

### Revalidation Recommendation Protocol within the Belfast Trust

### 1 March 2013

### **Background**

Revalidation is the process by which licensed doctors are required to demonstrate on a regular basis that they are up to date and fit to practise. Licensed doctors have to revalidate, usually every five years, by having regular appraisals with their employer that are based on core guidance for doctors "Good Medical Practice", and other related guidance defined by the GMC.

The purpose of revalidation is therefore to assure patients and the public, employers and other healthcare professionals that licensed doctors are up to date and are practising to the appropriate professional standards.

The Responsible Officer within the Trust is required to make a recommendation to the GMC regarding each medical consultant and specialty doctor for whom the Belfast Trust is the designated body. This recommendation will inform the revalidation decision which will be made by the GMC.

The Responsible Officer can make one of three recommendations:

- make a positive recommendation that the doctor is up to date, fit to practise and should be revalidated
- request a deferral because they need more information to make a recommendation about the doctor. This might happen if the doctor has taken a break from their practice (for example, maternity or sick leave).
- or notify us that the doctor has failed to engage with any of the local systems or processes (such as appraisal) that support revalidation.

The GMC implemented the system of revalidation on 3 December 2012.

### **Objectives**

The objectives of this protocol are to:

- establish a framework that delivers the obligations of the Responsible Officer.
- establish definition of respective roles of the Trust Board, the Responsible Officer, and of Associate Medical Directors, and others who will contribute to recommendation decision-making.

### **Current Position**

Revalidation scheduling year has been completed by the Trust for all medical staff based on the Regional Implementation Plan.

Year 0 doctors (revalidation by March 2013) are identified, and Year 1 doctors (revalidation by March 2014) have been allocated to specific quarters by the Trust.

All Doctors have been written to by the Responsible Officer, advising of their general revalidation timeframe.

GMC has subsequently determined actual revalidation dates for all doctors, and in line with GMC requirements, the Trust has verified and notified of changes in relation to doctors and dates falling between March 2013 and September 2013. These have been accepted by the GMC.

In December 2012 and January 2013 the GMC wrote to doctors advising of their actual revalidation date in the first cycle.

Full resources are available on the Trust Hub under Education & Development > Medical Revalidation and Appraisal.

A new database has been developed and held centrally within Medical Directorate with updates provided by Service Directorates. This database is reconciled on a regular basis to GMC Connect and HRMS. Core Information includes:

- Doctor and Service details
- Year and status of revalidation of the individual doctor
- Complete appraisal record, including appraiser / appraise linkages
- GMC Supporting Information status eg in relation to Patient and Colleague Feedback
- Communication tool, including emails.

### **Trust Board Role**

The Trust Board will ensure that overall governance and assurance arrangements are in place. This assurance will be provided to Trust Board by the Responsible Officer.

The revalidation process is incorporated within the Trust's Assurance Framework.

## Responsible Officer & Medical Director's Office Role

Ensure the organisation is ready in terms of appraisal and governance systems, number of trained appraisers, and has in place a continuous revalidation process.

Ensure the revalidation process is applied consistently across the organisation.

Manage prescribed connections within the Trust and with the GMC, and ensures Directorates manage arrangements for appraisal and other information to facilitate the revalidation process.

Ensure robust management systems are in place, including performance management and delegated roles.

Ensure there are robust links with other organisations.

Makes informed recommendations to the GMC.

Provides assurance to DHSSPS and Trust Board.

### **Associate Medical Director & Directorate Role**

Act within delegated authority to deliver the obligations of the Responsible Officer.

Provides assurance to the Responsible Officer concerning the operation of the revalidation process.

Ensure the Directorate is ready in terms of appraisal and governance systems, and number of trained appraisers.

Administering scheduling arrangements within the Directorate.

Ensure robust management systems are in place, including performance management and delegated roles.

Has in place an ongoing system for quality assurance, evaluation and audit relating to both the appraisal process and appraisal documentation.

Ensure there are robust links with other organisations.

Provides advice based on an assessment of appraisal, other relevant information regarding individual doctors, and input from key individuals within the Service Directorate, to enable the Responsible Officer to make informed recommendations to the GMC.

