

General Medical Council: Consultation of the restoration of the ‘existing consultant’ route to specialist registration.

Summary of responses

1. Between 3 November 2008 and 10 January 2009 the GMC carried out an online consultation (hard copies were provided where requested) on a Scheme to establish the criteria by which doctors can gain entry to the Specialist Register by virtue of having held a consultant post in the NHS or the UK Armed Forces on or before 1 January 1997. The criteria that we envisaged were that applicants should have to show that they that they are up to date in terms of medical practice – not necessarily in a consultant post – and that there are no concerns about their fitness to practise.

2. We asked eight questions about the Scheme. We received 48 responses from both organisations and individual doctors: 15 from bodies representing doctors, employers and medical educators and 33 from individual doctors. The first three questions asked respondents to agree or disagree with the core criteria we had identified. The fourth, recognising that the vast majority of applicants under the Scheme would be from consultants still in the same posts they held prior to 1 January 1997, asked whether this by itself would be sufficient to satisfy the core criteria.

3. The next four questions gave respondents the opportunity to comment on the evidence that applicants, who were not currently employed as consultants in the UK, would have to produce to satisfy each of the criteria.

4. The questions, and the responses to them were:

Question	Responses		
	Yes	Not sure	No
1. Do you agree that in addition to having held an appropriate consultant post in the NHS prior to 1 January 1997 the Scheme should be open only to those doctors who are fit to practise and up to date?	39 (81%)	4 (9%)	5 (10%)

Question	Responses		
	Yes	Not sure	No
2. Do you agree that, in order to satisfy the Registrar of their fitness to practise, applicants who are currently registered medical practitioners should provide a declaration that they are not aware of any matters that might lead to them being referred to the GMC?	39 (81%)	4 (9%)	5 (10%)
3. Do you agree that in the case of applicants who are not currently registered medical practitioners that we rely on the existing procedures for restoration to the register of medical practitioners as sufficient means to satisfy the Registrar of the applicant's fitness to practise?	40 (83%)	5 (10%)	3 (7%)
4. Do you agree that applicants who are currently employed at consultant level in the UK should be required to provide a declaration confirming this in order to satisfy the Registrar that they remain up to date for the purposes of the Scheme?	42 (88%)	1 (2%)	5 (10%)
5. Do you agree that, in order to satisfy the Registrar that the doctor remains up to date for the purposes of the Scheme, those applicants who are not currently employed at consultant level in the UK should be required to provide details of their employment for the last three years?	42 (88%)	2 (3%)	4 (9%)
6. Do you agree that applicants who are not currently employed in a medical capacity but have three years' experience of medical practice in the five years prior to making their application should, in addition to the requirement to provide details of their employment, submit evidence of how they have maintained their knowledge and skills in order to satisfy the Registrar that they remain up to date for the purposes of the Scheme?	38 (80%)	5 (10%)	5 (10%)
7. Do you agree that applicants who have not practised medicine in any capacity during the previous five years should not be considered to be up to date for the purposes of eligibility under the Scheme?	38 (80%)	5 (10%)	5 (10%)

Question	Responses		
	Yes	Not sure	No
8. Do you agree that the specialty shown in the Specialist Register for successful applicants under the Scheme should be that to which they were appointed prior to 1 January 1997?	38 (80%)	6 (11%)	4 (9%)

5. The majority of respondents – around 82% – agreed that the criteria were appropriate (questions 1 to 3) while 87% thought that current employment as a consultant in the UK would be sufficient to demonstrate compliance with the criteria of the Scheme (question 4).

6. Although almost all respondents agreed that applicants who were no longer working as consultants (question 5) should have to provide details of their employment. There were, however, variations in what evidence they should submit. Several thought that it should include evidence of continuous professional development or that their current work is compatible with NHS standards of specialist practice; others were of the opinion that they should show how they have kept up to date in their specialty. One respondent thought that whatever was required from those no longer working as consultants should also be sought from those that were.

7. One respondent thought that the purpose of the Scheme was to correct previous omissions in a purely administrative purpose. As all that was originally required of existing specialists was that they had been appointed to a consultant post no further information should be required now: this, in his opinion, would be a matter for the Royal Colleges in the context of revalidation.

8. In relation to doctors not currently employed but who had some recent experience of medical practice (question 6) almost all respondents agreed with our approach. There was recognition that some applicants might have been practising outside the UK in the five-year period and that evidence such as attendance at courses, conferences and workshops should be permitted. One respondent who did not agree thought that some individuals might not have practised in the two years prior to their application and might therefore require retraining.

9. Interestingly, some thought that that this cohort of doctors should be treated in the same way as those still in practice but not as consultants. As others had already suggested that there should be no difference in the treatment of those who were currently employed as consultants and those who were not there seemed to be a view forming that all those identified as being eligible for the Scheme should provide the same evidence.

10. As with the other questions the majority of respondents agreed that doctors who had not practised medicine in any capacity during the previous five years (question 7) should not be eligible to apply under the Scheme. One, however, did think that if any such doctors did apply and was refused there should be an appeal mechanism in place. The Scheme does include a process for appeals to be made.

11. Although there was general agreement that the specialty shown in the Specialist Register should be that to which the doctor had been appointed prior to 1 January 1997 it was recognised that some might no longer be practising in the same specialty. One respondent accepted that there was a more general problem for many consultants on the existing Specialist Register, in that their roles had changed and they may be practising safely and well in a specialty other than where they started. Another said there was a wider issue that concerns developing or changing sub specialisation that the current register does not address but it should not be considered part of this current exercise in adding their names to the Specialist Register.

12. For more information about the consultation contact Ian Renfrew on 0207 189 5000

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