

Clinical physiologists must be properly regulated to protect patients

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Clinical physiologists must be properly regulated to ensure patient safety, argues a senior figure in *The BMJ* this week.

Clinical physiologists are the [health professionals](#) who check that [medical devices](#) such as pacemakers and [hearing aids](#) are working. There are about 6,000 currently working in the NHS.

But Amanda Casey, chair of the Registration Council for Clinical Physiologists, warns that "if one of them ever makes a serious mistake or doesn't meet the highest standards of the profession, the chances are you'll never hear about it. They'll be able to continue practising, even if they have to change jobs to do so."

This is because clinical physiologists, like thousands of other professionals working in the NHS, are entirely unregulated.

For many professionals in the health service, lack of regulation doesn't present a problem, she says, "because the demands of their jobs mean that they will not and cannot cause harm to patients."

But for clinical physiologists it's a very different story, "one in which the absence of statutory regulation puts patients at risk on a daily basis, despite standards throughout the profession being extremely high."

Clinical physiologists can join the voluntary register for the profession that is maintained by the Registration Council for Clinical Physiologists

(RCCP), and about 80% do so, she explains.

But because its register is voluntary, "the RCCP has minimal capacity to investigate or even to identify errors or incompetence, meaning that although anecdotal accounts describe failings, no data exist. And even when it identifies incidents, the council has no power to sanction incompetent practitioners."

Scariest of all, she adds, "is that in the absence of fitness to practise assessments, anyone could refer to themselves as a clinical physiologist."

She believes the answer is to properly and statutorily regulate clinical physiologists, but argues that the government "is yet to grasp this particular nettle."

"At a time when the NHS is under constant scrutiny over quality of patient care and levels of patient safety, it is counterintuitive to dismiss an obvious solution that would make patients safer," she writes.

Until statutory regulation is introduced, two types of never events will continue. One will be the tragedies that we read about all too often in the newspapers. The other will be every bit as serious: major failings in care quality and [patient safety](#) that we rarely if ever hear about and which are never properly investigated and satisfactorily resolved.

She stresses that the overall quality of practitioners in the health service remains high, but points out that "every group has its bad apples, and we can do more to find ours and remove them from situations where they can cause harm to patients."

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