

2 November 2023

Professor Dame Carrie MacEwen, Chair Mr Charlie Massey, Chief Executive

General Medical Council Regent's Place 350 Euston Road London NW1 3JN

Sent via email

Medical Associate Professionals

Dear Carrie and Charlie

I write on behalf of the Academy Council to inform you of our concerns about the regulation of Medical Associate Professionals [MAPs]. These concerns are widespread across colleges and faculties. As you are aware there is considerable friction in the workplace regarding MAPs. The current discourse on social media and in other fora is compounding misunderstanding which adds to this friction and creates the potential for significant patient safety issues in teams where MAPs are currently working, as well as undermining the future contribution of MAPs to healthcare more generally.

We understand the GMC will be the regulator of MAPs but strongly feel that a completely independent second register with a visible and obvious way to distinguish between MAPs and medical practitioners is needed. The stated reason for the DHSC to place MAP regulation within the GMC was to provide greater confidence for the public in these new roles. While this is a laudable aim, conflating the Medical Register with a MAP register under the auspices of a body called the General Medical Council will lead to confusion unless there is a quick and simple way to distinguish one group from another. We think the internal processes of the GMC would benefit from this division by ensuring the department regulating MAPs is easily distinguishable from those regulating medical practitioners.

The GMC have stated the cost of a second register for MAPs would be too high. To use the existing register for reasons of cost, implies that medical practitioners will be cross-subsidising the MAP register from the start, which is against the GMCs stated policy and causes the profession significant concern. The cost of MAP regulation

needs to be seen to be borne by the MAPs themselves and by their employers. It would be very useful for the Academy Council to understand why the cost of a dedicated MAPs register would be so prohibitive.

Many doctors routinely append their GMC number to clinical correspondence and other documents, including, for example, medicolegal reports or imaging reports, which are directly visible to patients (on various NHS sponsored apps). An easy way to clearly distinguish a medical practitioner from a MAP would assist patients in understanding who is providing their care as well as better informing them as to the composition of the wider healthcare team. It would also provide a further level of safety in times of clinical cross-cover when team members are less well known to each other, due, as we are all aware, to the often fragmented, large teams currently delivering healthcare overnight and at weekends. The insertion of a prefix such as DR or PA would seem an easy way to do this and should not prove a prohibitive cost to electronically fix on an established register. We do not believe that use of the current 7-digit registration number for both doctors and MAPs is appropriate. Patients using the GMC portal need to be able to confidently distinguish a MAP from a medical practitioner to prevent confusion.

In summary, the Academy Council are concerned about the proposed regulation of MAPs by the GMC where the distinction between a medical practitioner and a MAP is not immediately obvious to either patients or the wider healthcare team.

We would be happy to meet with you to further discuss these points.

Best wishes

Jeanette

Dr Jeanette Dickson

Chair of Council, Academy of Medical Royal Colleges

Cc: Una Lane, Director of Registration and Revalidation