

The PSG Checklist (a summary provided by Doctors Defence Service)

A. Preparation Before the Meeting

1. **Review Information:** Ensure all members have thoroughly reviewed the information provided in advance, including:
 - 1.1. Initial concern and subsequent information collected during preliminary enquiry, external information gathering, and/or investigation.
 - 1.2. Summary of findings from the preliminary enquiry and/or investigation.
 - 1.3. Risk assessment, including rationale for the risk score.
 - 1.4. Any written response or representation from the performer.
 - 1.5. Any external advice or guidance sought (e.g., from PPA or GMC Employer Liaison Adviser).
 - 1.6. Relevant documentation, including Terms of Reference (ToR) for investigations.
2. **Conflict of Interest Declaration:** Confirm that all members have declared any potential conflicts of interest or perceived bias.
3. **Training and Competence:** Verify that all members have completed required training and signed the information governance and GDPR declaration.

B. During the Meeting

1. **Conduct of Proceedings:**
 - 1.1. Ensure proceedings are conducted in a fair, open, and transparent manner.
 - 1.2. Confirm all members are clear on their roles and responsibilities.
 - 1.3. Ensure all members contribute to discussions and decision-making.
 - 1.4. Address any differences of opinion and ensure consensus is reached.
 - 1.5. Consider declarations of interest and take action to ensure the integrity of decision-making.
2. **Information Review:**
 - 2.1. Confirm that all information presented is factual, unambiguous, and unbiased.
 - 2.2. Ensure patient-identifiable details are redacted unless relevant to the clinical decision-making process.
 - 2.3. Consider the protected characteristics of the performer and give appropriate weight to cultural and contextual information.
3. **Risk Assessment:**
 - 3.1. Use the risk assessment tool to evaluate the severity of the concern and determine if immediate action is required.
 - 3.2. Assess whether the information indicates a risk to patient safety or public interest.
4. **Contextual Considerations:**
 - 4.1. Evaluate individual factors such as health, culture, relationships with peers, and support structures.
 - 4.2. Assess environmental or systemic issues that may have contributed to the concern.
 - 4.3. Consider the longevity and repetition of the issues presented.

5. **Decision-Making:**

- 5.1. Determine if sufficient information is available to make an informed decision.
- 5.2. Decide whether the matter is amenable to local action or requires Performers List regulatory action.
- 5.3. Consider whether Agreement Terms can be drafted consensually to address the concern.
- 5.4. Decide if external advice or assessment is required (e.g., occupational health, PPA, GMC ELA).
- 5.5. Evaluate whether immediate suspension or other regulatory action is necessary.

C. Post-Meeting Actions

1. **Documentation:**

- 1.1. Ensure a full and accurate record of the discussion and actions agreed is made.
- 1.2. Approve the record as accurate and store it in the CMS.
- 1.3. Ensure the decision letter complies with the Performers Lists Regulations and includes:
 - 1.3.1. The decision and reasons for it.
 - 1.3.2. Information relied on.
 - 1.3.3. Any actions required of the performer or NHS England.
 - 1.3.4. Signposting to external support and advice organisations.
 - 1.3.5. Contact details for further advice or information.

2. **Communication:**

- 2.1. Advise the performer of the PSG's decision within 5 working days of the meeting.
- 2.2. Ensure the decision letter is sent in PDF format, with options to confirm receipt of delivery and read notices.

3. **Follow-Up:**

- 3.1. Monitor the performer's compliance with any Agreement Terms or conditions imposed.
- 3.2. Schedule reviews of progress at agreed intervals.
- 3.3. Refer the matter to the PLDP if the performer does not comply with Agreement Terms or conditions.

D. Additional Considerations

1. **External Referrals:**

- 1.1. Refer to external agencies for advice or assessment if necessary (e.g., PPA, GMC ELA, occupational health).
- 1.2. Request NHS Resolution to issue a Healthcare Professional Alert Notice (HPAN) if appropriate.

2. **Support and Intervention:**

- 2.1. Identify any developmental, educational, or personal support required for the performer.
- 2.2. Consider funding support for intervention activities if the performer is unable to finance them.

3. Continuous Improvement:

- 3.1. Document lessons learned and share them with the Assurance Committee and relevant teams.
- 3.2. Participate in peer reviews and feedback processes to improve decision-making and case management.

E. Final Review

1. Ensure Compliance:

- 1.1. Verify that all actions comply with the Performers Lists Regulations and NHS England policies.
- 1.2. Confirm that all decisions are robust, proportionate, and stand up to scrutiny.

END

NB. The criteria may have changed since this document was produced.