MPTS Committee

Meeting:
4 February 2020
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35
MPTS Committee meeting

4 February 2020
10:00-13:00, room 7D
St James’s Buildings, Oxford Road
Manchester, M1 6FQ

Agenda

1  Welcome and apologies for absence
2  Declaration of interests
3  Minutes of the previous meeting held 20 November 2019
4  Chair’s report (oral)
5  Executive Manager’s report including performance data and MPTS risk register
6  Adjournments quarterly update (f)

   Break for tea / coffee

7  Quality Assurance Group 2019 overview (f, g)
8  Training update 2019 (b, c)
9  Delivery of the 2019 MPTS business plan and confirmation of the 2020 MPTS business plan (n)
10  Any other business
   ▶ Discuss item from risk register for deep dive at May meeting
11  Date and time of next meeting: Tuesday 12 May 2020, 10:00 – 13:00
Welcome and apologies for absence (agenda item 1)
1. The Chair welcomed members of the Committee and attendees to the meeting.
2. There were apologies for absence from Patricia Moultrie.

Declaration of interests (agenda item 2)
3. None.
Minutes of the previous meeting (agenda item 3)

4 The MPTS Committee reviewed and approved the minutes of the previous meeting held on 10 September 2019.

5 It was agreed to amend paragraph 31 to specify ‘…4 days of induction training…’

6 The Chair provided an update on the actions from the previous meeting and the Committee noted that:

   a Action 1: Research is scheduled for publication in BMC before the end of 2019. A press release will be made once the research has been published. A link to the journal and press release is to be circulated to members after publication. Ongoing.

   b Action 2: A section on selection criteria has been added to the QAG update paper at agenda item 7. Closed.

   c Action 3: Dates for 2019 training days were circulated to members. Closed.

   d Action 4: A link to the PSA research on sexual misconduct cases has been circulated to Committee members. Closed.

Chair’s report (agenda item 4)

The Chair provided an update on key activities and business since the last MPTS Committee meeting.

Sanctions guidance review

7 The Chair updated the Committee on the progress of the review of the Sanctions guidance.

8 The working group had met regularly, including an all-day meeting in London when they looked at the guidance as a whole and ran some exercises to see how it will work.

9 An initial draft has been circulated to staff and a series of workshops arranged to receive staff views. A final draft will then be circulated to Committee members and Tribunal members for feedback before a public consultation in 2020. The Chair reassured members a letter had been written to Tribunal members updating them on the process and explaining that the current version was an initial first draft and not yet suitable for their review.

10 The Chair outlined the governance process including that approval of the version to go out for public consultation will be needed from GMC Council.

Training

11 The 2019 annual training cycle for Tribunal members is now complete. The Chair had attended eight training days. The two lay members had attended a session and the Chair thanked them for making themselves available to do so. The Committee members shared their positive experiences of the training sessions.
12 2020 training dates to be circulated to members.

Appeals circulars
13 Since the last Committee meeting four appeals circulars have been sent out to Tribunal members informing them about matters arising from appeals of decisions made by the MPTS and other regulators. All circulars are reviewed and approved by the Chair before circulation.

Quality Assurance Group (QAG)
14 There have been two meetings of QAG since the last Committee meeting. The Group have found the determinations reviewed to be of a good quality.

15 The GMC has lodged three appeals; none have been heard yet. In some of the appeals by doctors that have been heard, the judgments have contained positive comments about Tribunals’ reasoning.

16 The Committee suggested circulating the positive feedback to Tribunal members.

User Group
17 The Chair had attended the MPTS User Group meeting, reporting that it was a useful meeting with a positive atmosphere.

Meetings with GMC staff
18 The Chair had attended one-to-one meetings with the GMC Chief Executive, Director of Fitness to Practise, Head of Equality and Diversity, and Freedom to Speak Up Guardian.

Informal meetings
19 The Chair had hosted a number of afternoon teas with staff and joined Tribunal members for lunch on several occasions. The Chair reported that these events are a valuable source of information and feedback.

External engagement
20 The Chair had spoken at the first meeting of the GMC Equality, Diversity and Inclusion Advisory Forum. Doctors from 18 minority interest groups attended the meeting. As a result of attending the meeting, the Chair was asked to speak at the British Association of Physicians of Indian Origin (BAPIO) conference.

Executive Manager’s report including performance data and MPTS risk register (agenda item 5)
21 The Executive Manager provided an update on the operational performance of the MPTS and summarised the key points from the report.
Risk Register

22 The MPTS Committee reviewed the MPTS risk register and noted that it was reviewed on a monthly basis by the MPTS senior management team and bi-monthly at the Policy Forum.

