
**7a – Supporting Strategies to the Corporate Strategy 2010-2013:
Equality and Diversity Strategy
Annex A**

Equality and Diversity Strategy 2010-2013

Background

1. The GMC has a longstanding commitment to making meaningful progress on equality and diversity (E&D), both as a regulator and employer. The principles of fairness and transparency are integrated into *Good Medical Practice*, as well as core GMC standards and guidance. For example, equality, diversity and opportunity is Domain 3 of *Tomorrow's Doctors*, which identifies the standards and outcomes against which all UK medical schools are assessed.
2. The GMC also invests in a number of practical initiatives to promote fairness of outcomes and transparency around our policies, processes and procedures. These include the *Gateways* guidance for medical schools on making reasonable adjustments for people with disabilities; ensuring that the GMC website and publications are accessible; and providing E&D training for legal assessors and panellists involved in our Fitness to Practise procedures. E&D training is mandatory for all staff employed by the GMC.
3. Consultation with Council members and GMC staff during 2009 revealed an appetite to build on the GMC's work to date; develop a framework against which to position future activity; and move beyond compliance to broadening the organisation's approach to working across all of the different strands of diversity.

Compliance

4. The GMC continues to comply with the relevant equality and diversity UK legislation, including the Equality Act 2010, and our legal obligations around accessibility. We are conscious of our legal duty to actively promote equality in discharging our functions; eliminate unlawful discrimination; and to publish an Equality Scheme (which is currently being reviewed). The GMC also continues to deliver a schedule of Equality Impact Assessments (EqIAs) on policies and processes across all of our statutory functions and the wider organisation.

5. As an employer, the GMC has in place the required HR policies and processes to ensure that staff are supported and managed fairly, as well as promoting principles of equality and tackling discrimination.

Definitions

6. For the purposes of this strategy, *Equality* is defined as challenging discrimination, removing barriers faced by people from different groups, and creating a fairer society where everyone can participate and had the same opportunities to fulfil their potential.

7. *Diversity* is defined as recognising, respecting and valuing the differences that everyone brings, as well as leveraging the opportunities that different people bring to the work that we do. In the UK context these differences include gender, ethnicity, disability, age, religion or belief, and sexual orientation. These are described as diversity strands, or more recently in UK legislation¹ as 'protected characteristics'.

Our rationale

8. Equality and diversity is integral to the work of the GMC as a regulator and an employer for a number of reasons, including:

a. Our ability to safeguard patient safety is reliant on maintaining the trust and confidence of all of our interest groups and stakeholders.

b. The patients whom we safeguard are diverse, as are the professionals whom we regulate. We want to ensure that we understand the needs and expectations of different patients and users.

c. There is evidence of inequalities in the experiences, treatment and care of different groups of people in the UK.

d. We hold ourselves accountable as a regulator for ensuring that we are robust, transparent and fair in the discharge of our statutory functions.

e. We will continue to remain compliant, and to meet our legal obligations.

f. We believe that a successful approach to embedding equality and diversity in what we do enhances our reputation and profile. Conversely, there are risks to our reputation, both in compliance and other terms, in getting our approach to equality and diversity wrong.

g. Putting equality and diversity at the heart of our work also enables us to deliver on our strategic priorities: protecting the public, helping doctors, working with doctors, and delivering value for money².

¹ The Equality Act 2010

² The GMC's Corporate Strategy 2010-13

- h. The UK working population is diverse. As an employer we want to recruit and retain a highly skilled workforce at all levels.

Our vision

9. Our vision for where we want to be as a result of our work on E&D is about enhanced confidence and recognition for our leadership in this area:
 - a. Absolute confidence that we are fair and non-discriminatory in how we regulate, and that our systems and guidance are free from bias and transparent to all of our interest groups.
 - b. An inclusive organisation that uses our influence to tackle inequalities and create positive change.
 - c. An employer of choice for the most talented people from all sections of society.
 - d. An organisation that is recognised as a leader for our good practice by other influential entities and diverse stakeholders amongst our key interest groups.

