



# Annual report 2020

Audit and Risk Committee report

General  
Medical  
Council

## Audit and Risk Committee report 2020

The Audit and Risk Committee plays a key role in our governance. The Committee provides Council with independent assurance about:

- the integrity of our financial statements
- the effectiveness of internal control, governance and risk management systems
- the delivery of internal and external audit services.

It also monitors our anti-fraud policies and any risks relating to the General Data Protection Regulations, and reviews arrangements for raising concerns.

The Committee bases its advice and decisions on guidance issued by the Financial Reporting Council, the Charity Commission, the Office of the Scottish Charity Regulator and, where appropriate, independent external advice.

At the beginning of 2020, there were seven members on the Committee – five Council members and two co-opted members. The Committee welcomed a new Council member in February and another Council member stood down in May. Co-opted, or independent, members enhance the work of the Committee by bringing valuable additional skills and experience to the independent scrutiny of on finance, risk and governance. All members of the Committee participate in an annual appraisal process.

In 2020, the Committee met five times and submitted two formal reports on its work and findings to Council. As well as this, Committee members had the opportunity to learn more about, and scrutinise, specific areas of the business and their risks, in three seminar sessions.

The Committee bases its annual work programme on risk and our Corporate Opportunities and Risk Register reflects the key strategic risks we manage. The Committee's oversight and scrutiny play a valuable role in assuring that risks are being managed and opportunities are enhanced through effective systems of governance, internal control and risk management arrangements.

## Key activities during 2020

2020 was an unusual year and the risks we faced changed with the onset of the pandemic. In March, the Committee paused its planned internal audit programme. It felt able to do this given the assurance it had from previous years on the strength of the internal systems of governance and control, as well as the embedded risk management arrangements.

The remaining internal audit programme was refocused on a series of learning reviews, providing scrutiny, support and assurance of the adaptations we made in our operations and ways of working. It also monitored and considered new risks emerging in the external environment.

At each of its meetings, the Committee:

- discussed a wide range of strategic risks to provide an important backdrop to its understanding of the challenges and opportunities the GMC was facing from the pandemic
- considered the assurance it had with respect to how the organisation was responding to emerging threats and opportunities
- challenged the corporate opportunities and risk register
- continued support for risk maturity evolution in line with the principles of effective risk management set out in the international guidance standard (ISO 31000:2009)
- scrutinised audit and learning review findings to satisfy itself that the actions being taken were appropriate
- monitored the implementation of recommendations made in previous audit reports to make sure they were being managed effectively by senior management
- reviewed any findings and lessons learnt from work undertaken in relation to significant adverse events.

Other key activities in the year included:

- approving the external audit letter of engagement and scrutinising the Annual Report and Accounts 2019, including the outcome of the external auditor's work on the financial statements and annual report – given the economic implications of the pandemic, this included a focus on whether, and an assurance that, the GMC could continue its activities beyond 2020
- reviewing the Head of Internal Audit annual report and opinion
- commissioning an independent test of the GMC's cyber security control arrangements

- reviewing concerns raised to the Freedom to Speak Up Guardian as reported in the latter's 2019 Annual Report
- holding a seminar to understand the holistic picture of local, central and independent quality controls and assurance, to inform its decision on internal audit focus for 2021.

Each year, the Committee also commissions an independent review of the GMC's arrangements for compliance with BS 10008 – the Evidential weight and legal admissibility of electronically stored information (ESI) Specification to which the GMC became fully accredited in 2016. The independent reviewer was complimentary about our work, concluding that the information management system at the GMC is effective in ensuring the trustworthiness of electronic information. They were also impressed with the organisation's response to the pandemic and its ability to maintain standards during a challenging period.

## Risk management

To achieve more influence beyond the immediate remit of doctors, we must also work with others to maximise our impact and manage risks and their implications on others sensitively.

During 2020, we continued to use opportunities to contribute to external debate on supporting the UK Government's response to the pandemic and working with partners to support safe working environments for all healthcare professionals, including doctors.

Risk thinking is also inherent in our discussions and operations at all levels of the business. We have a mature set of risk management arrangements embedded in our day-to-day activities and use risk registers as a tool for identifying, articulating, monitoring and managing operational and project risks. We also have robust governance arrangements with risks and opportunities escalated to the Executive Board for action when needed.

Our corporate opportunities and risk register is published regularly on our website through [the Chief Executive's report to Council](#).

## Managing risks in 2020

While responding to the pandemic raised some significant challenges, it also brought opportunities to review how we manage our operations and ways of working, both as a regulator and as an employer.