23 The Risk Register has remained unchanged since the last Committee meeting.

24 The Committee clarified that data breaches referred to in risk 9 did not relate to Tribunal members and it was confirmed Tribunal members are responsible for their data security.

25 The Committee suggested that the MPTS consider having an associates risk.

Business plan and budget 2020

26 The Committee noted that the budget and business plan are subject to the approval of GMC Council at their meeting in December.

Report of the MPTS Committee (agenda item 6)

27 The Head of Communication and Corporate Affairs presented the Report of the MPTS Committee.

28 The report, which will be presented to Council by Dame Caroline Swift at the December 2019 Council meeting, provided an update on the work of the MPTS since the last report to Council in June 2019.

29 The MPTS Committee noted that:

   a The report followed a similar format to previous reports.

   b A section on referrals has been added to highlight the rising trend in referrals, and what the MPTS is doing in response.

30 The MPTS Committee made a few minor suggestions to the report for the MPTS to consider.

Quality Assurance Group update (agenda item 7)

31 The Executive Manager presented the update.

32 The paper provided an overview of the QAG meetings held in quarters 2 & 3 of 2019 and highlighted emerging themes.

33 The Committee noted that the QAG update will be moved to February and September’s Committee meetings to make reporting timeframes consistent.
Adjournments quarterly update (agenda item 8)

34 The Head of Case Management presented the quarterly update on adjournments.

35 The paper summarised the key issues arising from hearings adjourning in Quarter 3 2019.

36 It was agreed that detailed adjournment reviews would be shared with the MPTS Committee at their meeting in February.

37 The Committee suggested looking more closely at complex hearings which run smoothly to see if lessons can be learnt.

Report of the MPTS Committee’s work programme for 2020 (agenda item 9)

38 The MPTS Committee reviewed its forward work programme for 2020.

39 During the discussion the Committee suggested there would be benefit in taking deep dives into items on the MPTS Risk Register. It was agreed that the Committee would select an item for a deep dive at the February meeting and then it would be undertaken at the May meeting. This process would be repeated between September to November’s meetings.

40 The MPTS Committee approved the Committee’s work programme for 2020

Any other business (agenda item 12)

41 There was no other business.

Publication of MPTS Committee papers

42 The Committee noted that the following papers would be withheld from publication:

a MPTS Risk Register at Annex B of the Executive Manager’s report would be withheld from publication. This is in line with corporate policy on risk registers.

b The Report of the MPTS Committee would be withheld from publication until it has been to the GMC Council meeting in December 2019.

Date and time of next meeting (agenda item 13)

43 The committee noted the date and time of the next meeting: Tuesday 4 February 2020, 10:00 – 13:00.
Confirmed:

Dame Caroline Swift, Chair

4 February 2020
MPTS Committee meeting – 20 November 2019

Action sheet

<table>
<thead>
<tr>
<th>Meeting date</th>
<th>Agenda item</th>
<th>Ref</th>
<th>Action required</th>
<th>Deadline</th>
<th>Owner</th>
<th>Updates</th>
</tr>
</thead>
<tbody>
<tr>
<td>8 May 2019</td>
<td>3</td>
<td>6a</td>
<td>The research commissioned to provide analysis of MPTS outcome data will be submitted to the Committee after the research has been peer reviewed.</td>
<td>TBC</td>
<td>G Brown</td>
<td>Research has now been published and a link shared with the Committee. Complete</td>
</tr>
<tr>
<td>20 November 2019</td>
<td>4</td>
<td>12</td>
<td>2020 Tribunal member training dates to be circulated to members.</td>
<td>4 February 2020</td>
<td>C Barker</td>
<td>Committee members notified of 2020 training dates with Feb Committee papers. Complete</td>
</tr>
<tr>
<td>20 November 2019</td>
<td>4</td>
<td>16</td>
<td>MPTS to consider circulating positive feedback from appeals hearings to Tribunal members</td>
<td>4 February 2020</td>
<td>T Ashcroft</td>
<td>Cases with positive outcomes now being shared by circular. Complete</td>
</tr>
<tr>
<td>20 November 2019</td>
<td>5</td>
<td>25</td>
<td>MPTS to consider having an associates risk on the MPTS risk register.</td>
<td>4 February 2020</td>
<td>G Brown</td>
<td>Discussions are in progress with GMC colleagues. Ongoing</td>
</tr>
<tr>
<td>20 November 2019</td>
<td>8</td>
<td>36</td>
<td>Addition of detailed adjournment reviews to Adjournment Quarterly Update for February 2020 paper.</td>
<td>4 February 2020</td>
<td>S Bedford</td>
<td>To be included in a future report. Ongoing.</td>
</tr>
<tr>
<td>Date</td>
<td>Page</td>
<td>Item</td>
<td>Summary</td>
<td>Date</td>
<td>Author</td>
<td>Status</td>
</tr>
<tr>
<td>--------------------</td>
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<td>---------</td>
<td>--------------</td>
</tr>
<tr>
<td>20 November 2019</td>
<td>8</td>
<td>37</td>
<td>MPTS to consider looking at lessons learnt from complex hearings which run well.</td>
<td>4 February 2020</td>
<td>S Bedford</td>
<td>Following discussion, we have agreed to include identifying learning and good practice from complex hearings that run well as part of the Case Management team's monthly meetings. Lessons will be shared with other teams where relevant. Complete</td>
</tr>
<tr>
<td>20 November 2019</td>
<td>9</td>
<td>39</td>
<td>Discussion on which Risk Register item to undertake a deep dive on, to be added to February 2020 agenda.</td>
<td>4 February 2020</td>
<td>G Brown</td>
<td>Complete</td>
</tr>
</tbody>
</table>
Executive summary

