



Comhairle na nDochtúirí Leighis
Medical Council

Medical Council Business Plan 2015

**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 2014 - 2018 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 the Medical Council's Terms of Reference. This Business Plan sets out in detail the objectives of the Medical Council for 2015 and associated expenditure plans in line with the Medical Council's Statement of Strategy (2014 – 2018).

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 is in place, which has been positively externally reviewed.

This comprehensive plan has been developed by the Medical Council Executive in collaboration with Council, its Committees and Working Groups and was approved by the Medical Council on 21st January 2015. 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 2014 as part of its statutory reporting requirement and this will comprehensively outline the activities of the organisation which were undertaken for that period.

The Medical Council's Statement of Strategy for 2014 - 2018 presents the vision for the organisation: "Providing leadership to doctors in enhancing good professional practice in the interests of patient safety." 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 has been taken into account.

Purpose and Functions of the Medical Council

The Business Plan stems from the Statement of Strategy 2014 - 2018 and takes into account the Council's vision, mission and values.

Vision

Providing *leadership* to doctors in enhancing *good professional practice* in the interests of *patient safety*

Mission

Ensuring *high standards of education, training, and practice* among doctors for the *benefit of patients*

Values

1. We strive to further enhance *trust* between patients, doctors and the Medical Council
2. We *lead by example, setting high standards* for ourselves and for the doctors and organisations we regulate
3. We act in a *respectful, fair, empathetic and consistent* manner
4. We make *independent, informed and objective decisions* and we are *accountable* for them
5. We encourage *diversity, engagement and learning* to help us be a better organisation

Strategic Objectives

The Medical Council Strategic Objectives are set out in detail in the *Statement of Strategy 2014 – 2018*. These set the operational direction and functions for the organisation over the period.

Strategic objectives:

1. Develop an effective and efficient register that is responsive to the changing needs of the public and the medical profession.
2. Create a supportive learning environment to enable good professional practice.
3. Maintain the confidence of the public and the profession in the Council's processes by developing a proportionate and targeted approach to regulatory activities.
4. Enhance patient safety through insightful research and greater engagement.
5. Build an organisational culture that supports leadership and learning.
6. Develop a sustainable and high-performing organisation.

Measuring Performance against Strategic Objectives

The Council's Statement of Strategy outlines how effectiveness of implementation will be measured. The Medical Council has a set of agreed metrics in place to oversee implementation of each of the six strategic objectives. Further metrics are in place at executive level to measure performance at operational level. Use of these metrics provides both the Medical Council and its external stakeholders with a clear and straightforward mechanism for measuring the organisation's performance in the areas which are of greatest strategic importance.

Operational Context and Challenges for 2015

This plan has been framed within a challenging fiscal and human resources environment. 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:

Financial Position: The Council is self-funded, with the vast majority of its income derived from doctors' registration fees. The Council is conscious of the impact recession has had on registrants. A programme of cost cutting has been implemented over the past number of years, however it does not currently have leave to levy fees for certain statutory activities, limiting its ability to diversify its revenue.

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. Approvals were received in late 2014 from the Department of Health to fill a number of positions within the organisation; however the protracted nature of this approvals process led to operational challenges. On average, staffing levels in 2014 were approximately 20% below the agreed staff ceiling for the organisation.

Business Plan Implementation: This is the fifth full year of business planning for the Medical Council. Detailed reporting of the first year of implementation of the 2014 - 2018 Statement of Strategy will be provided in the Medical Council's Annual Report 2014. The plan contains a number of new commitments for delivery and requires a high degree of support for implementation. This plan will be reported and monitored against agreed metrics.

Scale of Role and Remit: The Council's regulatory activities have expanded in recent years, and it now has an oversight role at all stages of a doctor's career, from the moment they enter medical school, until the day they withdraw from the register. The range of activities, allied with the financial landscape necessitates tight controls and stringent monitoring to ensure that the Council is applying its limited resources to best effect.

Professional Indemnity Legislation: The Medical Practitioners (Amendment) Bill 2014 will have particular impact in expanding the Council's role and remit in 2015. The Council is pleased that the Department of Health has committed to the State Claims Agency specifying the minimum levels of indemnity for medical practitioners. The Council looks forward to continued engagement with the Department of Health on this matter in 2015 so that the legislation offers further protection to patients in a manner which is straightforward for doctors to comply with.

