



**Comhairle na nDochtúirí Leighis
Medical Council**

Medical Council Business Plan 2013

**Approved by the Medical Council for submission to the
Department of Health**

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Introduction

The Medical Council's Business Plan arising from the Statement of Strategy 2010-2013 is produced in accordance with Part 3, Section 15 of the Medical Practitioners Act 2007. The Plan is also consistent with sections 2.14 and 2.15 of the "Code of Practice for the Governance of State Bodies, *May 2009*" and also Section 2.4 of the Medical Council's Terms of Reference. This Business Plan sets out in detail the objectives of the Medical Council for 2013 and associated expenditure plans in line with the Medical Council's Statement of Strategy 2010 – 2013.

To identify and plan for issues that may impact on the successful delivery of the Medical Council's strategic and operational objectives, a Risk Management Framework was developed in 2011. Building on this framework, an independent review was conducted in Q3 2012 with positive findings reported to Council, commending the current risk management procedures and processes.

Using this revised framework this comprehensive Plan has been developed by the Medical Council Executive in collaboration with Council, its Committees and Working Groups and approved by the Medical Council on 31st January 2013. The implementation of this document will be monitored by Council and the Executive via the Council's Balanced Scorecard to ensure that targets are met. The Medical Council will publish its Annual Report for 2012 as part of its statutory reporting requirement and this will comprehensively outline the activities of the organisation which were undertaken for that period. A summary of the key activities and achievements are highlighted in Appendix 1 of this document.

A core focus of this Plan will be the implementation of processes and procedures for the successful election and nomination of members to the Medical Council for the Term of Office 2013 – 2018. This involves significant planning for and development of a comprehensive programme of work to facilitate appointments, provide appropriate induction and training and to continue to support the newly appointed Council in achieving its strategic objectives in line with the Statement of Strategy and all legislative requirements.

The Medical Council's focus on protecting the public by promoting and ensuring the highest professional standards amongst doctors is at the core of its work. An appropriate balance in Council's focus and activities must be maintained so as to ensure there are appropriate emphases on both the public and the practitioners. Council continues to maximise the use of resources, providing the best value for money whilst working collaboratively with the relevant statutory bodies to ensure the most efficient and effective working relationships are maintained. In developing this Plan, the context of the current economic environment and its challenges have been taken into account.

Purpose and Functions of the Medical Council

The Business Plan stems from the Statement of Strategy 2010-2013 and takes into account the Council's vision, mission and values contained in that document.

Vision

- Patient safety and public confidence is ensured through excellent doctors upholding the highest standards.

Mission

- Protecting the public by promoting and ensuring the highest professional standards amongst doctors.

Values

- Our primary focus is to ensure our activities are in the best interests of the public and are patient focused at all times.
- We are a progressive organisation and are continually looking to improve the way in which we work.
- We are open and transparent in our processes and actions.
- We constantly aim to deliver effective services as efficiently as possible.
- We treat everyone with respect and dignity.
- We discharge our duties in a fair and equitable manner.

The objective of the Medical Council is to protect the public by promoting and better ensuring high standards of professional conduct and professional education, training and competence among registered medical practitioners.

Established by the Medical Practitioners Act 1978 (updated in 2007), the principal functions of the Medical Council are to:

- Establish and maintain the register of medical practitioners.
- Approve and review programmes of education and training necessary for the purposes of registration and continued registration.
- Specify and review the standards required for the purpose of the maintenance of professional competence of registered medical practitioners.
- Specify standards of practice for registered medical practitioners including providing guidance on all matters related to professional conduct and ethics.
- Conduct disciplinary procedures.

The Council has a membership of 25 including both elected and appointed members. Under the provisions of the Medical Practitioners Act 2007, the Council is comprised of 13 non-medical members and 12 medical members representing a range of medical specialties, teaching bodies and members of the public and stakeholders, all of whose appointments have been approved by the Minister for Health. The current Council's period of office is 2008 to 2013 and this plan will reflect the changing nature of Council with the new Term of Office taking effect from 1st June 2013. The main functions of the Medical Council revolve around registration, professional standards, education and training and professional competence.

As at 31st December 2012, there were 18,190 registered doctors spread over the five divisions of the Register: General, Specialist, Visiting EEA practitioners, Trainee Specialist and Supervised Division.

Strategic Objectives

The Medical Council Strategic Objectives are set out in detail in the *Statement of Strategy 2010 – 2013*. These set the operational direction and functions for the organisation over the period.

Strategic objectives:

1. Set and monitor standards for medical education and training, conduct and ethics:
 - Define and publish appropriate standards for undergraduate, intern and postgraduate education, training and assessment.
 - Develop and implement a process to review education and training standards to ensure ongoing appropriateness.
 - Review all programmes, schemes and education and training bodies to ensure compliance with the Council's education, training and professional competence standards.
 - Ensure an appropriate process for assessment and registration of other EU and non-EU doctors.
2. Facilitate doctors in attaining and maintaining their registration:
 - Ensure the appropriateness of the registration framework, including the divisions and processes relating to registration and retention of registration.
 - Provide ongoing advice to doctors on matters relating to the register, appeals, inquiries and other relevant areas.
 - Support doctors in the integration of the 'Guide to Professional Conduct and Ethics' into their professional practice.
 - Provide ongoing monitoring of doctors with conditions attached to their registration and facilitate compliance as appropriate.
 - Support doctors who have relevant medical disabilities, or associated health-related conditions, to maintain their registration during illness and recovery.
3. Set and monitor standards for maintenance of professional competence:
 - Develop and implement professional competence schemes.
 - Develop and implement a process to review the effectiveness of the professional competence schemes and make improvements as required.
 - Develop and implement a process for remediation of doctors following non-compliance with professional competence standards.
4. Take appropriate action to protect the public where standards are not met by individual practitioners:
 - Promote the process for employers and other healthcare professionals to bring appropriate concerns to the attention of the Medical Council.
 - Ensure the ongoing delivery of effective, fair and transparent complaints processes.
5. Engage proactively with the public, the profession and other stakeholders:
 - Develop and implement a comprehensive strategy for public engagement.
 - Develop and implement a comprehensive strategy for engagement with the medical profession.
 - Develop and implement a comprehensive strategy for engagement with other stakeholder groups.
6. Enable effectiveness through appropriate internal systems and processes:
 - Ensure a focus on excellence in people management and personal development for Council members and staff as appropriate.

- Develop and implement an equality and diversity policy relating to all internal and external processes and engagements.
- Embed a 'service-user' focus within the functions and activities of the Medical Council.
- Ensure that organisational processes are effective and user-friendly.
- Ensure that appropriate corporate governance systems and structures are in place and fully comply with internal and external standards.
- Ensure ongoing financial security of the Medical Council.
- Optimise the use of Medical Council resources.

As part of the planning process the development of a new Statement of Strategy for the next five-year Term of Office has commenced and will be finalised with the new membership cohort.

Operational Context and Challenges for 2013

This plan has been framed within a challenging fiscal and human resources environment. To allocate and use our finite resources effectively, consideration continues to be given to our primary focus on patient safety in addition to supporting the professionalism of doctors, delivery of quality services, adherence to mandatory legislative requirements and directives, risk issues and other considerations such as:

- Objectives and priorities in the Medical Council Statement of Strategy 2010 – 2013
- The Medical Council's Financial Outturn 2012 and the forecasted Financial Position for 2013
- Various national strategic and policy documents.