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

- It includes updates on hearing referrals, commencement, length and outcomes, GMC peer-reviewed research, appeals, risk and the MPTS budget for 2020.

- Annex A is the MPTS risk register.

Recommendation

- The Committee is asked to consider the report, along with the annex.
Referrals

1 Referrals to MPTs in 2019 have risen 23% in comparison to 2018, with the biggest increase occurring in quarter 4 (+40%).

![Comparison of quarterly referral figures 2018 - 2019]

2 As highlighted in previous updates to the Committee, our Case Management section has been working jointly with colleagues in Operations to even out the monthly hearings workload. The aim of this work is to reduce workload pressures and support staff wellbeing whilst improving our effectiveness and efficiency.

3 In 2018 the maximum deviation from the average monthly workload was 23%, in 2019 this has been reduced to just 11%.

![Hearing Room Utilisation in Q3 & Q4 per year]
Hearing length

For MPTs average hearing lengths are as follows:

<table>
<thead>
<tr>
<th>Type</th>
<th>2018</th>
<th>2019 (to end November)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial Hearing</td>
<td>5.76</td>
<td>6.01</td>
</tr>
<tr>
<td>Reconvened Hearing</td>
<td>3.53</td>
<td>3.27</td>
</tr>
<tr>
<td>Proportion of Hearings which are Reconvened</td>
<td>30.9%</td>
<td>25.3%</td>
</tr>
<tr>
<td>Total Hearing</td>
<td>6.86</td>
<td>6.84</td>
</tr>
</tbody>
</table>

These figures show that there has been a slight increase in the length of initial hearing in 2019, but there was fewer reconvened hearings and therefore overall length of hearing is consistent between 2018 and 2019.

Attendance and representation

In 2019 75% of doctors attended their new MPT hearing. Since 2016 doctors attending new MPT hearings with representation has increased by 17% and the number not attending has reduced by 11%.

Hearing outcomes

IOT outcomes remained consistent with historical trends, with a percentage order split of: 15% Suspension, 63% conditions and 23% no order made.
Erasure and suspension combined outcomes remained consistent with historical MPT trends, equalling an average of 68% of total outcomes. However, the percentage split has altered with suspension increasing by 6% in comparison to 2018. 2019 has also seen a 3% increase in no impairment (including warning) outcomes.

GMC peer-reviewed research

In November 2019 GMC peer-reviewed research, into the regulatory process of all 1,049 doctors referred to the MPTS between June 2012 and December 2016 and who received a hearing outcome by May 2017, was published in the journal BMC Medicine.

The link to the BMC Medicine article was sent to MPTS Committee members on the 29 November 2019.
The cross-sectional study concluded that there is no ‘consistent’ association between a doctor’s characteristics, such as age, race, sex, domestic/international primary medical qualification (PMQ), and the seriousness of their MPTS decision.

However, the outcome of MPTS decisions was ‘consistently’ linked to doctors’ engagement during hearings, with those who failed to attend or did not have legal representation tending to receive more serious outcomes.

The study found that the relationship between age or location of PMQ and the seriousness of the MPTS outcome disappeared once the factor of attendance was included.

