

19 April 2016

Council

M2

To approve

Minutes of the Meeting on 25 February 2016*

Members present

Terence Stephenson, Chair

Shree Datta

Suzi Leather

Christine Eames

Jim McKillop

Michael Farthing

Denise Platt

Helene Hayman

Enid Rowlands

Deirdre Kelly

Others present

Niall Dickson, Chief Executive and Registrar

Susan Goldsmith, Chief Operating Officer

Paul Buckley, Director of Strategy and Communication

Judith Hulf, interim Director of Education and Standards, Senior Medical Adviser and Responsible Officer

Una Lane, Director of Registration and Revalidation

Anthony Omo, General Counsel and Director of Fitness to Practise

Christine Payne, Council Secretary

Neil Roberts, Director of Resources and Quality Assurance

*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>

Chair's Business

- 1 It was noted that apologies for absence had been received from Ajay Kakkar and Julian Lee.
- 2 The Chair noted that Council members eligible to be considered for re-appointment had an inherent declaration of interest in the item on Council member reappointments.
- 3 Council noted its congratulations to Deirdre Kelly, who had been awarded a CBE in the 2016 New Year's Honours for services to children and young people with liver disease.
- 4 Council approved the appointment of Enid Rowlands as a member of the Investment Sub-Committee with immediate effect, to fill the vacancy following Ajay Kakkar standing down as a Sub-Committee member.
- 5 The Chair noted that Niall Dickson would stand down as Chief Executive at the end of 2016 after seven years in the role and that work was underway on recruiting his successor. The Chair acknowledged Niall's positive contribution to the GMC since 2010, and in helping the GMC become a more proactive, outward facing organisation responsive to the changing context of healthcare across the UK.

Minutes of the meeting on 10 December 2015

- 6 Council approved the minutes of the meeting on 10 December 2015 as a true record.

Chief Executive's Report

- 7 Council considered the Chief Executive's Report, noting developments in the external environment and progress on our strategy and key outcomes of note from the Strategy and Policy Board meeting on 4 February 2016.
- 8 During the discussion, Council noted that:
 - a Professor Dame Sue Bailey had been appointed to lead an independent review of the NHS training and employment experience of doctors in training in England, and that the Chair had been invited to be a member of the review group in a personal capacity. The Chair agreed to raise the importance of prevention of ill health and supporting the wellbeing of doctors in the discussions.
 - b Following its decision not to take forward the Law Commissions' Bill, the Government had announced plans to hold a public consultation on new proposals for the future of professional regulation in autumn 2016 with a view to introducing legislation in the 2018/19 Session of Parliament.

- c** The Chair, Chief Executive and other staff had started a programme of visits to medical schools across the UK in the first six months of 2016 to discuss plans for the development of a Medical Licensing Assessment (MLA). It was noted that the GMC was committed to co-producing the MLA with the four governments of the UK and with key interest groups. Discussions would be ongoing with the four governments to understand their views, including clarification of the UK Government's intentions on moving the point of registration. This meant that detailed proposals for the MLA may be brought to Council in September rather than June 2016 as originally planned.
- d** Following the implementation of the Recognition of Professional Qualifications Directive on 18 January 2016, the GMC had received 17 and sent 114 alerts on doctors whose practise is restricted or prohibited following fitness to practise investigation, and that the difference in number was in part due to the fact that the GMC had operated a system of sharing this information for many years whereas the process was new to some of the regulators in European countries. Council noted that nine applications for temporary and occasional registration had been received since the beginning of 2016, and that the number of alerts and applications would continue to be monitored.

Chief Operating Officer's Report

- 9** Council considered the Chief Operating Officer's Report, noting:
- a** The commentary on operational performance.
 - b** Operational performance against key performance indicators (KPI) and progress on Council's priorities, including that:

 - i** The operational KPI of '2015 deficit within budget % variance' was rated as red to highlight a significant variance due to an improvement in the financial position of the GMC, with a surplus of £92,000 compared to a budgeted deficit of £4.5 million at the end of November 2015. It was noted that the year-end accounts and adjustments were in the process of being finalised.
 - ii** Council priority 10 'Understanding the context in which doctors practice' was rated as red due to the delivery date for the Confidentiality project changing from 2015 to 2016.
 - c** Income and expenditure to the end of November 2015, and that expenditure was 6% under budget at that time.
 - d** That the GMC had successfully achieved accreditation by the British Standards Institute to the International Standards Organisation (ISO) 10002 standard in

relation to the handing of internal complaints, and that the GMC was the first healthcare regulator to do so.

- e** Key outcomes of note from the Performance and Resources Board meeting on 21 January 2016.
- f** That the annual staff pay award had been approved. The pay award, which would apply from 1 April 2016, was made up of a core award of 1% plus scope for additional progression based on performance. It was noted that consideration would be given to a possible review of pay levels in 2017.
- e** That consultation with staff was underway in relation to the GMC Change Programme proposals and pensions reform. Council noted that the consultations would conclude in March 2016, and that an update would be given to Council at its meeting on 19 April 2016. It was noted that internal audit work had started on assuring aspects of the Change Programme, and its findings would be reported to the Audit and Risk Committee and Council.
- f** Summary information on current judicial reviews and appeals.
- g** That Iain McMillan had been appointed as Assistant Director for GMC Services, and that a report on the work would be brought to Council in June 2016.
- g** That work was underway on a new quarterly data collection for a revised performance dataset required by the Professional Standards Authority (PSA) following a change to the performance review process. Once this was completed, the PSA was expected to be able to give an indication of what type of review the GMC would be subject to and when the review would be.