In developing this Business Plan the Medical Council has, where possible, identified the impact that operating challenges and risks could have on its delivery.

These include:

Business Plan Implementation: This is the third full year of business planning for the Medical Council and again its scale is challenging. A summary report on the key highlights and activities completed as part of the 2012 Business Plan is contained in Appendix 1 of this document. Detailed reporting will be provided in the Medical Council's Annual Report 2012. The plan contains a number of new commitments for delivery by the Executive and requires a high degree of support for implementation. This plan will be reported on and monitored against the Balanced Scorecard, the targets for which were established through a process in 2011 and cover areas such as:

- People – Implementation of a system of Performance Management and Development for all staff and development of an organisational Training and Development Plan;
- Finance and Corporate – Identification of diversified revenue sources and increased operational efficiencies;
- Systems and Processes – Utilisation of a series of metrics established in 2011 to closely monitor implementation of core regulatory functions to ensure their efficiency and effectiveness.

Staff numbers: The impact of the general moratorium on recruitment and promotion continues to be addressed through mapping staff resources to operational need, redeploying staff where necessary, automation of processes and outsourcing of discrete tasks/projects. In line with the Croke Park Agreement and its directions a number of HR initiatives have been implemented.

Financial Resourcing: 2013 will see a concentrated emphasis on continuous financial monitoring and the monitoring of recently introduced procurement processes. A continued focus on tight controls over expenditure, including a programme of cost reduction measures to drive down costs, and a continued exploration of diverse income streams will take place. Cooperation across the organisation and with the profession will continue in 2013 to ensure maximum accessibility by the profession to the Online Portal for Doctors (OPD). This will facilitate an increase in payments and completion of the annual retention process through the online system.

Legal challenges/appeals: The broader range of decision-making functions vested with the Medical Council may lead to an increased number of legal challenges or appeals being taken in 2013. In addition to ensuring the robustness of processes and procedures, a reserve fund, in line with practice adopted by other similar

regulatory bodies, has been ring fenced for this purpose. Following a procurement process a revised contract for legal services commenced operation in 2012.

In addition to these identified challenges a number of legislative challenges are facing the Council including the introduction of compulsory professional indemnity under the proposed Professional Indemnity Bill.

Medical Workforce Planning: This continues to create challenges for the Medical Council to respond to employer demands relating to the registration of doctors.

Operational challenges and risks will continue to arise as 2013 progresses and the Executive will continuously monitor their impact taking corrective action, including adjustment of the Business Plan, where significant issues arise.

Our work and the wider health system

To deliver the potential of our Business Plan, the Medical Council is cognisant of the wider health system as well as our own strategic objectives. We take into account national and international developments in medical regulation and health system reform, and we work with relevant bodies to deliver change for the benefit of the public and registered medical practitioners.

Building a culture of patient safety in Ireland:

Council's role is to protect the public by promoting and ensuring the highest standards amongst doctors. The Medical Council Statement of Strategy 2010-2013 outlines our strategic objectives for the current term of Council. A number of Council initiatives have been driven with patient safety at the forefront of our policies and processes:

- The Medical Council is a signatory to the Patient Safety First Initiative which was established to “provide a common identity under which organisations can commit to prioritising above all other priorities, the safety of patients and the quality of care they receive”. We strongly support this initiative for the promotion of patient safety, which is a primary driver in our activities and with Council's objectives in the Statement of Strategy.



- The Medical Council continued to be involved in a group established by the Ombudsman's Office to assist in the development of a website for members of the public which provides guidance on how to make a complaint/raise a concern about health and social care services in Ireland. This guide is available at <http://www.healthcomplaints.ie/>
- The National Clinical Effectiveness Committee (NCEC) was established under the Patient Safety First initiative to “provide a framework for national endorsement clinical guidelines and audit to optimise patient care” (<http://www.patientsafetyfirst.ie/index.php/national-clinical-effectiveness-committee.html>). The Director of Professional Development and Practice represents the Medical Council on this Committee and ensures that its work links with the Medical Council's new role in ensuring that doctors maintain professional competence.
- The Council's A/Director of Regulation & Legal Advisor is a member of the Irish Medicines Board's (IMB) *Consultative Panel on the Legal Classification of Medicines* which has been established to assist the IMB in their review of licensing of prescription-only or over-the-counter medicines.
- The Medical Council's CEO is a member of a Working Group on Retention of Medical Talent in Ireland, led by the Forum of Postgraduate Medical Training Bodies and the Advisory Group to the Minister for Health on the development of a new Specialist Grade.

Reform of medical education and training in Ireland:

The Council has a lead role in the regulation and quality assurance of undergraduate and postgraduate education and training in Ireland. We work closely with the HSE (e.g. via the Tripartite Group), universities and

medical schools (e.g. via the Bilateral Meetings with Deans), the postgraduate training bodies (e.g. via the Tripartite Group), the Department of Health and the Department of Education and Skills (e.g. dialogue re national and international regulatory and quality assurance initiatives. This includes involving major stakeholders on all four education and training sub-committees (including those on setting and monitoring standards, examinations and internship), regular stakeholder meetings and representation of the Medical Council on major national fora.

Independent assessors from Ireland and other jurisdictions are a key part of Council's evaluation and accreditation teams as they bring a fresh perspective and subject-specific expertise.

Partnerships for better regulation:

The Medical Council has strengthened links with the Health Service Executive, the Pharmaceutical Society of Ireland (PSI) and the Irish Medicines Board (IMB) through the mechanism of Memoranda of Understanding. These arrangements have provided a structured framework for continued collaboration on areas of mutual interest and we plan to develop further memoranda with other regulatory bodies. We are also a partner on the Forum of Health and Social Care Regulators which seeks to share best practice and advance common interest for the benefit of the public.

Strengthening international cooperation:

The Medical Council is registered with the EC Internal Market Information Systems (IMI) which helps member states co-operate in a standard way when dealing with requests for information between competent authorities. The IMI system also provides for the issuing of Certificates of Current Professional Status (CCPS) in a standardised format. We continue to share and learn best practice on medical regulation through our membership of the International Association of Medical Regulatory Authorities and collaboration with the International Physician Assessment Coalition and the Coalition for Physician Enhancement.

The Medical Council is a member of the *European Conference of the Orders of the Doctors* (CEOM), established to promote the practice of high quality medicine respectful of patients' needs within the European Union and the European Free Trade Association. The Medical Council cooperates with other participating organisations on action that helps to develop quality standards and common positions in relation to medical ethics and professional conduct, medical regulation, movement of healthcare professionals and training.

The Medical Council is a member of the Association of Regulatory and Disciplinary Lawyers to promote best practice on regulatory law. We are a partner on the *Health Professionals Crossing Borders*, a European cooperative initiative, and implement its "*General Memorandum of Understanding Covering the Proactive and Case-by-Case Exchange of Disciplinary Information between Competent Authorities and Similar Bodies*".

International medical education bodies have played a key role in the quality assurance of medical education. The World Federation for Medical Education (WFME) has been particularly involved and the Head of Education and Training acted as an external advisor on two WFME initiatives. This included work on the 2012 revision of the WFME Global Standards which form the basis of Council's undergraduate standards.

