Summary minutes of the Medical Council meeting held on 11th & 12th July, 2018 in Kingram House, Kingram Place, Dublin 2.

MEMBERS PRESENT – 11th July, 2018

Dr Rita Doyle (President)
Dr Anthony Breslin (Vice President)
Dr John Barragry
Ms Vicky Blomfield
Dr Marcus De Brun
Dr Thomas Crotty
Mr Joe O'Donovan
Mr John Gleeson
Mr Paul Harkin
Professor John Hyland
Ms Marina Lynch
Ms Alison Lindsay
Dr Maeve Moran
Mr John Murray
Mr Tom O'Higgins
Mr Jim O'Sullivan

MEMBERS NOT PRESENT

Ms Teresa Bulfin
Dr Suzanne Crowe
Ms Mary Duff
Professor Fidelma Dunne
Professor Mary Leader
Dr Erica Maguire
Ms Catherine McKenna
Dr Aoife Mullally
Professor Mary O'Sullivan

MEMBERS PRESENT – 12th July, 2018

Dr Rita Doyle (President)
Dr Anthony Breslin (Vice President)
Dr John Barragry
Ms Vicky Blomfield
Dr Marcus De Brun
Ms Teresa Bulfin
Dr Thomas Crotty
Dr Suzanne Crowe
Mr Joe O'Donovan
Professor Fidelma Dunne
Mr John Gleeson
Mr Paul Harkin
Professor John Hyland
Ms Marina Lynch
Ms Alison Lindsay
Ms Catherina McKenna
Dr Maeve Moran
Mr John Murray
Mr Tom O'Higgins
Mr Jim O'Sullivan

MEMBERS NOT PRESENT

Ms Mary Duff
Professor Mary Leader
Dr Erica Maguire

Dr Aoife Mullally
Professor Mary O'Sullivan

In attendance – full meeting

Mr Bill Prasifka (CEO)
Ms Penelope Kenny (Head of Corporate Governance & Secretary to Council)
Ms Jane Horan (Council & Corporate Governance Manager)
Mr William Kennedy (Director of Regulation)

In attendance – for the relevant parts of the meeting

Mr Philip Brady (Director of Registration and Business Process Improvement)
Ms Wendy Kennedy (Director of Corporate Services)
Ms Jantze Cotter (Director of Professional Competence & Practice)
Ms Úna O'Rourke (Director of Education, Training and Professionalism)
Mr John Sidebottom (Head of Inquiries, Health and Monitoring)
Ms Deirdre Foley (Head of Finance)
Ms Katie Mulroy (Head of Investigations & Complaints; Solicitor)
Mr Kevin Walsh (Head of Investigations & Complaints; Solicitor)
Mr Colin Cooper (Head of ICT)
Ms Ciara McMorrow (Head of Procurement & Facilities)
Ms Lorna Purcell (Information Governance Officer)
Mr Alan Gallagher (Head of Communications)

Appointment of a Council Member

As neither the President nor Vice-President had been formally appointed, it was necessary to elect a Council member to chair the session. Council unanimously agreed by the members present that Dr Barragry Chair the meeting.

Process of Election of President and Vice-President

Ms Kenny, Returning Officer, provided Council with an overview of the procedure agreed at the induction to elect the President and Vice President. The procedure was approved and confirmed by Council.

Election of President

The Returning Officer confirmed that one expression of interest from Dr Rita Doyle and three supporting nominations was received. As there was only one candidate Council noted that there was no requirement for an election the Returning Officer confirmed the appointment of Dr Doyle as President. Dr Doyle thanked those members who nominated her and Council for their support. Dr Doyle then assumed the Chair.

Election of Vice-President

The Returning Officer confirmed that one expression of interest from Dr Anthony Breslin and three supporting nominations were received. As there was only one candidate Council noted that there was no requirement for an election, the Returning Officer confirmed the appointment of Dr Breslin to the position of Vice-President. Dr Breslin thanked those members who nominated him and Council for their support. Dr Breslin then assumed the role of Vice-President.

CEO's Business

The CEO welcomed the new and returning Council members.

