Principles which apply to decision-making in the Registration and Revalidation Directorate

Introduction

1. All doctors who practise medicine in the UK must be registered with us and hold a licence to practise. It is important that patients trust doctors and have confidence that they are competent in their field and abide by high ethical standards. Our duty is to protect this public interest by maintaining the integrity of the medical register. We do this by:

- Ensuring that only those doctors who are suitably qualified and fit to practise can gain entry to the medical register and obtain a licence to practise.

- Managing the revalidation process, whereby all licensed doctors are regularly required to demonstrate that they are up to date and fit to practise medicine.

2. This document sets out the key overarching principles that apply to decision-making in relation to the GMC’s registration and revalidation functions. It applies to formal decisions which involve the exercise of discretion by a decision-maker. This includes, by way of example, a decision:

- By the Registrar exercising his functions under the Medical Act 1983 (the Act) or delegated legislation, such as when deciding whether the criteria for registration are met. This applies whenever the Registrar is deciding on whether statutory criteria are met, whether the applicant is entitled to registration if the criteria are met, or whether the Registrar retains a discretion whether to register. You can find further information on the criteria that doctors must meet before registration is granted in the factsheets on the different routes to registration.

- By a Registration Panel regarding the advice to provide to the Registrar on a matter or question referred to it under the Registration and Licensing Decisions – Arrangement of Procedures or the Licence to Practise and Revalidation Regulations.

- By a Registration Appeals Panel when considering an appeal brought to it under Schedule 3A or 3B of the Act.
The document does not apply to administrative decisions or business processes, such as the decision whether to seek further information or to refer a matter to another team, which does not result in a formal decision. However, all such decisions must also be made in a way that is fair, consistent and transparent, in accordance with relevant procedural guidance and business rules.

**Our approach to decision-making**

3 We agree with the principles set out by the Professional Standards Authority that regulation should be: proportionate, consistent, targeted, transparent, accountable and agile*.

4 In particular, all our decisions should:

- **Act in the public interest.** The GMC's main objective, which underpins all of its functions, is to protect, promote and maintain the health and safety of the public (Section 1A of the Act). Acting in the public interest means putting patient safety first, maintaining public confidence in the profession, and declaring and upholding professional standards.

- **Be fair and proportionate.** It is essential that decisions are reached in a way that is both fair and seen to be fair. Fairness requires decision-makers to apply the principles of proportionality, weighing the interests of the public with those of the practitioner, and to reach decisions based on an assessment of risk. It also requires decision-makers to give parties a reasonable opportunity to make representations on any decision which will affect their rights and interests.

- **Be objective and evidence-based.** All relevant evidence should be gathered, sought from the doctor or a third party as necessary. Decision-makers should ensure that decisions are not influenced by evidence that is irrelevant to the issue to be decided.

- **Be impartial.** Decisions should be free from discrimination and bias, or the appearance of bias. It is essential that decision-makers declare any conflict of interest and remove themselves where appropriate. The criteria we have in place for decision-making help us make sure that unconscious bias does not influence our decisions, and this is also aided by ensuring that decisions are substantiated and fully reasoned.

* “Right Touch Regulation” dated August 2010, which includes the five principles of better regulation identified by the Better Regulation Executive in 2002, and adds the principle of “agility”.
Be made in accordance with applicable law. All decisions should be underpinned by statutory authority, and be taken in accordance with the laws which govern our work (for example human rights and equality legislation).

Be consistent and transparent. Decisions should take into account relevant published criteria, policy and guidance.

Be documented and reasoned. Good reasons are key to ensuring fairness and public confidence. All decisions should be recorded and explained to the affected parties in sufficient detail, proportionate to the issues, to ensure that they are able to understand why a particular outcome has been reached, and the way in which the GMC applies its professional standards. Decision-makers do not need to recite every fact or matter. However, they must in substance address all the material issues raised and considered.

Be taken by those competent and authorised to do so. Our legislation gives authority to certain individuals or panels to take certain decisions. Delegation is generally only permissible where there is an express power to do so. The Registrar is entitled to delegate any of his functions to one or more assistant registrar (under paragraph 16(3) of Schedule 1 to the Act). All decisions should be taken at the appropriate level, by those properly appointed, authorised and trained to do so.