The US Department of Education's National Committee on Foreign Medical Education and Accreditation (NCFMEA) benchmarks the Medical Council's accreditation procedures as meeting the international best practice standards.

Regulatory bodies in other jurisdictions and all major EU medical education organisations e.g. ASME (Association for the Study of Medical Education), AMSE (Association of Medical Schools in Europe) and AMEE (Association for Medical Education in Europe) are contributing to the accreditation process via the assessor pool.

Experts from other jurisdictions contributed to a number of Council events including a Symposium on Education and Training held in August 2012 and the Medical Council's Conference on professionalism in November 2012.

Involvement in the European Network of Medical Competent Authorities (ENMCA) in ensuring coherent application of EU requirements in relation to the registration of medical practitioners, in particular, provides commentary on proposed changes to EU directives/legislation.

Financial Position 2013

	Forecasted 2012 €'000	Budget 2013 €'000
Income	9,370	9,782
Expenditure	9,758	10,671
Operating surplus/(deficit) for the year	-388	-889

Summary of the 2013 Financial Position

The Medical Council has forecasted income of €9.4m for 2012. The Medical Council invoiced approximately 18,000 Doctors in July 2012 amounting to €7.5m covering the retention year July 2012 to June 2013. Budgeted income for 2013 is anticipated to be approximately €9.8m which is a 4% increase on forecasted income for 2012. This is due mainly to an anticipated increase in applications for the General and Supervised Divisions.

Despite significant increases in costs resulting from expanded responsibilities under the Medical Practitioners Act 2007 and increases in the number of complaints received by the Council, the Medical Council has not imposed any increase in fees for the past four years. A review of the annual retention fee will be undertaken in 2013.

It is also important to note that the Medical Council continues to focus on ways of diversifying its revenue base and progress has been made in 2012 in this area. A focus on diversification of revenues including fees for accreditation of undergraduate and postgraduate programmes is being progressed.

Expenditure for 2012 is forecasted to be in the region of €9.8m. Budgeted expenditure for 2013 is €10.7m, a €913k (10.5%) increase on the 2012 forecast.

The main reasons for this increase include:

- An increase in payroll costs through an increase in staff numbers, necessary to discharge the Council's functions.
- Legal costs are budgeted to increase in line with a projected rise in complaints
- Council activities including Council election, induction/training etc.

Some of these increases have been offset by the following reductions in budgeted expenditure:

- A decrease in premises costs through savings including insurance and maintenance costs
- A reduction in operating costs via savings including consultancy fees, and administration costs

The deficit is arrived at after charging depreciation which is a non cash expenditure item but before the FRS17 adjustment for pension liabilities. The surplus reserve in the accounts of the Medical Council is retained to be used to defend a significant legal challenge to any of its decisions. This retention of a material surplus reserve is normal practice for a regulatory body such as Medical Council. In addition this reserve may be used for the purposes of the funding of our premises at Kingram House.

2013 Operational Plans by Directorate

The Executive functions of the Medical Council are organised under three main Directorates which, together with the Office of the CEO, work collaboratively to manage the day-to-day affairs and operations of the organisation. The Office of the CEO incorporates the Council's Communications and Strategy Unit.

The **Directorate of Professional Development and Practice**: This Directorate houses functions which are mapped against the career of a doctor from when a medical student first enters university until the time when a doctor retires from practice. The work of this Directorate is chiefly concerned with ensuring that medical education and training is in line with the highest international standards, that the Register of Medical Practitioners is robust and provides assurance to the public of a doctor's good standing and that doctors are supported to maintain their professional competence throughout their career. The Directorate is led by a Director of Professional Development and Practice and has three main Sections: Education and Training, Registration and Professional Competence.

The **Directorate of Regulation**: The principal functions falling within this Directorate are monitoring the Professional Standards of registered medical practitioners, advising on policy regarding developments in regulatory/compliance matters to inform the work of Council, ensuring compliance with all relevant sections of the Medical Practitioners Act 2007 (as amended) and facilitating the provision of legal advice to the Council, the CEO and Council Directorates. Specific areas of work within the Directorate currently centre on the management of the Council's complaints and inquiries process, the monitoring of conditions imposed on doctors' registration, supporting the Health Sub-Committee and the provision of legal advice. The Directorate is led by the A/ Director of Regulation and has two main Sections: Preliminary Proceedings and Fitness to Practise.

The **Directorate of Finance and Administration**: This Directorate provides cross-organisational support to ensure the effective and efficient implementation of objectives of the Council. The Directorate incorporates the following functions: Financial Planning and Management; Human Resources Management; ICT; Corporate Affairs and Operations. The Directorate is chiefly concerned with key areas such as Risk Management, compliance with statutory reporting in addition to legislative and governance requirements and responsibilities. The Directorate is led by the A/ Director of Finance and Administration and has three main Sections: Finance, Corporate Services & HR and ICT & Operations.

Directorate of Professional Development and Practice

Cross Directorate

Strategic Objective	Intended Outcome	Action	Timeframe
SO 1.4) Ensure an appropriate process for assessment and registration of other-EU and non-EU doctors	Intelligent basis to review of policy on registration in Supervised Division.	Review the experience of registration in the Supervised Division from registrant and supervisor perspectives.	Q1
SO 2.1) Ensure the appropriateness of the registration framework, including the divisions and processes relating to Registration and Retention of Registration	Strategy and policy of Medical Council and other relevant stakeholders related to the practice of medicine in Ireland strengthened by up-to-date intelligence on medical workforce.	Produce medical workforce report based on analysis of ARAF questionnaire and register.	Q1
SO 5) Engage proactively with the public, the profession and other stakeholders	Achievement of strategic objectives across the Professional Development & Practice Directorate enabled by programme of communication and engagement.	Complete survey of employer knowledge and attitudes to registration processes.	Q2
		Establish MOU with key employer groups re registration function.	Q3

		Establish Employer-Medical Council Forum.	Q3
		Continue programme of student/trainee communication and engagement.	Q1-Q4
		Continue programme of communication and engagement individually and collectively with deliverers of basic medical education and training.	Q1-Q4
		Continue programme of communication and engagement individually and collectively with deliverers of specialist medical education and training.	Q1-Q4
		Continue programme of communication and engagement with health service re education and training.	Q1-Q4
		Engage with doctors, employers and public through strategic review of Medical Council Professional Competence arrangements.	Q2
SO 6.4) Ensure that organisational processes are effective and user friendly	Achievement of strategic objectives across the Professional Development & Practice Directorate enabled through better measurement of process, outputs and outcomes.	Monitor KPIs for SoS, BRMP, and management team dashboard.	Q1 – Q4

		Report on Professional Development & Practice Directorate process, outputs and outcomes through Annual Report and other vehicles.	Q2
SO 6.5) Ensure appropriate corporate governance systems and structures are in place and are fully compliant with internal and external standards	Achievement of strategic objectives across the Professional Development & Practice Directorate enabled through effective operation of relevant Committees, Sub-committees and working groups.	Support operation of relevant registration, education & training and professional competence governance structures.	Q1-Q4
	Achievement of strategic objectives across the Professional Development & Practice Directorate enabled through effective risk management.	Establish and maintain Directorate risk register.	Q1

Education and Training

The Education and Training Section supports the Council's functions in setting and monitoring standards in undergraduate, intern and postgraduate education and training in Ireland. Council's quality assurance responsibilities include producing rules, standards, criteria and guidelines for bodies delivering medical education and training. These rules, standards, criteria and guidelines introduce international best practice into the Irish context, and are incorporated into medical education and training. Council undertakes accreditations of medical schools, their programmes and their clinical training sites, ensuring that medical schools provide a firm foundation for graduates' future development; it ensures high standards of training during the first year of a doctor's registration, in internship; it undertakes accreditations of postgraduate bodies and programmes; and determines which medical specialties should be recognised. It then has an ongoing monitoring role to ensure that standards, once achieved, are adhered to and where possible enhanced.

