



MPTS Committee

Tuesday 11 September 2018

10:00 – 13:00

**Meeting Room 4.32
St James's Buildings
79 Oxford Street
Manchester M1 6FQ**

Agenda

- 1** Welcome and apologies for absence
- 2** Minutes of the meeting held on 2 May 2018
- 3** Chair's report (oral)
- 4** Engagement with doctors and medical students
- 5** Executive Manager's report including performance data and risk register
- 6** Tribunal Members' resourcing update
- 7** Annual review of the MPTS vision
- 8** MPTS brand refresh
- 9** Adjournments quarterly update
- 10** Progress of the MPTS business plan projects 2018
- 11** Any other business
- 12** Date and time of next meeting: 13 November 2018, 10:00 – 13:00



2 May 2018

MPTS Committee

To approve

Minutes of the Meeting on the 2 May 2018¹

Members present

Dame Caroline Swift, Chair

Joy Hamilton
Patricia Moultrie

Jacky Hayden
Judith Worthington

Others present

Gavin Brown, Executive Manager, MPTS
Vaishali Fitton, Senior Legal Adviser, MPTS
Bernadette Beisty, Governance Officer, MPTS and Committee Secretary
Colin Barker, Communications Manager, MPTS (Items 5 and 6)
Mel Quinan, Business Continuity and Compliance Manager, GMC (Item 7)
Warren Dale, Business Continuity and Compliance Manager, GMC (Item 7)
Umar Badat, Change Manager, MPTS (Item 8)

¹ These Minutes should be read in conjunction with MPTS Committee papers for this meeting, which are available on our website at <http://www.mpts-uk.org>

Welcome and introductions

- 1 The Chair welcomed Committee members and attendees to the meeting.

Minutes of the meeting on 7 February 2018

- 2 The Committee approved the minutes of the meeting held on 7 February 2018 as a true record.

Matters arising

- 3 **Action sheet update.** The Chair reported that a number of the actions would be picked up as part of the agenda and referenced the actions on tribunal diversity and the MPTS risk register. The Committee considered the following actions:
 - a Update on appeals: Guidance for tribunals on restoration cases. The Chair provided an update on the action and confirmed that GMC Legal were looking into the decision making process for restorations.

Action identified from the discussion: The Senior Legal Adviser confirmed that there was guidance in place for tribunals on restoration cases and that this would be shared with the Committee.
 - b Dr Bawa-Garba appeal. Use of the doctor's reflection in the original court case. The Chair informed the Committee that the MPS which represented Dr Bawa-Garba, had issued a statement to say that her e-portfolio reflections were never submitted to court. The MPS said that "[I]t is important to clarify, that at no point during Dr Bawa-Garba's criminal trial was an e-portfolio presented to the court or jury as evidence – either in its entirety or partially. In fact, the court was clear that reflections were irrelevant to the facts of the case and that no weight should be given to any remarks documented after the event." **Action closed.**

Chair's report

- 4 The Chair provided an update on key activities and developments since the last MPTS Committee meeting:
- 5 **Quality assurance update:** The Chair confirmed that there had been two meetings of the Quality Assurance Group (QAG) since the last MPTS Committee. She highlighted the key purpose of these meetings:
 - a Quality of tribunal decisions. QAG reviews the quality of decision making by assessing how well the decisions comply with guidance, the language used and the accessibility of the determinations.
 - b Tribunal members' competencies are assessed to ensure that tribunal members are given feedback that supports quality decision making.

- c** Observations. Changes to the Observations process have been introduced. The MPTS User Group were notified of the changes and no objections were raised.

- 6 Determinations framework:** The Chair reported that the MPTS was in the process of rolling out the new Determinations framework. It is envisaged that the revised framework would result in determinations that are shorter, more ordered and easier to read. The feedback on the new framework had been positive with Tribunal members finding it very useful.

- 7 Tribunal members training update:** The Committee noted the following:
 - a** The planned joint training with the NMC for Tribunal Chairs is scheduled for the Autumn.
 - b** Circulars containing learning points from appeals are shared with Tribunal members.
 - c** Video training and Webinars. The new training package for Tribunal members is due to be rolled out and if successful more training would be delivered in this medium.

- 8 Sanctions Guidance.** The Committee received an update on plans to revise the Sanctions guidance.

- 9 Meetings updates.** The Committee received an update on the following meetings:
 - a** Policy Forum.
 - b** GMC Legal meeting.
 - c** Adjournments Working Group.
 - d** All Staff Meeting.
 - e** Afternoon tea with the Chair.

- 10 Witness journey.** The Chair reported that a key focus for the MPTS was improving the witness experience. There were plans to improve facilities for witnesses linked with the expansion of the MPTS footprint on the 7th Floor of St James's Buildings.

- 11 Williams Review.** The Chair provided an update on her attendance at the Williams Review.

- 12 Key meetings and events:**
 - a** Health Professions Council of Zambia visit to MPTS in April 2018.

- b** Professional Regulation Conference 2018, Faculty of Advocates.
- c** MPTS User Group meeting.

During the discussion, the Committee noted:

- d** At the MPTS User Group meeting having more engagement with medical students had been discussed. The key messages to students should be prevention; to avoid behaviours which would result in a hearing however if involved in an MPTS hearing engage with the process.
- e** **Action identified from the discussion:** the Executive Manager agreed to ask a GMC representative to come to the next meeting to update the Committee on the work GMC are doing in this regard.

