

## GMC fitness to practise complaints - tips for doctors

The GMC's role is to protect the public and uphold confidence in the medical profession, not to punish doctors.

In cases where the GMC conducts provisional enquiries or a full investigation, it will look at whether there is evidence of serious failings in conduct or practice and, if so, whether the concerns have been or may be remediated and whether they are likely to pose an ongoing risk to patients and/or impact on confidence in the medical profession.

The GMC will also look for evidence that doctors have acted swiftly and appropriately when things went wrong, for example by taking steps to provide an explanation about what has happened to patients (or where appropriate their relatives or next of kin). If there have been serious failings, demonstrating insight and putting in place remediation are likely to reduce any ongoing risk to the public and the GMC will need evidence of this. The GMC tries to resolve complaints as quickly as possible so the earlier satisfactory evidence can be provided the quicker it can progress such cases.

If you are a member of a medical defence organisation you should contact them immediately. They know GMC procedures well and can advise you on how to respond. If you do not have medical defence membership, you should seek alternative legal advice.

One of the main causes of delay is when the GMC has to wait for information and evidence. Swift responses, subject to legal advice, will help to avoid delay.

### What to do when things go wrong

- When things go wrong, engage constructively (see para 55 *Good Medical Practice*) with any local response, be honest about what has happened, including with any patients and provide evidence of engagement with patients and their families, including expressions of regret or apology .

### Responding to a GMC investigation

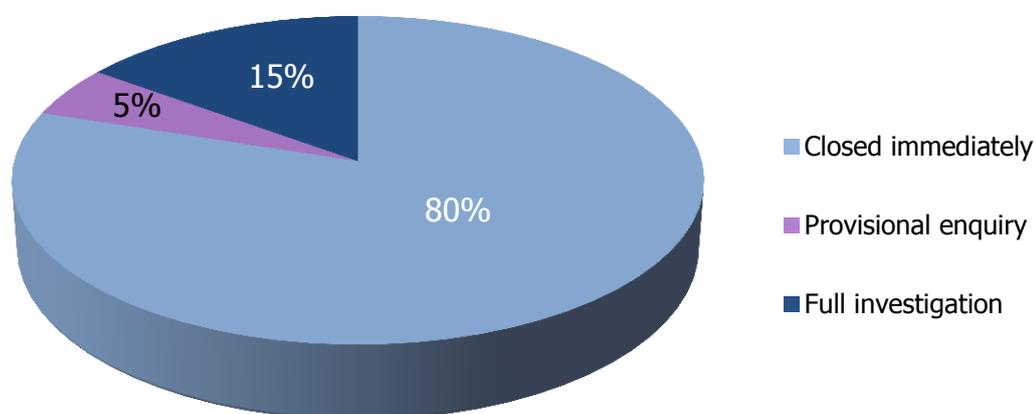
- Reply to requests from the GMC for information as quickly as possible, subject to obtaining legal advice as advised above.
- If there has been a serious failing with regard to your conduct or your practice, remediate and provide evidence of this as soon as possible. Steps you have taken

to avoid recurrence, such as retraining to address knowledge or skills gaps, will be taken into account and, if provided early, may help avoid a formal investigation.

- Look after your health. If you become unwell, seek and follow treatment and, if your health poses a risk, limit your practice.
- Never try to cover up a mistake or failing or your role in an incident.
- If you're under investigation and need someone to talk to, the BMA offers a confidential support service. Visit [www.bma.org.uk/advice/work-life-support/your-wellbeing/doctor-support-service](http://www.bma.org.uk/advice/work-life-support/your-wellbeing/doctor-support-service)

## Remember...

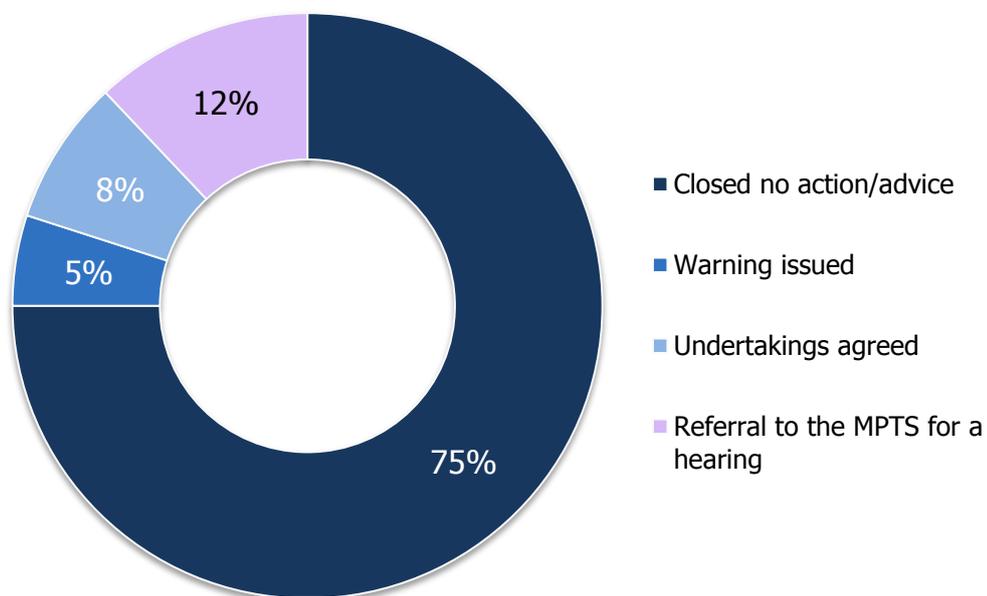
- A referral or complaint to the GMC does not itself imply a failure in your clinical skills, knowledge or communication.
- The GMC recognises that a referral or complaint is unwelcome and potentially traumatic. However, complaints or referrals to a regulator are part of practice for doctors and other healthcare professionals in the UK and internationally. The GMC's primary duty is to protect the public, but in doing so it focuses on ensuring that doctors who are investigated are treated fairly.
- The GMC receives approximately 9000 referrals, complaints and other matters a year based on recent data\* and of those approximately:
  - 80% do not raise serious concerns and are closed immediately (5% of these are shared with the doctor and their responsible officer to support appraisal)
  - 5% result in provisional enquiries and 65% of those close swiftly.
  - 15% result in a full investigation.



\* GMC Annual Statistics 2016

Most matters raised with the GMC come from patients and the public (around 75%) but only 15% of those result in a full investigation. While people acting in a public capacity, such as responsible officers and the police, only make up 8% of matters raised, these account for the majority of matters investigated.

- Where a full investigation is carried out approximately:
  - 75% are closed with no action or advice
  - 5% result in a warning
  - 8% result in undertakings agreed with a doctor and
  - 12% are referred to the Medical Practitioners Tribunal Service for a hearing.



- Of cases referred to a hearing, only in about 70 cases a year are the most serious findings made, resulting in erasure from the medical register.