Education and Training issues are considered by the Professional Development Committee (PDC); its sub-committees are the Intern Training Sub-Committee (ITSC), Setting Standards Sub-Committee (SSSC), Monitoring Standards Sub-Committee (MSSC) and the Examinations Sub-Committee (ESC).

This section is led by the Head of Education and Training, supported by two Senior Executive Officers, and four Executive Officers.

Strategic Objective	Intended Outcome	Action	Timeframe
SO 1.1) Define and publish appropriate standards for undergraduate, intern and postgraduate education, training and assessment	Effective and efficient framework in place for regulation of medical education and training in Ireland to promote good professional practice.	Supplement existing Education and Training Standards with thematic guidance in prioritised areas.	Q4
	Peer and patient feedback questionnaires validated for Irish context available for use in specialist training and maintenance of professional competence.	Review and adapt peer and patient questionnaire feedback for use in Irish context and consider implementation options.	Q4

<p>SO 1.2) Develop and implement a process to review education and training standards to ensure ongoing appropriateness</p>	<p>Maintenance and continual improvement of framework for regulation of medical education and training that promotes good professional practice maintained and continually improved.</p>	<p>1. Review undergraduate and postgraduate accreditation standards.</p> <p>2. Prepare for and participate in an external review of the Medical Council's undergraduate accreditation standards and procedures by the NCFMEA.</p>	<p>Q4</p> <p>Q2</p>
<p>SO 1.3) Review all programmes, schemes and education and training bodies to ensure compliance with the Council's education, training and professional competence standards</p>	<p>Quality of basic medical education and training in Ireland assured and continually improved to promote good professional practice.</p>	<p>1. Monitor basic medical education programmes and delivering bodies <i>via</i> Annual Return and implement regulatory action as required.</p> <p>2. Implement 2013 schedule for approval of basic medical education programmes and delivering bodies.</p>	<p>Q2</p> <p>Q2</p>
	<p>Quality of specialist medical education and training in Ireland assured and continually improved to promote good professional practice.</p>	<p>1. Implement 2013 schedule for approval of bodies for delivery of programmes of specialist training.</p> <p>2. Implement 2013 schedule for approval of programmes of specialist training in conjunction with approval of bodies for delivery.</p> <p>3. Devise and implement new schedule for approval of additional programmes of specialist training.</p> <p>4. Design and develop intelligence and risk-based criteria and accompanying process for evaluation of sites for specialist training.</p> <p>5. Implement intelligence and risk-based programme for targeted evaluation of sites for specialist training.</p>	<p>Q2</p> <p>Q2</p> <p>Q4</p> <p>Q3</p> <p>Q4</p>

	Quality of basic and specialist medical education and training in Ireland assured and continually improved to promote good professional practice.	<p>1. Design and develop programme for monitoring selected cohorts of students' and trainees' perceptions of defined aspects of their education and training, identifying potential implications for regulation of education and training in Ireland.</p> <p>2. Commence above programme for monitoring selected cohorts of students and trainees.</p>	<p>Q2</p> <p>Q4</p>
	Promotion of excellence in medical education and training in Ireland to ensure good professional practice	<p>1. Host Annual Medical Council Education and Training Symposium.</p> <p>2. Design and develop a medical education and training research award.</p> <p>3. Develop and publish situational analysis of Medical Education, Training and Professional Development in Ireland based on activities under Part 10 and Part 11 of the MPA 2007.</p>	<p>Q3 - Q4</p> <p>Q2</p> <p>Q2 / Q3</p>
	Good professional practice supported through establishment of an appropriate range of new recognised specialities.	Continue to implement programme of recognition of appropriate aspirant specialities.	Q4
	Quality of anatomy departments in Ireland assured.	Continue to implement programme of licensing of anatomy departments.	Q4

<p>SO 1.4) Ensure an appropriate process for assessment and registration of other-EU and non-EU doctors</p>	<p>Effective and efficient framework in place for assessment of competence of registration applicants so as to ensure good professional practice.</p>	<p>1. Review and revise quality assurance framework for Medical Council Pre-Registration Examination System (PRES) and Examination for the Supervised Division (ESD) or equivalent.</p> <p>2. Monitor quality assurance framework for Medical Council Pre-Registration Examination System (PRES) and Examination for the Supervised Division (ESD) or equivalent.</p> <p>3. Continue operation of PRES and ESD (or equivalent), incorporating revised quality assurance framework.</p>	<p>Q2</p> <p>Q4</p> <p>Q1-Q4</p>
<p>SO 2.1) Ensure the appropriateness of the registration framework, including the divisions and processes relating to Registration and Retention of Registration</p>	<p>Quality of places delivering intern training in Ireland assured and continually improved to promote good professional practice.</p>	<p>Continue programme of approval and monitoring of places delivering intern training.</p>	<p>Q4</p>
	<p>Quality of trainees completing intern training in Ireland assured to promote good professional practice.</p>	<p>Continue programme of issuance of Certificates of Experience.</p>	<p>Q1, Q3</p>

Registration

The main functions of the Registration Section are: processing applications for general, specialist, trainee specialist, visiting EEA, supervised division and internship registration; implementation of policies and decisions set by the Registration Working Group and the Standards in Practice Committee; maintenance of the register; assisting with registration-related queries; attending and contributing to related external Irish and EU fora; and liaising with stakeholders. Registration related Committees and Working Groups are the Standards in Practice Committee (SIPC), and the Registration Working Group (RWG).

This section is led by the Head of Registration, supported by two Senior Executive Officers, eight Executive Officers and four Clerical Officers

Strategic Objective	Intended Outcome	Action	Timeframe
SO 1.4) Ensure an appropriate process for assessment and registration of other-EU and non-EU doctors	Public protected and good professional practice promoted through clear and effective policy framework in place for registration of non-Irish qualified registration applicants.	Policy for registration in various divisions reviewed and necessary improvements implemented.	Q2
SO 2.1) Ensure the appropriateness of the registration framework, including the divisions and processes relating to Registration and Retention of Registration	Public protected and good professional practice promoted through quality process for management of registration applications.	<ol style="list-style-type: none"> 1. Complete high-level review of management of registration process. 2. Develop and implement programme for improvement of management of registration process. 3. Develop and implement framework for quality assurance and continuous quality improvement of management of registration process. 4. Complete implementation of redesigned Specialist Division Level 5 process. 	<p>Q2</p> <p>Q3 – Q4</p> <p>Q3 – Q4</p> <p>Q2</p>