Executive Manager's report including performance data and MPTS risk register

13 The MPTS Committee considered the Executive Manager's report noting the following:

Performance report

- 14** The Committee reviewed the performance data and agreed that more trend analysis was needed to provide assurance to the group. **Actions identified from the discussion:**
- a** The Executive Manager agreed to provide data from previous years to help identify any trends or themes.
 - b** The Executive Manager to consider providing more qualitative data to support the provision of the key performance data.

Tribunal Diversity

- 15** The Committee received an update on comparators for Tribunal diversity which responded to an action from the previous meeting.
- 16** The Committee decided that comparison with both Census data and the currently used Court data was the most appropriate going forward.

New Initiative Fund bid

- 17** The Executive Manager confirmed that the New Initiative Fund bid had been approved.

- 18** During discussion the Committee queried whether financial data should be included in the report. **Action identified:** The Executive Manager agreed to consider how to report on financial reporting and provide an update at the next meeting.
- 19** The Committee also discussed the target number of LQCs for hearings and the current performance against the target. **Action identified:** the Executive Manager agreed to provide the information at the next meeting.

Research concerning Tribunal outcomes and doctor non-engagement

- 20** The Executive Manager asked the Committee to note the DJS research, at Annex A, regarding Tribunal outcomes and doctor non-engagement.
- 21** The MPTS have been working with the GMC's Data, Research and Insight Team (DRI) to analyse MPT outcomes. The initial work is positive in terms of the consistency of tribunal decision-making.
- 22** The Executive Manager described the next steps in having the research peer reviewed prior to publication.
- 23** During discussion the Committee referenced Annex C: Ethnic diversity in MPT Tribunals 2015 – 2017. The Committee noted the limitations of the data set for the report. The Executive Manager confirmed that the data for the planned research project would provide robust measures for analysis.

Engagement Analysis

- 24** The Executive Manager highlighted the key points from the report. The MPTS have undertaken a desk-based analysis to try to better understand the reasons behind doctors' non-engagement with MPTS hearings processes and whether there is anything further the MPTS could be doing to engage with doctors.
- 25** During discussion the Committee noted that financial and health reasons were cited as reasons for doctors' non-engagement. The Committee discussed whether more could be done to understand the data behind financial and health reasons and whether more scrutiny was needed of the MPTS being a single hearing centre.
- 26** The Committee also suggested that referencing IOT data could provide additional information on understanding why doctors do not engage with MPTS processes.
- 27** **Action identified from the discussion:** the Executive Manager agreed to review the above points and provide an update at the next Committee meeting on the impact of financial and health reasons for doctors' non-engagement with supporting data from IOTs. Also to report back to the Committee on the MPTS being a single hearing centre.

MPTS risk register report

- 28** The Executive Manager presented the MPTS risk register and asked the Committee to note the addition of arrows to the report in response to an action from the previous meeting. He highlighted that the key risk for the organisation was risk 7, staff retention and workload. He provided an account of the mitigation in place to reduce the risk.
- 29** **Action identified from the discussion of the risk register:** the Executive Manager agreed to review risk 3 to assess whether the risk and mitigation had been articulated correctly.

Staff development update

- 30** The Executive Manager highlighted the key developments:
- a** Successful delivery of the raising concerns guidance and workshops.
 - b** A number of L&D drop in sessions to support a learning needs analysis.

Meetings, events and updates:

- 31** The Executive Manager provided an update on the following meetings and events: Afternoon tea with Dame Caroline, GMC Legal meeting, Sanctions Guidance update, Case Management update, MPTS User Group.
- 32** The Committee noted the updates.

Facilities update

- 33** Plans for the 7th Floor, St James's Buildings. The Executive Manager provided a handout, for the Committee to review, of the proposed changes to the 7th Floor accommodation. He confirmed that the GMC Executive board had approved the plans and he hoped the refurbishment would be completed in three months' time.
- 34** During discussion the Committee queried the layout of the extended accommodation and whether the witness accommodation was positioned appropriately. The Executive Manager confirmed that the plans would ensure an improved witness experience.

Report of the Chair of the MPTS to the GMC Council

- 35** The Communications Manager, MPTS presented the draft report to GMC Council. He reported that there had been a number of minor amendments to the report since it had been circulated to the Committee and provided an update on the changes. The Committee accepted the amendments.

- 36** During discussion the Committee made suggestions on additions to the report including making an update on the MPTS's budget in the first three months of 2018.

MPTS Annual Report to Parliament

- 37** The Communications Manager, MPTS presented the draft Annual Report to Parliament. He reported that the format of the final version would contain infographics to help highlight key areas of the Report. He also confirmed that there was still time to make suggestions or ask for additions to the Report. **Action identified from the discussion:** The Committee agreed to contact the Communications Manager with any comments on the Annual Report to Parliament.

MPTS Business continuity plans

- 38** The Committee received a presentation from members of the Business Continuity team which provided an update on emergency response plans for the MPTS.
- 39** The Business Continuity and Compliance Manager confirmed that the focus of the emergency plan for the MPTS was to ensure that hearings would continue.
- 40** The Chair thanked the members of the Business Continuity team for providing a very useful and helpful update.
- 41 Actions identified from the discussion of business continuity plans:**
- a** Agreed that the evacuation leaflet would be re-circulated to MPTS staff and associates.
 - b** The Business Continuity and Compliance Manager agreed to check whether the GMC and MPTS experienced problems with IS patches because staff did not switch off their computers to allow updates.
 - c** The Executive Manager agreed to check that there was a robust process in place for updating contact information for Tribunal members.