Handling of complaints: The Council is keen to see enhancements in complaints handling procedures across the health system to ensure patients' concerns are handled at the appropriate level using the appropriate method. It will place a continued focus in 2015 on working with partner organisations to further this aim.

Legal challenges/appeals: 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 legal challenges or appeals. The Council continues to progress with the Department of Health further amendments to the Act some of which have been agreed in principle. There are two significant legal issues which will be considered in 2015. The Supreme Court is due to rule on the case of Corbally vs the Medical Council, which will have implications for the Council's handling of complaints against doctors. Actions in the Supreme Court and Commercial Court are also due to be heard regarding the Kingram House building.

Use of Resources: 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 2014 – 2018
- The Medical Council's Financial Outturn 2014 and the forecasted Financial Position for 2015
- Various national strategic and policy documents.

Planned 2015 Activities

Strategic Objective	Action	Intended Outcome as outlined in Statement of Strategy
STRATEGIC OBJECTIVE 1		
Develop an effective and efficient register that is responsive to the changing needs of the public and the medical profession		
1.1	Management of appeals and legal challenge to registration decisions where necessary.	1e An effective framework is in place for the retention and remediation of doctors, and the monitoring of doctors who have conditions imposed which restrict their practice.
1.1	Continue programme for assessment of applications for register entry, transfer between divisions, annual retention and register maintenance.	1a Registration processes, including pre-registration examinations, which allow appropriately qualified doctors straightforward access to the practice of medicine in Ireland.
1.1	Scope and design programme to support new entrants to the practice of medicine in Ireland.	1a Registration processes, including pre-registration examinations, which allow appropriately qualified doctors straightforward access to the practice of medicine in Ireland.
1.1	Complete redevelopment of Pre-Registration Examination System.	1a Registration processes, including pre-registration examinations, which allow appropriately qualified doctors straightforward access to the practice of medicine in Ireland.
1.1	Review Registration Rules.	1a Registration processes, including pre-registration examinations, which allow appropriately qualified doctors straightforward access to the practice of medicine in Ireland.
1.2	Continue programme of Business Process Improvement, including monitoring applicant feedback and internal quality assurance, focussed on reducing application turnaround time.	1c Our registration services are considered efficient and effective.
1.2	Prepare for and participate in external review of registration function.	1c Our registration services are considered efficient and effective.
1.2	Focus on revision and updating of website content pertaining to doctors' registration. Promote website driven and supported self-service by registration function users.	1c Our registration services are considered efficient and effective.
1.2	Optimise doctors' experience of annual retention process through completing transition to e-certs, refinement of business process and supporting technology.	1c Our registration services are considered efficient and effective.

1.2	Review options for primary source verification to improve applicant experience and application turnaround time.	1c Our registration services are considered efficient and effective.
1.2	Oversee effective implementation of Service Level Agreement with Postgraduate Training Bodies for assessment of applications for registration in specialist division.	1c Our registration services are considered efficient and effective.
1.3	Draft scheme, criteria & rules following introduction of legislation relating to Professional Indemnity - Medical Practitioners (Amendment Bill 2014).	1d Legislation is implemented as soon as it is enacted.
1.3	Design and implement scheme for monitoring compliance with professional indemnity requirements on an ongoing basis.	1d Legislation is implemented as soon as it is enacted.
1.3	Respond appropriately, as required, to National Vetting Bureau (Children & Vulnerable persons) Act 2012. Take any necessary steps to implement provision of the Act including any necessary changes to Registration process.	1d Legislation is implemented as soon as it is enacted.
1.4	Continue programme to monitor doctors' maintenance of professional competence.	1c Our registration services are considered efficient and effective.
1.4	Continue to monitor Doctors with conditions attached, documentary evidence sought where applicable and conditions reviewed.	1e An effective framework is in place for the retention and remediation of doctors, and the monitoring of doctors who have conditions imposed which restrict their practice.
1.4	Implement recommendations following 2014 Review of Monitoring Group procedures. Continuously review practices to ensure improvement and implementation of best practice.	1e An effective framework is in place for the retention and remediation of doctors, and the monitoring of doctors who have conditions imposed which restrict their practice.
1.4	Receive & process annual declarations concerning doctor's compliance with professional indemnity requirements, disciplinary sanctions, criminal convictions and/or relevant medical disabilities.	1e An effective framework is in place for the retention and remediation of doctors, and the monitoring of doctors who have conditions imposed which restrict their practice.

