



**council for
healthcare
regulatory
excellence**

Annual Report 2003 / 2004

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● protect

● promote

● progress

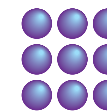
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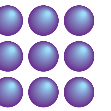


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Ola Lawal, Physiotherapist.

Executive summary



Our mission is to:

- protect the public interest
- promote best practice
- progress regulatory excellence



Since we were set up on 1 April 2003, we have done the following.

- Set up the organisation and the systems we need to support our work (see section 3). We aim to be collaborative, supportive, sensitive and independent.
- Carried out our first performance review of the work that the regulators do:
 - keeping accurate registers of qualified professionals
 - promoting high standards of conduct and practice
 - maintaining high standards in education and professional development
 - making sure that professionals are fit to practise.

We found that the nine regulators were quite different organisations with plenty of good practice already in place. Section 4 describes the performance review with specific examples.

- Considered the disciplinary decisions of the nine regulators for healthcare professionals (see the 'About us' section on page 4) and to refer certain decisions to the High Court when we considered that the regulators' decision was 'unduly lenient' and that a referral was necessary to protect the public (see section 5). Of the 213 cases we considered, we:
 - closed 176 without further action
 - referred 15 to a case meeting of our Council members
 - sent seven to the High Court (one of which we later withdrew).
- Promoted good practice by:
 - enhancing communication between the regulators
 - considering our future consultation on our power to change regulators' rules
 - consulting interested parties on our power to review regulators' disciplinary decisions
 - developing our principles of good practice (see section 5).
- Published a landmark study of the nine regulators' work and developed relationships with stakeholders (see section 5).
- Identified some of the challenges facing the regulation of healthcare professionals (see section 6). These include:
 - the increased mobility of healthcare professionals
 - adapting to the demands of new workforce trends such as teamworking
 - improving the way reform proposals can be introduced
 - building on good practice in relation to public involvement and confidence, complaints, fitness to practise procedures, diversity, standards and education.



Chloë Beale, Doctor