

UK Advisory Forum – Wales

Member's Update Paper

for meeting on

12 May 2026

Spring 2026 Wales UK Advisory Forum Agenda

Time	Agenda Item	Lead
13:00 – 13:05	Chair’s welcome and introductions	Carrie MacEwen
13:05 – 13:10	Update on actions from previous meeting	Gethin Matthews-Jones
13:10 – 13:20	Chief Executive’s opening remarks and reflections from members	Charlie Massey
13:20 – 13:30	External Presentation <i>Treat us like people, not numbers: The People’s Principles as a practical framework for better care.</i>	Alyson Thomas, Llais
13:30 – 13:40	GMC Presentation <i>Future of Education and Career Development: Improving the System for Patients, Doctors, and Employers.</i>	Push Mangat
13:40 – 14:50	Member discussion <i>How can we collaborate to create the conditions for more flexible learning and career pathways?</i> <i>How flexibility in training and careers can positively impact patient outcomes, and how we can work together to influence that?</i> <i>What actions can employers and UKAF members take to support locally employed doctors (LEDs) who are not part of a formal training programme, but who undertake experiential learning?</i>	Carrie MacEwen
14:50 – 15:00	Summary and AOB	Charlie Massey
15:00	Close	

Report title: **Members' Update for GMC Wales UK Advisory Forum**
 12 May 2026

Report by: **Gethin Matthews-Jones Head of GMC Wales**
 gethin.matthews-jones@gmc-uk.org

- 1 This paper provides an update on our work to advance key priorities since the last Wales UK Advisory Forum meeting held on 16 October 2025.

New Deputy Medical Director appointed

- 2 In 2025 our Deputy Medical Director, Professor Sue Carr, informed us of her intention to retire from the GMC, after six years in the role. Professor Alan Denison was appointed to replace Sue and joined the GMC in March 2026.
- 3 Professor Denison was formerly the Postgraduate Dean for the North of Scotland; he brings with him a wealth of expertise and experience having worked as a consultant radiologist in Aberdeen since 2006 and as a GMC Education Associate for eight years.
- 4 In his new role, he will support our Medical Director, Professor Pushpinder Mangat, working with key organisations in medical education and training across the UK. As well as providing clinical advice to help inform policies and projects.

Our activity in Wales

- 5 Our Employer Liaison Adviser (ELA) continues to support Responsible Officers (ROs) with advice on management of fitness to practise concerns and revalidation recommendations. Our ELA identifies emerging themes and priority areas from these discussions and ensures ROs are signposted to relevant outreach offers, supporting delivery of interactive workshops where appropriate. She continues to support the All-Wales Medical Directors / ROs in their work to improve the fairness and consistency of how concerns are managed and escalated to the GMC, also exploring alignment with other areas of work such as the Workforce Race Equality Standards (Welsh Government) and avoiding employee harm through investigations (Health Education and Improvement Wales / Healthcare People Management Association). She has supported the group to develop a good practice framework, which is currently being finalised, and is working with NHS Resolution on a joint training offer for those managing concerns. This all-Wales work will make an important

contribution to the GMC's aspirations for Fairer Employer Referrals and the wider equality, diversity and inclusion programme.

- 6 Between October and May 2026, our Regional Liaison Advisers provided learning and development opportunities for 801 doctors, and 463 students over 33 interactive workshops. These sessions covered a broad range of topics, including our core guidance, developing positive cultures, fairer feedback conversations, compassionate leadership, effective team working, maintaining professionalism, and effective inductions for international medical graduates.
- 7 Outreach activity and reach in North Wales has continued to expand, with workshops delivered at both Betsi Cadwaladr UHB and Bangor University Medical School. Since October, key highlights have included a full-day programme providing enhanced support for IMG doctors in the west, alongside six targeted workshops for Year 3 and Year 5 medical students. These sessions have been positively received and are strengthening engagement with both resident doctors and medical students. Final arrangements are also in place for collaborative GMC/NMC/HCPC workshops for YG Paediatric MDTs, as well as GMC/NMC workshops for Midwifery MDTs across all three acute sites. Both programmes are focused on *Empathy in Action: Transforming Conflict through Compassionate Leadership*.
- 8 Across Wales, our outreach engagement remains focused on developing positive organisational cultures; supporting the fair and compassionate management of concerns; promoting supportive environments for international medical graduates through enhanced induction activity; and delivering workshops for supervisors leading culturally diverse, multidisciplinary teams. We continue to respond to direct requests from health boards and universities, providing tailored sessions to address specific local needs.
- 9 As part of our policy and external affairs activity, we have shared data from our State of Medical Education and Practice reports, National Training Survey and other sources with numerous stakeholders, including with the CMO as part of our continued engagement on our mutual priority of medical leadership. We have also provided feedback on HEIW's Education Strategy and Welsh Government's NHS Wales Bursary Scheme.

Regulatory reform

- 10 On 24 March 2026 the Department for Health and Social Care (DHSC) launched their [consultation](#) on the GMC Order, which will reform the legislation that governs how we

regulate doctors. The draft legislation covers all aspects of our work, including powers and duties for registration, education and training and fitness to practise. We have called for reform for a long time and warmly welcomed this significant step towards a more responsive and flexible framework that better serves the needs of patients and the professionals we regulate.