Strategic Objective	Action	Intended Outcome as outlined in Statement of Strategy
STRATEGIC OBJECTIVE 2		
Create a supportive and learning environment to enable good professional practice		
2.1	Complete a comprehensive programme of review of current guidance on ethics and professionalism to include root and branch review of certain topics identified following consultation. Support the drafting of new guidance, based on policy decisions, using accessible, unambiguous and appropriate language. Conduct an inclusive, transparent and responsive consultation process prior to finalisation of revised guidance.	2a The medical profession and the public have clear direction on what it means to be a good doctor.
2.1	Develop accessible supporting materials, including a dedicated area of the Council's website, showing learning examples of ethical guidance in action through the production of case vignettes, based on a sample of complaints received by the Council to date.	2a The medical profession and the public have clear direction on what it means to be a good doctor.
2.1	Conduct a consultative assessment of the impact of new good professional practice guidance across the organisation and develop a plan to implement any required changes when new guidance is published in 2016.	2a The medical profession and the public have clear direction on what it means to be a good doctor.
2.1	Launch and promote Council's guidance for medical schools on student fitness to proceed and on professionalism via interaction with stakeholders.	2a The medical profession and the public have clear direction on what it means to be a good doctor.
2.2	Implement 2015 programme of undergraduate accreditation and monitoring including via annual return.	2b The quality of the system of medical education, training and lifelong learning is enhanced through accreditation, thematic reviews, and guidelines.
2.2	Implement 2015 programme of postgraduate accreditation and monitoring.	2b The quality of the system of medical education, training and lifelong learning is enhanced through accreditation, thematic reviews, and guidelines.
2.2	Commence programme of inspection of postgraduate training sites, supporting the implementation of agreed Council criteria.	2c Our expectations of clinical sites as learning environments are articulated communicated and applied.

Strategic Objective	Action	Intended Outcome as outlined in Statement of Strategy
2.2	Implement 2015 programme to evaluate, approve and monitor places delivering intern training.	2b The quality of the system of medical education, training and lifelong learning is enhanced through accreditation, thematic reviews, and guidelines.
2.2	Conduct Your Training Counts survey to measure the views of all trainees in the country.	2b The quality of the system of medical education, training and lifelong learning is enhanced through accreditation, thematic reviews, and guidelines.
2.2	Implement 2015 programme of Anatomy Department inspections.	2b The quality of the system of medical education, training and lifelong learning is enhanced through accreditation, thematic reviews, and guidelines.
2.2	Devise and publish Code of Practice for Anatomy Departments in line with best practice in this area.	2b The quality of the system of medical education, training and lifelong learning is enhanced through accreditation, thematic reviews, and guidelines.
2.2	Enhance operational excellence in education and training activities through establishment of enhanced ICT system to support procedures.	2b The quality of the system of medical education, training and lifelong learning is enhanced through accreditation, thematic reviews, and guidelines.
2.2	Review accreditation procedures to ensure that these are effective, efficient and reflect good practice.	2b The quality of the system of medical education, training and lifelong learning is enhanced through accreditation, thematic reviews, and guidelines.
2.2	Review training needs of assessors that support education and training activities.	2b The quality of the system of medical education, training and lifelong learning is enhanced through accreditation, thematic reviews, and guidelines.
2.2	Work with partner organisations to address findings of Your Training Counts survey by supporting safer and smoother transitions at intern level.	2b The quality of the system of medical education, training and lifelong learning is enhanced through accreditation, thematic reviews, and guidelines.
2.2	Scope and design a process for thematic review of teaching and learning professionalism in Ireland, which will then be conducted in 2016.	2b The quality of the system of medical education, training and lifelong learning is enhanced through accreditation, thematic reviews, and guidelines.
2.3	Implement agreed 2015 programme for recognition of specialties and engage with newly recognised specialties to introduce these to the Register.	2b The quality of the system of medical education, training and lifelong learning is enhanced through accreditation, thematic reviews, and guidelines.
2.3	Pilot patient feedback on their experience with doctors as part of learning and development activities for the profession.	2d A more targeted and effective approach to our system of maintenance of professional competence.
2.3	Scope and Design new professional competence scheme arrangements for doctors in General Division.	2d A more targeted and effective approach to our system of maintenance of professional competence.