General Data Protection Regulation (GDPR)

- 42** The Executive Manager summarised the key points from the GDPR presentation highlighting the areas most relevant to the work of the MPTS. The Committee noted the presentation.
- 43 Actions identified from the discussion:**
- a** The Royal Pharmaceutical Society guide to GDPR would be shared with the group to identify if any best practice could be identified.

- b** The Executive Manager agreed to clarify whether the GDPR e-learning module for MPTS associates is the same as the module for GMC staff.

Tribunal member's annual appraisal

- 44** The Executive Manager described the proposed plans to create a more formal process for the affirmation of appraisals for Tribunal members. The MPTS Committee discussed the annual appraisal system for Tribunal members and noted the plans to provide an improved system for monitoring appraisals and CPD for Tribunal members.

Any other business

- 45** The Chair thanked the Committee members for their contribution to a very useful meeting.
- 46** The Committee noted that the following papers would be withheld from publication:
 - a** Agenda item 5 Annex C, an analysis of the outcomes of MPT hearings in 2015, 2016 and 2017 taking into account both the ethnicity of the doctor and the ethnic diversity of the Tribunal.
 - b** Agenda item 5 Annex D, a desk-based analysis of the reasons for doctor non-engagement in 2017.
 - c** Agenda item 5 Annex E, the MPTS Risk Register.
 - d** Draft reports including: Report of the Chair of the MPTS to GMC Council and the MPTS annual report to Parliament.
 - e** MPTS Business continuity plans.
- 47** The Committee noted the date and time of the next meeting: Tuesday 11 September 2018, 10:00-13:00, Room 4.32, SJB

Confirmed:

Dame Caroline Swift Chair

11 September 2018



Agenda item:	5
Report title:	Executive Manager's report
Report by:	Gavin Brown , Executive Manager, gavin.brown@mpts-uk.org , 0161 240 8126
Considered by:	MPTS Committee
Action:	To consider

Executive summary

This report provides an update on the operational performance of the MPTS.

Annex A is the MPTS performance data.

Annex B is the MPTS Risk Register.

Recommendations

The Committee is asked to consider the report, along with the performance data at Annex A and the MPTS Risk Register at Annex B.

Previous response to actions from May's Committee meeting

- 1** On the 29 June 2018 the MPTS Committee were sent a short document containing guidance for tribunals on restoration cases, an updated version of the MPTS Annual Report (which has now been laid in Parliament) and the financial position of the MPTS.
- 2** We hope the Committee found this update helpful.

Performance

- 3** In terms of performance, we continue to meet the IOT target every month and in the majority of months we exceed the MPT target (see Annex A).
- 4** Following feedback received from the Committee the performance report contains more historical data to help identify any trends or themes.

Risk

- 5** The MPTS Risk Register has been reviewed and updated (see Annex B). The amendments have been highlighted in blue.
- 6** Risk three was reviewed and amended in line with the comments made by the Committee at their meeting in May.
- 7** There are currently no risks relating to the work of the MPTS on the GMC Corporate Opportunities and Risk Register.
- 8** We would welcome the MPTS Committee's view on the updated Risk Register.

Staff Survey findings

- 9** The 2018 staff survey was live between 16 April and 14 May 2018.
- 10** The MPTS Senior Management Team have gone through the results carefully and have read all the anonymised comments.
- 11** There is a lot to be positive about in the results for the MPTS, with the vast majority of staff saying they are proud to work here and that they would recommend working here.
- 12** But some clear concerns were also expressed.
- 13** Some of the issues raised will be addressed by action already being taken this year, while others are helping us plan our work for 2019.

- 14** Some issues will take longer to address, and some require action at a GMC-wide level.

Positives

- 15** Most MPTS staff are proud to work here, would recommend it to others and feel committed to ‘going the extra mile’.
- 16** People gave high scores for questions about their own line manager: they are kept updated on their own area of work, effectively delegated to, treated with respect and praised for good performance.
- 17** Within the MPTS, people believe they are encouraged to put forward ideas, and that their views and ideas are listened to.
- 18** Most people find their own job interesting, feel clear on what their objectives are, feel empowered to take decisions and intend to still be working here in 12 months’ time.
- 19** 85% of MPTS staff feel clear about the GMC’s overall corporate strategy, compared to 80% across the whole GMC.

Concerns

- 20** Lots of people feel GMC-wide changes are not well managed, and that new projects and initiatives are not well thought through (though there were slightly better scores for changes made at the MPTS level).
- 21** Only 53% of MPTS staff agreed they feel ‘valued’ as a member of GMC staff. Only 64% said that the GMC values people with different talents and ideas.
- 22** Only half of MPTS staff said that the cascade of information through the GMC works for them.
- 23** There were lower scores for questions about the senior management of the GMC than for local line managers.

Anonymous free text comments

- 24** There were many comments, and all have been read by the MPTS senior management team. The most common themes were:
- a** Communication with staff, particularly about decisions and changes.
 - b** Career development and learning opportunities.

- c** Workload.
- d** Pay grades, pay progression and pension changes.

