RULES PURSUANT TO THE PROVISIONS OF SECTION 11 AND PART 11 OF THE MEDICAL PRACTITIONERS ACT 2007

Rules made by the Medical Council on 14th December 2011 under Section 11 of the Medical Practitioners Act 2007

These further rules are made by the Medical Council per Section 11 of the Medical Practitioners Act 2007 (as amended)(“the Act”) for the better operation of Part 11 of the Medical Practitioners Act 2007.

1. In circumstances where:
   a. A complaint is referred to a professional competence scheme per Section 61 of the Act,
   b. A practitioner undertakes to be referred to a professional competence scheme per Section 67(1)(b) of the Act,
   c. The Medical Council attaches, per Section 71(c), a condition to the retention of a practitioner’s name on the register that he/she be referred to a professional competence scheme,

the procedures and activities applicable to that scheme established for the purposes of the Medical Council performing its duty under section 91(1) of the Act shall be those set out in these rules.

2. An assessment of the practitioner’s knowledge and skill or application of knowledge and skill or both will be conducted by the Medical Council’s Professional Competence Committee or by persons appointed by the Medical Council using activities specified by the Professional Competence Committee. Categories or ranges of activities which fall within the professional competence scheme may include some or all of the following:

   a) Review of information provided by the practitioner and/or a nominee at the practitioner’s workplace(s) acceptable to the Professional Competence Committee in forms specified by the Professional Competence Committee;
   b) Occupational health assessment of the practitioner;
   c) Survey of multisource feedback about the practitioner in a form specified by the Professional Competence Committee;
   d) Interview of the practitioner including answering questions about his or her knowledge and skill or application of knowledge and skill or both;
e) Interview of any relevant third parties as specified by the Professional Competence Committee or by persons appointed by the Medical Council;

f) Inspection of the workplace(s) where the practitioner practises medicine;

g) Review of the practitioner’s clinical records, a sample of which will be specified by the Professional Competence Committee or by persons appointed by the Medical Council for the purpose of this activity;

h) Direct observation of the practitioner practising medicine;

i) An assessment by interview based on cases arising from clinical record review and direct observation, a sample of which will be specified by the Professional Competence Committee or by persons appointed by the Medical Council for the purpose of this activity;

j) An examination of knowledge and skill as specified by the Professional Competence Committee or by persons appointed by the Medical Council which may include, but not be limited to, the Pre-Registration Examination System.

3. Where the medical records of a patient of the practitioner are required to be produced for the purpose of the activities conducted under Rule 2, the practitioner or any other person who has power over or control of the records shall make the records available. Any such records made available and other confidential information provided to the Professional Competence Committee or persons appointed by the Medical Council in the context of the procedures and activities applicable to this scheme shall attract the confidentiality referred to in section 95 of the Act.

4. A report based on activities conducted under Rule 2 shall be provided to the practitioner for comment. Based on the report, the practitioner will propose, in a form specified by the Professional Competence Committee, an action plan to be implemented by him or her so as to improve his or her knowledge and skill or application of knowledge or skill or both. In the development of that action plan, the practitioner may be assisted by a body or bodies recognized under S91(4) of the Act.

5. The Professional Competence Committee will consider the report and any written submissions made by the practitioner. Based on this consideration, the Professional Competence Committee will confirm and/or amend the action plan to be implemented by him or her so as to improve his or her knowledge and skill or application of knowledge or skill or both. The Professional Competence Committee will monitor the implementation of the action plan by the practitioner, which may include repeating some or all of the activities specified in Rule 2. In its consideration of submissions made by the practitioner and in its monitoring of the implementation of the action plan by the practitioner, the Medical Council may be assisted by a body or bodies recognized under S91(4) of the Act. In implementation of the action plan by the practitioner, he or she may be assisted by a body or bodies recognized under S91(4) of the Act.
6. Practitioners undergoing the procedures and activities under these rules shall discharge such fees and expenses as may be determined by the Medical Council, from time to time.

7. The Medical Council may at any stage make a complaint to the Preliminary Proceedings Committee about the practitioner if it considers that any of the events referred to in Section 91(6) or 91(7) has occurred.

THESE RULES WILL COMMENCE ON THE 14TH DAY OF DECEMBER 2011

GIVEN under the Official Seal of the Council

DATE
14th December 2011

Professor Kieran Murphy    Ms Caroline Spillane
President                  Chief Executive Officer