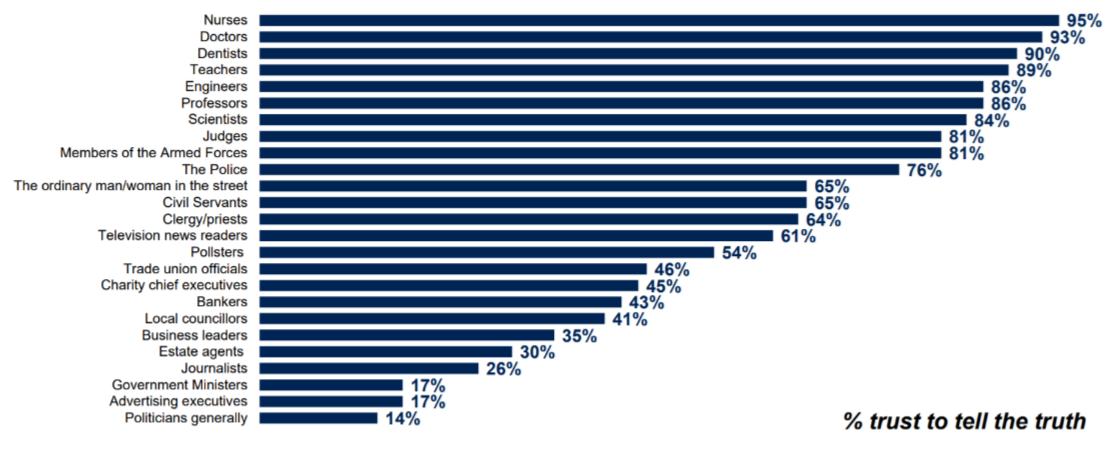
Trust and confidence in professions and their regulators — now and in the future

Rachel Lopata and Richard Marchant



Veracity Index 2019 – all professions

"Now I will read you a list of different types of people. For each would you tell me if you generally trust them to tell the truth, or not?"



Base: 1,020 British adults aged 15+, interviewed face-to-face 18 - 27 October 2019

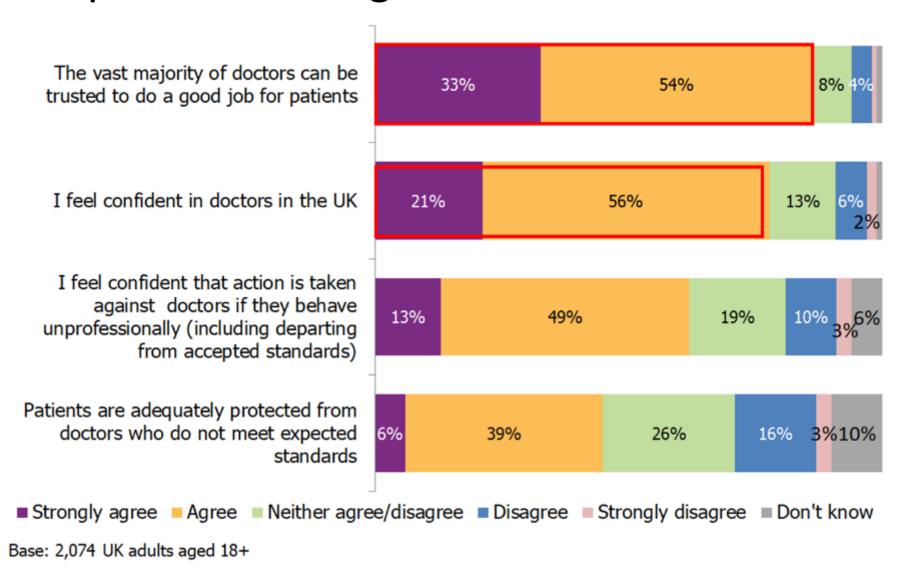
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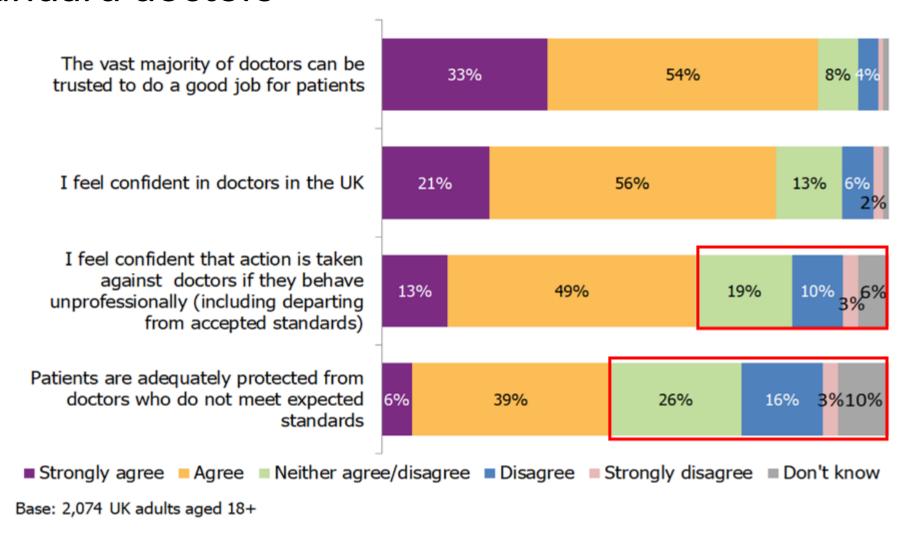
Our research for the GMC confirmed trust and confidence in the medical profession is high