What we are doing

25 Communication

- a** A new Staff Network for L4/5/6 staff has been in operation since January 2018, with clear actions and responses on matters raised.
- b** Hearings now start later more regularly, giving managers time to talk directly to staff. As well as four all-staff meetings a year, we have made time for team get-togethers for hearings-based staff.
- c** The improved monthly ‘What’s on’ email shares news from all sections of the MPTS.
- d** Improving MPTS internal communication will be a priority for 2019, so we are open to further ideas, particularly around promoting staff wellbeing.

26 Learning and development

- a** Drop-in sessions were run earlier this year, so all staff could talk directly to our L&D colleagues about their needs.
- b** We used our annual away day to respond to this, focussing on our development as individuals and teams. Managers will be encouraged and supported to develop the MBTI work further.
- c** We have made use of secondments and job swaps in some circumstances, and a small group of people are involved in a work shadowing pilot.
- d** We will continue to ensure opportunities are highlighted in the monthly ‘What’s On’ emails.

27 Workload

- a** More staff members have been recruited in Operations, recognising pressures on both hearings-based and office-based staff.
- b** We are in discussion about how we can ensure a more even distribution of hearings across the year, instead of the peaks and troughs we currently experience.

- c** Senior managers at the MPTS have a responsibility to make sure we are not ‘forgotten’ when GMC-wide changes are planned.

28 Remuneration

- a** Pay grades are set at a GMC level, but we will work with HR to ensure that the individual circumstances of staff are considered in the 2019 pay award.

29 Discussing further

- a** All managers have been asked to make time to discuss the staff survey at team meetings.
- b** The Executive Manager will give an update on plans for 2019 at the all-staff meeting on 12 September.

Case Management Review

30 We are in the early stages of a review of our case management service.

31 The review will be considering how best to use our resources to manage hearings effectively and how to develop the service. There are a number of areas which we are considering carefully, but to give a flavour:

- a** Better information at the point of referral – including consideration of standard forms to be completed by one or both parties;
- b** Increasing the number of hearings with PHMs, taking into account the types and lengths of hearing most likely to go part-heard;
- c** Standard forms for common applications.

Engagement Analysis

32 At the last MPTS Committee meeting we presented findings from a desk-based analysis completed on the non-engagement of doctors at MPTS hearings.

33 An action was raised to assess the impact of a single hearing centre on the 53 doctors who did not attend and were not represented at MPT hearings in 2017.

34 The locations of the doctors registered addresses, who fell within the cohort, have been anonymised and recorded numerically at a high level recording city/county for each of the doctors.

35 Eight individuals were excluded from further analysis as they were not living within the UK. Therefore a total of 45 doctors registered addresses were further analysed. The data presented below, represents UK resident doctors who did not attend and were not represented at their MPT hearings in 2017.

County	City	No. of individuals
Bedfordshire	Shefford	1
	Luton	1
Buckinghamshire	High Wycombe	1
Cambridgeshire	Cambridge	1
	Peterborough	1
Cheshire	Warrington	1
Devon	Exeter	1
Dorset	Bournemouth	1
Durham	Consett	1
Essex	Buckhurst Hill	1
	Hornchurch	1
Greater Manchester	Gatley	1
	Manchester	1
Greater London	Harrow	1
	Ilford	1
	London	8
	Wembley	1
	Southall	1
Hampshire	Gosport	1

Kent	Tunbridge Wells	1
Lancashire	Lytham St. Annes	1
Leicestershire	Leicester	3
Norfolk	King’s Lynn	1
Northern Ireland	Coleraine	1
	Downpatrick	1
North Yorkshire	York	1
South Yorkshire	Rotherham	1
Staffordshire	Stafford	1
Wales	Cardiff	1
West Midlands	Coventry	1
	Wolverhampton	1
West Yorkshire	Bingley	1
	Keighley	1
	Leeds	2
	Wakefield	1

Table 1: Illustrates the city/county for each of the 45 doctors registered addresses.

- 36** A further action was identified to review supporting data from interim order tribunal (IOT) hearings in 2017, to establish how many doctors did not attend and were not represented.
- 37** An analytical report retrieved from the internal case management system (Siebel), highlighted that in 2017 there were 72 new IOT hearings in which the doctor did not attend and were not represented out of a total of 352.
- 38** We have conducted an initial analysis of reasons for doctors who did not attend and were not represented in IOT hearings, using the same material used to establish reasons for non-attendance in MPT hearings.

39 IOT hearings unlike MPT hearings are not held in public session. At the outset of any hearing, service is established when the doctor is not present, reasons for non-attendance are then detailed in determinations. However due to the nature of IOT hearings, definitive reasons for non-attendance are not captured in hearing determinations.