The CEO informed Council that the Annual Report for 2017 had been published on 27th June. The approach to the media strategy for the publication has been to use the opportunity to raise the profile of the Council with both the media and the wider public in advance of a number of upcoming reports, publications and initiatives. Council noted that there had been positive widespread media coverage in print, online and radio.

Council noted that the Induction programme presentations had all been uploaded on the Sharefile for members to download and the Videos of the guest speakers and Executives will be available to members in the coming weeks. The CEO advised that a facilitated catch up session will be organised in Kingram House in the autumn for members who were unable to attend some of the sessions.

Council noted that 10 members had expressed an interest in sitting on Council for a 3 year term only which will provide continuity when the Council's next term of office commences.

Council noted that a steering committee has been set up to guide the implementation of the requirements of the General Data Protection Regulation (GDPR) and the Data Protection Act 2018, which came into effect on 25th May 25th 2018.

The CEO advised that Property Strategy Review Group established under the previous Council term of office to review and report to Council on short term and long term property solutions. Council noted that the group would be reconstituted to continue reviewing the spatial needs of the organisation.

Council noted that work is underway to address some of the challenges facing the organisation including a move to a cloud based solution and a range of new services and functionality becoming available in staged releases over the summer months.

The CEO advised that the four year strategic internal audit plan 2017 – 2020 approved by the Audit, Strategy & Risk Committee in June 2017 with the Medical Council's Internal Audit partners – Deloitte. Council noted that a full program of internal audit for 2018 had been agreed.

Council was noted that the numbers for first-time application processing had decreased from previous years. Council was advised that completion rates are behind due to a delay in finalising intern registrations. This was due to late receipt of information from medical schools.

The CEO advised that the Registration Peak Period was nearing conclusion, with all new interns (720- 730 posts) to be registered and ready to take up posts from 9th July. Completing interns seeking to transfer to the General or Trainee Specialist Divisions were to completion and the Annual Retention is now in the final stages. This is a positive development due to the work to streamline the process.

Council noted that a large part of the retention advice this year revolved around evidentiary requirements regarding professional indemnity cover in place for by all doctors which had not proved to be a cause of difficulty for doctors.

The CEO advised that there had been no new requests for information from the Ombudsman. There remains one request, where the Council is yet to receive a report back from the Ombudsman; following the transmission of requested information to the Ombudsman's Office.

Council was advised that the Council was seeking redetermination of the equivalence of the accreditation processes by the US Department of Education via their National Committee on Foreign Medical Education and Accreditation (NCFMEA). Council noted purpose of this application which is to ensure that Department funding for US students in Irish medical schools continues and also seeking recognition as an Accreditation Agency by the World Federation of Medical Education. The CEO informed Council that the Executive had met with senior managers at Trinity College Dublin in advance of an accreditation visit scheduled for late October. Council was informed that whilst an experienced Assessor Team has been identified for this visit, a non-medical Council member is required to join the team.

The CEO advised that the Executive are seeking Council member to join a Working Group comprising of members of the Education and Training Assessor Panel of experts and Council members is being set up to initially review twelve applications from postgraduate training bodies for re-accreditation of their specialist training programmes and during the Council term, as well as considering annual returns from training bodies to monitor progress.

Council noted that preparations to reopen the process for recognition of new specialties following an external review and recommendations for enhancement of the process were nearly complete. A key enhancement to the process is early involvement and increased consultation with the HSE National Doctor Training and Planning (NDTP) Directorate and the Department of Health, enabling Council to make informed decisions about how appropriate recognition of a new specialty is in the context of Irish healthcare service needs.

Council was advised that a meeting had taken please with senior managers from the Dublin/Midlands Hospital Group and the Children's Hospital Group in advance of the regional visit planned for October-November this year. Council noted that there are plans to visit 10 clinical training sites and is in the process of identifying Assessor Teams for this purpose.

Council noted the draft booklet in relation to the Safe Start project which covers the key educational needs identified in the Safe Start report will be issued to doctors entering the Irish health care system for the first time and relevant stakeholders.

The CEO provided an update in relation the Professional Competence Scheme Enrolment. Council noted that the Executive is currently in the final stages of identifying doctors who remain non-compliant with their maintenance of Professional Competence enrolment requirements. This now represents approximately 1% of doctors who should be enrolled. Council noted however that some doctors have genuine reasons for not enrolling.