General Medical Council

But there is much less certainty that action is taken against below standard doctors





Trust vs. Confidence?

They have always made me better

Take an oath to do no harm/belief that they enter the profession to do good

Years of training

Awareness that medical profession is 'licensed'

A (historic) culture of trust in professions

"I didn't know who they [GMC]
were till this study... so I'd say I
wouldn't know if they were or
weren't maintaining public
confidence in doctors...
Personally I trust my doctor...
and trust the system that
trained them. It's a bonus
knowing there is the GMC and
how it operates so my
confidence is more or less the
same." (Carer)



System pressures threaten confidence <u>much more</u> than individual cases of wrong doing

10 minute with GP appointment Waiting times for GPs/referrals Poor communication between primary and secondary care Shortage of doctors Doctors working long hours Bed shortages



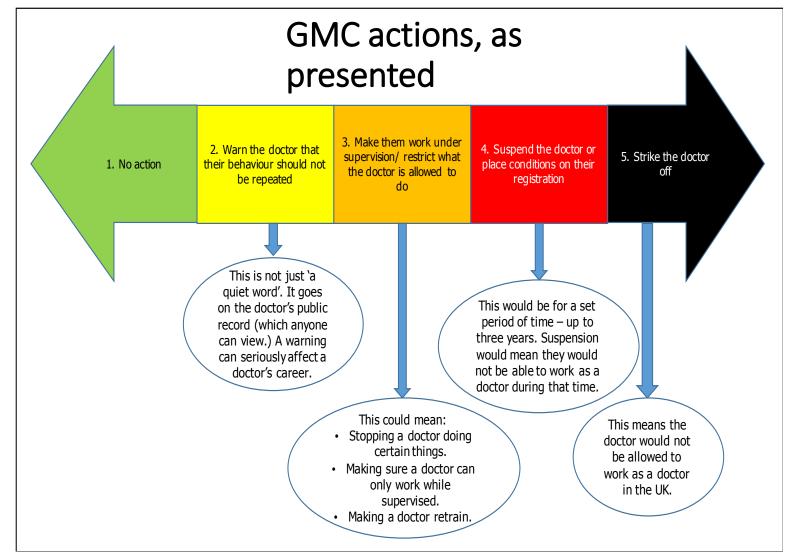
Only 3 out of 122 participants in focus groups were aware of the Bawa-Garba case – none by name

