

Memorandum

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**Regulating doctors
Ensuring good medical practice****To:** Peter Rubin**From:** Stephanie McNamara**Copy:** Press team**Date:** 15 February 2010**Council Press Briefing 16 February 2010**

We are expecting Flavia from BMA news and Susie from GP.

The journalists will have a full set of papers however we are not expecting them to attend the meeting on the day.

Journalists have been asked to attend at **3.45pm for a 4pm start**.

The briefing will be held **in room 2.08 or 2.07**

Running Order

Stephanie will chair the press briefing, welcome the journalists and introduce Peter and Niall

We have 30 minutes for the briefing.

Running Order:

Peter and Niall to discuss 2 Council papers:

- **Council paper 4a:** Press release – Consultation on Revalidation
- **Council paper 5a:** GMC Affiliates

Paper 4a: Consultation on Revalidation

Peter to introduce

Key message:

- The first practical step towards the successful introduction of revalidation was completed in November 2009 when more than 200,000 doctors were given a licence to practise medicine in the UK.
- Now we are going to consult the profession, employers and patients on how we take this forward to create the right model.
- Each month I meet with frontline doctors who are delivering a quality service to patients every day across the UK. Revalidation will not mean they have to change the way they work but, by taking part in appraisal in the workplace, they will be providing regular assurance that they remain competent and fit to practise in the job they do everyday.
- We want to hear from doctors, employers and patients and I hope as many as possible go to the General Medical Council website and contribute to the consultation and share their experience and expertise to help shape how revalidation will work.

If asked:

When will you know the costs of revalidation?

Individual doctors will not be funding the full costs through their annual payment to the GMC. The Department of Health (England) set out their proposals for conducting a series of pilots to secure real information about costs and a clearer understanding of where costs are likely to fall. It is important to remember that because revalidation is built on strong local system, such as robust appraisal,

Paper 5a: GMC Affiliates

Peter to introduce

Key message:

- There is more testing to do on the model for affiliates but there is a real opportunity to change the relationship between employers and the GMC.
- Council has agreed that we should undertake a further two pilots, for six months as part of the Revalidation pathfinder pilots that are currently underway and funded by the DH(E). The DH(E) will be funding the pilots.
- We regulate across the 4 countries of the UK and we are responsive to the different requirements in Scotland, Wales and Northern Ireland. We have been piloting a different model of liaison with employers in Scotland – again this has worked very well and we intend to expand the pilots in Scotland further.

Additional points:

- We are currently seeking funding in the region of £200,000 from the DH(E) to meet the costs the pilots.
- We did not deal with revalidation in the original pilot as it was too early in the development of revalidation policy to do so.

Other issues (if asked):**EU Doctors and language testing:**

Commenting on the Coroners verdict Niall Dickson, Chief Executive of the General Medical Council (GMC) said:

"This has been a terrible tragedy and an avoidable one. The sad case highlights serious failings in a system that should protect patients.

"One of those failings is that as the UK regulator we are not allowed to test the language and competence of doctors from the European Union as we do with doctors from other parts of the world.

"We have taken advice from leading Counsel and it is absolutely clear that in general, European applicants may not be required to undertake a language test. This is absolutely the case for doctors who hold European primary medical qualifications. The combination of EU law and domestic legislation (the Medical Act 1983) effectively excludes testing of a European applicant's language proficiency.

"The current situation is not acceptable. We are in continuing discussions with the Department of Health to resolve this situation."

OHPA: We have not yet been asked to respond to the appointment of Walter Merricks as Chair of OHPA.

Agreed statement: Peter Rubin Chair of the GMC said: "I welcome the appointment of Walter Merricks as Chair of OHPA and look forward to working with him to set up the independent adjudication body. We are committed to a smooth transition to OHPA and are pleased that there will be a public consultation on the procedural rules later in the year. The establishment of an independent body to hear fitness to practise cases across the health professions will further reassure doctors and the public that cases are dealt with fairly and effectively."

Individual doctors:**Dr Jane Barton**

We issued a statement following the panels decision to impose conditions after a finding of Serious Professional Misconduct. It is unusual for us to comment but it is not unprecedented (Code A in 2004). CHRE are reviewing the case and they have 28 days to decide if they wish to lodge an appeal.

Code A

The case will reconvene on the 7th April and run until the 11th June.

Code A

Code A remains suspended from the medical register by the Interim Orders Panel. This indicates we are investigating concerns and as a result the doctor could face a public hearing into his fitness to practise.

- **Code A** was granted registration with the GMC on the 27th October 2006.
- **Code A** was suspended from the medical register by the GMC's Interim Orders Panel on the 29th February 2008.

Baby P

A second doctor has been suspended by the IOP and the media are linking him to the Baby P case. We have not commented on any aspect of the investigation but have confirmed the suspension of **Code A** on the 17 February by the IOP for a period of 18 months.

Code A is due to appear before a fitness to practise panel, in London, on the 22 February.

Remedy UK: Remedy UK have been granted a Judicial Review into the GMC decision to close a complaint against those involved in the management of MMC/MTAS. We do not yet have a date for the JR.

We have not, so far, been asked to comment.

If asked: Complainants who are unhappy with decisions taken by the GMC can seek a JR of the decision in the High Court. Remedy are exercising that right and it wouldn't be appropriate for us to comment any further at this stage.

Code A A Court of Appeal Date has been set for 22 & 23 March 2010.

Code A (if asked): **Code A** has been granted permission for a judicial review of a Professional Conduct Committee determination made in 1987. As the judicial review has yet to be heard it would not be appropriate for us to comment any further.