General Medical Council

Doctors in difficulty – getting it right HEE NW

Blake Dobson Principal Employer Liaison Adviser

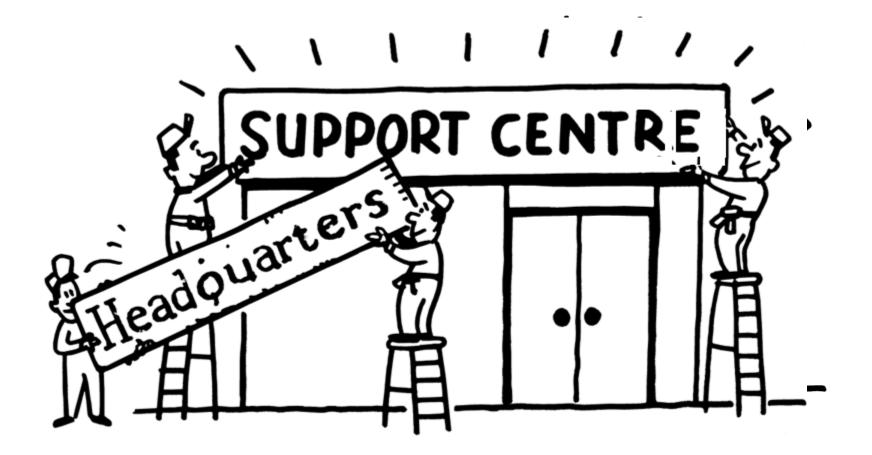
Rochdale, February 2017

Working with doctors Working for patients

Just in one week...

ACCUSATIONS **Doctor who Doctor** Doctor guilty covered up of mittanita faces unders 'not tribunalSharp rise in to practise' **1S** hearing complaints GP accused off of excessive prescribing about doctors Surgeon lied at his job interview Doctor struck on over traud set for return to medicine

Festival attack doctor suspended



Employer Liaison Advisors

- Regular meetings with Responsible Officers and Medical Directors
- Discuss all open and recently closed GMC cases
- Provide advice and guidance about GMC thresholds
- Discuss any local concerns including anonymously
- Provide advice and support about revalidation recommendations
- Act as a point of contact for any queries related to GMC
- Presentations on revalidation and fitness to practise



The Responsible Officer

- General duties (England)
- The role of the RO
 - Identify all doctors for whom they are responsible
 - Establish, maintain and quality assure appraisal for all doctors on their GMC Connect List
 - Oversee and take responsibility for the quality of local investigations into concerns about Drs
 - Make recommendations to the GMC about revalidation
 - Ensure that doctors comply with the conditions of their registration

The Responsible Officer

- General duties (England)
- The role of the RO ...
 - DB has a duty to provide support to the responsible officer by means of appropriate funding, resources, systems and information. This includes effective systems of appraisal and clinical governance. The responsible officer will use appropriately validated information to make a judgement on the fitness to practise of doctors with a connection to the organisation and, in England, to monitor their conduct and performance



The PGD as RO

- Lead Employer arrangements and complexities
- Pastoral, educational and regulatory
- Trainees on GP placements
- ARCP isn't appraisal ...
- 7000 trainees?

The standards expected of a doctor



Good medical practice

General Medical Council Regulating doctors

Ensuring good medical practice

The duties of a doctor registered with the General Medical Council

Patients must be able to trust doctors with their lives and health. To justify that trust you must show respect for human life and make sure your practice meets the standards expected of you in four domains.

Knowledge, skills and performance

- Make the care of your patient your first concern.
- Provide a good standard of practice and care.
- Keep your professional knowledge and skills up to date.
- Recognise and work within the limits of your competence.

Safety and quality

- Take prompt action if you think that patient safety, dignity or comfort is being compromised.
- Protect and promote the health of patients and the public.

Communication, partnership and teamwork

- Treat patients as individuals and respect their dignity.
- Treat patients politely and considerately.
- Respect patients' right to confidentiality.
- Work in partnership with patients.
- Listen to, and respond to, their concerns and preferences.
- Give patients the information they want or need in a way they can understand.
- Respect patients' right to reach decisions with you about their treatment and care.
- Support patients in caring for themselves to improve and maintain their health.
- Work with colleagues in the ways that best serve patients' interests.

