witness support and the impact of trauma on witness evidence, with a particular focus on sexual misconduct. The event brought together senior leaders from the 10 health and social care professional regulators we oversee.

Across the day, a range of interesting, high-quality speakers shared practical insights and emerging approaches from across jurisdictions, alongside reflections on how fitness to practise processes can better recognise and respond to harm.

We produced a [short document](#) which summarises the insights gleaned from the webinar series as well as curating a [list of other general resources](#) applicable to the prevention and handling of sexual misconduct in health and social care. We will also be producing a high-level report, which we intend to publish in July.





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.

It is clear that the issues facing health and social care in all four nations of the UK require urgent attention. 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.

