

Guidance for decision makers on directing a health assessment

Introduction

- 1** The purpose of this guidance is to maintain consistency in the approach taken by GMC decision makers when considering whether to direct a health assessment of a doctor whose fitness to practise may be impaired as a result of adverse physical or mental health. This could be current adverse health, a continuing or episodic condition, or a condition which, although currently in remission, may be expected to recur and potentially cause impairment of fitness to practise*.
- 2** This guidance aims to help decision makers decide whether or not a health assessment is required. It is intended to support consistent and fair decision making in relevant cases.
- 3** This document should be considered together with our guidance [Good medical practice](#).

FTP Rules for requesting a health assessment

- 4** The Registrar (or his/her designated representative, an Assistant Registrar) may direct a doctor to undergo a health assessment under the following GMC Fitness to Practise (FTP) Rules:
 - a** Rule 7(3) - after an allegation has been referred for consideration by a case examiner as part of a fitness to practise investigation
 - b** Rule 13A - after an allegation has been referred to a MPT tribunal as part of a fitness to practise investigation
 - c** Rule 10(6) - where undertakings have been agreed with the case examiners (regardless of the area of impairment)
 - d** Rule 37A(1) - where undertakings have been agreed by a MPT tribunal (regardless of the area of impairment)

* GMC Fitness to Practise Rules 2004, Rule 17 (6)

- e Rule 23(1)(b) – following receipt of an application for restoration following erasure by a MPT tribunal or due to administrative erasure
- 5 Once a medical practitioners tribunal has opened its proceedings, and before it makes a decision about impairment of a doctor’s fitness to practise, the medical practitioners tribunal may adjourn and direct a health assessment under Rule 17(7)(a). The Registrar would be notified of any direction made by a tribunal under this rule.
- 6 The Registrar may also invite a doctor to undergo a health assessment under Rule 19(b), prior to the opening of a review hearing, with consideration of the directions made by the medical practitioners tribunal at any previous hearing.

Health assessments during the investigation stage

- 7 The Registrar’s decision to direct a health assessment during the investigation stage is informed by the evidence gathered by the investigation team and the advice and recommendation of a medical case examiner.
- 8 In order to consider the factors which may indicate the need for a health assessment, the medical case examiner would need to determine:
 - a whether there is a possible health problem
 - b what type of health problem it may be
 - c whether the health problem has or is likely to affect the doctor’s fitness to practise
 - d whether the health problem is being managed locally
 - e whether the doctor is compliant with treatment

Factors which indicate a health assessment may not be appropriate

- 9 The presence of one or more of the factors below may suggest that a health assessment is not needed and that local management is appropriate:
 - a the type and severity of the health problem reported is unlikely to affect the doctor’s fitness to practise or pose a risk to patients either now or in the future
 - b there is no evidence that the doctor’s health has had a significant effect on his clinical competency or conduct to date
 - c there is evidence that the doctor has insight into their condition and is seeking or receiving appropriate treatment or support

- d independent medical opinion is available to demonstrate insight and compliance with treatment
- e the employer and Occupational Health are aware of the health problem and are providing support
- f the doctor is in stable, long-term employment or training and is subject to an effective locally managed action plan
- g the doctor is restricting their practice appropriately, according to a locally managed action plan

Factors which indicate a health assessment may be required

- 10** The presence of one or more of the factors below may indicate that fitness to practise issues may arise and a health assessment may be required:
- a the type and severity of the health problem reported is likely to affect the doctor's fitness to practise either now or in the future (e.g. has high rates of relapse or is likely to result in a lack of insight or cooperation on the part of the doctor)
 - b the type and severity of the health problem poses a clear risk to patients or is likely to pose a risk to patients either now or in the future
 - c the doctor is currently or has recently been compulsorily detained under the Mental Health Act 1983 (see paragraph 9 below)
 - d there are existing performance and/or conduct concerns which seem likely to be related to the doctor's health status/condition
 - e independent medical opinion raises concern in relation to the doctor's level of insight or compliance
 - f the doctor lacks insight or has failed to seek appropriate treatment
 - g the doctor has failed to follow the advice of treating physicians and/or occupational health departments or has ceased to engage with support
 - h the doctor's health appears to have led to involvement in dishonest or criminal activity (a health assessment is indicated whenever abuse of alcohol or drugs has resulted in a criminal conviction, for example driving while under the influence of alcohol)
- 11** In considering the above factors, the Registrar may also wish to consider whether:
- a the doctor has any fitness to practise history
 - b a health assessment is appropriate, if the doctor is seriously ill

- c a health assessment is appropriate, where the doctor is currently an in-patient or is receiving community care

Health assessments for doctors with restrictions on their practice

- 12** There are times when the Registrar may invite a doctor who has conditions, or has their registration suspended, to undergo a health assessment to establish their current health status. The Registrar may also direct a doctor who has agreed undertakings, either with the case examiners or the medical practitioners tribunal, to undergo a health assessment. This may occur:
- a when there is documented evidence of a sustained improvement in the doctor's health, and evidence is being considered to support either variation or revocation of undertakings. This may not necessarily be triggered by a full recovery of the doctor's health but rather that the doctor has developed his/her insight to recognise any warning signs, the doctor's illness is being appropriately managed and there are no on-going public safety risks*.
 - b if there has been a breach of the undertakings or conditions, or a deterioration in the doctor's health that suggests a change in the doctor's health status
 - c when the medical practitioners tribunal has directed that the doctor undergoes an assessment before the case is reconsidered at a review hearing
- 13** The Registrar's decision to direct or invite a doctor to undergo a health assessment, in the circumstances above, may be informed by the advice and recommendation of the medical case examiner.

Restoration to the GMC register

- 14** Where a doctor who has previously been erased as the outcome of a fitness to practise process applies for restoration to the GMC register, the Registrar may need to consider whether to direct a health assessment to inform their decision[†]. This is likely to be the case where there is new or previous information that raises a question about the doctor's fitness to practise based on health concerns.
- 15** The GMC guidance document, [Guidance on making decisions on voluntary erasure applications](#), provides guidance for decision makers about applications for restoration to the GMC register following voluntary erasure, where there are concerns about a

* Guidance for decision makers on variation or revocation of undertakings

† GMC Fitness to Practise Rules 2004, Rule 23 (1)(b)

doctor's health. The same guidance applies when considering health assessment for a restoration application following administrative erasure.