



Royal College of
General Practitioners

Reforming the GMC Legislative Framework Consultation Team
Department of Health & Social Care
39 Victoria Street
London
SW1H 0EH

Sent by email to: regulationreform@dhsc.gov.uk

21 July 2026

Dear Consultation Team

RCGP response to the Department of Health and Social Care Consultation on Reforming the General Medical Council Legislative Framework

I am writing to highlight the Royal College of General Practitioners' (RCGP) previously submitted formal response to the consultation on Reforming the General Medical Council Legislative Framework and our key recommendations related to this reform (set out in Appendix A).

The College supports the overall aim of modernising the legislative framework governing the General Medical Council (GMC). These reforms have the potential to deliver a more responsive and proportionate regulatory system while continuing to protect patients and maintain public confidence.

However, the College wishes to highlight several constitutional issues that merit additional consideration before the legislation is finalised. Our original submission sets out our full response to the consultation questions as posed and we have addressed many of these recommendations in that original submission. However, as they do not all align neatly with the consultation questions, we would like to take the opportunity to emphasise and expand on these, as well as raise some important new points we were not able to include in our original submission. These recommendations focus on matters that the College considers particularly important to preserving public confidence in the medical profession and maintaining the integrity of postgraduate medical education, specialist standards and specialist certification.

Royal College of General Practitioners
30 Euston Square, London, NW1 2FB
Tel: 020 3188 7400 | info@rcgp.org.uk | rcgp.org.uk
Registered Charity Number 223106 | Patron: His Majesty King Charles III

Summary of RCGP recommendations (please find full recommendations in Appendix A):

- Preserve medicine as a distinct regulated profession through clear legal distinction and protected medical titles.
- Ensure that the unified medical register strengthens the equal status of General Practice.
- Preserve the complementary constitutional roles of the GMC and the Medical Royal Colleges by requiring the GMC to consult the relevant College, have due regard to its advice, and publish reasons where it departs from that advice.
- Protect postgraduate medical education and specialist standards from unintended dilution through delegated powers.
- Ensure regulation remains medically informed, fair, proportionate and transparent.

The College believes that these principles would strengthen the proposed legislative framework while supporting patient safety, professional standards and public confidence. We hope these points will be useful in considering next steps following the consultation and would be pleased to meet to discuss if helpful.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Vt3Brom', with a stylized, cursive script.

Professor Victoria Tzortziou Brown
President of Council

Appendix A: RCGP's Key Recommendations on Reforming the General Medical Council Legislative Framework

1. Medicine should remain a distinct regulated profession

The College believes that the legislation should continue to recognise medicine as a distinct profession with its own educational pathway, professional standards, regulatory framework and responsibilities.

The defining characteristics of the medical profession should remain completion of an approved programme of medical education leading to a recognised Primary Medical Qualification (PMQ), together with registration as a medical practitioner under the Medical Act. Regulation by the same statutory regulator should not diminish, blur or inadvertently undermine this distinction.

Doctors undertake a unique programme of undergraduate and postgraduate medical education and training, are licensed to practise medicine, and assume legal, professional and ethical responsibilities that are distinct from those of other regulated healthcare professions. The legislative framework should continue to reflect these differences clearly. The College therefore reiterates its established position that Physician Associates and Anaesthesia Associates should be regulated by a regulator separate from the General Medical Council. If Parliament decides that these professions should continue to be regulated by the GMC, the legislation must nevertheless preserve a clear legal, professional and operational distinction between doctors and non-doctor professions.

2. The legislation should protect the identity of the medical profession

Patients should be able to identify immediately whether they are receiving care from a medically qualified doctor or another regulated healthcare professional. This is fundamental to informed consent, transparency, patient safety and public confidence.

The College strongly supports the proposal to make Registered Medical Practitioner a protected title and welcomes the continued protection of the title General Practitioner. The College believes that the terms Medical Practitioner and Registered Medical Practitioner should be reserved exclusively for individuals who hold a recognised Primary Medical Qualification and are registered to practise medicine under the Medical Act. The title General Practitioner should continue to be reserved exclusively for doctors who hold a recognised Primary Medical Qualification, have successfully completed approved postgraduate training in General Practice, and are entered on the relevant part of the medical register.

The Government should also keep under review whether additional medical descriptors used in legislation and official communications require statutory protection to reduce the risk of public confusion.

Any future consideration of protected titles should be guided by the principles of patient safety, informed consent and the need to avoid public confusion.

The public register and all associated public-facing information should enable patients to readily distinguish between doctors and other regulated healthcare professions.

3. A unified medical register should strengthen the status of General Practice

The College supports the principle of replacing the current GP and Specialist Registers with a unified register for medical practitioners.

The College's support is founded on the expectation that the legislation will strengthen, rather than diminish, the recognition of General Practice as a medical speciality. General Practice is a medical speciality with its own body of knowledge, educational pathway and clinical discipline. Equal status does not imply identical practice to other specialities, but equal professional recognition.

The legislation should therefore ensure that:

- all doctors currently entered on the GP Register automatically retain specialist recognition;
- General Practice remains explicitly identifiable within the unified register;
- future legislative or regulatory changes cannot diminish the legal or professional standing of General Practice;
- the equal status of General Practice is reinforced through the new legislative framework.