Appeals

- 40** Since the last update to the MPTS Committee, new learning points and some reminders of points and principles arising from the judgments given in appeals/challenges to tribunal decisions from 1 April – 30 June 2018, include:
- a** when considering insight and remediation, a tribunal must pay close attention to the practitioner’s current understanding of and attitude towards what s/he has done and whether the insight shown and/or remediation undertaken addresses the true gravamen of the case found proved against them
 - b** when considering whether or not a practitioner poses a significant risk of repeating behaviour, depending on the seriousness of the conduct in question, a small but nonetheless real (not fanciful) chance of reoccurrence might be significant
 - c** a tribunal’s decision on sanction should reflect the gravamen of the main findings
 - d** when considering whether the sanction of suspension is appropriate, tribunals must evaluate the mitigating features as well as the aggravating features and balance them against each other. Tribunals should provide coherent reasoning and make clear what weight has been given to mitigating factors in demonstrating the proportionality of the sanction
 - e** if any of the factors listed at paragraph 109 of the Sanctions Guidance applies (which indicate that erasure may be appropriate), although it does not mean erasure must follow, a tribunal ought to consider erasure very seriously (especially if multiple factors are present) and powerful, case specific reasons ought to be given to justify a decision against erasure
 - f** where a practitioner has voluntarily absented themselves from disciplinary proceedings, it will be fair for a tribunal not to consider adjourning at the sanction stage to contact and enquire with the absent practitioner as to whether they wish to participate, even if their registration is at risk
 - g** in cases where the practitioner is absent and unrepresented, the Tribunal should explore whether there is any material available to them which would assist the practitioner’s case

Staffing

- 41** Heather Lloyd has joined the Tribunal Development Section on secondment.
- 42** Alex Treece has re-joined Operations, in a role supporting both the IOT and MPT teams, and Fuchsia Jasmon has joined the Listings team on secondment.
- 43** Miriam Bonabana has begun a secondment with the GMC’s Business Transformation Team, and Rashida Bharmal has begun a secondment with the GMC’s finance team.
- 44** Conor Williams has joined the Facilities team on a six month contract.
- 45** Deborah Pilkington has returned from sabbatical to her role as MPTS Project Officer, working Monday to Wednesday. She will be working directly to Scott Geddes, supporting him on some projects.

GMC Legal

- 46** On the 17 July 2018 Dame Caroline Swift, Gavin Brown and Sam Bedford had a very productive and useful meeting with GMC Legal. This was a follow-up meeting to the one held on the 14 March 2018 that was reported to the Committee in May.
- 47** The following items were discussed:
 - a** Hearing bundles in advance – generally positive feedback following full implementation
 - b** Witness support – a number of changes have been agreed including; MPTS/facilities to inform GMCL of a witness’s arrival, and when their evidence is coming towards the end; GMCL will indicate on the schedule whether the witness would like a pre-hearing visit; parties and the Tribunal will enter the room before the witness arrives at the room; and for video-links, a GMC Paralegal will attend to ensure the link is running smoothly and the witness has all necessary papers.
 - c** Non-compliance hearings: we had a positive workshop in early June 2018 with GMC colleagues. The main issues considered were in which part of the NCH process should include consideration of whether the practitioner has a reasonable excuse for non-compliance sit (i.e. is it relevant to whether there has been a failure to comply, or to the consideration of sanction) and the relevance of the “reasonableness of the direction”.
 - d** Notices of hearing and service: the working group met for the second time on 27 June 2018 - the overall view is that things are generally going well. It was agreed that the group would aim to implement any improvements identified by the end of 2018.

Facilities

- 48** The fit out of the MPTS Reception at SJB and the consolidation of operations on the 7th floor is underway.

Amendment to the MPTS work programme 2018

- 49** The Committee is asked to note that the scheduled training update, containing information on the induction and refresher training for tribunal members, due in November 2018 has been moved to the meeting in January 2019.
- 50** This will bring reporting in line with data collection so that the report contains a full update on all tribunal training.



Agenda item 5 – Annex A

MPTS 2018 Q2 performance review & historical analysis



Agenda item:	6
Report title:	Tribunal Members resourcing update
Report by:	Tamarind Ashcroft , Head of Tribunal Development tamarind.ashcroft@mpts-uk.org , 0161 240 7291
Action:	To note

Executive summary

This paper details the Tribunal Members resourcing position including planned future appointment requirements.

No appointments were made during 2018.

Second term contracts were issued for those appointed in 2014.

All Legal Assessor only contracts ended on 31 March 2018.

Planned appointments for medical and legally qualified members in 2019.

Recommendation

The MPTS Committee is asked to note the current position with regard to resourcing tribunals.

Background

- 1 The volume of sitting tribunal members fluctuates regularly as tribunal members are appointed on a contract for services. The number of available tribunal members may differ to the actual number of tribunal members where it has been agreed or determined that a tribunal member should refrain from sitting, for example due to personal circumstances or where the tribunal member is subject to investigation proceedings in respect of their MPTS role or any other role they may hold.

Recent activity

- 2 To date this year, 11 tribunal Members have concluded their contracts for services earlier than anticipated.*
- 3 'Legal Assessor only' contracts formally ended in March 2018, this was 3 months later than anticipated to ensure that we were able to meet our hearing requirements. A few legal assessors have continued to assist us where hearings have adjourned part-heard and the specific hearing would benefit from continuity of legal support.
- 4 A number of first term contracts ended this year with the vast majority of tribunal members affected agreeing to be appointed for a second term.
- 5 A review of availability, actual sitting and attendance at mandatory training was made and the MPTS ended contracts where tribunal members were unable to demonstrate that they could contribute the required commitment to the role.
- 6 The volume of tribunal Members broadly meets the current hearing demands with availability issues arising in limited circumstances. In some circumstances where we intended to use a legally qualified chair (LQC) for a hearing but were unable to secure availability we have used medical or lay chairs with more than one LQC acting as legal assessor to ensure the hearing could proceed.
- 7 Hearing volumes are higher than had been forecast last year and we are closely monitoring our ability to meet empanelment needs. There is no planned contract activity for 2018 but we will keep this under review and consider any internal changes required or bring forward any future activity if necessary.

