3 December 2014

Strategy and Policy Board

To consider

Update on information sharing with other regulators

Issue
1. An update on the information sharing pathway project (generic concerns) and progress of the work with other health regulators.

Recommendation
2. The Strategy and Policy Board is asked to note the progress to date and timelines for the outputs of the project.
Update on information sharing with other regulators

Issue

3 The information sharing pathway project (generic concerns) was established to develop appropriate and robust information sharing pathways and protocols with other health regulators. The Assistant Director for the Employer Liaison Service has taken on responsibility as relationship owner with healthcare systems* regulators in the four countries and has developed a programme of work to progress joint working frameworks and information sharing processes. The Assistant Director for Investigations is responsible for the operational aspects of information sharing within the Fitness to Practise directorate.

4 A coordination and oversight group, the Quality Architecture Group (QAG), has been established and meets regularly to support this work and has representative membership from across the organisation.

England

Care Quality Commission

5 The joint working framework between us and the Care Quality Commission (CQC) is underpinned by a Memorandum of Understanding (MoU) agreed in January 2013 and an operational protocol first published in July 2013. This framework underpins effective information sharing to support our regulatory functions and those of CQC, and promotes good practice to staff at all levels within both organisations. In addition to regular senior engagement, a quarterly joint working group and monthly operational meetings have now been established to drive forward the work to embed the working relationships. The joint working group is chaired by the Assistant Director for the Employer Liaison Service and the CQC’s Heads of Primary and Secondary Care Inspections.

6 The GMC and the CQC share routine and non-routine information†. A separate paper has been included on the agenda for this Strategy and Policy Board meeting that sets out proposals for increased sharing of information with the CQC.

† Routine information is information which is in the public domain. Non-routine information for the GMC includes unproven allegations which contain system concerns about health providers which are regulated by the CQC. Non-routine information for the CQC includes unproven allegations about a doctor’s fitness to practise who are regulated by the GMC.
a  *Routine information sharing.* Routine information sharing traffic continues to increase with us supporting the CQC inspection programmes and intelligence monitoring model with data packs and non-routine information sharing (new and emerging concerns). Since July 2013, we have provided to the CQC 117 information packs for secondary care and 914 information packs for primary care. Employer Liaison Advisers (ELAs) have attended 29 Risk Summits and 34 CQC quality summits since July 2013. ELA attendance at CQC quality summits has increased significantly since July 2014 as a consequence of better communication and closer working. It has been noted that the Chair, Chief Executive, and Chief Inspector of Hospitals have on a number of occasions made public reference to the particular value of the education data we share, in particular from the National Training Survey, in informing their hospital inspection and ratings programme.

b  *Non-routine information sharing.* Since the publication of the operational protocol, we have shared 52 concerns with the CQC with the majority of this taking place after October 2013. Over the same period, the CQC has shared 34 concerns about doctors. The CQC and GMC review processes for information sharing on a regular basis and are developing categories and thresholds for information sharing concerns within Fitness to Practise. It is anticipated that non-routine information sharing will continue to increase once the joint training starts in December 2014.

7  **The next stage of joint working includes:**

a  Meetings and events planned from December 2014 to explore thresholds for information sharing with the CQC from the perspective of our Education and Standards, and Registration and Revalidation Directorates.

b  The development of joint training materials that will be launched in the form of two joint training events to be held concurrently at our offices in Manchester, and the CQC’s offices in London on 1 December 2014. These events will involve approximately 100 members of GMC and CQC staff to develop the understanding of respective staff of the work of the GMC and the CQC, and the process for information sharing as set out in the operational protocol. This training will be made available on the GMC Learning and Development portal for staff who are unable to attend these events.

c  An updated version of the operational protocol to reflect the revised CQC structures, the new CQC inspection programmes, and agreed thresholds and categories for information sharing.

d  Reinvigorating regular local liaison meetings at between GMC ELAs and the CQC regional inspection teams.

e  Development of a Siebel enhancement for recording and sharing information with other regulators. This will enable consistency in the approach for information
sharing which will incorporate categories and thresholds and provide improved management information for non-routine information sharing.

A joint evaluation of working between the GMC and the CQC. Interim findings are expected in December 2014 with a final version of the report due in spring 2015.

Monitor and the Trust Development Authority

8 We have met with Monitor and the NHS Trust Development Authority (TDA) to explore developing a joint working framework to support information sharing. MoUs with both Monitor and the NHS TDA are in development: the NHS TDA MoU has been signed by the NHS TDA; and the MoU with Monitor is scheduled for agreement in November 2014.

9 Further meetings with Monitor and the NHS TDA have been scheduled for December 2014 to discuss opportunities for information sharing and the development of respective operational protocols. Our proposal is to develop a joint working framework which will enable the information sharing requirements of each regulator to support regulatory functions.

Northern Ireland

Regulation and Quality Improvement Authority

10 The second draft of the MoU with the Regulation and Quality Improvement Authority (RQIA) has been shared between the GMC and the RQIA. RQIA Chief Executive, Glenn Houston, is dealing directly with our Northern Ireland Office due to extended staff absence within the RQIA.