Our priority focus throughout 2020 has been to protect patients, support the medical workforce, and promote the health and wellbeing of our own colleagues. For more information about the initiatives involved with this, see page 20 onwards.

## Managing non-pandemic risks and opportunities

Alongside our work in response to managing the pandemic, we continued to progress other priorities, including:

- driving work forward on our *Supporting a profession under pressure* programme as part of our commitment to becoming a proactive regulator (see page 31)
- managing preparations for the impact of Brexit (see page 44)
- preparing for the introduction of the Medical Licensing Assessment (see page 26)
- responding to a range of important public investigations and inquiries, such as the Independent Neurology Inquiry in Northern Ireland, the Shrewsbury and Telford investigation on maternity care and the Inquiry into the death of Elizabeth Dixon.

During 2020, we also carried out an internal review of the case of Teodora Crisovan. Crisovan is a Romanian national who used fraudulent documentation to gain registration and a licence to practise in the UK. She came to our attention through a telephone call to our helpline expressing concerns about her being a qualified doctor. We responded promptly, protecting patient safety with an interim order, notifying the Police of criminal action and, shortly afterwards, removing her from the register of licensed medical practitioners.

Crisovan was registered under a provision in the *Medical Act 1983* that covers the registration of nationals from any one of the 29 countries in the EEA. We have long expressed our concerns with the significant risks of this route to registration, as the provision allowed EEA nationals with recognised medical qualifications an automatic entitlement to GMC registration.

Since 1 January 2021, the GMC is no longer prevented by EEA legislation from carrying out primary source verification checks on medical qualifications awarded to EEA nationals. All EEA applicants now need to meet the same requirement as international medical graduates and have their medical qualifications independently verified before they apply for registration. We are also able to require EEA doctors to provide evidence of their English language skills upfront before they apply for registration.

Our internal review of the case provided further opportunities to identify areas of our procedures that could be further strengthened beyond the changes brought about by leaving the EU.

- We'll provide refresher fraud awareness training on a more regular basis going forward, to help colleagues keep abreast of the complex and sophisticated techniques being used.
- We're checking the medical qualifications at source of a random sample of doctors who were granted registration without an ID check. Once we've completed checks on this sample and analysed the results, a risk-based decision will be made as to whether we should proceed to check a further sample.

## Beyond 2020

For the foreseeable future, there remains an unprecedented and turbulent external landscape. The continuing uncertainty creates a dynamic environment with both significant challenges and rich opportunities. In December 2020, we published our ambitious new [Corporate strategy 2021–2025](#) and the pandemic provides a backdrop against which to push our agenda forward in 2021 and beyond. Active risk management of both opportunities and threats will be key to supporting us in making lasting progress.

### Key opportunities

Externally, we have the opportunity to:

- continue working on a legislative reform agenda that transforms us (and other regulators) into a progressive, modern and flexible regulator
- generate more pace through our collaboration and influence with key partners to create supportive and more inclusive working environments for healthcare professionals
- influence and reshape medical education content, training pathways, delivery and assessment.

Internally we will be seeking to:

- refresh and evolve ways of working to enhance business recovery, building on the learning and progress in responding to the pandemic
- advance ways of working that support a culture of inclusivity and innovation
- reshape our working environment.

### Key challenges

There will also be challenges for us to navigate as a regulator and employer, including:

- developing the capacity to deliver policy and operational change at speed and scale to grasp the opportunity legislative reform provides
- responding to increasing numbers of complex public inquiries simultaneously
- maintaining effective collaboration with key partners whose capacity and organisational efforts are focused on responding to the pandemic
- sustaining operational momentum as we deal with workload pressures arising from the pandemic
- balancing the continued pressures and potential impact on the wellbeing of our colleagues.

Our approach around protecting patients through listening, learning and remaining flexible is more critical than ever before. We are confident about what we want to achieve and the direction of travel our strategy describes. But we are not complacent about the size of the challenge. Much of what we do requires us to work sensitively and compassionately with others if we are to influence and bring about real change for patients and doctors. That change is to happen in conjunction with broader, seismic shifts in societal, family and working lives and values. We must reflect on this, and like others listen, learn and adapt if we are to continue keeping patients safe, being a respected regulator and a valued employer.

Approved by the trustees on 9 June 2021 and signed on their behalf by:

A handwritten signature in black ink that reads "Clare Marx".

**Dame Clare Marx**

Chair of Council