

## MPTS User Group meeting – Tuesday 9 September 2025

### Actions/Minutes

Due to Microsoft Teams issue we are unable to provide a list of attendees for this meeting. Our apologies

	Minutes	Action
1.	<p><b>Introductions and chair’s welcome</b></p> <p>The MPTS Executive Manager, Gavin Brown, welcomed attendees to the meeting and gave a brief introduction. This included sharing apologies from the MPTS Interim Chair, Gill Edelman, who would normally chair this meeting</p>	
2.	<p><b>Approval of Tuesday 11 March 2025 meeting minutes</b></p> <p>Minutes from 10 September 2024 meeting were previously circulated to attendees and approved at this meeting.</p>	
3.	<p><b>Executive Manager update including appointment of Head of Case Management &amp; Hearing Preparation</b></p> <p>Since the last User Group, we have continued to run in-person, virtual and hybrid hearings.</p> <p>We have also heard our first interim hearing under the AA / PA legislation.</p>	

	<p>One of the most important aspects of our planning is how many hearing days we anticipate holding.</p> <p>In our planning, we considered 9 scenarios utilising two parameters - the number of referrals from the GMC we receive per month and the average length of our hearings.</p> <p>Our view, which is being borne out, is that the reduction in referrals has been weighted towards the simpler cases - leaving those that are more complicated and time-consuming.</p> <p>To the beginning of September, we have held 1,299 hearing days. As we planned for, this is 20% less than at this point in 2024 and 36% less than in September 2023.</p> <p>At the beginning of September 2025, the MPTS's total hearing workload was 185. This has held broadly static during 2025. We are currently able to offer a listing date between 7 and 9 months of a GMC referral depending on the length of hearing required.</p> <p>Colleagues in the Fitness to Practise Directorate are currently assessing an increased number of concerns. We are monitoring whether this increase in concerns will result in an increased number of referrals to the MPTS.</p> <p>In staffing news, following an external recruitment campaign, I am delighted to announce that Margaret Barry has been appointed as the MPTS's Head of Case Management &amp; Hearing Preparation.</p> <p>Many of you will already know Margaret as one of the MPTS's Case Managers. I am sure you will join me in wishing Margaret well in her new role.</p>	
<p><b>4.</b></p>	<p><b>Operational updates including transcripts, IOT bundles and the privacy project</b></p> <p><b>Transcripts</b> Colin Barker, Head of Communications and Corporate Affairs:</p>	

We want to reiterate what we sent out in July about requests for transcripts during a hearing. This can be prohibitively expensive, and we want to use our limited resources, and by extension doctors' ARF money, as efficiently as possible.

So we'll only be providing transcripts during an ongoing hearing if it has been adjourned part-heard during factual evidence, not later. Or if it involves a reasonable adjustment under the Equality Act, or in the case of a tribunal member substitution.

Other than that, we'll only provide transcripts at the end of a hearing.

Reminder of July email text:

*Dear all,*

*We have updated our policy on providing transcripts during hearings. We would be grateful if you could pass this note on to any colleagues who may need to be aware.*

*Providing verbatim transcripts while a hearing is ongoing is particularly expensive – usually between £1500 and £1800 per day. It is important we use the MPTS's resources as efficiently as possible.*

*From Monday 14 July, we will only produce transcripts during a hearing in the following circumstances:*

- ***Parties request transcripts** because a hearing has gone part-heard during factual evidence, and parties provide a persuasive argument that a transcript is required*
- ***Parties request transcripts** because of a reasonable adjustment (as defined by the [Equality Act 2010](#)), and parties provide supporting evidence*
- ***Tribunal requests transcripts** where there has been substitution of a tribunal member*

*When a transcript is provided, we will ensure that both the parties and the tribunal receive a copy as a matter of course.*

*This does not change our policy on providing transcripts after a hearing has concluded. The [Publication & Disclosure Policy](#) clarifies the Fitness to Practise Rules and states that transcripts are provided to parties 'free of charge, at the end of a hearing.'*

*For any hearings that are currently on-going, if we have already agreed to provide transcripts we will continue to do so.*

*I hope this is helpful, but if you have any questions, please do get in touch.*

### **IOT bundles**

Tamarind Ashcroft, Head of Operations and Development:

There have been a few occasions lately where IOT addenda have only been sent on the day of the hearing.

We're trying to list IOTs a little more proactively and this means there may be less margin for delays.

