

GMC Report: Vulnerable Doctors Should Get More Support



The UK's General Medical Council (GMC) is set to review the way it treats vulnerable doctors under fitness to practise investigations following the publication of an independent study it commissioned. The study, titled "Doctors who commit suicide while under GMC fitness to practise investigation", aimed to establish whether the GMC's fitness to practise procedures could be improved to reduce the impact on vulnerable physicians.

The study found that, between 2005 and 2013, 28 doctors undergoing fitness to practise investigations committed suicide or died of a suspected suicide. Based on the findings, many of the doctors who committed suicide suffered from a recognised mental health disorder or had drug and/or alcohol addictions. Other factors which often followed from those conditions that may have also contributed to their deaths include marriage breakdown, financial hardship, and in some cases police involvement as well as the stress of being investigated by the GMC.

"We know that some doctors who come into our procedures have very serious health concerns, including those who have had ideas of committing suicide. We know too that for any doctor, being investigated by the GMC is a stressful experience and very often follows other traumas in their lives," said Niall Dickson, Chief Executive of the GMC. "Our first duty must, of course, be to protect patients but we are determined to do everything we can to make sure we handle these cases as sensitively as possible, to ensure the doctors are being supported locally and to reduce the impact of our procedures."

Although the GMC tries to manage cases as quickly as possible, delays in investigations can occur for many reasons including criminal proceedings or coroner's inquests which need to be completed first or because new concerns come to light during the course of an investigation that need to be examined.

The report recognises the significant improvements that the GMC has made to the investigation process in recent years and the additional support offered to doctors. It also makes a number of recommendations for further reducing the impact of investigations on doctors who have health problems. Amongst the key recommendations are:

- · Appointing a senior medical officer within the GMC to be responsible for overseeing health cases; and
- Ensuring that every doctor should feel they are treated as 'innocent until proven guilty'.

In addition, the report cites the importance of providing more support to vulnerable doctors and recommends the establishment of a National Support Service for doctors.

"We do recognise that doctors need to be able to access appropriate support when they are not well, and that doctors may have particular needs in their dealings with mental health and other services. The independent review recommends the establishment of a National Support Service for doctors. Although this is not a matter for us we will convene a meeting in the New Year to bring together those who have an interest and expertise in this area," Dickson said.

Dr Clare Gerada, Medical Director of the Practitioner Health Programme, commented: "I welcome this long awaited and important review. I applaud the GMC's openness in putting in the public domain the issue of doctors' suicides whilst under their process...Doctors are sometimes patients too and supporting vulnerable doctors is a shared responsibility. It is important that in taking forward the recommendations in the review the GMC works in partnership with everyone who has an interest in this area including the Practitioner Health Programme, the Royal College of Psychiatrists and the BMA."

The report was written by Sarndrah Horsfall, who is an independent consultant and was the Chief Executive of the National Patient Safety Agency (NPSA) in the UK. NPSA is the independent public body responsible for patient safety, research ethics and monitoring the performance of medical practitioners.

Source: General Medical Council Image Credit: Ministry of Ethics, UK

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