

24 January 2016

**Performance and Resources Board**

2

*Draft as of: 19 December 2016*

*To approve*

## **Minutes of the Meeting on 1 November 2016\***

### **Members present**

Susan Goldsmith, Chair

Judith Hulf  
Una Lane  
Anthony Omo  
Neil Roberts

### **Others present**

Dan Donaghy, Assistant Director of the Office of the Chair and Chief Executive  
Steve Downs, Assistant Director of Finance and Procurement  
Racheal Howard, Corporate Business Planning Manager  
Stephen Jones, Assistant Director of the Office of the Chair and Chief Executive  
Lindsey Mallors, Assistant Director of Audit and Risk Assurance  
Charlie Massey, Chief Executive  
Stephanie McNamara, Assistant Director of Strategy and Communication  
Rachel Mooney, Assistant Director of Information Systems  
Alastair Round, Board Secretary  
Anna Rowland, Assistant Director of Policy, Business Transformation and Safeguarding  
Peter Swain, Assistant Director of Decisions and Case Review  
Melanie Venables, Corporate Business Planning Manager  
Kirsty White, Assistant Director of Education Operations

\* These Minutes should be read in conjunction with the Board papers for this meeting, which are available on our website at <http://www.gmc-uk.org>

## **Chair's business**

- 1 The Board noted that apologies had been received from Paul Buckley and Judith Hulf.
- 2 The Chair welcomed Charlie Massey to the meeting, on his first day as Chief Executive.

## **Minutes of the meeting on 27 September 2016**

- 3 The Board agreed the minutes of the meeting on 27 September 2016 as a true record.

## **Operational Performance and Risk Review**

- 4 The Board considered an update on the major external factors which might have an effect on our operational performance, an update on our key performance indicators and targets, and an update on the key risks to the achievement of our strategic aims.
- 5 The Performance and Resources Board:
  - a Agreed that the management response to deviation in performance against Service Level Agreements (SLAs) was sufficient.
  - b Agreed that the exceptions in delivery against the business plan were within tolerance and did not require additional remedial activity.
  - c Agreed to close the following projects:
    - i Enhance Technical Capacity/Capability.
    - ii Implement the PLAB review recommendations.
    - iii Cosmetic Practice.
  - d Agreed the updates made to the Corporate Risk Register and agreed that the assessments of all other existing risks in the Corporate Risk Register remained accurate.
  - e Noted the status of actions from Committees, Internal Audit recommendations and Significant Event Reviews (SERs) in progress and agreed that any overdue actions do not require additional attention or action.
  - f Agreed the current actions in place to address new issues in the newly-developed Corporate Issues Log.

**6** During the discussion, the Board noted:

- a** A £44,000 underspend was forecast in Quarter 2, which was due to the likely expenditure in the quarter being overestimated.
- b** Registration for the GMC Conference had been very good. There had been some questions raised as to whether patients would be dissuaded from attending due to the introduction of a £25 fee but in reality, it had been difficult to attract patients to a conference of this nature anyway.
- c** An update would be provided to the Chief Operating Officer on the latest estimate of the resources required to respond to the Gosport review.
- d** There was a potential emerging risk related to the evaluation of revalidation. There had been concerns about work undertaken by UMbRELLA, in relation to its customer service and not keeping the GMC informed on progress. A constructive meeting had been held with UMbRELLA to discuss the issues experienced but this was an emerging area of risk.
- e** There was a potential emerging risk arising from the 2016 budget, in relation to restrictions on the use of personal services companies. As a public body subject to the Freedom of Information Act, any tax which was unpaid as a result of such an arrangement would fall on the GMC rather than the personal services company. This did not affect any directly-employed GMC staff but as the legislation had not yet been published, it was not clear whether it might affect any contractors. An external review of the GMC's arrangements would be undertaken to assess any potential risks.
- f** The Professional Standards Authority for Health and Social Care (PSA) had indicated that they were minded to fail the GMC against Fitness to Practise Standard 6. The GMC had provided a robust defence and considered that the PSA had not adequately taken account of the GMC's larger caseload compared to other regulators.
- g** Due to human error in the transfer of data, the April 2016 figure for the Registration and Revalidation Service Level Agreement to 'answer 90% of calls within 15 seconds' had been incorrectly reported. The GMC remained within target and answered 97% of calls, rather than 96% as previously reported.
- h** The paper would be withheld from publication on the external website.

## **Business Plan and Budget update**

- 7** The Board considered an update on the development of the Business Plan and Budget for 2017.
- 8** During the discussion, the Board noted that:
- a** A detailed version of the Business Plan and Budget would be considered at an additional Performance and Resources Board meeting later in the month, prior to its consideration by Council on 14 December 2016. The Council paper would be structured to demonstrate how the GMC was meeting its strategic aims.
  - b** Further work would be undertaken to include more information on the Data Strategy and work with partners to respond to the challenges in the wider healthcare environment.
  - c** The usual 3% efficiency target had not been included in the 2016 budget, due to the impact of the Change Programme. However, now that the people and accommodation aspects of the Change Programme were largely complete, the 3% efficiency target had been reinstated for each directorate in 2017.
  - d** Following the Change Programme, there was limited scope to make further savings on staffing costs which meant that a greater focus would be required on other costs to find efficiency savings.
  - e** The 2017 budget assumed that there would be no increase in the Annual Retention Fee in 2017. It also assumed a 4% increase in staff costs to provide for any costs arising from the implementation of the banding review and any pay increase.
  - f** A transformation fund had been put in place, which was designed to help the organisation deliver different ways of working which would help to increase efficiency. The fund was available for all directorates to access.
  - g** The presentation would be withheld from publication on the external website.

### **Digital Media Strategy**

- 9** The Board considered and noted an update on the progress that had been made during year one of the Digital Media Strategy, and the next steps planned for year two.

### **Provisional enquiries update**

- 10** The Board considered and noted an update on the implementation of provisional enquiries.

- 11** The Board noted that the presentation would be withheld from publication on the external website.

### **Recovery of costs for Performance Assessments from doctors applying for restoration**

- 12** The Board considered a proposal to recover the full costs of Performance Assessments from doctors applying for restoration.
- 13** The Board agreed that the GMC should charge £17,000, including VAT, for a Performance Assessment for an applicant for restoration, to reflect the actual cost of the Assessment.
- 14** During the discussion, the Board noted that:
- a** A very small number of doctors would be affected by this measure. These were doctors who had been erased during the investigation of concerns about their fitness to practise. The burden was on these doctors to demonstrate that they were fit to practise.
  - b** The measure was in line with the previously adopted principle that registrants in general should not pay for costs which impacted a small minority of doctors.
  - c** The fee proposed to be charged was broadly similar to the amount a private provider might charge, if such a provider existed.
  - d** A revised version of the paper would be published, which clarified the wording on the number of doctors likely to be affected by the proposals.

### **Items for inclusion in the Chief Operating Officer's next report to Council**

- 15** The Board agreed that the following items would be included in the Chief Operating Officer's report to Council:
- a** Digital Media Strategy.
  - b** Provisional enquiries update.
  - c** Recovery of costs for Performance Assessments from doctors applying for restoration.
- 16** The Board noted that Corporate Risk Register would be published as part of the Chief Operating Officer's report for the first time as part of the report to Council on 14 December 2016.

## **Report of the Aviva Group Personal Pension Plan Management Committee 2016**

**17** The Board noted the report of the Aviva Group Personal Pension Plan Management Committee 2016.

### **Any other business**

**18** The Board noted the date of its next meeting on 24 January 2017.