Researchers therefore concluded that ‘All else equal, personal characteristics [age, race, and sex] or first qualification place [UK, the rest of the EEA, or the rest of the world] were unrelated to the seriousness of regulatory outcomes in the UK. Instead, engagement (attendance and legal representation), allegation type, and referral source were importantly associated to outcomes.’

Prior to the publication of the research we were already particularly aware of the need to give support to those doctors who attend our hearings without legal representation. Most doctors are represented before our Tribunals by lawyers, often instructed by one of the medical defence organisations, sometimes by specialist firms of solicitors. However, in 2019, around 11% of doctors attended a new MPT hearing without legal representation.

As we have discussed previously with the Committee, the MPTS are doing what we can to help self-represented doctors.

In most cases, the MPTS will hold a pre-hearing case management meeting with both parties. Where a doctor is unrepresented, our case managers can take the opportunity to inform them about the steps they need to take to prepare for their case and to answer any questions they may have about the procedure.

We provide a great deal of information online that will help a doctor prepare for a hearing and present their evidence in the best way. Our Resource for doctors is available on our website and explains each stage of the hearing process in plain, non-legal language.

Our website also contains information about other useful resources available to doctors, e.g. the BMA Doctor Support Service and a telephone information
system run by a local Law School (they have also recently piloted an in-hearing note-taking service).

20 Our Doctor Contact Service is available to all doctors on the day of a hearing. A member of our staff unconnected to the doctor’s case can be available to talk at any time. Feedback suggests doctors find the service very useful and it has recently been extended.

21 Some doctors do not attend the hearing or contribute at all. In 2019, 19% of doctors did not attend their new MPT hearing and were not represented. In some cases, those doctors had ceased to engage with the GMC during the investigation process and, in others, they ceased after referral to the MPTS. There can be many reasons for their non-attendance.

22 When a doctor does not attend, our tribunals always consider carefully the reasons for their absence before deciding whether it is fair to proceed with their hearing. Usually, in a case where the doctor has voluntarily absented themselves without good reason, the tribunal will decide that it is in the public interest to continue with the hearing.

23 A failure to take any part at all in the hearing will inevitably deprive the doctor of the opportunity of giving their version of the case, of questioning witnesses and of establishing the insight and remediation that is often key to a favourable outcome.

24 We are doing what we can to encourage doctors who find themselves in the fitness to practise process to engage with it. However, we cannot do this alone and we have been enlisting the help of representative organisations, such as those who attend the GMC’s BME doctors’ and ED&I strategic forums, to highlight the importance of engaging. We are also having an ongoing dialogue with the GMC concerning engagement.

Appeals

25 Since the last update to the MPTS Committee on 20 November 2019, additional learning points arising from judgments given in appeals / challenges to Tribunal decisions from 1 November 2019 to 31 December 2019, include the following:

a. An appellate court will not interfere with a Tribunal’s finding of sexually motivated conduct, unless that finding was wholly contrary to the weight of the evidence or there was some fault in the decision-making process which rendered it unsafe.
b. In cases where a witness has made unrelated historic allegations of sexual offences and that witness’ credibility is at the heart of a practitioner’s defence, Tribunals need to try to determine the truth of those allegations. Only then can they consider whether the witness has a propensity for making false allegations.

Risk

26 There has been no change to the MPTS risk register (see Annex A).

27 We are discussing the suggestion of an associates risk (as raised at the MPTS Committee meeting on the 20 November 2019) with colleagues across the GMC.

28 There are currently no risks relating to the work of the MPTS on the GMC Corporate Opportunities and Risk Register.

Budget for 2020

29 At its meeting on the 20 November 2020 the Committee were updated on the proposed MPTS budget for 2020.

30 The majority of MPTS costs are directly related to hearing volumes and we have seen a significant and sustained increase in referrals since September 2018. The impact of this is an increase in predicted hearing volumes of 7.7% in 2020 compared to the 2019 budget.

31 The draft 2020 budget, as well as detailing an increase in the tribunal member fees and associated expenses, included a growth bid for additional operational staff to help deliver the associated increase in pre, during and post hearing work.

32 It also proposed a new approach to the recruitment and induction of tribunal clerks. When a tribunal clerk leaves the MPTS, it takes between four and six months to train a replacement. Therefore, we included a growth bid for the over-recruitment of tribunal clerks.