Council noted the Performance Assessment Case Management. Council was advised that in respect of 24 open Performance Assessment cases at various stages.

In the area of research Council noted the Workforce Intelligence report had been drafted. The report provides an analysis of the retention registration data that can be used by stakeholders to inform workforce planning. Council noted that the research team are currently preparing the reports for the Your Training Counts and Complaints surveys undertaken by the Council and the reports will be available to Council in the coming months.

The CEO concluded his report outlining a number of recent Stakeholder meetings of note, in particular, meetings with the Health Service Executive to discuss the issue of HSE employed medical consultants not registered in the Specialist Division. The CEO advised that whilst the Medical Council will be clear in its remit and statutory function, it will continue to meet with the Health Service Executive to further progress the matter. The Vice-President proposed that this issue be considered by the Registration and Continuing Practice Committee, when established, and report to Council.

A Council member requested that although the Business Plan would normally be updated through the Audit and Risk Committee if quarterly updated could be included as a separate item in the Council's documentation and reported directly to Council as an oversight mechanism.

Brexit Update

The Director of Registration advised Council that the biggest impact of BREXIT will be in relation to the movement and registration of doctors between both jurisdictions and the delivery of cross border services.

It remains unclear as to how issues regarding recognition of qualifications and freedom of movement, which are the corner piece of current pan-European registration, will be affected.

Council had indicated previously to the Department of Health that there will be no change to the recognition of UK degrees (Basic Medical Qualifications). There has been no change in the under-graduate programmes, and there is nothing to suggest there will be an immediate change. The Undersecretary of the State for the Department of Exiting the European Union in the United Kingdom had stated that that common rules on recognising professional qualifications will remain in place.
Council was advised that visiting EEA practitioners providing services on a temporary and occasional basis could be an issue and Council noted that the Executive would continue to monitor the situation.

President's Business

General Etiquette & Behaviour

The President drew the Council's attention to the Standing order on the general etiquette and behaviour for Council members when attending meetings. The President reminded members that whilst each member brings a wealth of experience from their individual roles, Council is most effective when working collectively as a Council.

Shorter Council Term of Office

The Secretary to Council advised that 10 Council members had expressed an interest in sitting for a three year term. This initial shorter term has been agreed by the Department of Health and the Medical Council members, to allow for a rolling membership. This ensures retention of a working and corporate knowledge on Council, and provides consistency in Committee work, avoiding any downturn in productivity, all the while ensuring Council has the necessary experience to discharge its duties in accordance with the Medical Practitioners Act, 2007. Council approved the members sitting for the shorter term of office.

Proposed Committee Structure

Council was presented with a proposal on a Committee structure. The proposal outlined the phased approach to the Committee structure in order for Council to continue its statutory functions.

Council noted the request to establish an Ethics Working Group to specify standards, review the current Ethical Guide regard to the termination of pregnancy and make recommendations on any action deemed appropriate stemming from the Draft Regulation of Termination of Pregnancy Bill. Council approved the establishment of the Ethics Working Group.

Council noted the Executive's recommendation to establish a Strategy and Governance Committee. Council was advised that under the provisions of the Medical Practitioners Act, 2007 Council is required to prepare a Statement of

Strategy for its term of office. Accordingly the remit of this Committee is to; steer the Statement of Strategy project to completion and monitor implementation; monitor and ensure compliance with Governance requirements and best practice; react to escalated governance issues such as Council member complaints; be responsible for the nominations and appointments of members to relevant Committees and Groups and deliver learning and development programmes for Council, Committees and Groups. Council approved the establishment of the Strategy and Governance Committee.

Council noted that the establishment of the Preliminary Proceedings Committee and the Fitness is a statutory requirement under the provisions of part 7 and 8 of the Medical Practitioners Act, 2007 Council approved the establishment of these Committees.

Council noted the Executive's recommendation to approve the establishment of the Education and Training Assessor Panel. The Panel's remit is to carry out the accreditation and assessment of education, training and clinical training sites and consider applications for recognition of new specialties in the first instance and make recommendations to the Committee. Council approved the establishment of the Education and Assessor Panel.