* Three Legally Qualified Chairs had to end their contracts due to full time judicial appointments.

Future resourcing needs

- 8** We currently have a total of 298 tribunal members which is a reduction of 17 tribunal members from this time last year. This consists of 158 lay (including legal) members and 140 medical members*.
- 9** 24 medical and 21 lay tribunal members' contract for services will end within the next 18 months with a further 42 medical members ending their terms in the subsequent year. We have observed that average sitting days per tribunal member in 2017 has reduced compared to 2016. This was expected and reflects that we have a slightly higher volume of lay members for the next year due to the LQC appointments increasing this group prior to lay contracts ending. We plan appointments to commence ahead of existing contracts ending; this ensures a suitable period for knowledge to develop resulting in consistency of experience.
- 10** The number of LQCs has reduced to 68 and it is anticipated that this group is likely to steadily reduce due to judicial appointments. The initial appointments, as indicated last year, was lower than intended and due to the further reduction of LQCs and the need to secure some LQCs as legal assessors on occasions where this was not intended, this has highlighted that we need to increase the pool of LQCs.
- 11** As a high number of medical tribunal members are due to end their contract for services in the near future, we will need to appoint a sufficient number of medical members to account for these planned changes.
- 12** Work is underway to forecast the anticipated number of appointments we will seek to make to keep the overall pool as reduced in size as possible to ensure a balance between more regular sitting by tribunal members against sufficient availability.
- 13** As indicated in the report to the MPTS Committee in 2017, we intend to carry out two appointments campaigns which will run alongside each other for medical members and LQCs. Preparation for this will commence now but advertisement of positions will not take place until January 2019 with the intention of having individuals in place for Q3 2019.
- 14** 40% of the IOT pool is included within those that will end their contract for services over the next couple of years. It is therefore anticipated that we will be seeking expressions of interest for individuals within the MPT pool to move to the IOT pool during 2019 and we will also seek direct appointment into the IOT pool from the planned external campaigns.

* At the time of writing - 17 August 2018

Medical Members

- 15** Medical Members continue to require a licence to practise. We recognise that this can impact those individuals no longer in active clinical practise that would otherwise apply for roles and potentially be able to offer greater availability. We are therefore reviewing the options available for medical tribunal members to ensure revalidation needs can be met.



Agenda item:	7
Report title:	Annual review of the MPTS vision
Report by:	Colin Barker , Communications Manager, colin.barker@mpts-uk.org , 0161 240 7197
Considered by:	MPTS Committee
Action:	For decision

Executive summary

The Committee agreed an MPTS vision statement in September 2017.

This report provides an update on the activity that was proposed in support of that vision statement.

It proposes that the MPTS adopt the same vision statement for another year, with revised activities in support.

Recommendations

- a** That the Committee note the activity undertaken in support of the 2017/19 vision statement.
- b** That the Committee adopt the proposed 2018/19 vision statement.

- 1 The Committee agreed an MPTS vision statement in September 2017. It was agreed that our vision is to “provide a modern medical practitioners tribunal service that is effective, fair and impartial.”
- 2 The vision is articulated in four statements, stating our intention to provide a service that:
 - a Makes high quality, well-reasoned, independent decisions to protect the public.
 - b Runs hearings efficiently and effectively, using resources appropriately.
 - c Treats all tribunal service users with respect and fairness.
 - d Has a distinct voice, clearly articulating our role.
- 3 In the paper agreed last year, each of the four statements above was accompanied by proposed changes or activities that help us work towards the vision.
- 4 All the proposed changes have been enacted or are in progress (See annex B).

Use of the vision

- 5 The vision is a helpful framework for articulating the work we do to maintain and improve the efficiency and effectiveness of our service.
- 6 It was published in our annual Report to Parliament 2017.
- 7 It was also discussed in detail with MPTS staff members earlier this year, at group training sessions where it was looked at alongside the GMC corporate strategy.

Next steps

- 8 We propose maintaining the vision statement in its current form for a second year, with revised measures detailing our work over the next twelve months.
- 9 A revised vision statement for the Committee’s agreement is included at Annex A.

Annex A – Vision statement 2018/19

Who we are

The MPTS runs hearings for doctors whose fitness to practise is called into question.

We are independent in our decision making, and operate separately from the investigatory role of the GMC.

As a statutory committee of the GMC, we are accountable to the GMC Council and the UK Parliament.

Our vision

To provide a modern medical practitioners tribunal service that is effective, fair and impartial. A service that:

- 1 Makes high quality, well-reasoned, independent decisions to protect the public.
- 2 Runs hearings efficiently and effectively, using resources appropriately.
- 3 Treats all tribunal service users with respect and fairness.
- 4 Has a distinct voice, clearly articulating our role.

Working towards our vision: 2018/19

A service that makes and shares high quality, well-reasoned, independent decisions to protect the public

We will protect the public by delivering a tribunal service which makes and shares high quality, proportionate, well-reasoned determinations.

Our decisions will continue to be made by tribunal members who are independent of those who present and defend cases before the tribunal.

We will continue to ensure Tribunal members are recruited for decision making skills and competencies and to train them, appraise their performance and quality assure their decisions.