33 The 2020 draft budget also included a 2% efficiency target. This equates to £182k for the MPTS.

34 The above resulted in a total MPTS draft budget for 2020 of £9.3m, an increase of 6.5% compared to the 2019 budget.
The MPTS draft budget for 2020 was approved by GMC Council on the 12 December 2019.
MPTS Committee meeting, 4 February 2020

Agenda item 06 – Adjournments Quarterly Update

Agenda item: 6
Report title: Adjournments Quarterly Update
Report by: Samantha Bedford, Head of Case Management, 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 in Quarter 4 2019;
▶ Identifies actions to be taken forward by the MPTS Senior Management Team.

Recommendation

▶ The Committee is asked to note the update.
Adjournments Quarterly Review: Q4 2019

Scope of Review

1. Each month the Head of Case Management, Head of Operations, Case Manager 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 Senior Management Team (SMT) meeting and actions are assigned to be taken forward.

Overview of MPT Hearings Reviewed

3. A total of 29 MPT hearings (across all MPT hearing types) concluded earlier than scheduled in Q4 2019. An analysis of new MPT hearings only during the same period shows that 68% of hearings concluded either early or on time.

4. A total of 35* MPT hearings adjourned in Q4 2019. The table below indicates the number of adjournments across the MPT hearing types.

<table>
<thead>
<tr>
<th>Hearing Type</th>
<th>Unplanned Adjournment</th>
<th>Planned Adjournment†</th>
</tr>
</thead>
<tbody>
<tr>
<td>6-Month Cases</td>
<td>10</td>
<td>6</td>
</tr>
<tr>
<td>9-Month Cases</td>
<td>10</td>
<td>2</td>
</tr>
<tr>
<td>Direct Listing</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Review Hearings</td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td>Remittal Hearings</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Non-Compliance Hearings</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Restoration Hearings</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>New &amp; Review Hearings</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Preliminary Hearings</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

5. References “Q4/XX” are used below as 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.

* The figures shown in the table total 38 as two hearings adjourned multiple times during Q4.
† Hearings which are scheduled to adjourn and reconvene, either through a planned split listing or due to reconvene dates.
Themes emerging from adjourned hearings

6 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.

7 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 took time to complete their deliberations which appeared potentially disproportionate to the issue(s) under consideration (Q4/14, Q4/24, Q4/33), or where hearing time could have been managed more effectively (Q4/01, Q4/04, Q4/05, Q4/11, Q4/14, Q4/17, Q4/20, Q4/21, Q4/26, Q4/22, Q4/28, Q4/32).

b Inaccurate hearing length estimates – There were instances of hearing length estimates provided by the parties proving to be insufficient, either due to the volume of evidence, number of allegations in dispute and/or preliminary issues (Q4/08, Q4/19, Q4/31).

c Delays potentially caused by GMC case preparation – There were instances where avoidable delays appear to have been caused by issues relating to preparation or presentation of evidence (Q4/07, Q4/22, Q4/30).

d Delays potentially caused by doctor/defence case preparation – There were instances where doctor/defence preparation was incomplete or delayed progress during the hearing (Q4/17, Q4/25, Q4/33, Q4/34).

e Delays caused by witness availability – There were instances where the Tribunal lost time due to witnesses being unavailable when the Tribunal were ready to hear from them (Q4/08, Q4/09, Q4/11, Q4/14, Q4/17, Q4/19, Q4/21, Q4/31).

Identified action points

8 The review identified a number of actions from the analysis of Q4 adjournments, as outlined below.

a Actions relating to Tribunal training, circulars or other guidance.

i Further examples identified for inclusion in an e-learning module for Tribunal directed assessments which are different to the alleged head of impairment.
Consider providing Tribunals with insight into how hearing management impacts third parties.

**Actions requiring liaison with stakeholders.**

- Feedback to GMC Legal about case presentation where appropriate.
- Continue dialogue with MPTS User Group regarding witness availability, compliance with case management directions, reviewing hearing lengths and being prepared to proceed promptly in reconvening hearings.

**Actions relating to MPTS.**

- Consider referral of specific hearings to Adjournments Detailed Review process, upon conclusion, to identify the reasons why the hearings took substantially longer than anticipated and any learning points which arise.
- Review the issues raised regarding Notices of Hearing, including form of notice for non-compliance hearings and the opportunity to provide further information about hearing start times.

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.