Council noted that recommendation to establish the Health Committee would be carried out in Phase 2 Council were requested to agreed that the Committee to continue on an interim basis to support registered medical practitioners with relevant medical disabilities (both self and otherwise referred) and make recommendations on action to be taken where deemed absolutely necessary. Council agreed that the Committee continue on an interim basis.

Council noted that the following committees would be established as part of Phase 2 in September; Audit, Finance and Risk Committee; Registration and Continuing Practice Committee; Education and Training Committee; Monitoring Committee; Health Committee and Property Acquisition Group.

Membership of Council Committee – Appointment of Chairs and Members of Council Committees

A proposal was outlined for the process for the Election of Chairs of the Committees and for appointment of Chairs and Members to the Committees. Council members were requested to submit their expressions of Interest to the Council Secretary.

Should a vote be necessary to elect a Chair of the Committee this will carried out by email. The Secretary to Council will issue a list of all interested Chairs and contact details with short Bios to all Council members.

Council approved the process for the appointment of Chairs and Members of Phase one of the Committee structure.

Fitness to Practice Committee Inquiry Calendar

Council noted the Fitness to Practise inquiry hearings fixed for hearing in the coming months.

Induction Feedback and further Induction requirements

Council members agreed that the Inductions sessions had been delivered in a very professional manner and were very useful for the new members of Council. A request was made for refresher sessions for some of the technical aspects of the work. Council noted that further catch up inductions sessions would take place in August and September,

Risk Update

Risk Register – July 2018

The Chief Risk Officer provided an update to Council on the Risk Register.

Council noted 5 items noted as being red risks. Council noted that the recently added risk in relation to the Medical Council's ability to comply with GDPR given the Council's functions under the MPA 2007. It was proposed that the issue in relation to consultants not being on the specialist register be included in the Register. Whilst it was noted that this issue does not fall into the remit and statutory function of the Council it does however carry a potential reputational risk. Council directed that this be included as a red risk on the Register and that a full review of the Register be carried out for the next Council meeting.

Information Governance

The Information Governance Officer provided an update on the importance of Data Protection in the Medical Council, the role of the Information Governance team, the status of the General Data Protection Regulation (GDPR) implementation project plan, the challenges faced by all organisations in complying with GDPR, and also how data protection relates to Council Members and their work in the Medical Council.

Registration and Continuing Practice Committee

Pre-Registration Examination System (PRES) Results Ratification.

Council noted the results of the PRES Level 3 Exams held on 19th June. 2018. Council also noted the recommendation of the Examinations Sub-Committee that 24 candidates passed the PRES Level 3 exams. Council confirmed the PRES Level 3 exam results.

Section 79 List – Removal for failure to pay retention fees

Council considered the list of doctors who had failed to meet annual retention requirements. Council approved the Status update, including imposition of the late fee and the Section 79 list.

Registration Applications:

Council considered an application for registration where the medical practitioner disclosed a health issue. Council was advised that a medical report from the applicants' treating physicians had been provided to the Health Committee. Council noted the Health Committee's recommendation that a condition to engage with the Health Committee be attached to their registration. Council was advised that the applicant had provided written consent to the condition being attached to their registration Council decided to accept the recommendation of the Health Committee to attach the condition to their registration.

Council considered an application for restoration to the Register. The medical practitioner had disclosed health and disciplinary issues to the Council. Council was advised that medical reports had been received from the practitioner's treating health professionals and considered by the Chair of the Health Committee. Council agreed to restore the practitioner to the Register with the following condition attached:

- That within one week of the imposition of these conditions the practitioner must make contact with the Health Committee of the Medical Council and thereafter co-operate with all requests and recommendations of the Committee and that reports be submitted to the Health Committee every six months.

Ethics & Professionalism

Proposal for the Ethics Committee to be established to review the Ethical Guide

Council noted that this Item was considered under Item 5.3.

Case Warrant

The case officer warrant of appointment, was approved and the nominated person duly appointed.

Section 60 Report

Council noted the updated section 60 report

Media Log

Council noted this Item.