But we also got a good steer on public expectations in cases of

wrong-doing

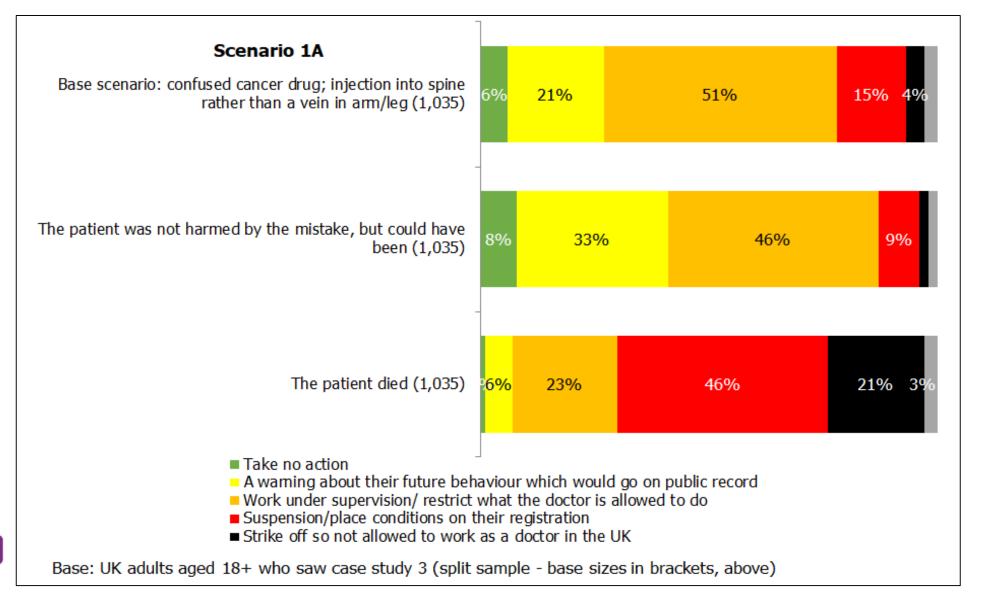
Scenario 1A

Dr C instructed a doctor in training to inject an anti-cancer drug into a patient's lower spine. The drug should have been injected into a vein in the arm or leg but Dr C confused this drug with another that is given at the same time, which is injected into the spine. Within a few minutes. Dr C realised they had made a mistake and was visibly shaken.





Outcome of patient death has a significant impact on expected response





General Medical Council

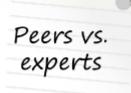
How will trust change?....our key Gen Z conclusions, in summary...

Scandals may get missed

Media consumption patterns are very different.

Major issues of concern may get missed because some are not consuming mainstream media

Self serve transparency is prized _ They (claim to) want access to raw data they can interrogate (e.g. Blockchain – will they be the users of end to end traceability?)



Gen Z expect involvement in 'co-creating' the truth. They trust more when they (& others like them) have input into judgements, rather than taking the expert's view. They value dialogue.





Reviews and ratings are a 'go to' foundation of trust in almost anything

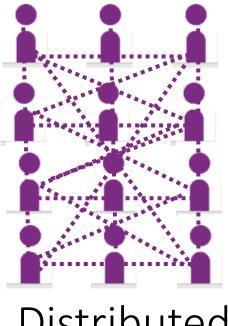
Reviewer's relatability more important than expertise /independence

> General Medical Council

The foundations of trust are changing for us all (not just Gen Z)





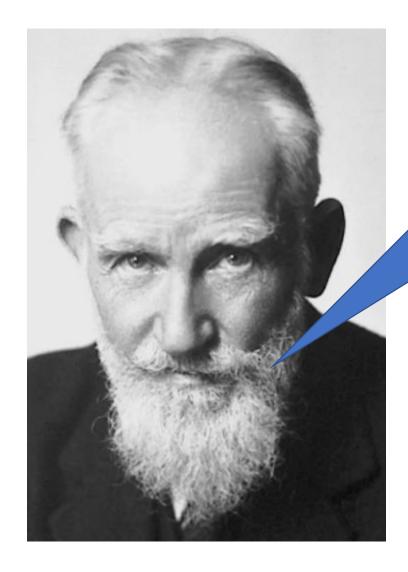








Implications for regulators



'Certainly not, but we have transferred it from God to the General Medical Council.'



Trust in what or whom?

Promote and maintain 'public confidence' in the professions we regulate



Balancing different trusts





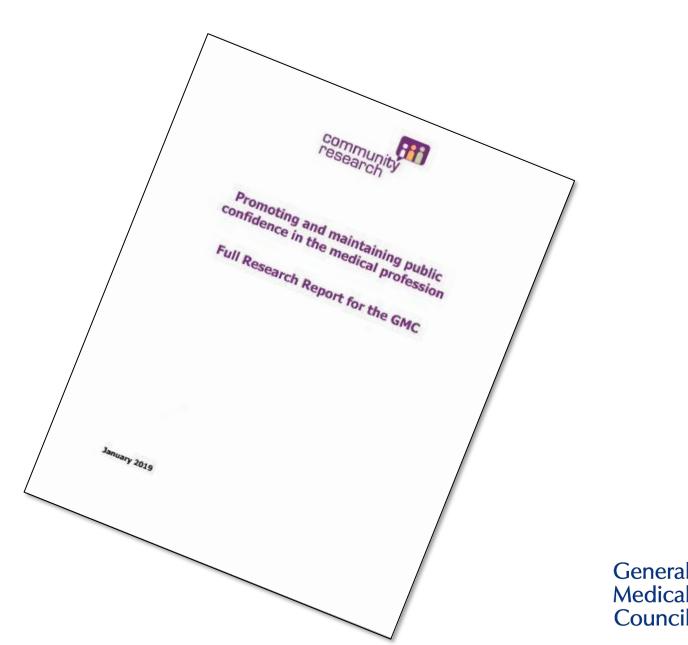
Moving regulation upstream: supporting professionals under pressure



Public expectations and regulatory purpose: a just

culture for whom?

Public expectation that the GMC should erase or suspend a doctor involved in a one-off clinical error rose from 19%-67% when told that the error led to the patient's death.





Transparency, openness and involvement