**Update on other actions taken**

The previous quarter’s report indicated that in this quarter the Committee would be invited to consider recommendations and learning points from any Adjournments Detailed Reviews (ADRs) carried out by the MPTS Operations team. The MPTS SMT recommends that this is deferred until later in 2020, to allow further time for the implementation of the ADR process, so that the Committee can take an informed view on the value of ADRs. As such, this quarterly report does not include analysis of the ADRs completed or in progress, but this information will be included in a future report.
Agenda item: 7
Report title: Quality Assurance Group 2019 overview
Report by: Tamarind Ashcroft, Head of Tribunal Development
tamarind.ashcroft@mpts-uk.org, 0161 240 7291
Considered by: MPTS Committee
Action: To note

Executive summary
This paper details an overview of the Quality Assurance Group (QAG) meetings held during 2019, summarising the themes identified.

Recommendation
- The MPTS Committee is asked to note the outputs of the relevant QAG meetings.
Volumes

1. During 2019 there were a total of 1908 MPTS hearings started including Medical Practitioners (MPT), Interim Orders (IOT) and Non-compliance hearings (NCH). Of these, 363 were selected for QAG review. It is important to note that the QAG only reviews decisions once the appeal period has passed. Any learning points from appeals are considered at a later stage.

MPT Decisions

2. The QAG reviewed 27% of MPT decisions (included within this number are restoration hearings).

<table>
<thead>
<tr>
<th>Number of hearings</th>
<th>MPT (New- (N))</th>
<th>MPT (Review- (R))</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>392</td>
<td>165</td>
<td>557</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cases selected for QAG</th>
<th>MPT (N)</th>
<th>MPT (R)</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>108</td>
<td>44</td>
<td>152</td>
</tr>
</tbody>
</table>

3. Overall a good standard of decision drafting has been observed with the number of learning points identified remaining low.

4. Learning points include ensuring that legal advice is clear and accurate and clarifying the approach to directing and hearing reviews.

5. A number of positive learning points were also observed, and those cases receiving affirmation in subsequent judgments following appeal, will be shared with tribunal members.

IOT Decisions

6. The QAG reviewed 15% of both new and review IOT decisions, with 25% of new IOT decisions being reviewed.

<table>
<thead>
<tr>
<th>Number of hearings</th>
<th>IOT (N)</th>
<th>IOT (R)</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>372</td>
<td>946</td>
<td>1318</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cases selected for QAG</th>
<th>IOT (N)</th>
<th>IOT (R)</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>93</td>
<td>99</td>
<td>192</td>
</tr>
</tbody>
</table>
7 IOT determinations continue to be of a high standard and no new learning points were identified during this period. We will continue to focus on ensuring clear reasoning in determinations as a routine area for continuous development.

Non-compliance hearings
8 19 of the 23 non-compliance hearings were reviewed in 2019, no significant learning points were identified.

Feedback
9 Appeals data is covered in the litigation update separately, covering the appeals lodged by the PSA and GMC. Appeals generally, but in particular the rationale leading the PSA and GMC to appeal, are considered carefully by the QAG to identify any learning points from judgments or pending judgments.

10 We continue to receive feedback from the GMC and PSA for those cases that do not meet their respective thresholds for appealing. All feedback is reviewed and relevant learning identified.

Terms of Reference
11 The Committee is asked to note that the Terms of Reference for the Quality Assurance Group will be reviewed in 2020.
Executive summary

This paper summarises the tribunal member training delivered in 2019 and details future activity.

Induction training was completed for those associates appointed during 2019, this was largely delivered as joint training for medical tribunal members and legally qualified chairs.

Video and webinars were delivered as optional training during Q3 focussing on how to approach adjournments.

Interim orders tribunal member training was delivered in Q2 and medical practitioners tribunal member training delivered in Q3 and 4. Legally qualified chairs received a separate session at annual training focussing on their role and a session to support the enhancement of case management.

Case law updates were delivered through e-learning for the second time.

Central e-learning on information security was issued.

Recommendations

- The MPTS Committee is asked to note the training for 2019 and proposed plans for 2020.
Training needs

1. Training needs for MPTS tribunal members fall into two main categories; induction training for those newly appointed to the MPTS or a new associate role within the MPTS, or annual refresher training.

2. Induction training is provided to ensure a consistent understanding of the rules, guidance and skills required for the role that the associate is appointed to. The approach to training may vary dependent on the role.

3. Refresher training is delivered annually and the content is driven by outputs from the Quality Assurance Group (QAG), developments to processes/guidance/law, and/or by any specific needs identified over the course of the previous 12 months.

Videos/ Webinars

4. Further to the positive response to the video/webinar learning offered in 2018 we decided to explore these tools this medium for training where deemed suitable. A number of court judgments in late 2018/early 2019 addressed the area of adjournments and the focus for 2019 was on this.

