

Agenda item:	M3
Report title:	Chief Executive's Report
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Action:	To consider

Executive summary

This report outlines progress on our strategy and developments in our external environment since Council last met.

Key points to note:

- I have written to employers – trusts and boards – in the UK to remind them of our standards for medical education and training, and our expectation that these standards will be met. This follows our findings from the 2016 National Training Survey which we published on 1 December.
- The Department of Health is preparing to publish a consultation on the reform of professional regulation in the UK, probably before Christmas. They have also confirmed an intention to consult early in the New Year on the regulation of physician associates.
- Working with other bodies, we have been asked by the Department of Health to look at how we can encourage more clinicians to move into positions of leadership and management, as well as to review whether we can create a career path for advanced nurse practitioners to become doctors.

Recommendations

Council is asked to consider the Chief Executive's Report.

Progress on our strategy

National Training Survey, 2016

- 1 This year's national training survey was completed by nearly 54,000 doctors in training (a response rate of 98.7%) and 23,600 trainers (a response rate of 53.3%).
- 2 On 1 December we published [our key findings](#) which highlighted the fact that doctors have told us, in significant numbers, that current workloads are threatening the time they need to train and be trained.
- 3 I have therefore [written to employers](#) – trusts and boards – in the UK highlighting our findings and reminding them of our standards for medical education and training. It is clear there is a need for vigilance and action – nationally as well as locally – to make sure the quality of UK medical education and training is protected in these very difficult times. I am clear that where there is evidence that our standards are not being met, we can and will take action.

The State of Medical Education and Practice in the UK, 2016

- 4 We published our annual report, the [State of medical education and practice in the UK](#), in October 2016. The overview to the report highlighted the state of unease that currently exists in the medical profession and the risk that brings, not only to doctors, but to the quality of patient care.

GMC review on making training pathways more flexible

- 5 We held a workshop on 20 October 2016 as part of our review on making training pathways more flexible. The review stemmed from the agreement originally reached between the Government and the British Medical Association (BMA) over the contract in May 2016. We are taking forward the review with a view to supporting improvements in the morale and working lives of doctors in training.
- 6 The workshop was attended by organisations from across the UK, including HEE, NHS Education for Scotland, the Northern Ireland Medical and Dental Training Agency and the Welsh Deanery as well as members of the BMA Junior Doctors Committee, the BMA Medical Students Committee, the Academy Trainee Doctors' Group and the Association of Surgeons in Training.
- 7 The workshop enabled a wide-ranging discussion about flexibility. We are currently drafting a stock-taking paper, to capture the key issues raised. The paper, together with further targeted engagement with stakeholders, will inform a report that will be delivered to Ministers in the four nations by the end of March 2017.

Taking revalidation forward

- 8 In March 2016, we asked Sir Keith Pearson to undertake an independent review of revalidation and report to Council before the end of the year.
- 9 We have now received Sir Keith's report and will publish it, along with our response, in January 2017.
- 10 Running in parallel to Sir Keith's review is UMbRELLA's evaluation of revalidation. A number of work streams continue, including follow-up surveys with select groups of doctors such as locum doctors, doctors without a prescribed connection, doctors working in the independent sector and specialty and associate specialist (SAS) doctors. The final report of the evaluation should be available in early 2018.

Medical Licensing Assessment

- 11 We have continued to engage closely with key experts and stakeholders on our plans for a Medical Licensing Assessment (MLA). On 21 October 2016 we held the first meeting of our Expert Reference Group which is chaired by Professor Neil Johnson, who is also chair of the Medical Schools Council Assessment Alliance.
- 12 During October and November we have had constructive discussions with the Medical Schools Council and with government officials and we convened a workshop to help us scope a review of our [Outcomes for graduates](#), our current guidance on the knowledge, skills and behaviours that new UK medical graduates must be able to demonstrate. The review will inform the content of the new MLA.
- 13 We are currently finalising our consultation on the MLA, working closely with key stakeholders. We plan to launch the consultation in January 2017.