Strategic Objective	Action	Intended Outcome as outlined in Statement of Strategy
2.3	Remake professional competence scheme arrangements with postgraduate bodies so that schemes are operated by bodies in line with Council requirements.	2d A more targeted and effective approach to our system of maintenance of professional competence.
2.4	On-going review of practices & procedures of the Health Committee to ensure best practice.	2e Guidance on health for good practice and better support for individual doctors where this is required.
2.4	Support doctors with relevant medical disabilities or health related conditions to maintain their registration where possible during illness & recovery.	2e Guidance on health for good practice and better support for individual doctors where this is required.
2.4	Continue to engage with stakeholders to implement a more proactive approach towards medical practitioners (to include medical students) maintaining good health and also to support those medical practitioners with health issues. Liaise in particular with the Practitioners Health Matters Programme and the training bodies to encourage learning and training institutions and medical defence bodies to support practitioners, trainees and students to maintain good health & implement MOU with the Practitioners Health Matters Programme.	2e Guidance on health for good practice and better support for individual doctors where this is required.
2.4	Publish guidance on health in practice for doctors, trainees and students.	2e Guidance on health for good practice and better support for individual doctors where this is required.
STRATEGIC OBJECTIVE 3		
Maintain public confidence in the Council's processes by developing a proportionate and targeted approach to regulatory activities		
3.1	Continue to liaise with employers to ensure that appropriate complaints are brought to the attention of the Council. Activities will be planned to share findings and patterns emerging from the research conducted into complaints over a five year period to ensure complaints are addressed properly and at the appropriate level within the wider health system.	3a Complaints relating to a doctor's fitness to practise are addressed by the regulator, where appropriate.

Strategic Objective	Action	Intended Outcome as outlined in Statement of Strategy
3.1	Work with partner organisations to share and address the findings of complaints analysis over a five year period so that complainants, patient advocacy groups and employers have increased clarity on appropriate systems for resolution of complaints including referral to the Medical Council.	3b More transparent complaints and inquiry procedures.
3.1	On-going collaboration with other professional regulatory bodies to enhance value added initiatives to approach issues common to healthcare professional regulators.	3c Efficient systems resulting in a cost-effective handling of complaints.
3.1	Implementing measures to ensure Council complaints and inquiry processes are managed in a cost effective manner to include collaboration with other professional regulatory bodies.	3b More transparent complaints and inquiry procedures.
3.1	Continue to increase the use of in-house legal expertise by undertaking an overview of the Executive and Council legal requirements having regard to the overall business plan.	3c Efficient systems resulting in a cost-effective handling of complaints.
3.1	Continue to work with partner organisations on legislative and policy developments relating to the handling of concerns surrounding doctors' practice, Medical Practitioners Act (particularly Parts 7, 8 & 9) and engagement with international regulatory networks such as IAMRA and Healthcare Professional Crossing Borders, PSA & GMC.	3c Efficient systems resulting in a cost-effective handling of complaints.
3.2	Continue to ensure ongoing delivery of an effective, fair & transparent complaint and inquiry process compliant with MPA 2007 & consistent with natural justice and best practice through the review and refinement of processes and procedures of Council and Committees. On-going review process to include review and update of standard conditions bank and Guidance on Sanction imposed documents.	3c Efficient systems resulting in a cost-effective handling of complaints.

Strategic Objective	Action	Intended Outcome as outlined in Statement of Strategy
3.2	Manage the defence of any appeal, judicial review or action commenced against the Council as a corporate entity, arising from part 6,7,8,9 or 10 of the 2007 Act.	3c Efficient systems resulting in a cost-effective handling of complaints.
3.2	Interpret the Supreme Court Ruling of the case Corbally vs Medical Council. Conduct review of all procedures & implement any changes required in proceedings to Part 7,8 & 9 of the Act.	3c Efficient systems resulting in a cost-effective handling of complaints.
3.2	Engage with Department of Health concerning the ruling in Corbally vs Medical Council and provide input into changes to the Act as and if appropriate. Engage with Healthcare regulators concerning this ruling to facilitate and promote understanding to enable a uniform approach.	3c Efficient systems resulting in a cost-effective handling of complaints.
3.2	Review Medical Council policy on publication of information and documentation e.g. Requests for publication of transcripts, to include matters arising from Freedom of Information and Data Protection requests relating to the work undertaken by the Directorate of Regulation in accordance with law.	3b More transparent complaints and inquiry procedures.
3.2	Continue to operate programme of performance assessment in response to concerns about doctors' practice.	3a Complaints relating to a doctor's fitness to practise are addressed by the regulator, where appropriate.
3.2	Continue to operate programme to maintain skills of performance assessors.	3a Complaints relating to a doctor's fitness to practise are addressed by the regulator, where appropriate.
3.3	Publish report on complaints over a five year period, which provides qualitative and quantitative information on themes emerging.	3d Guidance to the profession reflects trends and addresses issues emerging from complaints and inquiry processes.
3.3	Work with partner organisations to develop Action Plan based on report on complaints over a five year period.	3d Guidance to the profession reflects trends and addresses issues emerging from complaints and inquiry processes.
STRATEGIC OBJECTIVE 4		
Enhance patient safety through insightful research and greater engagement		
4.1	Completion of public confidence and awareness research to track understanding and confidence.	4a The views of patients and doctors play a greater role in informing the Council's decision-making.