	Public protected and good professional practice promoted through timely and effective registration of new applicants who are fit to practice.	<ol style="list-style-type: none"> 1. Continue programme for assessment of new registration application. 2. Cooperate and coordinate with HSE to ensure timely and effective registration of doctors. 	<p>Ongoing</p> <p>Q1-Q3</p>
	Public protected and good professional practice promoted through timely and effective maintenance of register.	<ol style="list-style-type: none"> 1. Continue programme for annual retention of registration. 2. Continue programme for ongoing maintenance of register. 	<p>Q3-Q4</p> <p>Ongoing</p>
SO 6.3) Embed a 'service-user' focus within the functions and activities of the Medical Council	Continuous improvement of management of registration process driven by applicant feedback	<ol style="list-style-type: none"> 1. Publish charter of registration applicant expectations. 2. Develop and implement system for collection of registration applicant feedback on routine basis and in response to concerns. 3. Monitor registration applicant feedback and use intelligence to drive continuous improvement of registration process. 	<p>Q3</p> <p>Q3-Q4</p> <p>Q3-Q4</p>
SO 6.4) Ensure that organisational processes are effective and user friendly	OPD established as routine platform for registrant interaction with Medical Council	Develop and implement strategy and action plan for maximising registrant use of the Online Portal for Doctors (OPD)	Q1

Professional Competence

The Professional Competence Section is responsible for developing, implementing, and operating a system for the regulation of the maintenance of professional competence in line with Council policy. This is achieved through overseeing schemes operated by recognised bodies to support doctors to maintain professional competence and by assessing the performance of doctors where additional assurance regarding maintenance of professional competence is required by the Medical Council. The Professional Competence Committee directs and oversees the Medical Council's professional competence duties under Part 11 of the Medical Practitioners Act 2007.

This section is led by the Director of Professional Development and Practice, supported by one Senior Executive Officer, two Executive Officers and one Clerical Officer.

Strategic Objective	Intended Outcome	Action	Timeframe
SO 3.1) Develop and implement professional competence schemes	Public protected, trust in profession maintained and good professional practice promoted through doctors maintenance of professional competence	1. Continue programme to manage arrangements with recognised bodies for operation of professional competence scheme line with Medical Council standards.	Q3
		2. Continue programme to monitor and audit doctors maintenance of professional competence.	Q2
	Public protected, trust in profession maintained and good professional practice promoted through assessment of doctors professional competence in response to concerns	Continue to operate performance procedures to handle referrals of doctors whose performance is a cause of concern.	Q1-Q4
	Capacity and capability to assess doctors professional competence in response to concerns maintained and continually improved	1. Develop and implement case management ICT solution.	Q2
		2. Design, develop and deliver assessor maintenance of knowledge/skills programme	Q3
		3. Re-examine options for management of referrals	Q4

		<p>where model of workplace based assessment is not feasible or suitable.</p> <p>4. Design, develop and implement quality assurance framework for performance assessment.</p>	Q4
SO 3.2) Develop and implement a process to review the effectiveness of the professional competence schemes and make improvements as required	Public protected, trust in profession maintained and good professional practice promoted through fit-for-purpose maintenance of professional competence strategy	<p>1. Complete high-level review of current maintenance of professional competence strategy.</p> <p>2. Next phase strategy for maintenance of professional competence reflected in overall Statement of Strategy</p>	<p>Q2</p> <p>Q4</p>
SO 3.3) Develop and implement a process for remediation of doctors following non-compliance with professional competence standards	Public protected, trust in profession maintained and good professional practice promoted through remediation of doctors professional competence in response to concerns	Continue to operate performance procedures to handle referrals of doctors whose performance is a cause of concern, including remediation	Q1-Q4

Directorate of Regulation

Professional Standards

The main functions of the Professional Standards Section are to support the work of the Preliminary Proceedings (PPC) and Fitness to Practise (FTPC) Committees, Ethics Working Group, Monitoring Working Group and Health Sub-Committee. This includes corresponding with regard to complaints files, organising FTPC hearings, preparing documentation for meetings/ hearings and dealing with the correspondence following those meetings/ hearings.

This Section is led by the A/Director of Regulation who is also Legal Adviser, supported by two Senior Executive Officers, two Executive Officers, six Executive Case Officers (EO grade) and one Clerical Officer.

Strategic Objective	Intended Outcome	Action	Timeframe
SO 5.3) Develop and implement a comprehensive strategy for engagement with other stakeholder groups	Medical Council to provide input into DH policy regarding collaboration among Healthcare Regulatory Bodies	Continue communication with key personnel in DOH.	Q1-Q4
	Medical Council to liaise with Department officials on key legal cases and legislation affecting the Council's work.	Continue communication with key personnel in DH.	Q1 -Q4
SO 6.5) Ensure that appropriate corporate governance systems and structures are in place and fully comply with internal and external standards	Audit of Act & procedures completed	Review Act and procedures for all sections.	Q1
SO 2.3) Support doctors in the integration of the 'Guide to Professional Conduct and Ethics' in	Doctors supported to integrate the Ethical Guide into their professional practice. Commence review of 7th edition of The Ethical Guide.	1. Further develop a two-year project plan to map all key areas for the development of guidance and information which illustrate to the profession how the principles in 'Guide to Professional Conduct and Ethics' apply in	Q1-Q4

their professional practice		<p>practice.</p> <p>2. Use consultation with the profession and key learning from the Council's complaints and inquiry process to inform the development of the plan, its individual components and Implement year one of the plan in 2013 in line with key metrics.</p> <p>3. Appoint members of Working Group per Section 7 of the Act to specify standards of practise and to review the 7th Edition of the Ethical Guide.</p>	
SO 2.3) Provide ongoing monitoring of doctors with conditions attached to their registration and facilitate compliance as appropriate	Doctors with conditions attached to their registration monitored on an ongoing basis and compliance facilitated as appropriate.	Doctors with conditions attached are monitored, documentary evidence sought where applicable and conditions reviewed. Referral for complaint if there is a failure to comply.	Q1-Q4
SO 2.4) Support doctors who have relevant medical disabilities, or associated health-related conditions, to maintain their registration during illness and recovery	Doctors who have relevant medical disabilities, or associated health-related conditions, supported to maintain their registration during illness and recovery.	<p>1. Registered medical practitioners with relevant medical disabilities and health disabilities are supervised with oversight by the Health Sub-Committee.</p> <p>2. Implement all recommendations arising from review of Health Sub-Committee.</p>	<p>Q1-Q4</p> <p>Q3</p>
SO 2.5) Promote the process for employers and other healthcare professionals to bring appropriate concerns to the attention of the Medical Council	<p>Develop Memorandum of understanding with HSE to bring appropriate concerns about doctors to the attention of Council.</p> <p>Process in place to support employers and other healthcare professionals to bring appropriate concerns to the attention of the Council.</p>	<p>1. Draft and agree terms of MOU with HSE.</p> <p>2. Promote Health Professional's Guide to referring a doctor to the Medical Council.</p>	<p>Q3</p> <p>Q3</p>

