Agenda item: 5

Report title: Report of the Medical Practitioners Tribunal Service Committee

Report by: David Pearl, Chair of the Medical Practitioners Tribunal Service
dpearl@mpts-uk.org, 0161 240 7115

Considered by: MPTS Committee; GMC/ MPTS Liaison Group

Action: To consider

Executive summary
This report sets out the progress of the Medical Practitioners Tribunal Service since the last report to Council in December 2015. Key points to note:

- Section 60 Order amendments have been enacted and all MPTS change projects were delivered on time and are now delivering benefits.

- Review hearings are being held ‘on the papers’ and legally qualified chairs have been trialled in hearings.

- Cases are subject to robust, active case management, with directions being issued by our Case Manager.

- The changes have allowed the MPTS to make a net efficiency saving of £94,402 in January to March 2016.

- The new statutory MPTS Committee is in place and has met twice since 1 January 2016.

Recommendation
Council is asked to consider the report of the Medical Practitioners Tribunal Committee.
Committee update

1 This paper is the Medical Practitioners Tribunal Service (MPTS) Committee’s first biannual report to Council of 2016.

2015 performance

2 Hearing outcomes for three full calendar years of the operationally separate MPTS are now available and are at Annex A. In 2015, 239 doctors appeared before new MPTS fitness to practise panel hearings. 30% of those doctors were erased, 40% suspended, and 10% were given conditions. 16% were found not impaired, while just over 2% were found not impaired and received a warning. In the remaining 1% of hearings, the panel agreed undertakings, found impairment but took no action, or granted an application for voluntary erasure.

3 These figures are broadly similar to the fitness to practise panel outcomes in the two previous calendar years. The breakdown of outcomes suggests that MPTS decision-making is consistent and that the GMC are referring cases appropriately.

4 In 2015, 522 doctors appeared before interim orders panel hearings. 9% of doctors received interim suspensions and 69% interim conditions. The IOP made no order in 22% of cases.

5 The 522 doctors referred to IOP hearings in 2015 was fewer than in the previous two calendar years (571 in 2014 and 634 in 2013). The proportion of doctors receiving an interim suspension (9%) was also lower (17% in 2014 and 19% in 2013).

Legislative update

6 Section 60 Order amendments to the Medical Act 1983 were enacted on 31 December 2015. A significant and challenging change programme was delivered on time across the MPTS and Fitness to Practise Directorate.

7 The MPTS is now established in law as a committee of Council, and our operational separation is underlined by the GMC’s new right of appeal against tribunal decisions.

8 The MPTS now has the discretion to appoint legally qualified chairs (LQC). This has been trialled in 78 interim orders tribunals and 34 medical practitioners tribunal hearings between January and March 2016. Detailed feedback from tribunal members and legal representatives has been compiled and the results are consistently positive. The LQC model will now be confirmed as standard practice and will be extended into other hearing types.

9 86 reviews of interim orders were held ‘on the papers’ between January and March 2016, where both parties agree on the proposed outcome. This change means
many doctors do not need to travel to Manchester for short hearings. In January to March 2016 the MPTS has made an efficiency saving of £25,201 because of this change.

10 The majority of cases before the MPTS are subject to robust, active case management, with directions being issued by our Case Manager. Only those cases referred to the MPTS since 31 December 2015 are subject to legally binding case management directions and costs powers. The MPTS will publish figures for how often these powers are used.

**Resources**

11 The MPTS budget for 2016 was confirmed as £10.6 million. In terms of both staff and financial resource the MPTS represents 10% of the GMC.

12 Reducing the average daily cost and average length of our hearings are priorities for the MPTS. When the MPTS was established in June 2012, the cost of running hearings was £4,167 per hearing day. For 2016, the MPTS is budgeting for a cost of £3,398.

13 In 2015 we budgeted for an average hearing length of 8.15 days. More case management of hearings and greater support for self-represented doctors mean that in 2016 we are budgeting for an average length of 7.9 days.

14 The various Section 60 changes, including reviews ‘on the papers’ and legally qualified chairs, have allowed the MPTS to make a net efficiency saving of £94,402 in January to March 2016.

