25 September 2013

Council

To approve

Minutes of the Meeting on 22 May 2013

Members present

Peter Rubin, Chair

Shree Datta
Michael Farthing
Helene Hayman
Ajay Kakkar
Deirdre Kelly

Suzi Leather
Jim McKillop
Denise Platt
Enid Rowlands
Hamish Wilson

Others present

Niall Dickson, Chief Executive and Registrar
Paul Philip, Chief Operating Officer
Paul Buckley, Director of Education and Standards
Christine Payne, Council Secretary

Ben Jones, Director of Strategy and Communication
Una Lane, Director of Registration and Revalidation
Neil Roberts, Director of Resources and Quality Assurance

1 These minutes should be read in conjunction with the Council papers for this meeting, which are available on our website at http://www.gmc-uk.org

www.gmc-uk.org
Chair’s business

1. Apologies for absence were noted from Christine Eames.

2. The Chair congratulated Denise Platt on her appointment to the working group to review the regulatory governance of the Institute of Chartered Accountants for England and Wales.

3. The Chair congratulated Anthony Omo on his appointment as Director of Fitness to Practise, from 1 June 2013.

4. The Chair reported that no declarations of interest had been made.

Minutes of the Meeting on 23 April 2013

5. Council approved the minutes of the meeting on 23 April 2013 as a true record.

Matters arising

6. Council noted that amendments requested to the Governance Handbook, as agreed at its meeting on 23 April 2013, would be circulated to members shortly. The Chair of Council had been authorised to approve the final version.

7. Council noted that we would be responding to the new independent commission into workplace whistleblowing, set up by Public Concern at Work, by submitting a response to the Whistleblowing Commission’s Strengthening Law and Policy consultation.

Chief Executive’s report

8. Council considered the Chief Executive’s Report, noting that:

   a. Peter Rubin, Chair of Council and Niall Dickson, Chief Executive, had met with the Secretary of State for Health on 15 May 2013, to discuss issues relating to our work in response to the Francis Inquiry Report recommendations, and the timetable for legislation reform in key areas such as obtaining the right of appeal against panel decisions made by the Medical Practitioners Tribunal Service. The Chair had proposed to the Secretary of State that there should be greater clarity around professional accountability in the overall care of patients.

   b. The Strategy and Policy Board had met on 16 May 2013, and agreed to undertake a formal consultation to help identify the generic themes for inclusion in postgraduate specialty training curricula; reviewed progress on our ‘Welcome to UK Practice’ pilot programme, and Promoting Professionalism work; and to amend our current conditions and undertakings bank to replace references to deaneries with a reference to Responsible Officers.
c. Niall Dickson, Chief Executive, had met with Adrienne Kelbie, Chief Executive of the Disclosure and Barring Service, on 17 May 2013 to discuss arrangements for information sharing, including referrals arising from our fitness to practise procedures.

d. We are working closely with the Royal College of Surgeons to take forward recommendations from Sir Bruce Keogh’s review of the regulation of cosmetic interventions which was published on 24 April 2013. The recommendations include that only doctors on our specialist register should perform cosmetic surgery and that those doctors should work within the scope of their specialty specific training, and that a new Cosmetic Surgery Interspecialty Committee should be established.

e. Peter Rubin, Chair of Council and Niall Dickson, Chief Executive, had met with David Prior, the new Chair of the Care Quality Commission, and David Behan, Chief Executive, to discuss ongoing work on a joint operational model for working together.

9. During the discussion, Council noted:

a. The importance of the Law Commissions review in relation to ongoing developments in regulation, which has the potential to be a significant area of work for us in the future, and that Council would have an opportunity to discuss this further in developing our Corporate Strategy 2014-17 at its awayday in June 2013.

b. The need for clarity about how the ‘complaints hub’ proposed by the Parliamentary and Health Service Ombudsman might interact with the devolved administrations, and its relevance to the review of the NHS complaints procedure in England, led by Ann Clwyd MP and Tricia Hart.

Chief Operating Officer’s Report

10. Council considered the Chief Operating Officer’s Report, noting:

a. The commentary on significant issues potentially affecting operational performance.

b. A summary of progress in each Directorate.

c. A financial summary to 30 April 2013.

d. Operational performance and volumes of activity for fitness to practise, registration and certification work, Professional Linguistic Assessments Board tests, contact centre and reception services, and revalidation.

e. Summary information on current judicial reviews and appeals.
11. Council noted that:

   a. We were experiencing some recruitment challenges in our Fitness to Practise team in Manchester, with some posts remaining vacant for part of the year which impacted on payroll costs.

   b. There was an underspend of £1 million in staffing costs to end of April 2013, which largely related to unfilled vacancies. Recruitment plans and forecasts would be kept under review.

   c. The National Training Survey had closed on 8 May 2013, with the response rate of 97.5% being the highest rate achieved to date.

   d. A review of our standards work would be undertaken, reporting by early 2014 and led by Paul Buckley, Director of Education and Standards.

   e. The Performance and Resources Board had approved the 2013 Equality and Diversity action plans for each directorate. Council would contribute to the development of the 2014-17 Equality and Diversity strategy later this year. It was noted that Equality and Diversity continues to be a key aspect of consideration in our work, and that work was ongoing to ensure it is being mainstreamed in Council and other governance groups.

   f. The Performance and Resources Board had approved the plans and funding for the International Association of Medical Regulatory Authorities (IAMRA) conference in 2014, which we would be hosting. It was noted that the conference was estimated to cost around £400,000, although we expected to recoup costs of at least £200,000.

   g. Information about sanctions on doctors from 1994 to 2005 would be published on our website in the interest of our commitment to transparency. A team had been established to manage the work associated with the project.

