Guidance for approving an individual as a suitable person for medical revalidation

This document is guidance for applicants and decision makers. It outlines how we make decisions about approving an applicant as a suitable person.

1 The purpose of this document is to describe how we make decisions about approving an individual to be a suitable person. It outlines what factors we will consider when determining whether the Registrar can be satisfied that the individual is a suitable person to be approved to prepare a statement about a doctor’s fitness to practise for the purposes of that doctor’s revalidation.

2 The GMC (Licence to Practise and Revalidation) Regulations Order of Council 2012 (the “Licence to Practise regulations”) creates the role of ‘suitable person’, a designated individual approved by the GMC to make revalidation recommendations about doctors who are not connected to a Responsible Officer. A person may be approved as suitable in relation to one or more individual doctors or a defined class or cohort of doctors.

3 The Registrar has the power to approve or reject the application or to change the scope of their approval. The Registrar can also ask for more information or seek advice from a Registration panel.

4 The Registrar will seek evidence that there is a sufficient link between the suitable person and the doctor (s) as well as evidence that the applicant is either a Responsible Officer or holds a post within a body (whether designated or not) which includes responsibilities which are similar in nature to the role of a Responsible Officer.

1 Under the Medical Profession (Responsible Officer) Regulations 2010 (as amended) or the Medical Profession (Responsible Officer) Regulations (Northern Ireland) 2010 (the “RO regulations”)
5 The Registrar has delegated the functions outlined in this guidance to assistant registrars to undertake on their behalf. These include, approving an applicant to become a suitable person, agreeing that a suitable person can continue in the role after a review and making decisions on suitable persons adding doctors to their list by demonstrating an appropriate link. This may also include any other decision pertaining to whether a suitable person can continue to be recognised in the role.

6 A suitable person who has already been approved may also apply to change or extend the cohort of doctors for whom he or she may make revalidation recommendations (the scope of his or her approval). However, where the change is simply to the identity of the doctors within an approved cohort, the suitable person is not required to apply for further approval, but must make the appropriate change by adding the doctor to their list via GMC Connect.

**Evidence we will seek**

**The appropriate arrangements are in place**

7 When we consider an application to be a suitable person, we will be looking for evidence that the proposed arrangements will maintain integrity and confidence in revalidation. Therefore the application must demonstrate that the applicant will meet all of our criteria for suitable persons, and that they will support their doctors through revalidation.

8 All applications to be a suitable person should include, in relation to the doctor/cohort of doctors:

   a complaints policy

   b appraisal policy

   c information about how the suitable person proposes to access information from the whole of the doctor(s)’ practice

   d information about how the suitable person will be able to make sure that their assessment of the doctor(s)’ fitness to practise takes into account evidence that the doctor has complied with any GMC or locally imposed conditions or undertakings

   e other relevant clinical governance policies

   f information about how the suitable person will ensure the doctor(s) for whom they are seeking approval do not have a prescribed connection elsewhere.
9 An application should include confirmation from the applicant that they have taken steps to ensure that these policies are available to all doctors linked to them, and indicate how they will support doctors in accessing and understanding these policies.

10 We will also expect to see evidence that the suitable person will be able to take action, where necessary, to ensure doctors engage in the systems that underpin revalidation.

11 A suitable person must not rely on informal arrangements to be able to access the information that they need to make a revalidation recommendation. We would expect to see evidence that any arrangements are formal, agreed, and not time-limited, and that there are no other factors that might restrict or prevent the suitable person from complying with our criteria.

**There is a link between the suitable person and the doctor(s)**

12 All suitable persons must have a clearly defined, approved cohort and/or be able to demonstrate a logical link with any doctors they add to their list. We will assess any proposed link to ensure that it gives us sufficient confidence that the applicant will be able to make an accurate assessment of the doctor’s fitness to practise.

13 We will expect the applicant to provide robust, objective and verifiable evidence in support of any characteristics identified in their application, and why each one should provide us with assurance about the suitable person’s suitability to make recommendations for the doctor(s) concerned.

14 A suitable person cannot have a link with a doctor where that doctor already has a prescribed connection to a designated body under the RO regulations.

15 A suitable person may be responsible for a doctor who works overseas as long as they can satisfy their responsibilities in relation to the revalidation of that doctor as per the [GMC protocol for making recommendations](https://www.gmc-uk.org). This is particularly important with respect to having sufficient knowledge and oversight of the environment in which the doctor is working and ensuring appropriate clinical governance process are in place to be notified of any concerns.

16 A suitable person cannot be responsible for a doctor where there is a conflict of interest. Advice about conflicts of interest and the appearance of bias is set out in *Good medical practice* and in the guidance that accompanies [The Medical Profession (Responsible Officer) Regulations](https://www.gmc-uk.org).
17 The applicant will need to meet the following criteria to demonstrate a link with the doctor:
   a. the applicant must demonstrate clearly which doctors fall into the cohort
   b. the applicant must outline the formal arrangements underpinning the link and they have agreed these with the relevant organisations or persons
   c. the applicant must provide evidence that they will have access to all the necessary clinical governance information to enable them to fulfil the role set out in section 2.3.1 of the GMC recommendation protocol. This can include doctors working wholly overseas, as long as the suitable person can demonstrate that they will have all the mechanisms in place to make a recommendation.

18 When we approve an application we write to the applicant with a 'scope of approval statement' which describes clearly the doctor(s) or cohort for whom the suitable person has been approved and what characteristics define the link between the suitable person and the doctor(s) or cohort.

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