Proposed activity

- a** Review the *Sanctions guidance* used by MPTS tribunals and GMC decision-makers.
- b** Launch a new MPTS website with much clearer information on forthcoming hearings and recent decisions.
- c** Use online videos and webinars to increase the learning opportunities we offer our tribunal members and other associates.

A service that runs hearings efficiently and effectively, using resources appropriately

We will maintain public confidence by conducting tribunal hearings efficiently and expeditiously to avoid delays in resolving cases, which can have a huge impact on doctors and complainants.

We will continue to demonstrate value for money by using resources efficiently and utilise hearing rooms efficiently.

Proposed activity

- a** Continue to monitor the use of legally qualified chairs.
- b** Review our case management service, considering how best to use our resources to manage hearings effectively.
- c** Collaborate with other regulators to maximise use of shared resources.

A service that treats all tribunal service users with respect and fairness

Everyone using our tribunal service can expect to be treated with fairness and respect - doctors, complainants, witnesses and legal professionals: equality and diversity are integral to the work of the MPTS as an adjudicator and an employer.

We will continue to provide equality training to staff and tribunal members, to provide reasonable adjustments for tribunal service users where appropriate and to share and monitor our decision data to support a fair process.

We will continue to signpost doctors and witnesses to the GMC's witness and doctor support services.

We will continue to support doctors without legal representation with information in a helpful format.

Proposed activity

- a** Offer support to vulnerable doctors to lessen isolation and stress, particularly through our Doctor Contact Service to support doctors at the hearing centre, and signpost to resources to support doctors who are unwell.
- b** Extend the support we offer to doctors appearing at hearings without legal representation through a resources for doctors to help them arrive at their hearing better prepared.

A service that has a distinct voice, clearly articulating our role

We will clearly articulate our role as an adjudication service making independent decisions which are fair to all.

Proposed activity

- a** Refresh all MPTS branding, with a focus on clearly demonstrating the operational separation of the MPTS.
- b** Providing approved briefing documents and material to parties with an interest in our work, facilitating others to talk about us to doctors.
- c** Actively contribute to the GMC's wider strategic response to the changing regulatory environment.

Annex B – Review of 2017/18 measures

1. A service that makes and shares high quality, well-reasoned, independent decisions to protect the public

Improve how we present our written decisions, making them more structured and easier to understand for doctors and the public.	Records of Determination are now produced with pre-hearing legal argument in annexes at the end of the document.	Complete
Review the decisions circular.	It has been agreed that a GMC department will take responsibility for the decisions circular.	Complete
Develop new and updated guidance on taking interim orders into account, restoration and voluntary erasure.	This will continue to form part of our policy work.	Ongoing

2. A service that runs hearings efficiently and effectively, using resources appropriately

Introduce and monitor the use of legally qualified chairs.	Legally qualified chairs are used in the majority of MPTS hearings. We will continue to monitor their effectiveness.	Complete
Work with the GMC's case presentation team and doctors' representatives to reduce the number of adjournments, regularly monitor their causes and give feedback through our User Group and Case Management Group meetings.	This will continue to be a priority for the MPTS.	Ongoing
Extend our use of robust case management and make sure tribunals can read evidence and documents in advance to reduce hearing length.	Evidence bundles are now routinely produced in advance of a hearing.	Complete
Collaborate with other regulators to maximise use of shared resources.	We have collaborated on training with other regulators and continue to	Complete

	offer use of spare hearing room capacity.	
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3. A service that treats all tribunal service users with respect and fairness

Deliver a programme of reform in relation to vulnerable doctors to lessen isolation and stress, including a Doctor Contact Service to support doctors at the hearing centre, extend support to cover the pre-hearing stage, develop guidance for staff who interact with doctors and signpost to resources to support doctors who are unwell.	We have created two roles for staff to spend 50% of their time on the Doctor Contact Service.	Complete
Extend the support we offer to the 11% of doctors at hearings without legal representation through a resources for doctors to help them arrive at their hearing better prepared.	A new resources for doctors and website content will be produced by the end of 2018.	Ongoing
Review and update our guidance on use of interpreters and on remote engagement with tribunals.	This guidance has been published.	Complete
Review our tribunal decision data to support our work to ensure a fair process.	This will continue to form part of our work with the GMC's Data, Research and Insight team.	Ongoing

4. A service that has a distinct voice, clearly articulating our role

Explain the operational separation of the MPTS more clearly, to improve public perception of separation. Actively promote a distinctive MPTS identity and branding.	A refresh of MPTS branding is being carried out alongside the creation of a new website.	Ongoing
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<p>Actively contribute to the GMC’s wider strategic response to the changing regulatory environment.</p> <p>Actively participate in future consultation about change to the regulatory framework.</p> <p>Identify and promote improvements to the MPTS legislative framework, working with the wider GMC on opportunities for legislative change.</p>	<p>The MPTS will continue to participate in discussions about future legislative changes.</p>	<p>Ongoing</p>
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Agenda item:	9
Report title:	Adjournments quarterly update
Report by:	Samantha Bedford , Case Manager samantha.bedford@mpts-uk.org , 0161 240 7112
Considered by:	MPTS Committee
Action:	To note

Executive summary

This report:

- Summarises the key issues arising from hearings adjourning or concluding early in Quarter 2 2018;
- Identifies actions being taken forward by the MPTS Adjournments Working Group.

