

To consider

Chief Executive's Report

Issue

- 1** This report sets out progress on our strategic aims and significant changes in our external environment since Council last met.
 - Section one: outlines developments in our external environment.
 - Section two: reports on progress on our strategy.

Recommendation

- 2** Council is asked to consider the Chief Executive's report.

Chief Executive's Report

Section one — Developments in our external environment

Strategic risks and issues

Legislative reform

- 3** The Government response to the Law Commissions Bill was published on 29 January 2015. The response largely reflects the policy discussions that we have had with the Department of Health over the last nine months and contains a great deal that we are happy to support. We have issued a statement welcoming the response and urging political parties to commit to taking the Bill forward. There are, nevertheless, some significant issues of principle and detail that have still to be resolved. These will be the focus of our on-going discussions with Department of Health officials and our key interests.
- 4** The Government has also published its report following the consultation on proposed changes to reform of our fitness to practise adjudication procedures. The timetable remains tight but we are on track for the section 60 Order to be made on 26 March 2015. We will be undertaking work on supporting rules with a view to them coming into force in December 2015.
- 5** The Medical Innovation Bill had its third reading in the House of Lords on 23 January 2015 and will now proceed to the Commons. It remains to be seen whether there will be sufficient time for the Bill to progress further before the end of this Parliament. We remain to be convinced about the need for the Bill but have sought to engage positively and discussed amendments where these support patients' interests and good professional practice.

Morecambe Bay Investigation

- 6** We continue to correspond with the Morecambe Bay Investigation into deaths of mothers and new born babies at Furness General Hospital, between 2004 and 2013. The investigation is focused on the actions, systems and processes of the Trust, as well as the actions of regulators and commissioners. It is expected to report to the Secretary of State in February.

Gosport War Memorial Hospital

- 7** The Gosport War Memorial Hospital Panel has published its terms of reference. It plans to review the documentary evidence about the care of patients and subsequent investigations into their deaths in Gosport War Memorial Hospital. It intends to review

all investigations and concerns raised with all other relevant organisations and individuals from 1980 to the present day. The panel expects to complete its work by the end of 2017.

- 8** I will be meeting with Christine Gifford (Panel member) and Peter Burgin (Panel Secretary) to discuss how we can assist with its work and its information requirements.

Health Select Committee annual accountability hearing

- 9** We had our annual accountability hearing before the Health Select Committee on 6 January. Terence Stephenson, Judith Hulf, David Pearl and I answered a range of questions across each of our functions. The Committee will be dissolved at the end of March before the General Election and any report following our hearing will be published before this date.

Devolution of further powers to Scotland

- 10** The proposed Scotland Bill setting out new powers to be devolved to Scotland does not include anything related to professional regulation. We continue to monitor any developments.

Work of the IAMRA Chair

- 11** The International Association of Medical Regulatory Authorities (IAMRA) has now appointed a part-time Executive Director who will start in post in April. This role is an important first step in enabling IAMRA to promote and support the development of international medical regulation worldwide and better serve the needs of its members.
- 12** At the end of January I attended the Executive Board meeting of the World Health Professions Alliance (WHPA) in Geneva to introduce the work of IAMRA and to explore opportunities for collaboration between the WHPA and IAMRA. At the same time I met Dr Erica Wheeler, Technical Officer at the Department of Health Workforce in the World Health Organisation (WHO) to explore how IAMRA and WHO could work more closely together.

Shape of Training and credentialing

- 13** The UK Shape of Training Steering Group has now submitted its report to ministers and we await the response from the four governments of the UK response. One of the key elements of the Shape of Training recommendations is the introduction of credentialing, a system for accrediting doctors' competence in defined areas of practice.

- 14** Council received the final report of our credentialing working group at its meeting in December and since then, we have begun to develop detailed policy and operational processes needed to inform the public consultation planned for June.

Key engagements

- 15** On 18 December 2014, I attended an event in Northern Ireland on promoting professionalism. This is the first in a series of events we will run across the UK.
- 16** On 13 January 2015, I gave a speech at Westminster Health Forum on the next steps for palliative and end of life care.
- 17** On 13 January 2015, Terence Stephenson and I had a meeting with Dr Mark Porter, Chair of the BMA, to discuss various topics including differential attainment in medical education and training and the Shape of training review.
- 18** On 13 January 2015, Terence Stephenson and I had a meeting with Dr Dan Poulter MP to discuss the proposal to move the point of registration. Representatives from Health Education England and the Medical Schools Council were also part of the discussions. A UK wide engagement exercise will be held starting in mid-February and running until the end of March, at which point a report will be prepared for the next government to consider.
- 19** On 21 January 2015, Martin Hart and I visited the University of Edinburgh, College of Medicine to engage with the Dean, Programme Directors and medical students.