The creation of a unified medical register should be used to strengthen the recognition of General Practice rather than simply simplify administrative arrangements.

4. Medical education and specialist certification must remain distinct

The legislation should explicitly preserve the distinct status of undergraduate medical education, postgraduate medical training and specialist certification.

The Certificate of Completion of Training (CCT) should remain a qualification awarded following completion of an approved programme of postgraduate medical education and should remain specific to the medical profession. It provides nationally consistent assurance that doctors entering independent specialist practice have met recognised

standards of competence and underpins specialist registration, giving patients, employers and trainees confidence in the standards expected of doctors.

The legislation should ensure that specialist certification and standards for entry to specialist practice cannot be diluted, confused with qualifications awarded to other regulated professions, or modified without appropriate professional oversight.

5. The constitutional role of the Medical Royal Colleges should be preserved

Medical Royal Colleges are the independent professional bodies responsible for setting and maintaining standards in postgraduate medical education and specialist practice within the United Kingdom.

Their authority derives from their independent professional expertise, their responsibility for setting standards across specialities, and their ability to bring together practising clinicians, educators and patients in the development of those standards. Their responsibilities include developing curricula, defining specialty capabilities and professional standards, overseeing assessment and certification, supporting continuing professional development, and advising on specialist practice.

The College believes the legislative framework should preserve the complementary constitutional roles of the GMC and the Medical Royal Colleges.

The GMC is the independent statutory regulator responsible for registration, licensing, professional regulation and fitness to practise.

The Medical Royal Colleges are the independent professional bodies responsible for the stewardship of postgraduate medical education, speciality standards, curricula, assessment, certification and continuing professional development, ensuring nationally consistent standards for entry into independent specialist practice.

Public confidence depends upon both functions remaining strong and clearly defined. The legislative framework should preserve the distinction between the GMC's role in setting and enforcing minimum regulatory standards for safe practice and the Medical Royal Colleges' role in developing, maintaining and advancing professional and speciality standards that support excellence in practice.

This framework would preserve the independence of the GMC while recognising that effective regulation depends on independent professional leadership in developing speciality standards.

In exercising statutory functions relating to postgraduate medical education, specialist standards, curricula, certification or specialist registration, the GMC should be required to consult the relevant Medical Royal College, have due regard to its advice, and publish reasons where it departs from that advice, recognising the Colleges' independent expertise in developing educational and professional standards.

Where delegated powers are exercised in relation to postgraduate medical education, specialist registration or professional standards, those powers should be exercised transparently following meaningful consultation with the relevant Medical Royal Colleges and other appropriate stakeholders.

6. Medical expertise should remain central to regulation

Effective regulation depends upon a thorough understanding of contemporary medical practice.

The legislation should require that registered medical practitioners are appropriately represented in the governance of the GMC, including on the Council and committees responsible for medical education, professional standards, specialist registration, and fitness to practise.

The College also believes that Fitness to Practise panels considering doctors should include registered medical practitioners with appropriate expertise to ensure that clinical context, professional standards and the realities of modern medical practice are properly understood.

Representation should include expertise from both General Practice and other specialities, reflecting the equal status and complementary roles of different specialisms within the medical profession.

7. Regulation should be fair, proportionate and support both patient safety and the medical workforce

The College supports a regulatory framework that protects patients while promoting fairness, proportionality and public confidence.

The legislation should place an explicit responsibility on the GMC to exercise its statutory functions in a manner that is fair, proportionate, transparent, timely and evidence-based. The College also believes that the regulatory framework should recognise the importance of minimising unnecessary harm arising from unnecessarily prolonged or disproportionate regulatory processes. Fair, timely and compassionate regulation contributes not only to the

wellbeing of doctors but also to workforce sustainability, organisational learning and ultimately safer patient care.

8. Equality, fairness and confidence in regulation

The College believes that the impact of the new legislative framework on equality, diversity and inclusion should be monitored carefully.

The GMC should continue to publish transparent analyses of regulatory outcomes across different groups and work with the Medical Royal Colleges and other stakeholders to identify and address differential outcomes where they exist.

Maintaining confidence in regulation requires that regulatory processes are demonstrably fair, evidence-based and consistently applied.

9. Public confidence should be a central objective of reform

The legislative framework should strengthen public confidence in medical regulation. Patients should be able to understand clearly:

- who is a registered medical practitioner;
- what education and training they have completed;
- how they are regulated;
- what professional standards they are expected to meet.

Clear professional identity, robust educational standards, transparent specialist recognition and proportionate regulation are all essential to maintaining confidence in the medical profession and in the regulatory system.

These principles are fundamental to maintaining confidence in both the medical profession and the system of medical regulation.

Conclusion

The College believes these reforms present a significant opportunity not simply to modernise legislation but to strengthen the foundations of medical regulation for the future.

The legislation should preserve medicine as a distinct profession, protect the integrity of medical education and specialist certification, recognise the constitutional role of the Medical Royal Colleges in the stewardship of postgraduate medical education and specialty standards, reinforce the equal status of General Practice, ensure that medical expertise remains central to regulation, maintain clear distinctions between doctors and other

regulated professions, and promote a system of regulation that protects patients through fairness, transparency and the highest professional standards.