Human Resources Report 2015

- 10** Council considered the annual report on Human Resources relating to the GMC as an employer, the diversity report for 2015 and the analysis of the GMC's recruitment process in relation to ethnicity.
- 11** During the discussion, Council noted:
 - a** That overall the report was very similar to the trends reported in the last two years.
 - b** An increase in the percentage of women in senior roles; and an increase in the number of applicants with a BME background and in offers made to this group.

- c** That the GMC's recruitment strategy included efforts to reach out to candidates who identified themselves as disabled, to give those applicants a named member of staff to support them through the application and interview process and to make reasonable adjustments if required. In addition, reasonable adaptations to the working environment for disabled employees were made and the GMC's scheduled home working policy for staff offered the potential for further flexibility in working arrangements.
- d** That the GMC's People Strategy included the introduction of a graduate programme from 2017 and expansion of the apprenticeship programme, and that the Change Programme would impact on staff recruitment in Manchester.
- e** Differences in gender pay equality for staff based in London, which would be monitored closely to ensure fairness.
- f** That there had been a slight increase between 2014 and 2015 in the time taken between advertising a vacancy and the appointee starting in post. This was due to many factors but it was expected to decrease in 2016 with recruitment activities arising from the Change Programme, which would include open evenings, targeted use of recruitment agencies to source candidates and testing/assessment centres for applicants on set dates.

Generic professional capabilities – outcome of public consultation

- 12** Council considered a report on the outcome of the public consultation on a generic professional capabilities framework, developed with the Academy of Medical Royal Colleges, and noted:
- a** The draft generic professional capabilities framework as approved by the Strategy and Policy Board on 4 February 2016. Council agreed that the framework should be amended to include a reference to practical procedures/skills and that consideration should be given to ensuring that the treatment of vulnerable people was sufficiently explicit in the domain on capabilities in safeguarding vulnerable groups.
 - b** The consultation outcomes summary and commentary.
 - c** That the next stage would be joint work with the Academy of Medical Royal Colleges to develop guidance for colleges about curriculum integration and assessment of generic professional capabilities.
 - d** That the generic professional capabilities framework would be operationalised through the GMC's *Standards for curricula and assessment systems* which was

under review in conjunction with the Academy of Medical Royal Colleges to embed into all postgraduate medical curricula.

13 During the discussion, Council noted that:

- a** The framework had been positively received by key interests.
- b** The framework's nine domains were interdependent, and no one domain was considered more important than the others, which would allow for each of the colleges and faculties to map out what practical skills were required for their individual specialty.
- c** Over time and once embedded in the 102 medical specialty curricula, the framework would lead to improved efficiency and a streamlined curriculum approvals process. The impact of the framework would be monitored
- d** Work was being undertaken to assess how the framework could be embedded into the existing Quality Assurance framework.

Guidance for doctors who offer cosmetic interventions

14 Council considered a report on the outcome of the public consultation on guidance for all doctors who offer cosmetic interventions.

15 Council:

- a** Approved the *Guidance for doctors who offer cosmetic interventions*.
- b** Noted the background information on the development of the guidance and outcome of the consultation.

16 During the discussion, Council noted that:

- a** The guidance was expected to be launched in April, although the date was likely to change from the reported date of 18 April 2016 so as to align it with the launch of the clinical guidance developed by the Royal College of Surgeons of England.
- b** The guidance would be accessible online, with links to other relevant, existing guidance documents where appropriate.
- c** Case studies were being produced, along with a postcard and a more detailed leaflet aimed at patients to explain what they should expect from their doctor in relation to cosmetic interventions.

- d** The Advertising Standards Authority had issued new guidance which made it clear that it was not acceptable to offer cosmetic interventions as a prize, or as part of a discount arrangement.

Consultation on publication and disclosure policy – outcomes and recommendations

17 Council considered a report on the outcome and recommendations of the public consultation on the GMC's policy on what to publish and disclose about a doctor's fitness to practise.

18 Council:

- a** Approved the consultation recommendations, subject to further consideration of how time limits would be applied in circumstances where a doctor had been subject to fitness to practise procedures on more than one occasion.
- b** Historical data from 1994-2005 would not be transferred to the online register, subject to further consideration of how it would be applied in circumstances where a doctor had been subject to fitness to practise procedures on more than one occasion, within the agreed time limits.

Requirements for Council member appointments and reappointments 2016

19 Council considered proposals for the requirements for Council member appointments and reappointments in 2016.

20 Council:

- a** Agreed the proposed competencies, experience and expertise required for the new Council member appointments in 2016, with the addition of the knowledge and skills identified during the skills audit which would be desirable rather than essential requirements.
- b** Agreed the proposed level of remuneration, time commitment and terms of office for the role.
- c** Agreed the proposed approach to staggering members' terms for reappointment from 2017 between two and four year terms.
- d** Noted the progress to date on the appointments process and next steps, including that regular updates on progress would be provided to Council as required.

Developing the List of Registered Medical Practitioners and an update on the Data Strategy

21 Council considered an update on work to develop the List of Registered Medical Practitioners, and an update on progress on the Data Strategy.

22 Council:

- a** Noted progress on adding new information to the List of Registered Medical Practitioners.
- b** Noted progress on the Data Strategy.
- c** Considered the draft consultation document on the future of the List of Registered Medical Practitioners.

Council forward work programme 2016

23 Council noted its forward work programme for 2016, which had been updated since it was agreed by Council at its meeting on 10 December 2015.

2017 meeting schedule

24 Council agreed the proposed schedule of meetings in 2017 for Council, Committees and UK Advisory Forum meetings.

Any other business

25 Council noted that its awayday in 2016 would be held at a hotel near Milton Keynes, and that the venue had been selected on the basis of the necessary meeting and accessibility requirements being met and securing value for money.

26 Council noted that the next meeting would be on 19 April 2016, in London.

Confirmed:

Terence Stephenson, Chair

19 April 2016