Strategic Objective	Action	Intended Outcome as outlined in Statement of Strategy
4.1	Launch Medical Education and Training Research Grant with Health Research Board and HSE.	4b An improved evidence base to inform strategic decisions.
4.1	Launch Research in Medical Education Award with the Irish Network of Medical Educators.	4b An improved evidence base to inform strategic decisions.
4.1	Publish Your Training Counts 2014 Volume 2.	4b An improved evidence base to inform strategic decisions.
4.1	Publish Workforce Intelligence Report.	4b An improved evidence base to inform strategic decisions.
4.1	Publish Your Training Counts 2015.	4b An improved evidence base to inform strategic decisions.
4.2	Provide input into relevant legislative developments including Medical Practitioners Act, Professional Indemnity Bill and Human Tissues Bill and all other relevant developments.	3c Efficient systems resulting in a cost-effective handling of complaints.
4.2	Provide advice and guidance on any legislative or EU developments that might impact on the core business of Council.	4b An improved evidence base to inform strategic decisions.
4.2	Conduct Annual Council Governance Evaluation.	6h Confidence that our business systems and processes are fit for purpose and are complied with.
4.2	Roll-out of Corporate Governance Handbook to Council, Committees and Staff.	6h Confidence that our business systems and processes are fit for purpose and are complied with.
4.2	Develop a Register of Interests for Council members.	6h Confidence that our business systems and processes are fit for purpose and are complied with.
4.2	Conduct annual review of all Committee Terms of Reference.	6h Confidence that our business systems and processes are fit for purpose and are complied with.
4.3	Develop and implement an engagement plan to improve regional awareness of the Medical Council.	4 d A more integrated approach to medical regulation across the Irish health sector is achieved through more effective relationships with partner organisations.
4.3	Continue to cooperate and liaise with the SCA and other regulatory bodies in order to share knowledge and resources and improve processes.	4c The public, doctors and partner organisations will have access to better information.
4.3	Managing existing MOUs and identifying opportunities for developing.	4c The public, doctors and partner organisations will have access to better information.
4.3	Participate in Fitness to Practise Forum to provide effective engagement with other healthcare regulators and to share knowledge and improved processes.	4 d A more integrated approach to medical regulation across the Irish health sector is achieved through more effective relationships with partner organisations.

Strategic Objective	Action	Intended Outcome as outlined in Statement of Strategy
4.3	Participate in Healthcare Regulator Forum and report to Sub Committee for review of disciplinary procedures.	4 d A more integrated approach to medical regulation across the Irish health sector is achieved through more effective relationships with partner organisations.
4.3	Continue engagement with HSE to support timely and appropriate registration of doctors.	4 d A more integrated approach to medical regulation across the Irish health sector is achieved through more effective relationships with partner organisations.
4.4	All policies & procedures concerning Council complaints handling and inquiry processes including findings of FTPC and sanctions imposed by Council published as appropriate.	4c The public, doctors and partner organisations will have access to better information.
4.4	In line with results and recommendations contained in survey of complainants, update correspondence, literature and on-line material to ensure the Council is communicating in an effective manner with complainants & doctors. Include feedback from patient support & advocacy groups and doctors' representative groups to inform the review process, implement enhancements and amendments in line with review.	4c The public, doctors and partner organisations will have access to better information.
4.4	1. Management of the Freedom of Information function to ensure all request under the FOI Acts are responded to in a timely manner. 2. Management of all Parliamentary Questions and Ministerial Representations received and ensure the responses are issued by deadlines set.	4c The public, doctors and partner organisations will have access to better information.
4.4	Delivery of website developments to improve public awareness, engagement and understanding, particularly through interactive content.	4c The public, doctors and partner organisations will have access to better information.
4.4	Development of interactive website content to further clarify and explain the complaints and inquiry process.	4c The public, doctors and partner organisations will have access to better information.
4.4	Delivery of website developments to improve engagement with the profession and trainees, including a detailed communications plan surrounding annual retention process to be implemented.	4c The public, doctors and partner organisations will have access to better information.

