

*To consider*

## **Evaluation Framework**

### **Issue**

1. How to take forward the development of a framework for evaluating organisational performance against our purpose - to promote, protect and maintain the health and safety of the public by ensuring proper standards in the practice of medicine. This paper describes the evaluation framework commended by the Council in 2008, sets out the principles underpinning it, and suggests an approach for development and implementation.

### **Recommendation**

2. To establish an Evaluation Working Group to develop the evaluation framework and to make recommendations to Council (paragraphs 15-21).

### **Further information**

3. If you require further information about this paper, please contact us by email: [gmc@gmc-uk.org](mailto:gmc@gmc-uk.org) or tel. 0161 923 6602

## Background

4. This paper is relevant to Key Aim 10 of the 2009 Business Plan – enhancing our economy, efficiency and effectiveness – but is also relevant to all areas of our work, in helping to provide Council with assurance that we are delivering against our statutory purpose and all key aims.

5. For the purpose of this paper, we have regarded evaluation as having three broad components:

a. Assessment of overall organisational performance against our purpose - to promote, protect and maintain the health and safety of the public by ensuring proper standards in the practice of medicine.

b. Assessment of the effectiveness of management actions designed to mitigate risk.

c. Assessment of, and hence holding the executive to account for, the organisation's operational performance.

6. This paper is concerned with the first of those. There will be subsequent papers on the evaluation of risk management and the evaluation of operational performance.

7. In 2008, Council recognised the need to move beyond operational service targets as indicators of the organisation's overall effectiveness. This required focus on our statutory purpose.

8. Council established the Evaluation Framework Review Group. EFRG reviewed accepted good practice in organisational performance evaluation, developed a draft evaluation framework with a hierarchy of indicators, and tested that framework against the 2008 Business Plan.

9. Our performance is reviewed by CHRE, which is charged under Section 26 of the NHS Reform and Health Care Professions Act 2002 with '*investigating and reporting on the performance of regulators' functions, comparing performance between regulators and recommending changes in the way a regulator performs its functions*'.

10. In August 2008, CHRE's annual *Performance Review* stated: 'We were particularly impressed by the GMC's Evaluation Framework Review Group which is developing a hierarchy of performance indicators to ensure public protection is always the focus of the GMC's performance. This is intended to ensure that measures of performance are always focused to this end, rather than potentially making conflicting demands for resources. Again we feel that this demonstrates good practice, and we believe the other regulators should consider similar approaches'.

11. Towards the end of 2008, we conducted a mapping exercise to overlay the evaluation framework on to the 2008 Business Plan, to test whether the objectives we set ourselves for 2008 were compatible with a single evaluation methodology. The results were considered by the EFRG, which concluded that the framework would appear to be fit for purpose for informing the Business Plan for 2009.

12. In November 2008, Council agreed to commend the draft evaluation framework to the reconstituted Council. To maintain momentum, we developed a pilot to bring the evaluation framework to life by identifying the success criteria associated with four important priorities for 2009, each drawn from the Business Plan. They are:

- a. Make the necessary preparations for all aspects of the physical integration of PMETB with the GMC, including the co-location of PMETB staff within our London office (Key Aim 2).
- b. Introduce the licence to practise (Key Aim 3).
- c. Publish new case studies in the GMP in Action format and develop further learning materials (Key Aim 4).
- d. Assess the conclusions derived from the two pilot studies on GMC Affiliates and, working with the departments of health, agree implementation plans as appropriate (Key Aim 7).

13. The Council plans to take stock of its strategic priorities from the middle of 2009. Subject to the views of members, we plan to link, more closely and more explicitly, our strategic plan (as Council's statement of where we want to be), our annual business plan (as our stated means of getting there) and evaluation framework (as the means for both Council and staff to assess how well we did).

14. Performance evaluation has been integrated into all operational plans for 2009, and we remain committed to reporting progress against all Business Plan objectives.

## **Discussion**

15. We have said publicly that we aim to establish and maintain a regulatory framework that is capable of adapting to meet changing needs within a developing healthcare environment. Evaluating our performance in the context of change is a challenging but necessary requirement.

16. A number of developments have had, or will have, direct or indirect implications for us. We will need to be prepared for others, including structural change such as the merger of PMETB with the GMC and the creation of the Office of the Health Professions Adjudicator.

17. In common with public sector organisations, any evaluation of performance cannot be confined to a financial bottom line. We need to develop indicators that, taken together within an overarching framework, provide an informed and comprehensive picture, identifying where we are successful and where improvement may be required.

### *Principles*

18. A number of core principles underpinned the evaluation work so far. The evaluation framework represents:

- a. An opportunity to measure success in a different way from that which has gone before. There is a need to measure our overall performance by our contribution to the quality of healthcare, including patient safety, and fulfilment of our statutory purpose rather than simply narrowly defined service targets.
- b. A shift from an output-focused approach, based principally on operational service targets, to one that prioritises outcomes that deliver public value and improve the experience of patients. Evaluation should be focused on what the organisation is for, not only what it does.
- c. An approach that builds on what already works. We would expect Council, in the light of members' own experience, to develop, improve and gradually embed the evaluation model into the policy making process and wider culture of the organisation. We are seeking to develop a model that, with adaptation, will be fit-for-purpose well into the future.

### *Hierarchy of evaluation perspectives*

19. There is no single, or obvious, measure of quality or patient safety, and there are risks inherent in measuring outcomes, including the creation of perverse incentives. For those reasons, we concluded that we need to assess our organisational performance by adopting a range of perspectives, and that those perspectives should be hierarchical – with our purpose and core functions as the primary focus - rather than balanced.

20. The hierarchy requires a focus on the following, in order of importance:

- a. Statutory purpose and interlocking functions: Evaluating our performance in achieving our statutory purpose should be the most important element of the evaluation framework, and our strategic aims and objectives should reflect this and be developed and implemented with clear success criteria in mind.
- b. Commanding confidence and support: Engaging widely and effectively is crucial and it will be important to assess confidence levels and perceptions among all our key interest groups, across the four countries of the UK, and in the context of an increasingly diverse society.

c. Regulatory principles: Monitoring the extent to which we deliver regulation that is proportionate, targeted and consistent will help us deliver 'better regulation'. We will need to demonstrate transparency and accountability by operating within a clear strategy and annual business plan, and by reporting progress against this to Parliament and the Charity Commission.

d. Economy, efficiency and effectiveness: We need to use management information and other data strategically in order to deliver consistent business improvement and value for money.

21. The framework produced by the EFRG has been well received; and we believe that Council wish to build upon it. However, members will wish to have the opportunity to contribute their own expertise and experience before the framework is finalised. We propose that a joint member and staff working group that would take the current draft framework as a starting point and develop it further, using working methods that engage all Council members in the process. The aim would be to bring recommendations to Council on 10 September 2009.

**Recommendation:** To establish an Evaluation Working Group to develop the evaluation framework and to make recommendations to Council.

22. If Council accepts this recommendation, we will invite expressions of interest.

### **Resource implications**

23. The work required to develop an evaluation framework does not, of itself, entail any significant resource commitments.

### **Equality**

24. Equality is implicit in all aspects of our work on evaluation, and it will be important as we develop and implement this work to take full account of our commitment to promoting and valuing diversity and equality. To that end, we will work with the Equality and Diversity Reference Group to ensure the work is fully aligned with this commitment.