# Service Directorate Model for advising the Responsible Officer based on available documentation and evidence within the Directorate

Each Associate Medical Director will have in place a Revalidation Recommendation Advisory Group to review available documentation and inform the Associate Medical Director's advice to the Responsible Officer. The constitution of the Advisory Group will include but is not limited to:

- Associate Medical Director
- Service Director and / or relevant Co-Director
- Assistant Medical Director if deemed necessary by the Associate Medical Director
- Clinical Director, Clinical Lead and / or Appraiser may need to attend if deemed necessary by the Associate Medical Director.

The final authority at Directorate level resides with the Associate Medical Director.

### Available documentation to include:

Copies of current Appraisal Forms.

Checklist that demonstrates that the appraisal portfolio meets the GMC Supporting Information requirements and contains evidence of and reflection on:

- Continuing Professional Development
- Quality Improvement Activity
- Significant Events
- Feedback from Colleagues
- Feedback from Patients
- Review of complaints and compliments

The Advisory Group may wish to cross reference the available appraisal / revalidation information with other sources of information that may include but is not limited to:

- Evidence from the Doctor and Dentist Review Committee
- Knowledge of GMC referral / hearing
- Information from Royal Colleges or other professional bodies
- Information from other agencies

The Advisory Group are at liberty to request additional information from the appraise / appraiser in relation to relevant deliberations based on the evidence listed above.

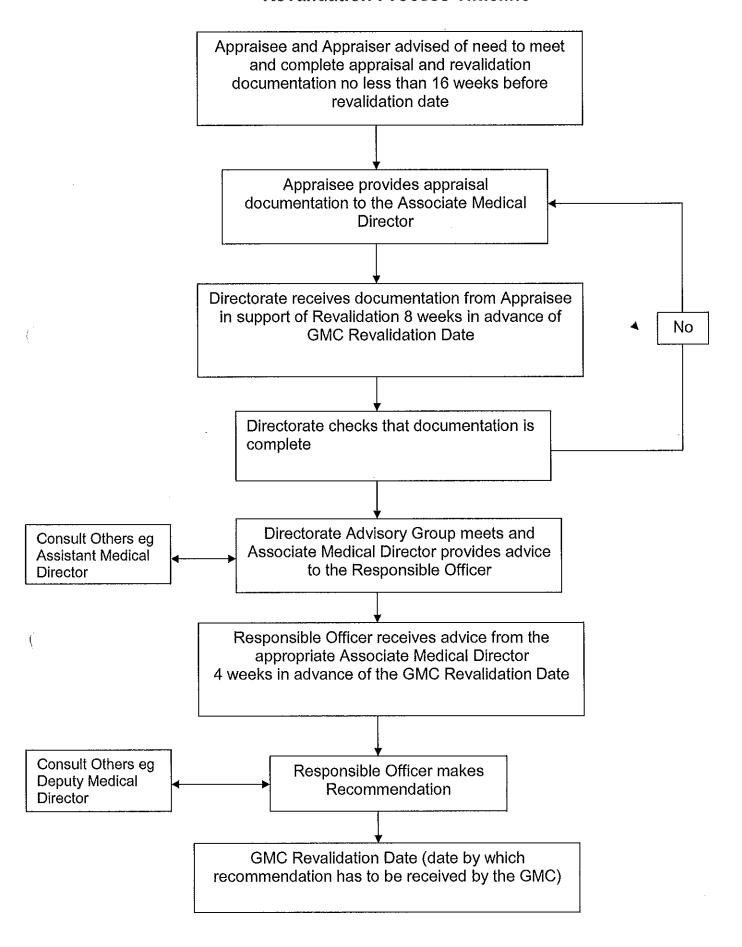
A confidential record of the Advisory Group's deliberations will be kept by the Associate Medical Director.

