



**Charlotte Humphrey**  
King's College London



**Martin Gulliford**  
King's College London



**Aneez Esmail**  
Manchester



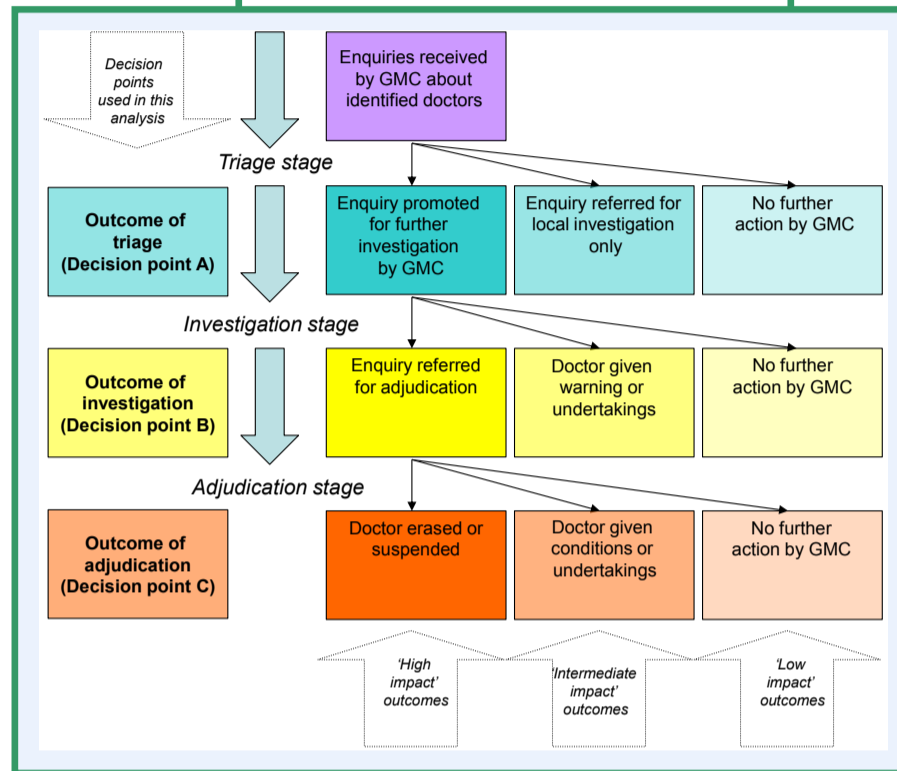
**Debbie Cohen**  
Cardiff

### Background

In the UK, as in many other countries, possible inequalities in how poor performance among doctors is identified and dealt with give rise to concern. In the UK, complaints about doctors are dealt with by the National Health Service and the General Medical Council (GMC).

Previous studies have suggested that doctors from ethnic minorities and/or doctors who trained outside the UK are over-represented in all stages of the GMC's Fitness to Practise process.

Recent improvements in the GMC's database mean that a more detailed investigation is now possible of factors that influence the handling and outcomes of complaints about doctors, including ethnicity and place of qualification.



**Figure**  
Flow chart illustrating progression through the GMC's Fitness to Practise Procedures

### What We Did

- We undertook a secondary analysis of anonymised data from 7426 separate enquiries/ complaints about individual doctors received by the GMC between 1 April 2006 and 31 March 2008.
- Our analysis included data on five doctor-related variables (gender, ethnicity (where known), place of qualification, time since primary medical qualification and practice specialty) and three enquiry-related variables (source and type of enquiry or complaint and content of allegation).
- We used multinomial logistic regression to analyse the relative influence of the various factors on decisions made at three stages in the Fitness to Practise process: initial triage of complaints, investigation and adjudication.

### Aims

The aim of this study was to improve understanding of factors associated with increased risk of 'higher impact' outcomes in the GMC Fitness to Practise process. 'Higher impact' outcomes include progression to the next stage of the process, and professional or legal sanctions, as summarised in the Figure.

Specific objectives were:

- to test the hypothesis that doctors qualified outside the UK and/or Black and Minority Ethnic (BME) doctors are more likely to receive 'higher impact' decisions at various stages in the Fitness to Practise process; and
- To evaluate the alternative hypothesis that 'higher impact' decisions are associated with other demographic or professional factors or characteristics of the complaints received that are independently associated with place of qualification or ethnic status.

Factors	Stage of Enquiry		
	Triage	Investigation	Adjudication
Enquiry source	✓	✓	✓
Enquiry type	✓	✓	✓
Content of allegations	n/a	✓	✓
Gender	✓	✓	✓
Ethnicity and country of qualification	✓	✓	—
Time since qualification	—	—	—
Specialty	—	—	—

**Table: Factors linked to outcomes at each stage**  
✓ Significant association (after adjustment for other variables) p<0.05

### Findings

Our analysis showed the following, after adjustment for all the factors listed above:

#### At the Triage Stage:

- Enquiries/ complaints involving doctors qualified outside the UK (regardless of ethnicity) had an increased risk of 'high impact' outcomes.
- Enquiries/ complaints involving doctors qualified in the UK showed no association between ethnicity and outcome.

#### At the Investigation Stage:

- Cases involving doctors qualified outside the UK (regardless of ethnicity) had an increased risk of 'high impact' outcomes.
- Cases involving doctors qualified in the UK showed no association between ethnicity and outcome.

#### At the Adjudication Stage:

- Neither place of qualification nor ethnicity were found to be associated with outcome.

Find out more...

For more information contact Charlotte Humphrey (charlotte.humphrey@kcl.ac.uk)

[www.publicservices.ac.uk](http://www.publicservices.ac.uk)