GMC conference

- 14 The annual GMC conference will take place on Tuesday 6 December, with a particular focus on medical professionalism. We are expecting around 300 attendees.
- 15 At the conference we will be running workshops on working together to support doctors in training, medical professionalism in the twenty-first century, revalidation as a way to support doctors' professionalism and the importance of insight in fitness to practise. We will also hold a panel discussion on promoting and protecting medical professionalism in uncertain times.
- 16 We will use the conference to launch the final report of the Medical Professionalism Matters programme. The programme has run over the past 18 months in partnership with an advisory group of healthcare organisations led by the GMC. We hosted seven events across the UK which were attended by almost 600 doctors and other healthcare staff and patient representatives. Hundreds more joined the discussion online, taking part through videos, blogs and social media exchanges.

Strategy and Policy Board

- 17** The Strategy and Policy Board met on 6 October and 1 December 2016 and made the following recommendations:
- a** Following a recent High Court judgement, to approve the intention not to consider further the proposal to allow an interim order of suspension to be taken into account by tribunals considering the imposition of a substantive suspension.
 - b** To agree that the GMC would adopt a revised Certificate of Current Professional Status template. This will bring the GMC in line with the template set out in the Edinburgh Agreement, which is an agreement between Competent Authorities about the exchange of information on healthcare professionals.
 - c** To approve new guidance for decision makers to clarify when a conduct concern linked to health may be addressed by taking action to address the health issue alone, or when action must be taken to address both the health and conduct concerns.
 - d** To expand the scope of the work to implement the Appleby proposals, to include correspondence with all doctors who are particularly vulnerable as well as those who are subject to investigation by the GMC.
 - e** To endorse proposed changes to the acceptable overseas qualification criteria as part of a review to develop fairer, more transparent criteria that clearly articulate to applicants the requirements overseas qualifications must meet in order to be acceptable.
- 18** The Board also received updates related to:
- a** The [Assessment Advisory Board](#) meetings during 2016.
 - b** An [annual report from the Quality Scrutiny Group](#) summarising the scrutiny of the GMC's quality assurance activity since November 2015.
 - c** [Updated guidance](#) which had been developed for tribunal members on the approach to take when deciding the facts of a case where the doctor involved has raised public interest concerns locally.
 - d** Progress against implementing recommendations arising from the 2012 [Review of the routes to the GP and specialist register: final report](#).
 - e** Progress of the [Supporting Vulnerable Doctors project](#).
 - f** An update from the autumn meetings of the [UK Advisory Forums](#) in Scotland, Northern Ireland and Wales.

Council member appointments

- 19** The Notice of Recommendation to appoint two lay members and two medical members, and re-appoint those Council members eligible for re-appointment, was submitted to the Professional Standards Authority (PSA) on 25 October 2016. The PSA has provided its advice to the Privy Council and the Privy Council has now written to both the four new Council members and to eligible current Council members to confirm their appointments.

Developments in our external environment

The future shape of professional regulation

- 20** During the summer the Department of Health held a series of stakeholder workshops on the reform of UK health professional regulation. These were intended to develop thinking in preparation for bringing forward reform proposals later in the year. We anticipate a formal consultation on those proposals imminently, but the publication date is yet to be confirmed.

Brexit

- 21** In October 2016 we submitted written evidence to the House of Commons [Health Committee inquiry](#) into the priorities for health and social care in the negotiations on the UK's withdrawal from the European Union. Our submission lays out our principal concerns with the EU framework for the recognition of medical qualifications and highlights opportunities for reform arising from EU withdrawal. We expect the Committee will decide soon when and from whom to take oral evidence.

Secretary of State's speech to NHS Providers

- 22** In a [speech to NHS Providers](#), the Secretary of State Jeremy Hunt made a series of announcements seeking to address challenges of motivation, morale, leadership and flexible working in the NHS in England.
- 23** On clinical leadership, the Secretary of State has asked us to work with the Faculty of Medical Leadership and Management and the Nursing and Midwifery Council (NMC) to explore how we can provide greater incentives for clinical leaders to take up management roles. He has also asked us to work with Health Education England (HEE) to examine how clinical leadership can be incorporated as a core component of all specialty training and consider whether this should be established as a specialty or sub-specialty in its own right.
- 24** We have also been asked to work with the Royal College of Nursing, NMC and HEE to review whether it is possible to create a career path for advanced nurse practitioners who wish to re-train as doctors.

