



General
Medical
Council

Regulating doctors
Ensuring good medical practice

Memorandum of Understanding between Healthcare Inspectorate Wales and the General Medical Council

June 2014

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1. The purpose of this Memorandum of Understanding (MoU) is to set out a framework to support the working relationship between the Healthcare Inspectorate Wales (HIW) and General Medical Council (GMC).
2. The working relationship between the HIW and GMC is part of the maintenance of a regulatory system for healthcare in Wales which promotes patient safety and high quality healthcare.
3. HIW is the regulator of healthcare in Wales. The GMC is the independent regulator for doctors in the UK. The responsibilities and functions of the HIW and GMC are set out at Annex A.
4. This MoU does not override the statutory responsibilities and functions of the HIW and GMC and is not enforceable in law. However, the HIW and GMC agree to adhere to the contents of this MoU.

Principles of cooperation

5. The HIW and GMC intend that their working relationship will be characterised by the following principles:
 - The need to make decisions which promote patient safety and high quality health and adult social care
 - Respect for each organisation's independent status
 - The need to maintain public and professional confidence in the two organisations
 - Openness and transparency between the two organisations, as to when cooperation is and is not considered necessary or appropriate.
 - The need to use resources effectively and efficiently
6. The HIW and GMC are also committed to a regulatory system for healthcare in Wales which is transparent, accountable, proportionate, consistent, and targeted - the principles of better regulation.

Areas of cooperation

The working relationship between the HIW and GMC involves cooperation in the following areas. Named MoU managers for each organisation are identified at Annex B.

Cross-referral of concerns

7. Where the HIW or GMC encounters a concern which it believes falls within the remit of the other, they will at the earliest opportunity convey the concern and relevant information to a named individual with relevant responsibility at the other.

In the interest of patient safety, the referring organisation will not wait until its own investigation has concluded

8. In particular, HIW will refer to the GMC:

- Any concerns and relevant information about a doctor which may call into question his or her fitness to practise.
- Any concerns and relevant information about a healthcare organisation or a part of that organisation which may call into question its suitability as a learning environment for medical students or doctors in training.
- Any concerns and relevant information about a healthcare organisation which may call into question the robustness of systems for postgraduate training, medical appraisal and clinical governance or compliance with the Medical Professions (Responsible Officer) Regulations 2010.

9. In particular, the GMC will refer to HIW:

- Any concerns and relevant information about a healthcare organisation in which doctors practise or are trained which may call into question the quality of care and services it provides.

Revalidation for doctors

10. Doctors now have to demonstrate to the GMC on a regular basis that they remain up to date and fit to practise (a process called revalidation). This depends on a recommendation from the Responsible Officer in healthcare providers so local systems of appraisal and clinical governance must be sufficiently robust to support this process.

11. Where appropriate, the HIW will work in collaboration with the GMC to provide assurance about these systems as part of its routine activities while avoiding unnecessary regulatory burdens for healthcare organisations or individual doctors.

Exchange of information

12. Cooperation between the HIW and GMC will often require the exchange of information. All arrangements for collaboration and exchange of information set out in this MoU and any supplementary agreements will take account of and comply with the Data Protection Act 1998, section 76 Health and Social Care Act 2008, and any HIW and GMC codes of practice, frameworks or other policies relating to confidential personal information.

13. This MoU will be supplemented by a separate Information Sharing Agreement (ISA) which will set out the detailed arrangements for sharing information between the parties. Both the HIW and GMC are subject to the Freedom of Information Act 2000. If one organisation receives a request for information that originated from the other, the receiving organisation will discuss the request with the other before responding.

Wales Concordat

14. HIW and the GMC are signatories to the Wales Concordat of bodies inspecting, regulating and auditing health and social care in Wales. As signatories to the Concordat, HIW and the GMC have agreed to work together with the other signatories to improve services for patients, service users and their carers whilst eliminating unnecessary burdens of external review on front line staff.

Telemedicine

15. HIW and the GMC have agreed a joint statement on where responsibility lies for the regulation of doctors providing telemedicine services to patients in the UK.¹

Resolution of disagreement

16. Any disagreement between HIW and GMC will normally be resolved at working level. If this is not possible, it may be brought to the attention of the MoU managers identified at Annex B who may then refer it upwards through those responsible, up to and including the Chief Executives of the two organisations who will then jointly be responsible for ensuring a mutually satisfactory resolution.

Duration and review of this MoU

17. This MoU originally came into effect when it was signed by the Chief Executives of the two organisations. This MoU is not time-limited and will continue to have effect unless the principles described need to be altered or cease to be relevant. A separate joint working protocol setting out the operational detail of how the GMC and HIW will work together to maximise the effectiveness of their regulatory responses will be developed and will be reviewed at a frequency described in that document. The MoU may be reviewed at any time at the request of either party.