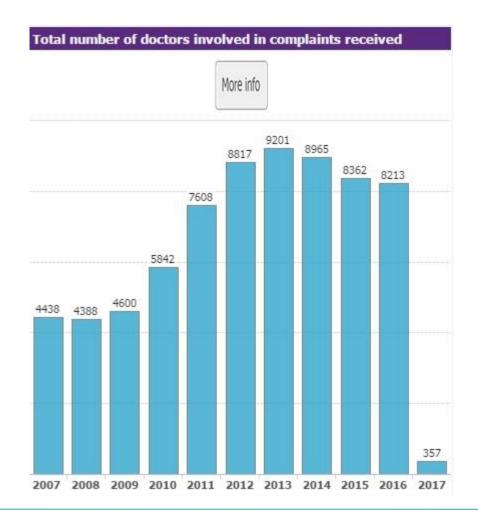
Maintaining trus

- Be honest and open and act with integrity.
- Never discriminate unfairly against patients or colleagues.
- Never abuse your patients' trust in you or the public's trust in the profession.

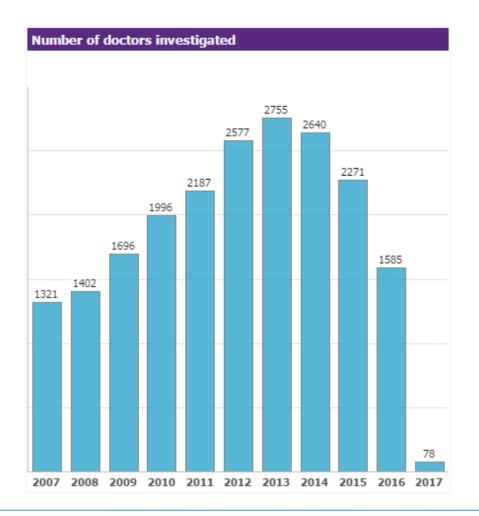
You are personally accountable for your professional practice and must always be prepared to justify your decisions and actions.



N = Drs involved in complaints



N = Drs investigated



What is a provisional enquiry?

- A limited, initial enquiry at the triage stage of the fitness to practise process to help us decide whether to close the complaint or open a full investigation
- Limited to one or two discrete and easily obtainable pieces of information
- Linked to our existing powers: Rule 4(4)
- Enables us to make initial enquiries to better inform our decision-making at the earliest stage of our investigation process



Why do this?

Provisional enquiries can:

- help us to respond quicker and more proportionately to accurately assessed risk
- avoid unnecessary investigation
- enable us focus on those cases that require full investigation

 Analysis suggests at least 10% of complaints received could be suitable for a provisional enquiry

Our analysis went on to suggest that 500 complaints per year could be appropriately closed earlier in the process following a provisional enquiry:



reducing unnecessary stress and inconvenience



reducing the amount of time that the complainant spends waiting for a response

9

enabling more proportionate investigation, with more resource being focused on the most serious cases



Trust in the medical profession

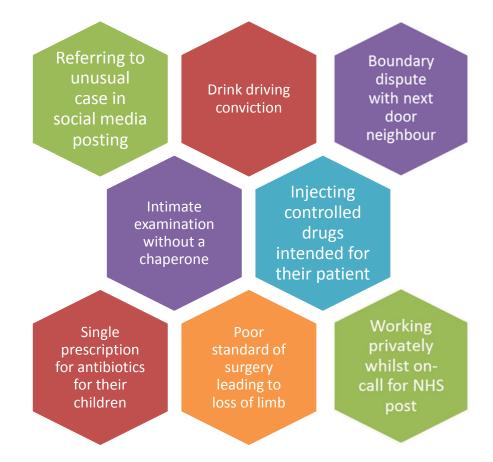
Veracity Index			
I am going to read out some different types of people. For each, please tell me if you would generally trust them to tell the truth or not.			
	% Not trust	% Trust	
Doctors	9	89	
Teachers	1	86	
Scientists	1	83	
Judges	13	82	
Television news readers	24	69	
Clergymen/priests	27	66	
Police	28	65	
The ordinary man/woman in the street	26	64	
Civil Servants	38	53	
Pollsters	34	50	
Trade union officials	47	41	
Business leaders	57	34	



 What might raise a question about the fitness to practise of a Dr?



Which of these issues are serious in GMC terms?