Strategic Objective	Action	Intended Outcome as outlined in Statement of Strategy
4.4	Manage media engagement with journalists to achieve Council's stated objective to be open and transparent in its work.	4c The public, doctors and partner organisations will have access to better information.
4.4	Organisation of Medical Council events, to include: Launch of annual report Launch of medical workforce intelligence report Education symposium/ launch of Your Training Counts survey Launch of research on complaints process.	4c The public, doctors and partner organisations will have access to better information.
STRATEGIC OBJECTIVE 5		
Build an organisational culture that supports leadership and learning		
5.1	Ensure that Council meetings are planned, supported and managed effectively in order to assist in the efficient and effective achievement of objectives; to include the timely and appropriate development and distribution of supporting documentation and all related activities.	6h Confidence that our business systems and processes are fit for purpose and are complied with.
5.1	Develop a comprehensive Plan for Council to achieve policy development and learning objectives Q1. Deliver a series of appropriate and beneficial sessions for Council under this plan - Q1-Q4.	5c A culture of high performance within the organisation.
5.1	Support the NDC in the development of appropriate policy relating to Committee formation and membership.	6h Confidence that our business systems and processes are fit for purpose and are complied with.

Strategic Objective	Action	Intended Outcome as outlined in Statement of Strategy
5.1	Revise and drive a robust PMDS process and culture underpinned by the Learning & Development plan and supporting talent identification and succession planning initiatives. Clarity on role profiles and objectives, identification and management of below par performance, identification of business critical roles and strategies for succession completed.	5c A culture of high performance within the organisation.
5.1	Conduct a skills analysis across the organisation and complete gap analysis to ensure 'fit for purpose' organisation positioned to deliver on 2015 business plan. Completion of library of available skills across the organisation and identification of gaps to be addressed and linked to PMDS.	5d Organisational structure designed to best support the successful delivery of the strategy.
5.2	Review of organisation design to ensure structure adequately supporting strategy and maximise workforce planning effectiveness; to include a grading review to ensure current roles are at the correct level.	5d Organisational structure designed to best support the successful delivery of the strategy.
5.2	1. Review of organisational design across each Directorate to ensure workforce planning effectiveness. 2. Capacity planning and rework/cycle time reviews to ensure a fully effective structure that serves the needs of the organisation and ensures optimal utilisation of resources.	5b Motivated and engaged staff.
5.2	Develop a system of unified, consistent planning and support for projects.	5d Organisational structure designed to best support the successful delivery of the strategy.
5.3	Develop a staff mentoring programme to maximise leadership capability across the organisation.	5c A culture of high performance within the organisation.
5.3	Embed leadership commitment across the executive and facilitate tailored leadership development plans for individual growth and succession planning. Conduct and complete suite of tailored leadership development options inclusive of coaching and tangible leadership competencies, team profiling etc. leading to enhanced leadership capability across the organisation.	5c A culture of high performance within the organisation.

Strategic Objective	Action	Intended Outcome as outlined in Statement of Strategy
5.3	Focus on improving and enhancing internal communication strategies to promote further engagement and transparency across the organisation; to include informal in-house staff training in communication skills at all levels.	5f Effective systems in place to share knowledge and information across the organisation.
STRATEGIC OBJECTIVE 6		
Develop a sustainable and high performing organisation		
6	Manage and Report quarterly on the performance of the organisation through key performance indicators for Statement of Strategy, business & risk management Plan and management team dashboard metrics.	6h Confidence that our business systems and processes are fit for purpose and are complied with.
6	Effective management of the Health and Safety functions.	6h Confidence that our business systems and processes are fit for purpose and are complied with.
6.1	Control and monitor all variable expenditure via enhanced management of third party service contracts, process efficiency measures and increased internal controls.	6a Operational cost reduction through, for example, greater use of information systems and collaborative working with partner organisations.
6.1	Implement software to automate management of expense claims (across organisation).	6a Operational cost reduction through, for example, greater use of information systems and collaborative working with partner organisations.
6.1	1. Develop Corporate Procurement Plan (CPP) 2016-2018. 2. Maintain centralised contract database and oversee contract administration, monitoring and review to ensure devolved responsibilities and centralised controls are managed effectively. 3. Effective management of planned procurements in accordance with legislation to ensure best value achieved.	6b High-performance, proactive contract management.
6.2	Implement a medium term financial strategy to ensure sufficient resources are available to deliver the Medical Council's strategic priorities and business plans.	6d Clear understanding about our longer-term financial needs and higher levels of transparency, accountability and demonstration of value for money.
6.2	Manage the initiation or defence of any action commenced by or against the Council as a corporate entity.	6d Clear understanding about our longer-term financial needs and higher levels of transparency, accountability and demonstration of value for money.