18. Both organisations have identified a MoU manager at Annex B and these will liaise as required to ensure this MoU is kept up to date and to identify any emerging issues in the working relationship between the two organisations.

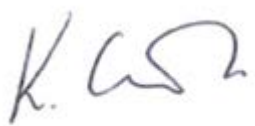
¹ See http://www.gmc-uk.org/Telemedicine_statement__Wales__November_2009.pdf_28771406.pdf

19. Both HIW and the GMC are committed to exploring ways to develop increasingly more effective and efficient partnership working to promote quality and safety within their respective regulatory remits.

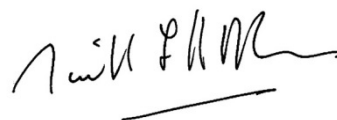
Signed

Kate Chamberlain
Chief Executive
Healthcare Inspectorate Wales

Niall Dickson
Chief Executive and Registrar
General Medical Council



A handwritten signature in black ink, appearing to read 'K. Chamberlain', enclosed in a thin black rectangular border.



A handwritten signature in black ink, appearing to read 'Niall Dickson', with a horizontal line underneath.

Date: 20 June 2014

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Annex A

Responsibilities and functions

Healthcare Inspectorate Wales (HIW) and the General Medical Council (GMC) acknowledge the responsibilities and functions of each other and will take account of these when working together.

Responsibilities and functions of HIW

1. HIW is the independent inspectorate and regulator of all healthcare in Wales.
2. HIW carries out its functions on behalf of Welsh Ministers and, although part of the Welsh Government, protocols have been established to safeguard its operational autonomy. HIW's main functions and responsibilities are drawn from the following legislation:
 - Health and Social Care (Community Health and Standards) Act 2003;
 - Care Standards Act 2000 and associated regulations
 - Mental Health Act 1983 and the Mental Health Act 2007
 - Statutory Supervision of Midwives as set out in Articles 42 and 43 of the Nursing and Midwifery Order 2001
 - Ionising Radiation (Medical Exposure) Regulations 2000 and Amendment Regulations 2006.
3. HIW's primary focus is on:
 - Making a significant contribution to improving the safety and quality of healthcare services in Wales
 - Improving citizens' experience of healthcare in Wales whether as a patient, service user, carer, relative or employee
 - Strengthening the voice of patients and the public in the way health services are reviewed
 - Ensuring that timely, useful, accessible and relevant information about the safety and quality of healthcare in Wales is made available to all.
4. HIW's core role is to review and inspect NHS and independent healthcare organisations in Wales to provide independent assurance for patients, the public and others that services are safe and of good quality. Health services are reviewed against a range of published standards, policies, guidance and regulations. As part of this work HIW will seek to identify and support improvements in services and the actions required to achieve this. If necessary, HIW will undertake special reviews and investigations where there appears to be systematic failures in delivering healthcare services, to ensure that rapid improvement and learning takes place. In addition, HIW is the Local Supervising Authority for the statutory supervision of midwives in Wales.

Responsibilities and functions of the GMC

1. The responsibilities and functions of the GMC are set out primarily in the Medical Act 1983 (the Medical Act).
2. The purpose of the GMC under the Medical Act is to protect, promote and maintain the health and safety of the public by ensuring proper standards in the practice of medicine.
3. The Medical Act gives the GMC four main functions:
 - controlling entry to and maintaining the list of registered and licensed medical practitioners.
 - fostering good medical practice.
 - promoting high standards of medical education and training.
 - dealing firmly and fairly with doctors whose fitness to practise is in doubt.

Annex B

Contact details

Healthcare Inspectorate Wales

Government Buildings
Rhydycar Business Park
Merthyr Tydfil
CF48 1UZ

General Medical Council

2 Caspian Point
Caspian Way
Cardiff Bay
CF10 4DQ
Telephone: 02920 49 49 48

Named contacts between the HIW and the GMC are as follows:

Chief Executives (internal escalating policies should be followed before referral to Chief Executives)

Kate Chamberlain
Chief Executive
kathryn.chamberlain@wales.gsi.gov.uk

Niall Dickson
Chief Executive and Registrar
ndickson@gmc-uk.org

MoU management

Darren Hatton,
Knowledge Manager, HIW
Email: Darren.Hatton@Wales.GSI.Gov.UK
Phone: 0300 062 8402

Rachel Podolak
Head of Welsh Affairs, GMC
rpodolak@gmc-uk.org
Phone: 02920 504 758