11 Our Information Governance and Information Systems teams have advised that RQIA ‘Data Access Agreements’ can be incorporated within the Information Sharing Agreement that will accompany the MoU with the RQIA. The draft Information Sharing Agreement is being finalised for sharing with RQIA and the MoU is scheduled to be signed in quarter 4 of 2014.

12 Niall Dickson, Chief Executive, met Glenn Houston on 5 November 2014. Finalising the MoU and supporting documents and protocols to facilitate information sharing further were discussed.

Scotland

Healthcare Improvement Scotland

13 The relationship with Healthcare Improvement Scotland (HIS) has strengthened in recent months. Chief Executives of both the GMC and HIS met on 5 September 2014
and agreed to have a MoU in place by quarter 1 of 2015. Regular meetings are being set up between our Scotland Office and HIS Directors of Scrutiny and Communications.

14 Regular meetings are taking place between our ELA for Scotland and the Responsible Officer for HIS. The Education Evidence team has worked with NHS Education Scotland to coordinate the sharing of data packs of GMC-wide information to support HIS audit activity on clinical governance. Currently, the Education Evidence Team works with NHS Education for Scotland to promote the survey findings. Dr Denise Coia, Chair of Healthcare Improvement Scotland Board, chairs our Quality Scrutiny Group which scrutinises the outcome of our educational quality assurance activities. While not a formal information sharing mechanism, Dr Coia brings a service perspective from Scotland and a broader expertise in educational and clinical governance systems.

Wales

Healthcare Inspectorate Wales

15 The MoU with Healthcare Inspectorate Wales (HIW) was signed and published on our website in June 2014.

16 Work is now underway to develop an operational protocol, and operational leads have been identified within HIW to assist in taking this work forward. We have provided HIW with examples of data packs for consideration, and have received positive feedback to the joint working approach. Both the GMC and HIW are now scoping the development of an operational protocol with the aim to develop this in quarter 1 of 2015.

17 Regular meetings take place between our Wales Office and the HIW Chief Executive and relevant Directors on both this work and our joint membership of the Wales Concordat.

18 Regular meetings are also taking place between our ELA for Wales and the Responsible Officer for HIW.

19 The Chief Executive met with Kate Chamberlain, HIS Chief Executive, before our UK Advisory Forum in Wales on 13 November 2014 to discuss progress on joint working and information sharing.

Next steps working with health regulators

20 A programme of work has been developed to enable joint working frameworks with healthcare system regulators which include producing operational protocols by quarter 3 of 2015. This programme of work includes the following activities:
a Develop and sign off remaining MoUs with regulators.

b Strengthen joint working with all health regulators.

c Develop robust processes for information sharing which include information sharing agreements and operational protocols where this is deemed appropriate by all parties. The Regulatory Policy team will be bringing a paper on this matter to Directors and the Strategy and Policy Board in the coming months in consultation with colleagues currently involved in supporting MoUs and Information Sharing agreements across the GMC. This work will need to include a consideration on how this significant area of our operation is best organised and resourced.

d Consideration will need to be given to the developing GMC Data Strategy, in particular the proposed environments map product, so that it is designed to support information sharing with other regulators and partners. This has already been noted by the Data Strategy project team.

e Develop and improve management information within Fitness to Practise with the development of a Siebel module to record and share relevant information with other health regulators, this will take effect from quarter 1 of 2015.

f More broadly, this work continues to reflect the wider strategy of the organisation toward greater transparency and proactive sharing our data with other partners so that risks to patient safety can be spotted earlier. This is evident in the recent publication of the *State of Medical Education and Practice Report 2014*, the regular publication of Education Enhanced Monitoring data and secondary care complaints data. Our specific work with system regulators must continue to signpost to and align with this wider programme of activity.
Supporting information

How this issue relates to the corporate strategy and business plan

22 This work relates to Strategic Aim 1: to make the best use of intelligence about doctors and the healthcare environment to ensure good standards and identify risks to patients.

How the issues support the principles of better regulation

23 This work is consistent with the recommendations of the Francis Report relating to the need for the different regulatory bodies to develop closer working relationships with the CQC.

How the action will be evaluated

24 The ongoing joint evaluation of GMC and CQC joint working will report in spring 2015. Evaluation of the relationships with other regulators will be considered in due course.

What engagement approach has been used to inform the work (and what further communication and engagement is needed)

25 This work involves regular engagement with the regulators at senior and operational level which, it is planned, will continue as the relationships mature.

How the issues differ across the four UK countries

26 The aim is to establish agreed mechanisms and protocols for information sharing that are as consistent as is possible across the four UK countries. The nature of the regulatory approach in the four UK countries is a consideration.

If you have any questions about this paper please contact: Andy Lewis, Assistant Director - Employer Liaison Service, alewis@gmc-uk.org, 0161 250 6849.