- 11 You can read our [initial response](#) to the announcement on our website. We will now review the consultation in detail and share our position with partners in due course. We are happy to meet with stakeholders to discuss these reforms in further detail.
- 12 We continue to look ahead to planning our work to implement the reforms following the outcome of the consultation, with a focus on more detailed planning for those activities that will happen in the near term. Further information on the timeline and impact we expect the reforms to have can be found on our [dedicated webpages](#).

Our vision for the future of medical education and training

- 13 We continue to progress our *Future education and career development* programme. This is a long-term programme in which we will review the standards, outcomes and guidance that shape how education and training is designed and delivered across the UK. Through our future framework we aim to ensure doctors, physician associates (PAs) and anaesthesia associates (AAs) have the skills and support they need for modern models of care.
- 14 Our updated education framework will focus on patient safety, high-quality education and flexibility. It will support more learning environments, clearer pathways and stronger support for educators. We are hearing consistent themes across the UK, including the need for stronger generalist skills, more community-based care and more multidisciplinary working.
- 15 We're grateful for the valuable input received so far, which is helping to shape the foundations for our ongoing engagement. As we prepare for formal consultation, we encourage colleagues to sign up to our [Future Ed community of interest](#) to stay informed and contribute to the work.

Reviewing our Personal Beliefs guidance

- 16 In March, we launched a public [consultation](#) on proposed updates to guidance that supports registrants to provide good, safe care while taking account of their own beliefs and those of their patients. The guidance focuses on personal beliefs in professional practice. It doesn't

cover beliefs expressed outside work, or how we consider concerns that may be raised with the GMC. The consultation is open until 11 June 2026.

SAS/LE doctors survey

- 17 On 21 April, we [opened a survey](#) to SAS and LE doctors across the UK for six weeks until 2 June. The survey aims to get a more current picture of their experiences and will provide us with a comprehensive data set that will help us to better understand these vital groups of doctors. We will ask about their responsibilities, opportunities for professional development, and experiences of workplace cultures. And we'll explore their future career plans and their views on the support they receive.
- 18 We will publish the data and findings in a report, which we will share with system leaders and employers across all four countries of the UK. This will help all of us with a responsibility for education, training, and lifelong learning to maximise LE and SAS doctors' skills and experience and ensure they have access to the opportunities needed to meet future patient needs.

Equality, diversity and inclusion

- 19 We published our latest ED&I annual report on 15 January 2026, which provides an update on progress against our ED&I targets. In terms of eliminating disproportionality in referrals, employer referral gaps are closing – fewer designated bodies are showing disproportionality, and we remain on course to meet our 2026 target, taking us a step closer to a system in which every doctor stands on equal ground.
- 20 Education and training shows a mixed picture: gains in specialty outcomes – particularly for non-UK graduates – are not matched earlier on, where medical school and F1 measures have stalled. Continued, system-wide action is critical if we are to secure fairer cultures at every stage of the education and training pathway.

Maternity resource

- 21 In April, we launched a new GMC [resource](#) to support those wishing to raise concerns about maternity care. The resource is available in Welsh and English, and we are grateful to Llais for their input as we developed the resource.

Regulation of PAs and AAs

- 22 On 13 December 2024 we became the regulator for physician associates (PAs) and anaesthesia associates (AAs). As of April 2026, we have granted the registration applications of 4,369 PAs and 205 AAs. Of these 216 PAs and 6 AAs gave an address in Wales.
- 23 Gillian Leng's independent review into the PA and AA professions in England on 16 July 2025 made a number of recommendations for action. We're working to address recommendation 15 of the review relating to the presentation of our standards to better differentiate between the professions. In Wales, we are contributing to the Welsh Advisory Group for the Leng Review, chaired by the DCMO, and we are also liaising with DHSC as they progress their consultation on revised titles for PAs and AAs and putting arrangements in place so we'll be ready to update our systems and materials in a timely way once any new titles are confirmed in legislation (we continue to use the existing titles in the meantime).
- 24 We will continue to support the Welsh Government, HEIW and partners as work progresses to determine the most effective approach to their implementation and operationalisation.

Future of education and career development (Future Ed): a summary

Future Ed is our long-term programme to update the UK's education framework by 2030 so doctors, physician associates (PAs) and anaesthesia associates (AAs) are equipped for modern healthcare and able to continue to meet the evolving needs of patients and the public.

Why this work is needed

Healthcare is changing quickly. People are living longer with more complex needs, services are under pressure, and the workforce is becoming more diverse. Stakeholders across all four nations have highlighted the need for:

- broader generalist skills alongside specialist expertise
- stronger support for educators
- fairer and more flexible access to training
- education that reflects the realities of modern practice

Education and training need to be flexible, fair and responsive to meet these needs.

What Future Ed will deliver

Through our work on standards, career development and assessment, we will:

- update our standards and outcomes for education and training
- strengthen expectations for learning environments and support for educators
- support more flexible and inclusive access to training
- embed equality, diversity and inclusion across the education framework
- build evidence for new approaches through piloting and engagement.

Our aim is a confident, adaptable workforce that can continue to deliver good, safe patient care.

We will set clear expectations for education and training, support innovation and build the evidence base for new approaches, and use our insight to help strengthen the wider system.

Sign up to our [Future Ed community of interest](#) to receive quarterly updates.