The GMC is a monopoly organisation. If we are not registered with it we cannot practise. I am thus forced to pay for its employee non-evidence based health checks and private medicine.

NO HOLDS BARRED Margaret McCartney

Can you respect the new regulator?

The General Medical Council, our regulator, has recently appointed a new chief executive officer. This is a £235 000 a year position. It comes with private healthcare cover (on which the GMC spends almost £223 000 a year, as well as over £25 000 on health checks for the 667 people it employs). The position has been filled by Charles Massey.

This is an interesting appointment. The job description says that the successful candidate’s personal qualities must include the ability to “command the confidence and support of patients and the public; doctors; the NHS . . .” as well as the “intellectual ability to analyse complex issues in a systemic and logical manner.”

Massey is well known to junior doctors. He is director general for acute care and workforce at the Department of Health and was grilled by the Commons’ Public Accounts Committee in February about the costs of seven day services and workforce planning. The committee reported in May that efforts to retain current staff were not well managed and that “data used to monitor workforce numbers are not sufficiently reliable or comprehensive to support Health Education England’s decisions.”

“No coherent attempt has been made to assess the headcount implications of a number of major policy initiatives such as the seven day NHS,” said the committee’s report.

Evidence from Massey has been used against the Justice for Health group of junior doctors. This group has taken the health secretary to the High Court, challenging whether his self declared “nuclear option” to impose the new junior doctor contract is within his powers. Massey defends Jeremy Hunt vehemently. This may be his job—and, for full transparency, he has criticised a witness statement that I signed about the uncertainty behind weekend death statistics, saying, “I am not aware that any of the eight signatories of the DWS [doctors’ witness statement] have any particular expertise, qualifications or experience as regards the weekend effect.”

I asked the Department of Health, and then the GMC press office, what degree(s) the incoming CEO held. They told me that a biography was available online (it did not include this information) and that they would not add to it.

The GMC is a monopoly organisation. If we are not registered with it we cannot practise. I am thus forced to pay for its employee non-evidence based health checks and private medicine so that I can practise medicine in the UK. The GMC also sells lists of registered doctors to commercial entities: multiple drug companies, private sector providers, and locum agencies. It is not possible for a doctor to opt out of their information being shared in this way. Is this really the kind of regulation that gives us confidence that it is an independent regulator—fair on doctors and protecting patients?

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