BMA's annual meeting expresses "no confidence" in GMC

Linda Beecham *BMJ*

Doctors at the BMA's annual representative meeting overwhelmingly declared their lack of confidence in the General Medical Council "as presently constituted and functioning."

Very few of the 450 representatives wanted to abolish the council; the vast majority reaffirmed support for professional self regulation and for the principle of revalidation, although there was criticism of the GMC's revalidation proposals.

The meeting did, however, want the council to "initiate urgent reform of its structures and functions in consultation with the profession."

Similar votes of no confidence were passed by the senior and junior hospital staffs conferences and by the public health conference (10 June, p 1557; 17 June, p 1626). The conference of local medical committees called on the GMC to improve its performance (24 June, p 1692).

Proposing the no confidence motion Dr Peter Terry, a consultant obstetrician and gynaecologist in Aberdeen, said: "Confidence has been lost in the way the medical profession is

regulated. The GMC has failed us. The GMC is a shambles." He believed that the profession was partly to blame for not pushing for reform years ago.

What was needed, Dr Terry told the meeting, was a review of the electoral process. He said that there should be no unelected medical members and that all elected medical members should be working doctors. There should be more lay members, and the possibility of a lay president should be considered. In addition, there should be a more transparent audit of all decisions and the council should be independent of the government.

Other speakers criticised the slowness of the procedures. Cases could take up to two years to be resolved and this left patients potentially at risk from unsafe doctors, they said. For doctors waiting to have a complaint heard the delays caused stress and anxiety.

Dr Kate Adams, a senior house officer in psychiatry in London, criticised the GMC for running up a deficit of £3m (\$4.5m), for its poor public relations, and for having so many unelected members.

Dr Peter Terry: "The GMC is a shambles"

Dr Charles Saunders, a consultant in public health medicine in Fife, said that there was a lack of leadership from the GMC and that the failure of the GMC to reform itself was shown in its nonsensical proposals for revalidation. "There comes a time," he said, "for the profession to stand up and be counted."

Several elected members of the GMC were worried that the words "no confidence" would be seen as a call for the GMC to be disbanded. "We need to send a strong message to the GMC," Dr Brian Keighley said. "Please do not send the wrong message to the media." Dr Simon Fradd admitted that there were concerns about the GMC but he urged the profession to work

together to get matters right. "We cannot be sure that the politicians will not use a vote of no confidence to cut across the profession," he said.

Dr Laurence Buckman, a GP in north London, said that the motion, if passed, "will tell patients that the profession does not trust its own judgment in electing the GMC; it will tell the GMC that the profession will never trust it; and it will encourage the government to disband the GMC and take control itself."

The chairman of the council, Dr Ian Bogle, said after the debate: "I hope that patients will be reassured by this vote." (See p 61.) □

Full story in News Extra at bmj.com

Japan plans to monitor medical mishaps

Joe Lamar *Tokyo*

The Japanese health and welfare ministry is drawing up new rules to deal with medical malpractice in response to a rising number of accidents at hospitals. In the first plan of its type, the ministry will spell out procedures for reporting unexpected deaths or injuries among patients receiving treatment.

Depending on the degree to which medical staff might be considered responsible, hospitals will be obliged to follow one of three courses of action. If there is a clear causal link between treatment and death or injury, hospitals must file a report to police. If there is a suspicion of a link, they

will still have to consult police verbally. If the possibility of a link can be disproved, then no action is necessary.

As a result, much of the authority for deciding whether malpractice took place will shift from hospitals to police. The measures will also put doctors and nurses under more pressure to justify their choices of treatment in the event of a fatality or injury.

About 220 medical institutions are expected to adopt these guidelines, which will be finalised later this summer. The new rules come amid a wave of public concern about the increasing frequency of hospital mishaps and how they are dealt with.

Among the latest high profile cases of deadly malpractice have been a Hokkaido surgeon who sliced through the jugular of a woman during routine throat surgery. □

Full story in News Extra at bmj.com

New York votes to post doctors' details on net

Fred Charatan *Florida*

Following President Clinton's move to reduce medical mistakes (4 March, p 597), the New York state legislature has passed the Health Information and Quality Improvement Bill, which requires the state's department of health to post on its website the professional profiles of doctors practising in New York state.

This information will include education, hospital affiliations, professional awards, malpractice history, and hospital dismissals that resulted from harm to patients. The state health commissioner must post a notice in hospitals and doctors' offices giving the website and

also a free telephone number for patients to call to get the listings.

The bill also requires the state to develop other quality assurance measures for the public, such as regular hospital report cards and heart surgery survival rates. "In the end, we will have the most extensive information among the states that consumers can use," said State Senator Kemp Hannon, the health committee's chairman.

Florida and Massachusetts are two states with aggressive reporting laws that provided models for the New York bill. Consumer groups and insurance companies supported the bill, with Empire Blue Cross and Blue Shield placing several full page newspaper advertisements in favour of it. □

The New York health department's website is www.health.state.ny.us/nysdoh/opmc/main.htm.