12. During the discussion, Council noted that:

   a. Some recruitment led to posts being filled by existing staff and there had been a greater proportion of internal promotion recently. This had the effect of moving the financial impact between directorates, as well as having an impact on performance due to the need to induct and train staff in the new area. Recruitment activity and its financial impact would continue to be monitored, with options such as our Learning Academy being explored to ensure staff have transferable skills which can be utilised where necessary; and to keep staff remuneration under review. It was suggested that it may also be helpful to review our recruitment policy in relation to employing people who find it difficult to find work.
b. Staff working groups, chaired by Directors, had been established to consider issues raised in the staff survey on career development and progression, management and leadership, communication and involvement, and wellbeing. The outcomes would be reported to Council.

c. While we had met our target in April 2013 for answering calls, we had not met the target for answering emails and letters. This was noted to be due to an increase in the length and complexity of queries, as well as the impact of delays caused by the Easter bank holidays from the previous month. This was expected to be recovered in May 2013.

d. Work to consider how best to support junior doctors in making ethical decisions in difficult situations should be included as part of ongoing work to promote professionalism and embed our standards, including any learning from the feedback given in responses to the National Training Survey.

e. An external review of our corporate complaints procedure would be commissioned, and its outcome reported to Council.

Trustees’ Annual Report and Accounts for the Year Ended 31 December 2012

13. Council considered the Trustees’ Annual Report and Accounts for the year ended 31 December 2012, noting that they had been reviewed by the Performance and Resources Board and the Audit and Risk Committee, and prepared in accordance with the Charities Act 2011 and the Statement of Recommended Practice for Accounting and Reporting by Charities.

14. Council noted the statement of accounts, which represented a summary of financial activity for the year ended 31 December 2012. This had been reviewed by our external auditors, Crowe Clark Whitehill, who were content that the financial statements represented a true and fair view of our financial position, and that there were no matters of exception which required reporting.

15. Council:

a. Approved the Trustees’ Annual Report and Accounts for 2012, subject to:

i. The inclusion of a reference in paragraph 3 to the fact that trustees had complied with their duty regarding public benefit.

ii. An amendment to paragraph 10 to reflect that our employer liaison and regional liaison services are both new and therefore developmental initiatives.

iii. The inclusion of a reference in paragraph 25 to the support available to patients and other members of the public in our fitness to practise procedures.
iv. An amendment to paragraph 73 to refer to the range of staff benefits, including private medical insurance, and to note that these are subject to continuing review.

v. A review of the balance and order of reference in the report to our responsibilities for patient and public protection.

b. Approved the Letter of Representation.

c. Authorised the Chair of Council to sign the Annual Report and Accounts for 2012, once the agreed amendments had been made, and to sign the Letter of Representation.

16. During the discussion, Council:

a. Noted that while the report was focussed on activities in 2012, it also included reference to ongoing work and developments in 2013.

b. Noted that information about Council members’ attendance at meetings had been included in the report for the first time.

c. Noted that the variation in the level of travel and subsistence expenses claimed by Council members reflected their different roles and responsibilities, and that they lived in different parts of the UK.

d. Noted that the purpose of the report was to fulfil our statutory and charitable obligations. Other reports such as the *State of medical education and practice in the UK report* were used to inform key interests about our work and priorities.

e. Decided that a review of staff benefits, including the provision for private medical insurance, should be undertaken. It was noted that the Remuneration Committee had commissioned a review of the pay and reward framework in relation to the senior management team and Chair of the Medical Practitioners Tribunal Service.

**Report of the Audit and Risk Committee**

17. Council considered the report of the Audit and Risk Committee’s activities since its reconstitution in February 2013.

18. Council:

a. Noted the issues considered by the Audit and Risk Committee at its meeting on 30 April 2013.

b. Noted the issues identified for its consideration, and agreed that briefings should be included in its forward work programme on:
i. The impact of governance and organisational changes on the control environment.

ii. The mechanisms, tone and volume of our communication with doctors.

iii. The nature of the research we commission.

iv. Fitness to practise targets and outcomes, and whether we are measuring performance against the right targets.

v. Our linkages with other regulators, including the extent to which we maximise the sharing of information.

Aviva Group Personal Pension Scheme Governance

19. Council noted the governance arrangements for the new Defined Contribution pension arrangements for new staff joiners from 1 July 2013, to be known as the Aviva Group Personal Pension Scheme.

20. Council agreed the statement of purpose and membership of the Aviva Group Personal Pension Scheme Management Committee, which would be responsible for monitoring and reviewing the operation of the Scheme.

2014 Schedule of Meetings

21. Council agreed the 2014 schedule of meetings for Council, Committee and UK Advisory Fora.

Any Other Business

22. Council noted that details of the arrangements for its awayday in June 2013 would shortly be circulated to members.

23. Council noted that the next meeting would be on 25 September 2013, which would be held in London.

Confirmed:

Peter Rubin, Chair 25 September 2013