General Medical Council

17 May 2016

GMC/MPTS Liaison Group

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Minutes of the Meeting on 25 November 2015

Members present

Terence Stephenson, Chair

Paul Buckley (via videoconference) Niall Dickson Susan Goldsmith Howard Matthews Anthony Omo David Pearl Neil Roberts

Others present

Christine Payne, Head of Governance (for item 5)

Patricia Morrissey, Group Secretary

Chair's business

1 The Chair welcomed members to the meeting.

Minutes of the meeting on 5 May 2015

2 The Group noted for the record that the minutes of the meeting on 5 May 2015 had been approved, on circulation, by the Group as a true record following the May meeting.

Matters arising

3 The Group received an update on the matter arising related to paragraph 13 of the minutes and the research on referrals to Interim Orders Panels (IOP). The Group noted that an external research project had been commissioned looking at a sample of cases considered by case examiners, including both cases referred to IOP and those not referred. The research was progressing well and the conclusions were expected to be available in February 2016. The Group would be informed of the research conclusions, and whether, in the light of them, any further work would be required.

MPTS Business Plan and Budget 2016

- 4 The Group considered the draft MPTS business plan and budget for 2016.
- 5 During discussion, the Group noted that:
 - a As a result of fewer referrals from the GMC, the MPTS budget was currently 4% below the forecast for 2015.
 - b The 2016 MPTS budget was £0.4m lower than the 2015 forecast and included savings from the forthcoming S60 changes. The full savings from the S60 changes, which included expected savings associated with speeding up the hearing process, would not be fully realised till 2017.
 - c The savings associated with staff time spent in hearings would be allocated to resourcing the new functions assigned to the MPTS, including issuing hearing notices and pre hearing case management. The allocation of resources would continue to be monitored.
 - d The GMC business plan and budget, of which the MPTS was a part, would be considered by Council on 10 December 2015.

Draft Report of the Chair of the Medical Practitioners Tribunal Service

- 6 The Group considered the draft report of the Chair of the MPTS, noting the summary on the performance of the MPTS during the previous reporting period, and the work of the MPTS Advisory Committee.
- 7 The Group approved the report at Annex A of the paper for consideration by Council at its meeting on 10 December 2015.
- **8** During discussion, the Group noted:
 - a That at its meeting on 10 December 2015 Council would receive an oral update on the implementation of changes arising from the S60 Order, including the GMC's right of appeal, the use of legally qualified chairs; and case management. Updates on the ongoing work by the MPTS to support self-represented doctors, and on the diversity figures for panellists would also be highlighted.
 - **b** The continued efforts to support doctors appearing at hearings without legal representation. The number of self-represented doctors was decreasing for IOPs but overall the statistics for self-representation were broadly similar for other jurisdictions. While it was a requirement of *Good Medical Practice* for doctors to have insurance and indemnity cover, many doctors were still opting for self-representation. Anecdotal evidence suggested that the reasons for doctors opting for self-representation included; defence organisations becoming more selective about the cases they provide support for in order to manage their resources for the longer term; doctors' concerns about insurance premiums and preferring to use cover for clinical negligence cases only, and doctors in secondary care deciding to rely on Health service indemnity schemes, which do not provide cover for disciplinary issues or referrals to the General Medical Council. In order to better understand the issue of doctor self-representation it was suggested that more information should be gathered from doctors regarding their decision to selfrepresent; and from the defence organisations regarding the number of their members who self-represent, although it was noted that a request for this information had already been declined on the grounds of commercial sensitivity.
 - c That in order to provide further support to self-represented doctors and to facilitate an efficient hearing process, and the realisation of the benefits of case management, the provision of 'duty representation' as used in the criminal courts could be further explored. However, the question of who would fund such support would be key as it would not be for the GMC or MPTS to fund such support.

Substantive review of the GMC MPTS Operational Framework

- **9** The Group considered a paper outlining the key findings from the substantive review of the Operational Framework.
- 10 The Group considered the proposed amendments which incorporated changes to reflect legislative changes, clarification of existing processes to better reflect operational requirements and responsibilities; and updating information about key policies and guidance.

11 The Group agreed:

- a The revised Operational Framework subject to a final review of the phrasing at sections 2 and 2.3.1, and clarification by the legal team of the distinction between the MPTS Committee and the service function delivered by the MPTS.
- **b** To delegate final approval of the revised document to Neil Roberts.

12 During discussion, the Group noted:

- a That the GMC media team would be working closely with MPTS Communications staff to develop proposals for handling media queries relating to MPTS decisions, to ensure that any comments issued did not inadvertently give rise to a suggestion of a GMC appeal.
- b The importance of the 'no surprises' approach in relation to GMC comments on MPTS decisions, without prejudice to either the GMC's right of appeal or the PSA's ancillary right of appeal.
- c That MPTS learning points from any appeals would continue to be monitored and actioned by the MPTS Quality Assurance Group. Learning points for the GMC would continue to be taken forward by the GMC Decisions Review Group.

Section 60 implementation update

- 13 The Group received and noted a progress update on the S60 reforms and key implementation milestones for December 2015 and January 2016.
- **14** During discussion, the Group noted:
 - a That updates to MPTS Standard Operating Procedures would be complete by 27 November 2015. Similar activity was taking place in the GMC Fitness to Practise Directorate and was on track for completion.

b The arrangements for transition to the statutory committee, and plans for the recruitment of a new Chair which would begin in 2016.

MPTS Risk Register

- 15 The Group considered the MPTS Risk Register and noted changes to the register made since the Group's last meeting on 5 May 2015.
- 16 The Group noted that the potential impact of medical Associates relinquishing their licence to practise had increased and could in turn impact on the availability of medical panellists for long hearings. The Group agreed that we should further consider the route to revalidation for those doctors who have a contract for services requiring a licence to practise but who do not undertake clinical work and therefore do not represent a risk to patient safety. The option of sourcing a MPTS Suitable Person (SP) should be further explored in discussion with colleagues within the GMC's Registration and Revalidation Directorate with responsibility for managing the application and approval process for SPs.
- 17 During discussion, the Group noted that there was still some confusion among doctors about the various routes to revalidation and that more should be done to promote the message that it was possible for a doctor to relinquish their licence to practise but maintain registration.

GMC/MPTS Liaison Group meeting schedule and work programme 2016

- **18** The Group considered and noted its proposed work programme and schedule of meeting dates for 2016.
- **19** The Group agreed that a standing 'to note' agenda item on appeals would be added to the work programme.
- 20 The Group noted that the meeting currently scheduled for November 2016 was being re-arranged to accommodate reporting requirements.

Any other business

21 The Group noted that its next meeting would take place on 17 May 2016.

Strategic and policy issues

22 There were no strategic or policy issues raised.

Operational issues

23 There were no operational issues raised.

Communication and engagement

24 There were no communication and engagement matters to report.

Confirmed:

Terence Stephenson, Chair

Approved on circulation