<p>SO 4.1) Ensure the ongoing delivery of effective, fair and transparent complaints processes</p>	<p>Complaints process & procedures published and operational for Preliminary Proceedings Committee Procedures.</p>	<p>1. Establish an effective, fair and transparent complaints process for the PPC compliant with MPA 2007 & consistent with the principles of natural justice.</p> <p>2. Receive and process Annual Declarations concerning doctors' compliance with professional indemnity requirements, disciplinary sanctions, criminal convictions and/or relevant medical disabilities.</p>	<p>Q1-Q4</p> <p>Q3-Q4</p>
<p>SO 4.2) Ensure the ongoing delivery of effective, fair and transparent complaints processes</p>	<p>Complaints process & procedures published and operational for Fitness to Practise procedures</p> <p>Principles and procedures for the imposition of sanctions developed and operational.</p> <p>All policies, procedures and outcomes concerning Part 7, 8 and 9 published on website following approval by Council.</p>	<p>1. Establish an effective, fair and transparent complaints process for the FTFC compliant with MPA 2007 & consistent with the principles of natural justice.</p> <p>Establish Policy & Procedures Group for FTFC.</p> <p>2. Continuously review and improve principles and procedure document to support the imposition of sanctions by Council concerning a doctor's registration following completion of inquiry.</p> <p>3. All policies and procedures concerning Council complaints and inquiry processes including findings of FTFC and sanctions imposed by Council published in a timely fashion on website following approval by council.</p>	<p>Q1-Q4</p> <p>Q1-Q4</p> <p>Q1-Q4</p>
<p>SO 5.2) Develop and implement a comprehensive strategy for engagement with the medical profession</p>	<p>Effective engagement with other healthcare regulators to share knowledge and improve processes.</p>	<p>Develop and implement strategy for engagement with other stakeholder groups to share knowledge in relation to matters of common interest.</p>	<p>Q1-Q4</p>

<p>SO 6.1) Ensure a focus on excellence in people management for Council members and staff as appropriate</p>	<p>To ensure that all members are appropriately trained and skilled in the procedures and processes of PPC, FTPC and Council</p>	<p>Work closely with the appointed training provider to ensure that the training programmes are fit for purpose.</p>	<p>Q1- Q4</p>
<p>SO 6.1) Ensure a focus on excellence in people management for Council members and staff as appropriate</p>	<p>To ensure that the members have the appropriate knowledge and training concerning the MPA 2007 and the procedures of the Health Sub Committee.</p>	<p>Design and deliver appropriate training modules for members.</p>	<p>Q2-Q4</p>
<p>SO 6.1) To ensure an excellence in people management and personal development for Council members and staff as appropriate.</p>	<p>To ensure that the members have the appropriate knowledge and training concerning the MPA 2007 and the procedures of the Monitoring Group for the monitoring of conditions.</p>	<p>Design and deliver appropriate training modules for members.</p>	<p>Q2-Q4</p>
<p>SO 6.1) Ensure a focus on excellence in people management and personal development for Council members and staff as appropriate</p>	<p>Appropriate support provided to complainants & doctors concerning the Council's complaints and inquiry process.</p>	<p>Undertake a review of all correspondence, literature and on-line material to ensure the Council is communicating in an effective manner with complainants & doctors. Include feedback from patient support and advocacy groups and doctors' representative groups to inform the review process.</p> <p>Implement enhancements and amendments in line with review.</p>	<p>Q1-Q4</p>

<p>SO 6.3) Embed a 'service-user' focus within the functions and activities of the Medical Council</p>	<p>Data collection processes in place.</p>	<p>To access appropriate, relevant and timely data which will provide feedback on the effectiveness/success of operational activities and be supported by metrics to measure these activities.</p>	<p>Q1-Q4</p>
<p>SO 6.4) Ensure that organisational processes are effective and user friendly</p>	<p>Effective committee support in fulfilment of Council's statutory responsibilities under Parts 7, 8 & 9 of MPA 2007.</p>	<p>Facilitate relevant Committees and Working Groups through effective support and administration.</p>	<p>Q1-Q4</p>
<p>SO 6.5) Ensure that appropriate corporate governance systems and structures are in place and fully comply with internal and external standards</p>	<p>Risks managed in accordance with the Risk management policy and procedures.</p>	<p>Regular review and management of relevant risks.</p>	<p>Q1-Q4</p>

Directorate of Finance and Administration

Corporate Services and Human Resources

The main functions of the Corporate Services and Human Resources Section are: providing liaison and meeting support to Council, advising on and ensuring compliance with all legislative requirements across the organisation, managing the Reception function, co-ordinating and managing all aspects of publications, managing the freedom of information function in addition to corporate events for the Council.

An external HR Consultant works in conjunction with the Management team and a part-time Senior Executive Officer providing all internal HR advice and support and managing the ongoing HR activities within the Medical Council.

This section is led by the Head of Corporate Services & HR who is also Secretary to Council, supported by two Senior Executive Officers and 2.5 Clerical Officers.

Strategic Objective	Intended Outcome	Action	Timeframe
SO 6.5) Ensure that appropriate corporate governance systems and structures are in place and fully comply with internal and external standards	<p>1.Election process managed effectively and on a timely basis with new Council members elected in accordance with the legislation</p> <p>2. Nomination process managed effectively to ensure timely appointment by the Minister for Health.</p> <p>3.Appointment process managed effectively to ensure timely appointment by the Minister for Health.</p>	<p>Process for:</p> <p>1. Elections, 2. Nominations and 3. Appointments to new Council Term of Office in place and appropriate project management system in effect.</p> <p>Links with DoH established and ongoing communications carried out.</p>	Q1 - Q2
SO 6.1) Ensure a focus on excellence in people management and personal development for Council members and staff as appropriate	Successfully deliver an induction programme to all Council members in advance of the first Council meeting.	Deliver a practical and informative induction programme to educate Council Members of the functions, responsibilities, Corporate Governance, Strategic and Business Plan Objectives of Council.	Q2

SO 5) Develop a comprehensive strategy for engagement with the public, the profession + other stakeholders	Management of Council events to ensure efficiency and delivery of desired outcomes.	All Council events are project managed and expected outcomes achieved.	Q1- Q4
SO 5) Develop a comprehensive strategy for engagement with the public, the profession + other stakeholders	Planning for MC Conference is conducted.	Planning is completed.	Q4
SO 5) Develop a comprehensive strategy for engagement with the public, the profession + other stakeholders	EAPH Conference is successfully co-hosted with the ICGP, April 2013	Successfully co-host the conference event in collaboration with the ICGP and EAPH.	Q1 -Q2
SO 5) Develop a comprehensive strategy for engagement with the public, the profession + other stakeholders	Medical Council's End of Term Report is successfully published and launched.	Publication of Council Achievements Report and successful launch.	Q2 (May)
SO 6.5) Ensure that appropriate corporate governance systems and structures are in place and fully comply with internal and external standards.	Annual Report 2012 is developed for approval by the Minister and subsequent publication	Develop content of AR for approval by SMT and Council prior to submission to the DoH for approval by Minister, Launch and publication of report	Q1 - Q2

