

31 July 2015

To: Medical Defence Organisations

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Restrictions Banks

On 3 August 2015 the new restrictions banks will go live. They will be used in any hearings (new or review) that are at the sanction stage on or after 3 August 2015.

FTP Panellists and Legal Assessors have already attended training in relation to these new banks. IOP Panellists have not had specific training on these banks, but will be assisted by the following guidance documents and information when they start to use the banks.

The new versions of the FTP Conditions bank, Interim Conditions bank and Undertakings bank are available on the [MPTS Website](#):

What's changed?

Some general changes have been made, which apply across the different types of restrictions. This briefing does not cover all of the changes, but highlights the main ones. We would recommend that you spend some time reviewing the documents in their entirety to familiarise yourself with the changes made.

The look and layout of the banks

The way that the banks look is very different. Along with issues relating to the branding and presentation of the documents, the new layout is intended to be easier to use and review.

The new banks include a section for **notes for decision makers** and **notes for the doctor**. This allows us to be clearer about any instructions or recommendations that are associated with the relevant restriction. The notes for decision makers are only available on the GMC and MPTS internal webpages. These notes are not published externally.

A number of restrictions have been clarified and consolidated. As such, the overall number of restrictions (including FTP, IOP and GMC Undertakings) has reduced from 72 to 56.

The new glossary

The current glossary of terms has been updated in line with the new banks. It now sits within the banks themselves, making it easier to find the meaning of the relevant term. It also provides fuller explanations and definitions of the terms used in the banks.

An explanation of supervision

In addition to all of the above, the new glossary provides extensive detail on the differences between the three levels of supervision – supervised, closely supervised and directly supervised. In addition to setting out who the supervisor can be, how regularly they should interact with the doctor, etc., the glossary also provides a distinction between the practicalities of supervision in a primary or a secondary care setting.

The role of the responsible officer

The role of the responsible officer in relation to a doctor with restricted registration has been brought more in line with current legislative provisions. The responsible officer (or their nominated deputy) will now be responsible for approving:

- the appointment of other persons who will support the doctor. This could include a workplace reporter, clinical or educational supervisor or a mentor
- the practise restrictions that would impact on the doctor's day to day work. This would include arrangements for supervision, locum or out-of-hours work, and certain prescribing restrictions
- the doctor's personal development plan, and meeting with the doctor, as required, to discuss their achievements against the aims of their PDP.

Doctors who do not have a responsible officer

If a doctor facing conditional registration (either on a substantive or interim basis) does not have a responsible officer, the glossary explains that they may be able to nominate another person with necessary experience who has agreed to fulfil this role. However, this will be subject to the GMC approving the nominated person.

Commencing or re-commencing work

The new banks now clarify that the doctor may not start (or restart) their role until the appropriate approvals and notifications have taken place. This will include the approval required from the responsible officer (as detailed above) as well as the notification or approval as required from the GMC.

The purpose of this is to ensure that a doctor's day to day working arrangements are in compliance with the restrictions imposed on their practise.

Disclosure and exchange of information

There has been further clarification in this area. This includes the doctor:

- allowing the GMC to exchange information with any person involved in monitoring their restrictions
- sharing their restrictions and any relevant performance assessments with their responsible officer, direct line manager, workplace supervisor, clinical/educational supervisor, section 12 approval panel, contracting body, or any organisation where the doctor has, or has applied for, practising privileges or admitting rights. The exception to this is any private patients or medical insurers with whom they contract directly. In these circumstances the doctor is only required to share details of their publicly-available restrictions
- (in relation to health restrictions) sharing details of their diagnosis with any relevant treating practitioner, as well as allowing the GMC to exchange information with those practitioners.

Health restrictions

There has been clarification of a number of health restrictions including:

- a new restriction requiring the doctor to undergo a GMC Health Assessment
- expansion of the reference to Schedules 1-4 of the Misuse of Drugs Regulations 2001 (previously this was only schedules 1-3)

Health terminology

The terminology in relation to the Medical Supervisor has now been changed. In relation to confidential restrictions, this person will still be identified as the Medical Supervisor. However, published restrictions will now refer to the Medical Supervisor as the GMC Advisor.

Similarly, any references to the doctor's treating practitioners (for example, psychiatrist, GP, Occupational Health) will now be replaced by the term 'person advising the GMC'.

Restrictions of practice

A new restriction relating to provisionally registered doctors has been added. This is for use with provisionally registered doctors only, and limits them to doing FY1 training posts or locum appointed for training posts.

Conditionally registered doctors who are overseas

Guidance has been provided to doctors (within the *Notes for doctors* section of the banks) as to which restrictions are applicable whilst the doctor is overseas. This explains that restrictions that relate to alcohol and drugs are still applicable whilst the doctor is overseas. However, those restrictions that relate to practice and / or workplace restrictions are not. This reflects the jurisdiction of the GMC.

Keeping the banks up to date

Reviews of the banks will be done at scheduled times, in order to make sure that they are consistently applied.

If you have any questions or amendment suggestions, please contact PanelDevelopmentTeam@mpts-uk.org