

To note

Provisional Enquiries (Rule 4(4)) pilot

Issue

- 1** An update on the progress of the Provisional Enquiries pilot which was launched in November 2014.

Recommendation

- 2** The Strategy and Policy Board is asked to note the progress of the provisional enquiries pilot.

Provisional Enquiries (Rule 4(4)) pilot

Issue

- 3** A provisional enquiry is a limited, initial enquiry at the first stage of the fitness to practise process which helps us to decide whether to open an investigation. Provisional enquiries help us respond more quickly and more proportionately to a complaint, to accurately assess risk and avoid unnecessary investigation.
- 4** We launch provisional enquiries in situations where we believe the allegation(s) to be serious but need further information to make a more informed decision as to whether to promote for a full investigation. We do not use provisional enquiries to validate our closure decisions (where the enquiry does not meet our investigation thresholds).
- 5** On 3 November 2014 we launched a controlled pilot of the provisional enquiries process. The purpose of the pilot is to:
 - a** Test the suitability of the 42 day service target, introduced to focus the duration of the provisional enquiry, reduce delays if the case is subsequently promoted for full investigation and prevent enquiries from remaining within the Rule 4(4) stage of the process longer than necessary.
 - b** Inform our understanding of how many provisional enquiries are likely to be opened each year.
 - c** Monitor the quality of decision-making within the new process (both in terms of identifying suitable enquiries and making a final decision as to whether to close or promote the enquiry) and, by learning from our experiences during the pilot, further improve guidance for decision-makers.
 - d** Assess the overall effectiveness and efficiency of the new process and identify and address any process bottlenecks.
- 6** We expect to have completed 100 provisional enquiries by the end of May 2015 and will present our full findings and recommendations from the pilot to the Board at its meeting on 16 July 2015. Within this paper we present an interim update.

Evaluating the pilot

- 7** Once we have completed 100 provisional enquiries, we will evaluate the pilot outcomes and report to the Board in July. Our evaluation themes include:
 - a** A process capability analysis which is used to assess whether actual process performance meets the required process performance. This will help us to put in place a meaningful service target for provisional enquiries and identify whether there are any obvious bottlenecks that need addressing.

- b** Quality of decision-making – including an analysis of closure decisions, consideration of any provisional enquiries reopened under Rule 12 (this rule enables a party to ask for a review of a decision by an assistant registrar) and an assessment of those provisional enquiries that have been promoted (to determine whether we can further improve the decision-makers' guidance).
- c** Seeking feedback from doctors, complainants, Responsible Officers, experts and staff members who have been involved in the process to identify areas for further improvement.
- d** Consideration of the costs and benefits of the process.

8 The following paragraphs provide a snapshot of pilot progress to date.

Volumes to date

9 To date we have identified 110 complaints suitable for the pilot and opened 131 provisional enquiries. The figures differ because a complaint may reference more than one doctor and therefore require us to open more than one provisional enquiry (one provisional enquiry per doctor). Based on these observations, we expect between 350 and 400 provisional enquiries each year.

Outcomes to date

10 Of the 131 enquiries opened, we have completed 68. 48 (or 71%) of these have been closed (with no further action being taken against the doctor) and 20 have been promoted to a full Stream 1 investigation. If we did not have the option of carrying out a provisional enquiry, we would have promoted all of the 131 enquiries to a full Stream 1 investigation.

11 Over a third of the provisional enquiries carried out have required expert opinion.

Process duration to date

12 We have analysed the 68 enquiries completed to date and the current results suggest that the average duration of a provisional enquiry is likely to fall somewhere between 52 and 65 calendar days.

13 We will rerun this analysis once 100 enquiries are completed including a full analysis of each step within the process.

Next steps

14 We will report pilot outcomes to the Board at its meeting on 16 July 2015. We have prepared an implementation plan which assumes a go-live date shortly after the

Board meeting. Further detail on the proposed implementation will be included within the board paper including a cost, benefit and resource analysis.

Supporting information

How this issue relates to the corporate strategy and business plan

- 15 Strategic Aim 3: to improve the level of engagement and efficiency in the handling of complaints and concerns about patient safety.

How the issues support the principles of better regulation

- 16 The introduction of provisional enquiries will result in a more proportionate, targeted response to complaints received and better allocation of our resources ensuring that we do not over-promote allegations and continue to investigate thoroughly complaints that raise serious concerns about a doctor's fitness to practise.

How the action will be evaluated

- 17 We plan to evaluate the success of the new process once 100 provisional enquiries have been completed. This will include: an assessment of process duration and efficiency; consideration of the quality of decision-making; and feedback from internal and external parties involved in the process.

What engagement approach has been used to inform the work (and what further communication and engagement is needed)

- 18 Prior to the launch of the pilot we discussed our approach with a number of external stakeholder groups including medical defence organisations, medical experts and, through our employer liaison advisers, Responsible Officers.
- 19 Training/ workshops were held for triage and investigation staff. The review group meet daily and the project team meet weekly to assess progress and discuss issues.

What equality and diversity considerations relate to this issue

- 20 Between May 2013 and April 2014, 1779 Stream 1 cases were closed with no further action. At 11 June 2014, 74% (1312) of doctors in these cases were male as compared to 56% on the register. 37% were BME doctors compared with 28.7% on the register. And, 36% were IMGs compared with 26.1% on the register.
- 21 We consider that this initiative will benefit doctors over-represented in our procedures by reducing the need for Stream 1 investigations in some cases.

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