SO 6.5) Ensure that appropriate corporate governance systems are in place and fully comply with internal and external standards	BP 2014 is developed for approval by SMT and Council and submission to Minister prior to publication on the MC web	Develop content of BP 2014 for approval by SMT and Council prior to submission to the DoH for approval by Minister and publication of BP on website.	Q3-Q4
SO 6.5) Ensure that appropriate corporate governance systems and structures are in place and fully comply with internal and external standards	Effective planning for 8 scheduled meetings, extraordinary meetings, away days and training days.	All Council meetings are conducted as per the schedule of meetings and extraordinary unscheduled meetings are quorate. All educational events for MC members are carried out as per requirements.	Q1 - Q4
SO 6.3) Embed a 'service-user' focus within the functions and activities of the Medical Council	Review of Committees and Working Group Structures and processes completed and implemented plan developed subject to Council approval.	Following Council approval implement changes to the ToRs and structures as per review findings.	Q1- Q2
SO 6.5) Ensure that appropriate corporate governance systems and structures are in place and fully comply with internal and external standards	Compliance with the Code of Ethics in Practice for the Governance of State Bodies and all other relevant legislation is adhered to and a Register of Legal Obligations is maintained.	1. Register of Legal Obligations is maintained ensuring that the MC is in compliance with all relevant legislation. 2. Comprehensive Corporate Governance Compliance Checklist to be developed for presentation to incoming Council members.	Q1 - Q4 Q2
SO 6.4) Organisational processes are effective and user friendly	Online workforce management system is in place and effective, providing appropriate supports to line managers and SMT with enhanced reporting capabilities to address absence levels and in managing their staff.	Online HRM System provides support to line managers in managing their relevant teams. Enhanced reporting capabilities are provided to analyse and address absence levels. Training and support is provided to ensure knowledge of system is sufficient to provide up to date reporting on relevant HR issues to SMT.	Q1 - Q4

<p>SO 6.1) Ensure a focus on excellence in people management and personal development for Council members and staff as appropriate</p>	<p>Based on the output from the PMDS and other organisational considerations, develop a training and development plan through the on-line HRM solution and ensure delivery of appropriate and relevant training programmes and related initiatives</p>	<p>1. Annual PMDS is conducted and analysed, information from which is input into the Training and Development Plan.</p> <p>2. T&D Plan is in place and appropriate training is delivered to staff.</p>	<p>Q1</p> <p>Q1-Q4</p>
<p>SO 6.1) Ensure a focus on excellence in people management and personal development for Council members and staff as appropriate</p> <p>SO 6.7) Optimise the use of Medical Council resources</p>	<p>Provide a high quality human resource management service, including in areas of recruitment and selection, induction and staff engagement, employee support and welfare, to support an appropriate and effective industrial relations/ human resource management culture in the organisation</p>	<p>Develop, promote and manage quality HR management processes and procedures through the on-line HRM solution.</p>	<p>Q1 - Q4</p>

Finance

The function of the Finance Section is to manage the finances of the Medical Council in a prudent and efficient manner and to ensure that the Council meets all of its responsibilities in legislation and applies best practice to the governance of its affairs. Some of the main activities include: maintaining accounts and records; processing payment of fees; processing supplier invoices; managing the Local Government Superannuation scheme; preparing the budget; payment of staff salaries; and publishing of financial statements. Finance related Committee and Working Groups are the Audit Committee (AC), Remuneration Working Group (RemWG).

This Section is led by the A/Director of Finance& Administration, supported by two Senior Executive Officers, one Executive Officer and one Clerical Officer.

Strategic Objective	Intended Outcome	Action	Timeframe
SO 6.6) Ensure ongoing financial security of the Medical Council	Cost savings and efficiencies achieved on non fixed operational overheads.	Review of all cost items to identify areas to achieve savings and efficiency. Implement robust budget process and monitor sectional costs against budgets.	Q1-Q4
SO 6.6) Ensure ongoing financial security of the Medical Council	Decision to purchase or continue to rent Kingram House concluded.	Undertake negotiations and legal activities to achieve a significant reduction in annual rent and link to market value of property.	Q1-Q4
SO 6.4) Ensure that organisational processes are effective and user friendly	Directorate/ Sectional Budgets set and managed.	Set Directorate/Sectional budgets giving responsibility to each head of section to manage their individual sectional budgets.	Q1-Q4

SO 6.5) Ensure that appropriate corporate governance systems and structures are in place and fully comply with internal and external standards	Effective Committee support in fulfilment of Council's statutory responsibilities MPA 2007.	Facilitate Committees and Working Groups through effective support and administration.	Q1-Q4
SO 6.4) Ensure that organisational processes are effective and user friendly	Data collection processes in place.	To access appropriate, relevant and timely data which will provide feedback on the effectiveness/ success of operational activities and be supported by metrics to measure these activities.	Q1-Q4
SO 6.4) Ensure that organisational processes are effective and user friendly	Automation of Expenses payments.	Implement software to automate management of expense claims.	Q1
SO 6.4) Ensure that organisational processes are effective and user friendly	Increased interaction by the profession with the Online Portal for Doctors.	Cooperate with other sections to ensure maximum accessibility to the profession to Online Portal for Doctors.	Q1-Q4
SO 6.6) Ensure ongoing financial security of the Medical Council	Risks managed in accordance with the risk management policy and procedures.	Regular review and management of relevant risks.	Q1-Q4
SO 6.1) Ensure that organisational processes are effective and user friendly	Integra Finance Upgrade.	Upgrade of Integra Finance system.	Q1

SO 6.1) Ensure that organisational processes are effective and user friendly	Manage internal Audit process.	Internal audit assignments carried out and reported to Audit Committee.	Q1- Q4
SO 6.1) Ensure that organisational processes are effective and user friendly	Publish annual audited accounts.	Prepare and have audited annual accounts.	Q1

Operations & ICT

The main functions are to control the delivery of technology, operations and services to various lines of the business and to oversee technology related changes to operational and business processes. ICT specific responsibilities include system conversion, infrastructure upgrades, project management and system maintenance whilst operationally some areas the section is responsible for include, procurement procedures, document management, Health & Safety and preventative maintenance.

This section is led by the Head of Operations & ICT, supported by two Executive Officers and one Services Officer.

Strategic Objective	Intended Outcome	Action	Timeframe
SO 6.4) Ensure that organisational processes are effective and user friendly SO 6.7) Optimise the use of Medical Council resources	Knowledge gathered to inform the design and roll out of the Council's Corporate Procurement Plan 2013	Conduct Procurement Performance review 2012	Q1
SO 6.4) Ensure that organisational processes are effective and user friendly SO 6.7) Optimise the use of Medical Council resources	Roll out of Corporate Procurement Plan (CPP) 2013-2015	Design and roll out CPP 2013-2015 incorporating High level goals and objectives and mapping organisation wide procurement calendar.	Q1-Q2
SO 6.6) Ensure ongoing financial security of the Medical Council	Management of procurement processes 2013	Manage upcoming planned procurements 2013. Tenders include Security, PR, DR, IT (desktops).	Q1-Q4