Recommendation

The Committee is asked to note the report.

Adjournments Quarterly Review: Q2 2018

Scope of Review

- 1 Each month the MPTS Case Manager, Head of Operations and Legal Adviser meet to identify themes and issues arising from adjourned MPT hearings, with reference to internal resources, including hearing commentary and case management documents.
- 2 The findings and recommendations are discussed at the MPTS Adjournment Working Group (**AWG**) and actions are assigned to be taken forward.

Overview of MPT Hearings Reviewed

- 3 A total of 35 MPT hearings adjourned in Q2 2018. The table below indicates the number of adjournments across the MPT hearing types.

Hearing Type	Unplanned Adjournment	Planned Adjournment*
6-Month Cases	7	2
9-Month Cases	12	4
Direct Listing	3	0
Review Hearings	6	0
Remittal Hearings	0	0
Non-Compliance Hearings	0	0
Restoration Hearings	1	0
New & Review Hearings	0	0

- 4 A total of 25 MPT hearings (across all MPT hearing types) concluded earlier than scheduled in Q2 2018. An analysis of new MPT hearings only during the same period shows that 68% hearings concluded either early or on time.

* Hearings which are scheduled to adjourn and reconvene, either through a planned split listing or due to reconvene dates.

- 5** References to “**Q2/XX**” below are identifiers for specific hearings. Anonymised identifiers have been used for the purposes of this paper as they may relate to matters which have not yet concluded.

Themes emerging from hearings concluding early

- 6** The following themes were identified from the 25 MPT hearings concluding early:
- a** 25 were LQC led
 - b** 18 hearings had hearings bundles in advance
 - c** 3 doctors were present but not represented
 - d** 4 doctors were not present or represented
 - e** Impaired fitness to practise was not found in 5 hearings
 - f** 4 doctors admitted the allegations in their entirety
 - g** 9 hearings heard from less than 3 witnesses

Themes emerging from adjourned hearings

- 7** Often adjournments can arise for reasons that are unavoidable and could not reasonably have been foreseen. For example, where a party or Tribunal member is unwell, or if a Tribunal direct the practitioner to undergo an assessment of their health, language or performance.
- 8** The following themes, which we consider to be potentially avoidable and/or foreseeable, arise from our analysis of the adjourned MPT hearings:
- a** **Tribunal deliberations and timekeeping** – There were instances where Tribunals:
 - i** Took time to complete their deliberations which appeared potentially disproportionate to the Allegation (**Q2/04, Q2/05, Q2/07, Q2/13, Q2/14, Q2/16, Q2/18**).
 - ii** Took more/longer breaks than might be expected (**Q2/04, Q2/13**).
 - iii** Would have benefitted from managing hearing time more effectively by, for example, ensuring the duration of evidence given by doctors or other witnesses remained proportionate to the allegations (**Q2/03, Q2/09, Q2/22**).

- b Tribunal case management directions** – There were examples of missed opportunities for Tribunals to be more proactive in management of adjourned hearings by issuing case management directions to parties (**Q2/09, Q2/22**). This was contrasted with examples of proactive case management by Tribunals (**Q2/12**).
- c Defence engagement with case management** – There were instances where defence representatives did not engage with case management which led to delays in hearings (**Q2/09, Q2/07**).
- d Remote engagement** – In one case, there was concern about the Tribunal’s decision to schedule sitting around the doctor’s overseas work commitments (**Q2/10**). In another case, the Tribunal adjourned to seek to hear evidence from a doctor who it earlier determined had voluntarily absented themselves (**Q2/21**).
- e Inaccurate hearing length estimates** – There were instances of hearings length estimates provided by the parties proving to be insufficient, either due to the volume of evidence and/or number of allegations in dispute (**Q2/24, Q2/25**).

Identified action points

9 The AWG identified a number of actions from the analysis of Q2 adjournments, as outlined below.

a Actions relating to Tribunal training, circulars or other guidance

- i** Reminder regarding guidance on remote engagement by doctors in MPT hearings, including feedback about a decision to adjourn to hear evidence from a doctor when a decision has been made to proceed in their absence.
- ii** Consideration to be given to whether revised guidance is required for Tribunals considering performance assessment cases.
- iii** Consideration to be given to whether a training point arises from issues regarding requesting sanction stage evidence of the impact on a doctor’s training programme.
- iv** Examples of time management and hearing control issues to be used in the annual training programme.

b Actions requiring liaison with stakeholders

- i Feedback to GMC Legal about case presentation where appropriate, including witness timetabling issues, delays in preparation of service bundles and counsel availability.
- ii Feedback to next MPTS User Group regarding accuracy of hearing length estimates and compliance with case management directions.

c Actions for consideration in the case management process

- i Consider whether further information is required from parties when seeking to reduce hearing lengths, to ensure that MPTS is reassured that parties have accurately assessed the hearing time still required.
- 10** Any actions relating to identifiable individuals have been removed from the list above in order to ensure confidentiality. Such actions may include recommendations for the Tribunal Development and Operations teams to consider when undertaking observations or reviewing Tribunal member feedback.
- 11** In addition, AWG has agreed to trial of a new detailed case review process for hearings which go exceptionally off track. This will apply to hearings requiring a high volume of additional hearing days or those with multiple reconvened sessions. We are currently developing terms of reference for such reviews, with the aim of identifying learning points which can be implemented to improve the management of future hearings.