5. We hosted 3 webinars during 2019 with just under 30% of the pool attending – this was a proportionate reduction compared to webinar attendance over 4 sessions in 2018. Evening sessions remain the most well attended sessions. Where space permitted, we facilitated some delegates attending in person. Sessions were positively received and also enabled early sharing of draft guidance on restoration.

E-learning

6. Two e-learning modules were produced within the MPTS in 2019- one on case law and the other on an Interim Orders Tribunal (IOT) overview.

7. Revisions to the approach to e-learning, reflecting learning points from the 2018 module, were made and the modules were viewed positively.

8. Central e-learning on information security was also cascaded mid-2019 and will continue to be issued annually as part of our GDPR responsibilities.

Induction training 2019

9. All medical tribunal members and legally qualified chairs appointed in 2019 received a 4-day induction training course, this included all material delivered in the previous 5 day induction course compressed into 4 slightly longer days.
10 Delegates were trained together except for a single afternoon where sessions were specific to the needs of the relevant group, with legally qualified chairs having specific chairing skills sessions.

11 Feedback indicated that all sessions were viewed positively with an average score of 90% in terms of usefulness and understanding. The style and approach to training was also received positively. To avoid unnecessary repetition existing tribunal members that were appointed to legally qualified chair roles were only required to attend relevant sessions and this was received positively.

Annual training 2019

12 IOT training included sessions on equality, diversity and inclusion, factors to consider in decision making, and general updates on policy and guidance changes.

13 Medical Practitioners Tribunal (MPT) training also included sessions on equality, diversity and inclusion, and general updates on policy and guidance changes. In addition, they focussed on adjournments and effective management of time in hearings.

14 The focus on adjournments, through different learning methods, resulted in almost 80% of tribunal members indicating they had a greater or refreshed understanding of factors relevant to adjournments.

15 Chairs and legally qualified chairs received an additional session at the end of each IOT and MPT session. This included a more detailed look at some case law areas and a review of the importance of proof reading. MPT tribunal members also participated in a session regarding case management development.

16 We have continued to gather feedback on annual training sessions electronically, with response rates remaining stable compared to 2018 (58%).

17 Feedback indicated that in addition to positive feedback for the adjournment training:

- 80% agreed or strongly agreed that they had a greater or refreshed understanding of equality, diversity and inclusion principles;

- 86% that they had greater or refreshed understanding of policy and other developments at the MPTS;

- 82% felt that the case law updates also gave them greater or refreshed understanding of this area.
Future activity

18 In 2020 we will be delivering training with a focus on sexual misconduct, recognising the high proportion of cases before the MPTS with allegations in this category.

19 We will continue to utilise e-learning, video and webinar to provide a rounded learning offering for tribunal members.

20 The Committee is asked to note the training programme.
Agenda item:  9
Report title:  Delivery of the 2019 MPTS business plan and confirmation of the 2020 MPTS business plan
Report by:  Colin Barker, Head of MPTS Communications & Corporate Affairs, colin.barker@mpts-uk.org, 0161 240 7197
Considered by:  MPTS Committee
Action:  To consider

Executive summary
This paper provides an update on our progress against / completion of the MPTS Business plan projects in 2019 and then details the MPTS’s, GMC Council approved, business plan activities for 2020.

Recommendation
► The Committee is asked to consider the report.
2019 business plan

Our 2019 business plan included eight projects grouped under three programmes, and a further eight projects under a policy programme.

Knowledge and pre-hearing programme

Knowledge hub

Review of MPTS Siebel functionality

Resources for doctors

Enhancing case management

Technology programme

Extension of paperless hearings

Review of digital recording

Tribunal enhancement programme

MPTS/NMC shared training review

Tribunal member appointments – medical and LQC

Policy programme

OET and language assessments

Sanctions guidance

Voluntary erasure

Non-compliance hearings and tribunal directed assessments

Restoration

Suitable persons guidance

Possible change to right of appeal

Conditions bank consultation

Below is a reminder of what each project sought to achieve, with an update on progress or completion.

Knowledge and pre-hearing programme

Knowledge hub

We proposed to create a dedicated area on the MPTS intranet pages in which MPTS staff can easily access current guidance documents and templates.

**UPDATE** The intranet pages are complete, and plans are being finalised for the next phase of the project (see 2020 projects).
Review of MPTS Siebel functionality

5 Siebel is the system that supports the medical register and all fitness to practise proceedings. It has undergone various updates since inception; however, the core functionality of the ‘hearings’ tab utilised by the MPTS has changed very little. It was proposed that a Business Analyst from IS would lead on a holistic review aimed at reducing risk when capturing information and increasing the quality of performance data and insight.