Strategic Objective	Action	Intended Outcome as outlined in Statement of Strategy
6.2	Progress Kingram House litigation including commercial court trial and supreme court appeal.	6d Clear understanding about our longer-term financial needs and higher levels of transparency, accountability and demonstration of value for money.
6.2	Continued integration of FAM Register to refine and maintain the FAM Finance+ Procurement systems.	6h Confidence that our business systems and processes are fit for purpose and are complied with.
6.2	Maintenance and refinement of PO System to deliver up to date procurement information aligned with Financial reporting systems.	6h Confidence that our business systems and processes are fit for purpose and are complied with.
6.2	Investigate opportunities for public sector aggregation and shared service initiatives with a view to developing further cost savings and synergistic gains.	6a Operational cost reduction through, for example, greater use of information systems and collaborative working with partner organisations.
6.2	Management of Lynn House Rental process.	6d Clear understanding about our longer-term financial needs and higher levels of transparency, accountability and demonstration of value for money.
6.2	Reduce operating costs across the organisation through reduction in services e.g. utilities, storage, waste management and general supplies.	6a Operational cost reduction through, for example, greater use of information systems and collaborative working with partner organisations.
6.3	Set and monitor an overall corporate budget vesting responsibility with directors to manage devolved budgets for each directorate. Report to ASRC and Council quarterly on management against financial target.	6a Operational cost reduction through, for example, greater use of information systems and collaborative working with partner organisations.
6.3	Implement OCR scanning of all invoices.	6a Operational cost reduction through, for example, greater use of information systems and collaborative working with partner organisations.
6.3	Ensure Internal Audit assignments carried out and reported to the Audit Strategy and Risk Committee.	6h Confidence that our business systems and processes are fit for purpose and are complied with.
6.3	Support Comptroller & Auditor General annual statutory audit.	6h Confidence that our business systems and processes are fit for purpose and are complied with.
6.3	Continue roll-out of Business Process Improvement project.	6h Confidence that our business systems and processes are fit for purpose and are complied with.
6.3	Continue to monitor Business Process Improvement implementation progress in Registration and Professional Standards sections and roll-out in Education and Training and Corporate Governance & Council sections.	6e Understanding of the concept of business process improvement established across the organisation to facilitate communication, training, and implementation of business process improvement initiatives.

Strategic Objective	Action	Intended Outcome as outlined in Statement of Strategy
6.3	Develop an Excellence in Customer Service Strategy and launch publication on how MC will develop a high performing organisation providing excellent customer service.	6h Confidence that our business systems and processes are fit for purpose and are complied with.
6.3	Develop an Information Governance Framework to determine how Council manages the collection, storage and use and sharing of data.	6h Confidence that our business systems and processes are fit for purpose and are complied with.
6.3	Register of Legal Obligations is reviewed monitoring compliance with all relevant legislation.	6h Confidence that our business systems and processes are fit for purpose and are complied with.
6.3	Review Freedom of Information processes and procedures to ensure compliance with recent revised legislation.	6h Confidence that our business systems and processes are fit for purpose and are complied with.
6.3	Facilities and operations management - 1. Reactionary and ongoing maintenance of Medical Council property assets and premises including operational requirements across the organisation. 2. Front of House management including meeting facilitation and cross organisational support.	6h Confidence that our business systems and processes are fit for purpose and are complied with.
6.3	Implementation of Record Management and Retention Systems across the organisation.	6h Confidence that our business systems and processes are fit for purpose and are complied with.