Section two — Progress on our strategy

Strategy and Policy Board

- 20** The Strategy and Policy Board met on 3 December 2014 and:
- a** Agreed that we should exercise our legal powers to permit part-time specialist training.
 - b** Approved the updated draft consultations policy, as well proposals for further development and plans implementation later in 2015.
 - c** Agreed proposals to develop our research programme which would operate through a call for expressions of interest to be launched at the GMC Conference 2015.
 - d** Considered the review of meetings with doctors and agreed proposals for the future provision of such meetings.

- e** Agreed proposals for the future provision of the Doctor Support Service following evaluation of the pilot programme.
- f** Noted the progress of the pilot on post sanction assessments.
- g** Approved proposals jointly developed with the Care Quality Commission for increased information sharing.
- h** Considered an interim update on progress with the consultation on the *Indicative Sanctions Guidance, the role of apology, and warnings*.
- i** Considered and agreed the *Guidance for dealing with doctors at risk of suicide who may be referred to the Disclosure and Barring Service and Disclosure Scotland*.
- j** Approved the proposed principles for the development of the revalidation assessment, and noted the next steps.
- k** Approved the proposals for making revalidation decisions about doctors without a prescribed connection to a designated body, or a connection to a suitable person.
- l** Noted an update to the Welcome to UK Practice programme.
- m** Noted the proposed terms of reference, and arrangements for the constitution of the Assessment Advisory Board.
- n** Considered and approved the proposed Terms of Reference for Specialist Applications Panels.
- o** Received an update on the information sharing pathway project and our progress of the work with other health regulators including timelines for the outputs of the project.

21 The Strategy and Policy Board met on 3 February 2015 and:

- a** Noted progress on the development of joint GMC guidance with the Nursing and Midwifery Council on the duty of candour and the planned publication in March 2015.
- b** Considered a review of our approach to issuing advice at the end of fitness to practise investigations, with the aim of clarifying the role of advice, and to ensure our approach is in line with developing thinking on warnings emerging from the consultation on Indicative Sanctions Guidance.
- c** Approved a minor change to the UK Advisory Forums Statement of Purpose, to state that the Secretariat will now be provided by the GMC's Devolved Offices in addition to the Governance Team.

Suicides Review

- 22** We have developed an action plan to respond to the recommendations in the report that includes a fundamental review of how we deal with doctors with health problems in our fitness to practise procedures. The report made recommendations about the provision of healthcare for doctors which are not within our remit we will host a round table discussion of the issue.

Whistleblowing Review

- 23** We expect to receive Sir Anthony Hooper's review of how we deal with doctors who raise concerns in the public interest in March this year. This will allow time to consider the conclusions of Sir Robert Francis' wider review for the Department of Health into 'speaking out' which is due for publication on 11 February.

Tracking Survey

- 24** We commissioned a Tracking Survey last year to evaluate the impact of our work and communications. Fieldwork and analysis was carried out on our behalf by IFF Research, to ensure confidentiality and independence. The report will be published shortly.
- 25** Overall, the results are positive and give some assurance that key audiences have confidence in the GMC and its work. In particular, many doctors who have been through revalidation report positive changes to their practice. However, the results highlight gaps in doctors' understanding of our role in areas other than fitness to practise. We will forward these and other learning points in developing our communications and engagement work.

Supporting information

- The Law Commissions draft Bill on the Regulation of Health and Social Care Professionals: <http://lawcommission.justice.gov.uk/publications/Healthcare-professions.htm>
- Department of Health (England) consultation on changes to the way the GMC decides on a doctor's fitness to practise and the PSA's power to refer cases to higher courts: <https://www.gov.uk/government/consultations/changing-how-the-gmc-decides-on-doctors-fitness-to-practise>
- Morecombe Bay Investigation: <https://www.gov.uk/government/organisations/morecambe-bay-investigation>
- Shape of Training Review: <http://www.shapeoftraining.co.uk/aboutus/1735.asp>
- GMC consultation on reviewing Indicative Sanctions Guidance and the role of apologies and warnings: http://www.gmc-uk.org/concerns/fitness_to_practise_consultations.asp#Reviewingour
- Doctors who commit suicide while under GMC fitness to practise investigation: http://www.gmc-uk.org/Internal_review_into_suicide_in_FTP_processes.pdf_59088696.pdf

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