**MPTS Committee**

15 The MPTS Committee received induction on its new responsibilities in January 2016. The Committee met for the first time as a statutory committee of Council on 23 February, when it considered operational reports, the MPTS work programme for 2016 and considered the new MPTS risk register. The Committee’s papers and minutes will be published on the MPTS website.

16 The second meeting of the Committee took place on 10 May 2016. The Committee has considered a range of matters, including:

   a Scrutinising assurance that the Section 60 implementation has been a success and that the intended benefits are being realised.

   b Developing the MPTS vision.
**Tribunal member recruitment and diversity**

17 The MPTS is carrying out an internal recruitment for new tribunal chairs and will carry out a recruitment exercise for new medical tribunal members in 2016. As with previous recruitment rounds, we will appropriately target our advertising to encourage a diverse range of applicants.

18 The diversity of our tribunal members compares well to other courts and tribunals in the UK. As of April 2016, the MPTS has 278 tribunal members of whom 44% are female and 17% identify as BME. This compares favourably with the most recently published figures for UK courts (25% female and 6% BME) and UK tribunals (45% female and 14% BME) (Source: https://www.judiciary.gov.uk/publications/judicial-statistics-2015).

**Quality assurance**

19 The Quality Assurance Group (QAG), chaired by David Pearl, meets monthly to review tribunal determinations, provide feedback and identify best practice. Determinations identified during the QAG process are included in tribunal members’ annual training sessions, as are any learning points identified by the Professional Standards Authority.

20 QAG will also consider decisions made by the Registrar under the GMC’s new power to appeal, for any learning points that should be addressed.

**MPTS external engagement**

21 The MPTS regularly engages with those representing doctors in our hearings. Our regular User Group meeting was held on 4 April, where representatives can raise issues with the MPTS Chair and Assistant Director.

22 The MPTS takes part in regular meetings with adjudication functions of other health regulators, to share best practice and consider opportunities for collaboration.

23 During 2016, the MPTS Chair and Committee members will be speaking to a number of Local Medical Committees (LMC) to engage directly with doctors about the work of the MPTS. The Chair and Assistant Director spoke at a meeting of Glasgow LMC in April and the Chair will be speaking at various English LMC meetings over the summer.

24 The MPTS communications team provides support and advice to journalists wishing to cover public hearings, and monitors coverage to ensure MPTS decisions are accurately reported. There were 882 accurate mentions of MPTS decisions across all media in 2015. In January-March 2016 there were 575 accurate mentions, largely because of a small number of high profile hearings. In January-March 2016 there
were 470 media enquiries across the whole GMC, of which 231 (49%) were about MPTS hearings.
**Hearing outcomes 2013-2015**

<table>
<thead>
<tr>
<th>Medical practitioners tribunals/ Fitness to practise panels</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
</tr>
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<tbody>
<tr>
<td>Erasure</td>
<td>55</td>
<td>71</td>
<td>72</td>
</tr>
<tr>
<td>Suspension</td>
<td>86</td>
<td>86</td>
<td>95</td>
</tr>
<tr>
<td>Conditions</td>
<td>32</td>
<td>22</td>
<td>24</td>
</tr>
<tr>
<td>Undertakings</td>
<td>0</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Impairment, no further action</td>
<td>1</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>No impairment, warning</td>
<td>13</td>
<td>10</td>
<td>6</td>
</tr>
<tr>
<td>No impairment</td>
<td>38</td>
<td>37</td>
<td>38</td>
</tr>
<tr>
<td>Voluntary erasure</td>
<td>4</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>229</strong></td>
<td><strong>237</strong></td>
<td><strong>239</strong></td>
</tr>
</tbody>
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### Interim orders tribunals/Interim orders panels

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suspension</td>
<td>125</td>
<td>102</td>
<td>49</td>
</tr>
<tr>
<td>Conditions</td>
<td>375</td>
<td>350</td>
<td>359</td>
</tr>
<tr>
<td>No order made</td>
<td>134</td>
<td>119</td>
<td>114</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>634</strong></td>
<td><strong>571</strong></td>
<td><strong>522</strong></td>
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