



*National Patient Safety Agency*

National Clinical Assessment Service

# *Maintaining High Professional Standards: the NCAS perspective*

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## ***Maintaining High Professional Standards: a reminder of the NCAS wider role for all its clients***

- NCAS promotes confidence in doctors, dentists and pharmacists
- Confidential support to the health service in managing practitioners whose performance gives cause for concern, informally or within procedures
- Employer, contracting body, or the practitioner can contact NCAS
- Our aim is to work with all parties to
  - ✓ clarify the concerns
  - ✓ get behind concerns to identify contributing factors
  - ✓ make recommendations to help the practitioner continue to deliver a high-quality and safe service for patients.

## ***MHPS: NCAS key operating principles for all its work***

- To ensure Referring Body retains control
- To base advice on what has been disclosed to us
- To record progress in notes and letters
- To record only what is disclosable
- To observe strict confidentiality
- To conclude involvement as soon as NCAS contribution is complete
- To deal with 10 client groups on equal footing

## ***MHPS: NCAS perspective of the Framework***

- It has allowed employers to manage previously unmanageable situations
- It is a *framework*, not a procedure
- The existence of NCAS was crucial in reaching agreement on the framework
- Most day to day concerns should be managed outside of formal procedures and MHPS
- NCAS tries to reduce the tendency towards polarisation as cases are progressed

## ***Maintaining High Professional Standards: Part I***

- When a Concern Arises, MHPS Part I:- NCAS perspective
  - Early contact with NCAS is urged in the Framework – ‘a sounding board for the case manager’s first thoughts (I.8)
- *Issues from Part I MHPS ‘When a concern arises’*
  - *Employer involving NCAS only at an advanced stage of the concern*
  - *Difficulties in rapid progress of an investigation*
  - *Thinking that NCAS only advises on capability issues*

## ***Maintaining High Professional Standards: Part II***

- Restriction and Exclusion, MHPS Part II – NCAS perspective
  - NCAS to be notified before the formal exclusion
  - NCAS to be further involved at 3 months
- *Issues arising from Part II MHPS ‘Restriction and Exclusion’*
  - *Difficulties in finding viable options to exclusion*
  - *Need to keep period of exclusion as short as possible*

## ***Maintaining High Professional Standards: Part III***

- Discipline, MHPS Part III – NCAS role
  - NCAS should be consulted before the way forward is determined – ‘strongly advised to seek advice from NCAS’ (III.1)
- *Issues from Part III MHPS ‘Discipline’*
  - *Meaning of misconduct – ‘refusal’, ‘infringement’, ‘criminal offence’, ‘wilful, careless...’ (III.5)*
  - *The classification of professional misconduct*

## ***Maintaining High Professional Standards: Part IV***

- Capability, MHPS Part IV – NCAS role
  - NCAS advice to be sought at an early stage – ‘if cannot be resolved routinely’ (IV.4)
  - NCAS advice certainly to be sought following local investigation
  - NCAS Assessment to be considered before Capability Hearing
- *Issues from Part IV MHPS ‘capability’*
  - *When and whether an NCAS Assessment*
  - *The place of the Capability Hearing*
  - *Returning practitioner to full functioning*

## ***Maintaining High Professional Standards: Part V***

- Health, MHPS Part V – NCAS role
  - NCAS advice should be sought on any concerns
- *Issues from Part V MHPS ‘Health’*
  - *Whether it is necessary to use MHPS to handle a health concern*



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