Receiving addenda and materials late does mean we're in danger of not allowing necessary time, so we do need to get all the material beforehand if at all possible

### **Privacy Project**

Gavin Brown: This was a collaborative project between GMC Legal and various teams within the MPTS designed to improve the approach to the consideration of privacy and anonymity throughout the fitness to practise process.

The starting point remains that MPT hearings – except those that relating solely to allegations of adverse health - should be held in public and therefore, witnesses, give their evidence in public.

However the project team sought to increase awareness of what happens at each stage of the FTP process from pre to post hearing, and to deliver changes that provide clear and consistent operational processes, responsibilities and guidance at each stage

	<p>leading to a consistent and proportionate approach to anonymisation and privacy issues throughout the life of a case or a witness' experience during a case.</p> <p>There have not been changes in policy or policy guidance, but a circular was issued earlier today with various reminders and clarifications in relation to anonymity and privacy for all users. We will also be covering this at annual training in the next few months.</p> <p><a href="#">You can read the circular on our website.</a></p>	
<p><b>5.</b></p>	<p><b>Guidance for tribunal members</b></p> <p>Tamarind Ashcroft: Thanks to all who sent feedback during our consultation. We're now in the process of building the content on our website. Some key dates:</p> <ul style="list-style-type: none"> <li>▶ <i>Guidance for MPTS Tribunals</i> will go live on our website on Tuesday 30 September – it will then come into effect on 24 November</li> <li>▶ At same time we'll be preparing the version for PAs and AAs – it won't require a separate consultation and will also come into effect on 24 November. We don't yet have any hearings scheduled for these professions</li> <li>▶ Tribunals will continue to use the previous sanctions guidance until then. Any part-heard hearings will continue to refer to the old guidance. So the new guidance will only apply to new tribunals from 24 November.</li> </ul> <p>We are publishing electronically – almost everyone prefers this format nowadays, and uses devices and laptops/tablets in hearings. So the content will be published as web pages and will include internal and external links, for example to <i>Good medical practice</i>. There'll be a side pane to aid navigation, footnotes will all be on the same page as the reference.</p> <p>We plan for it to be in an accessible format which can be cut and pasted as easily as any other website</p>	

	<p>The next steps will be to address areas not yet incorporated in this guidance, such as review and restoration hearings etc. We'll be looking to add this in 2026. We won't be holding another consultation but will update stakeholders and the User Group.</p> <p>We'd also like some practical feedback over time from those who use the guidance regularly in their work on its layout, accessibility, practicality, user experience etc. We'll build in some review points to take on board practical suggestions for any tweaks and improvements – probably every 4 months.</p> <p>For now, you can send any feedback or suggested improvements to <a href="mailto:enquiries@mpts-uk.org">enquiries@mpts-uk.org</a></p>	
6.	<p><b>Case management</b></p> <p><b>Case management</b></p> <p>Margaret Barry, Head of Case Management &amp; Hearing Preparation:</p> <p><b>Listings update:</b></p> <p>We're currently listing cases from 26 April 2026 at the moment, if any preliminary hearings are needed before the end of year then please let us know.</p> <p>Listing R forms are now required and we're grateful for everyone's co-operation. All pre-hearing forms are available <a href="#">here</a> Forms for AA and PA hearings will be published by the end of the year.</p> <p>We continue to carry out monthly bundle audits.</p> <p>We do understand the hearings we get are increasingly the more complex cases, but we do ask all parties that liaise together at an earlier stage to allow Case Management directions to be met in a timely manner. Quarter 1 showed that of 75 bundles considered 25 were late and of those 25 80% of cases were fully represented. In Quarter 2 of the 65 bundles audited 18 were late, with 56% of the 18 being on fully represented cases.</p> <p>Tribunal members are working professionals and we have agreed</p>	

	<p>with them that they will receive bundles in advance to allow them time to read. Timeliness is also important because we've had cases where members are getting bundles where they may then identify a conflict of interest – so the earlier they can see the materials, the better, to potentially allow for replacements or substitutions. There is also the risk that if the bundles are not provided in good time hearing time will be required for reading which could disrupt witness scheduling.</p> <p>However, we also have seen many cases recently where there has been good collaboration and communication between the parties at an early stage, so thanks for that.</p> <p><b>Christmas update</b> There won't be any hearings between 22 December 2025 and 5 January 2026.</p>	
<p><b>7.</b></p>	<p><b>Regulatory reform</b></p> <p>Gavin Brown: We were prepared to hold an interim measures tribunal (IMT) hearing from the first day of PA and AA regulation, including ensuring all supporting guidance, documents and training were delivered on time, as well as updating our website to reflect our additional role.</p> <p>To date one IMT hearing has been held.</p> <p>In 2025, we have been working in our MPTS workstreams and with GMC colleagues to ensure we are ready for any future substantive associate tribunal (AT) hearings. To date no AT referrals have been received.</p> <p>Our remaining implementation work is being carried out on a phased basis, in conjunction with changes being made to Siebel to modernise hearing records and to support the delivery of IMT and AT hearings. Lessons learned in each stage are being applied to the following stages.</p> <p>At present colleagues are delivering phases focused on our case management, hearing preparation and notices, and new and</p>	

review hearings workstreams. These require the review, amendment and/or creation of more than 550 documents to support our processes.