6 UPDATE The majority of the holistic review is complete, with various teams around the MPTS consulted. Plans are being finalised for workshops to discuss priorities and potential solutions (see 2020 projects).

Resources for doctors

7 We proposed to produce user-focussed guidance for restoration and review hearings, building on the work completed in 2018, to assist doctors in better preparation for hearings and to encourage engagement.

8 UPDATE Good progress has been made and work will continue in 2020, though as business-as-usual rather than as a business plan project.

Enhancing case management

9 We proposed to implement the process changes recommended by our 2018 review of business-as-usual case management, includes publication of revised case management guidance.

10 UPDATE As detailed in the November 2019 update to the Committee, the hearing room utilisation rates demonstrates the positive progress that has been made to even out our monthly workload.

Technology programme

Extension of paperless hearings

11 Having already successfully introduced the sharing of hearing bundles in advance of a hearing, we proposed to review whether moving to fully electronic bundles is desirable and possible.

12 COMPLETE It does not appear that electronic bundles in hearings for MPT hearings would be suitable at this time. However, we will continue to keep this area under review.
Review of digital recording

13 We proposed to review our digital recording of hearings and take any necessary action to ensure our systems remain fit for purpose.

14 UPDATE The review was completed and work is ongoing to implement the recommendations (see 2020 projects).

Tribunal enhancement programme

MPTS / NMC shared training review

15 We proposed to identify lessons learnt from our previous delivery of shared training, measure its effectiveness and efficiency and to report on future opportunities and viability.

16 COMPLETE We have reviewed feedback from the training sessions alongside current hearing data and analysed whether there were any financial benefits to joint training. Training content was viewed positively by delegates; however, financial benefits were negligible. Nevertheless, the wider benefits of working with other regulators may add value to some training events and we will continue to keep this under review.

Tribunal member appointments (medical and LQC)

17 We proposed to appoint a suitable number of medical and LQC associates to ensure we can continue to provide a hearing service.

18 COMPLETE We appointed 25 LQCs and 23 medical tribunal members in 2019, all of whom received induction training. They began sitting in hearings from late summer 2019.

Policy programme

19 The following projects were proposed to ensure MPTS policy and guidance remains fit for purpose:

- OET and language assessments: COMPLETE
- Sanctions guidance: ON TARGET (see 2020 projects)
- Voluntary erasure: DEPRIORITISED (see 2020 projects)
- Non-compliance hearings and tribunal directed assessments: COMPLETE
- Restoration: ON TARGET (see 2020 projects)
- Suitable persons guidance: DEPRIORITISED
- Possible change to right of appeal: AWAITING POSSIBLE LEGISLATION
- Conditions bank consultation: COMPLETE
2020 business plan

20 The following MPTS business plan projects, previously shared with the MPTS Committee in September, were approved by GMC Council in December 2019.

<table>
<thead>
<tr>
<th>Operational</th>
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<tbody>
<tr>
<td><strong>Digital recording:</strong></td>
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<tr>
<td>Implementation of the recommendations from the digital recording system review to ensure it remains fit for purpose.</td>
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<tr>
<td><strong>Siebel functionality:</strong></td>
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<tr>
<td>Implementation of the recommendations from the holistic review of the Siebel hearings tab. Aim is to reduce risk when capturing information and increase the quality of performance data and insight.</td>
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<tr>
<td><strong>Document Library:</strong></td>
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<tr>
<td>Continuation of the 2019 business plan knowledge hub project to create a dedicated area on the MPTS intranet pages which will allow MPTS staff to easily access current guidance and documents.</td>
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<tr>
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<tr>
<td><strong>Sanctions Guidance:</strong></td>
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<tr>
<td>Continuation of the 2019 Business plan policy project to ensure the guidance remains fit for purpose.</td>
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<tr>
<td><strong>Restoration:</strong></td>
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<tr>
<td>Continuation of the 2019 Business plan project to ensure MPTS policies and guidance are fit for purpose.</td>
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<tr>
<td><strong>Publication and redaction:</strong></td>
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<tr>
<td>Review the need for local guidance to support MPTS decision-makers when considering the redaction of records of determination.</td>
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21 It is recognised that other work streams or projects may be required. Any such projects will progress outside the corporate business plan structure, reporting to the MPTS Committee, SMT and MPTS Policy Forum.