Support for doctors under investigation

- BMA Doctors for Doctors
- Confidential, independent and free for doctors in fitness to practise cases
- Before, during and after hearings
- Not medical / legal advice

Tel: 020 7383 6707

doctorsupportservice@bma.org.uk http://bma.org.uk/doctorsupportservice

BMA		Sign In Sear	ch the BMA O
Home · Practical support	Lat work > Doctors' well-being > Doctor support so	ervice	f 💟 🕄 🖗 in 🖶 🗠
Practical support at work	Doctor support service Boctor support service on the MAX. There is a support service from the MAX. We notiginate usages travels from the MAX. We notiginate that doctors independent these cases have to deal with unique there is and the QAA accommissioned are to provide the Doctor support service, which offers enabled help from fieldew doctors and functions independently of the QAAC. Why are used ing this? Being addect to a comparison can be strendif. We understand that many doctors might not have any provide the Doctor services to support should help from field with the strendif and the services to support should they first those any provide the Doctor shows access to support should they first three any provides the doctors have access to support should they first three any provides the doctors have access to support should they first three any provides the doctors have access to support should they first three any provides the doctors have access to support should they first three any provides the doctors have access to support should they first three any provides the doctors have access to support should they first three any provides the doctors have access to support should they first three any provides the doctors have access to support should they first three any provides the doctors have access to support should they first three any provides the doctors have access to support should they first three any provides the doctors have access to support should they first three any provides the doctors have access to support should they first three any provides the doctors have access to support should they first three any provides the doctors have access to support should they first three access to support should be the doctors have access to support should be doctors have access to support should be doctors have access to support should be doctors have access to access the doctors have access to access the doctors have access to access the doctors have access to access to access to a		Use the Doctor support service Are you going through a
Life and work in the UK			some support?
Pay, fees & allowances			Call us 020 7383 6707 Email us
GP practices			Open Monday to Friday.
Commissioning			9am to 5pm
Ethics			Need urgent assistance?
European Working Time Directive			If you need to talk to someone right away, contact BMA
Occupational health	Who is the service aimed at?	where a complaint has been	Counselling Service
Private practice	Any doctor, you don't have to be a BMA member, where a complaint has been made to the GMC can ask for support from the Doctor support service. Support is available from when a complaint is made until the outcome of the case. Doctors		days a week
Medical appraisals	unable to talk with family or supportive colleague useful.	as may find the service particularly	
Revalidation	Support is available from when a complaint is made until the outcome of the case.		
Immigration	Unrepresented doctors or doctors with health problems may find the service particularly useful.		
Doctors' well-being			
About BMA counseling and the Doctor Advisor Service	What sort of support is available? • Telephone support, subject to availability, from the time a complaint is received by the GMC until the matter is concluded.	This service will support	
	une diviciandi une matteris concludeo.	colleagues through a	



Support for doctors under investigation



Your health matters

Practical tips and sources of support

Working with doctors Working for patients

Council

General Medical

http://www.gmc-uk.org/concerns/11542.asp

- a range of advice for doctors with health concerns;
- help for those who are successfully managing your health conditions
- and those who are referred to the GMC for health related reasons

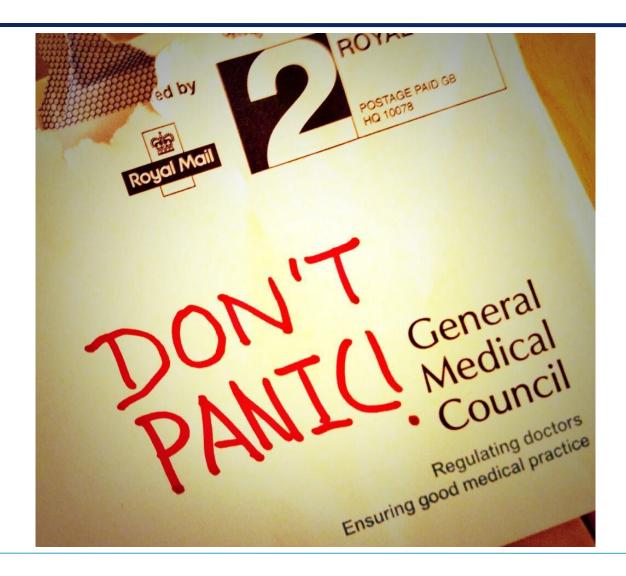


GMC Confidential 0161 923 6399

Your health matters

Feedback | Contact us | Further support links





Support for Drs in FtP

- Medical Defence Organisations
- BMA 'Doctors for Doctors'
- GMC 'Your Health Matters'
- PHP [London]
- NHS England new scheme for GPs
- Telephone service MPTS

Final comments, questions, suggestions ?

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