In addition, we have played an active role in preparatory work regarding the new GMC Order.

We have worked closely with FTP Policy to develop options for transitional arrangements and collaborated with colleagues across the regulatory reform programme to evaluate approaches to commencement.

We have also contributed to reviewing drafting from DHSC and participated in the working group on appeals and revisions.

One of the areas we are working on is the possible renaming of the MPTS

Colin Barker: We've been having this discussion internally and with the GMC – The DHSC have asked us to give them a recommendation

The GMC is now a multiprofessional regulator.

As the MPTS is explicitly named on the Medical Act, the intention is we'll also be named in the new Order.

We've been considering principles around a potential renaming and rebranding such as future proofing, clarity, listening to what people are saying, and the legal context, and came up with five options:

- ▶ Medical Practitioners Tribunal Service
- ▶ Medical Professions Tribunal Service
- ▶ Medical Tribunal Service
- ▶ Doctors and Physician Associates (Assistants) Tribunal Service
- ▶ Office of Independent Health Tribunals

Our preferred option is **Medical Tribunal Service**. This is consistent with the name of the General Medical Council

	<p>We've been asked to make a recommendation to DHSC by October. They'll then consult on the proposal and we'll update User Group members</p>	
<p><b>8.</b></p>	<p><b>Matters raised by User Group members</b></p> <p>Sara Foster of MDDUS raised two issues on behalf of colleagues:</p> <p><b>Listing of multiple IOTs at the same time with the same Tribunal and GMC counsel</b></p> <p>We've noticed IOTs being listed at same time with the same GMC counsel, but only one case actually starts at 9.30am.</p> <p>Tamarind Ashcroft:</p> <p>We have previously listed all cases at start of the day and in that process, they might not be on until 4pm. We moved to a 'not before time' with morning/afternoon sessions, in common with many courts.</p> <p>We of course understand registrants' concerns but we also really do need to make sure we're making the best use of time and maximising our resources</p> <p>Sara Foster:</p> <p>Can we ask that communication on the day are timely?</p> <p>Tamarind Ashcroft: Yes, we will take that on, if doctors are waiting for some time for their case to be heard then I accept we should be better at updating them</p> <p><b>Sending of IOT outcome letters twice, even if they have been acknowledged</b></p> <p>Sara Foster: At the end of an IOT hearing, the doctor gets a confirmation email and then again the next day. It can add to the stress to see a new MPTS email so soon.</p> <p>Tamarind Ashcroft: Happy for us to discuss this further this offline</p> <p><b>Simon Kernyckyj of Weightmans raised the issue of flexibility on dates around IOTs if need an extra day or two</b></p>	

	<p>Tamarind Ashcroft: It's always a balancing act. The GMC case will be urgent, and our service level agreement is that an IOT needs to be listed within three weeks from referral, and not usually seven days or fewer in advance. But potentially those discussions can be had</p> <p>Lisa Jones: I always thought if you wanted to move date of an IOT, you always had to make an application and fill out a form with reasons, evidence why etc, and would be considered by case manager</p> <p>Tamarind Ashcroft: I think it's a matter of degree, there are certain circumstances when we can be less formal than that, if it's just a day or two and with the agreement of both parties – there could be some flexibility. But we are seeing more IOT referrals coming through the system so must be mindful of resources.</p> <p>Margaret Barry: We do see cases where parties have a discussion, but anything other than one-day delay (if that date change can be accommodated by the MPTS) then we'd expect a formal postponement application.</p>	
<p><b>9.</b></p>	<p><b>Any other business</b></p> <p>Sara Foster MDDUS raised an issue of hearing disability assistance, after one of their members experienced audio problems during a tribunal</p> <p>Tamarind Ashcroft: Our audio loop system wasn't compatible with that particular doctor's device. But work was done and lessons learned.</p>	
<p><b>10.</b></p>	<p><b>Date and time of next meeting</b></p> <p>Tuesday 10 March 2026, 5pm</p>	