SO 6.6) Ensure ongoing financial security of the Medical Council	Improved management of the company's fixed asset data and improved overall fixed asset accounting process	Administration and Maintenance of Fixed Asset Management System.	Q1-Q4
SO 6.6) Ensure ongoing financial security of the Medical Council	Improved purchasing controls	Administration and Maintenance of PO system.	Q1-Q4
SO 6.6) Ensure ongoing financial security of the Medical Council	Contract Compliance and management is monitored on an ongoing basis	Maintain centralised contract database and oversee contract administration, monitoring and review.	Q1-Q4
SO 6.5) Ensure that appropriate corporate governance systems and structures are in place and fully comply with internal and external standards	Medical Council is compliant with all Health and Safety legislation	Carry out regular H&S Audits.	Q1-Q4
SO 6.5) Ensure that appropriate corporate governance systems and structures are in place and fully comply with internal and external standards	Preventative Maintenance (PM) Schedule in place for Lynn House and Kingram Place	Tender for new PM supplier and ensure PM Supplier carries out PM Plan and Audit same on a Monthly basis.	Q1-Q4
SO 6.4) Ensure that organisational processes are effective and user friendly	All desktops updated from Windows XP to Windows 7	Development, UAT and phased deployment of Windows 7 professional desktop image to all users to replace Windows XP.	Q3
SO 6.4) Ensure that organisational processes are effective and user friendly	Unified specific aspects of Telecommunications	Upgrade of phone system and new software system to facilitate remote video conference.	Q3

SO 6.4) Ensure that organisational processes are effective and user friendly	Implementation of priority components of Disaster Recovery Plan	Assess DR plan to identify critical components for implementation in 2013.	Q1
SO 6.4) Ensure that organisational processes are effective and user friendly	Go Live with Online Portal Multi Browser Support	Development of Online Portal for use in most popular browsers.	Q1
SO 6.4) Ensure that organisational processes are effective and user friendly	Online Council Election System	Development of Online Election system that integrates with back-end registration system, NICS.	Q1
SO 6.4) Ensure that organisational processes are effective and user friendly	Closure of ICT infrastructure Supports to Old Council.	Termination of access rights where appropriate, redeployment of hardware.	Q2
SO 6.4) Ensure that organisational processes are effective and user friendly	ICT infrastructure support to new Council.	Creation of new accounts, access rights and distribution of training and devices.	Q2
SO 6.4) Ensure that organisational processes are effective and user friendly	Enhanced Mobile control and supports.	System to remotely track, manage and erase devices.	Q2
SO 6.4) Ensure that organisational processes are effective and user friendly	Upgrade of Printing facilities.	Replacement of printers.	Q3

SO 6.4) Ensure that organisational processes are effective and user friendly	Integra Finance Upgrade.	Upgrade of Integra Finance system.	Q1
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Office of the CEO
Communications and Strategy

The Communications and Strategy function sits under the remit of the Office of the CEO and coordinates and manages all aspects of Medical Council communications.

The main functions of Communications and Strategy are: overseeing communications with the public, profession and other stakeholders, including the development of messaging for use in media relations work, the Medical Council website and various publications; managing media relations and public affairs on behalf of the Council, advising on and developing materials for internal communications; the development and implementation of the Medical Council’s strategy.

This function is led by the CEO and incorporates the Communications Manager supported by one Executive Officer and one Clerical Officer.

Strategic Objective	Intended Outcome	Action	Timeframe
SO 6) Enable effectiveness through appropriate and efficient internal systems and processes	Development of Strategy for 2014-2018.	<ol style="list-style-type: none"> 1. Development of 2014 Strategy for launch by year end 2013. 2. Ensure appropriate continuity between outgoing and incoming council to ensure minimum loss of corporate memory. 3. Oversee process of consultation with key stakeholders as part of strategy development. 4. Work with new Council to establish strategic priorities and document same. 	Q1-Q4

<p>SO 5.1) Develop and implement a comprehensive strategy for public engagement</p>	<p>Improve public understanding of Medical Council role and functions, delivering better engagement and awareness.</p>	<ol style="list-style-type: none"> 1. Delivery of website developments to improve public awareness, engagement and understanding, particularly through interactive content. 2. Focus on engagement with journalists to increase their understanding of Medical Council processes, in the interest of openness of transparency. 	<p>Q1-Q4</p>
<p>SO 5.2) Develop and implement a comprehensive strategy for engagement with the medical profession</p>	<p>Improve knowledge and awareness of various aspects of the Council's role and develop ongoing engagement throughout doctors' careers.</p>	<ol style="list-style-type: none"> 1. Development of website content aimed at the profession, to make processes more user friendly. 2. Improved online engagement through use of the Online Portal 3. Detailed communications plan surrounding annual retention process to be implemented. 4. Detailed communications plan to be implemented for Council elections, to ensure engagement and responsiveness from the profession. 	<p>Q1-Q4</p>
<p>SO 5.2) Develop and implement a comprehensive strategy for engagement with the medical profession</p>	<p>Improve Medical Council involvement during initial education of medical students.</p>	<p>Primary activities to include the development of bespoke content for students on the Medical Council website.</p>	<p>Q1-Q4</p>
<p>SO 6.4) Ensure that organisational processes are effective and user friendly</p>	<p>Data collection processes in place.</p>	<p>Development of Analysis of Website Visits to ensure better measurement of website traffic, effectiveness of online activities and engagement.</p>	<p>Ongoing</p>

<p>SO 6.1) Ensure a focus on excellence in people management and personal development for Council members and staff as appropriate</p>	<p>Deliver improvements in internal communications.</p>	<p>Provide support to the Internal Communications Group in addressing areas of improvement identified by staff.</p>	<p>Q1-Q4</p>
<p>SO 5.3) Develop and implement a comprehensive strategy for engagement with other stakeholder groups</p>	<p>An agreed action plan for stakeholder engagement in 2013.</p>	<p>Development of an action plan focusing on particular stakeholder groups.</p>	<p>Q1</p>

Cross-organisational

A number Actions will be undertaken in 2013 that will involve cross organisational input to support their achievement. Lead responsibility for projects has been assigned to individual sections.

Strategic Objective	Actions	Target Timescale
SO 1 - 6)	Continue engagement with the Department of Health to progress actions and activities to support amendments being made to the MPA 2007.	Q1 – Q4
SO 6.4) Ensure that organisational processes are effective and user friendly	Enhanced communications through the development of a new communications structure which has responsibility for a number of cross sectional initiatives e.g. online communications group, internal communications group, staff newsletter, staff satisfaction surveys etc.	Q1-Q4
SO 6.5) Ensure that appropriate corporate governance systems and structures are in place and fully comply with internal and external standards	<p>Ensure Council, Committee and Working Group structures are established to facilitate effective discharge of the Councils statutory functions.</p> <p>Ensure appropriate and adequate continuity exists between the outgoing Council and the incoming Council.</p> <p>Ensure Council, Committee and Working Group structures are fully in compliance with established best practice principles in Corporate Governance.</p>	Q1-Q4
SO 6.6) Ensure ongoing financial security of the Medical Council	Robust Risk Management processes in place	Q1-Q4

<p>SO 5) Engage proactively with the public, the profession and other stakeholders</p>	<p>Develop Memoranda of Understanding with key health sector institutions to better support the sharing of information and resources in the interests of patient safety and public protection.</p>	<p>Q1 – Q4</p>
<p>SO 6.1) Ensure a focus on excellence in people management and personal development for Council members and staff as appropriate</p>	<p>Performance Management Development System (PMDS) 2013 implemented across the organisation with bi-annual reviews conducted.</p>	<p>Q1 – Q4</p>
<p>SO 6.7) Optimise the use of Medical Council resources</p>	<p>Achievement of strategic objectives across all Directorates enabled through effective and efficient financial management.</p> <p>Management of devolved budget at Sectional and Directorate level.</p>	<p>Q1-Q4</p>