Principles and priorities

10. Council has reaffirmed the principles for our approach to E&D against which we will align the development of future work in this area:
 - a. Equality and diversity are integral to the work of the GMC as a regulator and as an employer.
 - b. We will continue to integrate E&D considerations into core GMC policies, processes and guidance. GMC senior managers will be held accountable for ensuring that E&D is embedded in core GMC activities, and for delivery against the related workstreams.
 - c. All GMC staff have a role to play in delivering the E&D strategy, and we will continue to invest in the development of competences to enable them to identify the E&D dimension of their roles and work programmes.
 - d. We will use our influence and take a leadership role. We will also consistently scan the horizon and track how social attitudes and public opinion are shifting to identify challenges at an early stage, and articulate a GMC position.

11. We have also identified six priorities for 2010-2013 which will inform work across the GMC in order to deliver against our vision, and ensure that we are making meaningful progress:

- a. To remain compliant with UK legislation and our legal obligations.
- b. To demonstrate where E&D is considered in core aspects of the delivery of our functions.
- c. To engage and involve diverse interest groups in the development and implementation of GMC programmes.
- d. To identify and explain any differentials in outcomes from GMC activities for diverse groups of people.
- e. To upskill staff around how to consider and integrate E&D into their roles and work.
- f. To move towards being an inclusive and diverse workforce at all levels.

Measures and performance indicators

12. The GMC is shifting towards focusing on outcomes and the impact of the work that is being delivered in relation to the E&D Strategy. This is in line with the wider external shift towards focusing on achieving sustainable and meaningful change, rather than 'ticking boxes'. For the purposes of this Strategy we define an outcome as what specifically has changed in making progress to meet our commitment to fairness and being inclusive, or the results of undertaking an action.

13. We are currently assessing information needs and data gaps in order to identify and developing baselines for each of our E&D priorities. Our intention is to use the baselines as a starting point to track and evaluate progress over the next three years. Meaningful measures for our work as a regulator will include:

- a. Perceptions of the GMC as a fair and transparent regulator amongst diverse interest groups.
- b. Awareness of our procedures and guidance amongst diverse groups of doctors, patients and the public. For example, how to complain to the GMC, and awareness of our Fitness to Practise procedures for doctors with health conditions.
- c. The alignment of the actions identified in the E&D plans being developed by each Directorate, with the overall strategic and operational objectives for each area.
- d. The quality of information reported on in the relevant sections of Council and Board papers to demonstrate how E&D considerations have been taken into account in planning, implementation and review.

14. A diversity 'dashboard' is being developed which will track the GMC's performance on E&D on a range of indicators across its functions and key activities. The dashboard will be reviewed twice a year by the Equality and Diversity Reference Group (E&DRG), and includes a workforce component.

15. In terms of progress towards being an 'employer of choice', the E&DRG has recently approved some draft metrics against which to evaluate performance in HR terms including;

- a. The GMC's workforce profile by diversity strand, and compared with UK and local demographics for each main GMC location.
- b. Disciplinary, grievances and tribunal activity.
- c. Attraction, recruitment and retention activity, considering trends for applicants, joiners and leavers.
- d. Pay, promotion and progression.
- e. Our internal 'climate' and the perceptions of diverse groups of staff about the GMC as an employer.

Roles and responsibilities

16. The GMC's Council agrees the strategic direction and monitors progress against key priorities. The Equality and Diversity Reference Group (E&DRG) tracks progress in embedding E&D in core GMC plans and processes on behalf of the Council. Other Reference Groups and Boards are responsible for ensuring that E&D issues are fully taken account of in their sphere of activity.

17. The Council sets the overall E&D Strategy and agrees priorities and milestones for each business area. The Deputy Chief Executive is the Senior Sponsor for the GMC's work on E&D, and leads on articulating the GMC's commitment and raising its profile on E&D with staff and external interest groups.

