

England Medical Performers List Review - Information Gathering Questionnaire

August 2020

1. Are you replying as an individual or on behalf of an organisation?

Organisation

2. If you are replying on behalf of an organisation, please provide name of organisation:

The Royal College of General Practitioners (RCGP)

The RCGP is the largest membership organisation in the UK solely for GPs. Founded in 1952, it has over 54,000 members who are committed to improving patient care, developing their own skills, and promoting general practice as a discipline. The RCGP is an independent professional body with expertise in patient-centred generalist clinical care.

3. What do you understand to be the function(s) of the Medical Performers List (MPL) in England (please tick all that apply):

- To verify the identity of the performer at application stage
- To verify that the GP is appropriately qualified and has relevant experience on application to join the Performers List
- To verify that the performer has a right to work in England
- To verify suitability to work for example DBS check, NHS Resolution checks, Counter Fraud checks
- To verify sufficient knowledge of the English Language
- To invoke suspension from the List or impose conditions that support or restrict the GP to assure they deliver safe and effective care
- To stop unsuitable GPs working in primary care
- To enable support to be provided to GPs to enable them to deliver safe and effective care
- All of the above

The fundamental purpose of the performers list is to ensure that individuals who are working independently in primary care, often without the support and oversight provided by teams of peers, have appropriate training and skills, and can practice safely and appropriately. This includes conducting various checks (such as DBS, right to work and English language proficiency) at application stage, however these are secondary to the primary purpose of the list and are these checks do not absolve employers of their duty to carry out employment checks. Where necessary GPs may also be subject to suspension, conditions or removal from the list, in order to protect the public.

4. Once included on the Performers List, how frequently do you believe NHS England and NHS Improvement refresh any checks?

- Annually
- Bi-annually
- Every 5 years
- Never
- Other (please specify below)

It is our understanding that checks are repeated whenever a GP changes responsible officer (for example due to relocating). However, some GPs may never change RO, and so may not have their details reviewed.

5. If the GP is employed, who do you consider is responsible for undertaking the checks set out above?

- As now (Performer List function)
- The Employer
- The Primary Care Network (PCN)
- The Integrated Care Board
- Other (please specify below)

Employed GPs are subject to the same performers list checks as GP partners, while the GMC conducts some checks at the point of registration. Additionally, employers remain responsible for independently verifying right to work, DBS, NHS Resolution and Counter Fraud checks.

6. The Performers List regulations were introduced following the Shipman enquiries. Do you consider the current Performers List regulations provide effective safeguards to protect patients from unsuitable doctors working in primary care?

- Yes
- No
- Both

Please explain how/why?

The Performers List regulations are a beneficial safeguard at the point of application, as the GP will be subject to a range of checks which verify that they can safely practice independently. This takes two parts. First, inclusion on the Performers List serves as an opportunity to ensure that an individual has appropriate skills to practice independently (by considering training and employment records). Second, it serves as an opportunity to verify that the individual does not have a record which suggests they may abuse the trusted role of a GP, in a similar way to the “fit and proper person” test which charity trustees must pass. However, as checks are not regularly repeated, it would be possible for an individual to secure inclusion on the performers list based on a history of safe and appropriate practice, but subsequently begin to practice in a way which puts patients at risk

(either through negligence or malice). The Performers List regulations are therefore of little value in terms of ongoing safeguards.

7. What do you think are the advantages of the current MPL arrangements?

The advantages of the current Performers List arrangements are two-fold. Firstly, as already noted, the regulations provide initial assurance that doctors working independently in primary care are “fit and proper” - that is, they do not have a record which suggests they may abuse this position.

Secondly, and importantly, it verifies that individuals working in primary care have the appropriate skills and experience for the role, including ensuring that doctors with specialties other than general practice do not work in a primary care role for which they are not equipped. It therefore serves a key function in upholding standards.

8. What do you think are the disadvantages?

The primary disadvantage of the current arrangements are that they are administratively burdensome for GPs and for the system as a whole, without providing benefits which could be provided elsewhere in the system.

For example, verification of appropriate clinical skills and experience to work in general practice could be managed through registration, annotation of the register and provision of a licence to practice by the GMC. Similarly, the GMC could conduct an initial check of right to work, DBS etc (the “fit and proper person” test) at the point of registration, and verify this through revalidation checks, while further checks could be conducted by the employer or (for partners) by other parties to a partnership agreement.

In effect, the Performers List checks duplicate assurances which can and should be carried out elsewhere in a way which is both less burdensome and more cost effective.

9. Do you think there is a need for change in the regulatory arrangements for GPs?

Yes

No

If yes, please describe potential alternative arrangements:

See question 8.

10. We would welcome any further comments that you would like to add below or you can email england.nplqueries@nhs.net:

Approved by Michael Mulholland, Vice Chair, Professional Development and Standards, 28 July 2021