# Key Stages in Appraisal and Revalidation

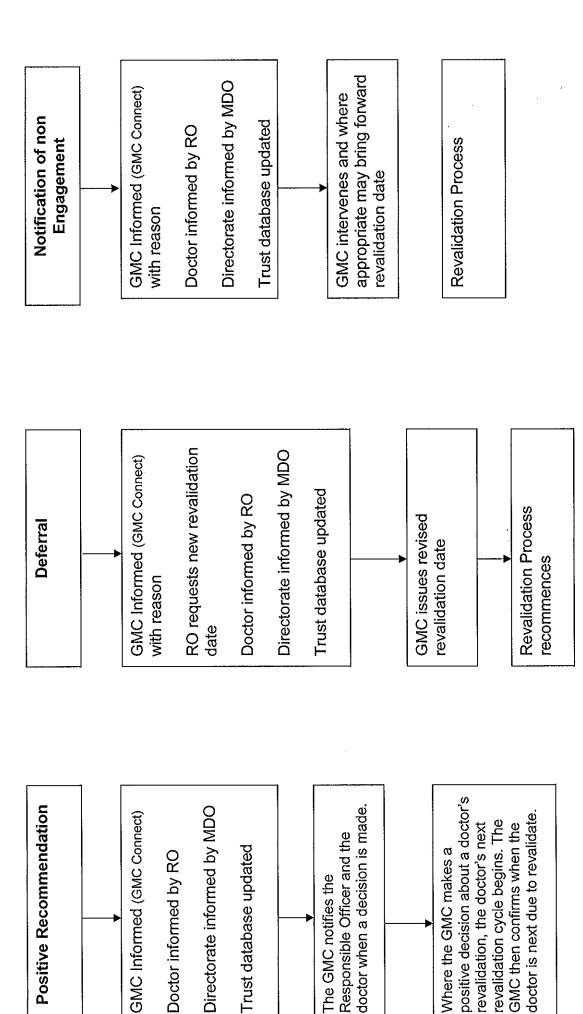
Stage	Who
Doctor informed of the need to be appraised and revalidation year	MDO and Directorate Admin
Actual revalidation date set by the GMC	GMC
Appraisal Date Set - Colleague and Patient Feedback initiated if appropriate	Doctor linking with the Appraiser and the Directorate Admin team
Appraisal Meeting     Forms, checklist and portfolio comply with GMC and College recommendations	Appraisee and Appraiser
Documentation to Directorate Office	Appraisee and the Directorate Admin team
Directorate Advisory Group meets to review available information and assist the Associate Medical Director to advise the Responsible Officer	Advisory Group
The Associate Medical Director advises the Responsible Officer, with reference to the GMC's Guide for Responsible Officers.	Associate Medical Director
Responsible Officer makes recommendations	Responsible Officer

The general appraisal process and timelines are defined in separate guidance.

### **Revalidation Process Timeline**



# Revalidation Recommendations



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Positive Recommendation and Request for Deferral can only be made in the 4 months up to and including the scheduled date

Notification of non-engagement can be made at any time in the five year revalidation cycle.

Full details of the GMC process are included in Making Revalidation Recommendations: The GMC Responsible Officer Protocol

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# **Record of Revalidation Review**

Appraisal	Record of discussion and checks
In attendance	
Date of Review	
Current Appraiser	
Directorate	
Specialty	
Revalidation Date	
GMC Number	
Doctor's Name	

Appraisal	Record of discussion and checks
Engaged in Appraisal Process	
Year of most recent appraisal	
Appraisal has Good Medical Practice as its focus, and has undertaken at least 1 such appraisal (signed off by both parties)	
Appraisal meets standards of GMC Supporting Information requirements for Revalidation & Appraisal: 1. Continuing professional development 2. Quality improvement activity 3. Significant events 4. Feedback from colleagues 5. Feedback from patients 6. Review of complaints and compliments	
Appraisal has evidence of reflection	
Appraisal has covered "whole practice" including private practice	
Personal Development Plan in place	
Health Declaration signed	
Probity Declaration signed	

Name: GMC Number:					
Other Issues	Record of	discussion			
Evidence from the Doctor and Dentist Review Committee					
Knowledge of GMC referral / hearing / compliance with conditions or undertakings					
Knowledge of other local disciplinary or remediation process	<u> </u>				
Information from Royal Colleges or othe professional bodies	er				
Information from other agencies					
Additional Comments					
Additional Information Requested  Associate Medical Director Advice to Responsible Officer					
Associate Medical Director signature	<b>)</b>				
Signed Name (Print)		GMC Number	Date of meeting		
Responsible Officer Recommendation					
Signed Name	(Print)	Date of	<sup>f</sup> review		
Any additional correspondence with the doctor or in relation to the process should be copied and stored with this form. Record below that records complete (enter initials).					
	orded on GMC Connect	Directorate informed	Doctor informed		