18. Each Directorate is developing action plans, which show how they will continue to integrate E&D into their main work streams and core activities over the next three years. Action plans will be reviewed periodically by the Senior Management Team. The E&D Team in the Strategy and Planning Unit coordinates the development of the Strategy and associated action plans; ensures that the GMC remains compliant and meets its legal obligations; and provides internal consultancy to support the organisation in realising its ambitions on E&D.

Key themes and outcomes

16. We have taken the main themes emerging from the process of developing our action plans on E&D for 2010-13, and identified some examples of what this will mean for the GMC's functions and programmes of work (this is for illustrative purposes and is not an exhaustive list):

17. Outcome: Enhanced confidence that GMC policies, processes and procedures are fair, transparent and non-discriminatory.

- a. Education: The Basic Medical Education Fitness to Practise Working Group is making recommendations to the Undergraduate and Postgraduate Boards on various work streams, including the transfer of information for students with disabilities and health conditions, and the need for guidance on indicative sanctions.
- b. Fitness to Practise: We propose to update the Kings College audit of FtP decisions at the GMC. Also to track the outcomes of health assessments by disability and age to help understand whether the process is fully effective in enabling doctors to be remediated and rehabilitated.
- c. Registration: Review key policies, processes and procedures to understand the cultural challenges that may arise when running Registration panels and hearings.
- d. Standards: Commission an external review of the process for consultations and reflect the recommendations in the forthcoming reviews of *Good Medical Practice* and management guidance.

18. Outcome: Increased understanding of the impact of our policies, processes and procedures on diverse interest groups.

- a. Fitness to Practise: Undertake more work to understand and articulate the trends and statistics arising from our FtP data. Continue to analyse the profile and demographics of doctors in our FtP procedures. Do more work to understand the apparent link between place of qualification and our FtP procedures. Track the perceptions of our FtP activity amongst diverse interest groups with different protected characteristics.
- b. Registration: Conduct a review to further evaluate the impact of our gender recognition policy. Review the processes for obtaining documents from overseas organisations in order to identify the associated issues and understand the challenges faced by applicants when obtaining the documents required for registration.
- c. Continued Practice and Revalidation: Analyse responses to the revalidation consultation by protected characteristic. Consult with a range of diverse interest groups about new areas of work relating to implementing revalidation as they develop. Track diversity trends in the research to pilot and evaluate patient and colleague questionnaires.

19. Outcome: Enhance the awareness by doctors of the GMC's policies, processes and procedures, and of the diversity of UK patients and service users.

a. Fitness to Practise: Review the existing information about our FtP procedures on the GMC website to ensure that they are easily understood by different groups of doctors. Develop an interactive presence/ 'help portal' on our website to articulate our FtP and health procedures more clearly.

b. Standards: Implement the learning disabilities project to enhance the awareness by doctors of patients with learning disabilities and the available guidance for their treatment. Implement the recommendations of the Warwick University research report and signpost the available resources and support more clearly to help IMGs to better understand the UK's ethical standards.

20. Outcome: Enhance the GMC's reputation and positively influence the development of fair and inclusive policies by engaging with the other influential bodies and diverse interest groups.

a. Fitness to Practise: Identify opportunities to promote and share the GMC's good practice around areas such as witness protection and support.

b. Education: Enhance confidence that access to the medical profession is fair and free from bias by continuing to monitor medical schools' admission policies and processes via QABME. Work with the Medical Schools Council to share best practice on fair access with medical schools; undertake further work to understand the potential biases in certain selection processes and their implications for fair access to medical schools.

c. Continued Practice and Revalidation: Work with the Department of Health (England) to develop an impact assessment (including E&D) for revalidation. Regularly review plans for revalidation work streams led by stakeholders to ensure that the relevant E&D considerations are identified.

d. Registration: Continue our engagement with organisations that support refugee and asylum doctors in the North West of England.

e. Standards: Continue to engage with a range of diverse interest groups across the UK in developing and implementing GMC standards and guidance.