

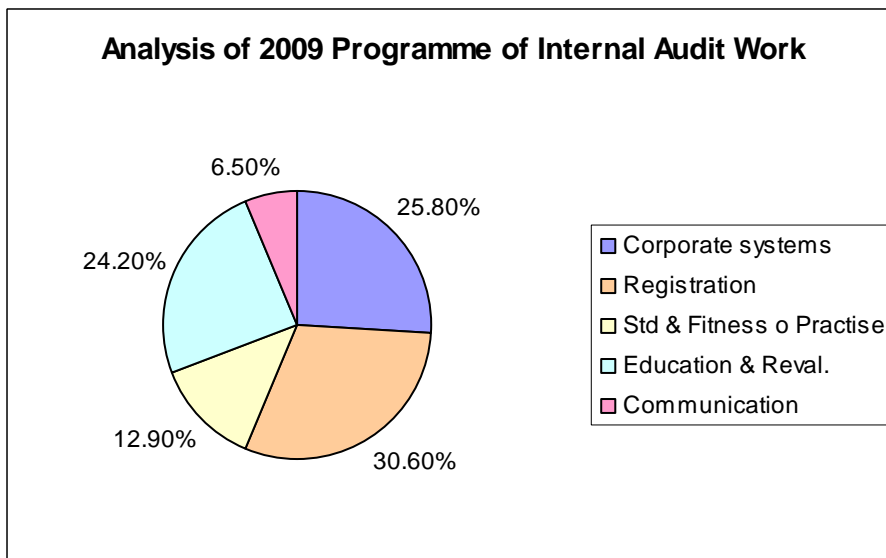
7a – Report of the Audit and Risk Committee - Annex B

Approved Programme of Internal Audit Work 2009

1. Internal audit work is largely risk- based, and is planned to provide wide coverage of the GMC’s activities. The 2009 programme of internal audit work approved by the Audit and Risk Committee consists of 14 reviews across the GMC.

Allocation of Internal Audit Resources

2. The chart below illustrates the allocation of internal audit time across the range of GMC activities.



3. The graph indicates that the allocation of internal audit resources reflects the changes occurring within the GMC. A greater proportion of internal audit time has been allocated to the areas of the organisation that are developing and delivering the most reforms.

Scope of Planned Reviews

4. The schedule below presents the high level scope of each review to be conducted in 2009. The scope of each review will be revisited prior to commencing the audit work to ensure that they remain relevant and appropriate.

Corporate Systems

	Risk	Title of Review	Scope of Review
1	Reputation risk of not having an optimal governance arrangement.	Governance Framework - Implementation	Review of the implementation of the governance plans audited in 2008.
2	Reputation and operational risk of not fully developing and implementing proposals for the Evaluation Framework.	Performance Evaluation Framework - Implementation and effectiveness	Review of implementation of the plans audited in 2008
3	Failure to identify and manage a significant risk to the GMC.	Risk Management Framework	Review of appropriateness and robustness of the Risk Management Framework
4	Failure to comply with ISO 27001 and BS 10008:2008 requirements.	ISO 27001 and BS 10008:2008 Compliance	Review compliance with ISO 27001 and BS 10008:2008 accreditation standards.

Registration

	Risk	Title of Review	Scope of Review
5	Failure to introduce Licence to Practise by Autumn 2009.	Licensing-Readiness Review	A review of readiness to implement licensing, including project management, processes for data management, communication and quality assurance.
6	Failure to introduce insurance and indemnity as a condition of continuing to hold a licence (no longer linked directly to the introduction of the licence to practise	Insurance and Indemnity Policy Development.	Review policy development
7	An ineligible applicant is granted registration	Routes to Registration - Other than Primary Source Verification	During 2008 a review was conducted that looked at the application processes for Primary Source Verification and Restoration. During 2009 an additional review is planned to look at other routes to registration focusing on the controls and processes in place to ensure eligibility.
8	Changes in fee structure undermine professional support.	Financial forecasting	Financial forecasting including: projected income streams, their timing and the reasonableness of assumptions underpinning them; cash flow and contingency planning; and the potential costs of the Affiliate project and the associated funding implications.

Standards and Fitness to Practise

	Risk	Title of Review	Scope of Review
9	Loss of credibility in relation to the time taken, or the quality of advice received, at the investigation stage of our FtP procedures.	Legal advice in FTP investigations	Commissioning legal advice at the Investigation stage of the FtP procedures: ensuring a timely and appropriate service.
10	Patient harm caused by a doctor's non-compliance with undertakings or conditions on his/her registration.	Enforcement of doctors' compliance with conditions and undertakings	Review effectiveness of FtP procedures in ensuring compliance of doctors with conditions and undertakings.

Education and Revalidation

	Risk	Title of Review	Scope of Review
11	Ineffective governance arrangements in relation to Revalidation.	Revalidation Governance Arrangements.	Review the clarity and interconnectivity of the governance machinery in relation to the implementation of revalidation, including the UK Revalidation Programme Board and its accountability to the Council and its relationship with the delivery boards in the four UK countries.
12	Failure to deliver a credible plan for co-ordinating all stages of medical education.	Effectiveness of Governance Arrangements for co-ordinating Medical Education	An IA review of the Education Committee was conducted in 2008. The review looked at the composition of the Committee and its operating effectiveness. In view of the proposed change from the Committee to three Boards, the review in 2009 will focus on the effectiveness of the new arrangements in coordinating all stages of medical education.
13	Merger deadline not met. Post merger benefits not realised. Functional harmonisation not delivered ahead of formal transfer of responsibilities.	GMC/ PMETB Merger Processes.	Review of the merger process, considering the integration process in terms of governance, staff management, finance, and risk management.

Communications

	Risk	Title of Review	Scope of Review
14	Lack of recognition of introduction of licensing among doctors and other key interest groups.	Communication Strategy for Licensing and Revalidation.	Review of communication strategy for licensing and other inter-related projects.