- 25** In the speech, the Secretary of State also confirmed that the Department of Health will consult in the New Year on whether and how physician associates should be regulated. We have been clear that physician associates must be properly regulated and have held discussions with the Health and Care Professions Council and other bodies about what form this could take.

Lords NHS sustainability committee

- 26** In May 2016, the House of Lords appointed a [Select Committee on the Long-Term Sustainability of the NHS](#), chaired by Lord Patel. The Committee is considering five main areas to guarantee the sustainability of the NHS, one of which focuses on workforce issues. We submitted written evidence to the committee in October which focused on the future role of regulation, training the medical workforce of tomorrow and the supply, retention and skills mix of the future NHS workforce.
- 27** In addition, the Chair, Terence Stephenson, is due to give oral evidence to the committee, on Tuesday 6 December.

North Middlesex University Hospital NHS Trust

- 28** As previously reported to Council, we have had serious concerns about the suitability of North Middlesex University Hospital NHS Trust's (NMUH) emergency department as a training environment.
- 29** NMUH's emergency department has been subject to our Enhanced Monitoring process since May 2015 and we have worked closely with Health Education England (HEE) and undertaken a series of inspection visits with Health Education North Central East London (HENCEL). The 2016 [National Training Survey](#) results showed extremely poor outcomes for emergency medicine at NMUH, reflecting the serious concerns that we have had for some time.
- 30** The GMC and HENCEL re-visited on 13 September 2016. We found evidence that improvements had been put in place, and doctors in training were reporting a better educational experience. However, concerns remained about the sustainability of these improvements. The next visit will take place in December 2016 or January 2017, to assess how the Trust is coping with winter pressures. The visit timing will hopefully enable HENCEL and the GMC to capture the experiences of doctors in training who have worked in the department for long enough to have gained an accurate impression.

Key engagements

- 31** In my first month at the GMC I have met a wide-range of people, both inside and outside the organisation, to build an understanding of how we work and are viewed.

- 32** I have held introductory meetings with the Academy of Medical Royal Colleges, the Royal College of Physicians, the Royal College of Surgeons, the BMA, the PSA, the NMC and the chief executives of other statutory professional regulators.
- 33** I was pleased to be able to spend a day at North Manchester General Hospital shadowing doctors in training in the emergency department and meeting with trainees and with SAS doctors.
- 34** I visited Scotland on 23 November, Wales on 29 November and will be in Northern Ireland on 8 December.
- 35** In Edinburgh I met with the Chair and Director of the BMA in Scotland, the Scottish Association of Medical Directors and the Chief Executive and Medical Director of NHS Education Scotland. I was struck by the interest expressed by stakeholders in Scotland around workforce issues and how they are managed.
- 36** In Cardiff I met with NHS Confederation in Wales, the Chief and Deputy Chief Medical Officer, the BMA, the Community Health Councils, Swansea and Cardiff Medical Schools and the Wales Audit Office. A common theme that emerged from the visit was the particular challenges Wales is facing around recruitment and retention, from medical students to GPs and hospital doctors, particularly in rural areas.
- 37** I attended the November meeting of the Black and Minority Ethnic (BME) Doctors Forum. The forum is an important mechanism to make sure that our regulatory activities and policies consider the views of, and impact on, BME doctors and international medical graduates (IMGs) practising in the UK.
- 38** On 30 November I was delighted to co-host this year's Valued Awards for GMC staff with Susan Goldsmith in Manchester. We handed out a series of awards to individuals and teams based on our core organisational values of excellence, fairness, transparency and collaboration. For the first time this also included an award for excellent customer service. The event was a celebration of the dedication and professionalism of all our staff.