

To consider

Merger of PMETB with the GMC: Standards, Policies and Quality Framework

Issue

1. Approval of standards, policies and quality framework to be transferred from PMETB to the GMC.

Recommendations

2.
 - a. To approve and set as determinations under section 34H of the Medical Act 1983 the standards and requirements in the revised versions of the *Generic standards for Specialty including GP training, Standards for curricula and assessment systems, and Standards for deaneries*, to apply when the new provisions in the Medical Act 1983 as amended come into force (paragraphs 8-10 and Annexes A, B and C).
 - b. To approve the revised version of *The Quality Framework for Specialty including GP training in the UK*, to apply when the new provisions in the Medical Act 1983 as amended come into force (paragraph 11 and Annex D).
 - c. To note that the *Operational Guide for the Quality Framework* and other documents and webpages currently available on the PMETB website have been reviewed and revised to be published on the GMC website to apply when the new provisions in the Medical Act 1983 as amended come into force (paragraph 12 and Annex E).

Further information

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

Background

4. Strategic Aim 3 of the 2010 Business Plan is to complete all work necessary to deliver the merger of PMETB with the GMC.
5. On 11 and 14 January 2010, the House of Commons and the House of Lords respectively debated and approved *The General and Specialist Medical Practice (Education, Training and Qualifications) Order 2010* which (together with *The Postgraduate Medical Education and Training Order of Council 2010*) transfers PMETB's functions to the GMC and in so doing abolishes PMETB. Subject to approval by the Privy Council on 10 February 2010, the legislation (including a number of items of subordinate legislation) will come into force on 1 April 2010.
6. We have revised certain PMETB documentation that will be required from 1 April 2010. The approach we have taken reflects the principle underpinning the legislation which is colloquially referred to as 'lift and shift': in order to maintain business continuity and to minimise risk, in the immediate post-merger period there will be minimal change to existing PMETB functions, standards, policies and procedures. However, in the medium to long-term, as part of post-merger benefits realisation work, including consideration of recommendations in the Patel review, there will be opportunities to make more far-reaching improvements in the way the GMC regulates medical education and training.
7. On 31 March 2010 we will also invite Council to agree the necessary changes to the GMC's governance framework and the Governance Handbook arising from the merger. Similarly, these changes will be confined to the minimum necessary to enable appropriate governance oversight of the new functions from 1 April 2010, and in particular to delegate key responsibility for oversight of postgraduate medical education to the Postgraduate Board. The wider GMC governance review in 2010 will provide an initial opportunity to consider any longer-term governance implications arising from the merger as an input to the benefits-realisation work.

Discussion

8. Section 34H of the Section 60 Order requires the General Council to establish standards of, and requirements relating to, postgraduate medical education and training, to be set out in determinations of the General Council. However, a transitional provision (paragraph 2 of Schedule 2) provides that standards of education and training established by PMETB shall have the effect as if they were established by the General Council under 34H. As one of its early priorities, PMETB had established a suite of principles and standards covering key areas of its business. The latest versions of these are the *Generic standards for training*, the *Standards for curricula and assessment systems*, and the *Standards for deaneries* (all published in July 2008).

9. Thus, while it is not legally imperative that the GMC adopts the standards and requirements (because the legislation makes their adoption automatic), it is clearly desirable that the GMC is seen to have taken ownership of its new responsibilities through making a positive decision to do so. This also has the virtue of demonstrating to our key interest groups the seamless transfer of functions and making clear the standards and requirements that must continue to be met.

10. On 4 February 2010, the Postgraduate Board agreed to recommend that Council approve and adopt as determinations the three sets of standards originally issued by PMETB which we have amended to reflect the transfer of responsibilities to the GMC. For the sake of clarity, 'Postgraduate' refers to matters concerned with Foundation and GP/specialty training. The phrase 'specialty including GP training' has been used when the reference does not include Foundation Programme training. The standards documents, which are otherwise unchanged in all material respects, are as follows:

- a. *Generic standards for specialty including GP training (Annex A).*
- b. *Standards for deaneries (Annex B).*
- c. *Standards for curricula and assessment systems (Annex C).*

Recommendation: To approve and set as determinations under section 34H of the Medical Act 1983 the standards and requirements in the revised versions of the *Generic standards for Specialty including GP training*, *Standards for curricula and assessment systems*, and *Standards for deaneries*, to apply when the new provisions in the Medical Act 1983 as amended come into force.

11. PMETB's approach to ensuring compliance with the Standards and requirements is set out in the high-level *Quality Framework* (introduced in December 2007). The necessary changes have been made to reflect the transfer of responsibilities to the GMC, but in all other material respects it is otherwise the same (Annex D). On 4 February 2010, the Postgraduate Board agreed to recommend that Council adopt the revised *Quality Framework*.

Recommendation: To approve the revised version of *The quality framework for specialty including GP training*, to apply when the new provisions in the Medical Act 1983 as amended come into force.

12. PMETB's more detailed *Operational Guide for the Quality Framework* has also been amended. In addition, separate guidance and other information currently available on PMETB's website is being reviewed and revised where necessary (key documents are listed at Annex E). We can supply the text of proposed amendments of these documents and webpages on request by members, and would be pleased to receive comments from members, but there is no need for Council formally to approve these pieces of guidance and operational details.

Recommendation: To note that the *Operational Guide for the Quality Framework* and other documents and webpages currently available on the PMETB website have been reviewed and revised to be published on the GMC website to apply when the new provisions in the Medical Act 1983 as amended come into force.

13. In terms of benefits realisation, we recognise that an early priority post merger will be to address as soon as possible the intention to have one set of standards applying, so far as possible, to all stages of medical education (undergraduate, Foundation and specialty including GP training).

14. The GMC and PMETB have set up a work-stream, 'PMETB publications and website content', to deliver former PMETB materials in the GMC style and branding and approve the documents that will be required for specialty including GP training after the merger.

15. This work stream fits within the broader Business Integration – Communications work stream which aims to integrate all PMETB communication functions and systems into GMC communications by 1 April 2010.

Resource implications

16. We propose to print copies of the new versions of the three Standards documents and the *Quality Framework* at a cost of around £4,900. Other information will be made available on the GMC website. The cost is covered within existing budget lines.

Equality

17. No implications arising directly from this paper.